

## **Project Title**

Increasing Clinical Competency Through Structured Education in Clinical Placements

## **Project Lead and Members**

Project lead: Jessabelle Lim Hsi Zhen

Project members: Lee Zhao Qin, Claudia Chew Si Rong, Matthew Neo Ji Hui, Lee Chiew Lan

## **Organisation(s) Involved**

Ng Teng Fong General Hospital

## **Aims**

To evaluate the confidence of students in treating patients after implementing a structured education programme during placements

## **Background**

See poster appended/ below

## **Methods**

See poster appended/ below

## **Results**

See poster appended/ below

## **Lessons Learnt**

The development of structured education programme (with practical and tutorial sessions) help students to be more confident in treating patients at the end of their placement. The team needs to standardise the teaching methods and continually develop study materials to prepare students to treat patients

**Conclusion**

See poster appended/ below

**Project Category**

Healthcare Training & Education

**Keywords**

Ng Teng Fong General Hospital, Andragogies/ Pedagogies, Ishikawa, Plan Do Check Act,  
Clinical placements

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# INCREASING CLINICAL COMPETENCY THROUGH STRUCTURED EDUCATION IN CLINICAL PLACEMENTS

## MEMBERS:

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- ☐ SAFETY
- ☐ PRODUCTIVITY
- ☐ PATIENT EXPERIENCE
- ☒ QUALITY
- ☐ VALUE

## Define Problem/Set Aim

### Opportunity for Improvement

Physiotherapy students undertake clinical placements as part of their studies. Clinical placements are seen as a way to allow students to apply theoretical knowledge into actual practice. **However, successfully translating theory into practice remains an obstacle for most students and clinical educators.** Our survey of current PTs show that they finished clinical placements without adequate competency or confidence in treating patients independently – scoring a **2.4 out of 5 for confidence.**

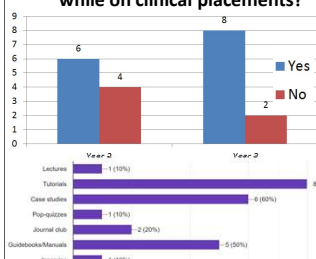
This may be attributed to the lack of education during clinical placements. The current trend still remains as having students see as many cases as possible without allowing time to internalize both skills and knowledge. Our survey shows that most students experience limited education on placement and would like to have more. Clinical educators are also willing to set aside time to introduce education into placements to improve the clinical competency of students

### Aim

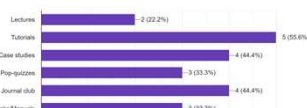
To evaluate the confidence of students in treating patients after implementing a structured education programme during placements.

## Establish Measures

### Do students actually receive education while on clinical placements?



All (n = 9) surveyed clinical educators felt that students will benefit from a more structured clinical education programme.

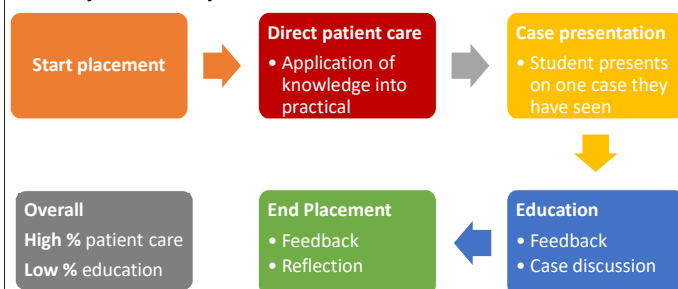


Forms of education that current PTs experienced as students

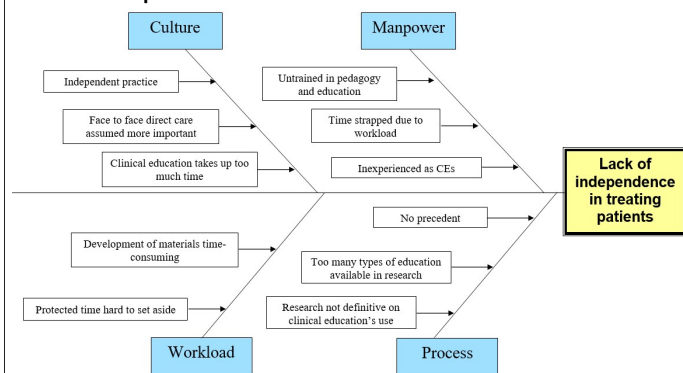
Forms of education that current PTs would have liked to experience as a student

## Analyse Problem

### What is your current process?



### What are the probable root causes?



## Select Changes

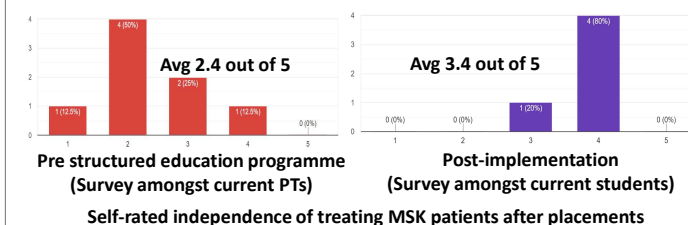
### What are the probable solutions? (Highlighted Orange = Implemented)

Root cause	Solutions
Culture	1) Survey of therapists competence
Manpower	2) Training sessions for clinical educators
	3) Set protected time
Workload	4) Rotation of staff involved in teaching
	5) Train all staff – increased competence
Process	6) Set up task force
	7) Brainstorming and research sessions

## Test & Implement Changes

### How do we pilot the changes? What are the initial results?

CYCLE	PLAN	DO	STUDY	ACT
1	To find out if a structured and diverse education system will benefit the first batch of SIT students on their first placement.	Implement a structured education programme with study materials and hands-on training by current staff on the new batches of SIT students	Most students <b>felt competent enough</b> to treat patients after their placement. They felt the programme refreshed and <b>enhanced their knowledge</b>	Content taught in school may not have been adequate for patient treatment and must be complemented with further clinical education. To continue education in next batches
2	Continue implementation of programme on subsequent SIT students	Surveys to gather feedback to improve the programme as well as satisfaction with the programme will be carried out	As of the 2 <sup>nd</sup> batch, the education programme was still well received by students. Current competency scores are <b>3.4 out of 5</b>	Evaluate the results from the feedback gathered from the students. Rolling feedback gathering to continue enhancing the programme in line with SIT syllabi.



## Spread Change/Learning Points

### What are the strategies to spread change after implementation?

The structured education system has been well received by students and clinical educators also find their knowledge being refreshed. This programme is currently limited to clinical educators and not extended to rotatees or junior staff. We identified a strategy to spread change by conducting intra-team training first to **standardize the teaching methods** as well as promote a baseline level of knowledge and clinical competency amongst all members in the team. Once this is achieved, the next strategy will be to **continually develop the study materials** and extend to other disciplines within the department such as neurological or geriatric physiotherapy.

### What are the key benefits?

- Student satisfaction with practice and tutorial sessions
- Increased confidence in clinical skills at end placement

### What can be improved?

- Standardize teaching content amongst staff
- Exposure to more forms of materials (visual – x-rays, audio – podcasts, written – case studies)