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| Standardised Student Induction Protocol |
| Human services versionNovember 2024 |
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# Definitions

**Placement provider (PP):** Any organisation that provides Student placements to 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 Student placement settings. This definition of a PP also incorporates organisations that deliver fieldwork placements at non-health service sites, for example a community-based setting that provides social work placements.

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

**Student:** An individual enrolled in an entry-level professional course.

**Student placement:** A student placement (also referred to variously as “ “clinical placement”, “fieldwork placement”, “practical placement”, “clinical practicum” or “clinical practice”) is defined as the component of an accredited curriculum conducted under supervision in a clinical or human services organisational environment that assists students to put theoretical knowledge into practice. The placement is usually associated with patient/client interaction but may also involve skills acquisition via observation or simulation consistent with learning objectives.

**Best Practice Clinical Learning Environment Framework (BPCLE):** The BPCLE is a best practice framework that identifies six key elements which underpin high quality clinical learning environments. In the context of the Standardised Student Induction Protocol BPCLE refers to the companion resources which have been designed to support the implementation of the BPCLE Framework.

The BPCLE Framework provides a guide for health services, in partnership with EPs, to coordinate and deliver high-quality Student placements for health learners. Templates developed as part of the BPCLE Framework Resource Kit can be used in conjunction with these guidelines to develop an orientation program.

# Introduction

The health and human services sectors participate in the provision of education to health and human services students for the development of a sustainable health and human services workforce. Student placements enable students to consolidate their practical skills through exposure to a range of experiences and interactions with patients and clients. This aspect of education is essential for the development of students into competent practitioners.

Students are exposed to a variety of different sites and settings to ensure that they are suitably prepared and skilled to participate in the workforce upon graduation. The object of this approach is to provide a workforce that fulfils future requirements for evolving models of service delivery.

To meet appropriate safety standards and to be familiarised with the environment in which their placement will occur students are required to undertake orientation and induction at each new site where topics and requirements are often replicated. Adoption of a standardised approach across Victoria aims to improve the efficiency of this induction process for education providers, placement providers and students. Where there are existing guidelines for specific issues developed using specialist expertise, these are recommended to guide student induction requirements.

This document clarifies responsibilities and protocols, and also suggests resources which may assist users where appropriate. These protocols can be broadly applied to a range of settings and placement types and the intention is that these become a standard tool which will streamline administration for all parties. There may be, however, situations where amendment to these protocols is necessary. In such an instance, these should be agreed between the Placement provider (PP) and education provider (EP) prior to commencement of the student placement.

The Standard Student Induction Protocol (SSIP) is not mandated for Public Health Services. Agreement to use the SSIP is included as a clause in the standardised Student Placement Agreement. Where the Student Placement Agreement forms the basis of a legal agreement with your partner organisation there may be an obligation to use the SSIP, and any changes to that standard protocol should be recorded in the Student Placement Agreement.

The document is presented in three sections:

* Pre-placement requirements
* On-placement orientation
* Resources

# Pre-placement requirements

## Student introduction on placement

### Rationale

Patients and clients have a right to safe and high-quality care under the Australian Charter of Healthcare Rights, which applies to all Australian healthcare settings[[1]](#footnote-2). To ensure these rights are upheld, students require appropriate supervision while accessing patients and clients. This will ensure that students develop excellent skills to become part of a well-trained future health workforce, capable of providing safe and high-quality care.

### Protocol

Patients and clients are to be made aware of the presence, and purpose, of students in the healthcare setting as suggested in Table 1.

Table 1: Student interaction on placements – division of responsibilities

| Education Provider | Placement Provider |
| --- | --- |
| EPs should ensure students are familiar with the Australian Charter of Healthcare Rights before student placement commences. | To have protocols in place that:  Clearly indicate to patients and clients that the site is a teaching site, and students are on placement to learn to become competent practitioners  Introduce each person involved in the patient/client’s care and identify their qualification (registered professional/student etc) and level of involvement in the care provided Affords opportunity for patients/clients to decline the involvement of students in their care prior to students being present. |

### Resources

* [Australian Charter of Healthcare Rights](http://health.vic.gov.au/patientcharter) <http://health.vic.gov.au/patientcharter>

## National police records check

### Rationale

A national police records check is a standard requirement for any person working in a ‘position of trust’ with individuals in the community. The police check provides a list of offences a person has committed at a given point in time, and is designed to reduce the risk of abuse by an individual undertaking a student placement.

In the aged care sector, undergoing a police check is a legal requirement for all workers, volunteers and students in the aged care sector[[2]](#footnote-3).

### Protocols

Best practice requires that all students undergo a police check prior to commencing placement. A protocol for completing this is provided in Table 2. The following conditions apply to these police checks:

* All students obtain a national police records check annually. These are considered valid for student placements for 12 months from the date of issue.
* In ***addition*** to a national police records check, students who have resided overseas for more than 12 months in the past 10 years should have a police check from their country of residence (including an English translation) and/or complete a statutory declaration stating that they have never, in another country, been convicted of any crime.
* EPs and PPs must have an agreed protocol in place to resolve the issue of any disclosable outcomes that may arise during the police check process, with due consideration to student confidentiality.

Table 2: Police checks – division of responsibilities

| Education Provider | Placement Provider |
| --- | --- |
| EPs are to sight and record each student’s police record check, including the date of issue.  EPs are to enquire whether students have resided overseas for more than 12 months in the past 10 years. If the student answers ‘yes’ then EPs are to request a police check from the country of residence and/or statutory declaration that they have never been convicted of any crime.  Written confirmation that the police check has been completed is to be provided to the PPs 4-6 weeks prior to placement.  The EP should alert the PP of any students with a disclosable outcome. The disclosable outcome will be discussed with the PP by the student and/or the EP (with student consent).  The EP must require its students to notify it if there are any changes to the status of the police check, such as being investigated for, charged with, or found guilty of, a criminal offence. The EP will then immediately notify the PP of these changes in writing. | PPs are to ensure that they are provided with confirmation by EPs that they have sighted a current police check for each student through an agreed process 4-6 weeks prior to placement.  For example, the EP may sign a statutory declaration confirming that police checks have been sighted for the students on the placement.  The PP will be notified of whether there are any disclosable outcomes by the education provider. These will be discussed with the PP by the student and/or the EP prior to confirmation of the students attending that placement. |

Note: The department aims to facilitate aspects of this process in Placeright, and this feature will be available subject to further development.

### Resources

* [Australian Criminal Intelligence Commission <National Police Checking Service](https://dhhsvicgovau.sharepoint.com/sites/Placeright/Shared%20Documents/Policies/Standardised%20Student%20Induction%20Protocol%20(SSIP)/www.acic.gov.au/our-services/national-police-checks) [www.acic.gov.au/our-services/national-police-checks](http://www.acic.gov.au/our-services/national-police-checks)>
* <Department policy on security screening for funded agencies https://providers.dffh.vic.gov.au/safety-screening-policy>>

## Statutory Declarations for Commonwealth funded Aged Care Services

### Rationale

All people with access to aged care recipients are required to have a valid Australian national police records check. When a person has been a permanent resident or a citizen of another country a police records check is also required from that country. It is noted that it is not always possible to obtain a police records check from other countries and in this instance a Commonwealth statutory declaration may be used to meet this requirement.

### Protocol

A statutory declaration is required, in addition to a national police records check, for students completing a placement in an aged care setting when students have:

* Applied for a national police records check, but not yet received it.
* Been a citizen or permanent resident of a country other than Australia after the age of 16.

The responsibilities of each party are detailed in Table 3.

Table 3: Statutory Declarations – division of responsibilities

| Education Provider | Placement Provider |
| --- | --- |
| EPs will sight each student’s statutory declaration, where necessary, and notify PPs if any students have made adverse statements. These will be raised for discussion with PPs by the student and/or the EP.  Sighting of the statutory declaration for each student should be completed and confirmed with PPs 4-6 weeks prior to placement.  EPs should ensure that students take their statutory declaration with them on the first day of placement.  The EP must require its students to notify it if there are any changes to the content of the statutory declaration, such as being investigated for, charged with, or found guilty of, a criminal offence. | Where a statutory declaration is required it should be presented to the PP prior to the beginning of, or on the first day of, the placement. PPs are to record the statutory declaration. |

Note: The department aims to facilitate aspects of this process in Placeright, and this feature will be available subject to further development.

In the aged care sector, undergoing a police check is a legal requirement for all workers, volunteers and Students. In the health sector, it is common practice for new employees to be required to undergo a police check at or prior to commencement of their employment.

### Resources

* [Commonwealth statutory declarations](https://www.ag.gov.au/legal-system/statutory-declarations) <https://www.ag.gov.au/legal-system/statutory-declarations>
* [Australian Criminal Intelligence Commission - National Police Checking Service](www.acic.gov.au/our-services/national-police-checks) <www.acic.gov.au/our-services/national-police-checks>

## Working with Children Check

### Rationale

The Working with Children Check (WWCC) is mandated under the [Working with Children Act 2005](http://www.legislation.vic.gov.au/Domino/Web_Notes/LDMS/LTObject_Store/LTObjSt5.nsf/DDE300B846EED9C7CA257616000A3571/FE6E82192F34C57FCA25778A00179E36/$FILE/05-57a027.pdf) (the Act) to assess a person’s suitability to work with children, aiming to protect children from sexual and physical harm. Individual organisations need to determine which staff or volunteers require the WWCC as only people who engage in paid or voluntary child-related work need a WWCC. Child-related work is paid or unpaid work involving direct and unsupervised contact with a child when working with, or caring for, children in any of the occupational categories listed in the Act. Criminal records continue to be monitored for the life of a WWCC, which is for a five year period. Staff and volunteers, including students, must present a valid card and should not commence working or volunteering before the WWCC is completed.

### Protocol

The protocol for WWCC of students is provided in Table 4. Please note the following information:

* Students obtain a WWCC as appropriate, according to the legislation and PP requirements. Table 4 indicates the division of responsibilities for sighting and recording the WWCC.
* Interstate students do not need a Victorian WWCC if they are working with children in Victoria for a period of up to 30 days and hold a valid WWCC in another jurisdiction.

Table 4: Working with Children Checks – division of responsibilities

| Education Provider | Placement Provider |
| --- | --- |
| EPs are to sight each student’s WWCC prior to sending students on placement where a WWCC is required, and notify students of their obligation to list the EP as an organisation that engages the student in child-related work.  Should the EP be notified of a negative notice, this will be communicated to the PP immediately.  Sighting of the WWCC for each student will be recorded (as per Department of Justice and Regulation instructions for “how to manage the WWC check”), along with the expiry date, card number, and card type for the purposes of sharing with PPs 4-6 weeks prior to commencement of placement. | PPs are to sight the WWCC and record the card number, expiry date and card type on the first day of the placement (as required by legislation). |

Note: The department aims to facilitate aspects of this process in Placeright, and this feature will be available subject to further development.

### Resources

* [Victorian Commission for Children and Young People – The Child Safe Standards](https://ccyp.vic.gov.au/child-safe-standards/) <https://ccyp.vic.gov.au/child-safe-standards/>
* [Victorian Department of Justice and Community Safety - Working with Children Check](https://www.vic.gov.au/working-with-children-check) <https://www.vic.gov.au/working-with-children-check>
* [Working with Children Act 2005](https://www.vic.gov.au/legislation-wwcc) <https://www.vic.gov.au/legislation-wwcc>

## National Disability Insurance Scheme (NDIS) worker screening clearance

## Protocol

1. From 1 February 2021, all individuals engaged in work for registered NDIS providers in certain types of roles called risk assessed roles will need an NDIS worker screening clearance before they can start work. This includes volunteer workers.
2. All students are required to maintain a valid NDIS worker screening clearance for the duration of their Clinical Placement if the Placement is classed a risk assessed role.
3. A risk assessed role is:

* a key personnel role of a person or an entity as defined in s11A of the *National Disability Insurance Scheme Act 2013* (for example a CEO or a Board Member);
* a role for which the normal duties include the direct delivery of specified supports or specified services to a person with disability (see Point 4 below for further information); or
* a role for which the normal duties are likely to require more than incidental contact with people with disability, which includes:
* physically touching a person with disability; or
* building a rapport with a person with disability as an integral and ordinary part of the performance of normal duties; or
* having contact with multiple people with disability as part of the direct delivery of a specialist disability support or service, or in a specialist disability accommodation setting.

1. As a guide, the instrument listing specified supports and services incorporated in the National Disability Insurance Scheme (Practice Standards – Worker Screening) Rules 2018 below identifies when a worker is performing a risk assessed role which requires a clearance. However, the EP should also confirm with the CPP if there are additional supports and services where a clearance is required:

| **Item number**[[3]](#footnote-4) | **Descriptor** |
| --- | --- |
| 2 | assistance to access and maintain employment or higher education |
| 4 | high intensity daily personal activities |
| 6 | assistance in coordinating or managing life stages, transitions and supports |
| 7 | assistance with daily personal activities |
| 8[[4]](#footnote-5) | assistance with travel/transport arrangements, but only if the services are with respect to specialised transport to school/educational facility/employment/community |
| 10 | specialist positive behaviour support |
| 14 | community nursing care |
| 15 | assistance with daily life tasks in a group or shared living arrangement |
| 16 | innovative community participation |
| 17 | development of daily living and life skills |
| 18 | early intervention supports for early childhood |
| 19 | specialised hearing services |
| 21 | interpreting and translating |
| 25 | participation in community, social and civic activities |
| 26 | exercise physiology and personal training |
| 27 | management of funding for supports in participant plans |
| 28 | therapeutic supports |
| 29 | specialised driver training |
| 33 | specialised support coordination |
| 34 | specialised supported employment |
| 35 | hearing services |
| 36 | customised prosthetics |
| 37 | group and centre-based activities |

Item number refers to the Item number for the class of supports in the table at subsection 20(3) of the *National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018.*

2 The services specified in item 8 would include things like a bus service which is available only to children with a disability on a school route. It does not include things like taxi, bus and train services available to the public at large, even if they involve vehicles, which have specific modifications to better facilitate their use by people with a disability.

1. EPs must:
2. Notify Students of their obligation to list on their NDIS worker screening check the EP as an organisation that engages the Student in a risk assessed role;
3. For each Student, sight a valid NDIS worker screening clearance and confirmation the EP has been listed as an organisation engaging the Student in a risk assessed role prior to sending the Student on any Placement where an NDIS screening clearance is required;
4. Record details of Student NDIS worker screening clearance according to the NDIS Commission instructions published on the NDIS Commission’s website;
5. At least four weeks before the intended commencement of any Clinical Placement for which an NDIS worker screening clearance is required, provide to the CPP via Placeright or other mechanism agreed with the CPP:
6. Written confirmation that the EP has sighted a valid NDIS worker screening clearance for each Student;
7. Reference number of each NDIS worker screening clearance; and
8. Expiry date of each NDIS worker screening clearance;
9. Notify each Student of their obligation to notify the EP in writing within seven days of receipt of a negative notice, suspension or cancellation of their NDIS worker screening clearance.
10. If they become aware of a negative notice, suspension or cancellation of a Student's NDIS worker screening clearance, immediately notify the CPP and advise the Student to be available to meet with the CPP if requested. The Student may choose to bring a support person to this meeting.
11. CPPs must advise the EP if NDIS worker screening clearances are required for any staff or Students participating in the Clinical Placement program.
12. Students are not required to present their NDIS worker screening clearance directly to the CPP. CPPs may use the information provided by EPs to verify the status of NDIS screening clearances via the NDIS Commission Portal.

## Rationale

The NDIS worker screening clearance is mandated under the *National Disability Insurance Scheme Act 2013* (NDIS Act) which requires registered NDIS providers to comply with the NDIS Practice Standards.

The NDIS Worker Screening Rules have been made for the purposes of section 73T of the NDIS Act which enables the NDIS Practice Standards to deal with matters relating to worker screening.

Section 13 of the NDIS Worker Screening rules provides that a registered NDIS provider must only allow workers to engage in risk assessed roles if the person has a valid NDIS worker screening clearance.

## Resources

* [NDIS Worker Screening Check](https://www.vic.gov.au/ndis-worker-screening-check) <https://www.vic.gov.au/ndis-worker-screening-check>
* [NDIS Commission Worker Screening Check](https://www.ndiscommission.gov.au/workers/worker-screening) <https://www.ndiscommission.gov.au/workers/worker-screening>
* [List of specified services and supports](https://www.ndiscommission.gov.au/providers/registered-ndis-providers/registered-provider-obligations-and-requirements/worker#paragraph-id-2704) <https://www.ndiscommission.gov.au/providers/registered-ndis-providers/registered-provider-obligations-and-requirements/worker#paragraph-id-2704>
* [National Disability Insurance Scheme (Practice Standards – Worker Screening) Rules 2018](https://www.legislation.gov.au/F2018L00887/latest/text) <https://www.legislation.gov.au/F2018L00887/latest/text>
* [National Disability Insurance Scheme Act 2013](https://www.legislation.gov.au/C2013A00020/asmade/text) <https://www.legislation.gov.au/C2013A00020/asmade/text>
* [NDIS Commission Portal](https://www.ndiscommission.gov.au/portal/registered-ndis-providers-portal-login) <https://www.ndiscommission.gov.au/portal/registered-ndis-providers-portal-login>

## Immunisation for students

### Rationale

Transmission of vaccine preventable disease in healthcare settings has the potential to cause serious illness and avoidable death in patients, clients, staff, students, and the community. From an employer’s perspective there are occupational health and safety (OH&S) obligations to ensure that staff are protected from vaccine preventable disease.

The Victorian Government has mandated COVID-19 vaccinations for authorised workers which includes students undertaking placements in certain settings, such as for clinical health and aged care placements.

The department has developed a policy that provides guidance for organisations regarding immunisation for their employees. Organisations are expected to consider the appropriate operationalisation of this policy for their local requirements.

### Protocol

Student immunisations are to align with the department’s Immunisation for health care workers guidelines, and information about how this should occur is provided in Table 5. All students are to be immunised according to these guidelines. If there are particular circumstances that cause a PP to require any additional immunisations, this is required to be communicated to the EP early in the Student Placement planning process, allowing time for students to receive the immunisations.

Table 5: Student immunisation – division of responsibilities

| Education Provider | Placement Provider |
| --- | --- |
| EPs will notify students of the requirements as per the immunisation for health care worker guidelines at the beginning of their course, and in enough time to complete immunisation requirements prior to undertaking student placements.  The EP will inform students of the benefits and risks of immunisation.  Students who are not immunised (refusal, failure to seroconvert, sensitivity or because of medical contra-indication) must be discussed with the PP and will be subject to PPs’ organisational policies, which may affect the student placement experience.  EPs must obtain evidence of student immunisation status and provide this information to PPs 4-6 weeks prior to placement.  Further information about each vaccine and recommended requirements for immunity can be found in the Australian Immunisation Handbook. | PPs are to ensure that they receive confirmation from EPs that students meet the immunisation for health care workers guidelines.  If there are additional requirements for their organisational staff, and hence students on placement, this should be communicated to EPs at the time of booking placements along with an explanation as to why this is required.  For the purpose of student placements, there is no requirement for students to have immunisations in addition to those required for staff in patient or client care roles.  It is the responsibility of EPs to notify PPs where recommended immunisation is not achieved. This should occur 4-6 weeks prior to placement. |

Note: The department aims to facilitate this process in Placeright, and this feature will be available subject to further development.

### Resources

* [Australian Immunisation Handbook](https://www.health.gov.au/resources/publications/the-australian-immunisation-handbook?language=en) <https://www.health.gov.au/resources/publications/the-australian-immunisation-handbook?language=en>
* [ILAC Mutual Recognition Arrangement signatory search](https://ilac.org/signatory-search/) <https://ilac.org/signatory-search/>
* [Victorian Tuberculosis Program – Preventing tuberculosis infection and disease among healthcare workers](https://www.thermh.org.au/services/victorian-tuberculosis-program) [Victorian vaccination for healthcare workers guidelines](https://www.thermh.org.au/services/victorian-tuberculosis-program) [<https://www.thermh.org.au/services/victorian-tuberculosis-program>](https://www.thermh.org.au/services/victorian-tuberculosis-program)
* [Student Clinical Placements Guidance](https://www.health.vic.gov.au/publications/fit-testing-requirements-to-support-clinical-placements) <https://www.health.vic.gov.au/publications/fit-testing-requirements-to-support-clinical-placements>

## National Student registration

### Rationale

The Health Practitioner Regulation National Law (Victoria) Act 2009 states that students enrolled in an approved program of study, or who are undertaking clinical training, must be registered as a student with their respective National Board.

### Protocol

It is a requirement that all students of a registered health profession are registered as students with the Australian Health Practitioner Registration Agency (AHPRA) prior to commencing student placement. Responsibilities are outlined in Table 6.

Table 6: National student registration – division of responsibilities

| Education Provider | Placement Provider |
| --- | --- |
| EPs are responsible for registering all students with the Australian Health Practitioner Regulation Authority (AHPRA) under legislation. EPs should notify students that registration has been completed. The definition of an EP is broad.  The EP is required to notify AHPRA if it reasonably believes any students have an impairment that may put the public at risk during a student placement.  The National Board will notify the EP where any decisions about a student’s registration are made, and the EP must notify any PP where the student is placed as soon as possible.  The EP will confirm with the PP that all students of a registered health profession attending placement are registered appropriately 4 – 6 weeks prior to placement. | PPs are to note the AHPRA registration status of students as advised by EPs.  Students cannot provide evidence of registration as they do not receive any (such as a registration number or certificate).  AHPRA cannot provide information about student registration to a health service due to privacy laws. |

Note: The department aims to facilitate this process in Placeright, and this feature will be available subject to further development.

## Resources

* [Australian Health Practitioner Regulation Agency – Student registration](https://www.ahpra.gov.au/Registration/Student-Registrations.aspx) <https://www.ahpra.gov.au/Registration/Student-Registrations.aspx>
* [Health Practitioner Regulation National Law (Victoria) Act 2009](https://www8.austlii.edu.au/cgi-bin/viewdb/au/legis/vic/consol_act/hprnla2009517/) <https://www8.austlii.edu.au/cgi-bin/viewdb/au/legis/vic/consol\_act/hprnla2009517/>
* [Psychology Board of Australia – Provisional registration for psychology higher degree students](•%09https:/www.psychologyboard.gov.au/Registration/Provisional/Higher-Degree.aspx) <•%09https:/www.psychologyboard.gov.au/Registration/Provisional/Higher-Degree.aspx>

## Learning objectives

### Rationale

The purpose of articulating learning objectives prior to each placement is to ensure that students, PPs and EPs agree on the purpose of that particular placement. This enables the PP to manage the student placement so that students’ learning objectives can be met. Where the PPs have the responsibility of assessing student performance, these learning objectives form the basis of this assessment.

### Protocol

Learning objectives for each placement are to be communicated between EPs, PPs and students (Table 7) prior to the placement. Documentation associated with learning objectives should also clearly articulate the scope of practice for the student.

Table 7: Learning objectives – division of responsibilities

| Education Provider | Placement Provider |
| --- | --- |
| Learning objectives are to be provided to the PP and the student prior to the commencement of student placement.  These should be broadly discussed with PPs at the time of placement planning, and the details should be uploaded in Placeright (document library) 4-6 weeks prior to placement commencing.  EPs will provide associated information and documentation relevant to assessing student performance where applicable, including any assessment tools that will be used. | PPs will ensure that the student placement provided to the student meets the learning objectives required, and that they are familiar with the assessment tools to be used. |

## Orientation to location

### Rationale

Students may complete a placement away from home which might require an overnight stay or be in a remote location. Information about local accommodation, facilities, activities and special considerations will assist students to prepare for their placement in a timely and thorough manner.

### Protocol

Information about student placement locations are to be provided to students prior to student placement commencing as suggested in Table 8.

Table 8: Orientation to location – division of responsibilities

| Education Provider | Placement Provider |
| --- | --- |
| EPs are to ensure that students are provided with location specific information at an appropriate time prior to the commencement of student placement at least 2 weeks prior to placement commencing. | Information is to be provided by the PP to each EP for dissemination to students, at least 4 weeks prior to their placement, such that students have any available information that may assist in finding accommodation and other relevant facilities in a timely manner.  This information may be provided as part of the organisation’s orientation handbook at least 4 weeks prior to placement commencing. |

Note: The Document Library in Placeright is available to assist with storing this information.

# On-placement orientation

On-placement orientation ensures that students are appropriately equipped to engage in learning activities at a particular placement site. Orientation addresses safety issues, the structure and function of the organisation, quality issues, student support, and other organisational and professional requirements.

The BPCLE Framework provides a guide for health services, in partnership with EPs, to coordinate and deliver high-quality student placements for health learners. Templates developed as part of the BPCLE Framework Resource Kit can be used in conjunction with these guidelines to develop an orientation program. Orientation programs across sectors, settings and sites share many of the same components and the templates are suitable for users in all sectors. The templates are able to be adapted to reflect organisational characteristics as required. The orientation handbook and program templates contain a list of headings that require organisation-specific information to be inserted by the user, some of which will be the same as that used for inducting staff. As such, these guidelines do not include recommendations around the content of this section but does include a checklist of recommended items to be included. This list will be appropriate for the majority of sites, but in some instances may need to be adapted locally.

A brief explanation of each item included in the placement orientation is provided in Table 9. In addition, a list of relevant BPCLE resources is matched to each item. These resources provide templates to facilitate the generation of documents associated with the student induction process.

Table 9: On-placement orientation materials

| Placement orientation requirement | Recommendation |
| --- | --- |
| Student orientation: pre-placement requirements | Each student placement site should provide an orientation handbook for students, which outlines pre-placement requirements. The standardised student induction protocol provides information and recommendations for each of these requirements. |
| On-placement student orientation: at commencement | student placement sites will deliver an orientation program and orientation checklist to inform students’ understanding of placement site services, including information that is specific or unique to that service provider. Students are to be made aware of their role within the workplace, as well as the roles of colleagues. |
| Student identification (including photo ID) | Students are to carry their university student ID card whilst on placement (unless otherwise requested) and follow the placement provider’s requirements for display. This allows staff and patients/clients to clearly identify students on site and allows the placement provider to ensure that students are who they purport to be. This is particularly important when validating documents provided by the student (e.g. police check, WWCC etc). |
| Occupational Health and Safety (OH&S) | All organisations must have an appropriately documented system to demonstrate compliance with its occupational health and safety obligations as employers under all relevant State and Federal law, including the Occupational Health and Safety Act 2004. During placement orientation, students should be made aware of the PP’s organisational OH&S protocols and requirements and should meet appropriate training as per the organisation’s procedures (eg. Manual handling, bullying and harassment). |
| Introduction to patient and client | Patients and clients must be made aware of the position/ qualification of all people involved in the provision of care and given the opportunity to decline the presence of a student. Students will be made aware of a protocol for introducing themselves to patients/clients and identifying themselves as students. |
| Infection control | Infection control assists in the elimination and/ or minimisation of risk of infection passing between patients/clients and staff. Students are to complete infection control orientation, including hand hygiene.  Hand Hygiene Australia provides student specific training, for which students receive a certificate. This certificate can be presented at each student placement site. This training should be refreshed every 12 months. |
| Privacy and confidentiality | The Health Records Act 2001 regulates the collection and handling of health information and students should be aware of their obligations under this legislation.  Students must be made aware of their legal obligations regarding privacy and confidentiality, in particular when managing patient/client information and data. |
| Social media policy | A social media policy is important in relation to patient/client privacy and confidentiality, as well as the image/reputation of the placement organisation. Students will be made aware of the AHPRA social media policy, in addition to any organisational specific policies. |
| Emergency training | It is important for students to be oriented to emergency procedures within the workplace in which they are located. This knowledge helps students respond safely to emergency incidents, ultimately improving the overall safety practices of a workplace. |
| Code of conduct | Ensuring students are familiar with the organisational code of conduct assists with clarity around acceptable behaviour within the workplace.  Students should also be made aware of any relevant professional codes of conduct. |
| Emergency contact details | Emergency contact details are required in the event that a student is involved in an emergency or becomes unwell. Emergency contact details should be recorded by the placement site for each student on placement. |
| Infection control | Infection control assists in the elimination and/ or minimisation of risk of infection passing between patients/clients and staff. Students are to complete infection control orientation, including hand hygiene.  Hand Hygiene Australia provides student specific training, for which students receive a certificate. This certificate can be presented at each student placement site. This training should be refreshed every 12 months. |

# Resources

* <Australian Charter of Healthcare Rights <http://health.vic.gov.au/patientcharter>>
* [BPCLE Framework Resource Kit - Patient information flyer template](https://www.health.vic.gov.au/education-and-training/best-practice-clinical-learning-environment-bpcle-framework) <https://www.health.vic.gov.au/education-and-training/best-practice-clinical-learning-environment-bpcle-framework>
* <Departmental policy for security screening in funded agencies <https://providers.dffh.vic.gov.au/safety-screening-policy>>
* <The Aged Care Act 1997 <http://www.austlii.edu.au/au/legis/cth/consol_act/aca199757/>>
* <Commonwealth Department of Social Services police check guidelines <https://www.dss.gov.au/sites/default/files/documents/10_2014/police_check_guidelines_23_september_2014.pdf>>
* <Commonwealth statutory declaration forms <http://www.ag.gov.au/publications/pages/statutorydeclarations.aspx>>
* <The Working with Children Check in Victoria <http://www.workingwithchildren.vic.gov.au/>>
* <The national guidelines for interstate work with children <http://www.workingwithchildren.vic.gov.au/home/resources/publications/working+across+states+and+territories>>
* <The Working with Children Act 2012 <https://www.legislation.vic.gov.au/as-made/acts/working-children-amendment-act-2012>>
* [Immunisation for health care workers <https://www.health.vic.gov.au/immunisation/vaccination-for-healthcare-workers>](Immunisation%20for%20health%20care%20workers%20%3chttps://www.health.vic.gov.au/immunisation/vaccination-for-healthcare-workers%3e)
* [Australian Technical Advisory Group on Immunisation.](Australian Technical Advisory Group on Immunisation. The Australian Immunisation Handbook.<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook10-home>)*[The Australian Immunisation Handbook.](Australian Technical Advisory Group on Immunisation. The Australian Immunisation Handbook.<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook10-home>)*[<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook10-home>](Australian Technical Advisory Group on Immunisation. The Australian Immunisation Handbook.<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook10-home>)
* <Health Practitioner Regulation National Law (Victoria) Act 2009 <https://www.legislation.vic.gov.au/in-force/acts/health-practitioner-regulation-national-law-victoria-act-2009/006>>
* <AHPRA student registration information <http://www.ahpra.gov.au/Registration/Student-Registrations.aspx>>
* <The Education and Training Reform Act 2006 <http://www.austlii.edu.au/au/legis/vic/consol_act/eatra2006273/>>
* [The Hand Hygiene Australia training <https://hha.org.au/>](The%20Hand%20Hygiene%20Australia%20training%20%3chttps://hha.org.au/%3e)
* [The Health Records Act <https://www.health.vic.gov.au/legislation/health-records-act>](The%20Health%20Records%20Act%20%3chttps://www.health.vic.gov.au/legislation/health-records-act%3e)
* [The Occupational Health and Safety Act <https://www.legislation.vic.gov.au/as-made/acts/occupational-health-and-safety-and-other-legislation-amendment-act-2021>](The%20Occupational%20Health%20and%20Safety%20Act%20%3chttps://www.legislation.vic.gov.au/as-made/acts/occupational-health-and-safety-and-other-legislation-amendment-act-2021%3e)

1. Department of Health, The Australian Charter of Healthcare Rights in Victoria, 2010. [↑](#footnote-ref-2)
2. Department of Health and Aged Care website - <<https://www.health.gov.au/topics/aged-care?utm_source=health.gov.au&utm_medium=redirect&utm_campaign=digital_transformation&utm_content=agedcare>> [↑](#footnote-ref-3)
3. [↑](#footnote-ref-4)
4. [↑](#footnote-ref-5)