



National Placement Evaluation Centre

2023 Summary



**HEALTH EDUCATION
SERVICES AUSTRALIA**

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Glossary

Industry: A clinical provider e.g., hospital, aged care, primary care facility.

Placement Evaluation Tool (PET) total rating: Items 1 to 19 of the PET are summed as a total rating of education placement quality.

Placement Evaluation Tool (PET) overall satisfaction: Item 20 is used to report respondents' overall placement satisfaction.

Supervisor: the use of the term 'supervisor' encompasses the role of mentor/ facilitator/ preceptor/educator which depending on the model may be a tertiary education or an industry organisation-based position. Nursing and midwifery students are normally required to be supervised by a Registered Nurse/Midwife respectively. Supervisors are identified as a Facility RN/RM; Facility Clinical Educator; and University Educator. The latter two are likely to be clinically supernumerary.

Executive Summary

This report is intended as a summary of the National Placement Evaluation Centre (2023) and is pertinent to all partners including academics, clinicians, educators and students. A full Scientific Report and scholarly peer reviewed publications expand this summary, see: <https://npec.com.au/references-and-bibliography/>

Background

In Australia degree level nursing and midwifery students are required to complete professional practice experiences (PEP), or midwifery practice experiences (MPE), also known as clinical placements, as part of their education. For both professions the accreditation authority requires that there is monitoring and student evaluations of clinical placements.

The National Placement Evaluation Centre (NPEC) was commissioned in 2022 and funded by the Council of Deans of Nursing and Midwifery (Australia and New Zealand) (CDNM) and the Australian Nursing and Midwifery Accreditation Council (ANMAC). NPEC is now owned and funded by Health Education Services Australia (HESA) which is a wholly owned subsidiary of ANMAC.

The aim of the Centre is to measure and enhance the quality of nursing and midwifery clinical placements through rigorous evaluation and quality improvement processes.

An education management software system was developed to establish a data repository for quality benchmarking based upon previously developed evaluation tools – the Placement Evaluation Tool (PET) for nursing and midwifery students (<https://npec.com.au/clinical-placement-rating-tool/>). The PET incorporates rating scales and space for free text comments. Students are asked to complete an electronic form of the PET after each placement. De-identified results are immediately available to their respective universities and to the industry clinical site where placement was completed. Email ‘low rating alerts’ are sent to clinical coordinators to enable immediate responses. Summary ratings include an overall mean score for placements across the country, acting as a benchmark for institutions. Diploma of Nursing students were not included in this first iteration of the Centre.

Results

In 2023 the newly commissioned NPEC successfully engaged with numerous education and industry partners across the sector including 1,862 listed clinical sites, 462 individual registrations from educators and clinical managers and over 18,000 placement reviews from nursing and midwifery students.

Nursing: Of the 37 universities/Technical and Further Education (TAFE) providers who offer a nursing degree program leading to registration as a Registered Nurse (RN) with the Nursing and Midwifery Board of Australia (NMBA), 36 had enrolled by the end of 2023. The University of Tasmania did not register preferring their own faculty-wide placement evaluation scheme. In total 17,705 evaluations of placement were received from nursing students, from 35 of the enrolled universities.

Overall, these students were very satisfied with their placements with a high overall mean rating of 8.27/10. Older students and male students rated their placements significantly higher than younger and female/non-binary students. Those who did not speak English at home and international students, also rated their placement higher. Further, supervision by facility clinical educators, versus facility RN supervisors, led to higher satisfaction ratings, as did longer placements of 22-28 days. Emergency Department (ED) and Intensive Care Unit (ICU) placements were rated the highest (with a large effect size) with aged care placements the lowest.

In addition, from a regression model, second and third year nursing students rated their placements lower than first year and graduate entry Masters students rated their placements lower than those enrolled in other entry to practice degrees.

Midwifery: Of the 23 Australian universities who offer a midwifery degree program leading to registration as a midwife with the NMBA, 17 had enrolled by the end of 2023. A total of 801 placements were evaluated by midwifery students with high overall mean placement ratings of 8.08/10. In relation to degree enrolment post graduate diploma students and dual degree students rated their placements highest (with a medium effect size), as did non-indigenous students. Placements of 10-14 days were rated highest and older students were less satisfied with their placements. There was no significant difference in evaluations between placement categories (e.g., antenatal, neonatal) or models of placement (i.e., rostered or continuity of care).

Of note, in relation to the nursing placement evaluation predictors, the effect sizes are generally small, and it is likely that placement ratings are largely independent of personal characteristics. The implication being that nursing students are truly rating placement education quality with little influence from demographic and other extraneous sources.

For both the nursing and midwifery cohorts, 1086 students raised significant concerns, through either low overall ratings or through free text comments. These related to unprofessional and uncivil behaviour from staff who are unwilling to supervise or engage with students. Access to suitable learning experiences also varied considerably.

Conclusion

The NPEC is the first international multi-professional centre to be undertaking such work. Overall, in 2023 nursing and midwifery degree level students in Australia positively evaluated placements identifying outstanding learning experiences and supportive staff across all health sectors. However, a minority are highly dissatisfied with reports of uncivil staff, poor supervision and inadequate learning experiences.

As the 2023 NPEC results have established a baseline, it will now be possible to start to address the issues and concerns raised through direct reporting between industry and education and for stakeholders to work collaboratively on suitable educational interventions to enhance outcomes.

Key Messages

- The NPEC is the first centre in the world to collect and report on clinical placement outcomes from more than one profession.
- During 2023 the NPEC listed 1,862 clinical sites, 462 registrations from educators and managers and over 18,000 placement reviews from nursing and midwifery students.
- Nursing students were very satisfied with their placements (mean 8.27/10).
 - Placement ratings were most influenced by the clinical site e.g., EDs and ICUs were rated significantly higher than other venues, such as Aged Care.
- Midwifery students were also very satisfied with their placements (mean 8.08/10).
 - Placement ratings were most influenced by:
 - Degree enrolment: post graduate diploma and dual degree students were significantly more satisfied with their placements than those enrolled in other degrees.
 - Non-indigenous students were significantly more satisfied with their placements than indigenous students. Placements of 10-14 days were rated highest and older students were less satisfied with their placements.
- However, a total of 1086 nursing and midwifery students raised concerns about their placements, including reported incidents of unprofessional and uncivil behaviour from staff who were unwilling to supervise or engage with students in these settings. Action is required to enhance staff education and attitudes in these settings.
- A critical feature of the NPEC is the alert system for real time notification of negative student ratings to participating institutions. Through email 'low rating alerts' clinical coordinators can immediately respond to concerns and enact the quality improvement cycle; ultimately leading to the adoption and design of suitable interventions to enhance placement education across Australia and beyond.
- Health professional clinical placement education requirements are similar across the professions. Future expansion of the NPEC and the application of its evaluation tools will enable multi-professional standardised ratings across multiple professions, for evaluations within and between the professions.

Introduction and Background

In Australia nursing and midwifery students are required to complete professional practice experiences (PEP) or midwifery practice experiences (MPE) respectively, also known as clinical placements, as part of their education. Whilst each program is different, all are accredited by the Australian Nursing and Midwifery Accreditation Council (ANMAC) to meet the standards, which for Registered Nurses includes Standard 3.12 “a minimum of 800 hours of quality PEP completed by all students in a variety of settings, relevant to the curriculum” (1) (p.8). For midwives MPE includes inherent requirements of care including, continuity of care experiences; supervised attendance at 100 episodes of antenatal and 100 of postnatal care; acting as the primary attendant for 30 women who experience a vaginal birth; conducting 20 full examinations of a newborn infant; and experience in caring for 40 women with complex needs (2) (p.15-16).

In both the nursing and midwifery Accreditation Standards there is a requirement for monitoring student evaluations of placements. Standard 4.7 (1, 2) reads “Student experiences across all teaching and learning environments are monitored and evaluated regularly with outcomes informing program quality improvement” (p.17). In summary, the ANMAC highlight the need to collect feedback from both students and educators, to provide placement experience venues with feedback and to follow up on all evaluations.

However, what constitutes a quality placement is unknown. Internationally PEP hours for nursing students vary from 800 in Australia to 1,100 -1,500 in New Zealand, 2,300 in the UK, and 2,800 in South Africa (3). There appears to be no foundation or evidence for the number of hours allocated (4) and students are often exposed to negative (5) as well as positive experiences, regardless of hours completed (6). Further, whilst such ‘real world’ exposures are essential, concerns have been raised as to the clinical competence of new nursing graduates (7). As such, and in line with a recent review of nursing education (8), it is an imperative to evaluate the quality of clinical placements in Australia through direct feedback from students to enhance placement quality in Australia and beyond.

With these considerations in mind the Deans on the Australian Council of Deans of Nursing and Midwifery, Australia and New Zealand (CDNM) supported initial Stage 1 work in 2018-19 to develop a set of rigorous evaluation instruments. Federation University Australia was contracted to undertake this work. The intent was to measure the quality of placement experience from the perspective of nursing and midwifery students and their supervisors and to enable national benchmarking and quality improvements at clinical placement sites. In 2022-23 Stage 2, the CDNM, ANMAC and their education subsidiary Health Education Services Australia (HESA) commissioned further work to develop a centralised data repository under the auspices of the National Placement Evaluation Centre (NPEC). A summary of each stage is described below.

Stage 1: Following a review of the contemporary literature and rigorous development stages the Placement Evaluation Tool (PET) (nursing) was trialled in a survey of 1,263 nursing students. The PET was found to be valid and reliable with two distinct subscales ‘Clinical environment’ and ‘Learning support’. Importantly the PET is limited to 20 items. The first 19 items enable respondents to evaluate education quality and item 20 relates to overall

satisfaction, making on-line completion fast and feasible (9). A full link/copy of the publication and tool is available at: <https://npec.com.au/>.

At the same time the PET (Supervisor) tool was developed through minor changes to stem questions in the PET (Nursing), for example item seven “I felt valued during this placement” was altered in PET (Supervisor) to “Students were valued during this placement”. Subsequently, similar minor changes were made to the PET (Nursing) to develop the PET (Midwifery) for example changing the term ‘patient’ to ‘women’. Discrete validation of the PET (Midwifery) was completed in 2023 identifying a high Content Validity Index (CVI) [$> .90$] for relevance and clarity and a high Cronbach’s alpha ($\alpha = .957$) for reliability (*paper under review*) [PET (Midwifery) <https://npec.com.au/clinical-placement-rating-tool/>].

Stage 2: The NPEC website was developed listing the Centre’s aims, the team, publications, education resources and rating tools <https://npec.com.au/>. Following in depth business, legal and ethical decisions an Education Management System (EMS) was built using the WordPress platform. This enables students and educators to evaluate placements for the purpose of local and national reporting.

The specified aim and objectives of the NPEC are:

Project Aim

To measure and enhance the quality of nursing and midwifery clinical placements through rigorous evaluation and quality improvement processes.

Project Design

An exploratory mixed methods co-design project. The project incorporates participatory co-design principals to actively involve those who will become the ‘users’ throughout the design development process (10). This includes those with lived experience of clinical placements (students, lecturers, supervisors, industry partners etc) who are involved as active design partners, generating ideas, prototyping, gathering feedback and making changes. This approach enables a deep understanding of clinical placements and high utility assessment approaches.

Methods (in relation to objectives):

Objective 1 (achieved 2022): Finalise the business model and protocols for a national evaluation of placement education quality and satisfaction:

- A Memorandum of Understanding between the CDN and HESA in relation to intellectual property and funding.
- An Intellectual Property transfer agreement between Federation University (as the service provider) and HESA.
- Terms of Use – for the digital repository.
- A Privacy Policy.

- Ethical oversight. The project was designated as a quality improvement and evaluation project by the Human Ethics Committee at the University of Wollongong. <https://npec.com.au/ethics-exemption/>
- A service agreement between Federation University and HESA.

Objective 2 (achieved 2022-23): Conduct a literature review and consultation with educational developers to develop a range of interactive educational resources that will enhance placement supervision, for example:

- The National Clinical Supervision Competency Resource (Victoria, Australia).
- Support for Supervisors (University of Tasmania).
- Clinical skills development programs.
- Clinical placement assessment methods and tools.

See: <https://npec.com.au/educational-resources/>

Objective 3 (achieved 2022-23): Test and refine the education management system (EMS) to manage survey software and provide stakeholders with personalised data sets and generic anonymised reports for national benchmarking.

Data Collection: Student and Supervisor reports:

Evaluation reports, using the PET (Nursing) and PET (Midwifery), are collected from nursing and midwifery students on completion of each clinical placement. Each university is provided with an institutional weblink and QR code to the survey and are asked to distribute this link to individual students immediately on completion of a clinical placement, with a reminder issued seven days later. Enrolled clinical placement providers are also provided with a QR code to the PET (Supervisor) with the request that supervisors rate their clinical unit each time a student or student group completes a placement there.

The PET can be accessed easily by smart phone and other web-enabled electronic devices and takes on average four minutes to complete. Respondents can request an emailed copy of their individual report should they wish to retain a copy.

University distributed invitations to students explain the nature of the survey and ask them to contact their university clinical coordinator should they wish to discuss their placement experience. Respondents are not asked to name themselves however de-identifiable personal demographic data are collected, such as university enrolment, age, and the placement site.

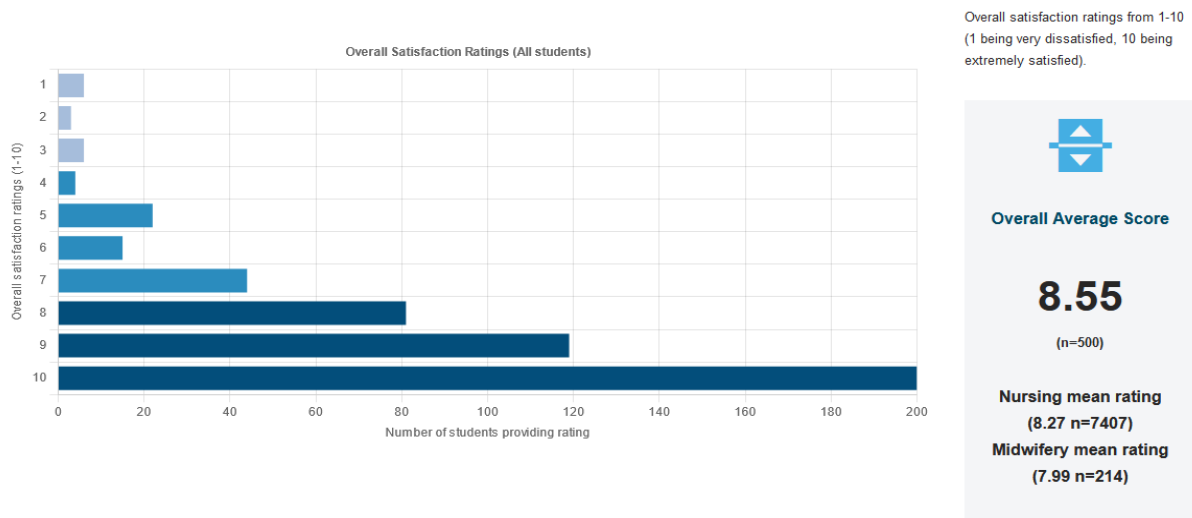
Each university can access their own students' evaluations which are summarised in chart form (see example in Figure 1) or as a downloadable spreadsheet which are made available to designated and approved clinical coordinators at each partner university/industry placement.

Low rating alerts: In addition to summaries of ratings for the first 19 PET items, overall placement satisfaction (PET – item 20) is regarded as a key indicator (11, 12) with university

coordinators receiving a system email alert where a respondent has rated a placement at four or less on this item (range 1-10 points). This enables them to follow through with the placement site and a group of students as they see fit.

Figure 1: NPEC Example of a summary report

Overall Satisfaction Ratings



As indicated industry supervisors are also sent the PET (Supervisor) form and asked to rate their placement setting. Industry clinical coordinators can access summaries of their own student evaluations from those attending their departments. However, to protect student identity, reports are only released to clinical sites when seven or more students have attended a clinical unit within a calendar year. Ultimately this will enable the NPEC to triangulate reports from students and placement sites to identify rating similarities or differences, enabling the development and enhancement of clinical education.

Objective 4 (2022-2025) Development and maintenance of a quality improvement process that enables applicable and timely feedback to students and institutions, leading to appropriate educational enhancement as required.

In line with established clinical practice improvement models which aim to ‘plan’; ‘do’; ‘study’; and ‘act’ (13) a quality improvement process was developed and maintained to ensure applicable and timely feedback to students and institutions. This includes:

- The establishment of a Governance Committee whose current members include:
 - Mr Ian Frank AM (HESA Director and Chair NPEC Governance Committee).
 - Professor Roianne West (HESA Chair).
 - Professor Karen Strickland (Chair CDNM and Deputy Director NPEC).
 - Professor Simon Cooper (Director NPEC).
- The establishment of the ‘Core Project Team’ (<https://npec.com.au/project-team/>) meeting monthly, an ‘Advisory Committee’ who meet quarterly and monthly ‘User Group’ meetings.
- A robust data collection system incorporating qualitative and quantitative methods (e.g., PET ratings and free text comments).

- System trials and an annual review of progress with implementation of applicable changes.

Enrolment in the NPEC

Webpage visits: During 2023 the PET (Nursing) webpage was visited 82,397 times by 26,324 unique visitors, as identified by Google Analytics. From this there were 24,245 engaged sessions, which are identified as a visitor who interacts with the site by scrolling, clicking or visiting other pages. Of those engaged visits 17,804 completed an evaluation. Engagement was therefore high (73%) with an average engagement time of just under 4 minutes across all webpage visits. The recommended engagement rate is 60-70% (14).

Email invitations: Additionally, Google Analytics indicates that 80,996 email links were clicked from university survey invitations (a 22% response rate), resulting in 23,368 students engaging to complete an evaluation, or interacting with the site in some other way, resulting in 17,804 submissions (a 76% completion rate). As expected, most website visits came from Australia 108,226, followed by the USA 1,141 and 753 from seven other countries.

In 2023 there were 81,296 students undertaking a degree program leading to registration as a RN across 37 institutions (Ahpra email confirmation, Jan 2024). Of these 36 are universities and one is a TAFE provider.

2023 was the first full year for the NPEC, and education institutions and industry partners gradually enrolled throughout the period, following authorisation and legal reviews etc. By the end of the year, 462 individuals had registered enabling them to send surveys and view findings for their respective placement sites only. Additionally, 1,862 placement venues were listed covering primary, secondary and tertiary care settings, for example, hospitals, community care and general practice. By year end, all applicable Australian mainland education institutions had registered (n=36) and begun to circulate surveys to students. The University of Tasmania did not register preferring their own faculty-wide placement evaluation scheme. As some institutions started collecting student reports at the start of the year and some only at the end there was a wide range of response frequency across education institutions and industry partners.

For this reason and others, including the fact that students are de-identified and may have reported on one or more placements, response rates can only be estimated. As indicated, email requests to students to complete the nursing survey resulted in an overall response rate of 22%. However, for two higher responding institutions who collected reports throughout the year, the approximate response rate was 49.4%. Qualtrics state that a survey response rate of 20-30% is normal and that 50% is good (15).

In 2023 there were 23 Australian universities offering a degree program leading to registration as a midwife. During the year, 17 of these enrolled with the NPEC. However, recruitment was slower than for nursing programs and again many enrolled late in 2023 with six education institutions electing not to do so. As such any in-depth analysis of engagement and response rates would be premature in this first year.

In future years it is likely that response rates will increase significantly as the system and reporting requirements become normalised. As reported above NPEC also produced a rating scale for supervisors - PET (Supervisor) - to enable staff to rate their own site(s) after student(s) have attended. The roll out of this form only commenced in latter parts of 2023, hence outcomes will not be reported for 2023.

Brief Summary of Outcomes

An in-depth statistical analysis was conducted and is available in the scientific report. Nursing and midwifery students allocated lower ratings in relation to being valued, the quality of feedback and interactions with the multi-disciplinary team. This is important as it implies the need to enhance the culture of acceptance and quality of supervision for students within multi-disciplinary teams.

Interestingly, international nursing students were significantly more satisfied than domestic and higher acuity placements were much preferred. For example, ED and ICU placements were rated the highest (with a large effect size) with aged care placements rated the lowest.

For midwifery students, indigenous students rated their placements significantly lower than non-indigenous students (a medium effect size) and post graduate diploma and dual degree students rated their placements highest (also a medium effect size).

Overall, the analysis showed that placement ratings are largely independent of personal characteristics. The implication here is that students are truly rating placement education quality with little influence from demographic and other extraneous sources. The full scientific report and nursing and midwifery scholarly peer reviewed publications detail the outcomes.

Analysis of students' free text comments was also undertaken. Both nursing and midwifery students reported on a plethora of positive learning experiences including welcoming supportive staff and supervisors, in a culture of teaching and learning.

However, there were reports of suboptimal learning from nursing 1046 (5.9%) and midwifery 40 (4.9%) respectively. Reported comments and emergent themes referred to unprofessional and uncivil behaviour with staff unwilling to supervise or engage with students. Access to suitable learning experiences varied. Students could be placed in low acuity settings or in observational roles, sometimes without supervision and "*left to float around*". Scope of practice was also reduced to performing vital signs, described by one student as being "*an obs monkey*". Placements were also at times overrun with students which for midwifery students meant that there was a lack of access to pregnant or labouring women.

Limitations

In this first year of the NPEC a major limitation is the variance in student response rates from enrolled institutions. A few universities did not enrol until late in 2023 and hence may not have distributed surveys to students. Further, the uptake from midwifery programs was

slower than for nursing, with a proportionally lower sample, reducing the generalisability of the findings. In future years it is likely that response rates will substantially increase as the system and reporting requirements become normalised.

Conclusion

In 2023 the newly commissioned NPEC successfully engaged with numerous education and industry partners across the sector with over 400 individual registrations, 1,862 listed clinical sites and over 18,000 placement reviews received from nursing and midwifery students. Overall ratings of placements were high with both nursing and midwifery students allocating ratings of greater than 8/10, whilst raising similar concerns relating to their acceptance in the workplace and the quality of supervision.

The vast majority of students in Australia have outstanding learning experiences with supportive staff across all health sectors. However, some (a total of 1086 nursing and midwifery students) have very unsatisfactory placement experiences relating to unprofessional and uncivil behaviour with staff unwilling to supervise or engage with students. Access to suitable learning experiences also varied considerably.

As the NPEC has now established a baseline, it will now be possible to start to address the issues and concerns raised e.g., via the low rating alert system, through direct reporting between industry and education and suitable educational interventions to enhance outcomes.

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