North Carolina’s Consortia for Clinical Education and Practice

Executive Summary

The Consortia for Clinical Education and Practice were formed in 2008, as recommended by the NC IOM, to address the need for expanding clinical capacity for nursing students and eventually all health care students. Work of the Consortia encompasses three areas:

- standardizing and streamlining the clinical faculty/student credentialing process,
- developing a standardized common “core” orientation, and
- streamlining the clinical placement process.

Mission

The primary mission of the consortium is to support and grow the healthcare workforce by addressing clinical placement issues for students’ consortium-affiliated facilities.

Objective:

It is the objective of the CCEP that statewide, all health science students and faculty complete a common core orientation currently endorsed by the North Carolina Hospital Association, housed on the Wake AHEC website.

"NCHA endorses the collaborative work between the partners of the Consortium for Clinical Education and Practice to implement a core orientation and student credentialing passport process. NCHA supports the clinical and academic partners’ ultimate goal of encouraging statewide adoption of this program for all health science students in hospital based rotations.” (NCHA Endorsement Statement, 2014).

Current Challenges

- The 2020 pandemic changed the number of available clinical placement sites, the number of available preceptors and the processes for student clinical placement.
- Clinical placements have been complicated by a current shortage of clinical faculty.
- Cloud-based technology implementation has decreased a perceived under-utilization of placement sites and lack of transparency of the clinical placement process.

Outcomes to Date:

- The credentialing process has been standardized to the highest level of requirements for health care agencies in all nine AHEC regions of North Carolina, therefore eliminating many of these challenges.
- The CCEP endorses the use of online tracking systems for credentialing which has shown a reduction of 41% of the steps in the credentialing process. The tracking systems are contracted online services that the academic partners chose to work with and have signed agreements stipulating the terms of the agreement.
- Standardized clinical placement processes and clinical information requested increase utilization and transparency for facilities and schools.
- Developed a common core competencies onboarding guidelines for clinical faculty.
• CCEP investigated and researched various online vendors to streamline the clinical placement (request and confirmation) process. In 2019, Duke University Health System and WakeMed Health & Hospitals adopted a system implemented with cloud-based technology to handle the requests/confirmations for fall 2019. Many other health systems have since adopted similar technologies throughout the state.

• Completed needs assessments for identifying faculty development programs and offered a series of webinars in 2022 with the central theme of preparing faculty for Next Generational NCLEX exam scheduled to be implemented in April 2023.

• New statewide CCEP Associate Director position established.

**Action Plan for Statewide Implementation and Future Plans:**

• Implement the standardize credentialing process for all healthcare disciplines’ students and faculty statewide

• Maintain common core orientation training for students and faculty for statewide distribution

• Replicate these effective tracking mechanisms for student credentialing statewide

• Maintain common clinical placement process and clinical request information for documentation

• Establish supportive resources for new clinical faculty

• Have representation (leaders) at each Regional AHEC participate in “CCEP Leaders Group” meetings/conference.

**Benefits**

• Decreases legal risk by implementing infrastructure to update and maintain student records

• Contributes to patient safety

• Increases workforce efficiency

• Increases customer satisfaction (students, faculty and facility personnel)

• Increases support of and growth of healthcare workforce

• Reduces cost to the healthcare facility/agency/student (note: Although cost of an online vendor for credentialing will be covered by individual student fees, reducing the number of times to complete credentialing will ultimately lower the cost to the student.)

**Management of the Plan**

The Consortium for Clinical Education and Practice is a collaborative and innovative partnership between health care agencies, educational institutions, and AHEC all working together to successfully complete the action plan.

Tag: Facilitating Success: Together

• **Clinical Partner (Healthcare Agency) Role:**
  
  o set standards for credentialing requirements
  
  o identify the core orientation requirements and update annually
  
  o create agency specific orientation requirements (if needed)

• **Academic Partner (Educational Institution) Role:**
  
  o inform faculty and students about credentialing requirements
  
  o implement credentialing requirements for faculty and students
  
  o verify that credentialing requirements are met; this may include a contract with an online vendor

• **AHEC Role:**
  
  o convene and facilitate consortium initiatives and credentialing processes
  
  o set forth innovative ideas and strategies for consortium group consideration
- evaluate outcomes
- promote and foster the work statewide through the NC AHEC system
- establish CCEP partners at each Regional AHEC

For further information about the project and forms, please check out the website, http://www.wakeahec.org/hctrangleclinical.htm