Standards for Effective Clinical Learning Environments
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PREFACE

The UAE Nursing and Midwifery Council (UAENMC) as the national regulatory body for nursing and midwifery, is mandated to promote and protect the health of the public by establishing unified standards for regulation, education and practice. Recognizing importance of ensuring the existence of a supportive clinical leaning environment for learners in the UAE Healthcare organizations, the UAENMC Scientific Committee for Education focused on developing standards for supportive clinical learning environments.

This document presents standards for educational institutions and practice settings in the UAE to establish and maintain supportive clinical learning environments. These standards serve as guidelines to be used by educational institutions and practice settings to ensure supportive clinical environments are established for the benefit of students and mentors alike.

We are grateful to the dedicated members of the Scientific Committee for Education and to all of the many contributors to this work. With this document we will be able to establish a collaborative approach toward advancing nursing and midwifery education in the UAE.
ACKNOWLEDGEMENTS

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- H.E. UAE Minister of Health.
- The UAENMC Board members.
- All members of the Scientific Committee for Education who represent key constituents, including the Health Authority, Abu Dhabi, Dubai Health Authority, SEHA, Dubai Healthcare City Authority, University of Sharjah, Fatima College of Health Sciences, RAK Medical and Health Sciences University, Higher colleges of technology.
- All nursing colleagues and UAENMC staff who participated in the development, validation and revision of this document.
- All institutions and individuals who contributed to the development of this document.

This document establishes a nation-wide direction for the educational institutions and practice settings to establish supportive clinical learning environment for learners required to raise the quality of education of the UAENMC programs in line with international standards.
EXECUTIVE SUMMARY

The UAENMC has the responsibility to safeguard the public by establishing regulatory, practice and education standards that promote safe nursing care. With this context the UAENMC Scientific Committee for Education has established standards to promote a supportive clinical learning environment with the intent that these standards will be used in practice and education settings. The aim of these standards is to ensure students have a positive learning experience so they acquire the knowledge and skills required for safe practice upon graduation.

The UAENMC Scientific committee of Education developed these standards for Clinical Learning Environments through a collaborative process with representatives of all stakeholders from practice and education organizations across the UAE. They first participated in a visioning session held on 24th of April, 2014. The participants collectively brought expertise about nursing and midwifery education, practice, research, and regulation from local, regional and international perspectives. The stakeholder input was used to develop this document that will serve as guidelines for educational institutions and practice settings to establish supportive clinical learning environments for learners.

In addition to the input of UAE nursing stakeholders, the developed standards draw extensively from internationally accepted standards such as the WHO Global Standards for the Initial Education of Nurses and Midwives 2009; the National League of Nursing Core Competencies for Nurse Educators 2005; the recommendations of the Clinical Education Think Tank on Transforming Clinical Education 2008; the Irish ‘An Bord Altranais’ Guidelines 2003; the American Colleges of Nursing Association’s Essential for Baccalaureate for Professional Nursing Practice 2008; and, HETI’s Supervision Super-guide for Nurses and Midwives (2013).

These standards provide further development of the nursing and midwifery strategy proposed by the UAENMC and place emphasis on safety, quality and satisfaction as important indicators of quality nursing care; professional ethics and conduct which outline standards of professional and personal behavior as based on ethical principles, undergraduate and post graduate clinical curricula. Standards also specify partnership development between educational institutions and practice settings to ensure a well-structured and supportive learning environment, with well-prepared faculty and preceptors who are committed to the learner’s experiences and outcomes. (UAENMC Education Strategy, 2013)

It is the intent of the Council, collaborating with relevant stakeholders, to work with universities to assure the highest level of quality for nursing and midwifery programs in the UAE. The Council considers accomplishing success in this goal is essential to building a cadre of expert nurses and midwives to care for the people of the UAE in the short term and into the future.
INTRODUCTION

Supportive clinical learning environments are central to the effective education of future nurses and midwives. The clinical learning environment is the place where learners integrate theory and practice to deepen their knowledge and develop skills and competencies required for future practice. “The aim of clinical practice learning is to enable students to develop the domains of competence and become safe, caring, competent decision-makers willing to accept personal and professional accountability for evidence-based nursing/midwifery care” (An Bord Altranais 2003 p 2).

Because of its central role in the effective education of future nurses and midwives, clinical learning environments must be supportive of learners, faculty and preceptors and offer experiences that are patient and family centric, emphasizing safety and quality throughout.

Educational and clinical institutions must collaborate to ensure that structures and systems are established for faculty and preceptor partnerships that promote integrated learning experiences and assure safe care for patients and families. The scope of practice issued by The UAE Nursing and Midwifery Council emphasizes the inherent role of education and advancement of knowledge as a central responsibility for all practicing nurses and midwives. As such, clinicians hold an important role in establishing a supportive environment for learners. “Clinical teaching is the process of developing and sharing professional knowledge. It is the opportunity for an experienced clinician to transfer knowledge and skills to one who has less understanding in that clinical area. It is a key responsibility of every nurse and midwife throughout their professional lives” (HETI 2013)

This document presents standards that address these concepts. It is the intention of the Scientific Committee for Education that these standards are reviewed and adopted by educational and practice based institutions alike.

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STANDARD ONE: SAFETY, QUALITY AND PATIENT/FAMILY SATISFACTION

Patient safety and satisfaction are essential and important indicators of quality nursing care. As such, the learning environment must be structured with a client/patient centric approach that emphasizes safety, quality and patient/family satisfaction. Learning experiences must be organized around these essential concepts of care and learners exposed to systems and clinical interventions that promote quality as well as to the organizational structures that measure and manage quality and safety outcomes. This is the joint responsibility of faculty, preceptors and learners, collaborating to establish a positive clinical environment as the setting for effective clinical education.

- A patient/family-centered approach to care is emphasized.
- Patient safety, quality and patient/family satisfaction principles are emphasized throughout the learning experience; techniques for the establishment, measurement, and monitoring of safety, quality and satisfaction are used.
- Learning objectives focus on patient outcomes including safety, quality and patient satisfaction as well as clinical and organizational outcomes.
- Clinical practice experiences are organized to provide learners with the opportunity to gain clinical skills safely in healthcare practice settings through supervised, direct access to patients/clients.
- Mechanisms are in place to ensure that consent is granted for the observation or provision of care by students.
- The licensed registered nurse preceptor maintains full responsibility for all aspects of patient care.
- Mechanisms are in place to provide learner’s with feedback regarding safety, quality and patient satisfaction in their clinical learning experiences. Tasks and responsibilities are not delegated beyond the skill and experience of the student.
- Malpractice insurance is in place, consistent with the regulatory authorities of the UAE and the clinical learning settings.
STANDARD TWO: PROFESSIONAL ETHICS and CONDUCT

The Code of Conduct for Nurses and Midwives, 2013, published by the UAENMC serves as the foundation for nurses/midwives ethical practice. It defines the ethical responsibility inherent in the nurse and midwife’s role and supports the need to protect and promote the interest of the client, family, community and society in the UAE. The Code of Conduct outlines standards of professional and personal behavior as based on ethical principles.

The Code of Conduct is the profession’s non-negotiable ethical standard. It is a statement of the ethical obligations and duties of every person in the profession, in all roles and settings, including students, preceptors and faculty. The Code of Conduct is an expression of the profession’s interpretation of its commitment to society. It informs the employer, the public and other healthcare professionals about what they can expect from nurses and midwives.

- THE UAENMC Code of Conduct governs all aspects of faculty, preceptor and learner placement practice in the clinical learning environment
- All faculty, preceptors and students are aware of and are bound by the professional and ethical standards and professional code of conduct relevant to each health service in which learners receive clinical experience
- All faculty and learners sign required facility specific client confidentiality forms, and other relevant documentation prior to the commencement of clinical placements, as required by facility policy.
- Clinical learning emphasizes professionalism which epitomizes caring, and demonstrates ethical behaviour in patient care, including the following as specified by the UAENMC Code of Conduct.
  - Valuing people with respect, integrity, and partnership
  - Consistently practicing with responsibility and accountability, competence, safety, confidentiality, and appropriate delegation
  - Engaging with colleagues in the spirit of teamwork and collaboration
  - Managing one’s professional practice through evidence based practice, lifelong learning, and consistently exhibiting a professionalism image

STANDARD THREE: UNDERGRADUATE AND POSTGRADUATE CLINICAL CURRICULA

Nursing and midwifery clinical curricula include clearly stated objectives which are communicated to the learner, preceptor and all health service providers involved in the educational experience. Educational institutions should ensure that all nurse educators or clinical preceptors have access to and are familiar with course objectives and expected outcomes in the curriculum overall and in each clinical placement.

Curriculum and Clinical Education:

- Nursing and midwifery education is integrated to link theory and clinical learning to support the attainment of knowledge and practice based skills, competencies and professional attitudes.

- Clinical learning experiences promote a broad and diverse perspective on and competence in nursing and midwifery’s complex roles in prevention and chronic and acute care management across community, ambulatory and acute care environments.

- Clinical learning focuses on developing and refining the knowledge and skills necessary to manage care as part of an inter-professional team. Through clinical learning experiences, Learners are immersed in the nursing role and have supervised experiences in the many responsibilities of a nurse including assessment, clinical reasoning, management, and technical skills. Clinical immersion experiences provide opportunity for the learners to:
  - Undertake roles as a provider of care and develop a beginning proficiency and efficiency in delivering safe care
  - Evaluate client changes and progress over time
  - Follow client progress and deliver care from admission through discharge
  - Manage care transitions
  - Be an active participant of the inter-professional team
  - Identify systems issues
  - Develop working skills in delegation, prioritization, and oversight of care
  - Evaluate and reflect upon their practice
  - Serve as advocates for those entrusted in their care

- Clinical experiences are of sufficient length, in accordance with accreditation standards, to ensure that faculty and preceptors have the opportunity to observe student performance over time and effectively evaluate the Learner’s professional development and competence.

- Faculty members and preceptors work closely with learners to focus on attainment of competencies.
• A range of progressive educational approaches is established to ensure safe and effective learning.

• Simulation experiences augment clinical learning and are complementary to direct care, are available to supplement clinical learning opportunities that are essential to assuming the role of the professional nurse.

Curriculum Review:

• Curriculum review is conducted on a regular basis; updates and improvements are made in accordance with accreditation standards.

• Nursing and midwifery programs ensure that clinical partners hold membership on program review committees where clinical components of the curriculum are evaluated and reviewed.

STANDARD FOUR: CLINICAL EDUCATION PARTNERSHIPS

It is essential for nursing and midwifery educational institutions to partner with clinical placement provider organizations to provide access to well-structured clinical learning environments for learners. The education institution and clinical placement provider are jointly accountable for providing clinical placements that achieve goals and outcomes of the nursing education program.

Clinical Education Partnerships and Access to Placements for Nursing and Midwifery Schools:

• Demonstrate successful partnerships with the academic institutions where their programs are located, with other disciplines, with clinical practice sites, with clinical and professional organizations and with international partners.

• Have access to, and arrangements for, the clinical learning sites required for program delivery.

• Ensure that official agreements are in place for all clinical placements and other forms of experiential education and those agreements are signed by both parties, kept current and on file. Such agreements should define the responsibilities of both academic and clinical partners.

• Ensure that all clinical preceptors have access to and are familiar with the course objectives and expected outcomes of the overall curriculum each clinical placement.

Placement Requirements:

• Clinical placement agreements include a formalized list of pre-placement requirements including provision of:
  o Signed confidentiality agreements
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- Signed acknowledgement of receipt of health provider policies, procedures, ethical standards and code of conduct and code of patient’s rights
- Provision of placement specific student learning objectives and assessment criteria
- Current basic life support qualifications for all faculty and learners
- Current immunization certificate for all faculty and learners in accordance with regulatory authority requirements
- Required ID documentation

Clinical Practice settings (Learning Environment):
The Clinical placement environment is conducive to effective and efficient learning that promotes the development of clinical competency that is characterized according to the following set of guidelines:

- Nurses are valued, highly motivated and deliver quality patient/client care.
- Nurses are characterized by supportive relationships, positive morale and a team spirit.
- Effective communication and interpersonal relations exist between all members of the healthcare team and the learners
- Learners are welcomed and valued for their contributions to the delivery of quality patient care
- Learners are actively engaged with supervision in patient care activities.
- Learners have adequate time and feedback to facilitate learning and the achievement of objectives
- Faculty creates “safe” space for learners to question, reflect on their practice.

Resources:
- Academic institutions have a designated office or an individual who is specifically given responsibility for clinical placements and other forms of experiential learning. The office may be central for the entire institution or it may be departmentally or programmatically centered (CAA – Stipulation 6)

STANDARD FIVE: FACULTY AND PRECEPTORS

Faculty and preceptors share accountability for learners’ experiences. Accountability for patient care is placed with the clinical preceptor who is a licensed professional employed by the clinical setting. Accountability for learning is a shared responsibility with the educator and clinical preceptor contributing based on their roles and licensing authority.

Nursing and midwifery schools ensure that:
- Faculty comprises nurses, midwives and other health professionals who hold appropriate post graduate qualifications and possess clinical and educational expertise in their specialty area and meet competencies required for nurse educators.
• Faculty should be licensed to practice by relevant authorities. Faculty are responsible for maintaining such license.
• Faculty who provide instructional duties for the clinical phase of the program should have indemnity insurance.
• Processes are in place to ensure faculty remain connected to clinical practice and remain current and licensed to practice.
  o A responsible faculty member is assigned to each placement setting and plays a central role in the clinical education of the learner.
  o Faculty and preceptor role descriptions are in place that define the roles and responsibilities of each and structure the collaborative processes.
  o Faculty are oriented and supported in their roles as clinical instructor.
• Preceptors are oriented to the role of clinical preceptor and are supported by the faculty members in that role.
• The entire team in the clinical setting where the students are hosted is oriented and attuned to creating a supportive clinical learning environment. The team supports the faculty and preceptors in comprehensive clinical learning experiences for learners.
  o Learning outcomes are articulated and communicated in writing to the faculty, preceptors and students.
  o Learners undertaking clinical placements or other forms of experiential education have access to a syllabus which provides clear guidance as to the expectations for student’s learning, students’ assignments, student evaluation and faculty/employer’s supervision.

**Health service providers and preceptors**

• Health care facilities provide an orientation for students as to the skills, behaviors and knowledge which they need to succeed in the clinical environment.
• Institutional policies around clinical learning experiences are in place; faculty and preceptors are aware of these policies. Learners are orientated to institutional policies and comply with all policies and maintain an emphasis upon the principles of patient quality and safety.
• Learners learn through and from practice under the supervision of licensed registered nurses and midwives.
  o Preceptorship is utilized to support student learning.
  o Each student is assigned a qualified preceptor during clinical practice placement who has completed a formal preceptor training program or its equivalent.
  o Preceptors are oriented to the role of the preceptor and are supported by the healthcare institution in their role.
  o The philosophy of nursing/midwifery is explicit and model(s) of nursing/midwifery care utilize a systematic approach to frame the assessment/nursing diagnosis, planning, implementation and evaluation of care.
  o Policies, protocols and guidelines, evidence based care and research based standards of care are evident and accessible.
STANDARD SIX: ASSESSMENT AND EVALUATION

Assessment and evaluation are essential steps in the learner’s preparation for the practice settings. Evidence-based assessment and evaluation strategies are developed to assess the student’s learning in all domains in clinical settings which include:

- Explicitly stated learning objectives, assessment criteria and expected outcomes
- Opportunity for self-assessment
- Frequent formative, timely, constructive, and thoughtful feedback
- Formalized summative processes with feedback
GLOSSARY

CAA: Commission for the Academic Accreditation, Ministry of Higher Education and Scientific Research. UAE Standards for Licensure and Accreditation

CLINICAL TEACHING: Clinical teaching is the process of developing and sharing professional knowledge. It is the opportunity for an experienced clinician to transfer knowledge and skills to one who has less understanding in that clinical area (HETI, 2013)

CLINICAL EXPERIENCE: Clinical practice experience provides learning opportunities that enable the achievement of competence in clinical nursing skills and stated learning outcomes (An Bord Altranais, 2003)

FACULTY, NURSE EDUCATOR, CLINICAL EDUCATOR, CLINICAL INSTRUCTOR: these terms have distinctions within educational institutions but in the context of this document are used interchangeably. Individuals undertaking this role are either nurse or midwife with formal professional and educational training who hold a formal nursing/midwifery education role with education specific responsibilities within a higher education setting (UAE NMC). In some institutions clinical learning is supervised by clinical educators or instructors whereas faculty assume responsibility for classroom teaching. In other institutions teaching is mixed, therefore the document reflects flexibility in the use of terms and roles.

PATIENT/CLIENT In some contexts, for example acute care, it is more appropriate to use the term 'patient', in other contexts such as community it may be more appropriate to use the term 'client' to describe the recipient of care. In the context of this document these terms are interchangeable.

PRECEPTOR: A preceptor is "a registered nurse" (or midwife) who has been prepared to guide and direct student learning (An Bord Altranais, 2003). The preceptor develops a relationship and works with the student throughout the placement. Successful preceptorship has a significant influence on student development (Spouse, 2001)

LEARNER/STUDENT: A Learner is a generic description attributed to an individual from any background whose purpose for being in a particular clinical context is to learn from that experience. A student is a specific category of learner that is registered within an educational institution. Within this document these terms are used interchangeably.

MENTOR: Mentoring can be provided by someone in the same or different area of practice. Mentoring is used to improve and nurture the skills, knowledge and expertise of a competent learner by pairing them with an experienced and knowledgeable professional. The senior professional (the mentor) invests and shares their time, effort, knowledge and expertise with a less experienced professional (mentee) to nurture their knowledge, skills and professional growth. The mentee seeks out a more experienced professional of their choosing (HETI, 2013)

SIMULATION LEARNING: Simulation is the imitation or representation of one act or system by another. Simulations can be said to have four main purposes- education, assessment, research and health system integration in facilitating patient safety". (Society for Simulation in Healthcare, 2011). Simulation uses adult learning theories through experiential learning that ensures a safe environment for both the learner and the patient.
REFERENCES


