CLINICAL/FIELDWORK PLACEMENT GUIDE

GUIDING PRINCIPLES, PROCEDURES, POLICIES AND BEHAVIOURAL REQUIREMENTS

VERSION 9 (EDITED ON 10 SEPTEMBER 2019)

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INTENDED PURPOSE OF THE GUIDE

This guide is intended to inform students, staff and agency personnel about clinical/fieldwork placement requirements and expectations including professional behaviour. It is a requirement that students read and reflect upon the process statements so they understand their obligations prior to each placement. The document must be read in conjunction with the Medicine, Nursing and Health Sciences (MNHS) Professional Behaviour Intervention Business Process.

This document must also be read in conjunction with the Monash University Academic Board Regulations — see page 13
CLINICAL AND FIELDWORK EDUCATION: GUIDING PRINCIPLES

Clinical and fieldwork education is a purposeful undertaking during which students develop a range of professional skills under supervision in a variety of authentic settings. Placements within these authentic workplace settings offer students the opportunity to practise and refine theory and skills learned in the classroom and laboratories and put them into a meaningful context. However, immersion in the authentic workplace is much more than the translation of discipline learning into a range of professional capabilities. All placements contribute to the professional socialisation of students and to educating them in the attitudes and behaviours expected within the specific workplace setting. For this reason, curricula have been designed to develop awareness of the role, and the importance of high-level professional attributes such as communication, respect for others, confidentiality, trustworthiness, and dependability.

Throughout each placement, professional behaviour, and its importance, for example, health service delivery, is expected to be nurtured by supervisors in concert with the development of other skills. It is expected students will actively engage with practitioners in the field and receive appropriate and timely feedback about the quality of their professional knowledge and skill development. In addition, students are provided with opportunities to reflect upon their behaviour and reconcile their personal beliefs and values in accordance with the collective values and expectations articulated by either the profession's registration board or a relevant professional body. As such, clinical and fieldwork education is generally a compulsory and formally assessed component. Students must satisfactorily complete prescribed placements, pass assessment tasks and demonstrate appropriate levels of professionalism.

Clinical and fieldwork education is undertaken in partnership with a wide range of placement providers. These providers are located throughout metropolitan Melbourne, regional and rural areas of Victoria, interstate, and in some cases, internationally. Clinical and fieldwork education takes place in hospitals (both public and private), community health services, private practices and a variety of other locations such as non-government organisations, schools, and local councils.

Student success is also dependent on the personal attributes and expectations they bring to the experience. This guide provides rules, obligations and responsibilities that have been designed to maximise student and supervisor's academic success.
MINIMUM PERSONAL REQUIREMENTS FOR THE FACULTY OF MEDICINE, NURSING AND HEALTH SCIENCES

Who needs to know about minimum personal requirements?

All students who are entering into a health professional course in the Faculty of Medicine, Nursing and Health Sciences need to know about the minimum personal requirements.

What is covered by the personal requirements?

Faculty has developed a series of statements to explain the personal requirements for working with patients and standards of professional behaviour. They include fundamental requirements necessary to ensure the safety and wellbeing of you and others, which is of paramount importance.

There are eight key areas in each of the health professional courses. Not all disciplines will reflect all of these areas, but all will reflect some.

- Ethical behaviour
- Behavioural stability
- Awareness of legal requirements
- Communication skills
- Cognition
- Sensory ability
- Strength and mobility
- Sustainable performance

Health professionals are respectful of self, colleagues and others by exhibiting high standards of personal care and grooming, wearing the appropriate attire and adhering to process and procedures. They also need to undergo police checks, working with children checks and have specific immunisations.

The Australian health care context provides service to the population 24 hours per day 7 days a week. This means that health professionals may need to work across a range of times and days including public and religious observances. Health professionals provide care and service in mixed gender environments, which also reflects the Australian health care context.

Why are these requirements important?

The Faculty of Medicine Nursing and Health Sciences strongly supports the right of all people to enrol in a health professional course. Working as an Australian accredited health professional means you have a responsibility to the society for which you are delivering health care. Knowledge of minimum personal requirements helps you to understand what is required to work as an Australian accredited health professional so you can decide whether the course is suitable for you.
What about students who do not meet the minimum personal requirements?

Where there are physical, intellectual, cultural, religious or other factors impacting on a student’s ability to participate in their course, the Faculty is committed to making reasonable adjustments, to allow students to complete their course without compromising the academic integrity of the course, their safety and the safety of others.

If you think you may experience challenges in meeting these requirements you can discuss your concerns with the following people:

Your course coordinator for specific course requirements
Disability Support Services
disabilitysupportservices@monash.edu
Ph: +61 3 9905 5704.

Director, International Student Welfare
Ph: +61 3 9905 9852.

Director, Student Academic Support Unit (SASU) for language and academic skills.
Sheila.Vance@monash.edu
Ph: +61 9905 4027
CONFIDENTIALITY IN HEALTH EDUCATION AND PRACTICE

Whilst not all placements will be in health care organisations, students may be involved in work of a confidential nature – this includes personal data obtained from individual interviews or as part of surveys, placement organisation practices, access to placement organisation databases and/or commercially sensitive material. The rationale for confidentiality applies to all placement locations.

A key requirement of healthcare practice is respect for the patient/client as an individual. One important aspect of this respect is the requirement to keep patient/client information confidential.

Confidentiality is a key ethical and legal principle governing health care practice. Confidentiality is recognised as a requirement of practice for all health professions in:

1. Health Services Act 1988 (Vic);
2. Contracts of employment;
3. Professional Codes of Conduct.

Rationale for confidentiality

1. Respect for patient autonomy

An important principle in health care ethics is respect for patient autonomy. This principle emphasises a person’s right to have control over their own life. This principle implies that a person has the right, by and large, to decide who should have access to their personal information.

2. The nature of the healthcare relationship — implied promise

The health care practitioner-patient relationship has elements of an implied contract. Such a contract includes an implied promise that practitioners keep confidential information about their patients/clients. Patients generally expect health care practitioners to treat information confidentially and professional guidelines emphasise the importance of high standards of confidentiality.

Confidentiality is one of the central and most universal of health professionals’ codes of ethics. Thus health care consumers may reasonably believe that what they say to a practitioner will be kept confidential. If the practitioner subsequently breaches confidentiality the patient/client may feel that the practitioner has broken an implied promise.

3. Consequentialism

The ethical theory of consequentialism focuses on analysing rights and wrongs from the perspective of the consequences of actions.

For example:

a) A patient/client might discover the breach in confidentiality with several possible consequences: he/she is angry or upset; he/she loses trust in that particular practitioner; his/her loss of trust results in his/her receiving less comprehensive health care because of a reluctance to see the practitioner or a reluctance to fully disclose potentially important health information; he/she loses trust in health care practitioners in general – and this might lead to him/her to be reluctant to keep an appointment in the future.

b) There may be a flow on effect on others. The specific patient/client may, for example, make a complaint that becomes known more widely and other people may lose trust in that specific practitioner or organisation. A wider group of people may also lose trust in health care practitioners more generally with a consequent effect on opportunities to know about and access the particular care in question.
Possible consequences of breach of confidentiality:

1. Breach of employment contract — employer takes action against employee, including possible termination;
2. A finding of professional misconduct — and disciplinary actions by the respective Registration Board. [https://www.ahpra.gov.au](https://www.ahpra.gov.au);
3. Suspended, excluded or refused re-enrolment subject to Monash University Council Regulations 30 (3).

The requirement of confidentiality is not absolute

1. There are situations when the law requires health professionals to disclose information, that they would otherwise be required to keep confidential:
   - Births, Deaths, Marriages Acts;
   - Coroner’s Acts;
   - Road Safety Act 1986 (Vic);
   - Crimes Act 1914 (Cth);
   - Health (Infectious diseases) Regulations 2001 (Vic);
   - Children and Young Person’s Act (1989) Vic (Child Abuse);
   - In the course of court proceedings;
   - When in the ‘public interest’
     - Where ‘necessary to prevent or lessen a serious & imminent threat to the life or health of the individual, or another person’ – Health Records Act 2001 (Vic).

2. There are situations when the law allows health professionals to disclose information, that they would otherwise be required to keep confidential.
   - These include if the patient/client consents expressly or by implication
     - For example, there is a clear assumption that a student health professional in a clinical education context is likely to discuss their treatment findings and assessments with their supervisor;
     - Where information is given to another health professional on a ‘need to know’ basis, that is, information given to other health professionals who are actually responsible for a patient/client’s treatment;
   - Information about a patient/client does not identify the patient/client;
   - ‘Disclosure is necessary to lessen or prevent a serious and imminent threat to an individual’s life, health or safety or a serious threat to public health or public safety’

In these situations it is important that the health professional only discloses the information to the relevant person(s) or authority(ies).
What are the implications of confidentiality for health professional students?

All health professional students must be aware of the requirement of patient/client confidentiality and its basis in ethics and law. This means that unless a person has expressly consented to use of their personal information, students must not use it in learning situations, including but not limited to:

- Small group discussions about patients/clients or health conditions.
- Individual student assignments about patients/clients or health conditions (this includes patient details on reports such as blood tests, x-rays, scans, etc.).
- Case studies about patients/client or groups of patients/clients.
- Lecture material and lecture notes about patients/clients and/or patient/client conditions.
- Informal discussions between students including use of social media.

If a breach of confidentiality occurs during clinical education or any submitted assessment, a zero result will be recorded. Please refer to the Faculty MNHS assignment coversheet.

THE USE OF IT AND SOCIAL MEDIA DURING THE PLACEMENT

Students are reminded that the Monash University ITS and Social Media policies still apply during the placement. However, students must also be mindful of the IT and social media policies of each facility and ensure their behaviour reflects these policies.

Monash University ITS procedures for responsible usage

Monash University Social Media Procedure (including using images and videos)
PROTECTED DISCLOSURE OR INAPPROPRIATE BEHAVIOUR: GUIDELINES FOR STUDENTS UNDERTAKING PROFESSIONAL PLACEMENTS

When undertaking a placement in an external institution, students may encounter a range of inappropriate behaviours by persons not within the control of the University. It is important that students are able to differentiate between the various types of inappropriate behaviour they observe or experience so that the student may report it to the correct body.

In most cases where a student observes or experiences inappropriate behaviour on placement, the incident should, in the first instance, be reported to University’s placement coordinator or to Clinical School academic staff at the Placement. They will generally be able to assist the student to resolve any issues arising from the incident. Where necessary they will be able to liaise with the placement institution for resolution of the issue.

In rare circumstances, a student may experience or observe behaviour at a public placement institution that is improper conduct. Improper conduct may include corrupt conduct, dishonest conduct, conduct which breaches public trust, substantial mismanagement of information or public resources, conduct that involves a substantial risk to public health or safety and conduct that involves a substantial risk to the environment.

If such improper conduct is witnessed or experienced by a student at a public placement institution (e.g. a public hospital), the student may wish to make a protected disclosure under the Protected Disclosure Act 2012 (Vic). To ensure that the student receives the protections provided under the Protected Disclosure Act, a protected disclosure must be made be to the Independent Broad-based Anti-corruption Commission (IBAC). IBAC can be contacted on 1300 735 135 or online at www.ibac.vic.gov.au.

If a Monash staff member receives information that may be a protected disclosure they must refer the student to IBAC or to the public placement institution’s protected disclosure co-ordinator.

The following table is designed to assist students in identifying what is and is not improper conduct under the Protected Disclosure Act:

<table>
<thead>
<tr>
<th>Improper Conduct to be disclosed to IBAC</th>
<th>Other conduct to be disclosed to Monash University</th>
</tr>
</thead>
<tbody>
<tr>
<td>• taking or offering bribes</td>
<td>• bullying or harassment</td>
</tr>
<tr>
<td>• dishonestly using influence</td>
<td>• sexual harassment or assault</td>
</tr>
<tr>
<td>• committing fraud, theft or embezzlement</td>
<td>• discrimination</td>
</tr>
<tr>
<td>• misusing information or material acquired at work</td>
<td>• lack of supervision</td>
</tr>
<tr>
<td>• conspiring or attempting to engage in the above corrupt activity.</td>
<td>• unprofessional conduct</td>
</tr>
</tbody>
</table>
Placement co-ordinators endeavour to place students close to their preferred location, however this is not always possible and travel may be unavoidable. Students must be prepared to undertake placements as assigned. Students may have to organise their own accommodation or accept university procured accommodation arrangements for some placements. Procedure 3 describes student responsibilities regarding costs associated with clinical placements.

All placements are coordinated by a designated person, such as the Placement/Clinical Coordinator, in the relevant school or department. For medical students, the placement coordinator at the clinical site will be the clinical school staff, or discipline coordinator depending on the rotation.

Experiences available in any particular year and the geographical location of sites depend on the types of placements that practice partners are able to provide for that year. Schools and departments endeavour to provide equitable experiences in student placements. Many placements offer unique experiences but all provide opportunities for students to achieve unit objectives. Students must not contact agencies to arrange placements or change allocated placement times unless explicitly instructed by appropriate staff. Students must accept assigned placements. Any action by students that can be interpreted as interfering with the organisation of arranged placements will result in disciplinary action.

Finally, students must understand that placement providers can request that MNHS remove students from the workplace if their behaviour and or skill level is below expectations.
SECTION 1: STUDENT, ACADEMIC, SUPERVISOR RESPONSIBILITIES

A: Student responsibilities

It is the responsibility of each student to:

1. Obtain the prescribed uniform.
2. Complete compulsory preparation for a placement.
3. Obtain Police and Working with Children Checks and any other checks that are specified as pre-requisites for particular placements (see OHS procedure).
4. Comply with the Faculty’s Immunisation and Infection Risk Procedure.
5. Ensure that the university has records of compliance with required checks, and the university is in a position to advise health services by specified deadlines that checks are satisfactory.
6. Obtain Monash University identification badge (student ID card), which must be worn at all times during placements. Plastic badge holders (soft round edges only) are available from campus bookshops for this purpose.
7. Attend compulsory orientation sessions.
8. Pay for the costs of travel to and from placements.
10. Be familiar with the content of the MNHS Professional Behaviour Intervention Business Process.
11. Comply with prerequisites such as current First Aid training and CPR certification where required.
12. Pass a required medical assessment by an approved medical officer, including such assessments required by the placement agency if required.
13. Pass a physical capacity assessment by an approved provider, if required.
14. Notify placement coordinators of pregnancy; pregnant students will not be able to attend placement after 34 weeks gestation and until 6 weeks post-birth.
15. Review Part 7 of the Monash University Council Regulations and how it applies to conduct during clinical placements.

The Unit Coordinator or delegate may either prevent a student from commencing placement or remove a student from a placement in the event of a failure to complete all of the pre-placement requirements.
B: Clinical/Fieldwork Placement/Unit Coordinator responsibilities

1. Proof of compliance with all the activities/documentation requirements associated with placement must be received by the Unit Coordinator or delegate by explicitly stated deadlines provided in relevant Unit Guides on Moodle.

2. If all the activities/documentation requirements are not evident to the person responsible for placement management by the published deadline then:
   a) The student in question will be informed that conditions exist that prevent them from commencing the scheduled placement;
   b) The Unit Co-ordinator or delegate will email the student and provide an opportunity (usually 24 hours) for the student to provide evidence of the missing documentation;
   c) The person responsible for placement management will inform the Unit Coordinator or delegate that conditions exist that prevent a student from commencing the placement;
   d) The person responsible for placement management will inform the student coordinator at the relevant organisation that a particular student will not be present for placement and that their place is no longer required; and
   e) The Unit Coordinator or delegate will inform the student whether a replacement placement is possible, and where this cannot be organised, students will incur a fail grade in the relevant unit.

Relevant documents:
Police Records Check Procedure.
Working with Children Check Procedure
C: Placement Educators/Supervisors responsibilities

1. Be familiar with the course and unit objectives related to the relevant academic unit in which the placement rests.

2. Identify and assist students to experience relevant learning opportunities in a safe, supportive and appropriate environment.

3. Provide students with opportunities to learn processes surrounding patient/participant consent in your organisation.

4. Assist students to reflect on experiences to facilitate deep learning.

5. Provide constructive, objective and timely feedback to students to foster professional behaviours.

6. Provide conscientious and fair assessment of student performance

7. Complete timely assessment documentation associated with the placement.

8. Inform faculty if the particular placement is no longer able to provide the requisite experience needed by students.

9. Remove students from the placement who, despite guidance, are considered unsafe, or who have an unsatisfactory knowledge base for safe practice or are deemed unfit to practise; such actions should be undertaken following consultation with the relevant unit coordinator and be supported by appropriate documentation.

10. Comply with the University guidelines related to OHS Procedure, Student and Staff Placements, OHS Guidelines including:

   • Providing students with information about safe working processes;
   
   • Providing students with an appropriate induction to the workplace including monitoring that students complete an Induction Checklist on their first day in an organisation;
   
   • Completing timely online incident reports and notifying university staff.

The Faculty guidelines reflect interpretation of the Monash OHS Guidelines for Health and Safety as they apply to clinical/fieldwork placements.

   • Where applicable, conduct tutorials and debriefing sessions during the placement.
   
   • Provide feedback to Monash staff on the quality of the preparation of the student for clinical placements and
   
   • Be familiar with the MNHS Professional Behaviour Business Process.
SECTION 2: PERSONAL CONDUCT AND PROFESSIONAL BEHAVIOUR ON PLACEMENT

Students must:

1. Meet prerequisite theoretical learning and skills for each placement.
2. Know the learning objectives and assessment requirements for each placement and strive to achieve them.
3. Identify personal learning goals.
4. Be proactive in seeking out learning opportunities related to the specific objectives for the placement.
5. Recognise and practise within the permitted scope of practice.
6. Be aware of the elements constituting professional behaviour and the consequences of a failure to comply with these expectations (refer to point 1.27 Professional Conduct Domains of the MNHS Professional Behaviour Business Process).
7. Adhere to the workplace/agency working conditions and guidelines including those related to patient/client consent processes.
8. Be punctual and be professionally presented.
10. Notify appropriate staff in a timely manner when unable to attend an allocated placement.
11. Comply with the requirements and the professional code of conduct of a student registered with the Australian Health Practitioner Regulating Authority (AHPRA) or the professional body in cases where AHPRA does not have jurisdiction.
12. Comply with relevant legislation underpinning practice including the national health practitioner and privacy laws.
A: Conditions under which students may be either prevented from commencing or being removed from the placement in relation to personal conduct and professional behaviour

The Unit Coordinator or their delegate may either prevent a student from commencing placement or remove a student from a placement in the event of unsatisfactory/unsafe behaviour and unethical conduct. In this context unsatisfactory/unsafe behaviour and unethical conduct includes, but is not limited to, the following:

Failure to:

1. Obtain an annual police check, comply with immunisation requirements and Working with Children check, attend compulsory tutorials, site visits, orientation sessions/ workshops, or failure to satisfactorily complete compulsory pre-placement course work or scheduled events;
2. Demonstrate the skills or attitudes required to exercise duty of care to patients/clients;
3. Behave appropriately towards educators/supervisors and peers;
4. Exercise appropriate duty of care to patients/clients, educators/supervisors or peers due to mental or physical health conditions;
5. Respect the confidentiality or privacy of the patient/client and/or their relatives;
6. Arrive punctually at the commencement of each placement day or placement shift, without substantial reason for the occurrence;
7. Attend the placement or complete the required number of placement hours, without prior approval of the Unit Coordinator;
8. Notify the Unit Coordinator or their delegate and supervisor of any absence or inability to attend or complete the prescribed hours in any allocated placement day;
9. Abide by the policies of the hospital, health care agency or service that apply to students undertaking placements;
10. Maintain personal cleanliness according to workplace standards, policies and procedures;
11. Wear or maintain the prescribed uniform;
12. Assist with patient/client care at the level of their capability, under the direction of the health professional responsible for supervising the student, if applicable in your placement setting.

Students can also be removed from placements if they:

1. Perform services/clinical procedures without the necessary supervision for the student’s current level of expertise;
2. Repeatedly fail to follow the directions of the clinical/fieldwork educator/supervisor;
3. Do not adequately manage risk given their level of education;
4. Communicate with placement agencies for the purpose of changing placement sites, rosters or learning activities without prior approval of the Unit Coordinator or delegate within the School or Department;
5. Practise outside their scope of practice;
6. Access or use placement agencies databases for reasons other than their intent and purpose;
7. Breach national registration requirements of a student registered with the Australian Health Practitioner Regulating Authority (AHPRA) and the professional code of conduct as prescribed by AHPRA or equivalent where AHPRA does not have jurisdiction, if applicable.

Students must also be aware that the following Part 7 of the Monash University Council Regulations applies to conduct during clinical placements.
B: Process for removing students from a placement

1. The person responsible for placement management (Unit Coordinator or delegate as designated by the Monash department) will inform students as soon as they are aware of reasons for discontinuing student participation in their placement.

2. Notice of alleged unprofessional behaviour/incompetence of a student on placement made to the School or Department must be conveyed to the Unit Coordinator or delegate for investigation as outlined in the MNHS Professional Behaviour Business Process.

3. Following investigation of the allegation of unsatisfactory behaviour the Unit Coordinator or delegate will agree to take the following action:
   - allow the student to continue with placement; or
   - allow the student to continue with placement unit with conditions; or
   - withdraw the student from the placement. (This action may indicate that the unsatisfactory behaviour is of such an extreme nature as to justify immediate failure of the unit).

Where the serious nature of the alleged behaviour requires immediate action, the Monash University Unit Coordinator or delegate will contact the placement provider to discuss the situation. A file note should be completed;

4. If the outcome of this discussion is a recommendation that the student should be immediately removed from the placement, the Unit Coordinator/Clinical Coordinator will make contact with the Unit Coordinator or delegate. The written situation report should be provided with a recommendation;

5. The Unit Coordinator or delegate will then provide a decision on the action to be taken, prepare a file note on the decision and contact the placement provider with the proposed action plan;

6. If the Unit Coordinator or delegate decides to withdraw the student from the placement, advice must be sought from the Course Coordinator or in the case of a medical student the Academic Director, Clinical Programs or delegate prior to advising the student;

7. The Unit Coordinator or delegate must advise the student of the action to be taken in relation to the alleged behaviour and be provided with a written copy of this advice;

8. Following removal from the placement, students may seek advice about these matters from the student counsellor, academic staff and/or the student union.
SECTION 3: ATTENDANCE OBLIGATIONS AT SCHEDULED PLACEMENT

1. Students are responsible for their own transportation to the placement and the costs of accommodation;

2. A student may become ill during placement. A student may recognise that they are unable to complete the required hours in a placement setting due to injury or other event. If this circumstance occurs the relevant supervisors MUST be notified;

3. Students MUST also be aware that attending clinical placement with an illness may pose a risk to people whose immunity may already be compromised, as well as putting colleagues and themselves at risk;

4. Health care facilities may refuse students access to the facility based on their policies; if unsure, the student MUST consult with the Infection Control personnel at the facility;

5. In the event of running late for a placement, the student MUST contact their placement educator/supervisor by telephone and advise the relevant person of anticipated time of arrival. Text messages or emails are not acceptable unless students receive amended advice from their unit coordinator or delegate;

6. In the event of being unable to attend a placement, students MUST inform their immediate supervisor in the workplace by telephone as soon as possible but no later than 15 minutes prior to the commencement of the roster or shift and tell them they will not be reporting for their placement. Text messages or emails are not acceptable unless students receive amended advice from their unit coordinator or delegate;

7. In the event of being unable to attend a placement, students MUST also contact the Unit Coordinator or delegate by email and advise that they are unable to commence or complete the shift, or continue a placement and must also provide written reasons for this absence to the relevant Unit Coordinator or delegate within 24 hours;

8. Students need to be aware that circumstances outside of the control of the university may necessitate a very late change (right up to the day of the commencement of the placement) to their placement allocation. Therefore students MUST check emails and Moodle on a daily basis;

9. Students MUST declare any planned absences well in advance ideally giving a semester notice. This leave will be recorded as absent days.

Religious Holiday Observance and placement attendance

Some students will require leave from clinical placement from time to time due to religious holidays. The Faculty follows the Monash Strict Religious Observances Guidelines.

Nevertheless, where a student misses clinical placement days due to religious observance the time missed must be made up.

Students requiring leave from clinical placements due to strict observation of religious holidays must notify the clinical co-ordinator of their religious holiday commitments (refer to the Faith Communities Council of Victoria Multifaith Calendar).

Students seeking religious observance leave are required to provide documentary evidence confirming their obligations to support their request. (See the Social Justice Unit for confirmation of the most appropriate form of documentary evidence to be provided).
Medicine students

The attendance requirements for medicine students are specified in the Unit Guides for those Units in which the student is enrolled.

Medicine students are required to contact the clinical school, rotation supervisor or activity supervisor as soon as possible but no later than 15 minutes prior to the commencement of the working day to inform that they will be unable to attend. If the absence is likely to be prolonged, appropriate documentation must be provided. If the reason for absence is covered by the University's Special Consideration procedure, application for special consideration must be made.

Nursing, Social Work and Paramedic students

- 100% attendance at clinical/fieldwork placements is required to achieve a pass in the relevant unit.
- Students MUST provide a medical certificate or statutory declaration for any missed days.
- Any missed days MUST be made up at during the specific placement where during which days were missed.

All other students

- 100% attendance at clinical/fieldwork placements is usually required to achieve a pass in the relevant unit.
- One day, or any part thereof, in every 50 scheduled placement days may be missed due to illness or family circumstances without support documentation.
- Additional absent or part days missed in that same 50 day period requires a medical certificate issued by a health professional (for illness) or credible authority (for other reasons) or a statutory declaration to be submitted to the Unit Coordinator or delegate within 24 hours or as soon as practicable.
- When more than 3 days have been missed from all scheduled placements in one year, a certificate from a health professional or other credible source is required to explain any inability to attend.
- If a student is absent from placement for more than one day due to loss/ bereavement or hardship/ trauma a statutory declaration with supporting documentation must be submitted as soon as possible to the Unit Coordinator or delegate.
- The relevant Monash University Department will determine the permitted number of absent days and if the student takes more than what is allowed the student WILL FAIL the unit.

All Medical, Nursing and Health Science students must:

- Ensure that external work commitments and studies do not conflict with placements.
- Be able to undertake shift work or after hours work if required within a placement (for some courses this may include night shift and shifts on weekends and public holidays).
- Notify appropriate staff in a timely manner when unable to attend an allocated placement.
- Be ready to begin their placement day at the designated start time, which in some cases may mean arriving at the venue 15 minutes prior to commencement time.
Implications of absence during placement

- Students absent in a placement period may be required to undertake additional placement experience.
- Where circumstances may be relevant for Special Consideration, the Unit Coordinator will consider an application for Special Consideration.
- Where Special Consideration is granted, any additional clinical/fieldwork placement will be at the discretion of the School/Department or Faculty.
- Additional placement time can only be made available when it is convenient for the organisation in which the placement is taking place.
- The decision concerning the offer of additional placement experience will be conveyed in writing by the Unit Coordinator or delegate to the student as soon as practicable.
- Details of the dates and location of the additional placement experience will be conveyed in writing by the Unit coordinator or delegate to the student as soon as the information becomes available and at least one week prior to the experience.
- Where absence from placement has been due to significant illness or injury, a “Return to Work Certificate” or equivalent may be required. The Unit Coordinator or delegate will advise the student when this is the case.
SECTION 4: OCCUPATIONAL HEALTH AND SAFETY

It is the responsibility of each student to:

1. Obtain (prior to commencement of workplace practice) Police Check and Working with Children Check (WCC) and any other checks that are specified as pre-requisites for particular placements. Police and Working with Children Checks must be valid for the placement period. In some instances they must be valid for all of the current year;

2. Comply with the FMNHS Immunisation and Infection Risk Procedure.

3. Ensure that immunisations are completed prior to commencement of placements. Where failure to comply with immunisation procedures leads to loss of a placement, no substitute placement is guaranteed and students risk failing the associated unit;

4. Keep a record of health screening and vaccinations;

5. Be able to produce an electronic copy of Police, WWC and Immunisation compliance documents on request by clinical placement staff;

6. Eliminate or minimise hazardous conditions in the workplace;

7. Report injuries and near misses (accidents that might have occurred but did not occur) immediately to supervisor;

8. Participate and contribute in meetings, training and other environment, health and safety activities as required;

9. Co-operate with instructions given by emergency response personnel such as emergency wardens and first aid personnel;

10. Co-operate with university and placement provider in activities related to compliance with Occupational Health and Safety Legislation;

11. Be familiar with correct use of safety devices and personal protective equipment;

12. Complete the Faculty OHS Induction Proforma check sheet each placement and upload it as directed (available on the designated course related placement website);

13. Notify unit coordinator or delegate if pregnant. Pregnant students will not be able to attend clinical placement after 34 weeks gestation and until 6 weeks post-birth.
If an accident or injury occurs, strict procedures must be followed:

- Notify the Unit Coordinator or Clinical/Fieldwork Placement Coordinator as soon as practicable.
- Complete an Incident Form from the workplace agency; the clinical educator/supervisor forwards this to the school/department administration office;
- Where the workplace agency does not permit a copy of the Incident Form to be forwarded to the university, a report in word format from the staff member reporting should be forwarded.
- A Monash University Hazard and Incident Report form is completed by the person reporting the incident with the student and returned to the School/Department as soon as possible, (see below for web address).
- In the case of needle stick injuries or potential contamination by bodily fluids, all procedures are strictly followed as per the agency’s own policies.
- Students may be required to present a Medicare card at the time of treatment, and should carry this with them on placement at all times.
- Monash University provides a Student Personal Accident Insurance Procedure. Students must be aware of the details and scope of this procedure.
- Further information regarding the reporting, investigation and recording of incidents may be obtained from the Monash University Occupational Health, Safety and Environment website.
- Monash University does not provide insurance for damage to private vehicles incurred in activities associated with placements. It is the responsibility of each student to arrange adequate insurance protection for any damage arising from use of their private vehicle.
- Students must clarify with the agency/organisation the conditions governing the use of a private vehicle during placement, in cases where they are asked to use their own vehicle in transporting clients or colleagues.

Notes supporting these policies:

When preparing for medical attendance for immunisation assessment students may need to pull together previous vaccination data. Two important sources exist:

- Local councils (of residence or school location), who are required to retain childhood and adolescent vaccination data in perpetuity (forever);
- GPs, who have frequently provided sporadic vaccination and often hold “missing” data.

It is recommended that all students consolidate their data in a single electronic file.

International students have different vaccination record opportunities. For example, Singapore, Malaysia, and parts of China have data retention systems. Other international students may not have access to their childhood vaccinations.

Police record checks can be obtained directly from Victoria Police (http://www.police.vic.gov.au) or through an authorised service or agency accredited by CrimTrac (e.g. Fit2work). CrimTrac is the national information sharing service for Australia’s police, law enforcement and national security agencies. A list of agencies accredited by CrimTrac can be found at CrimTrac website.

Relevant documents

- Guidelines for Health and Safety during Student and Staff Placements (OHS)
- Immunisation and Infection Risk Procedure
- Police Records Check Policy
- Working with Children Check Procedure
SECTION 5: DRESS CODE

Adhering to professional dress codes can assist health professionals to acquire the confidence of their clients and the broader community. Schools and departments have professional dress codes for all students designed to promote Monash University students as well presented. Where prescribed, uniform is to be worn by all students undertaking practice components of their courses. Schools and departments will provide students with details of dress requirements prior to their first placement through the relevant Unit Guide.

Placement activities involve physical activity so it is important that clothing worn does not inadvertently become revealing. What may seem acceptable under other circumstances is less suitable when engaged in close patient contact.

A: Presentation

- Students may have to conform to the following general rules regarding appearance and need to refer to their unit guide for specific instructions. Students who are not required to wear a uniform must nevertheless be neat and professionally attired in a manner consistent with this policy.
- Hair must be kept neat, tidy and clean at all times. Long hair must be tied up at all times. Scrunchies, hair combs and other hair fasteners are to be of a neutral colour, or a colour that complements the professional attire. Fluorescent or extreme hair colours are not permitted;
- Facial hair must be clean shaven or neatly trimmed;
- Nails must be short, clean and well-manicured. In those disciplines where there is hands-on patient/client contact, fingernails must not be visible over the ends of the fingers when the hands are held with the palms facing up. Coloured nail varnish and false nails are not to be worn during clinical placements;
- Watches, flat band rings, sleepers, studs or small earrings that sit on the lobe of the ear and do not pose a danger to patients/clients or the student are the only permissible items of jewellery where there is hands-on patient/client contact;
- For safety reasons, students must wear flat or low heeled, covered footwear without embellishment (no buckles or bows). Students will be on their feet for long periods and should wear comfortable shoes;
- Uniforms are to be laundered, ironed and presented at a professional standard;
- Students must pay attention to their own personal hygiene, use deodorant and observe dental hygiene to maximise acceptability to people associated with close physical contact;
- T-shirts and other underclothes must not to be visible underneath uniforms;
- Religious headwear may be worn and should complement uniform colour;
- To comply with religious requirements, long sleeves may be worn but students must be able to adapt their attire to ensure compliance with hand washing procedures and infection control policies;
- Revealing clothing such as hipster or tight fitting trousers, mini-skirts or short shirts are unprofessional and are not to be worn;
- Students attending mental health placements and some community placements may not be required to wear a uniform. If in doubt, check with the Unit Coordinator or delegate or workplace health service information before attending.
### APPENDIX 1: PATHWAYS FOR PROFESSIONALISM FLAGS

Acknowledgement to Kristen Lo, for the Department of Physiotherapy for this figure.

<table>
<thead>
<tr>
<th>Breach of appropriate student conduct / behaviour</th>
<th>Criminal act or serious breach of University / Health Service procedure</th>
<th>University notified of intention where able</th>
<th>Immediate withdrawal from the clinical placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation</td>
<td>1st flag</td>
<td>2nd flag</td>
<td>3rd flag</td>
</tr>
<tr>
<td>University educator / Clinical Educator is responsible for discussing the following with the student</td>
<td>University notified. Documented warning inserted in student file (Unit Coordinator)</td>
<td>University notified. Documented warning inserted in student file (Unit Coordinator)</td>
<td>University notified. Documented warning inserted in student file (Unit Coordinator)</td>
</tr>
<tr>
<td>1. Formally &amp; explicitly discuss observed behaviour</td>
<td>Unit Coordinator invites student to attend FTP support meeting. Student to complete written reflection task</td>
<td>Matter referred to Course coordinator</td>
<td>Matter referred to Deputy Dean Education</td>
</tr>
<tr>
<td>2. Clarifies verbally what is the required behaviour</td>
<td></td>
<td>Intervention e.g.: education</td>
<td>Faculty Committee</td>
</tr>
</tbody>
</table>

**Note:**

Clinics have the ability to withdraw students at any time (in contract).

Student may be required to participate in a meeting between student, Unit Coordinator and Clinical Educator to clarify concerns.