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Department:  
Health  
REPUBLIC OF SOUTH AFRICA



**GUIDELINES FOR NURSING CLINICAL EDUCATION AND TRAINING UNITS IN SOUTH AFRICA**

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## Acknowledgements



Clinical teaching and learning is an essential component in the provisioning of nursing education and training that will ensure the production of competent nurse cadres with the necessary competencies to respond to current and ever-changing healthcare needs of a diverse population. The guidelines for clinical education and training units are a critical enabler of the National Policy on Nursing Education and Training. This will steer stakeholders through the period of change and provide a blueprint for the many decisions that need to be taken to enable compliance with the legislation and ensure a synchronous, standardised approach to the provision of nursing education.

The guidelines will assist facilities that have complied with the requirements to offer new nursing programmes in establishing and maintaining well-resourced clinical education and training units within the clinical training platforms along the continuum of care. While the minimum requirements are outlined in these guidelines, facilities that are better resourced can increase the resources and functionality. Moreover, the level of healthcare service delivery of the facility will determine the complexity of the resources required. This is to ensure that qualifications obtained are commensurate with scopes of practice. This will create a balance between the quantity, quality and relevance of nursing in order to improve population health outcomes and make a positive impact in reducing the quadruple burden of disease.

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## 1. Acronyms and abbreviations

Acronym/abbreviation	Description
CETU	Clinical Education and Training Unit
CETP	Clinical Education Training Platform
CHE	Council on Higher Education
CPD	Continuing Professional Development
DHET	Department of Higher Education and Training
HASA	Hospital Association of South Africa
HEI	Higher Education Institution
ICT	Information and Communication Technology
MOA	Memorandum of Agreement
NDOH	National Department of Health
NDP	National Development Plan
NEI	Nursing Education Institution
NHI	National Health Insurance
OHS	Occupational Health and Safety
OHSC	Office of Health Standards Compliance
OSCE	Objective Structured Clinical Evaluation
PHC	Primary healthcare
PHEPSA	Private Health Education Providers of South Africa
PMA	Performance Management Agreement
SANC	South African Nursing Council
SAQA	South African Qualifications Authority
SLA	Service Level Agreement
SOP	Standard Operating Procedure
TOR	Terms of Reference
WIL	Work-integrated learning

## 2. Addenda

A1	<p>Guidelines for the Development of Standard Operating Procedures (SOPs). SOPs will include but are not limited to:</p> <ol style="list-style-type: none"> <li>a. Formal communication between: <ul style="list-style-type: none"> <li>• Clinical Education and Training Unit (CETU) and provincial coordinator</li> <li>• CETU and nursing education institution (NEI)</li> <li>• CETU and nursing services</li> <li>• CETU and the clinical accompanist, mentors and preceptors</li> <li>• CETU and the students</li> </ul> </li> <li>b. Identification and referral of students requiring remediation is available</li> <li>c. Assessment of students by preceptors</li> </ol>
A2	Checklist for meetings
A3	<p>Terms of reference The following terms of reference will be available:</p> <ul style="list-style-type: none"> <li>• Provincial CETU meetings (CETUs with provincial coordinator)</li> <li>• CETU and nursing services meeting (describe difference between small and big hospitals)</li> <li>• CETU and the clinical accompanist, mentor and preceptor meeting</li> <li>• CETU and the student meetings</li> <li>• CETU internal meetings</li> </ul>
A4	Student progress records
A5	Minimum standard equipment list for a CETU

### 3. Glossary

Term	Description
Clinical accompaniment	A structured process whereby a clinical learning facilitator/clinical accompanist supports students in applying classroom learning in clinical practice and guides them in acquiring skills while becoming competent and meeting their clinical learning outcomes.
Clinical education (teaching and learning)	Clinical education occurs when students actively engage in providing nursing care under supervision during clinical placement when the theoretical component is correlated with practice.
Clinical education facilitators	Comprises any healthcare professional who engages with a student in the clinical setting with the purpose to facilitate teaching and learning and include, among others, clinical supervisors, clinical accompanists, educators, peers, clinical staff, preceptors and mentors.
Mentor	Means a professional person who possesses relevant expertise, who will be able to support the development of knowledge, skills, behaviour and values to an individual with less experience in a specific field.
Clinical placement	The period spent by a student in the clinical training platform with the purpose of achieving the outcomes of the work integrated learning of the learning programme.
Provincial Clinical Placement Coordinator	A professional nurse employed by the provincial department of health responsible for overall coordination of the placement of students from all NEIs (private and public) for work integrated learning in public health establishments.
Clinical preceptor	A professional nurse employed by the health establishment who serves as clinical education facilitator for student nurses/midwives in the clinical training platform.
Clinical training platforms	A variety of settings along the continuum of healthcare (e.g. primary, secondary, tertiary and quaternary) that offers clinical learning opportunities to achieve the outcomes of the learning programmes and that have been accredited by SANC.
Clinical teaching unit	A unit in the health establishment where clinical orientation, teaching, learning and assessment, mentoring and support of student nurses/ midwives are coordinated to achieve the outcomes of the learning programmes.
Formative assessment	These are periodic formal and informal assessments to improve learning and to give feedback to learners on progress made.
Summative assessment	This is a final assessment to evaluate the competence of the student nurse/midwife according to the expected learning outcomes of the programme.
Portfolio of evidence	A collection of material compiled as the required evidence of competence against a set of learning outcomes.
Work integrated learning	Educational activities that support students in applying theoretical learning of nursing during clinical placements while experiencing the real world of nursing.

#### **4. Introduction**

The South African health system is nurse-based and nurses are the first point of entry for the community into the health system. Therefore, the nurses in the South African health system are expected to be knowledgeable, competent and safe practitioners. All healthcare professions, including nursing, have a strong theoretical and work integrated learning component. Through placements in a variety of clinical training platforms nursing/midwifery students become competent in executing their professional practice. However, due to staff shortages, nurse practitioners in the clinical areas are not always available to facilitate students' learning. Additionally, the shortage of nurse educators in nursing education institutions leads to insufficient clinical accompaniment. These guidelines aim to improve the clinical learning of nurse and midwifery students, thereby improving the quality of care.

The national Department of Health (NDOH) has developed the National Policy on Nursing Education and Training to synchronise and standardise a system of education and training for nurses and midwives. This policy aims to reposition the role of clinical teaching and learning and thereby strengthen clinical education and training. The policy provides for the development of various nursing education implementation guidelines, which include those guiding the development of nursing clinical education and training units.

#### **5. Contextual background**

Newly qualified nurses experience significant challenges when entering clinical practice. The staff shortage at the nursing education institutions affects clinical accompaniment of students and therefore compromise their competence. A model of nursing education and training, which better correlates theory and practice had to be developed and implemented. Clinical education and training must be strengthened by re-establishing clinical education and training units at health establishments, supported by a coordinated system to provide human, material and financial resources.

Internationally, a global crisis in healthcare has been precipitated by an increased population, disease burden and mobility of populations and therefore healthcare systems are under strain to respond to the challenges posed. The National Health Insurance (NHI) and the re-engineering of primary healthcare have been designed to respond to the quadruple burden of disease. The National Development Plan (NDP) calls for a radical transformation of the health sector and transformation of health professionals' education to respond to these challenges (NDP2030: 24). It is necessary that the clinical training platforms exist within the context of primary healthcare (PHC) re-engineering. Challenged by the lack of systems and uniformity regarding clinical teaching in the country, it became apparent that a model that will better correlate theory and practice was necessary to address the declining quality of nursing care. The declining quality of care was perceived, amongst others, to be due to the lack of clinical exposure during nursing training and the shortage of nurses in clinical services to provide clinical teaching to students during placement for experiential learning.

These guidelines, as one of the implementation tools for the National Policy for Nursing Education and Training of 2019 will provide guidance in the re-establishment of clinical education and training platforms in health establishments/facilities to standardise the content and quality of clinical nursing education and management. While these guidelines are applicable in a hospital setting, the guidelines can be modified in the PHC setting to ensure that the quality of clinical nursing education and training is not compromised.

#### **6. Purpose of the guidelines**

The purpose of the guidelines is to provide a mechanism for standardisation of clinical education in nurse training in South Africa.

#### **7. Objectives**

The objectives of the guidelines are to improve the quality of nursing education and practice through:

- 7.1 providing guidelines for the establishment of clinical education and training units
- 7.2 ensuring well-structured and coordinated clinical teaching in nursing education
- 7.3 providing a mechanism for standardisation of clinical education and training activities
- 7.4 promoting the integration of theory and practice



- 7.5 supporting the development and provision of learning opportunities
- 7.6 facilitating the achievement of clinical learning outcomes

## **8. Legislative and policy framework**

Nursing education and training is underpinned by the provision of applicable legislation and policies that direct healthcare delivery. Legislation and policy directives that informed the development of guidelines for clinical training platforms include, but are not limited to, the following:

- the Nursing Act, 2005 (Act 33 of 2005)
- the National Strategic Plan for Nurse Education, Training and Practice of 2012/2013 - 2016/2017
- the National Qualifications Framework Act, 2008 (Act 67 of 2008)
- the Higher Education Act, 1997 (Act 101 of 1997), as amended
- Department of Higher Education Regulation 383 of 2016 for the Registration of Private Higher Education Institutions

The Nursing Act makes provisions for nursing education and training of different nurse cadres. Therefore, these guidelines must be read in conjunction with relevant SANC regulations and guidelines for different nursing cadres.

## **9. Scope and applicability of guidelines**

The guidelines apply to all NEIs and health establishments designated to offer the clinical education and training component (and are accredited by the SANC as learning facilities where the NEI may place students for work-integrated learning (WIL) of the nursing programmes leading to qualifications that are registerable with SANC.

## 10. Content

The content of these guidelines is divided according to domains, standards and measures for the verification of implementation of these standards. Annexures are included toward the end of the document to ensure that there is a standardised approach in the compilation of the compendium of documentation that supports implementation, monitoring and evaluation.

### 10.1 Domain 1: Operations management

Standard	Overall purpose of the standard	Measures
<p><b>10.1.1 The CETU manager confirms all relevant accreditation for each of the NEIs from which students are accepted.</b></p>	<p>To ensure that:</p> <ul style="list-style-type: none"> <li>• all legal prescripts (requirements) are met for the education and training of students</li> <li>• validation of nursing training takes place in accredited NEIs (both with SANC and CHE)</li> <li>• no students should be accepted into the health establishment until evidence of accreditation has been received by the CETU</li> </ul>	<p>10.1.1.1 Signed copies available of the:</p> <ol style="list-style-type: none"> <li>a. SANC approval certificates</li> <li>b. Council on Higher Education (CHE) accreditation certificate</li> <li>c. DHET registration certificate (for private NEI's)/ declaration/designation of the NEI by DHET</li> <li>d. South African Qualifications Authority (SAQA) ID number for each programme</li> </ol>
<p><b>10.1.2 Formal communication channels are established between the CETU and the stakeholders.</b></p>	<p>To:</p> <ul style="list-style-type: none"> <li>• promote adherence to the provincial annual placement plans</li> <li>• promote adherence to memoranda of understanding (MOAs) between the health establishments and the NEIs</li> <li>• avoid overcrowding of students at the health establishments</li> <li>• ensure that resources are made available</li> <li>• promote correlation of theory and practice</li> <li>• provide a positive clinical teaching and learning environment</li> <li>• clarify the roles and responsibilities of the CETU staff</li> </ul>	<p>10.1.2.1 There is a standard operating procedure that outlines formal communication between the CETU manager and the following:</p> <ol style="list-style-type: none"> <li>a. the provincial Clinical Placement Coordinator</li> <li>b. Clinical Placement Coordinator of the NEIs</li> <li>c. Nursing Services</li> <li>d. facilitators of clinical learning</li> <li>e. CETU staff</li> <li>f. students</li> </ol> <p>10.1.2.2. The standard operating procedure contains the following information for each category of individuals within the scope of operation:</p> <ol style="list-style-type: none"> <li>a. name of the contact person</li> <li>b. phone number (landline and cell phone)</li> <li>c. e-mail address</li> </ol>

Standard	Overall purpose of the standard	Measures
	<ul style="list-style-type: none"> <li>• report on progress and incidents</li> <li>• guide and support students</li> <li>• address issues of concern</li> <li>• coordinate functioning of the CETU team</li> </ul>	<p style="text-align: right;">d. dates for relevant reports and other formal communication</p> <p>10.1.2.3 Evidence of communication between CETU and provincial Clinical Placement Coordinator is available:</p> <p style="padding-left: 20px;">a. there is documented evidence of the CETU's participation in the provincial annual clinical placement plan.</p> <p>(This is to ensure that the CETU has a voice in the number of students placed with them for training. Documented evidence can include, but is not limited to, minutes of meetings in which the provincial annual clinical placement plan was discussed, signed and documented communication with the provincial clinical placement coordinator to indicate the number of students that can be accommodated in different wards or for different programmes.)</p> <p>10.1.2.4 An annual master clinical placement plan is available in the CETU and areas of allocation</p> <p>(This will assist in monitoring the placement of students and helps with coordination of the placement of students to meet their training requirements.)</p> <p style="padding-left: 40px;">a. clinical placement reports are submitted to the provincial Clinical Placement Coordinator quarterly</p> <p>(This will assist in the planning process where there are challenges in service delivery or changes in the disciplines/learning opportunities available at the CETU)</p> <p style="padding-left: 40px;">b. there are terms of reference for a provincial CETU Forum. (Stakeholders include NEIs, CETUs, and provincial Clinical Placement Coordinator). Contents of the terms reference should at the minimum include the following:</p> <ul style="list-style-type: none"> <li style="padding-left: 60px;">i. number of representatives per stakeholder</li> <li style="padding-left: 60px;">ii. number of compulsory meetings for the year</li> </ul>

Standard	Overall purpose of the standard	Measures
		<ul style="list-style-type: none"> <li>iii. role of stakeholders related to progress reports</li> <li>iv. role of the forum related to oversight of monitoring and evaluation of the implementation of clinical education programmes</li> <li>v. role of the forum in evaluating the annual master clinical placement plan</li> </ul> <p>c. meetings take place according to the terms of reference  d. minutes of the meetings are available  e. where relevant, actions have been taken in response to decisions taken at the meeting</p> <p>(Where relevant refers to decisions that are related to services provided at the CETU. This will include but is not limited to matters to be communicated to other CETU staff and/or students, gaps identified at the CETU or changes in practice communicated at the meeting.)</p> <ul style="list-style-type: none"> <li>f. changes to student allocations are communicated in writing</li> </ul> <p>(This communication can be electronic or in hard copy, but must be evident, documented, dated and signed.)</p> <ul style="list-style-type: none"> <li>g. other forms of communication are available (e-mails, telecommunications)</li> </ul> <p>10.1.2.5 Evidence of communication between CETU and NEIs is available:</p> <ul style="list-style-type: none"> <li>a. the CETU has copies of MOAs between the NEIs and the health establishment on the placement of students</li> </ul> <p>(Part of the minimum content to be specified for the SOP on communication is the communication with the Student Representative Council via the NEIs.)</p>

Standard	Overall purpose of the standard	Measures
		<ul style="list-style-type: none"> <li>b. there are terms of reference for CETU and NEI meetings</li> <li>c. meetings take place according to the terms of reference</li> <li>d. minutes of the meetings referenced above are available</li> <li>e. progress reports for each student with reference to clinical learning outcomes, are submitted from the CETU to the NEI quarterly/as needed</li> <li>f. a copy of the schedule for meetings with the NEI to address matters relating to the provision of clinical training and placement for students is available</li> <li>g. other forms of communication are available (e-mails, telecommunications)</li> </ul> <p>10.1.2.6 Evidence of communication between the CETU and clinical education facilitators is available</p> <ul style="list-style-type: none"> <li>a. a copy of the schedule for meetings between the CETU and the clinical education facilitators is available</li> <li>b. the terms of reference for the CETU and clinical education facilitators meetings is available</li> <li>c. the schedule of meetings between CETU manager and clinical education facilitators is available</li> <li>d. meetings take place according to the schedule</li> <li>e. minutes of the meetings referenced to above are available</li> <li>f. other forms of communication are available (e-mails, telecommunications)</li> </ul> <p>10.1.2.7 Evidence of communication between CETU and students is available:</p> <ul style="list-style-type: none"> <li>a. there is schedule of meetings between CETU and students</li> <li>b. agendas for meetings between CETU manager and students are available</li> <li>c. meetings take place according to schedule</li> <li>d. minutes of the meetings are available</li> </ul>

Standard	Overall purpose of the standard	Measures
		<p>e. a separate register is kept in each unit/ward to document all student contact related to student matters</p> <p>f. there is an information board (physical board or online information) to facilitate communication between students and the CETU</p> <p>(The purpose of the information board is to provide general information, clinical learning opportunities and identified performance related information of students)</p> <p>g. other forms of communication are available (e-mails, circulars, letters, telecommunications)</p> <p>10.1.2.8 Evidence of communication between CETU and nursing management of the health establishment is available</p> <p>a. a copy of the schedule for meetings between the CETU and nursing management is available</p> <p>(Nursing management includes the nursing manager, area managers and operational managers of the health establishment) There will be multiple meetings in facilities in various areas of speciality depending on the size and nature of the health establishment.)</p> <p>b. there is a schedule of meetings between the CETU and nursing management</p> <p>c. meetings take place according to the schedule</p> <p>d. minutes of the meetings are available</p> <p>10.1.2.9 Evidence of communication within the CETU is available</p> <p>a. there is a schedule for the CETU meetings</p> <p>b. meetings take place according to the schedule</p> <p>c. minutes of the meetings are available</p> <p>d. communication book or electronic communication system is available and used</p> <p>(This book should be used to document all incoming and outgoing documentation, administrative handover/continuity between shifts,</p>

Standard	Overall purpose of the standard	Measures
		<p>relevant information for night duty students and the manager responsible for their oversight.)</p> <p>e. other forms of communication including, but not limited to memos and circulars, updates relevant to the functioning of the CETU are shared with relevant staff members</p> <p>(Circulars must be signed once read and filed.)</p>
<p><b>10.1.3 The CETU has adequate equipment and supplies that is functional and maintained.</b></p>	<p>To:</p> <ul style="list-style-type: none"> <li>• provide care according to set standards</li> <li>• optimise clinical learning</li> </ul>	<p>10.1.3.1 There is a SOP on the management of equipment and supplies in the health establishment.</p> <p>10.1.3.2. There is a standard list of equipment and supplies that must be available in the CETU.</p> <p>10.1.3.4 There is an inventory of all assets within the CETU.</p> <p>10.1.3.3 There is a planned preventive maintenance schedule for all equipment in the CETU.</p> <p><i>(Planned preventive maintenance refers to the regular servicing of equipment to prolong the lifespan of equipment and prevent unexpected malfunctions where possible.)</i></p> <p>a. Equipment is serviced in accordance with the maintenance schedule.</p> <p>b. There is a reactive maintenance plan for all equipment in the CETU in line with the local maintenance plan.</p> <p><i>(The reactive maintenance plan refers to the manner in which maintenance can be accessed immediately when equipment malfunctions.)</i></p> <p>c. A standard operating procedure is available detailing how reactive maintenance services can be accessed.</p> <p>d. The standard operating procedure includes turnaround times for reactive maintenance requests.</p> <p>e. Reactive maintenance requests are completed within the agreed turnaround times.</p> <p>10.1.3.4 The standard operating procedure for ordering of equipment is available and includes turnaround times.</p> <p>a. The turnaround time for ordered equipment is monitored.</p> <p>b. Where agreed turnaround times are not met, a report is submitted to the supply chain manager.</p>

Standard	Overall purpose of the standard	Measures
<p><b>10.1.4 The CETU infrastructure is well maintained.</b></p>	<p>To promote safety and security, thus ensuring a conducive environment for teaching and learning.</p>	<p>10.1.4.1 There is a service level agreement for the provision of building maintenance.</p> <ul style="list-style-type: none"> <li>a. There is a planned maintenance schedule for the CETU building that is aligned to the overall maintenance plan of the facility.</li> <li>b. The building is inspected regularly in accordance with the schedule.</li> <li>c. Deficiencies identified during inspections are rectified within the timeframe specified in the service level agreement.</li> <li>d. A standard operating procedure is available detailing how building maintenance services can be accessed.</li> <li>e. The standard operating procedure includes turnaround times for building maintenance requests.</li> <li>f. Building maintenance requests are completed within the agreed turnaround times.</li> </ul> <p>10.1.4.2 There is evidence that the CETU manager is a member of the institutional facility management committee.</p> <p>10.1.4.3 There is evidence that the CETU manager attends the facility management committee meetings.</p> <p>10.1.4.4 The CETU employees are represented on the institutional Occupational Health and Safety Committee.</p> <p>10.1.4.5 The CETU manager is a member of the team/structure that is responsible for future commissioning related to expansion/development of the CETU.</p> <p>10.1.4.6 The CETU structure includes basic amenities such as class room (capacity for at least 15 students), demonstration room, information technology (IT) centre, medical equipment centre and boardroom.</p> <p>10.1.4.7 The CETU is equipped with minimum standard equipment (refer to Annexure A5).</p>
<p><b>10.1.5 The CETU budget is effectively and efficiently managed.</b></p>	<p>The CETU manager oversees financial processes within the unit and complies with financial management principles.</p>	<p>10.1.5.1 Annual submission for the budget are developed and made available to the relevant financial structures outlining financial needs for the CETU in the coming financial year.</p> <p>10.1.5.2 The CETU manager or a delegated individual attends relevant scheduled hospital finance committee meetings.</p>



Standard	Overall purpose of the standard	Measures
		<p><i>(The person attending on behalf of CETU should have the knowledge and experience to ensure the needs of the unit are adequately communicated and considered.)</i></p> <p>10.1.5.3 Procurement plans for the CETU are available and monitored quarterly.</p> <p>10.1.5.4 Specifications are drawn up for all equipment requested for the unit.</p> <p>10.1.5.5 In-year monitoring and quarterly expenditure reports are available.</p>
<p><b>10.1.6 Risks are effectively managed in the CETU in accordance with relevant guidelines.</b></p>	<p>To prevent harm, loss and damage and to reduce patient safety incidents and complaints.</p>	<p>10.1.6.1 The CETU has a risk management plan aligned to the overall risk management plan in the facility.</p> <ul style="list-style-type: none"> <li>a. Evidence of risk assessment is available.</li> <li>b. A risk register is available.</li> <li>c. Evidence of implementation of risk mitigation strategies is available.</li> </ul> <p>10.1.6.2 There is an adverse incident reporting system.</p> <ul style="list-style-type: none"> <li>a. An adverse incident register is available.</li> </ul> <p>10.1.6.3 There is evidence that the CETU manager attends relevant meetings including but not limited to the following:</p> <ul style="list-style-type: none"> <li>a. adverse events/patient safety incidents meetings</li> <li>b. maternal mortality meetings</li> <li>c. OHS meetings</li> <li>d. complaints management meetings</li> <li>e. risk management meetings</li> </ul> <p>10.1.6.4 Patient safety incident trends are analysed and discussed with clinical preceptors for incorporation into clinical education of students.</p>
<p><b>10.1.7 A waste management plan for the CETU is available and implemented.</b></p>	<p>To ensure good management of waste generated in the CETU.</p>	<p>10.1.7.1 An SOP for management of waste is available and includes segregation, storage, transport and disposal of the following:</p> <ul style="list-style-type: none"> <li>a. healthcare waste/risk (anatomical, infectious, pharmaceuticals chemical, radioactive, heavy metal)</li> <li>b. sharps</li> <li>c. general waste</li> </ul> <p><i>(This can be the same as the hospital SOP for waste management)</i></p>

Standard	Overall purpose of the standard	Measures
<p><b>10.1.8 An effective record management system for students is available and regularly updated.</b></p>	<p>To maintain confidentiality, proper safe keeping of and easy access to records.</p>	<p>10.1.8.1 SOPs are in place to define the record management processes listed:</p> <ul style="list-style-type: none"> <li>a. filing</li> <li>b. retrieving</li> <li>c. backup</li> <li>d. access control</li> <li>e. confidentiality and privacy, including confidentiality of records for destruction</li> <li>f. archiving</li> </ul> <p><i>(The standard operating procedure should cover whichever records are in place, i.e. paper and/or electronic records).</i></p> <p>10.1.8.2 Attendance registers, used to monitor and manage student attendance, are available.</p> <p><i>(This refers to the process used to track student attendance in accordance with the clinical master plan.)</i></p> <ul style="list-style-type: none"> <li>a. A master record for each student is available.</li> </ul> <p><i>(The master record enables the monitoring of each student's rotation and performance in all units according to the student's outcomes.)</i></p> <ul style="list-style-type: none"> <li>b. Leave reports are generated for each student at the end of their clinical placement and submitted to the CETU manager in accordance to time frames specified for the CETU.</li> </ul> <p><i>(This refers to unplanned leave, including but not limited to family responsibility leave, sick leave and maternity leave)</i></p> <ul style="list-style-type: none"> <li>c. Attendance reports are submitted to the CETU manager in accordance with the time frames specified for the CETU.</li> <li>d. Attendance reports are compiled for each student at the end of their clinical placement.</li> </ul>
<p><b>10.1.9 ICT software support is available and functional.</b></p>	<p>To facilitate teaching and learning, promote easy access of students' information and to ensure continuity.</p>	<p>10.1.9.1 An SOP for accessing ICT support is available.</p> <ul style="list-style-type: none"> <li>a. The timeframe for response to contact attempts are defined in the SOP.</li> <li>b. The turnaround time for ICT repairs is defined in the SOP.</li> <li>c. The ICT support service adheres to the turnaround time for repairs as defined in the SOP.</li> </ul>

Standard	Overall purpose of the standard	Measures
		<p>10.1.9.2 Contact details for the ICT support service are displayed in the CETU.</p> <ul style="list-style-type: none"> <li>a. There is a mechanism to leave a message with the ICT support service for instances when the contact attempt cannot be responded to immediately. <i>(The message can be a voice message, e-mail, SMS or other mechanism.)</i></li> <li>b. There is evidence that the ICT service responds to contact attempts within the stipulated time frame.</li> </ul>
<p><b>10.1.10 The hardware required for management of the student information management system is available.</b></p>	<p>To ensure the safe storage and easy retrieval of student information.</p>	<p>10.1.10.1 Hardware for a student management system is available and functional. <i>(To be specified by ICT specialist; to include minimum specifications of the hardware required as follows)</i></p> <ul style="list-style-type: none"> <li>a. computer</li> <li>b. printer/scanner/copier (3 in 1)</li> <li>c. data projector</li> <li>d. network cables</li> </ul> <p>10.1.10.2 The hardware is kept safe and lockable.</p> <p>10.1.10.3 The hardware has internet security and virus protection installed.</p> <p>10.1.10.4 The internet security and virus protection are updated at the minimum, annually.</p>
<p><b>10.1.11 An effective student information management system is available.</b></p>	<p>To facilitate teaching and learning, promote easy access of students' information and to ensure continuity.</p>	<p>10.1.11.1 Minimum functionality of the system should include but is not limited to (system can be manual or electronic):</p> <ul style="list-style-type: none"> <li>a. student applications</li> <li>b. registrations</li> <li>c. learning outcomes</li> <li>d. clinical assessments</li> <li>e. clinical placement</li> <li>f. completion of training records</li> <li>g. leave management</li> <li>h. absenteeism</li> <li>i. communication with students in relation to academic matters</li> <li>j. automatic report generation feature, e.g. absenteeism, disciplinary hearings, gender distribution of students,</li> </ul>

Standard	Overall purpose of the standard	Measures
		<p style="text-align: center;">number of new and old matriculants in each annual intake</p> <p>10.1.11.2 A master student record for each student is available that includes at least the following:</p> <ol style="list-style-type: none"> <li>a. student profile</li> <li>b. student allocation</li> <li>c. attendance records</li> <li>d. contact hours</li> <li>e. access control</li> <li>f. backup student information details and digital records</li> <li>g. procedures implemented under supervision</li> <li>h. assessment scheduling</li> <li>i. levels of competence (results)/assessment outcomes</li> <li>j. progress reports</li> <li>k. incident reports</li> </ol> <p>10.1.11.3 Competency-based /related clinical support is available which include the following:</p> <ol style="list-style-type: none"> <li>a. remediation programme</li> <li>b. assessment schedules</li> <li>c. levels of competence/assessment outcomes</li> <li>d. student progress reports</li> <li>e. records of counselling and referrals</li> <li>f. student complaints register with timeline schedule/ mechanism to record outcomes of investigations</li> <li>g. disciplinary actions and outcomes</li> </ol> <p>10.1.11.4 Wi-Fi access for students is available.</p>
<p><b>10.1.12 System requirements support functioning of the student information management system.</b></p>	<p>To support functioning of the student information management system.</p>	<p>10.1.12.1 The following minimum system requirements must be in place:</p> <ol style="list-style-type: none"> <li>a. internet connectivity</li> <li>b. server</li> <li>c. back-up system</li> <li>d. data recovery system</li> <li>e. uninterrupted power supply</li> <li>f. access control/confidentiality</li> </ol>

Standard	Overall purpose of the standard	Measures
<b>10.1.13 The CETU staff are trained in use of ICT software.</b>	To: <ul style="list-style-type: none"> <li>empower CETU employees with ICT skills to improve efficiency of the CETU</li> <li>to optimise electronic communication and record keeping</li> <li>to keep employees abreast of ICT development</li> </ul>	10.1.13.1 Evidence that all CETU employees responsible for using the student information management system have received training, is available <ul style="list-style-type: none"> <li>a. On-going capacity development is available as part of the support package for the software.</li> </ul> <i>(The support package from the software supplier must include specified on-going training for capacity development and training of new employees.</i>
<b>10.1.14 Maintenance plans for ICT equipment are in place and executed.</b>	To ensure proper functioning of ICT equipment.	10.1.14.1 A schedule for maintenance of ICT equipment is available. <ul style="list-style-type: none"> <li>a. There is evidence that the ICT equipment is maintained according to schedule.</li> <li>b. All important and recommended software updates are downloaded and installed when that becomes available.</li> </ul>
<b>10.1.15 A contingency plan is available for ICT system failures.</b>	To ensure continuity during system failure.	10.1.15.1 There is a functional contingency plan available in the event of a mechanical ICT systems failure. <ul style="list-style-type: none"> <li>a. The contingency plan is tested annually.</li> <li>b. Deficiencies identified during the annual test are addressed.</li> </ul>

## 10.2 Domain 2: Human resource management

Standard	Overall purpose of the standard	Measures
<b>10.2.1 A provincial Clinical Placement Coordinator is available.</b>	To: <ul style="list-style-type: none"> <li>provide strategic direction in all matters pertaining to clinical education and training of student nurses</li> <li>provide support to CETU managers</li> <li>coordinate the clinical placement of students in the province for WIL</li> </ul>	10.2.1.1 SLAs are developed for the various NEIs. 10.2.1.2 Copies of MOAs and SLAs are available. 10.2.1.3 Provincial clinical master plans are available. 10.2.1.4 Student placement record provides proof that student nurses in all programmes and levels of study are appropriately placed for work-integrated learning in accredited clinical facilities.
<b>10.2.2 An approved staffing plan for the CETU is available.</b>	To ensure that sufficient and appropriately qualified employees are available to accomplish the purpose of the CETU.	10.2.2.1 An approved organogram for the CETU is available. <ul style="list-style-type: none"> <li>a. The organogram reflects all approved posts.</li> <li>b. The following approved posts for the CETU are filled: <ul style="list-style-type: none"> <li>i. CETU manager</li> </ul> </li> </ul>

Standard	Overall purpose of the standard	Measures
		<ul style="list-style-type: none"> <li>ii. preceptor – general</li> <li>iii. preceptor – specialist (for CETUs with specialist programmes)</li> <li>iv. administrative clerk</li> <li>v. cleaner (can be shared with nursing services)</li> <li>vi. messenger (can be shared with nursing services)</li> </ul> <p>10.2.2.2 Qualifications and experience of employees appointed are in line with job adverts and relevant guidelines.</p> <ul style="list-style-type: none"> <li>a. Job descriptions are available for each post.</li> <li>b. Roles and responsibilities are specified in the job descriptions. <i>(The job description must, where applicable, accommodate any other duties.)</i></li> <li>c. The following are reviewed in accordance with relevant guidelines: <ul style="list-style-type: none"> <li>i. job descriptions</li> <li>ii. performance agreements</li> <li>iii. work plans</li> <li>iv. assessments</li> </ul> </li> </ul> <p>10.2.2.3 There is one preceptor for every fifteen to twenty undergraduate students (1:15-20) and one to five to eight post graduate students (1:5-8) at any given time (Nursing Strategy 2012/2013-2016/2017:90)</p> <p><i>Explanatory notes: The ratio is also determined by the type of programme that is implemented and ensures that a manageable number of students are accompanied and supported in order to enhance individualised teaching e.g. specialist programmes that need intensified preceptorship may need a smaller ratio.</i></p> <p><i>The ratio at any given time will also be determined by the condition of the patient on whom the procedure is being performed.</i></p> <p><i>The allocation of preceptors to students is aligned to the clinical placement plans and the specific numbers of students based at the clinical platform at any given time in the academic year.</i></p> <p>10.2.2.4 SOPs/policies on the HR management processes are available:</p>

Standard	Overall purpose of the standard	Measures
		<ul style="list-style-type: none"> <li>a. recruitment</li> <li>b. selection</li> <li>c. interview</li> <li>d. checklists for appointment procedure</li> </ul>
<p><b>10.2.3 Appointments of clinical CETU employees are made by the health establishment, in accordance with job description and relevant national guidelines.</b></p>	<p>To ensure that clinically experienced employees are appointed.</p>	<p>10.2.3.1 Employee appointed fulfils the minimum requirements as stated in the job descriptions and job advertisements.</p> <p>10.2.3.2 Current proof of an Annual Practicing Certificate from SANC is available for CETU nursing employees.</p> <p>10.2.3.3 Certified copies of relevant documents including qualifications are available in employee files</p> <p>10.2.3.4 There is evidence that the composition of selection committees responsible for recommendations for the appointment CETU manager includes representation from the NEIs.</p> <p><i>(As proof that employees have met the requirements/criteria for appointment.)</i></p>
<p><b>10.2.4 New employees are orientated and inducted to the unit.</b></p>	<p>To ensure that employees are familiar with the working environment and expectations.</p>	<p>10.2.4.1 There is an orientation programme for all new employees in accordance with the health establishment policy.</p> <p>10.2.4.2 There is an induction programme for all new employees in accordance with the health establishment policy.</p> <ul style="list-style-type: none"> <li>a. There is evidence that employees have undergone orientation and induction.</li> <li>b. The following aspects are included in the orientation and induction programme, but are not limited to: <ul style="list-style-type: none"> <li>i. physical layout of the CETU</li> <li>ii. communication within the CETU</li> <li>iii. communication with all relevant stakeholders</li> <li>iv. employee wellness programme</li> <li>v. health and safety</li> <li>vi. monitoring and evaluation of employees</li> <li>vii. facilitation of learning in the clinical unit</li> <li>viii. correct use of CETU equipment</li> <li>ix. policies and standard operating procedures used</li> <li>x. job description</li> </ul> </li> </ul>

Standard	Overall purpose of the standard	Measures
		<ul style="list-style-type: none"> <li>xi. performance management and evaluation system</li> <li>xii. relevant nursing programmes</li> <li>xiii. SOP on clinical preceptorship</li> <li>xiv. There is evidence that employees use guidelines for clinical preceptors which include but are not limited to the following:               <ul style="list-style-type: none"> <li>a. orientation strategies, including sharing expectations of the student with the student and getting to know the student's past professional experience and student's perception of learning needs</li> <li>b. strategies to assist students to learn in the clinical setting</li> <li>c. creating an environment to decrease anxiety and enhance learning by giving positive feedback</li> <li>d. using detailed guided questioning with the student</li> <li>e. assessing student's readiness for increased responsibility</li> <li>f. assessing student's ability, strengths and gaps in knowledge</li> </ul> </li> </ul>
<p><b>10.2.5 A performance management and development system is available.</b></p>	<p>To maximise performance of all employees and to ensure compliance with employee management policies.</p>	<p>10.2.5.1 There is a current performance management agreement (PMA) or work plan available for all employees.</p> <p>10.2.5.2 The PMA or work plan is signed by the incumbent with the supervisor.</p> <p>10.2.5.3 The PMA or work plan is aligned with the job description.</p> <p>10.2.5.4 Performance management and development evaluations are completed for each employee in the CETU in accordance with relevant guidelines.</p> <p>10.2.5.5 An intervention record is completed to assist employees with identified skills gaps.</p> <p>10.2.5.6 Attendance of workshops conferences and in-service training events are recorded and are in line with CETU employees' development plans.</p>



Standard	Overall purpose of the standard	Measures
<p><b>10.2.6 A system of assessment of the CETU educational employees is available and functional.</b></p>	<p>To ensure that employees are competent to provide clinical teaching and learning to students.</p>	<p>10.2.6.1 An SOP for the assessment of clinical educators is available.            10.2.6.2 The CETU and NEIs schedule of peer assessment of clinical education is available.            10.2.6.3 Peer assessments are conducted in accordance with the schedule.            10.2.6.4 Records of peer assessments are available for each assessment.            10.2.6.5 Where skills gaps are identified, skills update programmes are implemented and documented.            10.2.6.6 The outcomes of the skills update programmes are documented.</p>
<p><b>10.2.7 There is a current in-service training plan for all CETU employees.</b></p>	<p>To ensure that employees are continuously updated with contemporary issues relevant to nursing education and practice.</p>	<p>10.2.7.1 An annual in-service training needs analysis is available.            10.2.7.2 The training needs analysis considers information from various sources.  <i>(The various sources of information considered can be PMAs, work plans, changes in practice, complaints, litigation, etc.)</i>            10.2.7.3 Routine capacity building e.g. on evidence-based nursing practice and in the conducting of competency-based assessments is performed.            10.2.7.4 A copy of the current in-service training plan is available.            10.2.7.5 There is evidence of the implementation of the in-service training plan.            10.2.7.6 A record of attendance of training is kept, including a record of continuous professional development points accumulated.            10.2.7.7 A record of continuous assessment of employees by the CETU manager is kept as a means of monitoring practice based on training received.</p>
<p><b>10.2.8 The CETU manager monitors absenteeism of employees.</b></p>	<p>To improve efficiency and enhance productivity.</p>	<p>10.2.8.1 An employee attendance register is available.            10.2.8.2 A leave plan for all CETU employees is available.            10.2.8.3 An SOP regarding leave of absence is available.            10.2.8.4 A record of corrective measures (including disciplinary measures where it is warranted) in cases of deviation is managed according to the SOP.</p>

### 10.3 Domain 3: Clinical teaching and learning

Standard	Overall purpose	Measures
<p><b>10.3.1 Course-specific clinical teaching and learning schedules are available for each learning programme offered.</b></p>	<p>To enhance the coordination of clinical teaching and learning for students.</p>	<p>10.3.1.1 The CETU keeps professional practice files (electronic or hard copy) for each training programme offered. The files include, but are not limited to the following:</p> <ul style="list-style-type: none"> <li>a. a copy of SANC accreditation certification</li> <li>b. a copy of the approved NEI curriculum for each programme for which nursing students are accepted</li> <li>c. clinical teaching manuals</li> <li>d. clinical learning outcomes</li> <li>e. curriculum frameworks for all new nursing programmes</li> <li>f. SANC clinical guidelines</li> <li>g. assessment guidelines</li> <li>h. guidelines for clinical training units</li> </ul>
<p><b>10.3.2 The legal framework that regulates nursing education, training and practice is available in the CETU.</b></p>	<p>To ensure that clinical teaching and learning is guided and aligned to the relevant legislative framework.</p>	<p>10.3.2.1 The following Acts relevant to nursing training are available:</p> <ul style="list-style-type: none"> <li>a. Nursing Act, 2005 (Act 33 of 2005)</li> <li>b. Higher Education Act, 1997 (Act 101 of 1997), as amended</li> <li>c. National Health Act, 2003 (Act 61 of 2003), as amended</li> <li>d. Mental Health Care Act, 2002 (Act 17 of 2002), as amended</li> <li>e. National Qualifications Framework Act, 2008 (Act 67 of 2008), as amended</li> <li>f. South African Qualifications Authority Act, 1995 (Act 58 of 1995)</li> <li>g. Other acts relevant to specific health issues e.g. The Children’s Act, 2005 (Act 38 of 2005), The Termination of Pregnancy Act, 1996 (Act 92 of 1996), as amended</li> </ul> <p>10.3.2.2 The following policy documents relevant to nursing education, training, and practice are available:</p> <ul style="list-style-type: none"> <li>a. National Policy on Nursing Education and Training</li> <li>b. Government Notice No. 173 of 8 March 2013 (R173) related to the accreditation of nursing institutions</li> <li>c. scopes of practice for each programme offered</li> <li>d. practice standards for each programme offered</li> <li>e. guidelines on the ethical practice of nurses</li> <li>f. competency frameworks for programmes offered</li> </ul>

Standard	Overall purpose	Measures
		10.3.2.3 Specific clinical learning outcomes for each level of training are available. 10.3.2.4 Assessment and progression guides are available. 10.3.2.5 Learner hand books are available (student rules).
<b>10.3.3 A training plan is developed and implemented for each student.</b>	To address the learning needs of each student individually.	10.3.3.1 A training plan for each student, which reflects at least the following aspects, is available: <ol style="list-style-type: none"> <li>a. schedule for structured clinical guidance to achieve the expected learning outcomes</li> <li>b. student mentorship programme</li> <li>c. student accompaniment plan</li> <li>d. clinical assessment schedule</li> <li>e. evidence of implementation</li> </ol> <p><i>(The reason for the above is to assist the CETU manager to plan programmes that are compliant to statutory requirements, to plan student education and training and monitor adequate provision of education and training.)</i></p>
<b>10.3.4 Guidelines aligned to national strategic programmes are available at the health establishment.</b>	To provide guidance and ensure that nursing training is relevant and responsive to the burden of disease.	10.3.4.1 The following guidelines (hard or electronic copies) are available at the CETU (aligned to Office of Health Standards Compliance (OHSC) norms and standards regulations applicable to health establishments): <ol style="list-style-type: none"> <li>a. Adult Primary Care guide (Primary Care 101 guidelines) or Practical Approach to Care Kit (PACK)</li> <li>b. Standard Treatment Guidelines and Essential Medicine List for Primary Health Care</li> <li>c. Integrated Management of Neonatal and Childhood Illness Chart Booklet</li> <li>d. Standard Treatment Guidelines and Essential Medicine List for Hospital level, Adults</li> <li>e. Standard Treatment Guidelines and Essential Medicine List for Hospital Level, Paediatrics</li> <li>f. Control and Management of Diabetes</li> <li>g. Control and Management of Hypertension at Primary Healthcare Level</li> <li>h. Management and Control of Asthma in Children at Primary Healthcare Level</li> <li>i. Management of Asthma in Adults at Primary Level</li> </ol>

Standard	Overall purpose	Measures
		<ul style="list-style-type: none"> <li>j. New-born Care Charts Management of Sick and Small New-borns in Hospital</li> <li>k. National Tuberculosis Management Guidelines</li> <li>l. Guidelines for the Management of HIV-infected Children</li> <li>m. National Anti-Retroviral Treatment Guidelines</li> <li>n. Guidelines for the Treatment of Malaria in South Africa</li> <li>o. Guidelines for Completing Maternal Death Notifications</li> <li>p. Saving Mothers – Essential steps to the management of common conditions associated with maternal mortality</li> <li>q. Clinical Guidelines for the Use of Blood and Blood Products</li> <li>r. Practical Guidelines for Infection Control in Healthcare Facilities</li> <li>s. National Guideline for Patient Safety Incident Reporting and Learning in The Public Health Sector of South Africa</li> <li>t. Guidelines for Sexually Transmitted Infections (STIs)</li> <li>u. Guidelines for Contraception (family planning)</li> <li>v. Guidelines for Choice of Termination of Pregnancy</li> <li>w. Cervical Cancer Screening Guidelines (Pap smear)</li> <li>x. Guidelines for Post-Exposure Prophylaxis (sexual assault)</li> <li>y. National Mental Health Policy Framework and Strategic Plan 2013-2020</li> <li>z. PMTCT Guidelines</li> <li>aa. Mother and Baby Friendly Hospital Initiative Manual</li> </ul> <p><i>(Specific guidelines need to be aligned to the learning outcomes of specific learning programmes. Updated/reviewed guidelines to be available and utilised. Relevant SOPs to be included.)</i></p>
<p><b>10.3.5 Allocation of students is managed effectively and is consistent with programme requirements.</b></p>	<p>To ensure fair distribution of students and optimal use of resources.</p>	<p>10.3.5.1 MOAs are available between all NEIs (public, private and universities) and the CETU.</p> <p>10.3.5.2 A consolidated clinical master plan is developed according to curricula in collaboration with the NEIs and health establishments.</p> <p>10.3.5.3 There is evidence that the CETU manager receives information from the NEI that communicates the theoretical training provided to students prior to their placement at the CETU.</p> <p>10.3.5.4 Allocation for each student’s placement is prepared at least four weeks prior to the student’s anticipated arrival.</p>

Standard	Overall purpose	Measures
		<p>10.3.5.5 There is evidence that:</p> <ol style="list-style-type: none"> <li>a. the students' allocation list is distributed to wards/units at least two weeks prior to the anticipated arrival of the students</li> </ol> <p>10.3.5.6 The allocation list is shared with the NEIs and the provincial Clinical Placement Coordinator.</p>
<p><b>10.3.6 Students are prepared for clinical practice prior to clinical allocation.</b></p>	<p>To familiarise students with clinical skills and improve confidence necessary for safe nursing practice.</p>	<p>10.3.6.1 There is a list of specimen signatures for all lecturers and clinical preceptors in the CETU manager's office. <i>(The signatures in the clinical workbooks of students which outlines evidence that they have had exposure in a clinical simulation laboratory prior to placement with a CETU will be authenticated against the list referred to above.)</i></p> <p>10.3.6.2 Clinical workbooks contain signatures of clinical education facilitators who demonstrated procedures prior to allocation to clinical practice.</p> <p>10.3.6.3 The signatures in the clinical workbooks match the signatures on the signature specimen list.</p> <p>10.3.6.4 Training aids demonstrating clinical procedures are available for student's self-learning</p> <p>10.3.6.5 Students who are allocated to clinical facilities are in prescribed uniform:</p> <ol style="list-style-type: none"> <li>a. students wear distinguishing devices which denote their level of training, e.g. buttons or stripes</li> <li>b. students wear an official name tag approved by the relevant NEI, which includes the following minimum content: <ol style="list-style-type: none"> <li>i. name of student</li> <li>ii. name of NEI</li> <li>iii. logo of the NEI</li> </ol> </li> </ol> <p>10.3.6.6 Students sign a non-disclosure agreement during induction.</p> <p>10.3.6.7 Students sign an indemnity agreement during induction.</p>
<p><b>10.3.7 There is an orientation programme for students according to their level of clinical outcomes required.</b></p>	<p>To optimise utilisation of the time spent in a health establishment and to enhance psychological safety of students.</p>	<p>10.3.7.1 There is an orientation programme that includes but is not limited to the following:</p> <ol style="list-style-type: none"> <li>a. geographical lay-out of institution</li> <li>b. clinical learning environment</li> <li>c. time and attendance</li> </ol>

Standard	Overall purpose	Measures
		<ul style="list-style-type: none"> <li>d. reporting channels</li> <li>e. dress code</li> <li>f. code of conduct</li> <li>g. patients' rights (including Batho Pele Principles)</li> <li>h. basic policies e.g. injury on duty and health and safety</li> <li>i. relevant acts and regulations</li> <li>j. guidelines aligned to national strategic programmes</li> <li>k. infection prevention and control</li> <li>l. expectations from and of students</li> <li>m. student learning contracts</li> </ul> <p>10.3.7.2 The minimum criteria for entry to examinations are communicated to students at the commencement of their placement.</p> <p>10.3.7.3 There is documented evidence that students have attended the orientation programme.</p> <p>10.3.7.4 Student learning contracts for each student are available in the student's individual file.</p> <p>10.3.7.5 A student accompaniment plan is in place and implemented.</p> <p>10.3.7.6 Student proficiency in clinical procedures is assessed and documented in the student clinical workbook.</p> <p><i>(This refers to the process by which students are trained to be competent in clinical procedures such as taking a blood pressure, doing a wound dressing, removal of sutures, etc. The student must perform a pre-determined number of repetitions, as represented in the clinical workbook. Following completion of the required number of repetitions, the preceptor must sign to indicate that the student is competent to perform the procedure unsupervised.)</i></p>
<p><b>10.3.8 The CETU has a system of supporting the learning experiences of students in the wards / units.</b></p>	<p>To motivate and promote a positive clinical learning environment.</p>	<p>10.3.8.1 There are dedicated clinical preceptors in all units/zones.</p> <p>10.3.8.2 The CETU manager has a document recording the number of mentors/preceptors available in each ward/unit.</p> <p>10.3.8.3 Where preceptors or mentors are unavailable, alternative employees are appointed to oversee student activities in their absence.</p> <p>10.3.8.4 Alternative employees appointed to oversee student activities in the absence of regular employees meets the minimum qualification requirements for the role.</p>

Standard	Overall purpose	Measures
		<p>10.3.8.5 An accompaniment plan is available for all levels of students.</p> <p>10.3.8.6 There is delegation of duties for students, which includes supervision according to their level of training. <i>(Delegation must meet students learning needs, taking into account whether students are placed for “clinical placement for learning” or “clinical placement for role taking”.)</i></p> <p>10.3.8.7 Ward delegation books reflect that students are included in the allocation of duties.</p> <p>10.3.8.8 Student initiated learning is documented in the clinical workbook by the student:</p> <ol style="list-style-type: none"> <li>a. records of student initiated learning as documented by the student in his/her clinical workbook are evaluated by the preceptors</li> </ol> <p>10.3.8.9 Learning provided during teachable moments by clinical employees to available students is documented.</p> <p>10.3.8.10 Students are provided an opportunity for debriefing and/or evaluation of their learning experiences. <i>(These moments can be documented in a ward log book or similar, or can be kept by individual preceptors or other clinical employees to record teachable moments provided by them).</i></p>
<p><b>10.3.9 Clinical assessments are done in accordance with the requirements of the programme and exit level outcomes.</b></p>	<p>To determine the student’s level of competence in relation to programme outcomes.</p>	<p>10.3.9.1 The minimum criteria for entry to examinations are available in the CETU.</p> <p>10.3.9.2 Clinical preceptors apply best available evidence in daily practice.</p> <p>10.3.9.3 There is evidence that clinical preceptors are trained in conducting of competency-based assessments.</p> <p>10.3.9.4 The competency criteria for students are available in the CETU.</p> <p>10.3.9.5 Roles of clinical education facilitators in clinical assessments are documented.</p> <p>10.3.9.6 Formative and summative assessments are performed according to the master plans of NEIs.</p> <p>10.3.9.7 Formative and summative assessments are performed in accordance with NEIs’ guidelines. <i>(This refers to the structure of the assessment, e.g. a 20 minute written script, 50-mark OSCE, three clinical assessments, etc.)</i></p>

Standard	Overall purpose	Measures
		<p>10.3.9.8 Moderation services are provided for all assessments.</p> <p>10.3.9.9 There are standard operating procedures for the provision of feedback to students.</p> <p>10.3.9.10 The CETU manager monitors implementation of the SOPs for feedback to students.</p> <p>10.3.9.11 Employees of NEI should monitor the quality of assessment done by the preceptors.</p>
<p><b>10.3.10 An effective remediation programme is provided for students.</b></p>	<p>To provide additional support to students in achieving clinical outcomes.</p>	<p>10.3.10.1 A standard operating procedure for the identification and referral of students requiring remediation is available. This is aligned to the NEI's student management policy.</p> <p>10.3.10.2 Records of students with identified skills deficiencies are available.</p> <p>10.3.10.3 Records of remedial action are available.</p> <p>10.3.10.4 There is evidence of monitoring of the effectiveness of remediation programmes.</p>



#### 10.4 Domain 4: Monitoring and evaluation

Standards	Overall Purpose	Measurement
<p><b>10.4.1 The CETU is adequately supported to function effectively.</b></p>	<p>To create a well-structured and functional CETU.</p>	<p>10.4.1.1 There is evidence of support visits from the nursing management.            10.4.1.2 There is evidence of support visits from the NEIs that place students.            10.4.1.3 There is evidence of support visits from the provincial Clinical Placement Coordinator or equivalent.            10.4.1.4 Written reports with action plans for support visits are available.            10.4.1.5 There is evidence of the implementation of action plans pertaining to the support visits.            10.4.1.6 The CETU monitors its own performance (e.g. comparing formative with summative outcomes).</p>
<p><b>10.4.2 The CETU manager submits scheduled reports as required.</b></p>	<p>To monitor progress of the functioning of the CETU.</p>	<p>10.4.2.1 There is evidence of monthly written reports to the nursing manager.            10.4.2.2 There is evidence of at least quarterly written reports to the NEIs that place students in the CETU.            10.4.2.3 There is evidence of monthly written reports to the provincial coordinator.            10.4.2.4 There is evidence of monitoring of the implementation of the MOAs /SLAs.            10.4.2.5 There is evidence of monitoring of the clinical teaching equipment according to health establishment policy.            10.4.2.6 There are reports on students' assessment of their learning experience at the CETU.</p>
<p><b>10.4.3 The CETU manager monitors the performance of the CETU in relation to the annual performance/ operational plan.</b></p>	<p>To ensure that activities carried out are aligned to the operational plan and the annual performance plan.</p>	<p>10.4.3.1 There is documented evidence that quarterly targets are met according to the operational plan.            10.4.3.2 A report on the evaluation of the allocation system of students is available.            10.4.3.3 A peer assessment programme for employees is available in the CETU.            10.4.3.4 There is evidence of implementation of a peer assessment programme for employees.</p>

Standards	Overall Purpose	Measurement
<p><b>10.4.4 There is a system for continuing professional development for the clinical CETU employees.</b></p>	<p>To ensure effective leadership and update employees on relevant practice skills.</p>	<p>10.4.4.1 There is evidence that the CETU employees attend Continuing Professional Development (CPD) relevant to their area of practice.</p> <p>10.4.4.2 Where CETU employees have not completed a relevant CPD in in clinical education, it is planned for.</p> <p>10.4.4.3 There is evidence that the CETU manager has successfully completed a basic financial literacy course pertaining to financial management and procurement processes/plans to complete the above.</p> <p>10.4.4.4 Portfolio of evidence of continuing professional development programmes are available.</p> <p>10.4.4.5 The NEIs includes the CETU employees in its continuing professional development programmes.</p>

## **11. Monitoring of implementation of the guidelines by the national Department of Health**

The national Department of Health will support, monitor and evaluate the implementation of the guidelines in a systematic and objective manner, to ensure that uniform clinical education and training opportunities are provided for all nursing students per programme requirements.

## **12. Summary**

The Guidelines for Clinical Education and Training Units were developed as a collaborative effort of diverse nursing stakeholders and experts in the field of nursing education and practice as well as the regulatory body (SANC). The goal of these guidelines is to assist nursing education and nursing practice providers to ensure that clinical education and training units afford students in training optimal opportunities to learn, practice and ultimately render quality patient care.

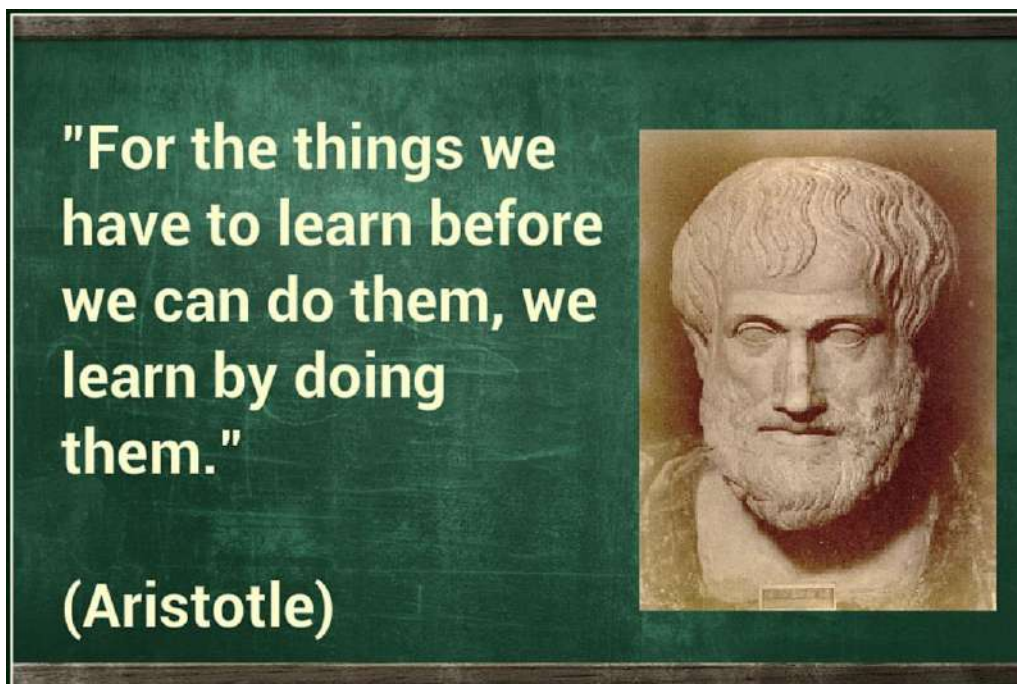
While the guidelines set out the minimum requirements, it is expected that nursing education institutions and the relevant accredited facilities adapt them to their needs without compromising the quality of nursing education and training provided.

### 13. References

1. Chabeli, M. 1999. Student nurses learning needs and expectations in the clinical learning units. *Curationis* (24)
2. Department of Public Service and Administration. 2013. Toolkit on Standard Operating Procedures
3. Henry-Noel, Bisop, N, Gwede, M, et al. 2018. Mentorship in Medical and other Health Professionals. *Journal of Cancer Education*. No 13187 (1-9)
4. National Department of Health. 2011. National Strategic Plan for Nurse Education, Training and Practice of 2012/2013 - 2016/17 (under review)
5. National Department of Health. 2019 National Policy on Nursing Education and Training
6. National Department of Health. 2018. Nursing service circular 10f 2018
7. National Development Plan 2030
8. Republic of South Africa. 2005. Nursing Act 33 of 2005. Pretoria: Government Printer.
9. Regulated Health Standards for Health Establishments. Office of Health Standards Compliance
10. South African Nursing Council. 2013. Circular 8 of 2013, Curriculum framework for entry levels (higher certificate, Auxiliary nurse; national diploma; Staff Nurse, Advanced Diploma; Midwifery and Bachelor's degree; Professional nurse and Midwife)
11. White Paper for National Health Insurance

#### 14. Development process

- 1 A concept document was developed in order to map out context.
- 2 A task team was appointed by the Director-General of Health to develop guidelines for clinical education and training units.
- 3 A situational analysis tool was developed in order to get an overall impression of the status of clinical training platforms across provinces.
- 4 Situational analysis was conducted using the tool across provinces in order to establish the feasibility and cost implications of re-establishing the CETUs.
- 5 An extensive system of Socio Economic Impact Assessment System (SEIAS) requirements was undertaken and complied with. SEIAS approval certificate for the National Policy on Nursing Education and Training was issued by Department of Monitoring and Evaluation in the Presidency. The guidelines are an implementation tool for the policy.
- 6 The task team played a primary role in the development of the guidelines. Provincial nursing directorates participated actively and made a meaningful contribution in giving inputs, which accelerated the development process. Inputs from these provinces culminated into draft O of the guidelines by March 2017.
- 7 Consultations with stakeholders (provinces and private health providers) on the first draft guidelines were conducted in the following provinces: Limpopo, Mpumalanga, Gauteng, Free State, KwaZulu-Natal, Western Cape and Eastern Cape.
- 8 The following private healthcare providers were consulted; Life Healthcare, National Hospital Network Association. These are hospitals not affiliated to the Hospital Association of South Africa (HASA) and Private Health Education Providers of South Africa (PHEPSA).
- 9 Inputs and comments from consultations were incorporated and culminated in the final draft of the guidelines at the end January 2019.
- 10 The guidelines were presented to the Technical Committee of the National Health Council (Tech NHC) for consideration at the 21 February 2019 meeting.
- 11 The guidelines were approved by the National Health Council at its 28 February to 1 March 2019 meeting.
- 12 A submission to the Director-General of Health to request approval of acknowledgement and signature of the guidelines was submitted end of May 2019.



## **15. Annexures**

The annexures attached in the subsequent pages provide guidance to enable Clinical Education and Training Unit (CETU) employees to develop their compendium of standard operating procedures (SOPs) referred to in the guidelines, which will clarify roles and responsibilities in order to improve efficiency of the CETU. They are a means to promote standardisation of CETU documentation by all providers of nursing education and nursing practice providers in the implementation of new nursing programmes. They provide a mechanism for evaluating operational performance in the day-to-day functioning of the unit, and promote a positive organisational culture.

**Annexure A1: Guidelines for standard operating procedure development**

**A1.1 Cover page**

**Name of Province**

**Name of Hospital**

**Title of Standard Operating Procedure**

**SOP NO.**

## A1.2 Standard operational procedure elements

<b>Intent</b>	An anticipated outcome (planned and desired action).
<b>Scope</b>	The work that needs to be accomplished to deliver the service.
<b>Objective</b>	Statements of specific outcomes to be achieved.
<b>Definition</b>	A paragraph that explains the meaning of a term, a word, phrases or other set of symbols.
<b>Acronyms</b>	Formed from the initial components in a phrase or name.
<b>Principles</b>	Fundamental norms or values that represent what is desirable and positive for an individual, group and organisation.
<b>Responsibilities</b>	Duty that is delegated formally to be performed.
<b>Accountability</b>	Obligation of an individual or organisation to account for its activities, accept responsibility for them, and to disclose the results in a transparent manner.
<b>Authority</b>	An institutionalised and legal power inherent in a particular job, function, or position that is meant to enable its holder to successfully carry out his or her responsibilities.
<b>Performance indicators</b>	Key performance indicators are quantifiable measurements, agreed to beforehand, that reflect the critical success factors of the process.
<b>Annexure</b>	Something added at the end, an appendix or supplementary document.

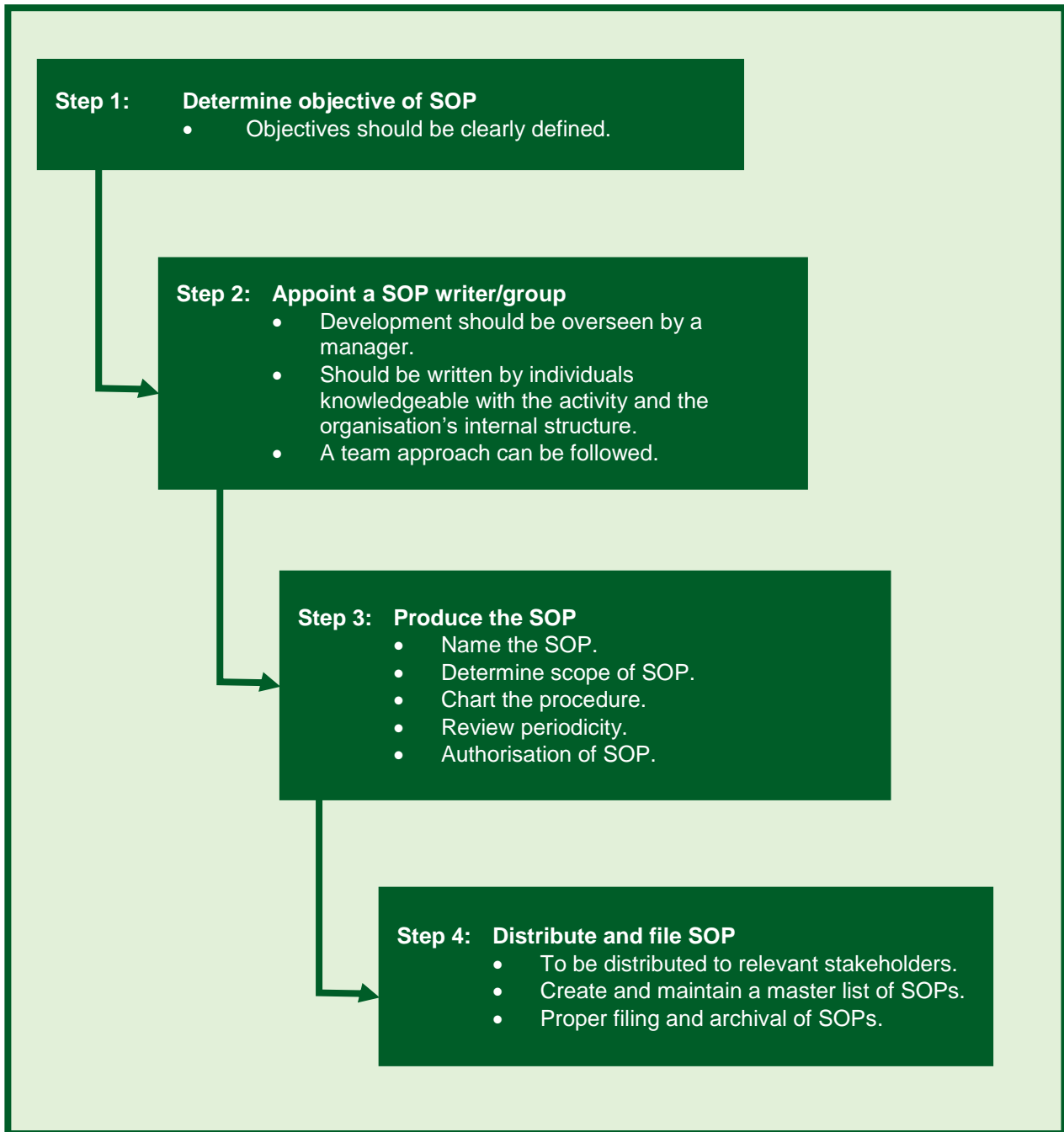
(DPSA toolkit 2011:11)



### **A1.3 Features of a standard operating procedure (SOP) template**

- The name of the organisation.
- The title of the SOP.
- The purpose of the SOP.
- The authorisation.
- Version number.
- References.
- Clear instructions.
- A link to the process referenced.
- The date of implementation or the effective date.
- Page number.
- Rationale.
- An identifying number.
- Signature of executive authority.

(DPSA toolkit 2011:11)



**Annexure A2: Checklist for meetings**

1. Agenda
2. Invitations
3. Signed copies of the minutes of the previous meeting
4. Attendance register

## **Annexure A3: Terms of reference for meetings**

The following are terms of reference that could be adapted for various committee/stakeholder meetings:

1. Purpose
2. Composition
  - 2.1 Chairperson
  - 2.2 Secretariat
3. Role of various members of the team
4. Conditions of membership
5. Termination of membership
6. Meeting procedures
  - 6.1 Quorum
  - 6.2 Agenda
  - 6.3 Adoption of previous minutes
7. Roles and responsibilities of committee members
8. Projected work plan (where appropriate)

**Annexure A4: Student progress records**

**A.4.1 Cover of folder**

1. Name of province.
2. Name of hospital.
3. Name of Nursing Education Institution.
4. Name of student and student number.
5. Programme of study.
6. Level/ year of study.

#### **A.4.2 Content of student progress records**

1. Orientation and induction of student.
2. Record of demonstration of activities related to patient care.
3. Record of supervision of student rendered patient care activities.
4. Assessment of student rendered patient care.
5. Outcome of assessment.
6. Record of remediation.
7. Record of outcome of remediation.
8. Record of demonstration of professionalism by student such as:
  - demonstration of respect for the patient
  - demonstration of cultural sensitivity
  - respect for the privacy of patients
  - demonstration of rendering holistic care
  - facilitation of patient involvement in care
9. Record of student's application of the legal-ethical framework in managing patients.
10. Record of the student's demonstration of integration of theory into practice.

**Annexure A5: Minimum standard equipment list for a CETU**

1. Two computers, one for use by students and the other for the use of employees.
2. 3-in-1 printer.
3. Electronic recordings of procedures.
4. E-learning material for students.
5. Multipurpose demonstration mannequin.
6. Flipchart stand.
7. Relevant stationery.
8. Lockable filing cabinets.
9. Data projector.
10. Desks and chairs.