Clinical placement planning in 2014
Framework

JUNE 2014
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Introduction

Each year, Victorian health services accommodate thousands of healthcare students who are undertaking clinical placements. This clinical education provides students with an important opportunity to gain practical experience and consolidate theoretical, classroom-based learning. It is also an essential component of many courses and a requirement for registration in many health professions. Consequently, the demand for clinical placements is high and coordinating clinical placements places a significant administrative burden on both the clinical placement providers and the education providers involved.

Following extensive stakeholder consultation, and in response to requests for assistance to address these challenges, the Department of Health (the department) established 11 Clinical Placement Networks (CPNs) across Victoria in 2010, along with a state wide leadership body, the Victorian Clinical Placements Council (VCPC).

In June 2012, the transition and expansion of the VCPC to the Victorian Clinical Training Council (VCTC) occurred, to support greater coordination across the continuum of professional-entry, postgraduate and specialist training. This change is intended to support an integrated approach to planning and delivering clinical training initiatives into the future.

In January 2014, following consultation with stakeholders, the CPNs were reconfigured to form nine Clinical Training Networks (CTNs), in recognition of the expanded remit of the VCTC.

In early 2014, the Victorian Government established the People in Health initiative to focus on supporting and strengthening Victoria’s health and mental health workforce in order to meet the challenge of an ageing and growing population. The VCTC will provide external stakeholder leadership for the clinical education and training initiatives under People in Health with CTNs providing local-level leadership for the implementation of these initiatives. For more information on People in Health visit [http://www.health.vic.gov.au/peopleinhealth/](http://www.health.vic.gov.au/peopleinhealth/).

A key aim of the current network arrangements is to facilitate improved communication and collaboration between clinical education stakeholders, and support the development of better coordinated approaches to clinical placement planning and allocation. Both the CTN committees and the VCTC are led by stakeholders from a range of education and clinical placement provider sectors, including higher education and Vocational Education and Training (VET) providers, public and private health services, aged care providers, mental health services, including community-managed mental health services, community health services, general practice, private providers and other clinical placement settings. Each CTN has a Coordinator who is responsible for stakeholder engagement and supporting the work of the CTN.

Developing the Clinical placement planning framework

The Clinical placement planning framework (‘the framework’) was developed in consultation with stakeholders, and trialled in 2011. The framework and clinical placement planning activities have been evaluated annually since the trial in 2011, and the results from each evaluation have been made publicly available and used to inform clinical placement planning activities in the following year.


Stakeholder input will continue to be essential to refining a system that meets the needs of clinical placement stakeholders, while also providing a strong foundation from which to continue the initial work addressing the issues that have limited effective planning and capacity development.

Clinical placement planning is consistent with the following aspects ofVictoria’s strategic plan for clinical placements 2012-2015: Well placed, Well prepared:
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- recognition of the need to ensure the efficiency and transparency of the clinical placement system ("Drivers for change", p.5);
- clinical education and training resources should be valued, distributed fairly and applied efficiently ("Principles", p.16);
- clinical placement systems should be integrated across and within disciplines ("Principles", p.16);
- the best outcomes will be achieved if stakeholders collaborate to identify and implement solutions that meet local needs ("Principles", p.16);
- clinical placement systems should be transparent and accountable ("Principles", p.16)

Progressing the Clinical placement planning framework

At its September 2013 meeting the Victorian Clinical Training Council (VCTC) endorsed a proposal to consult with stakeholders from allied health, nursing, midwifery, paramedicine and medicine to inform the scope of 2014 planning activities. This consultation will occur via a Nursing and Midwifery Senior Reference Group (NMSRG), a Medicine Senior Reference Group (MSRG) and an Allied Health Senior Reference Group (AHSRG) on clinical placement planning.

These senior reference groups will be convened as sub-committees or working groups of the VCTC’s discipline-based education planning groups (EPGs). Membership of each group will comprise senior representatives from the relevant EPG and additional members as required. The role of the reference groups is to provide advice and sectoral leadership on the initiative.
Section 1: Key principles for Clinical placement planning in 2014

The framework is underpinned by six key principles, from which guidelines, process and standard operating procedures have been derived. These principles have been validated by stakeholders during the consultation and evaluation processes since 2011. The framework is supported by tools (including viCPlace) for use by participants in Clinical placement planning in 2014 – further information is available in Section 5 of the framework.

1. **Broad participation and inclusion**

   All clinical education stakeholders, who provide courses or placements for professional entry allied health, medicine, midwifery, nursing and paramedicine students in Victoria have an opportunity to participate in Clinical placement planning in 2014, subject to discipline specific scope and focus. This includes all organisations that are eligible for CTN membership: higher education and VET providers, interstate educational institutions that place students within Victoria, public and private health services, aged care providers, mental health services, including community-managed mental health services, community and primary health services, general practice, private providers and other clinical placement settings.

2. **Transparency and openness**

   To support effective communication, education providers and clinical placement providers will be asked to provide accurate information, about placement demand, course clinical placement requirements, availability, preferences and pre-existing arrangements, including firm commitments to place specific numbers of students. Participants will use viCPlace to share information and arrange placements and will be asked to upload information (including clinical placement terms and conditions) to ensure accurate reports are able to be generated. Participants will also be asked to openly share information about their respective organisations, their available placements and requirements, clinical placement terms and conditions and course clinical placement requirements at face-to-face meetings.

3. **Consistent approach**

   To progress the development of a single system for clinical placement planning, and for the benefit of organisations that are members of multiple CTNs, the framework will be replicable in all CTNs across the state.

4. **Collaboration and collegiality**

   The participants in Clinical placement planning in 2014 will work collaboratively to achieve positive outcomes for all participants, notwithstanding the role of participants to represent the needs of their respective organisations.

5. **Facilitation not allocation**

   Clinical placement coordinators or their equivalents from both education providers and clinical placement providers will retain control and responsibility over placement planning, placement requests, offers and confirmations for their organisations. Clinical placement planning in 2014 will be facilitated by CTN staff and the department, however, these parties will not bear any responsibility for allocating placements, advocating on behalf of organisations or representing particular organisations.
6. Respect for existing relationships

It is recognised that a number of organisations have well-established and beneficial relationships with partners across the health and education sectors which include firm commitments to place specific numbers of students. Precommitments are placement bookings which exist prior to the commencement of formal planning activities. The details should be known by both parties (and discussed in Phase 1: Meetings), requested by education providers, offered by placement providers and confirmed by education providers using viCPlace at the specified time (within Phase 2: Preparing to using viCPlace), after the clinical placement planning in 2014 meetings and prior to the formal requesting process (Phase 3: Planning in viCPlace) by education providers.

Relationships, preferences and precommitments can be maintained and supported within the framework.
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Section 2: Guidelines for Clinical placement planning in 2014

Based on the key principles outlined in Section 1 of the framework, the following guidelines have been developed.

1. **Broad participation and inclusion**

   In 2014, allied health, medicine, midwifery, nursing and paramedicine clinical placement stakeholders in Victoria are eligible to participate in facilitated clinical placement planning, subject to the following:

   - Placements arranged according to the framework are for students enrolled in professional-entry healthcare courses. A professional-entry course is any program that enables graduates to apply directly for initial registration (where applicable) and initial employment within the profession. See examples in Table 1.
   - Participants will represent either education providers seeking clinical placements, or clinical placement providers with placements available in the coming academic year.
   - Participants will have sufficient authority to request, allocate and agree to placements on behalf of their organisations. Clinical placement coordinators (or equivalents) should attend the clinical placement planning meetings.

The scope of clinical placement planning activities will be expanded in time, subject to review and consultation.

<table>
<thead>
<tr>
<th>Number</th>
<th>QUALIFICATION (PRIOR TO STUDY)</th>
<th>REGISTRATION STATUS (PRIOR TO STUDY)</th>
<th>QUALIFICATION (ON COMPLETION OF CURRENT STUDY)</th>
<th>REGISTRATION (where applicable)/PROFESSIONAL ENTRY STATUS (POST STUDY)</th>
<th>ELIGIBILITY FOR CLINICAL PLACEMENT PLANNING IN 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>No healthcare qualification</td>
<td>No registration</td>
<td>Bachelor of Physiotherapy</td>
<td>Physiotherapist</td>
<td>Eligible</td>
</tr>
<tr>
<td>2</td>
<td>No healthcare qualification</td>
<td>No registration</td>
<td>Bachelor of Speech Pathology</td>
<td>Speech Pathologist</td>
<td>Eligible</td>
</tr>
<tr>
<td>3</td>
<td>Bachelor of Exercise &amp; Sports Science</td>
<td>No registration</td>
<td>Masters of Clinical Exercise Physiology</td>
<td>Exercise physiologist</td>
<td>Eligible (initial entry to discipline)</td>
</tr>
<tr>
<td>4</td>
<td>Bachelor of Psychology (Hons)</td>
<td>No registration</td>
<td>Doctor of Psychology (Clinical psychology)</td>
<td>Psychologist</td>
<td>Eligible (initial registration)</td>
</tr>
<tr>
<td>5</td>
<td>No healthcare qualification</td>
<td>No registration</td>
<td>Bachelor of Psychological Science (Years 1-3)</td>
<td>Not psychologist at end of course</td>
<td>Not eligible (do not enter profession)</td>
</tr>
<tr>
<td>6</td>
<td>No healthcare qualification</td>
<td>No registration</td>
<td>Bachelor of Applied Science (Medical Radiation Years 1-3)</td>
<td>Provisional registration as a Medical Radiation Practitioner</td>
<td>Eligible (initial provisional registration and entry to</td>
</tr>
</tbody>
</table>
Clinical placement planning in 2014 framework

<table>
<thead>
<tr>
<th>7 (See example 6 above)</th>
<th>Bachelor of Applied Science (Medical Radiation Years 1-3)</th>
<th>Provisional registration (This is required to complete internship)</th>
<th>Internship must be completed to be eligible for full registration</th>
<th>Full registration Medical Radiation Practitioner</th>
<th>Not eligible (This is an internship; already provisionally registered)</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>No healthcare qualification</td>
<td>No registration</td>
<td>Bachelor of Paramedicine</td>
<td>Paramedic</td>
<td>Eligible</td>
</tr>
<tr>
<td>9</td>
<td>Bachelor of Nursing</td>
<td>Registered Nurse</td>
<td>Bachelor of Paramedicine</td>
<td>Paramedic</td>
<td>Eligible (initial entry to new discipline)</td>
</tr>
<tr>
<td>10</td>
<td>No healthcare qualification</td>
<td>No registration</td>
<td>Diploma of Nursing</td>
<td>Enrolled Nurse</td>
<td>Eligible</td>
</tr>
<tr>
<td>11</td>
<td>No healthcare qualification</td>
<td>No registration</td>
<td>Bachelor of Nursing</td>
<td>Registered Nurse</td>
<td>Eligible</td>
</tr>
<tr>
<td>12</td>
<td>No healthcare qualification</td>
<td>No registration</td>
<td>Master of Nursing Science</td>
<td>Registered Nurse</td>
<td>Eligible</td>
</tr>
<tr>
<td>13</td>
<td>Certificate IV</td>
<td>Enrolled Nurse</td>
<td>Diploma of Nursing</td>
<td>Enrolled Nurse</td>
<td>Not eligible (up skilling only)</td>
</tr>
<tr>
<td>14</td>
<td>Certificate IV or Diploma of Nursing</td>
<td>Enrolled Nurse</td>
<td>Bachelor of Nursing</td>
<td>Registered Nurse</td>
<td>Eligible (changed registration status)</td>
</tr>
<tr>
<td>15</td>
<td>Overseas Registered Nurse</td>
<td>Not registered in Australia</td>
<td>IRON</td>
<td>Registered Nurse</td>
<td>Eligible</td>
</tr>
<tr>
<td>16</td>
<td>No healthcare qualification</td>
<td>No registration</td>
<td>Bachelor of Midwifery</td>
<td>Registered midwife</td>
<td>Eligible</td>
</tr>
<tr>
<td>17</td>
<td>Bachelor of Nursing</td>
<td>Registered Nurse</td>
<td>Graduate Diploma of Midwifery</td>
<td>Registered Midwife</td>
<td>Eligible (initial registration in new discipline)</td>
</tr>
</tbody>
</table>

2. Transparency and openness

- Participants will provide relevant information pertaining to their clinical placement requirements when they attend the clinical placement planning meetings (including the completion of a profile questionnaire which will be collated and distributed to participants, along with course clinical placement requirements, which the department will provide to all stakeholders during the planning activities). Course clinical placement requirements will also be published in the department’s Training and Development Grant: Professional-entry student placement subsidy fact sheets to promote greater transparency for clinical training funding.
- Allied health, midwifery, nursing and paramedicine participants are also required to record relevant information about their organisation and placements in viCPlace. This will include EPs uploading their demand data (post enrolment census) in the following academic year.
- To assist planning, allied health, midwifery, nursing and paramedicine participants will have access to availability reports via a real-time availability search, prior to the commencement and at the conclusion of Phase 3: planning in viCPlace.
3. **Consistent approach**

- Allied health, midwifery, nursing and paramedicine participants will be engaged in the same process for clinical placement planning, irrespective of organisation or geographic location.
- Participants will be requested to provide information (as per Guideline 2) using standardised templates and tools provided by the department. For allied health, midwifery, nursing and paramedicine participants this will include viCPlace.

4. **Collaboration and collegiality**

- Participants will be responsible for clearly representing the needs of their respective organisations (see Guideline 5).
- Participants will work collaboratively with other participants, the CTN and the department, including CTN staff.
- Participants will support efforts to assist other participants where possible, being mindful of others’ clinical placement needs.
- In participating in clinical placement planning activities, participants undertake to achieve positive outcomes for all (where possible).

5. **Facilitation not allocation**

- Clinical placement planning will be facilitated by representatives of the department including CTN Coordinators.
- Representatives of the department including CTN Coordinators and Information Support Officers are not responsible for requesting or allocating placements, advocating on behalf of organisations or representing organisations during any phase of clinical placement planning.
- Clinical placement coordinators (or alternate staff) from clinical placement providers retain control over, and responsibility for, placement planning for their organisation (inclusive of the activities in Guideline 2).
- Clinical placement coordinators (or alternate staff) from education providers retain control over, and responsibility for, placement planning for their organisation (inclusive of the activities in Guideline 2).
- All participants are cognisant that, while every effort will be made to achieve positive outcomes for all, the department cannot guarantee that all participants will have their entire clinical placement requirements met.
- At the completion of Clinical placement planning in 2014, where additional clinical placements are required, these will be arranged directly between stakeholders, according to the policies and practices of the respective organisations.

6. **Respect for existing relationships**

- Participants are encouraged to maintain existing relationships with their partners.
- Allied health, midwifery, nursing and paramedicine participants who have precommitments or precommitted placements, that is, firm commitments to place specific numbers of students under pre-existing arrangements (including arrangements made with other parties as part of funding submissions) can uphold these commitments, and book them in viCPlace (as per Key Principle 2).
- Participants are encouraged to develop new relationships to meet clinical placement needs (as per Key Principles 2 and 4).
Section 3: Process for Clinical placement planning in 2014

As indicated in Section 2, the Clinical placement planning in 2014 for allied health, midwifery, nursing and paramedicine participants has 3 phases. Medicine has one phase, preceded by preliminary activities and followed by supplementary activities, and medicine participants will not be required to use viCPlace this year. The phases for each discipline are shown at Table 2, and discussed below:

Table 2: Participant activities for Clinical placement planning in 2014

<table>
<thead>
<tr>
<th>PARTICIPANTS</th>
<th>PRELIMINARY ACTIVITIES</th>
<th>PHASE 1: MEETING</th>
<th>PHASE 2: PREPARING TO USE viCPlace</th>
<th>PHASE 3: PLANNING IN viCPlace</th>
<th>SUPPLEMENTARY ACTIVITIES</th>
<th>EVALUATION</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Register to participate in Clinical placement planning in 2014</td>
<td>Attend clinical placement planning meeting(s)</td>
<td>CPPs and EPs enter/update organisation information in viCPlace</td>
<td>CPPs and EPs Request/ Offer/ Confirm clinical placements in viCPlace</td>
<td>CPPs and EPs make further clinical placement arrangement s directly</td>
<td>EPs update information for demand report (post enrolment census) in viCPlace</td>
</tr>
<tr>
<td>Allied Health disciplines</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Midwifery and Nursing</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Medicine</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Paramedicine</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
</tbody>
</table>

Preliminary activities

Stakeholders will be invited to register to participate in Clinical placement planning in 2014 (this registration includes registration to attend clinical placement planning meetings and the completion of a profile questionnaire).

New viCPlace users

As part of the registration process, registrants whose organisations do not have access to viCPlace will be advised that to receive access to viCPlace, they will need to accept the terms and condition of use in viCPlace. Based upon information provided during the registration process, viCPlace login details will be provided to registrants via email from viCPlace. Upon entering viCPlace for the first time, users will be prompted to accept the viCPlace terms and condition of use.

Before accessing viCPlace for the first time, clinical placement providers should take the opportunity to consider their organisation set up, and education providers should consider their placement requirements. CTN staff will assist participants with these activities as required.

Participants will be supported in this work by the CTN Coordinators and the statewide Information Support Project Officer. Under their direction, the Information Support Officers will have a significant role in assisting participants to prepare for Clinical placement planning in 2014. Additionally, information and training resources designed to assist with using viCPlace are available within viCPlace.
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Existing viCPlace users
As part of the registration process, registrants whose organisations have access to viCPlace will be advised to contact their own organisation’s ‘organisation administrator for viCPlace’ to arrange access.

All registrants
All registrants will receive a participant kit with further information about their participation Clinical placement planning in 2014, including the timeline, checklist, process flowchart, meeting schedules and guidelines for the preparation meetings.

Phase 1: Clinical placement planning meetings

All participants
A clinical placement planning meeting will be scheduled in each CTN for registered participants. These meetings will provide an opportunity for clinical placement providers and education providers to discuss their clinical placements requirements.

Participants will be required to complete and submit an online profile questionnaire outlining information about their organisation and placement requirements, in advance of the meeting and the collated profiles will be distributed to all attendees.

The purpose of the meetings is to facilitate education providers and clinical placement providers to work openly and transparently and collaboratively and collegially. These meetings will provide an opportunity for participants to network, and to establish new relationships/partnerships, as well as developing their existing relationships. The meetings will also enable participants to discuss items pertinent to clinical placements from their respective perspectives (as education or clinical placement providers). These items include curriculum overview, clinical placement schedules, clinical learning needs, assessments, supervision, and placement suitability.

Phase 2: Preparing to use viCPlace

Allied health, midwifery, nursing and paramedicine participants
Clinical placement providers will complete the following activities in viCPlace during Phase 2: initial access and organisational set up, partnership set up, capacity planning and uploading clinical placement terms and conditions to the viCPlace document library.

Education providers will complete the following activities in viCPlace during Phase 2: initial access and organisational set up, partnership set up, and demand planning (by clinical subject).

These activities will enable participants to generate reports which can be shared between partners (in the viCPlace document library). Clinical placement providers will need to complete the organisation set up in viCPlace and will then be able to generate their organisational structure report from viCPlace. Education providers will need to complete clinical placement requirements (demand) in viCPlace and will then be able to generate a demand report.

Education providers will be able to perform an Availability Search for their existing partners by discipline/placement type at the conclusion of Phase 1. This search will reflect the information entered into viCPlace by participants at the time the search is conducted. This search will assist education providers to ascertain where there are available placements before making clinical placement requests and is intended to assist education providers to strategically make placement requests, and maximise their chances of
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receiving placement offers. The provision of this search function to participants supports the principle of openness and transparency.

Clinical placement providers should note that their education provider partners will be able to search for available placements in real time via the Availability Search function (as detailed above).

After the clinical placement planning meetings participants will work together to ensure precommitted placements are arranged. This will entail education providers specifically requesting only genuine precommitted placements from partners, and confirming offers for these placements when received.

Where participants have pre-existing arrangements, that is, precommitted placements, with their partners, the clinical placement planning meeting will provide an opportunity for the parties to discuss and confirm the same. To uphold the principles of openness and transparency and broad participation and inclusion, only genuine precommitted placements should be subject to such discussion at the clinical placement planning meeting, and participants will be asked to refrain from making new requests, offers and confirmations. These activities will be completed in Phase 2.

The clinical placement planning meetings will not replace any other planning activities within the framework, and will not be an opportunity to request, offer or confirm placements. They will therefore not replace the need for all allied health, midwifery, nursing and paramedicine participants to use viCPlace for these activities. Guidelines for the clinical placement planning meetings are included in the Participant kit and outline the expectation of participants at these meetings.

The clinical placement planning meetings will be facilitated by representatives of the department, including CTN Coordinators.

**Medicine participants**

Medicine participants will have the opportunity to make placement arrangements as desired. Following the clinical placement planning meetings, medicine participants will be able to complete further arrangements via supplementary activities (as discussed later in this section).

**Phase 3: Planning in viCPlace**

**Allied health, midwifery, nursing and paramedicine participants**

During Phase 3, allied health, midwifery, nursing and paramedicine participants will use viCPlace to plan their clinical placements. Education providers will verify their partnerships and then request clinical placements from those clinical placement providers with whom they have partnerships. Through viCPlace, clinical placement providers will consider all requests and make placement offers to their partners. Education providers will then confirm (accept), decline or request changes to the offer. Once all modifications to the placements are confirmed, the planning cycle is completed.

As part of Clinical placement planning in 2014, there will be final dates by which each activity in viCPlace must be completed. This is to ensure that education providers have the opportunity to review all of their placement offers, and thereby selectively confirm only those placements they intend to use. Participants are able to complete the request, offer and confirm cycle in advance of the final date for each activity, at their discretion.

Education providers are able to confirm offers before the due dates, and where they receive the offers that they want from their preferred partners should do so. Where education providers make simultaneous duplicate requests to a number of clinical placement providers, and then receive an offer which they confirm from one of these clinical placement providers, the education provider will be able to decline the requests to the other clinical placement providers. To support the principles of transparency and openness and collaboration and collegiality it is anticipated that this process will be undertaken expediently in order that
availability can be adjusted accordingly. This will assist clinical placement providers in managing their available placements.

Education providers will be able to perform an Availability Search by discipline/placement type at the conclusion of Phase 3. This search will reflect the information entered into viCPlace by participants at the time the search is conducted. This search will assist education providers to ascertain where there are remaining available placements before making supplementary clinical placement requests. The provision of this search function to participants supports the principle of openness and transparency.

**Supplementary clinical placement planning activities**

After the three phases of Clinical placement planning in 2014 have been completed, any further clinical placements (which have not been arranged by the conclusion of phase 1 for medicine participants and phase 3 for allied health, midwifery, nursing and paramedicine participants) will need to be arranged directly between stakeholders, according to the policies and practices of the respective organisations. viCPlace can be used for supplementary and future clinical placement planning.

**While every effort will be made to achieve positive outcomes for all participants during the planning activities, the department cannot guarantee that all participants will have their entire clinical placement requirements met.**

It is recognised that the success of Clinical placement planning in 2014 is reliant on the full participation of clinical education stakeholders as outlined in the framework. Over time, it is anticipated that these clinical placement planning activities may become standard practice for arranging clinical placements and reduce the need for supplementary clinical placement planning activities. Irrespective of this, it is expected that clinical education stakeholders will need to be flexible in managing unforseen changes to clinical placement requests and availabilities, and contingency planning will continue to be necessary at an organisational level and within partnerships.
Section 4: Tools

The Participant kit contains working documents to assist participants, including a timeline and checklist, process flowchart and overview chart, meeting schedules and guidelines for the meetings.

A range of complementary resources within viCPlace will be available to support users. This includes a user guide and context sensitive help. CTN staff will also be available to support participants.

Evaluation

Evaluation of clinical placement planning in 2014 will be integral to the further development of clinical placement planning activities in Victoria. The evaluation will commence from late 2014. The evaluation will occur in 2 stages:

• Stage 1: To assess Clinical placement planning in 2014 at both phases. This process will involve inviting all participants to complete a survey by the end of 2014.
• Stage 2: To identify the outputs and impacts of Clinical placement planning in 2014. This activity will occur in the 2015 academic year to consider the supply of and demand for clinical placements. As part of this work, education providers will be supported to update their clinical placement demand information in viCPlace (post enrolment census).

Evaluation of Clinical placement planning in 2014 will assist the subsequent revision and development of the clinical placement planning framework and clinical placement planning processes.
Glossary

Clinical Training Networks (CTNs): Stakeholder-led networks established to support partnership and collaboration between members and progress clinical training initiatives at a local level. Membership includes all clinical placement providers that are physically located within the network and all education providers that place students in the network.

Clinical placement planning framework: Outlines and underpins a new approach to clinical placement planning and allocation in Victoria. A key cross-CTN (statewide) objective and deliverable of the CTN initiative.

Clinical placement provider (CPP): Any organisation that provides clinical placements to healthcare students. This includes public and private health services, aged care providers, mental health services, including community-managed mental health services, community health services, general practice, private providers and other clinical placement settings. This definition of a clinical placement provider also incorporates organisations that deliver fieldwork placements at non-health service sites, for example a community-based setting that provides social work placements.

Clinical placement coordinator: Person typically responsible for planning, requesting and/or allocating clinical placements on behalf of an organisation or consortia. The clinical placement coordinator, however named, must have sufficient authority to allocate, request and agree to placements on behalf of the organisation(s) they represent.

Clinical Training Network (CTN) Coordinators: Work in each CTN to support members’ involvement in clinical training initiatives and provide secretariat assistance to the CTN committees. The CTN coordinators will assist in facilitating Clinical placement planning in 2014.

Education provider: Any institution delivering post-secondary education, in this case, professional-entry healthcare courses. This includes higher education providers and Vocational Education and Training (VET) providers.

Information Support Officers (ISOs): Work in each CTN under the supervision of a CTN Coordinator directly help CTN members to record, report and manage clinical training data, and to use clinical placement planning resources provided by the Department of Health. The ISOs will assist stakeholders to utilise viCPlace and other tools for Clinical placement planning in 2014.

Precommitted placements (precommitments): These are placement bookings which exist prior to the commencement of formal planning activities. The details should be known by both parties, and are to be recorded in viCPlace, prior to the commencement of the formal requesting process by education providers.

Professional entry: Any course that enables graduates to apply directly for initial registration (where registration is required) and employment within their studied profession.

Stakeholder: For the purposes of this document, a stakeholder is defined as any party with an interest in clinical training in Victoria. Most specifically, this refers to anyone eligible for CTN membership: higher education and VET providers, interstate educational institutions that place students within Victoria, public and private health services, aged care providers, mental health services, including community-managed mental health services, community health services, general practice, private providers and other clinical placement settings. This definition also includes government and government agencies, however it is noted that the role of these bodies in Clinical placement planning in 2014 may differ from other stakeholders where they do not directly provide clinical placements to students.

viCPlace: A secure, web-based information system to assist Victorian clinical placement providers to plan and administer clinical placements with partnered education providers.
**Victorian Clinical Training Council (VCTC):** Leadership and advisory body, established to provide statewide strategic leadership and advice on professional-entry student clinical placements across health disciplines as well as post-graduate and specialist clinical training. Comprises the chair of each CTN committee, and includes a representative of the Department of Health, Health Workforce Australia, the Senior Council of VET Providers (Community Services and Health), the Council of Victorian Health Deans, Medicare Locals and Education Planning Groups.
Additional Information

Standardised Schedule of Fees for Clinical Placement of Students in Victorian Public Health Services (the Schedule): For disciplines new to planning process, it should be noted that the fee schedule is a separate document, and applies to specific disciplines. The information can be found at http://www.health.vic.gov.au/placements/fees.htm

Training and Development Grant: professional-entry student placement subsidy 2013-14: Information on funding for professional entry placement activity for eligible public health services and disciplines can be found at: