CORU

CORU Placement Guidance for Education Providers

Contents

About CORU

CORU is Ireland's multi-profession health and social care regulator. Its role is to protect the public by promoting high standards of professional conduct, education, training, and competence through statutory registration of health and social care professionals (HSCPs).

CORU is made up of the Health and Social Care Professionals Council and the Registration Boards, one for each profession named in our Act. Each registration board set criteria and standards for education and training programmes. These standards ensure that graduates possess the required knowledge and skills to practice safely in their chosen profession.

Unlike other health regulators in Ireland, CORU does not have any post-registration provisions to limit scope of practice to compensate for training deficits or make up for shortfalls in pre-registration education and training. Therefore, it is critical to the protection of the public that Registration Boards' Criteria and Standards for Education and Training are met in full by all of our approved programmes. This ensures that graduates completing an approved programme are safe to practice and can operate as an autonomous practitioner.

Clear and consistent communication between education providers (EPs), practice educators (PEs), and CORU, is central to ensuring transparency, accountability, and confidence in the delivery of professional education and training. EPs are responsible for ensuring that all stakeholders including students, placement sites, and PEs have a shared understanding of programme requirements, placement expectations, and supervision arrangements.

CORU's remit is to approve and monitor programmes against the approved standards and criteria, rather than to prescribe operational or administrative processes. EPs retain autonomy in programme design and delivery but should be able to demonstrate that their systems for communication, governance, and placement coordination are effective, reliable, and responsive to challenges as they arise. Where uncertainty exists regarding the interpretation of regulatory expectations, CORU encourages open dialogue and engagement to clarify intent and support consistent application across professions.

Context

The last placement-specific guide published by CORU was in 2021, supporting education providers in responding to the challenges of COVID-19. Since then, programmes have demonstrated innovation, flexibility, and collaboration in addressing ongoing placement capacity challenges.

Building on this experience, this updated guidance aims to:

1. Ensure EPs remain clear on CORU's placement requirements, and
2. Ensure that these requirements are not viewed as barriers to innovation or accessibility.

The Importance of Placement within the Curriculum

The first step when considering placement is to review the criteria and standards for education and training programmes. Once you are familiar with the requirements set by CORU, then you should establish the purpose of each placement element within your curriculum. The overall objective is to ensure each graduate knows and understands the skills required and how to apply this theory to practice.

Key question

What knowledge gained from the academic components of the programme should be seen translated from theory to practice?

Students should be introduced to the theory of a topic before their first exposure to it in practice. The level of academic theory at which a student receives instruction on a topic before placement is for the EP to decide. It is understandable that this will vary depending on where placement sits in the curriculum, for example, year 2 placement versus year 4 placement. Some prior learning requirements may overlap with those of the placement providers, for example, infection control, manual handing or confidentiality training.

Key point

Consider linking prior learning and progression elements to placement. For example, before placement a student must attain a passing grade in specific modules.

Consider the student's exposure to different placement sites and across different service user groups. CORU understands that not every type of practice scenario can be covered and there is a limit to the extent to which students can be rotated across sites.

Some points to consider when arranging placement elements within a curriculum.

▶ Where are service users interacting with the profession? Consider emerging practice within the profession.

▶ Learning outcomes do not have to be the same across all sites. In addition, some key skills can be attained in different settings, for example, record keeping in private practice or in a hospital setting.

Appendix 1 Placement related activities gives an indication of the types of activities which education providers could use to assist students in understanding the translation of theory to practice.

Selection Criteria and Quality Assurance of Placement

Criteria should be established and used in selecting a prospective placement site. Inform sites of these criteria and confirm that the site meets these criteria before placing a student. Keep in mind that some training requirements may be met by sites working in partnership with other sites.

In the event that a student identifies a practice placement location, (for example their employer), it is the responsibility of the Education Provider to determine if the placement provider meets the set of requirements for the selection of practice placements, and if the practice placement location will provide the student with a quality learning experience to develop the required Standards of Proficiency.

Key points

1. Establish a documented placement selection process outlining expectations and responsibilities with specific reference to

    a. the minimum qualification, registration and experience requirements for PEs

    b. the importance and frequency of preplacement trainings

    c. readiness requirements prior to student allocations

2. Establish a mechanism through which PEs are trained

3. Re-evaluate a placement site's suitability regularly

4. Maintain structured communication channels, including site visits and feedback loops, to monitor placement quality and student welfare

5. Confirm that each placement provides sufficient scope of practice exposure for students to meet the relevant standards

6. Outline processes for identifying, supporting and reviewing reasonable accommodations on placement which include clear pathways for students to escalate concerns

7. Establish a process for withdrawing placements if required to ensure safety and learning integrity

8. Document the responsibilities for student assessments, processes for moderation and the procedures in place for managing those at risk of failing placement or interrupted placements

9. Clearly define the students' responsibilities preplacement and during placement. The student code of conduct should be documented and disseminated appropriately

10. Ensure that all placement sites meet statutory health and safety requirements and hold appropriate insurance cover

There are supporting resources available through the Health and Social Care Professional's Office and HSELand such as the National Interprofessional Placement Evaluation tool. The National Forum for the Enhancement of Teaching and Learning in Higher Education and Practice Education Coordinators Network (PECNET) also provide valuable insight and support in this area. Quality and Qualifications Ireland (QQI) are currently developing Statutory Quality Assurance Guidelines on Programmes Involving Work-integrated Learning.

Registrants often engage with service users outside of the acute hospital setting. This an area of growth as described in Sláintecare. CORU recognises and supports inclusion of non-traditional placement sites alongside established clinical and statutory settings. EPs are encouraged to look beyond traditionally offered services within the HSE. Examples may include private practice, schools, prisons, youth services, foster care settings or rehabilitation contexts.

These settings may provide opportunities for students to develop competencies while reflecting varied environments that registrants might practice in post-graduation. By broadening placement opportunities, workforce gaps may be narrowed, especially when considering areas where access to CORU-regulated professionals is limited. Through this approach, EPs could actively consider the scope of settings in which registrants might practice, recognising that workforce demands and opportunities often extend beyond conventional practice settings traditionally used in student education.

In the same lieu, some areas such as disability services are often underrepresented in selection of placement sites. This creates challenges for these services when recruiting graduates. CORU encourages EPs to explore all areas of professional practice in their selection of placement sites. Multidisciplinary teams delivering community care are changing the way in which healthcare is being delivered. EPs should consider this when preparing our future HSCP workforce whilst ensuring that all placement sites remain aligned with programme learning outcomes, standards of proficiency, and appropriate quality assurance processes.

CORU recognises that practice education is continuing to evolve and therefore welcomes innovation in placement design where this supports students in actively achieving learning outcomes and working towards attainment of the standards of proficiency. Education Providers are encouraged to engage with CORU where clarification or direction may be helpful in developing or implementing new approaches. EPs may seek clarification or guidance from CORU at any stage, as required. Engagement is not intended to be confined to a single point in time or a specific phase of programme development or delivery. Rather, providers are advised that dialogue with CORU may occur on a continuous and iterative basis to support compliance with regulatory requirements and standards.

Placement Structure, Innovative Models and Hours

Each programme must provide a coherent placement structure that aligns with CORU's criteria and standards for education and training programmes. While the minimum number of placement hours remains a core requirement to safeguard professional readiness, CORU recognises that innovation in placement delivery, including the use of simulation or hybrid models, may play a complementary role in preparing students for practice, provided such activities are appropriately supervised, assessed, and demonstrably linked to the relevant proficiencies.

Student preparedness remains essential for safe and effective practice. Innovative preplacement activities, including simulation and role play, are valuable for enhancing technical and communication skills while building confidence. Consolidation of learning workshops may assist students in learning how theory was applied in practice across different sites. The number of hours considered as counting towards placement hours in this way should be a small portion of the total.

Programmes considering the integration of these approaches must ensure that they do not replace essential real-world learning but rather serve to reinforce or enhance students' preparedness for practice. Any alternative or blended approaches should therefore be clearly mapped to programme learning outcomes, with transparent documentation of supervision structures and assessment processes to maintain the integrity of the placement experience. CORU advises that placement structures and hours be periodically reviewed within the institution's quality assurance processes to confirm that they remain sufficient, equitable, and reflective of current professional practice.

Key point

CORU registration boards do not prescribe or predetermine the number of placement hours that may be supplemented through innovative or alternative practice models. EPs should consider their impact on students having the opportunity to achieve the standards of proficiency.

Key point

Simulation is an established tool in assisting students in gaining skills used in practice. However, it is for the education provider to review the appropriate skills and the proportion of placement assigned to simulation. As the professional skills required and the education provider's approach varies, the use of simulation within the curriculum will be considered on a case-by-case basis by the relevant board. The assigning of placement hours to simulation should not be detrimental to students progressively achieving all the standards of proficiency.

Approaches to Supervision

Education of a student is a collaborative effort between the student, EP and the placement site. The PE is a registrant who is primarily involved in ensuring the student receives appropriate training and evaluation on placement.

However, whilst the PE coordinates placement training, it is expected that other staff members are also involved. In some cases, it may be appropriate for other professions to be involved. Interprofessional student training could be an opportunity for the student to gain valuable insight into modern healthcare settings. Consider the overlap between professions of domains 1-4 of the standards of proficiency. The appropriateness of the training should be agreed between the PE and the EP, with the student being fully informed.

Common types of supervision include;

Direct supervision – the PE is present for the training and evaluation of the student.

Indirect supervision- the PE has delegated specific training of the student to a suitably qualified colleague. This colleague then liaises with the PE on the evaluation.

Remote supervision or long arm supervision – the PE is not present onsite but supervises through check-in visits, phone calls or online sessions. In the absence of a PE onsite, students should be supervised onsite by another suitably qualified professional.

Placements may include components of onsite, offsite, online, and reflection activities provided EPs ensure these activities meet the registration board's criteria for education and training programmes, and all students have the opportunity to achieve the standards of proficiency. These approaches or a combination is acceptable, but the appropriateness of the supervision style should be agreed between the PE and the EP, with the student being fully informed. EPs should establish clear supervision structures and lines of accountability, ensuring that practice educators are appropriately qualified, supported, and briefed on their roles.

CORU encourages ongoing evaluation of supervision models used and expects education providers to gather evidence on their quality and outcomes to inform continued enhancement and assurance of professional readiness.

Key point

Only upon graduation is the student eligible to practice under a protected title. A PE is not liable for the practice and subsequent registration of a registrant they have trained as a student.

Key point

CORU does not dictate the ratio of practice educators to students. This can fluctuate depending on the specific task. The appropriateness of the training should be agreed between the PE and the EP.

Placements Outside of the State

The quality assurance processes must also apply to placement sites not in the state if these placements count towards meeting the board's placement requirements. Whilst the PEs should be of the profession, the EP may arrange for a professional registered in Ireland to work in partnership with placement sites outside the state thus ensuring that CORU registration requirements in relation to practice education are met.

If using a placement site in another state, the EP should clearly map out which standards of proficiency can be met during this placement. The assigning of placement hours to these placements should not be detrimental to students progressively achieving all the standards of proficiency.

Accessibility, Accommodations, and Inclusion

EPs retain autonomy over programme delivery and admissions. They are best placed to ensure students can meet the Standards of Proficiency, while maintaining programme accessibility and inclusivity.

CORU acknowledges that reasonable accommodations must align with the inherent requirements of each profession. Providers should ensure transparent, equitable systems for disclosure, needs assessment, and collaboration with disability support services.

Relevant considerations include:

1. Accumulation of hours
2. Attendance flexibility
3. Supervision types

Universal Design for Learning and Assistive Technology

Universal Design for Learning (UDL) and Assistive Technologies (AT) have been recognised as critical enablers of accessibility in the context of placement sites.

By embedding the principles of UDL (Multiple Means of Representation, Multiple Means of Action and Expression and Multiple Means of Engagement), be it through flexible teaching methods, varied assessment formats, students can accordingly be better prepared when transitioning to placement sites from classroom settings.

Assistive Technologies, which include but are not limited to note-taking, communication aids and digital access tools, have been identified as helpful in reducing barriers for students with disabilities (disclosed or otherwise).

However, it is important to note that their effective use on placement remains dependent on site-level IT infrastructure, staff awareness, data protection constraints and early disclosures.

Proactive planning, cross-sectoral collaboration and consistency in the implementation of UDL and AT can ensure equitable access to placement learning.

CORU expects that reasonable accommodations are applied proportionately, maintaining standards while enabling participation. Educators and practice partners must be informed, trained, and supported in implementing accommodations appropriately.

Flexibility in structure and supervision is a core enabler of accessibility and equity. Education providers, students, and disability officers consistently identify flexible hours and supervision formats as the most impactful accommodation. This is relevant to all students and does not reduce the number of practice placement hours required.

Hybrid, blended, and alternative models, combining online and on-site elements, variable supervision schedules, and structured pre and post placement briefings, allow for adaptation without compromising learning outcomes.

When implemented with robust oversight, flexibility can enrich placement learning and supports the development of reflective, adaptable practitioners aligned with modern professional demands.

Service User and Student Safeguarding

Students should never bear sole responsibility for the treatment or care of service users. EPs and PEs must ensure informed consent, clear communication, and defined limits apply to all training to protect all parties.

Summary

This guidance reaffirms CORU's commitment to supporting education providers in balancing innovation, accessibility, and professional standards. Programmes should maintain a focus on protecting the public through robust supervision, quality assurance, and collaboration while embracing flexibility and inclusivity.

Innovation is welcome where it complements, rather than compromises, the experiential learning central to the development of competent and confident professionals.

Education Providers are welcome to engage with CORU at any stage where clarification or guidance may assist. Ongoing dialogue is encouraged to support the continued development and quality assurance of practice placement and education in line with regulatory requirements.

Appendix 1
Placement related activities

When preparing for practice placement, Education Providers/Schools/Disciplines may consider student activities and involvement such as:

▶ Reviewing and confirming that **all the resources (e.g., hardware, software, online access)** required are available at the start of placement.

▶ Participating in an **induction programme or training in the technology, online, and remote working resources** required for placement, to maximise their learning through these new methods.

▶ Undertaking infection control training, including PPE, handwashing, online infection prevention and control training required in practice placement sites.

▶ Providing evidence of **training and risk assessment prior to the start** of the placement.

▶ Completing **additional training to prepare for placement** as may be required in the Placement Providers.

During Placement

During practice placement, Education Providers/Schools/Disciplines may consider including **onsite placement activities** such as:

▶ Undertaking **observation and shadowing.**

▶ Organising **telehealth models of activity,** including telephone and online assessments.

▶ Conducting **meetings or consultations with clients/service users.**

▶ Participating in **consultations and discussions** with practice educators/team under supervision.

▶ Partaking in **scheduled placement activities.**

▶ Accessing **resources and training available in the placement setting.**

▶ Seeking **guidance and implement advice under the supervision** of a practice educator.

▶ Organising and participating in **one-to-one engagement with service users under supervision of practice educator.**

▶ Participating in **relevant assessed placement activities** (e.g., home visits).

During practice placement, Education Providers/Schools/Disciplines may consider including **offsite placement activities** such as:

▸ Assessing **case studies,** including those that require elements of professional judgement (e.g., risk management, negotiation skills).

▸ Completing **case planning of assigned caseload clients/service users with supervision** from practice educators.

▸ **Shadowing virtual clinics/telehealth interventions** (e.g., by conference calls via telephone, Microsoft Teams).

▸ Conducting **one-to-one virtual clinics/telehealth interventions** under supervision of a Practice Educator (e.g., conference calls via telephone, Microsoft Teams).

▸ Participating in **joint virtual service user sessions with placement staff** under supervision from a Practice Educator.

▸ Reviewing **virtual case studies or caseloads** (with support via Microsoft Connect or another screen sharing facility).

▸ Recording and drafting **reports related to cases/caseload.**

▸ Completing **offsite direct practice adhering to all relevant protocols** and under the supervision of a Practice Educator.

▸ Composing **email correspondence or site notes** related to on-site/telehealth/virtual clinic to summarise discussions and actions.

▸ Summarising key principles identified to communicate to clients/patients/service users to be reviewed by practice educators.

▸ Arranging and participating in **online meetings** involving practice educators and key staff to demonstrate learning from telehealth or virtual clinics.

▸ **Co-creating remote projects jointly between Programme Team and Practice Sites/ Practice Educators** involving regular meetings on the projects with practice educators and key/assigned programme team staff.

During practice placement, Education Providers/Schools/Disciplines may consider including **online activities** such as:

▸ Assessing **case studies and/or caseload assignments.**

▸ Participating in **HSeLanD training (e.g., GDPR/Children First)** or specific COVID-19 related training online required by the placement site.

▸ Preparing and completing **online live streamed content** (e.g., Training sessions, Facebook Live exercise classes, webinars).

▸ Organise and deliver **virtual presentations for a student-led virtual conference** for feedback on projects from practice educators/staff in placement.

▸ Arrange **regular practice education team meetings** to offer ongoing support for both students and staff on site.

▸ Complete **virtual projects** assigned by and/or supervised by a practice educator.

▸ Access relevant **conferences, information sessions, webinars and podcasts** as recommended or assigned by Practice Educators or within the placement site.

- Arrange and participate in **virtual supervision meetings with Practice Educators.**

- **Report to practice educators** on actions undertaken/not undertaken following supervision sessions.

- Participate in **virtual team meetings** within the placement site.

- Research **evidence-based interventions.**

During practice placement, Education Providers/Schools/Disciplines may consider including **reflective activities** such as:

- **Preparing for placement activities and/or training** with a post-activity reflection element.

- Keeping a **reflective/reflexive journal.**

- Applying **reflective practice models** to analyse practice/practice-based activities.

- Giving **feedback on observations.**

- Offering **reflections on ethics,** ethical practices, or ethical issues.

- Undertaking **reflective notes, record keeping or process recording** activities.

- Analysing a **log or journal entries drawing on professional codes or ethics.**

- Organising **regular meetings with practice educators** for practice-based reflective discussions.

Post Placement

When reflecting and evaluating after practice placement, Education Providers/ Schools/ Disciplines should consider:

- Feedback from all relevant stakeholders involved in practice placements.

- Reflecting on innovative and creative approaches undertaken during practice placements.

- Identifying ways to improve systems and arrangements.

Additional Resources

- About Approval and Monitoring: Information for Education Providers (Documentary Evidence): https://coru.ie/health-and-social-care-professionals/education/about-approval-and-monitoring/information-for-education-providers-documentary-evidence-v1-2024.pdf

- HSeLanD Services: https://www.hseland.ie/dash/Account/Services

- NALA Plain English Guides: https://www.nala.ie/publications/?_publications_categories=plain-english-resources

- AHEAD: https://www.ahead.ie/resources