

HEALINT Protocol - Requirements for traineeships' placements in the healthcare sector

English language version



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Introduction

In healthcare studies which include professional regulation, student learning in clinical practice is an essential part of the curriculum. Curricula are designed with close input from the national health services, and on graduation, students are expected to have sufficient experience to practice independently within their profession. Simultaneously, a shortage of healthcare professionals in certain countries is stimulating mobility. However, healthcare professionals who trained within the system they intend to work in, are able to immediately integrate to deliver care, unlike other professionals coming from abroad, who require extra time and resources to integrate them with national specificities of the health system.

This document is an output of HEALINT, an ERASMUS+ project, whose mission was to facilitate the mobility of higher education students/trainees and professionals in the healthcare sector in order to increase the supply and quality of international placements offered by hospitals and related healthcare organizations throughout Europe.

The intent of this document is, therefore, to provide a set of requirements that support higher education and healthcare institutions to offer and direct high-quality cross-border traineeships and simplify the processes involved in organizing these for trainees.

This document uses the below four verbs with the following intentions:

Used in requirements:

Shall indicates an obligation.

Should indicates a recommendation.

Used in notes:

May indicates a permission.

Can indicates a possibility.

1 Scope

This document specifies requirements for operational practices when a traineeship host organization wishes to demonstrate its ability to consistently provide and improve traineeship placements that meet the requirements of the educational organizations as well as the applicable legal requirements.

All the requirements of this document are intended to be applicable to any traineeship host organization, regardless of its type, size or the healthcare services provided.

2 Normative references

This document has no normative references.

3 Terms and definitions

Across this document, the following terms are used with the following technical definitions:

3.1

compliance obligations (preferred term)

legal requirements and other requirements (admitted term)

Legal requirements that an organization has to comply with and other requirements that an organization has to, or chooses to, comply with.

Note to entry: Compliance obligations can arise from mandatory requirements, such as applicable laws and regulations, or voluntary commitments, such as organizational and industry standards, contractual relationships, codes of practice and agreements with community groups or non-governmental organizations.

[Source: Adapted from ISO 14001:2015 Environmental management – Requirements – Note 1 to entry was deleted and Note 2 to entry was kept without numbering]

3.2

documented information

Information required to be controlled and maintained by an organization and the medium on which it is contained.

Note 1 to entry: Documented information can be in any format and media, and from any source.

Note 2 to entry: Documented information can refer to:

- the management system, including related processes;
- information created in order for the organization to operate (documentation);

- evidence of results achieved (records).

[Source: ISO/IEC Directives, Part 1 - Consolidated ISO Supplement - Procedures specific to ISO – Annex SL - Proposals for management system standards – Appendix 2 - High level structure, identical core text, common terms and core definitions]

3.3

european credit transfer and accumulation system (ECTS)

Credit system designed to make it easier for students to move between different countries. Since they are based on the learning achievements and workload of a course, a student can transfer their ECTS credits from one university to another, so they are added up to contribute to an individual's degree programme or training.

[Source: European Commission]

3.4

european credit transfer for vocational education and training (ECVET)

Credit system designed to facilitate the transfer, recognition and accumulation of assessed learning outcomes of individuals who are aiming to achieve a qualification.

[Source: European Commission]

3.5

european qualification framework (EQF)

Common European reference framework whose purpose is to make qualifications more readable and understandable across different countries and systems. Covering qualifications at all levels and in all sub-systems of education and training, the EQF provides a comprehensive overview over qualifications in the 39 European countries currently involved in its implementation.

[Source: CEDEFOP]

3.6

formal education

Education that is institutionalised, intentional and planned through public organizations and recognised private bodies, and – in their totality – constitute the formal education system of a country. Formal education programmes are thus recognised as such by the relevant national education or equivalent authorities, e.g. any other institution in cooperation with the national or sub-national education authorities. Formal education consists mostly of initial education.

Vocational education, special needs education and some parts of adult education are often recognised as being part of the formal education system.

Note to entry: Institutionalised education occurs when an organization provides structured educational arrangements, such as student-teacher relationships and/or interactions, that are specially designed for education and learning.

[Source: ISCED]

3.7

human resources

people working within or contributing to the organization.

[Source: ISO 30400:2016 Human resource management -- Vocabulary]

3.8

infrastructure

<organization> system of facilities, equipment and services needed for the operation of an organization.

[Source: ISO 9000:2015 Quality management - Fundamentals and vocabulary]

3.9

interested party (preferred term)

stakeholder (admitted term)

person or organization that can affect, be affected by, or perceive itself to be affected by a decision or activity

Note to entry: Examples of interested parties are: Customers, owners, people in an organization, providers, bankers, regulators, unions, partners or society that can include competitors or opposing pressure groups.

[Source: ISO 9000:2015 Quality management - Fundamentals and vocabulary]

3.10

nonconformity (preferred term)

incident (admitted term)

Non-fulfilment of a requirement.

[Source: Adapted from ISO/IEC Directives, Part 1 - Consolidated ISO Supplement - Procedures specific to ISO – Annex SL - Proposals for management system standards – Appendix 2 - High level structure, identical core text, common terms and core definitions]

3.11

mentor

person(s) primarily concerned with the learning development of the trainee during the time they are within the traineeship.

Note 1 to entry: depending of the context, there might one or more mentors per trainee – e.g. academic mentor, clinical mentor, among others.

Note 2 to entry: Depending on the context/culture, a mentor may be called a practice supervisor, a director, or any other job role' name which responsibilities match the above definition.

3.12

mission

reason for being, mandate and scope of an organization, translated into the context in which it operates.

[Source: ISO 21001:2018 – Educational organizations – Managements systems for educational Organizations – Requirements with guidance for use]

3.13

organization

person or group of people that has its own functions with responsibilities, authorities and relationships to achieve its objectives.

[Source: ISO/IEC Directives, Part 1 - Consolidated ISO Supplement - Procedures specific to ISO – Annex SL - Proposals for management system standards – Appendix 2 - High level structure, identical core text, common terms and core definitions]

3.14 organization culture

values, beliefs and practices that influence the conduct and behaviour of people and organizations.

[Source: ISO 30400:2016 Human resource management – Vocabulary / ISO 30401:2018 Knowledge management systems -- Requirements]

3.15

organizational policy

intentions and direction of an organization as formally expressed by its top management.

[Source: ISO/IEC Directives, Part 1 - Consolidated ISO Supplement - Procedures specific to ISO – Annex SL - Proposals for management system standards – Appendix 2 - High level structure, identical core text, common terms and core definitions]

3.16

professional higher education

form of higher education that offers a particularly intense integration with the world of work in all its aspects, including teaching, learning, research and governance, and at all levels of the overarching qualifications framework of the European Higher Education Area (EHEA).

[Source: EURASHE]

3.17

service user

person to which the health care service is delivered.

Note to entry: Depending on the nature and culture of the organization, a service user might be known as patient, customer, client, among others.

3.18

traineeship (preferred term)

apprenticeship (admitted term)

learning that alternates between a workplace and an education or training institution; that is part of formal education and training; and that on successful completion, learners acquire a qualification and receive an officially recognized certificate.

(Source: Adapted from CEDEFOP)

3.19

traineeship host organization

organization offering the traineeship placement.

Note to entry: The host organization can differ in substantially according to the services offered (hospital, clinic, care home, hospice, etc.); their financial nature (public, private, etc.) and their size (micro, small or large), among other characteristics.

3.20

vision

aspirations of an organization in relation to its desired future condition and duly aligned with its mission.

[Source: ISO 21001:2018 – Educational organizations – Managements systems for educational Organizations – Requirements with guidance for use]

4 Governance

4.1 Mission and vision

The traineeship host organization shall identify its mission and determine its vision and maintain it as documented information.

4.2 Organizational culture

The traineeship host organization shall identify, implement and maintain a culture that demonstrates the organization's knowledge of service users' needs and expectations and reflects cultural sensitivity, effective practice and continual improvement.

When identifying this culture, the traineeship host organization should consider:

- a) anti-discrimination;
- b) cultural integration;
- c) a positive working attitude;
- d) data protection;
- e) ethical practice;
- f) occupational health and safety;
- g) dedication to healthcare professional development;
- h) promotion and use of evidenced-based practice;

i) commitment to continuous improvement based on best practice and reflections on lessons learned.

Note 1: Cultural integration can include the recognition, respect and fulfilment of cultural and language needs of service users as appropriate.

Note 2: A positive working attitude can include sensitivity of all cultures; mutual respect; empathy; compassion; motivation; confidence; patient safety.

4.3 Organizational policy

The traineeship host organization shall establish, implement and periodic review an organizational policy that reflects the organizational culture, through a set of organizational commitments.

The organizational policy should be maintained as documented information and be available to interested parties.

4.4 Compliance obligations

The traineeship host organization shall identify the applicable local, regional, national and European requirements for delivery of safe and effective care, considering:

- a) clinical practice;
- b) data protection;
- c) occupational health and safety;

d) appropriate insurance arrangements to protect patients and their carers, employees, visitors and students/trainees in the workplace.

The traineeship host organization shall maintain documented information of the identification of the above requirements and retain documented information that the compliance has been verified.

Note 1: Local, regional, national and European requirements can be stated in proprietary or formal standards, policies, procedures and other similar technical documents.

Note 2: Verification of compliance obligations can be performed through self-assessment practices such as internal audits, an inspection from a regulatory body or an audit from an accredited certification body.

4.5 Risk management

The traineeship host organization shall adopt a methodology for risk management related to the traineeship placements, which enables:

- a) identification of risks;
- b) evaluation of risks;
- c) determination of actions to address relevant risks;
- d) evaluation of the effectiveness of the actions implemented.

The traineeship host organization shall ensure its staff is adequately trained in the adopted risk management methodology.

Documented information regarding the adopted risk management methodology and evidence of its implementation shall be maintained and retained, respectively.

4.6 Control of nonconformities

The traineeship host organization shall establish a methodology to deal with nonconformities related to the traineeship placements, which enables:

- a) description of the nonconformity;
- b) root cause investigation;

c) determination of appropriate actions to address the nonconformity, the responsible persons for its implementation and deadlines;

d) evaluation of the effectiveness of the actions implemented.

Documented information regarding the methodology and evidence of its implementation shall be maintained and retained, respectively and communicated to the educational organization without undue delay.

Note: Appropriate actions to address nonconformities can include any corrections and support measures needed as well as any actions to avoid nonconformities recurrence.

5 Resources

5.1 Human resources

The traineeship host organization shall determine, provide and maintain sufficient human resources for the traineeship placement, including:

- a) adequate staffing ratios and skills;
- b) clear job descriptions and leadership styles;
- c) support for staff life-long learning and career development.

5.2 Infrastructure

The traineeship host organization shall determine, provide and maintain an adequate infrastructure for the traineeship placement.

5.3 Financial resources

The traineeship host organization shall determine, provide and maintain sufficient financial resources to allow:

a) conformity with the requirements of 5.1 and 5.2;

b) adequate investment into the continuous development of the healthcare services provided.

5.4 Documented information

The organizational scope in which this protocol is implemented, as well as justifications for any non-applicable requirements, shall be maintained as documented information.

To the extent necessary, the traineeship host organization shall also:

a) maintain documented information to support the operation of the traineeship placements offered;

b) retain documented information to have confidence that the traineeship placements are being carried out as planned.

Documented information maintained and retained shall be easily available to staff, students and representatives of the educational organization, as appropriate.

Note 1: Examples of documented information maintained can be: Induction plans, placement desired learning outcomes, documented job descriptions, health and safety documented procedures, among others.

Note 2: Examples of documented information retained can be: Staff rotation records, insurance records, among others.

6 Traineeship planning and control

6.1 Allocation of trainees to traineeship placements

The traineeship host organization shall assure the requirements for the traineeship placement are defined and that the trainee meets those requirements before starting the traineeship.

When the selected trainee does not meet a given requirement, the traineeship host organization shall make sure adequate actions are implemented that lead to the acquisition of the required competences during the induction phase of the traineeship.

The traineeship placement requirements, as well as evidence that the trainee meets them shall be maintain and retained, respectively.

Note: Examples of requirements not usually met in advance by a trainee can include competences related to specific procedures of the organization (e.g. health and safety, security) or to specific resources (e.g. medical devices, software applications or other equipment), among others.

6.2 Assignment of mentors

The traineeship host organization shall assign a mentor to each trainee who is adequately prepared to support the professional development of trainees in their placement. This shall include:

a) pedagogical competence to mentor;

b) professional qualification adequate to the characteristics of the traineeship;

c) knowledge of relevant information regarding the traineeship, including characteristics of the placement and of the trainee being allocated.

The minimum mentorship contact time shall be defined in number of hours and its distribution across the duration of the traineeship.

The identification and contacts of the assigned mentor shall be made available to the trainee and hers/his educational organization.

6.3 Learning environment

The traineeship host organization shall determine, provide and maintain a supportive learning environment for the traineeship placement, including an organizational behaviour which reflects the commitments expressed in the organizational policy (see 4.3).

The traineeship host organization shall assure the availability of a learning environment where:

a) the learning opportunities match the learning objectives and level of the trainee and any exceptions justified;

b) the trainee experiences the delivery of patient care based on contemporary evidencebased practice;

c) there is a positive learning culture which embraces and supports diversity;

d) the trainee is not included in the work force and the mentor remains accountable for the trainee activity;

e) there is a system in place for trainees and mentors to raise concerns;

f) the role and responsibilities of the trainee are clearly identified;

g) the wellbeing of the trainee is supported

h) the trainee has access to relevant documented information;

i) trainee feedback is used for continuous improvement of the traineeship placement.

Note 1: Examples of embracing and supporting diversity can include:

a) support acclimatization to new cultures;

b) the implementation of plans to address language barriers such as translation of common medical and healthcare terms;

c) the use of transcultural nonverbal communication to establish professional relationships with patients and others.

Note 2: Concerns raised can include those related to the trainees' experience or care provided to service users;

Note 3: Examples of relevant documented information can include policies, procedures and guidance, among others.

6.4 Assessment of learning

The traineeship host organization shall assure coordination with the higher education institution regarding the assessment of learning of the trainees and retain documented information of any relevant communications held.

Note: Coordination regarding assessment of learning may include:

a) instruments used and its grading system;

b) moments in which the assessment occurs;

c) system to support and assist student by giving continuous feedback on student's commitment;

d) system to support and recover failing students.

7 Recognition of traineeships

7.1 Establishment of partnerships

The traineeship host organization shall establish a partnership with an education organization that enables continued cooperation and support regarding the traineeship.

The partnership shall ensure:

a) a responsible teacher is nominated for the traineeship and her/his direct contact details are available;

b) the education organization is aware of the host organization's culture (see 4.2) and commits to it;

c) clear insurance arrangements (see 4.4 d)).

Documented information shall be retained as evidence of the partnership and of any relevant communication regarding the traineeships hosted.

Note: A partnership can be evidenced through a documented agreement describing the rights and obligations of the parties involved.

7.2 Certification of traineeship

The partnership established shall ensure that the traineeship is recognised as education.

The traineeship host organization shall ensure that the education organization:

a) complies with national and European applicable legal requirements related to the educational curriculum for clinical traineeships;

b) is accredited under the European Higher Education Area (EHEA) if providing education at EQF levels 5 and above;

c) certifies the traineeship in European credit units, such as European Credit Transfer System (ECTS) or European Credit Transfer System for Vocational Education and Training (ECVET).

Both the accreditation status of the educational organization and the certification status of the traineeship shall be retained as documented information.

Note: The compliance with national and European applicable legal requirements may be evidenced through a self-declaration from the education organization.

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About the HEALINT Project and this publication

In healthcare, student learning in clinical practice is an essential part of the curriculum. However, in a context of international mobility, healthcare professionals ideally need to train within the system they intend to work in, so that they may easily integrate and deliver care. HEALINT is promoting such international training by developing management tools that support Higher Education and Health Care institutions to offer and direct high-quality cross-border apprenticeships which can serve as a basis for the development of formal international standards and guidelines.

This document contains the HEALINT Protocol which is a requirements standard for auditing the quality of practice learning environments.



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