



Achieving Practice Learning Outcomes in:

92519 Adult Nursing Practice 7 – ANP 7 (semester 1)

92521 Adult Nursing Practice 8 – ANP 8 (semester 2)

92522 Adult Nursing Practice 9 – ANP 9 (semester 3)

Introduction

As in all CAP documents for all years undertaking the BSc (Hons) Nursing Programme, the Practice Learning Outcomes (PLOs) are skills-based and match the Essential Skills Clusters (ESCs) that the Nursing and Midwifery Council (NMC) states must be achieved at the different progression points in pre-Registration Nursing Programmes. The NMC have identified that ALL nurses need to achieve these as they progress, whatever their field of practice.

Appreciating that the CAP document is based on nursing students experience of the various range of different placement types, this 'Hints and Tips' are therefore produce in joint efforts by *students* and PLFs. The aim of this is to guide and support students and mentors in the use of this CAP and also to think about how a PLO might be achieved, especially in different types of clinical placements.

All queries, suggestions and feedback are welcome; please do not hesitate to get in touch with the following members of staff:

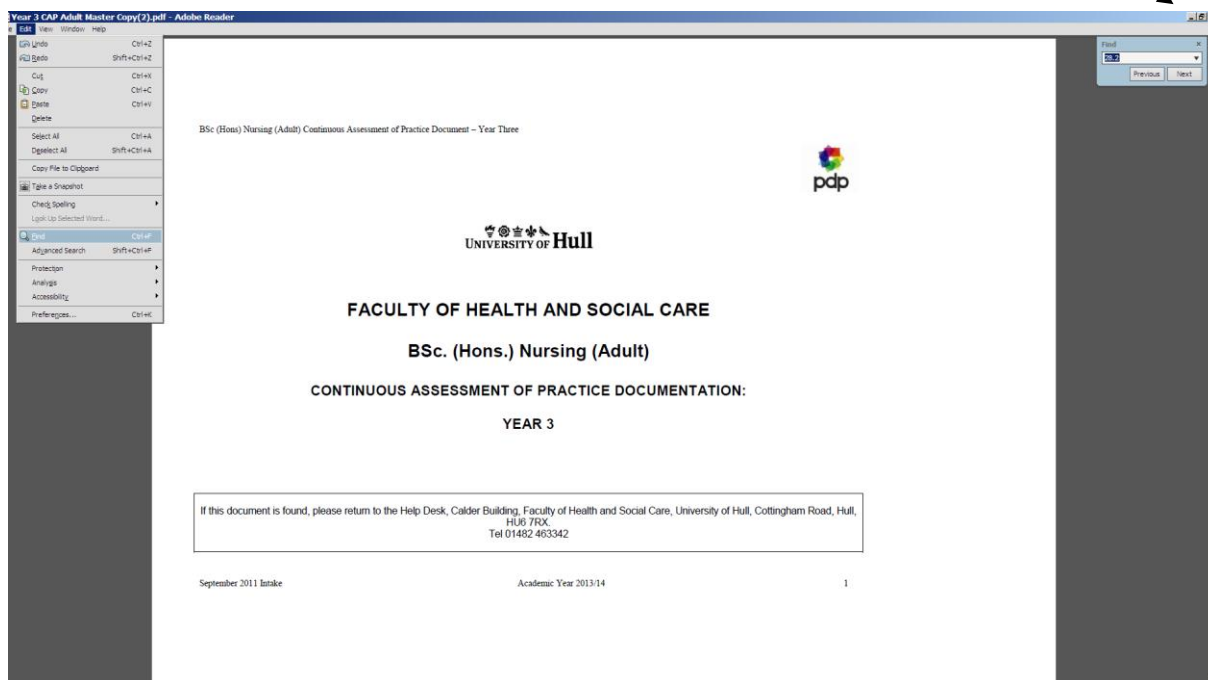
- i. The module leader, *Dr Jennifer Loke* at: j.loke@hull.ac.uk ; Tel : 01482 463460.
- ii. The appropriate PLF from the list on the Placement Learning Unit (PLU) website at http://www2.hull.ac.uk/fhsc/placement_learning_unit/practice_learning_facilitators.aspx

1. **CAP document:** available online from:
<http://www2.hull.ac.uk/fhsc/placementlearningunit/moduledocuments.aspx>

2. **Access to a particular Practice learning outcome activity** for example “28.2”,

Pull down the ‘Edit’ menu to locate
Find or press Ctrl+F

Type the number “28.2” into ‘Find’
field



3. **Minimum threshold for achievement in year 3** to gain entry to nursing register refer to page 7

Academic Level	Competency Statement	Level of student performance Expected	Student role	Mentor role
Year 3 6	The student uses previous experience and applies this knowledge to new settings and is beginning to influence others	The student competently and consistently applies and adapts the skills, knowledge and attitudes acquired to new situations. The student is capable of working as an effective member of the team in an organised and efficient way and is beginning to act as a role model to others. The student is developing teaching skills	Can do this independently in a safe and competent manner	Assesses the student's ability to work independently in a safe and competent manner



4. In semester 3, ANP 9, you will only need to cover 30 hours/week in clinical placements. Providing you work an average of 30hours per week (and do not exceed the working hours directive) – i.e. you may work 3 long shifts in one week and 2 long shifts the following week, which average out at 30 hours across the two weeks

Date (week commencing)	Week	Practice hours	Theory hours	Comments
18/05/2015	Simulated Practice	37.5 practice hours – these will be signed off by your PSGL at the triangulation interview (along with the outcomes) – you and your mentor don't need to do anything with regards to the hours for this week.		
25/05/2015	Week 1	30 hours	7.5 hours theory for S&C module	As per S&C timetable
	Week 2	30 hours	7.5 hours theory for S&C module	As per S&C timetable
	Week 3	30 hours	7.5 hours theory for S&C module	No timetabled sessions, but one day this week allocated as study day
	Week 4	30 hours	7.5 hours theory for S&C module	As per S&C timetable
	Week 5	30 hours	7.5 hours theory for S&C module	As per S&C timetable
	Week 6	30 hours	7.5 hours theory for S&C module	As per S&C timetable
	Week 7	30 hours	7.5 hours theory for S&C module	No timetabled sessions, but one day this week allocated as study day
	Week 8	30 hours	7.5 hours theory for S&C module	As per S&C timetable
	Week 9	30 hours	7.5 hours theory for S&C module	As per S&C timetable
	Week 10	30 hours	7.5 hours theory for S&C module	No timetabled sessions, but one day this week allocated as study day
	Week 11	30 hours	7.5 hours theory for S&C module	No timetabled sessions, but one day this week allocated as study day
Theory – two weeks to complete assignments (S&C & Practice 9)				

4a. For **Mandatory training - hours will be covered when you hand in your CAP**

These will be scheduled around S&C module, and you are able to attend the sessions. In situations when you are scheduled to attend these while in practice, they will be counted towards clinical hours.

4ai. ALS

These are part of simulated practice week and are counted towards simulated practice. These hours should not be recorded in your CAP whilst you are out on practice

4aii Manual Handling

For some PTGs, this session takes place during placement time, and you must inform your mentor of this to ensure that you are able to attend. This does not replace the weekly study day, but classed as practice hours and counts towards 330 hours which you will need to complete for the placement.

5. **Indication of having achieved a particular learning outcome**

- I. All Learning outcomes must be signed by registered mentors:
 - i. These include learning outcomes achieved in your experience with other professionals. i.e. midwives
 - ii. Any students encountering problems with signature should seek clarifications with PLFs and/or linked tutor.
- II. One signature from registered mentor for 'Achieved' entered in either interim or final interview **constitutes** a pass.

*if there had been any deterioration in your capability, your mentor would have to sign the 'Not achieved' at the final interview.



6. Meet early to discuss challenges

- i. Meet with mentors early to discuss work-pattern so as to work alongside your assigned mentor or with another mentor, in the absence of your assigned mentors (due to Annual leave or sickness)
- ii. Seek advice from mentors or PLFs and linked tutor for plan of action when difficulties are anticipated during Interim Interviews.
- iii. Meet with mentors early to discuss challenges in seeking opportunities for learning and negotiation for alternate placements may be needed to meet LO in the following:

7. Meeting learning outcomes at 'alternative' sites other than placements – must be agreed with and arranged by mentors.

In these alternate placements, you will have the opportunity to meet with other non-nursing professionals and nursing professionals, make sure you record your learning in the appropriate learning logs.

8. Learning outcomes explained:

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CARE, COMPASSION & COMMUNICATION

1. In relation to provision of collaborative care based on the highest standards, knowledge and competence the student is required to:

1.1 Demonstrate clinical confidence in all skills undertaken and an understanding of relevant theories underpinning those skills;

'All skills' refer to any clinical skills that you as students would display as clinical interventions: these include any nursing interventions from addressing fundamental caring needs to specific/more sophisticated ones at year 3 standard. These skills also include your communication skills with patients and families, and all healthcare professionals.



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9.9 Uses knowledge of applied anatomy, physiology, pathology and development to detect physical or psychological deterioration in the condition of:

- Babies
- Children
- Young People
- Pregnant Women
- Postnatal Women
- People with Mental Health Problems
- People with Learning Disabilities
- Older People
- People with long term conditions

For the 'unshaded' outcomes found in **9.9 & 36.5**, these could be achieved through simulated resuscitation training and e-learning within first practice week in semester 3 (ANP 9).

These are sign off as achieved only if you have attended the sessions on campus, and they should be signed off by your PTs during triangulation interview.

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MEDICINES MANAGEMENT

36. In relation to ensuring safe and effective practice in medicines management through comprehensive knowledge of medicines, their actions, risks and benefits, the student is required to:

36.3 Safely administer medicines and monitor their effects;

36.4 Report adverse reactions and near misses;

36.5 Safely manage anaphylaxis;

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27.3 In liaison with a registered midwife, provide essential advice and support to mothers who are breast feeding;

27.4 Use teaching and learning skills to educate service users about nutritional issues;

A 2-day placement with Midwives. To achieve LO 27.3 in ANP8/9. This placement should be recorded in the interprofessional learning log by the midwife but signed off by your mentor or PT (in triangulation Interview) if mentor's signature cannot be obtained, albeit achieving the LO].

*This placement will possibly give you the opportunity to achieve the following learning outcomes:

- a. 1.4 (page 82)
- b. 5.1 & 5.2 (page 86)



Outcome 11 CAP document (Adult page 106 ; Child pg 106; Learning disability pg 107 ; Mental Health pg 107)

Third year students need to engage in level 6 thinking and practice; demonstrate that they have the ability to critically think and engage in critical analysis, but also use previous experiences and apply this knowledge to new settings. They are also beginning to influence others and developing their teaching skills. **The outcome in the CAP document requires you to;**

11. In relation to safeguarding children and adults in vulnerable situations, supporting them and protecting them from harm, the student is required to;

<p>ORGANISATIONAL ASPECTS OF CARE</p> <p>11. In relation to safeguarding children and adults in vulnerable situations, supporting them and protecting them from harm, the student is required to:</p>
<p>11.4 Work collaboratively with other agencies in safeguarding and protecting vulnerable individuals and groups</p>
<p>11.5 Identify practices which do not safeguard those in need of support and protection</p>

11.5 Identify practices which do not safeguard those in need of support and protection

The above outcome is based on the NMC requirement as identified in the standards for preregistration nursing education (2010) and requires confirmation that as a third year student you can “**challenge** practices which do not safeguard those in need of support and protection”.

The NMC - standards for preregistration nursing education-P154/152- suggests;

Safeguarding in the context of healthcare regulation means **acting in the best interests of people when they are using or needing the services of nurses** and midwives. It also has a wider meaning outside healthcare regulation which relates to protecting children, young people and vulnerable adults from abuse and neglect, but also **actively promoting their welfare**. (Adapted from LVSC 2010)’.

“Acting in the best interests of people” implies that safeguarding involves a wide range of behaviours and practices; therefore it may help if you try and see promoting safeguarding on a continuum rather than you having to challenge or identify an abusive or neglectful behaviour that results in a safeguarding referral. You should be able to identify situations whereby vulnerable patients/clients need you as a nurse to assist in upholding their rights as a service user. They may be vulnerable as a result of their present condition, state, mood or because of the environment that they find themselves in. They will be relying on you to use your knowledge and skills such as advocacy to safeguard them by acting in their best interests; providing information, acting or doing for, or even having to act in loco parentis for a child because they are vulnerable at this present time. Remember, an adult who has capacity may make an unwise decision (Mental Capacity Act 2005).

Your third year experience should be about identifying the processes that support safeguarding in its very broadest sense and establishing the obstacles that prevent it from happening; including an awareness of possible or actual failings in the practice setting. Actual failings can also be extended to include those that have been identified in the media and how these have influenced better care standards. It is also crucial that you demonstrate an ability to articulate and act on these findings should they be evident. Hence the achievement of the outcome needs to include an opportunity to explore how to prevent barriers from obstructing the patient and carer and also enquiry as to how you would deal with the situations as a qualified nurse. Every identified need to act in this way doesn’t necessarily have to result in a ‘safeguarding’ referral but you should touch on processes and policies of how to escalate concerns (both university policies, and practice ones). If you happen to identify practices that do not support safeguarding, then that would be unfortunate on the part of practice/patients/clients, but a valuable learning opportunity that you should embrace and act on using the university and local policies.

Practices you may find yourself confronted with should include consideration of the barriers that restrict access to services – physical, psychological and social - such as;

- poor communication – this could be verbal or non-verbal communication, including inadequate or confusing material in leaflets or posters, lack of or inadequate advertising of services
- a lack of interpreters or lack of material that is adapted to the needs of people speaking a language that is not English
- Governmental directives that restrict service users e.g. age restrictions on screening, service or treatment charges
- acceptance of poor staffing levels and or practice
- lack of understanding of the complaints procedures
- reluctance to escalate concerns or lack of understanding of the escalating concerns policy
- diagnostic overshadowing, i.e. accepting presenting issues as part of the condition rather than investigating what is causing the changes in behaviour or appearance
- poor application of Mental Capacity, Mental Health and Equality legislation, including Deprivation of Liberty Safeguards (DoLS).



9. Ensuring triangulation interview in Semester 3 (ANP9) is achieved

Negotiate early an ideal date and time for all relevant parties to meet; bear in mind you have to coordinate the diaries of your PSGL and your sign-off mentor, and also, your own diary. You are strongly advised to plan and communicate early at the start of clinical placement in semester 3 re possible date and time for this interview.

Should any students or mentors have any 'hints and tips' that you wish to share, please feel free to contact the module leader, Dr Jennifer Loke at: j.loke@hull.ac.uk

