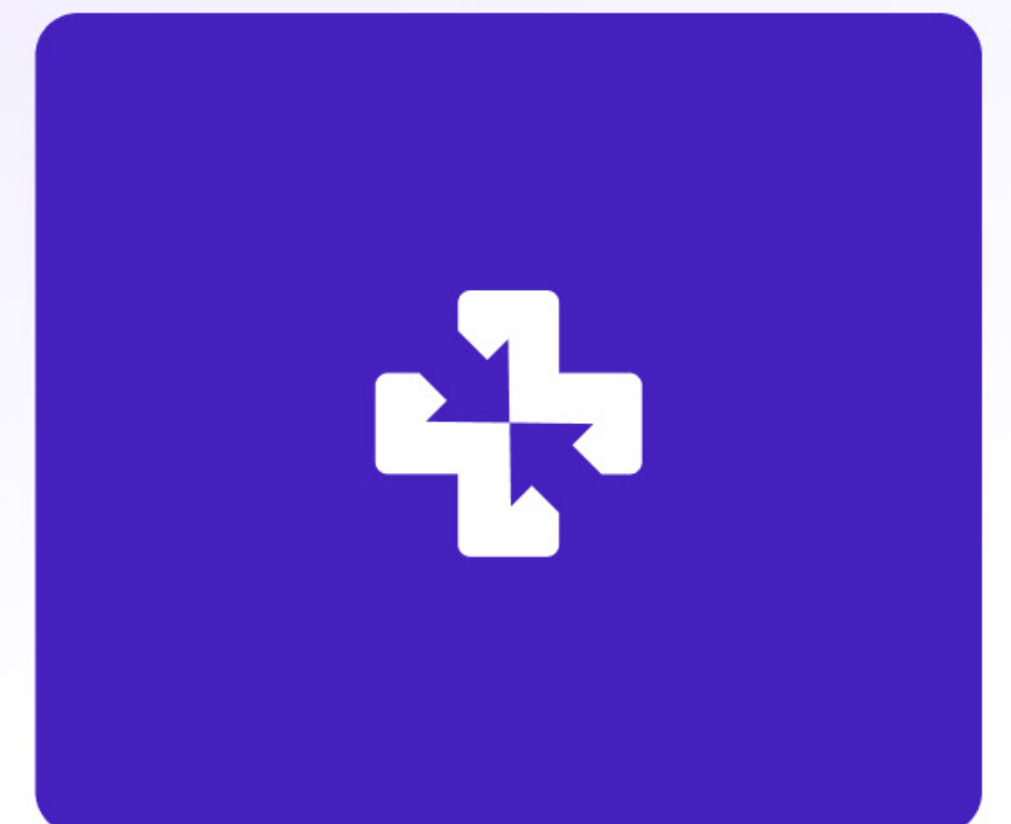
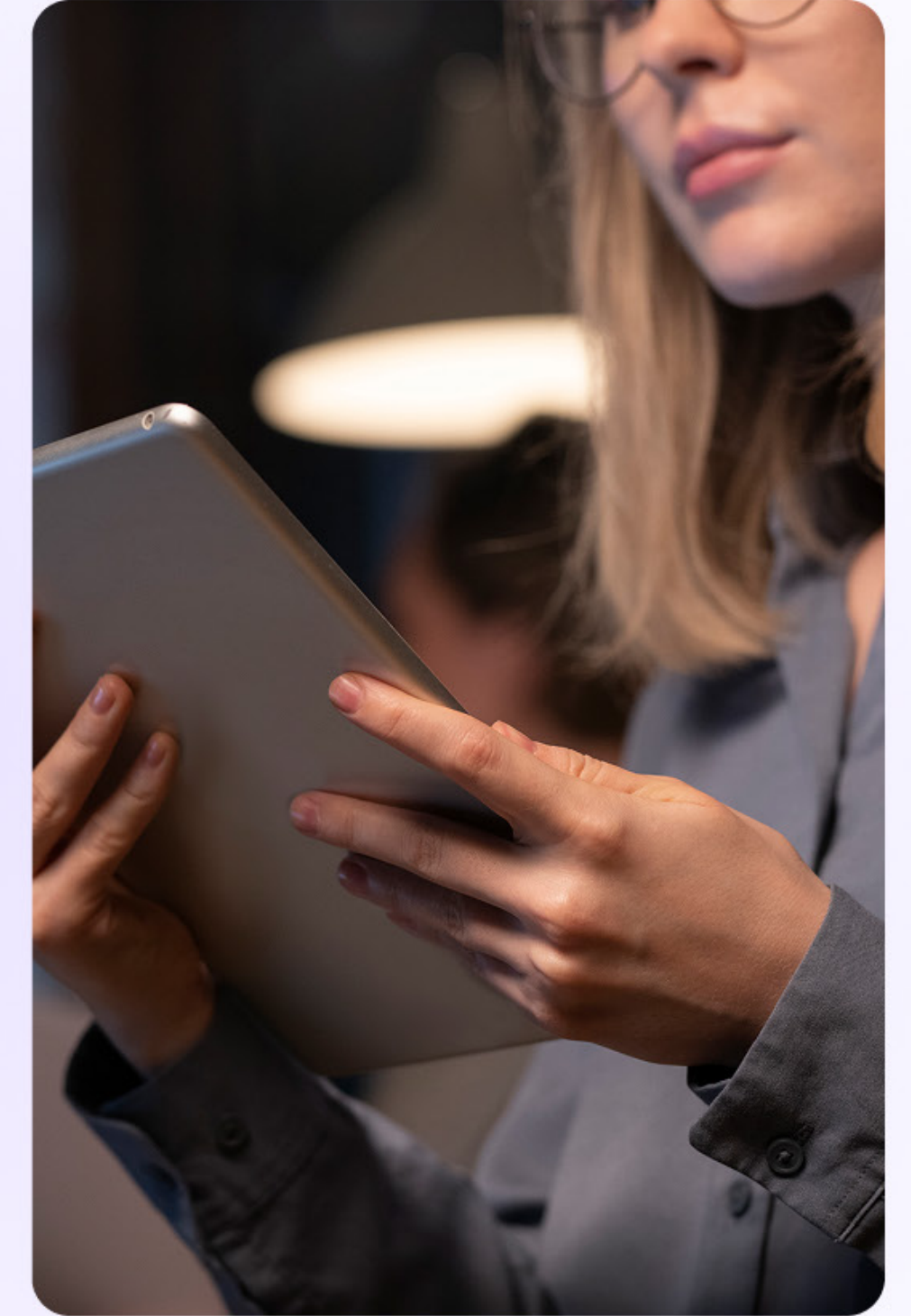




How to Compare Clinical Placement Partners

(When All Options Seem Similar)



Purpose

By the time you are comparing clinical placement partners, most options will appear similar on the surface.

They may all claim:

- 🤝 **Strong networks**
- ✅ **Reliable placements**
- 📄 **Reporting capabilities**
- 🧘 **Flexible models**

The challenge is not identifying who can do the work, it's determining **who will operate in a way that aligns with your institution.**

This guide focuses on how to evaluate **real differences that impact outcomes.**



1. Start With Your Primary Constraint

Before comparing partners, clarify:

What problem are we trying to solve first?

Common priorities include:

- ✓ Filling hard-to-place specialties or regions
- ✓ Reducing internal team burden
- ✓ Creating cost predictability
- ✓ Supporting program growth

✓ Why this matters:

The “best” partner depends on your primary constraint. A partner optimized for scale may not be optimized for flexibility.

2. Where Partners Actually Differ

Most partners check similar boxes; differences emerge in how they operate.

Focus comparison on these areas:

➡ Operational Approach

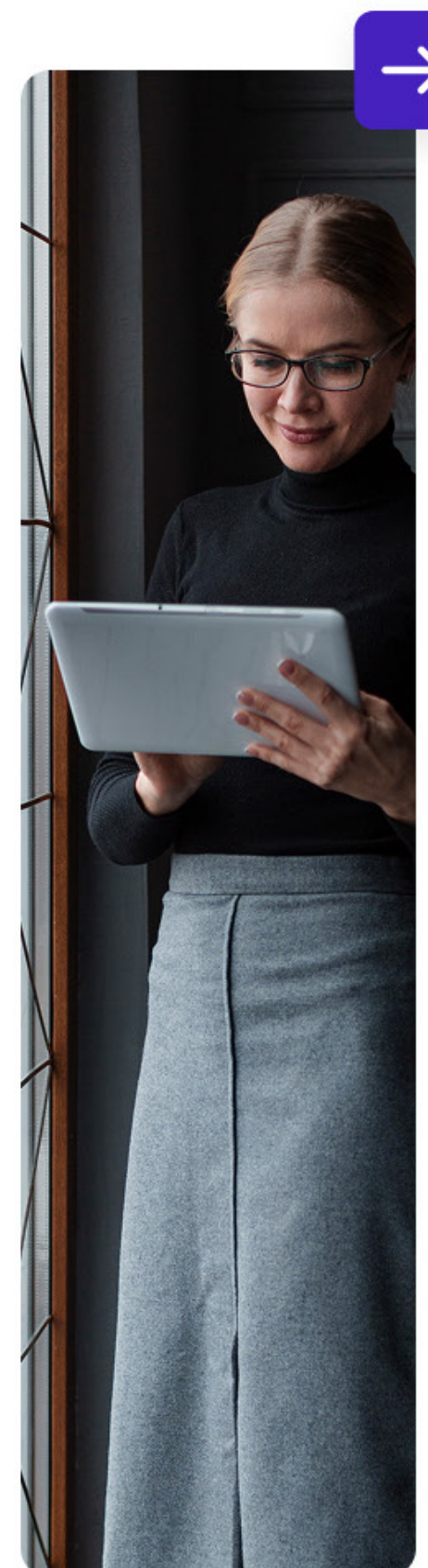
- ✓ Do they actively manage placements or respond as issues arise?
- ✓ How frequently is performance reviewed and adjusted?

👉 Difference: **proactive vs reactive execution**

🌸 Cost Structure & Predictability

- ✓ Can you forecast costs based on enrollment?
- ✓ Is pricing consistent across placements?

👉 Difference: **predictable vs variable financial models**



Risk & Flexibility

- ✓ How do they handle unused placements?
- ✓ What flexibility exists in commitments?

👉 Difference: **structured flexibility vs rigid commitments**

Network Reliability

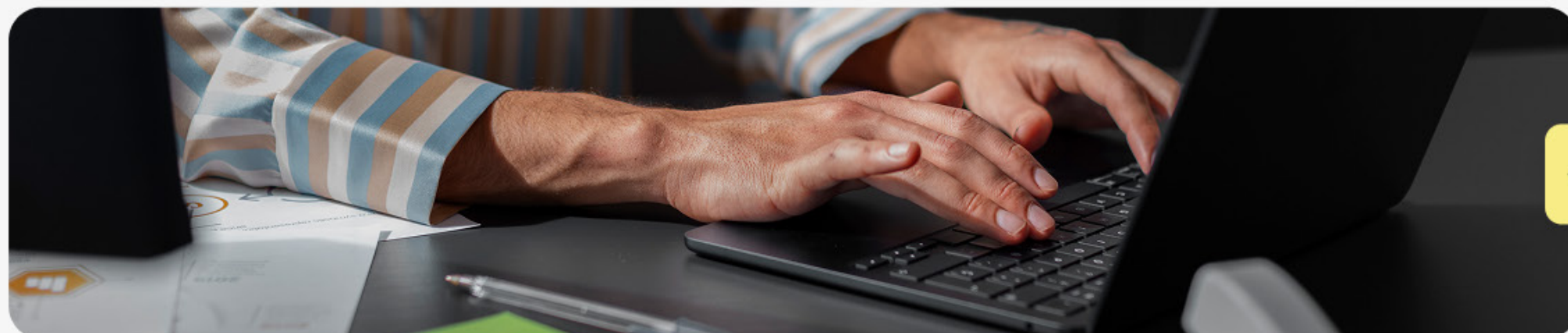
- ✓ Are placements consistently fulfilled across specialties and regions?
- ✓ Do they demonstrate repeat usage of preceptors?

👉 Difference: **stable network vs opportunistic sourcing**

Workflow Fit

- ✓ Does their model complement your current process?
- ✓ How much coordination remains on your team?

👉 Difference: **integration vs added operational burden**



3. The “Same Answer, Different Reality” Problem

Two partners may give the same answer, but mean very different things.

Example: “We provide reporting”

- ✓ One partner provides **real-time dashboards**
- ✓ Another provides **reports upon request**

Both technically meet the requirement, only one enables ongoing decision-making.

Example: “We have a large network”

- ✓ One demonstrates **consistent, repeat placements**
- ✓ Another relies on **new sourcing for each request**

Both sound similar, but carry very different levels of risk.

The key question is not:
“Do they have this capability?”

But:

“How consistently and proactively do they operate it?”

4. Simple Comparison Framework

Use a structured approach to align internal stakeholders.



Category	Partner A	Partner B	Key Considerations
Operational Approach			Proactive vs reactive
Cost Predictability			Forecastable vs variable
Risk Flexibility			Rollover, shortfall handling
Network Reliability			Consistency across placements
Workflow Fit			Burden on internal team
Data Visibility			Real-time vs static reporting
Security & Compliance			SOC 2, data handling

💡 **Tip:** Have each stakeholder (clinical, finance, IT, legal) weigh in on the categories most relevant to their role.

5. Common Mistakes in Vendor Comparison

Over-weighting price

Lower cost does not always mean lower total cost, especially if it increases internal workload or risk.

Assuming all networks are equivalent

Network size does not equal reliability.

Underestimating workflow impact

Operational friction can reduce adoption and limit value.

Ignoring first-year execution

The first year often determines long-term success.

Final Decision Filter



When multiple partners appear comparable, prioritize the one that:

-  Provides **clear, real-time visibility into performance**
-  Enables **predictable financial planning**
-  Demonstrates **flexibility in managing real-world variability**
-  Integrates **smoothly into your existing workflow**

Bottom Line:

The right partner is not the one that checks the most boxes; it's the one that operates **consistently, transparently, and in alignment with how your institution works.**

 NP HUB partners with universities to bring greater transparency, structure, and scalability to clinical placements, helping programs not only secure placements, but manage them more effectively as they grow.