

# LUBAGA HOSPITAL

## CLINICAL MENTORSHIP MANUAL FOR INTEGRATED SERVICES



### GUIDELINES

MAY 2017

#### 1. INTRODUCTION

- 1.1 Lubaga is a 280 beds teaching hospital, Getting more to be known as a Training Institution, it has three Arms:

➤ Clinical Care

- Teaching
- Research
- It has an established multi-disciplinary education committee that addresses training needs of different students' disciplines and members are addressed by their titles to meet the different activities

## 1.2 Who is a hospital practicum student?

Any healthcare student who has attended a college/Institution course designed to give a student supervised practical knowledge and skills of a subject previously studied theoretically.

## 1.3 Student disciplines:

Lubaga hospital hosts different disciplines of Internal, External and International students, in groups for Institutions with Memorandum of Understanding and as individuals for students during their holidays, these are;

- Nurses and Midwives
- Medical students
- Paramedical students; Pharmacy, Clinical Medicine , Laboratory  
Public Health, Dentistry, Sonography, Physiotherapy

## 1.4 What is practicum?

Practicum (also called work placement) is a graduate level course, often in a specialized field of study, that is designed to give students supervised practical application of a previously or concurrently studied theory. Practicums are for hands on teaching of students so that they get practical knowledge and skills.

## 1.5 Eligibility criteria:

Students should be from second year of training upwards, except in cases of internal students and students from schools with Memorandum of Understanding who are allowed from their 1<sup>st</sup> year of training.

## 1.6 Practicum policies:

- Internal/External students

- An introductory letter from the student, or in case of MoU with the school a letter from the training institution
  - Intended timeframe of the placement
  - A list of learning objectives expected by the institution/organization.
- International students
- Application letter with a CV and a copy of certificates (in case applicable) or proof of study
  - Intended timeframe of the placement
  - A letter from the organization through which the application for practicum was received with contacts. (in case applicable)
- Start and End date:
- For Institutions with MoU and International students' communication is done a month earlier to enable good arrangements, starting and ending date well defined.
- Working Hours:
- Duties are arranged to address two to three duty shifts, each duty shift consisting of not more than 8hours and not less than 6hours except Night duty.
- (International students usually come with pre-arranged coverage of 300 to 360 hours per hospital placement)
- Practicum fees:
- Apart from internal students, all students should contribute to site supervision and hospital utilities such as electricity, water, sanitation, stationery and others payable to Hospital Accounts.
- Problem solving:
- In the event of damage or loss to patient' property or any Hospital asset, resulting from negligence, indiscipline, theft or unethical conduct by student, the student responsible shall be made to make good the loss through the assistance of the college administration.
- The hospital shall be at liberty to dismiss with communication to the college in writing any undisciplined student who exhibit undesired or unethical conduct during the placement

## **2. Introduction to Clinical Mentorship**

- 2.1 Provision of comprehensive quality health care services requires training and mentorship, irrespective of the individual
- 2.2 Providing services. Clinical mentorship is aimed at improving the skills and knowledge of health care practitioners, including nurses, doctors, pharmacists and others in patient management.
- 2.3 The purpose of this manual is to provide guidance in developing and/or integrating clinical mentorship programs within the hospital, to ensure quality healthcare service delivery.

## **3. What is Clinical Mentorship?**

- 3.1 Clinical mentorship is a system of practical training and consultation that fosters ongoing professional development of mentees to deliver sustainable high-quality clinical care. Clinical mentoring should be seen as part of continued professional development required to create competent care providers. Driven by the learning needs of mentees, it occurs in hands on and face-to-face consultations.
- 3.1 After initial educational coursework, which conveys knowledge on a particular subject, the clinician responsible for providing quality care and treatment is provided mentoring at facility level to implement clinical standards (guidelines), addressing knowledge, attitudes, and behavior and thereby competency.

## **4. Clinical Mentorship Versus Supportive Supervision**

- 4.1 Clinical mentoring and supportive supervision are complementary activities that are necessary to build the health service delivery systems. They both generally aim at a common set of outcomes but differ in the emphasis and approach given by each.
- 4.2 Supervision tends to emphasize health facility management. It is often more hierarchical and managerially oriented.
- 4.3 Supervision is key in many organizational settings, and the goals are pre-determined by the system. It may be more critical and evaluative than the more non-judgmental approach associated with mentorship. Making sure supervision is 'supportive' may moderate this.
- 4.4 Clinical mentorship places more emphasis on the enhancement of the professional skills and competencies of the healthcare provider (mentee). Although clinical mentoring and supportive supervision overlap considerably, the activities are different enough that often they will be implemented by different teams:
  - Clinical mentorship focuses on the professional development of mentees – therefore clinical mentors need to be experienced, competent clinicians;

## **5. Goal and Objectives of Clinical Mentorship**

5.1 The goal of the clinical mentorship program is to equip health care providers with the clinical knowledge, skills and attitudes to achieve competence and confidence in provision of quality care.

5.2 The objectives of clinical mentorship are as follows:

- Equip students with knowledge and skills
- Improve patient clinical outcomes.
- Boost the standard of the hospital

## 6. Who Should Be a Clinical Mentor?

6.1 The clinical mentor should have a **minimum of six months clinical experience and proficiency** in the technical area in which s/he is to mentor, (e.g. paediatrics, tuberculosis (TB), antenatal care, HIV/AIDS). S/he must routinely participate in clinical updates/continuing professional development activities.

6.2 The clinical mentor is also expected to have personal characteristics conducive to clinical mentoring, including **leadership** and the **desire to help** mentees and other members of the multi-disciplinary team to improve their knowledge and skills.

6.3 There are key skills that a clinical mentor is required to have in order to assist his/her mentees in attaining confidence and competence in provision of quality health care. Skills include:

- Clinical proficiency and capacity to make decisions
- Willingness to mentor other clinicians through on-site visits
- Capacity and desire to motivate the mentee to perform well

## 7.0 Practicum site requirements:

7.1 Effective skilled Clinical Mentors

7.2 Guidelines or standard operating procedures to assist students address evidence based practices and be able to interpret them.

7.3 Students are required to be professional by adhering to punctuality, ethical code of conduct; respectful to hospital staff, clients and Maintaining the code of dressing

7.4 Students responsibility at practicum site;

- Students establish and maintain a positive professional relationship with their mentor characterized by respect, cooperation and desire to learn.
- Communicate a positive attitude
- Be open and receptive to feedback or criticism. Be open to making appropriate changes in response to feedback.
- Follow the directions and suggestions given by the Clinical Mentor
- Discuss any problems as soon as they arise, it is best to talk with the clinical mentor first if the problem involves work.
- Be an active learner
- Perform the responsibilities of the practicum as outlined in the students' learning objectives
- Meet agreed upon deadlines

#### 7.5 Clinical mentor's responsibility at practicum site;

- Facilitate student learning i.e. integration of knowledge, skills and attitudes
- Monitor learning environment
- Help students to evaluate achievement of learning, consistent with goals and objectives
- Monitor student progress and help resolve problems
- Communicate effectiveness
- Maintain ethical behaviour

### 8.0 **Management of different disciplines of students**

- 8.1 All practicum students to come with introductory letters and wards /departmental allocations
- 8.2 Students entry point to the hospital is through students Coordinator's office
- 8.3 Wards/ departmental allocations to be distributed to respective departments through the same office
- 8.4 All students should come with their learning objectives as per year of training.
- 8.5 Specific student disciplines will be handled by students coordinator in liaison with the concerned departments such as Pharmacy, Laboratory, Dental etc
- 8.6 Nursing, Midwifery, 1<sup>st</sup> & 2<sup>nd</sup> year medical and clinical medicine students coming for nursing exposure /hands on training will be handled by mentors with skills to meet student needs

- 8.7 For 4<sup>th</sup> year Medical students coming for elective placement will be forwarded to heads of Departments i.e. Medicine, Surgery, Paediatrics and Obstetrics/Gynaecology by the same office
- 8.8 3<sup>rd</sup> year Clinical Medicine students will be forwarded to the Senior Clinical Officer for practicum arrangements
- 8.9 Work-plans, duty plans and task allocations are done by Clinical Mentors, Update of Standard Operating Procedures is done by the Clinical Mentors together with the in-charges.

## 9.0 **Practicum students education office**

- 9.1 Entry point for all medical related practicum students
- 9.2 Coordinates all students' related activities;
- Liaison between Training Institutions, Hospital and practicum units
  - Coordinates student activities at different practicum sites relating to the different disciplines and year of training objectives.
  - Receives Training Institutions applications for Memorandum of Understanding and forwards them to Medical Director/Education Committee
  - Carries out Induction /Orientation of new students and CMEs
  - Receives students' ward allocations, distributes them and follows up students
  - Writes Mentorship program reports
  - Emphasize the ethical code of conduct and dress code for students while in practical area and allocated students availability.
  - Ongoing counselling of students on issues pertaining to their hospital experience and welfare.
  - Follows up student appraisal reports and case book
- 9.3 Monitoring continuity and the quality of student mentorship together with Clinical Mentors.

## 10.0 **Monitoring and Evaluation of Clinical Mentorship**

There are multiple ways to assess whether clinical standards are being met/means of assessment most feasible to conduct relevant to the local context. It is recommended that a minimum of 2-3 processes are utilized to provide a comprehensive overview of services.

## 10.1 Assessment of Performance of the Clinical Mentor

The clinical mentor should be assessed on his/her competencies by the designated mentorship supervisor/coordinator in the following areas:

- Effective and supportive communication with mentee, other clinic staff and patients
- Communicating well-defined performance standards, which are set according to national clinical practice guidelines
- Determining if performance standards are being met
- Identifying barriers preventing achievement of standards and making recommendations to address them
- Implementing interventions to improve performance and quality
- Providing effective feedback to the mentee
- Disseminating clinical practice guidelines and information to enhance patient outcomes
- Conducting routine monitoring and evaluation of mentee and clinical mentorship program

*According to set "Clinical Mentor Performance Standards"*

## 10.2 Assessment of the Clinical Mentorship Program

The effectiveness of the clinical mentorship program should be monitored at the hospital level, this information should be used to continually improve quality of healthcare services. Monitoring and Evaluation (M&E) systems should measure outputs of the quality of the clinical mentorship program.

## 10.3 Clinical Outcomes

It is expected that the outcomes of clinical mentorship will not only lead to improved technical skills, knowledge and clinical decision-making by mentees, but also patient clinical outcomes. Facility managers should routinely establish indicators of improved quality of care and clinical outcomes and measure these through data reported.

Clinical mentorship program can be utilized to identify areas needing improvement, implement changes to improve patient outcomes, and gather the data to measure the impact of those interventions.

## 11.0 Conclusion

Competent clinical providers are essential to ensuring equitable access to quality care, and competence can only be assured through training and mentorship. This manual is relevant to all services offered within the hospital system.