



Partnering with veterinary students to enhance clinical workplace learning: development of a learning environment champions initiative

Samantha J Fontaine

University of Glasgow, UK

Katie McNaught

University of Glasgow, UK

Jennifer Hammond

University of Glasgow, UK

Catherine Stalin

University of Glasgow, UK

Katie Ross

University of Glasgow, UK

Olivia Anderson-Nathan

University of Glasgow, UK

Zoe Hatfield

University of Glasgow, UK

Susan Mackenzie

University of Glasgow, UK

Luiz Santos

University of Glasgow, UK

Abstract

Negative experiences in clinical learning environments (CLEs) lead to long-term consequences such as decreased confidence, reluctance to engage, and attrition from Veterinary programmes (Holt, Farrell and Corrigan, 2023). The Small Animal Hospital, a training site for final-year Veterinary students, immerses them in real-world clinical practice. As a potentially high-stress environment, measures to improve student psychological safety were implemented, with the launch of a Learning Environment Champions (LEC) initiative. Developed in response to student feedback, it encompasses a

compassionate pedagogical approach involving staff and students working in partnership, with the aim of enhancing the CLE by promoting supportive and positive learning experiences. This case study describes the first year of the initiative, which is a system for monitoring student perceptions of, and experiences within, the CLE while simultaneously working to change the culture of the CLE by focusing on civility and psychological safety. Using an iterative cycle of feedback and improvement, developments included a new staff role, staff training, a hospital social contract, a process for student safeguarding, and student-led creation of resources. Reflective professional discussions highlighted that the initiative has built staff appreciation of the importance of a civil CLE, has positively influenced teaching and clinical support of students, but raised concerns of unintended consequences for LECs including compassion fatigue. The early phase of this initiative has created a support system for students during their practicum. Long term, this may help to significantly improve student perceptions of the CLE, thus improving the learning potential for this environment.

Keywords: clinical learning environment; psychological safety; incivility; veterinary education; student experience.

Introduction

Undergraduate Veterinary education stands out as a unique pedagogical procedure and involves the acquisition of required academic, clinical, and interpersonal skills. The practicum supports students to develop these skills, however, when situated in 'real' clinical environments, Veterinary students often encounter high-stress situations, complex clinical cases, and the need to quickly adapt to practical demands. Such potentially negative experiences in clinical learning environments (CLEs) can significantly impede educational outcomes and professional development (Roling et al., 2020). Consequences for students include decreased confidence, reluctance to engage fully in clinical activities, and attrition (Holt, Farrell and Corrigan, 2023). The clinical environment can sometimes lack adequate support, leading to feelings of isolation, stress, and burnout (Fares et al., 2016). Addressing these issues is critical not only for the wellbeing of students but also for ensuring that Veterinary graduates are well prepared to enter the profession and provide high-quality care (Dooley and Bamford, 2018).

The CLE is integral to Veterinary education, providing students with the opportunity to apply theoretical knowledge in authentic settings. Effective CLEs are characterised by supportive supervision, structured learning opportunities, and a culture that encourages active participation and learning from mistakes (Bok, 2015). However, there is significant variability in the quality of CLEs, and not all provide the optimal conditions needed for student learning and development.

Psychological safety is a critical factor in CLEs. Inclusion safety, the first stage of psychological safety, ensures that individuals feel accepted and valued within their team, fostering an environment where they can engage without fear of judgment or exclusion (Clark, 2020). This foundational stage is crucial for enabling active participation and the subsequent stages of psychological safety, such as learner safety, contributor safety, and challenger safety, which collectively promote continuous learning, innovation, and high performance (Clark, 2020). When students feel safe to express themselves without fear of negative consequences, they are more likely to engage deeply with the learning process, ask questions, and seek help when needed (Edmondson, 1999). In Veterinary education, fostering psychological safety can help mitigate the high levels of stress associated with clinical training and support better educational outcomes (van Gelderen and Taylor, 2023).

Caring and compassionate pedagogies emphasise the development of empathy, ethical practice, and emotional intelligence in Veterinary students. These approaches are essential for preparing students to manage the emotional and ethical challenges of veterinary practice (Kogan, McConnell and Schoenfeld-Tacher, 2005; Mossop, 2012). Incorporating compassion into the curriculum helps students develop a holistic approach to care that considers the wellbeing of both animals and their owners (Dooley and Bamford, 2018). The integration of these pedagogies into Veterinary education has been shown to enhance student satisfaction and learning outcomes (Armitage-Chan and May, 2018). By promoting a caring and supportive educational environment, these approaches help students develop the skills necessary to provide compassionate care, communicate effectively with clients, and work collaboratively with colleagues (van Gelderen and Taylor, 2023).

In the ever-evolving landscape of higher education, the task of guiding students through the complexities of the professional workplace is both a paramount challenge and an essential mission. Fostering a caring and compassionate environment which prioritises

student learning can facilitate open discussion and meaningful staff–student partnerships. However, it is a fine line between providing authentic learning opportunities whilst also maintaining psychological safety and recognising moments of challenge where students can truly flourish.

Context

The University of Glasgow’s Small Animal Hospital (SAH) is a key training environment for students in the final year of the undergraduate Veterinary programme. Although learners spend short periods (one to two days) in the hospital in the earlier years, the final year represents the first opportunity for immersive learning, where students can apply diagnostic principles, create treatment plans, and practice clinical skills under the guidance of experienced University Clinicians. With students typically spending eight to twelve weeks working across different disciplines, they experience the culture and participate in the workflow of a busy referral hospital. This type of workplace learning is an important part of veterinary training, exposing students to an authentic work environment (Magnier et al., 2011).

However, clinical learning can be significantly impacted by environment, team morale, and inter-personal interactions (Holt, Farrell and Corrigan, 2023). All Clinicians in the SAH are trained to teach and assess students, however, it is recognised that those with academic roles are at risk of burnout syndrome related to multiple responsibilities and high expectations (Nassar, Waheed and Tuma, 2019). Student feedback suggested that the SAH is a particularly intense learning environment with some individuals reporting negative perceptions of this setting. Despite overall rotation evaluations being largely positive, internal and external evaluation of clinical rotations over several years identified examples of poor student experiences and a sense of anxiety around participation in rotations in the SAH setting. The programme and clinical management team identified the clear need to address these ongoing concerns and recognised that any response aimed at improving the overall culture of the CLE would require a partnership between the clinical staff and students.

The Learning Environment Champions (LEC) initiative was launched in March 2023 and comprised an inter-professional team of nine clinical and teaching staff. The aim of the initiative was to create a greater focus on promoting positive and supportive learning

environments for all learners and mechanisms for addressing negative experiences and student concerns. The primary remit of the LECs was to support these activities within the SAH and provide a visible point of contact for students and staff. The LECs were clearly identified within the SAH by means of individual photograph and biography posters explaining their purpose and positioned in an area commonly used by staff and students. LECs worked closely with clinical staff, students, and veterinary industry experts to understand factors influencing student learning experiences, with a view to transforming both workplace culture and teaching and learning practice.

This case study describes the staff–student collaborations that were employed to iteratively develop and establish this initiative, based on the principles of psychological safety for learners. Reflections from the LECs after one year provide useful insight into the complexity of developing such an initiative but reveal that improvements to the CLE and student experience have begun.

Methods

This descriptive case study focuses on the first year of the project, comprising the development and implementation of a novel initiative in a single typical CLE. Yin (2013) defines a descriptive case study as an empirical inquiry focusing on providing rich description of a phenomenon in its real-life context. The specific phenomenon considered here is the development and implementation of the LEC initiative, designed to enhance the CLE within a university teaching hospital. We describe key elements of the initiative, which was iteratively implemented utilising a range of methods including industry and student–staff partnerships, staff training, and student questionnaires and debrief sessions. Regular reflective discussions between the LECs were conducted to review the implementation process and student feedback on the CLE. The results of these discussions form the basis of the early outcomes reported.

Reflexive statement

The research team comprises a group of veterinary professionals employed at the institution which the case study describes. Four members are Clinical Veterinarians

working in the SAH setting and directly involved in the LEC scheme, running debrief sessions with students and participating in staff training. Of these, two (CS and LS) have senior leadership roles within the SAH and five (KM, KR, OA, ZH, and SM) are Clinicians and Veterinary Nurses with a particular interest in clinical teaching. Two of the team (SF and JH) have clinical backgrounds but work in non-clinical educational leadership roles and do not have direct day-to-day involvement in the CLE or the LEC scheme. All members of the team work closely with students and staff and have volunteered to participate in the LEC initiative through a shared desire to enhance the CLE for students and working culture for everyone. All have contributed to the development and writing of the current manuscript as a collaborative endeavour led by SF.

Case study

Implementing the initiative

An interactive staff training day highlighted areas where staff perceived challenges in supporting learning in the clinical environment. Using an established theoretical framework for psychological safety (Edmondson, 1999), attendees reflected on the difficulties associated with encouraging students into the productive zone of learning, whilst also supporting their psychological safety. Staff wanted to provide a realistic CLE where students felt able to challenge themselves, be challenged, and step out of their comfort zone. Supporting staff teams to understand factors which contribute to psychological safety in the learning environment was identified as a high priority for training. Such training was subsequently facilitated by veterinary industry experts in civility in the workplace, which in this context relates to treating all individuals in a work setting with dignity and respect. They delivered a workshop to introduce staff to the negative impact of incivility on both the individual and patient safety, and staff collaborated on a declaration which reflected the aims of an Academic Clinician. It was recognised that the associated stresses of this role may sometimes mean people do not behave at their best, but that such behaviour should always be called out. This was subsequently promoted as a social contract to both staff and students to foster a cultural change, encouraging everyone to adopt behaviours and mindsets to promote a more compassionate working environment.

Following this, a civility training video was commissioned to provide compulsory training for all staff within the CLE, to address key areas such as respectful communication,

professional conduct, and creating a supportive and inclusive environment. By showcasing real-life scenarios and best practices, the video aimed to foster a culture of respect and psychological safety within the clinical setting. To reinforce learning, the video included multiple-choice questions that allowed staff to test their understanding of the concepts.

Staff–student partnerships fostered a collaborative approach to addressing some of the learning environment challenges expressed by students, such as feeling disorientated, along with uncertainty of whom to approach for help. To reduce pre-rotation anxiety and to better familiarise themselves with the hospital environment, a student-led video induction tour was designed. In addition, following identification of a key area of challenge, students created QR code instructions for the student laboratory. Developing resources through student-led projects enabled key learner priorities to be addressed and empowered learners to take a lead in preparing themselves for integration into the CLE. This facilitated an evidence-based approach to reduce student anxiety through improved induction and orientation (Bowrey and Kidd, 2014; Joolae et al., 2015; Birks et al., 2017).

Feedback on the CLE was gathered from students at the end of each four-week rotation block, by means of an anonymous online questionnaire based on the previously validated Health Education Micro Learning Environment Measure (HEMLEM) instrument (Isba et al., 2020). This instrument measures student perceptions of two domains of the learning environment: staff attitudes and behaviour and teaching quality, and answers are rated on a five-point Likert scale from strongly disagree to strongly agree. Students rated all rotations by the end of their final year. The online questionnaire was deemed an appropriate instrument as it met the aims of the initiative and fitted with the department and discipline micro-environment structure of the SAH. Additionally, two free-text questions were included which asked students to describe one positive and one negative experience of the CLE.

In the first year, this instrument was tested and data used by LECs to identify topics that could be explored further in debrief sessions. Students were invited to attend these debrief sessions on the final afternoon of each rotation block and were led by up to three LECs with approximately 30 students. A safe space was created for students to share their experiences and provide LECs with more detailed feedback. Opening questions were asked about positive and negative experiences, which led into unscripted, student-led discussions. Session outcomes were recorded in confidential, anonymous minutes to allow

reporting of key feedback to the programme and hospital management team, and findings fed into subsequent modifications of the CLE.

The sessions also allowed students to explore experiences of incivility with their peer group and clinicians from different backgrounds. This enabled an appreciation of external viewpoints and how to potentially manage negative interpersonal interactions, which they are likely to experience in their future careers. Students voiced various challenges which may be expected from a novice in a busy clinical environment, and it was beneficial to reiterate the learning value of challenging experiences, while at the same time exploring the extent to which these were psychologically safe. In future years, following ethical approval for a mixed-methods study, the results from the questionnaire and debrief minutes will be analysed longitudinally for comparison of staff attitudes and behaviours and teaching quality scores within and between departments, and to identify positive and negative themes relating to the CLE from the free-text data.

Early outcomes of the initiative

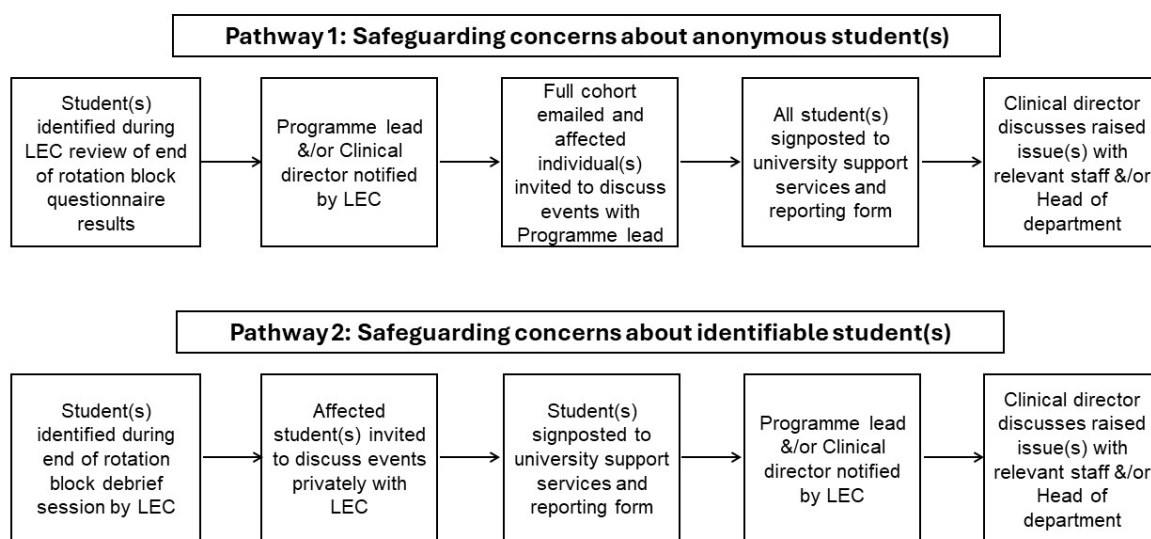
To shape its ongoing development, regular ad-hoc meetings were held by the LECs to review student feedback and discuss observations of the initiative. The LECs perceived subtle signs of a culture change in the CLE around a common understanding of the SAH's social contract. There is now a shared language regarding the significance of civility and interpersonal interactions that in time should improve student psychological safety.

Common themes from the end-of-rotation-block questionnaire were fed back to all clinical staff attending subsequent training seminars, promoting awareness of what the students felt was lacking while highlighting examples of good practice. The opportunity for regular student feedback allowed the LECs to identify rotation activities that were frequently associated with learner anxiety, which were then discussed with line managers and heads of service who addressed concerns with individuals or teams. In these circumstances, the commissioned video on civility proved a useful resource.

The importance of student safeguarding became a central focus for the LECs after students reported various experiences that contributed to an anxiety-inducing CLE. To address this proactively and ensure a consistent support system for students, a formal structure was developed to investigate and escalate incidences that raised concerns

regarding students' emotional or psychological welfare and/or safeguarding. Given that students could give feedback anonymously or in person, two pathways were developed (Figure 1). Both pathways included students being invited to meet with staff for further discussion, signposting to a formal university reporting form, and notification of the programme lead and clinical director of the SAH so that further action could be taken with identified staff or departments if deemed appropriate.

Figure 1. Flow diagram showing two pathways followed by Learning Environment Champions (LECs) who have identified safeguarding concerns about final-year Veterinary students during their rotation block.



Many outcomes have been explored during regular reflective LEC discussions. Positively, students now have a supportive pathway to report concerns and they can actively contribute to shaping the culture of the CLE. The LECs have developed a greater appreciation of the student perspective, which has enhanced their clinical teaching and student support. However, the debrief sessions have been highlighted as particularly challenging, and recurrent LEC exposure to stories of psychological discomfort has resulted in compassion fatigue for some. Looking forward, it is important that this unintended consequence be fully considered, as it may give rise to a decline in feelings of sympathy and empathy for the very students who require their support (Stoewen, 2020).

Additional concerns have arisen, including the challenge of addressing negative student feedback relating to clinical teaching staff who are higher in the university hierarchy. This may be a problem of seniority or a reflection that line managers are peers and therefore more attuned to the psychosocial health of these colleagues. It is not unexpected that they

would have a compassionate understanding of the challenges that senior clinical staff face when teaching students, including increased workload and duration of working hours, and other time-management pressures arising from the requirement to juggle teaching with clinical practice (Waters, Lo and Maloney, 2018).

The LECs have identified that to ease the process for line managers to address concerns, calling out uncivil behaviour requires normalisation through regular staff training and development. Future evolution of the initiative is also anticipated to acknowledge the potential risk to LECs and a larger pool of volunteers would help minimise the burden through reduced rotational attendance at the debrief sessions. Additionally, regular debrief sessions for the LECs themselves would ensure staff resilience is supported and maintained (Evans et al., 2023).

Conclusion

This novel LEC initiative sought to address student anxiety by actively involving them in the process of identifying and ameliorating problems within the CLE. Early findings suggest that a compassionate environment can be created which prioritises student learning through open student feedback to dedicated staff and ongoing staff–student collaboration. By fostering this collaborative approach, the ongoing initiative aims to enhance psychological safety for a more supportive and effective learning environment, while maintaining learner accountability. Students directly affected by the dynamics of the clinical setting can provide valuable insights into the challenges they face and suggest practical solutions, ensuring strategies are relevant and authentic. However, there is a need for all teaching staff to embrace the need for civility and to hold each other accountable. The findings reported here build on existing research on psychological safety in CLEs, and the strategies described support a culture of continuous feedback and improvement which is transferrable to clinical education more broadly.

Acknowledgements

The authors did not use generative AI technologies in the creation of this manuscript.

References

- Armitage-Chan, E. and May, S.A. (2018) 'Developing a professional studies curriculum to support veterinary professional identity formation', *Journal of Veterinary Medical Education*, 45(4), pp.489–501. Available at: <https://doi.org/10.3138/jvme.1216-192r1>
- Birks, M., Bagley, T., Park, T., Burkot, C. and Mills, J. (2017) 'The impact of clinical placement model on learning in nursing: a descriptive exploratory study', *Australian Journal of Advanced Nursing*, 34(3), pp.16–23. Available at: <https://www.ajan.com.au/archive/Vol34/Issue3/2Birks.pdf> (Accessed: 30 January 2025).
- Bok, H.G.J. (2015) 'Competency-based veterinary education: an integrative approach to learning and assessment in the clinical workplace', *Perspectives on Medical Education*, 4(2), pp.86–89. Available at: <https://doi.org/10.1007/s40037-015-0172-1>
- Bowrey, D.J. and Kidd, J.M. (2014) 'How do early emotional experiences in the operating theatre influence medical student learning in this environment?', *Teaching and Learning in Medicine*, 26(2), pp.113–120. Available at: <https://doi.org/10.1080/10401334.2014.883986>
- Clark, T. (2020) *The 4 stages of psychological safety*. Oakland, CA: Berrett-Koehler Publishers, Inc.
- Dooley, L.M. and Bamford, N.J. (2018) 'Peer feedback on collaborative learning activities in veterinary education', *Veterinary Sciences*, 5(4), p.90. Available at: <https://doi.org/10.3390/vetsci5040090>
- Edmondson, A. (1999) 'Psychological safety and learning behaviour in work teams', *Administrative Science Quarterly*, 44, pp.350–383. Available at: <https://doi.org/10.2307/2666999>
- Evans, T.R., Burns, C., Essex, R., Finnerty, G., Hatton, E., Clements, A.J., Breau, G., Quinn, F. et al. (2023) 'A systematic scoping review on the evidence behind debriefing practices for the wellbeing/emotional outcomes of healthcare workers',

Frontiers in Psychiatry, 24(14), p.1078797. Available at:

<https://doi.org/10.3389/fpsyt.2023.1078797>

Fares, J., Al Tabosh, H., Saadeddin, Z., El Mouhayyar, C. and Aridi, H. (2016) 'Stress, burnout and coping strategies in preclinical medical students', *North American Journal of Medical Sciences*, 8(2), pp.75–81. Available at:

<https://pmc.ncbi.nlm.nih.gov/articles/PMC4791902/> (Accessed 30 January 2025).

Holt, S.L., Farrell, M. and Corrigan, R.H. (2023) 'Veterinary nursing students' experience in the clinical learning environment and factors affecting their perception', *Journal of Veterinary Medical Education*, 51(2), pp.357–368. Available at:

<https://doi.org/10.3138/jvme-2022-0133>

Isba, R., Rouseva, C., Woolf, K. and Byrne-Davis, L. (2020) 'Development of a brief learning environment measure for use in healthcare professions education: the Healthcare Education Micro Learning Environment Measure (HEMLEM)', *BMC Medical Education*, 20(1), p.110. Available at: <https://doi.org/10.1186/s12909-020-01996-8>

Joolae, S., Jafarian Amiri, S.R., Farahani, M.A. and Varaei, S. (2015) 'Iranian nursing students' preparedness for clinical training: a qualitative study', *Nurse Education Today*, 35(10), pp.13–17. Available at: <https://doi.org/10.1016/j.nedt.2015.07.026>

Kogan, L.R., McConnell, S.L. and Schoenfeld-Tacher, R. (2005) 'Veterinary students and non-academic stressors', *Journal of Veterinary Medical Education*, 32(2), pp.193–200. Available at: <https://doi.org/10.3138/jvme.32.2.193>

Magnier, K., Wang, R., Dale, V.H.M., Murphy, R., Hammond, R.A., Mossop, L., Freeman, S.L., Anderson, C. et al. (2011) 'Enhancing clinical learning in the workplace: a qualitative study', *Veterinary Record*, 169(26), p.682. Available at:

<https://doi.org/10.1136/vr.100297>

Mossop, L.H. (2012) 'Is it time to define veterinary professionalism?', *Journal of Veterinary Medical Education*, 39(1), pp.93–100. Available at:

<https://doi.org/10.3138/jvme.0411.041R1>

- Nassar, A.K., Waheed, A. and Tuma, F. (2019) 'Academic clinicians' workload challenges and burnout analysis', *Cureus*, 11(11), e6108. Available at: <https://doi.org/10.7759/cureus.6108>
- Roling, G., Lutz, G., Edelhäuser, F., Hofmann, M., Valk-Draad, M.P., Wack, C., Haramati, A., Tauschel, D. et al. (2020) 'Empathy, wellbeing and stressful experiences in the clinical learning environment', *Patient Education and Counseling*, 103(11), pp.2320–2327. Available at: <https://doi.org/10.1016/j.pec.2020.04.025>
- Stoewen, D.L. (2020) 'Moving from compassion fatigue to compassion resilience part 4: signs and consequences of compassion fatigue', *Canadian Veterinary Journal*, 61(11), pp.1207–1209. Available at: <https://pmc.ncbi.nlm.nih.gov/articles/PMC7560777/> (Accessed: 30 January 2025).
- van Gelderen, I. and Taylor, R. (2023) 'Developing communication competency in the veterinary curriculum', *Animals*, 13(23), p.3668. Available at: <https://doi.org/10.3390/ani13233668>
- Waters, L., Lo, K. and Maloney, S. (2018) 'What impact do students have on clinical educators and the way they practise?', *Advances in Health Sciences Education*, 23(3), pp.611–631. Available at: <https://doi.org/10.1007/s10459-017-9785-y>
- Yin, R. (2013) *Case Study Research: Design and Methods (Applied Social Research Methods)*. 5th edn. London: SAGE Publications, Inc.

Author details

Sam Fontaine is a Senior Lecturer in Veterinary Science and Education and is a Registered Veterinary Nurse. She is first-year BVMS course leader and director of the MSc Advanced Practice in Veterinary Nursing. Prior to this, she was the Deputy Head Nurse and Senior Oncology Nurse at the Small Animal Hospital, where she participated in the clinical teaching and supervision of Veterinary and Veterinary Nurse students and helped drive improvements within the working and learning environment. Sam teaches reflective practice and evidence-based Veterinary Medicine and advocates for interprofessional collaboration. She is currently working towards a doctorate in Education.

Katie McNaught returned to the University of Glasgow after six years in clinical practice. She became a European recognised Specialist in Small Animal Oncology in 2021 and currently works as an Academic Clinician at the Small Animal Hospital. In this role, Katie has developed a particular interest in case-based and workplace learning and optimising the clinical learning environment. Katie is currently working towards her MEd with a focus on student mental health and wellbeing.

Jenny Hammond is Professor of Veterinary Education and Deputy Head of the School of Biodiversity, One Health, and Veterinary Medicine at the University of Glasgow. Jenny's background is as a Clinical Teacher in Small Animal General Practice at the University of Glasgow. Having developed an interest in Veterinary education, assessment, and curriculum design, she was part of the school's working group designing and implementing the new BVMS Curriculum and has completed a Professional Doctorate in Veterinary Education. Jenny now leads the Bachelor of Veterinary Medicine and Surgery (BVMS) programme and continues to develop her interest in educational research and scholarship relating to workplace learning, education for uncertainty, professional skills development, and assessment.

Kate Stalin is Head of the Small Animal Division and oversees the organisation of the Small Animal Hospital to ensure an appropriate learning environment and training opportunities for final-year Veterinary students. She is eager that students have 'real-life' experiences in a psychologically safe environment that prepares them for various clinical scenarios and social interactions upon graduation.

Katie Ross has been a Clinician at the University of Glasgow's Small Animal Hospital since 2022 and is currently an intern in Small Animal Ophthalmology. Katie has been actively involved in clinical teaching since 2023 and currently assists with student support and exam preparation for the North American Veterinary Licensing Exam.

Olivia Anderson-Nathan is a Small Animal Veterinary Surgeon and has worked as a Lecturer at University of Glasgow. She has an interest in teaching and learning approaches in clinical learning environments, and in student and staff wellbeing in the context of diversity, equity, inclusion and belonging (DEIB). She sat on the Equality and Diversity Committee at University of Glasgow. She is also a founder of British Veterinary Chronic Illness Support and Director of Affinity Futures, a DEIB consultancy.

Zoe Hatfield is Registered Veterinary Nurse and Veterinary Technician Specialist (IM-Neurology). Zoe currently works at the Small Animal Hospital as a Neurology Nurse, where she participates in the clinical teaching of Veterinary and Veterinary Nurse students. She is a member of the Learning Environment Champions team.

Susan Mackenzie is a Registered Veterinary Nurse and Senior Internal Medicine Nurse in the Small Animal Hospital. She is passionate about fostering a supportive and safe environment, and in her role as a Learning Environment Champion guides students and colleagues alike. With a strong commitment to evidence-based medicine, Susan combines her expertise and mentoring skills to ensure the highest standards of care in veterinary practice. She is currently studying towards the MSc Advanced Practice in Veterinary Nursing to further enhance her knowledge in support of the profession.

Luiz Santos is a Senior Clinician in Veterinary Anaesthesia and holds a Diplomate status with the American College of Veterinary Anesthesia and Analgesia (ACVAA) and membership with the Australian and New Zealand College of Veterinary Surgeons (ANZCVS). Luiz's research focuses on anaesthetic safety and the application of human factors to improve patient outcomes in Veterinary Medicine, which he explores as part of his PhD at the University of Queensland. Prior to his current role, Luiz served as an Anaesthesia Lecturer at the University of Adelaide, where he coordinated DVM Anaesthesia courses and provided clinical training to Veterinary students. His professional experience also includes academic and clinical roles at Murdoch University, the University of Pennsylvania, and advanced clinical training during his residency at Cornell University. Luiz is an advocate for safer veterinary practices, co-chairing the Safer Anaesthesia in Veterinary Medicine (SAVEM) initiative and serving on various professional committees.

Licence

©2025 The Author(s). This is an open-access article distributed under the terms of the Creative Commons Attribution 4.0 International License (CC-BY 4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See <http://creativecommons.org/licenses/by/4.0/>. Journal of Learning Development in Higher Education (JLDHE) is a peer-reviewed open access

Fontaine, McNaught, Hammond
Stalin, Ross, Anderson-Nathan
Hatfield, Mackenzie, and Santos

Partnering with Veterinary students to enhance clinical workplace learning:
development of a Learning Environment Champions initiative

journal published by the Association for Learning Development in Higher Education
(ALDinHE).