

Jan's journey in the student placement system



Kia ora - I'm Jan Rewa,
I'm 36 years old, I have 2 kids, I'm from up north, and plan to study nursing in Auckland

I want to do my 9 week placement near my Koro's home in Whangarei so I can stay with him and so he can help with the kids

A Māori health service provider wants to support me but struggles with capacity to supervise students - they need more workers

I can get support to train from MSD's training incentive allowance but I find navigating support difficult and I might be missing out

I want to get on with it – onwards and upwards

The system

Enrolment study

Placement requirement established

Coordination

Placements

Professional registration / APC

Tertiary Education Organisations (TEOs) set enrollment numbers considering access to placements

Responsible Authorities (RAs) and TEOs design clinical learning

TEOs liaise with Health Services to arrange placements

Health Services provide clinical supervision and learning

RAs register and Health Services employ professionals



Current risks

TEOs not confident they will have enough placements so do not enrol as many students
- **Jan is eligible but might miss out**

Inconsistent or prescriptive requirements – some decisions focus on academic or meeting programme design constraints not competency, safety or industry needs
- **Jan is disillusioned**

TEOs and services spend many hours arranging & rearranging places – with last minute changes and preferences not met
- **Jan has to re-organise child-care arrangements**

The full range of placement options (regions, services, times) are not used = **less places available**

Not clear where money from TEOs to services goes – clinical supervisors feel unsupported - students feel unwanted
- **Jan quits**

Insufficient graduates or diversity to meet service demand

New opportunities

Regional Hubs supported by a nationwide digital system provide TEOs clarity and confidence about how many placements will be available
- **Jan can enrol**



Innovation and collaboration on experiential learning including investment in simulation, consistency in placement hours
- **Jan gets fit for purpose training**

Nationwide digital matching system

Regional hubs do coordination and matching, including maintaining relationships with TEOs and health services, monitoring and building capacity – less admin, more equity, better relationships, preferences can be met, more reliable, more resources for supervision
- **Jan enjoys her placement**

Funding arrangements for clinical placements, along with support for students and supervisors is clarified, updated transparent and monitored
- **Jan knows how to access and gets great support and supervision**

Nationwide, whole year options visible - more placements, greater diversity of learning and service settings
- **Jan learns a lot**

More graduates and more diversity, **Jan has her APC, is skilled and starts work in a community provider** she enjoyed during her clinical placements – up north where she is from