Effective clinical teaching

The way in which clinical supervision is modelled in the workplace depends on the context in which it takes place, the management of workload and clinical teaching, and student learning needs. Whether you have health professional students or junior staff, effective clinical supervision helps promote a safe and supportive clinical placement. This issue of REd examines some supervision models which may be adaptable for your workplace.

Thank you to John Holton for his hospital admission-inspired reflection as our contribution to ‘Humanities in Healthcare’ this quarter. Looking forward to more contributions from our readers.

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Clinical supervision plays an important part in the education of health professionals. It has three main components: education, support and management. Educationally, the role of clinical supervisors will depend on the context of the clinical placement. Most commonly, clinical supervisors are responsible for clinical teaching and creating a learning environment by providing an educational framework for students and other clinicians involved in the placement. The framework should ensure that students feel supported in the clinical environment, and that clinical teachers understand the learning outcomes of the placement. Supporting the students also means that clinical supervisors take opportunities to help students reflect on their experiences, and identify their own learning goals. Managerially, the clinical supervisor is also responsible for student and patient safety, promoting the use of best practice guidelines and risk assessment.

Clinical supervision models can differ according to the clinical environment and the number of health professional students in the placement. One-to-one teaching may be the role of academic supervisors from the higher educational institution or the clinical teacher in the workplace. One clinical supervisor may also be allocated to facilitate learning for multiple students and may have a preceptor, mentor, buddy or peer teacher role. Clinical supervisors in the workplace often continue with their clinical workload which may or may not be reduced while students are present.

Preceptorship is a clinical supervision model in which clinicians have a direct clinical teaching role and are responsible for student assessment as well. Their relationship with their students is often more short term than a mentorship, and focuses on the development of clinical and professional skills as well as work-place orientation and socialisation. Students can be rostered alongside preceptors so that supervision remains constant. Traditionally used in nursing programmes, preceptorship has increased in the education of other health professions, with the realisation that consistency of supervision and management of students on placement can result in increased clinical capacity even if multiple supervisors have a primary preceptor role.

Effective models of clinical supervision can assist in the transition from undergraduate education into the workplace and help junior and new staff negotiate the working environment. Team-based clinical supervision has been found to reduce workplace stress, increase communication between staff and empower nurses to challenge existing work practice. Enhanced supervision of graduate doctors has been linked to improvement of patient outcomes.

Learner-orientated clinical supervision is a long-term investment in producing work-ready clinicians. Clinical placement areas need to adapt, implement and evaluate their own models to suit their workplace context.

1. McKenna, Lisa & Stockhausen, Lynette (2013) Introduction to Teaching and Learning in Health Professions Lipponcott Williams & Wilkins, Sydney Australia

In Focus … Supervision in the workplace

Key Concepts

Buddy: A clinician that works alongside a student in the provision of patient care with no clinical teaching expectations.

Peer learning and teaching: Students/staff learning and teaching each other. The teacher may or may not be at the same level as the learner.
There are many approaches to clinical supervision depending on the clinical placement context and the health profession educational requirements of placements. The following are some examples of clinical supervision models currently being utilised in health professional education:

**The integrative preceptor model (ICP)**

In the ICP model students assume a proactive, professional role and primarily take active responsibility for their learning. Students are responsible for participating in the planning of their clinical experience based on their individual learning needs. Rather than accepting and completing tasks, students are required to reflect, revise and evaluate their learning goals while on placement. In the ICP model the preceptor role changes from that of traditional clinical teaching to working with students in a more collaborative approach. Preceptors actively participate in planning and implementing the clinical experience for each student and foster student learning through their clinical expertise.

**Parallel Consulting (Wave) Model**

In the parallel consulting or Wave model, students see patients in their own consultation rooms while the clinical supervisor sees a patient/client in the adjacent consulting room. The supervisor then joins the student and patient to complete the student consultation. Clinical supervisors provide close supervision using the wave model.

The Wave model usually includes the following elements:

- Patients make appointments to see the student. A space will be left vacant in the supervisor’s appointment schedule.
- When the student has formulated their diagnosis and management, the supervisor will then see the student and patient in a joint review, where the diagnosis and management is discussed with input from the clinical supervisor.
- Time is needed at the end of each session for the student and clinical supervisor to provide feedback and identify learning needs.

The Wave model provides a clear framework for students and preceptors to work together in day-to-day patient encounters.

**Mentoring Models**

Clinical mentors act as a support person for students providing emotional and professional support. The mentoring role is different to the preceptor role in which the preceptor and student work alongside each other in a clinical setting. The mentor is an independent person who does not formally supervise or assess the student. This has been shown to encourage the student/mentor relationship where clinical placement issues can be discussed. The mentor role is a voluntary role rather than assigned by the primary health care facility.

**Interprofessional Collaborative Practice (IPCP)**

Interdisciplinary collaboration and coordinated care facilitates continuity of patient care and is important in chronic disease management. IPCP involves all members of the health care team to enhance quality health care delivery, and creates a positive interdependence among health care providers. It also helps build a culture of shared learning and teamwork.

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**Key Concepts**

**Interprofessional learning (IPL):** An ongoing active learning process between different cultures and health care disciplines patient care.

**Mentor:** A clinician or community member who provides guidance on professional and personal workplace development, but is not usually involved in direct clinical teaching.
 humanity in Health Care

"In dialogue, people become observers of their own thinking."

Peter Senge, scientist

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**Find out more**

viCPortal
https://vicportal.net.au/vicportal/

This site is an online catalogue of clinical education and training resources created by educators and clinicians through project funding from Health Workforce Australia and the Department of Health.

This online portal includes project reports and case studies, training materials, resources to support staff and students, templates, agreements, policies and guidelines, and evaluation tools including surveys and questionnaires.

You can search using keywords or one of the 146 project names, and the contact details of project leaders are available for further information.

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**Book Review**

Workplace-based Teaching for Rural and Regional Clinical Supervisors: a guidebook

Natalie Radomski and Pam Harvey

This book is for clinical educators working in hospital and community sites. It was developed from the HWA-funded Clinical Supervisor Support Programme, and based on the teaching experiences of 131 clinical educators. The book outlines under-utilized learning opportunities in the workplace, and is divided into seven themes: creating learning environments, planning teaching encounters, skills and clinical reasoning, communication skills, working with patients and carers, linking learning and teaching opportunities, and professional formation.

Hard copies are available by contacting pam.harvey@monash.edu, or download your electronic copy from the viCPortal mentioned above.

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**Humanities in Health Care**

John Holton

'humanities in Health Care' submissions are original creative pieces that reflect the nature of a health professional's work and the care of patients. Direct all queries to pam.harvey@monash.edu

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In this strange world called hospital every millilitre of urine is recorded every bowel movement celebrated with pomp and ceremony a red carpet from bathroom to bed the curtain parts to an unwelcome audience my sad tackle bowing to no applause no laughter except for the gorgeous young nurse giggling hysterically as she removes my catheter how welcome her humanity her being in the moment

John Holton

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