

PLACEMENT CONFIRMATION FORM:

NURS8732 Diabetes Professional Practice

Only complete this form if you are wishing to self-source your placement either in your own workplace or a diabetes service not currently listed as an option in your state. Please Note: Placement cannot occur in the students' own diabetes service workplace.

NURS8732 Diabetes Professional Practice students are required to complete a 40-hour observational placement in a diabetes service anywhere in Australia. Placements need to meet the requirements set out in the ADEA Student Placement Record Booklet available for download at: www.adea.com.au/resources/postgraduate-certificates

Placement criteria includes maximum opportunities for students to experience the interdisciplinary team in a variety of diabetes clinical scenarios including;

- people with different types of diabetes, across the various life stages (children and adolescents to adults and the elderly),
- people at various diabetes experience stages (the newly diagnosed to those with advanced complications)
- individuals from different communities and cultural backgrounds (including Aboriginal and/or Torres Strait Islander peoples).

Students can be supervised by diabetes educators either within or outside of their primary discipline. The placement supervisor should either be a CDE themselves or have a direct-line manager who is a CDE.

Students undertaking a placement are required to show evidence that their employer or host venue will support the completion of the clinical practice components of the topic. The Work Integrated Learning Unit must receive evidence that you comply with all the **Pre-placement Requirements** as outlined on the [NURS8732 Placement Website](#) before a placement can be undertaken.

As part of placement compliance, all sections of this form must be completed and signed by the Clinical manager and student. The signatures confirm that the Clinical manager support you in carrying out your placement. Once form has been completed you will be required to send your Placement Confirmation Form to the NURS8732 Topic Coordinator for approval. Ensure you send this to the Topic Coordinator for approval asap. Once approved please upload your self placement to Inplace, at least 4 weeks prior to your placement start date so that the Placement team can establish the required placement agreements.

1. Student Details			
Flinders Student ID:		Telephone Number:	
Family Name:		Given Name(s):	
Email Address:			
Are you a student undertaking placement with your own employer?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Student Declaration

- ☐ I confirm this placement is not within my current workplace i.e. I am not employed within this diabetes service
☐ I acknowledge this placement meets the requirements set out in the ADEA Student Placement Record Booklet and as stated above.

Student's Signature:		Date:	
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2. Employer/Host Venue Support	
Clinical Manager's Name:	
Clinical Manager's Phone Number: (include area code)	
Clinical Manager Email:	
Organisation's Name in full:	
Is student employed within this diabetes service	<input type="checkbox"/> Yes <input type="checkbox"/> No
Organisation's Street Address:	
Proposed placement dates:	

I agree that the required support will be provided to the applicant to undertake the professional experience placement components of the course within this workplace (*please tick*):

- ☐ Provide the required number of placement hours in a diabetes service setting as outlined in the criteria above
- ☐ Students have access to a supervisor who is a CDE
- ☐ Supervision in the completion of the Diabetes Care Elements as described in the [ADEA Student Placement Record Booklet](#)
- ☐ Provide guaranteed support for the entirety of the agreed placement duration

Clinical Manager's Signature: (or equivalent)		Date:	
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Placement Approval – Once the Employer/Host Venue have approved and signed above send your Placement Confirmation form to the Topic Coordinator for approval to: NURS8732@flinders.edu.au

3. Topic Coordinator Approval

Topic Coordinator Signature:		Date:	
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Submitting This Form - Please submit your Self-Placement through INPLACE and upload your Placement Confirmation Form as part of your application evidence no later than four (4) weeks prior to your placement commencement (NURS8732)