Management and Reporting of Performance Concerns for Student Nurses on Placement at The Royal Children's Hospital

3rd Edition

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This document was based on recommendations from a KPMG audit: "The Royal Children's Hospital, Internal audit report of Undergraduate Nurse Placement Program" September, 2009 and updated to reflect contemporary practice.

3rd Edition

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Acknowledgements:

1. Priscilla Stephenson
2. Laura Brooks
3. Stacey Richards

For further information contact:

Fiona Newall

Director, Nursing Education & Research

Nursing Education & Research

The Royal Children's Hospital

T: (03) 9345 5762 | E: Fiona.newall@rch.org.au

Or

Helen Codman

Deputy Director, Nursing Education

Nursing Education & Research

The Royal Children's Hospital

T: (03) 9345 6843 | E: Helen.codman@rch.org.au

Management and reporting of performance concerns for student nurses on clinical placement at the RCH

Overview

This procedure provides a framework for staff members involved in the management of performance concerns with regards nursing students completing placement at the RCH.

The procedure deals with performance concerns at three levels. The aim of each level is to prevent an escalation of the problem, but assists the staff member in understanding what to do next if their concerns with the student practice persist. . These levels are as follows:

1.1.   Early Detection

1.2.   Ongoing or escalation of Performance Concerns

1.3.   Significant Performance Concerns

The maintenance of documentation and provision of appropriate support to required by the student exhibiting performance concerns are outlined within this document.

Definition of Terms

Student nurse placement - The course component of the Bachelor of Nursing or Masters in Nursing Science degree. This is taken outside the University within a health care facility where clinical education is undertaken through direct supervision by a Preceptor or Clinical Nurse Specialist.

Performance concerns - unsatisfactory performance, demonstrated by the student nurse. This may be in the context of skills, abilities, application of knowledge, inappropriate behaviour, poor attitude and/or demonstration of values not in alignment with RCH expectations and code of conduct whilst on clinical placement.

Student Nurse - An individual who is currently undertaking a Bachelor of Nursing or Master of Nursing Science degree at a University and is taking part in a clinical placement at RCH as part of that course. Also called entry to professional practice student.

Preceptor - A Registered Nurse who is formally assigned to provide transitional support and supervision for an agreed upon period of time to a nursing student through education, role modelling and socialisation. Enrolled Nurses (EN) are not able to supervise student nurses as the EN scope requires them to work under the supervision of a Registered Nurse.

Clinical Nurse Specialist - In Victoria, the Clinical Nurse Specialist (CNS) is defined in the EBA as a nurse who "is responsible for clinical nursing duties", therefore is recognised as someone providing direct clinical care. The CNS is a clinical expert in an area of nursing specialisation and accepts responsibility for professional activities that support service delivery and the professional development of self and others

Education Team - Clinical Nurse Educators (CNE) and Clinical Support Nurses (CSN)

Clinical Challenge – A process commenced for student nurses who are at risk of failing clinical placement. The process provides clearly defined objectives matched

with appropriate feedback in a constructive and supportive manner. The challenge is presented to the student with an allocated timeframe for achievement as dictated by the University. This ensures accurate and transparent evaluation of the students' performance in line with the University and with RCH Cod of Conduct and expectations for clinical placement. Clinical challenges are implemented in conjunction with the University and are an important step prior. The outcome of the clinical challenge will determine if the student is performing to the expected standard.

Procedure Details

1. Management of performance concerns

1.1. Early Detection

It is important to identify at an early stage, student nurses who demonstrate unsatisfactory behaviour or skills that may indicate future performance concerns. The purpose of this is to identify additional learning needs of the student, provide timely feedback, set appropriate and achievable learning objectives, support and guidance to prevent further escalation of issues.

Examples that may indicate future concern of a student's performance include:

- Turning up late for work

- Distracted, un-motivated or disinterested

- Inability to initiate care within scope of practice

- Fails to complete clinical learning objectives or has difficulty formulating clinical learning objectives.

Clinical Support Process

Preceptors

- Firstly, highlight student nurse of concern to Clinical Nurse Specialist, and Clinical Nurse Educator, Entry to Practice Program and explain the identified performance concerns. .

- Document any missed shifts as per University requirements on University documentation if necessary. Notify Clinical Nurse Educator, Entry to Practice Program.

- Discuss concerns directly with the student or work with The Clinical Nurse Educator, Entry to Practice Program to collaboratively discuss the concerns raised. Feedback should be timely, objective and inclusive of clear clinical/professional examples. Upon conclusion of the discussion regarding concerns a plan should be agreed upon by all parties which outlines how improvements to practice can be achieved.

- Daily end of shift feedback and debriefing between preceptors, student, +/- CNS/CSN/CNE should be made a priority to ensure transparency with communication at all stages. .

- Document progress and feedback on the 'record of student progress' form.

- CNS/CSN/CNE to increase support of the Preceptor and student nurse as appropriate

- Ensure documentation regarding progress and feedback on the 'Record of Student Progress' form.

- Notify Clinical Nurse Educator, Entry to Practice Program of need to monitor the situation

- Support Preceptor to discuss concerns directly with the student.

  - Clinical Nurse Educator, Entry to Practice Program Meet with CNS, CSN/CNE and/or preceptor to discuss concerns and ensure strategies to improve have been communicated with student.

  - Increase support of student and ensure they have a clear understanding of need to improve performance. Explore factors that may be influencing performance (i.e. personal concerns, illness etc.) and encourage student to seek additional support as necessary and appropriate.

  - Commence documentation on 'record of student progress' if not already done so by CNS, CSN/CNE. .

  - Consider the need to discuss concerns with University.

1.2. Ongoing or Escalation of Performance Concerns

In the instance where the above issues persist and/or escalate, increased intervention will be necessary. Examples of the need for further intervention may include:

- Missing shifts without adequate explanation

- Problems with clinical practice i.e. not meeting learning objectives or passing clinical assessments.

- Student at risk of failing placement as not meeting University requirements set out on Clinical Appraisal Tool.

Clinical Support Process

Preceptor

- Report lack of improvement to the CNS, CSN/CNE. Participate in meetings with CNS, CSN/CNE and Clinical Nurse Educator, Entry to Practice Program as appropriate.

- In conjunction with CNS, CSN/CNE Continue to provide daily feedback to the student nurse regarding performance, progress and strategies for improvement.

- Continue to document progress and feedback on the 'record of student progress' form.

- CNS, CSN/CNE Continue to work closely to support the Preceptor;

- Set specific goals and boundaries of expectations with this individual, a written plan of these may be appropriate.

- In collaboration with the Clinical Nurse Educator, Entry to Practice Program provide verbal notice of the need to improve in the identified areas of underperformance in order to successfully meet the expected level of performance for practice placement. Ensure the verbal notice is adequately documented on the students University clinical assessment tool or university paperwork as appropriate.

- Inform the NUM of ongoing concerns and action taken.

- NUM to update ANUM group in a confidential manner

- Continue with 'record of student progress' documentation to reflect strategies being implemented.

- Clinical Nurse Educator, Entry to Practice Program Contact appropriate University nominee to highlight student issues and consult on ways to resolve performance concerns. It is likely a 'clinical challenge' will need to be commenced.

- Update documentation 'record of student progress' regarding University communication.

- Meet with both the student nurse and preceptor +/- the CNS, CSN/CNE to discuss ongoing concerns, provide support and discuss strategies for improved practice.

- Provide support and assistance if other life stressors are influencing performance (further information below).

- Ensure consistency with Preceptorship

- Consider the need to spend time working clinically with the student nurse i.e. preparing medications, planning the shift, practicing handover.

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- Inform Director of Nursing Education & Research and Deputy Director, Nursing education of safety concerns raised. .

1.3. Significant Performance Concerns

Examples of issues that indicate a student is not improving in their clinical placement and are in danger of not successfully meeting the requirements of placement include,

- Unsatisfactory clinical performance despite feedback and strategies to improve

- Lack of time management

- Demonstrates unprofessional communication and conduct

- Has not met learning objectives

- Demonstrates unsafe behaviour

- Student at not meeting University requirements set out on Clinical Appraisal Tool and/or not meeting requirements of 'clinical challenge'.

Clinical Support Process

Key clinical support roles:

- Allocated Preceptors
- Clinical Nurse Specialists
- Clinical Nurse Educator, Entry to Practice Program

Additional guidance may be required from the appointed ward CSN's/CNE's.

CNE/CSN
- CNE/CSN to take over responsibility of undergraduate nurse in consultation with Clinical Nurse Educator, Entry to Practice Program. .
- Collaborate with Clinical Nurse Educator, Entry to Practice Program to implement a strategy for working with the undergraduate nurse.
- Work with the student nurse for improvement in identified areas within defined timeframe.
- Ensure all verbal feedback is documented in the students University clinical assessment tool and 'record of student progress' form.
- Update NUM on status of performance concern with undergraduate nurse and agreed action moving forward.
- NUM to update ANUM group in a confidential manner
- Provide feedback to Preceptor on proposed future action for professional development purposes.

Clinical Nurse Educator, Entry to Practice Program
- The Clinical Nurse Educator, Entry to Practice Program to work closely with appropriate University nominee on action to be taken for resolution of performance concerns in consultation with Director of Nursing Education & Research and the Deputy Director, Nursing Education.
- Provide a further verbal notice of the need to improve in the identified areas of underperformance in order to be deemed competent and the potential implication of failing their placement with one further warning. Document this on either the students Clinical Appraisal Tool or 'clinical challenge' paperwork.
- If there is no improvement of performance issues as identified during the agreed timeframe, the undergraduate nurse will be deemed to have failed their clinical placement.
- Ensure appropriate emotional support is provided to the student nurse throughout this process.
- If the undergraduate nurse is deemed to be unsafe and incompetent they will have their practice placement terminated and be asked to leave the RCH. Ensure the student nurses documents are finalised, lanyard/access cards collected and windows/EMR access cancelled.

- Ensure all decisions are made in collaboration with the University.
- Implement a formal clinical review process in consultation with Nursing Education for ongoing learning and case study purposes.
- Ensure ward (student, Preceptor, CNS, CSN CNS, NUM and ANUM) is closely informed of progress and agreed actions.

2. Dismissal from practice placement

Dismissal from practice placement can be for a variety of reasons. Some examples may be:

- Student nurse breeches their scope of practice
- Student nurse failed to perform to the expected standard of clinical learning contract

2.1 Clinical support process

Key Clinical roles:
- Allocated preceptor
- Clinical Nurse Specialist
- Clinical Nurse Educator, Entry to Practice Program

CNE/CSN

- Clinical Nurse Educator, Entry to Practice Program to inform University about the outcome of clinical learning contract and the need to cease practice placement
- Arrangement for student to contact the university upon leaving RCH immediately
- Clinical Nurse Educator, Entry to Practice Program to meet with student nurse, allocated preceptor and CNS/CSN
- Clinical Nurse Educator, Entry to Practice Program to provide feedback and plan moving forward to student nurse
- CNE to ensure student nurse has contact details for the University in their phone
- CNE to retrieve the student access card and RCH lanyard from the student nurse
- CNE to walk student to retrieve belongings and to main exit
- CNE to phone University and inform University that the student has left RCH building and therefore all responsibility is with the University for the student and their actions
- CNE to email all paperwork and notes from discussion to University for their records
- CNE to inform Director, Nursing Education & Research, Deputy Director, Nursing Education, NUM and local education team.
- Privacy and confidentiality to be maintained for the student at all times

3. Record Keeping

To ensure there is effective communication between all relevant parties, formal documentation for the purpose of capturing any performance concerns of an undergraduate nurse whilst on clinical placement will be maintained utilising a 'record of student progress' form.

The aim of this documentation is to allow for improved communication between the Preceptor, CNS and Clinical Nurse Educator, Entry to Practice Program. It is to be only used for the purpose of guiding appropriate student learning and development for a student who is having difficulty in their clinical placement. In the event a student is not successfully meeting the requirements of their placement, this information can also be shared with the University as a record of actions taken to attempt resolution of problems. The intent is not to keep a record on every student, only those who are having difficulties, as outlined in section 1.

Documentation regarding a student nurse's performance so should commence as soon as performance concerns are highlighted. This can be done by either a preceptor, CNS or by the Clinical Nurse Educator, Entry to Practice Program. . This form needs to be used in conjunction with existing University clinical assessments and paperwork.

The form is to be used for the purposes stated above only. It is to be kept for the year the placement took place and then discarded.

4. Student Nurse Support

Management of performance concerns can be a stressful experience for the student nurse and are often precipitated by other life stressors such as illness, family concerns etc. It is therefore imperative that whilst working through the clinical support process students are provide adequate emotional support and made aware of other appropriate support services.

Concerns regarding the student nurses health and/or wellbeing should be communicated to the Clinical Nurse Educator, Entry to Practice Program who will escalate concerns with the Director of Nursing Education & Research, Deputy Director, Entry to Practice Program and the University as needed.

Regular debriefing is an important aspect of student support. A student nurse who is requiring increased clinical support may benefit from one – one debriefing with the Clinical Nurse Educator, Entry to Practice Program. This can be a time to explore other life stressors which may be affecting clinical performance, provide information regarding supports available and if needed complete a safety check with regards to the student's wellbeing.

Additional supports to make students aware of include:

- Speaking with university lecturers
- Access to university counselling services
- Access to Nursing and Midwifery Health Program
  - 9415 7551
  - www.nmhp.org.au
- Making an appointment with a GP to discuss health concerns
- Seeking support from family and friends