

Name .....

Number .....

Cohort .....

Field .....

# PRACTICE ASSESSMENT DOCUMENT

## NURSING

### PART 3

**BSc/PGDip/MSc**

Future Nurse: Standards of Proficiency for Registered Nurses, (NMC 2018)

This Practice Assessment Document has been developed by the Pan London Practice Learning Group in collaboration with practice partners, mentors, academic staff, students and service users across London, the Midlands, Yorkshire and the East of England regions.

The development of this document was funded by Health Education England (London).



**Pan-Midlands, Yorkshire & East  
Practice Learning Group**



Please keep your Practice Assessment Document with you at all times in practice in order to review your progress with your Practice supervisor, Practice assessor and/or Academic assessor.

## **Pan Midlands, Yorkshire and East Practice Learning Group**

This Practice Assessment Document has been developed by the Pan London Practice Learning Group in collaboration with practice partners, mentors, academic staff, students and service users across London, the Midlands, Yorkshire and the East of England regions and will be used by students attending the following Universities:

### **Membership of the Pan Midlands Yorkshire and East Practice Learning Group (MYEPLG)**

Anglia Ruskin University  
Birmingham City University  
Coventry University  
De Montfort University  
Keele University  
Leeds Beckett University  
Nottingham Trent University  
Sheffield Hallam University  
Staffordshire University  
University College Birmingham  
University of Bedfordshire  
University of Birmingham  
University of Bradford  
University of Derby  
University of East Anglia  
University of Essex  
University of Huddersfield  
University of Hull  
University of Leeds  
University of Leicester  
University of Lincoln  
University of Northampton  
University of Nottingham  
University of Sheffield  
University of Suffolk  
University of Wolverhampton  
University of Worcester  
University of York



# **Pan-Midlands, Yorkshire & East Practice Learning Group**



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### Standards regarding the use of the term 'Parts'

There are three Practice Assessment Documents in total, which incorporate the range of Future Nurse Standards in Proficiency (NMC 2018). 'Parts' in this context is used to represent the range of outcomes to be achieved by students at different levels. These parts may differ from the parts of the education programme that will be defined locally by each University provider.

## Welcome to the Practice Assessment Document (PAD)

### Student responsibilities

This Practice Assessment Document is designed to support and guide you towards successfully achieving the criteria set out in the *Future Nurse: Standards of Proficiency for Registered Nurses and Standards for Education and Training* (NMC 2018).

The PAD makes up a significant part of your overall programme assessment. It will need to be processed through formal university systems. Continuous assessment is an integral aspect of assessment in practice and you are expected to show evidence of consistent achievement. You should engage positively in all learning opportunities, take responsibility for your own learning and know how to access support. You will work with and receive written feedback from a range of staff including practice supervisors and practice assessors and you are required to reflect on your learning.

You are responsible for raising concerns with a nominated person in the practice setting in a timely manner. You should also alert staff to any reasonable adjustments that may be required to support your learning.

You should ensure you are familiar with your university assessment and submission processes for this document and contact the academic representative from your University, or refer to your university's intranet if you require support or advice on specific university procedures.

The Ongoing Achievement Record (OAR) is a separate document that summarises your achievements in each placement and with the main PAD provides a comprehensive record of your professional development and performance in practice.

You are responsible for the safekeeping and maintenance of the PAD. It should be available to your practice supervisor, practice assessor and academic assessor at all times when you are in placement together with the OAR. Alterations should be made in this document by crossing through with one line, with a signature and date.

You will have access to confidential information when in practice placements. The PAD should not contain any patient/service user/carers identifiable information. Contents must not be disclosed to any unauthorised person or removed, photocopied or used outside the placement or university.

People must be offered the opportunity to give and if required withdraw their informed consent to student participation in their care and staff in practice will provide guidance as required. Before approaching any patient/service user/carers for feedback you must discuss with your practice supervisor/practice assessor who will facilitate consent.

### Practice supervisor responsibilities (Registered nurse/midwife or other registered health/social care professional)

In many practice areas the students will be supported by a number of practice supervisors. Some areas may adopt a team based approach due to the nature of the experience.

As a practice supervisor you have an important role in supporting and guiding the student through their learning experience to ensure safe and effective learning. This includes facilitating learning opportunities including any reasonable adjustments the student may need to get maximum benefit from the placement. It is your responsibility to contribute to the student's assessment through the recording of regular feedback on their progress towards, and achievement of their proficiencies. Specific feedback must be provided to the practice assessor

on the student's progress.

**Supervision in other placement areas** (i.e. those areas where there are no health/social care registrants)

A range of staff can support student learning and have a vital role in student learning and development though may not be contributing formally to assessment of proficiencies.

However, these staff members are encouraged to support learning and can provide valuable student feedback within the PAD on the *Record of Communication/additional feedback pages*.

### **Practice assessor responsibilities** (Registered nurse)

As a practice assessor you have a key role in assessing and confirming the student's proficiency providing assurance of student achievements and competence. This includes facilitating learning opportunities including any reasonable adjustments the student may need to get maximum benefit from the placement. You will observe the student, conduct and record student assessments informed by student reflections, feedback from practice supervisors and other relevant people to confirm achievement. You will liaise with the academic assessor scheduling communication at relevant points.

Practice assessors must have appropriate equivalent experience in the student's field of practice.

There are numerous elements requiring assessment in practice. One or more practice supervisors can contribute to the assessment of some of the proficiencies in discussion with you, but they must be working in their scope of practice.

When assessing the student, you should take into account sources of evidence that encompass knowledge, skills, attitudes and the views of those receiving care. Comments should acknowledge those exceptional students who are exceeding expectations for their stage in practice or who have particularly commendable attitudes, behaviours, knowledge or skills.

If the student is not meeting the required standards this should be highlighted as a development need. If there is a cause for concern or a fitness for practice issue that requires prompt action, an action plan should be instigated to address specific needs or concerns within a specified timeframe. In the event of this, seek guidance from the academic assessor and/or senior practice representative.

### **Academic assessor responsibilities**

Academic assessors and registered nurses are nominated for each part of the educational programme. The same academic assessor cannot contribute to the student assessment in consecutive parts. The academic assessor will work in partnership with the practice assessor to evaluate and recommend the student for progression for each part of the educational programme. The academic assessor will enable scheduled communication and collaboration with the practice assessor and this communication can take a variety of forms.

**All communications/additional feedback (not already recorded in the scheduled interviews) from the Practice supervisors, practice assessor and academic assessor and other staff members needs to be recorded on the relevant pages in the PAD.**

## Guidance for Using the PAD to Facilitate Learning and Assessment in Practice

Assessment criteria in the PAD are based on the NMC *Future Nurse: Standards of Proficiency for Registered Nurses* and *Standards for Education and Training* (NMC 2018). The outcome statements have been designed by the NMC to apply across all four fields of nursing practice and all care settings (NMC 2018). *Students must be able to demonstrate a greater depth of knowledge and the additional more advanced skills required to meet the specific care needs of people in their chosen fields of nursing practice (NMC, 2018, p6). This Practice Assessment Document can be used in any field of practice.*

**Components of Assessment and Feedback** (see individual University guidance/regulations)

**Professional Values:**

Professional Values reflect a number of proficiency statements and are captured under the four sections of The Code (NMC 2018). All must be achieved *by the end of each placement*.

**Proficiencies:**

These reflect aspects of the seven platforms, communication and relationship management skills and nursing procedures (NMC 2018). These can be assessed in a range of placements, but must be achieved at least once *by the end of the Part*.

**Episode of Care:**

This holistic assessment(s) facilitates and demonstrates the student's progress and must be achieved *by the end of the Part*.

**Medicines Management:**

There is one assessment included in each part and each must be achieved *by the end of the Part*.

**Patient/Service User/Carer Feedback Form:**

Feedback will be sought in relation to how the student cared for the person receiving care. This is not formally assessed, but will contribute to overall student feedback.

**Recording Additional Experiences and Feedback:**

There are additional pages for the student to record reflections on their own learning and pages to record communication and additional feedback from all those supporting learning and assessment.

**Ongoing Achievement Record:**

The OAR summarises overall achievements and provides a comprehensive record of student development and overall performance.

## Process of Practice Assessment

### Prior to Placement

Student makes contact to obtain relevant information to support their preparation for practice



### Placement Orientation

(see orientation checklist)



### Initial Interview

Learning and development needs are identified and planned



### Mid-Point Interview

Progress, learning and development needs are identified by the practice assessor



### Final Interview

Progress and achievement are explored by the practice assessor, who also completes summary in the OAR

Further information/guidance is included in the University specific pages (overleaf) and in the Practice Assessment Document Guide

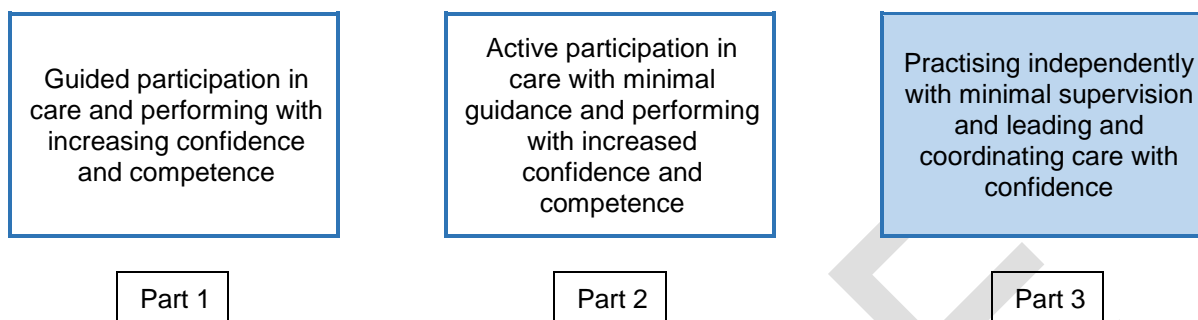
SAMPLE



SAMPLE

## Criteria for Assessment in Practice

### Overall Framework Parts 1 - 3 to be achieved by the end of the part



*The decision on the level of supervision provided for students should be based on the needs of the individual student. The level of supervision can decrease with the student's increasing proficiency and confidence (NMC, 2018, p5).*

### Part 3: Practising independently with minimal supervision and leading and co-ordinating care and confidence

'Achieved' must be obtained in all three criteria by the student.

Achieved	Knowledge	Skills	Attitude and Values
<b>Yes</b>	Has a comprehensive knowledge-base to support safe and effective practice and can critically justify decisions and actions using an appropriate evidence-base.	Is able to safely, confidently and competently manage person-centred care in both predictable and less well recognised situations, demonstrating appropriate evidence based skills.	Acts as an accountable practitioner in responding proactively and flexibly to a range of situations. Takes responsibility for own learning and the learning of others.
<b>No</b>	Is only able to identify the essential knowledge-base with poor understanding or rationale for care. Is unable to justify decisions made leading to unsafe practice.	With minimal supervision is not able to demonstrate safe practice despite guidance.	Demonstrates lack of self-awareness and professionalism. Does not take responsibility for their own learning and the learning of others.

## List of Practice Supervisors

A sample signature must be obtained for all entries within this document.

[illegible]

### List of Practice Assessors

A sample signature must be obtained for all entries within this document

Name (please print)	Job Title	Signature	Initials	Placement

### List of Academic Assessors

A sample signature must be obtained for all entries within this document

Name (please print)	Job Title	Signature	Initials	Placement

## Placement 1

**Placement Provider:**  
(e.g. Trust/Organisation)

**Name of Placement Area:**

**Type of Experience:**  
(e.g. Community/Ward Based)

**Placement Telephone Number:**

**Placement Contact Email :**

**Start Date :** ..... **End Date :** ..... **No. of Hours :**  
.....

**Nominated Person to Support Student and Address Concerns**

**Name :** ..... **Designation :** .....

**Contact Email Address:** .....

**Practice Assessor Details:**

**Name :** ..... **Designation :** .....

**Contact Email Address:** .....

**Academic Assessor Details (for part) :**

**Name :** ..... **Designation :** .....

**Contact Email Address:** .....

Placement 1: Orientation				
	Placement Area 1		Placement Area 2	
Name of Placement Area :				
Name of Staff Member :				
This should be undertaken by a member of staff in the Placement Area	Initial/Date (Student signature)	Initial/Date (Staff signature)	Initial/Date (Student signature)	Initial/Date (Staff signature)
<b>The following criteria need to be met within the first day of placement</b>				
A general orientation to the health and social care placement setting has been undertaken				
The local fire procedures have been explained and Telephone number provided. Tel: .....				
The student has been shown the: <ul style="list-style-type: none"> <li>• fire alarms</li> <li>• fire exits</li> <li>• fire extinguishers</li> </ul>				
Resuscitation policy and procedures have been explained and telephone number provided Tel.: .....				
Resuscitation equipment has been shown and explained				
The student knows how to summon help in the event of an emergency				
The student is aware of where to find local policies: <ul style="list-style-type: none"> <li>• health and safety</li> <li>• incident reporting procedures</li> <li>• infection prevention and control</li> <li>• handling of messages and enquiries</li> <li>• other policies</li> </ul>				
The student has been made aware of information governance requirements				
The shift times, meal times and reporting sickness and absence policies have been explained				
The student is aware of their professional role in practice				
Policy regarding safeguarding has been explained				
The student is aware of the policy and process of raising concerns				
Lone working policy has been explained ( <i>if applicable</i> )				
Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed)				
<b>The following criteria need to be met prior to use</b>				
The student has been shown and given a demonstration of the moving and handling equipment used in the placement area				
The student has been shown and given a demonstration of the medical devices used in the placement area				

## Placement 1: Initial Interview

This can be completed by a practice supervisor (PS) or practice assessor (PA). If completed by the PS, they must discuss and agree with the PA.

This meeting should take place within the first week of the placement.

<b>Placement Area Name:</b>	
<b>Student to identify learning and development needs</b> <i>(with guidance from the practice supervisor or practice assessor)</i>	
<b>Taking available learning opportunities into consideration, the student and practice supervisor/ practice assessor to negotiate and agree a learning plan</b>	
<b>Outline of learning plan</b>	<b>How will this be achieved?</b>
Learning plan for placement agreed by practice assessor <i>(where applicable)</i> : YES / NO	
<b>Student's Name:</b>  <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <b>Signature:</b>   </div> <div style="width: 45%;"> <b>Date:</b>   </div> </div>	
<b>Practice Supervisor/Assessor's Name:</b>  <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <b>Signature:</b>   </div> <div style="width: 45%;"> <b>Date:</b>   </div> </div>	

## Professional Values in Practice (Part 3)

Students are required to demonstrate high standards of professional conduct at all times during their placements. Students should work within ethical and legal frameworks, and be able to articulate the underpinning values of The Code (NMC, 2018). Professional Values reflect a number of proficiency statements and are captured under the four sections of The Code.

The practice assessor has responsibility for assessing Professional Values though the mid-point review can be completed by a practice supervisor in liaison with the practice assessor.

**Yes = Achieved, No = Not Achieved (Refer to Criteria for Assessment in Practice)**

	Achieved Mid-Point Yes/No	Initial/Date	Achieved Final Yes/No	Initial/Date (Final)
<b>Prioritise People</b>				
1. The student maintains confidentiality in accordance with the NMC code and recognises limits to confidentiality, for example public interest and protection from harm.				
2. The student is non-judgemental, respectful and courteous at all times when interacting with patients/service users/carers and all colleagues.				
3. The student maintains the person's privacy and dignity, seeks consent prior to care, challenges discriminatory behaviour and advocates on their behalf.				
4. The student is caring, compassionate and sensitive to the needs of others demonstrating positive role modelling.				
5. The student understands their professional responsibility in adopting and promoting a healthy lifestyle for the well-being of themselves and others.				
<b>Practise Effectively</b>				
6. The student consistently delivers safe, person-centred and evidence based care ensuring patients/service users/carers are at the centre of decision-making.				
7. The student is able to work confidently and as an equal partner within the inter-disciplinary team and can build effective professional relationships.				
8. The student makes consistent effort to engage in and reflect on their learning, contributing to their own professional development and supporting the learning and development of others.				
9. The student demonstrates leadership skills and is able to work autonomously, seeks support where appropriate and responds positively to feedback.				
<b>Preserve Safety</b>				
10. The student demonstrates openness (candour), trustworthiness and integrity.				
11. The student reports any concerns to a member of staff when appropriate, and escalates as required (as per local policy/professional guidance) e.g. safeguarding.				
12. The student demonstrates the appropriate listening skills, seeks clarification where appropriate and carries out instructions safely				
13. The student is able to recognise and work within the limitations of own knowledge, skills and professional boundaries and understand that they are responsible for their own actions.				





## Placement 1: Mid-Point Interview

This discussion must take place half way through the placement.

### Student's self-assessment/reflection on progress

Reflect on your overall progression referring to your personal learning needs, professional values and proficiencies. Identify your strengths and document areas for development.

**Knowledge:**

**Skills:**

**Attitudes and Values:**

### Practice assessor's comments

Discuss with the student their self-assessment and comment on their progression using the criteria for Assessment in Practice Descriptors, detailing evidence used to come to your decision.

**Knowledge:**

**Skills:**

**Attitudes and Values:**

## Placement 1: Mid-Point Review

### Ongoing learning and development needs.

To be agreed between practice assessor and student - sign and date all entries below.

Following the mid-point interview the student is to identify their learning and development needs for the remainder of the placement and negotiate with their practice assessor how these will be achieved.

Learning and development needs	How will these be achieved?

**Student's Name:**

**Signature:**

**Date:**

**Practice assessor's Name:**

**Signature:**

**Date:**

*Any outstanding learning and development needs are to be discussed and documented at the final interview.*

## Placement 1: Final Interview

This should take place towards the end of the placement.

### Student's self-assessment/reflection on progress

Reflect on your overall progression referring to your personal learning needs, professional values and proficiencies. Identify your strengths and document areas for development.

**Knowledge:**

**Skills:**

**Attitudes and Values:**

### Practice assessor's comments

Discuss with the student their self-assessment and comment on their progression using the criteria for Assessment in Practice Descriptors, detailing evidence used to come to your decision.

**Knowledge:**

**Skills:**

**Attitudes and Values:**

*Please record any further comments on the next page.*

## Learning and Development Needs

To be agreed between the practice assessor and student

**Practice assessor to identify specific areas to take forward to the next placement:**

**Was an action plan required to support the student?**

**YES / NO**

**If Yes, was the academic assessor informed?**

**YES / NO**

**If Yes, have the objectives been achieved?**

**YES / NO**

Checklist for assessed documents	Tick	Practice assessor Initial	Student Initial
The professional value statements have been signed at both mid-point and final interview			
The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed			
The practice placement hours have been checked and signed			
All the interview records and development plans have been completed and signed as appropriate			
The practice supervisors and practice assessor have printed and signed their name on the appropriate list at the beginning of the document			
The practice assessor has completed the Ongoing Achievement Record (OAR)			

**Student's Name:**

**Signature:**

**Date:**

**Practice assessor's Name:**

**Signature:**

**Date:**

**Additional Signature** (if applicable, e.g. Academic assessor):

**Signature:**

**Date:**

## Patient/Service User/Child/Young Person/Carer Feedback Guidance

Thank you for agreeing to provide feedback on the care you have received from one of our student nurses. There are four different forms for you to choose from. The form you select is entirely up to you as the service user. Prior to providing feedback the student nurse's practice supervisor or practice assessor will gain your consent. If you are under the age of 16, parental consent will be needed. In consenting you are agreeing to provide honest feedback about the student's professionalism, this will inform the assessment process along with future practice, audit and evaluation purposes.

Should you not wish for your information to be used in this way, please tick the box on the relevant form and your data will only be used to inform the students' assessment.






Please note, to maintain all aspects of confidentiality and in line with General Data Protection Regulations (GDPR) you should ensure that you do not identify yourself or the organisation in which you are receiving care. Once you have provided your feedback, the practice supervisor/ assessor will review this and sign and date it. This information will then be stored and accessed in line with AEI and professional regulations.

**Please Note: Patient/Service User/Child/Young Person/Carer should not sign this form.**

## Patient/Service User/Child/Young Person/Carer Feedback Form 1

- ☐ I do not wish for my feedback to be used to inform future practice, audit or evaluation purposes, but I am happy for it to inform the student nurse's assessment

**We would like to hear your views about the way the student nurse has supported your care. Your feedback will not change the way you are cared for and will help the student nurse's learning.**

Tick if you are :	The Patient/Service User <input type="checkbox"/>	Carer/Relative <input type="checkbox"/>			
	<b>Very Happy</b> 	<b>Happy</b> 	<b>I'm Not Sure</b> 	<b>Unhappy</b> 	<b>Very Unhappy</b> 
<b>How happy were you with the way the student nurse.....</b>					
..... cared for you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
..... listened to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
..... understood the way you felt?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
..... talked to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
.....showed you respect?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>What did the student nurse do well?</b>					
<b>What could the student nurse have done differently?</b>					
<b>Practice Supervisor/Practice Assessor's Name:</b>					
<b>Signature:</b>			<b>Date:</b>		
<b>Student's Name:</b>					
<b>Signature:</b>			<b>Date:</b>		

This form has been co-produced by Pan London Service Users across 4 fields of practice, 2013.

## Patient/Service User/Child/Young Person/Carer Feedback Form 2

- ☐ I do not wish for my feedback to be used to inform future practice, audit or evaluation purposes, but I am happy for it to inform the student nurse's assessment

Please answer the following questions relating to the student nurse by circulating one answer to each question and adding any comment you wish to share in the space provided. Thank you.

### Q1. How would you rate the nursing care provided by the student nurse?

<i>Poor</i>	<i>Acceptable</i>	<i>Satisfactory</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	<i>Exceptional</i>
○	○	○	○	○	○	○

Comments:

### Q2. How compassionate was the student nurse's care?

<i>Poor</i>	<i>Acceptable</i>	<i>Satisfactory</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	<i>Exceptional</i>
○	○	○	○	○	○	○

Comments:

### Q3. How respectfully did the student nurse treat you?

<i>Poor</i>	<i>Acceptable</i>	<i>Satisfactory</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	<i>Exceptional</i>
○	○	○	○	○	○	○

Comments:

### Q4. How well did the student nurse listen to you?

<i>Poor</i>	<i>Acceptable</i>	<i>Satisfactory</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	<i>Exceptional</i>
○	○	○	○	○	○	○

Comments:



Q5. How clearly did the student nurse communicate with you?						
<i>Poor</i>	<i>Acceptable</i>	<i>Satisfactory</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	<i>Exceptional</i>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments:						
Practice Supervisor/Practice Assessor's Name:  Signature: _____ Date: _____  Student's Name: _____  Signature: _____ Date: _____						

## Patient/Service User/Child/Young Person/Carer Feedback Form 3

- ☐ I do not wish for my feedback to be used to inform future practice, audit or evaluation purposes, but I am happy for it to inform the student nurse's assessment

How happy were you with the way the student nurse.....	<b>Please place an 'X' on the line for each statement</b> <i>0 = Very Unsatisfied.....10 = Very Satisfied</i>
..... met your needs?	0 .....10
..... understood the way you felt?	0 .....10
..... talked to you?	0 .....10
..... informed you of your care?	0 .....10
.....showed you respect?	0 .....10
<b>What did they do well?</b>	
<b>How can they improve?</b>	
<b>Practice Supervisor/Practice Assessor's Name:</b>  <div style="display: flex; justify-content: space-between;"> <div>Signature:</div> <div>Date:</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Student's Name:</div> <div>Date:</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Signature:</div> <div>Date:</div> </div>	

## Patient/Service User/Child/Young Person/Carer Feedback Form 4

- ☐ I do not wish for my feedback to be used to inform future practice, audit or evaluation purposes, but I am happy for it to inform the student nurse's assessment

*Please answer the following questions relating to the student nurse*

**Q1. Did the student nurse talk to you?**

**Q2. Was the student nurse kind to you?**

**Q3. Did the student nurse listen to you?**

**Colour in how many stars you would give the student nurse**



**Please use this space to draw a picture of the student nurse**

SAMPLE

**Practice Supervisor/Practice Assessor's Name:**

**Signature:**

**Date:**

**Student's Name:**

**Signature:**

**Date:**

## Record of Working with and learning from others/inter-professional working

**Student Reflection:** Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below.

**Student's Name:**

**Signature:**

**Date:**

**Practice Supervisor's Comments:**

**Practice Supervisor's Name:**

**Signature:**

**Date:**

**Student Reflection:** Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below.

**Student's Name:**

**Signature:**

**Date:**

**Practice Supervisor's Comments:**

**Practice Supervisor's Name:**

**Signature:**

**Date:**

*More pages can be downloaded as per university guidelines.*

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**Signature:**

**Date:**

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**Practice Supervisor's Name:**

**Signature:**

**Date:**

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**Signature:**

**Date:**

**Practice Supervisor's Comments:**

**Practice Supervisor's Name:**

**Signature:**

**Date:**

*More pages can be downloaded as per university guidelines.*

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**Signature:**

**Date:**

**Practice Supervisor's Comments:**

**Practice Supervisor's Name:**

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**Date:**

**Student Reflection:** Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below.

**Student's Name:**

**Signature:**

**Date:**

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**Practice Supervisor's Name:**

**Signature:**

**Date:**

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**Student Reflection:** Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below.

**Student's Name:**

**Signature:**

**Date:**

**Practice Supervisor's Comments:**

**Practice Supervisor's Name:**

**Signature:**

**Date:**

**Student Reflection:** Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below.

**Student's Name:**

**Signature:**

**Date:**

**Practice Supervisor's Comments:**

**Practice Supervisor's Name:**

**Signature:**

**Date:**

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## Record of Communication/Additional Feedback

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Communication/Additional Feedback	
<b>Name:</b>  <b>Signature:</b>	<b>Designation:</b>  <b>Date:</b>
Communication/Additional Feedback	
<b>Name:</b>  <b>Signature:</b>	<b>Designation:</b>  <b>Date:</b>
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<b>Name:</b>  <b>Signature:</b>	<b>Designation:</b>  <b>Date:</b>

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<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><b>Name:</b></p> <p><b>Signature:</b></p> </div> <div style="width: 45%;"> <p><b>Designation:</b></p> <p><b>Date:</b></p> </div> </div>	
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Programme/Year:

Signature:

Date:

### Peer Feedback

Name:

Programme/Year:

Signature:

Date:

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### Peer Feedback

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Programme/Year:

Signature:

Date:

### Peer Feedback

Name:

Programme/Year:

Signature:

Date:

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## Placement 2

**Placement Provider:**  
(e.g. Trust/Organisation)

**Name of Placement Area:**

**Type of Experience:**  
(e.g. Community/Ward Based)

**Placement Telephone Number:**

**Placement Contact Email :**

**Start Date :** ..... **End Date :** ..... **No. of Hours :**  
.....

**Nominated Person to Support Student and Address Concerns**

**Name :** ..... **Designation :** .....

**Contact Email Address:** .....

**Practice Assessor Details:**

**Name :** ..... **Designation :** .....

**Contact Email Address:** .....

**Academic Assessor Details (for part) :**

**Name :** ..... **Designation :** .....

**Contact Email Address:** .....

## Placement 2: Orientation

	Placement Area 1		Placement Area 2	
<b>Name of Placement Area :</b>				
<b>Name of Staff Member :</b>				
<b>This should be undertaken by a member of staff in the Placement Area</b>	Initial/Date (Student signature)	Initial/Date (Staff signature)	Initial/Date (Student signature)	Initial/Date (Staff signature)
<b>The following criteria need to be met within the first day of placement</b>				
A general orientation to the health and social care placement setting has been undertaken				
The local fire procedures have been explained and Telephone number provided. Tel: .....				
The student has been shown the: <ul style="list-style-type: none"> <li>• fire alarms</li> <li>• fire exits</li> <li>• fire extinguishers</li> </ul>				
Resuscitation policy and procedures have been explained and telephone number provided Tel.: .....				
Resuscitation equipment has been shown and explained				
The student knows how to summon help in the event of an emergency				
The student is aware of where to find local policies: <ul style="list-style-type: none"> <li>• health and safety</li> <li>• incident reporting procedures</li> <li>• infection prevention and control</li> <li>• handling of messages and enquiries</li> <li>• other policies</li> </ul>				
The student has been made aware of information governance requirements				
The shift times, meal times and reporting sickness and absence policies have been explained				
The student is aware of their professional role in practice				
Policy regarding safeguarding has been explained				
The student is aware of the policy and process of raising concerns				
Lone working policy has been explained ( <i>if applicable</i> )				
Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed)				
<b>The following criteria need to be met prior to use</b>				
The student has been shown and given a demonstration of the moving and handling equipment used in the placement area				
The student has been shown and given a demonstration of the medical devices used in the placement area				



## Placement 2: Initial Interview

This can be completed by a practice supervisor (PS) or practice assessor (PA). If completed by the PS, they must discuss and agree with the PA.  
This meeting should take place within the first week of the placement.

**Placement Area Name:**

**Student to identify learning and development needs** *(with guidance from the practice supervisor or practice assessor)*

**Taking available learning opportunities into consideration, the student and practice supervisor/ practice assessor to negotiate and agree a learning plan**

**Outline of learning plan**

**How will this be achieved?**

Learning plan for placement agreed by practice assessor *(where applicable)* : YES / NO

**Student's Name:**

**Signature:**

**Date:**

**Practice Supervisor/Assessor's Name:**

**Signature:**

**Date:**

## Professional Values in Practice (Part 3)

Students are required to demonstrate high standards of professional conduct at all times during their placements. Students should work within ethical and legal frameworks, and be able to articulate the underpinning values of The Code (NMC, 2018). Professional Values reflect a number of proficiency statements and are captured under the four sections of The Code.

The Practice assessor has responsibility for assessing Professional Values though the Mid-Point review can be completed by a Practice supervisor in liaison with the Practice assessor.

**Yes = Achieved, No = Not Achieved (Refer to Criteria for Assessment in Practice)**

	Achieved Mid-Point Yes/No	Initial/Date	Achieved Final Yes/No	Initial/Date (Final)
<b>Prioritise People</b>				
1. The student maintains confidentiality in accordance with the NMC code and recognises limits to confidentiality, for example public interest and protection from harm.				
2. The student is non-judgemental, respectful and courteous at all times when interacting with patients/service users/carers and all colleagues.				
3. The student maintains the person's privacy and dignity, seeks consent prior to care, challenges discriminatory behaviour and advocates on their behalf.				
4. The student is caring, compassionate and sensitive to the needs of others demonstrating positive role modelling.				
5. The student understands their professional responsibility in adopting and promoting a healthy lifestyle for the well-being of themselves and others.				
<b>Practise Effectively</b>				
6. The student consistently delivers safe, person-centred and evidence based care ensuring patients/service users/carers are at the centre of decision-making. (4 PEC).				
7. The student is able to work confidently and as an equal partner within the inter-disciplinary team and can build effective professional relationships.				
8. The student makes consistent effort to engage in and reflect on their learning, contributing to their own professional development and supporting the learning and development of others.				
9. The student demonstrates leadership skills and is able to work autonomously, seeks support where appropriate and responds positively to feedback.				
<b>Preserve Safety</b>				
10. The student demonstrates openness (candour), trustworthiness and integrity.				
11. The student reports any concerns to a member of staff when appropriate, and escalates as required (as per local policy/professional guidance) e.g. safeguarding.				
12. The student demonstrates the appropriate listening skills, seeks clarification where appropriate and carries out instructions safely.				
13. The student is able to recognise and work within the limitations of own knowledge, skills and professional boundaries and understand that they are responsible for their own actions.				



## Placement 2: Mid-Point Interview

This discussion must take place half way through the placement.

### Student's self-assessment/reflection on progress

Reflect on your overall progression referring to your personal learning needs, professional values and proficiencies. Identify your strengths and document areas for development.

**Knowledge:**

**Skills:**

**Attitudes and Values:**

### Practice assessor's comments

Discuss with the student their self-assessment and comment on their progression using the Criteria for Assessment in Practice Descriptors, detailing evidence used to come to your decision.

**Knowledge:**

**Skills:**

**Attitudes and Values:**

## Placement 2: Mid-Point Review

### Ongoing learning and development needs.

To be agreed between practice assessor and student - sign and date all entries below.

**Following the mid-point interview the student is to identify their learning and development needs for the remainder of the placement and negotiate with their practice assessor how these will be achieved.**

Learning and development needs	How will these be achieved?

**Student's Name:**

**Signature:**

**Date:**

**Practice Assessor's Name:**

**Signature:**

**Date:**

*Any outstanding learning and development needs are to be discussed and documented at the final interview.*

## Placement 2: Final Interview

This should take place towards the end of the placement.

### Student's self-assessment/reflection on progress

Reflect on your overall progression referring to your personal learning needs, professional values and proficiencies. Identify your strengths and document areas for development.

**Knowledge:**

**Skills:**

**Attitudes and Values:**

### Practice assessor's comments

Discuss with the student their self-assessment and comment on their progression using the criteria for Assessment in Practice Descriptors, detailing evidence used to come to your decision.

**Knowledge:**

**Skills:**

**Attitudes and Values:**

*Please record any further comments on the next page.*

## Learning and Development Needs

To be agreed between the practice assessor and student

**Practice assessor to identify specific areas to take forward to the next placement:**

**Was an action plan required to support the student?**

**YES / NO**

**If Yes, was the academic assessor informed?**

**YES / NO**

**If Yes, have the objectives been achieved?**

**YES / NO**

Checklist for assessed documents	Tick	Practice assessor Initial	Student Initial
The professional value statements have been signed at both mid-point and final interview			
The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed			
The practice placement hours have been checked and signed			
All the interview records and development plans have been completed and signed as appropriate			
The practice supervisors and practice assessor have printed and signed their name on the appropriate list at the beginning of the document			
The practice assessor has completed the Ongoing Achievement Record (OAR)			

**Student's Name:**

**Signature:**

**Date:**

**Practice Assessor's Name:**

**Signature:**

**Date:**

**Additional Signature** *(if applicable, e.g. academic assessor):*

**Signature and designation:**

**Date:**

## **Patient/Service User/Child/Young Person/Carer Feedback Guidance**

Thank you for agreeing to provide feedback on the care you have received from one of our student nurses. There are four different forms for you to choose from. The form you select is entirely up to you as the service user. Prior to providing feedback the student nurse's practice supervisor or practice assessor will gain your consent. If you are under the age of 16, parental consent will be needed. In consenting you are agreeing to provide honest feedback about the student's professionalism, this will inform the assessment process along with future practice, audit and evaluation purposes.

Should you not wish for your information to be used in this way, please tick the box on the relevant form and your data will only be used to inform the students' assessment.

Please note, to maintain all aspects of confidentiality and in line with General Data Protection Regulations (GDPR) you should ensure that you do not identify yourself or the organisation in which you are receiving care. Once you have provided your feedback, the practice supervisor/ assessor will review this and sign and date it. This information will then be stored and accessed in line with AEI and professional regulations.






**Please Note: Patient/Service User/Child/Young Person/Carer should not sign this form**



## Patient/Service User/Child/Young Person/Carer Feedback Form 1

- ☐ I do not wish for my feedback to be used to inform future practice, audit or evaluation purposes, but I am happy for it to inform the student nurse's assessment

**We would like to hear your views about the way the student nurse has supported your care. Your feedback will not change the way you are cared for and will help the student nurse's learning.**

Tick if you are :	The Patient/Service User <input type="checkbox"/>	Carer/Relative <input type="checkbox"/>			
	<b>Very Happy</b> 	<b>Happy</b> 	<b>I'm Not Sure</b> 	<b>Unhappy</b> 	<b>Very Unhappy</b> 
<b>How happy were you with the way the student nurse.....</b>					
..... cared for you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
..... listened to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
..... understood the way you felt?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
..... talked to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
.....showed you respect?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>What did the student nurse do well?</b>					
<b>What could the student nurse have done differently?</b>					
<b>Practice Supervisor/Practice Assessor's Name:</b>					
<b>Signature:</b>			<b>Date:</b>		
<b>Student's Name:</b>					
<b>Signature:</b>			<b>Date:</b>		

This form has been co-produced by Pan London Service Users across 4 fields of practice, 2013.

## Patient/Service User/Child/Young Person/Carer Feedback Form 2

- ☐ I do not wish for my feedback to be used to inform future practice, audit or evaluation purposes, but I am happy for it to inform the student nurse's assessment

Please answer the following questions relating to the student nurse by circulating one answer to each question and adding any comment you wish to share in the space provided. Thank you.

### Q1. How would you rate the nursing care provided by the student nurse?

<i>Poor</i>	<i>Acceptable</i>	<i>Satisfactory</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	<i>Exceptional</i>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

### Q2. How compassionate was the student nurse's care?

<i>Poor</i>	<i>Acceptable</i>	<i>Satisfactory</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	<i>Exceptional</i>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

### Q3. How respectfully did the student nurse treat you?

<i>Poor</i>	<i>Acceptable</i>	<i>Satisfactory</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	<i>Exceptional</i>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

### Q4. How well did the student nurse listen to you?

<i>Poor</i>	<i>Acceptable</i>	<i>Satisfactory</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	<i>Exceptional</i>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

Q5. How clearly did the student nurse communicate with you?						
<i>Poor</i>	<i>Acceptable</i>	<i>Satisfactory</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>	<i>Exceptional</i>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments:						
Practice Supervisor/Practice Assessor's Name:  Signature: _____ Date: _____  Student's Name:  Signature: _____ Date: _____						

## Patient/Service User/Child/Young Person/Carer Feedback Form 3

- ☐ I do not wish for my feedback to be used to inform future practice, audit or evaluation purposes, but I am happy for it to inform the student nurse's assessment

How happy were you with the way the student nurse.....	<b>Please place an 'X' on the line for each statement</b> <i>0 = Very Unsatisfied.....10 = Very Satisfied</i>
..... met your needs?	0 .....10
..... understood the way you felt?	0 .....10
..... talked to you?	0 .....10
..... informed you of your care?	0 .....10
.....showed you respect?	0 .....10
<b>What did they do well?</b>	
<b>How can they improve?</b>	
<b>Practice Supervisor/Practice Assessor's Name:</b>  <div style="display: flex; justify-content: space-between;"> <div>Signature:</div> <div>Date:</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Student's Name:</div> <div>Date:</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Signature:</div> <div>Date:</div> </div>	

## Patient/Service User/Child/Young Person/Carer Feedback Form 4

- ☐ I do not wish for my feedback to be used to inform future practice, audit or evaluation purposes, but I am happy for it to inform the student nurse's assessment

*Please answer the following questions relating to the student nurse*

**Q1. Did the student nurse talk to you?**

**Q2. Was the student nurse kind to you?**

**Q3. Did the student nurse listen to you?**

**Colour in how many stars you would give the student nurse**



**Please use this space to draw a picture of the student nurse**

SAMPLE

**Practice Supervisor/Practice Assessor's Name:**

**Signature:**

**Date:**

**Student's Name:**

**Signature:**

**Date:**

## Record of Working with and learning from others/inter-professional working

**Student Reflection:** Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below.

**Student's Name:**

**Signature:**

**Date:**

**Practice Supervisor's Comments:**

**Practice Supervisor's Name:**

**Signature:**

**Date:**

**Student Reflection:** Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below.

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Communication/Additional Feedback	
<b>Name:</b>  <b>Signature:</b>	<b>Designation:</b>  <b>Date:</b>
Communication/Additional Feedback	
<b>Name:</b>  <b>Signature:</b>	<b>Designation:</b>  <b>Date:</b>

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Communication/Additional Feedback	
<b>Name:</b>  <b>Signature:</b>	<b>Designation:</b>  <b>Date:</b>

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These records can be completed by peers, i.e. other students who have worked alongside you or have had the opportunity to discuss your learning needs with you. If you have facilitated a teaching session on placement you can use the form below to obtain feedback.

### Peer Feedback

Name:

Programme/Year:

Signature:

Date:

### Peer Feedback

Name:

Programme/Year:

Signature:

Date:

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Peer Feedback	
<div></div>	
Name:	Programme/Year:
Signature:	Date:

Peer Feedback	
<div></div>	
Name:	Programme/Year:
Signature:	Date:

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## Assessment of Proficiencies

Incorporating Platforms 1 - 7

Annexe A: Communication and Relationship Management Skills

Annexe B: Nursing Procedures

These proficiencies ***"apply to all registered nurses, but the level of expertise and knowledge required will vary depending on the chosen field(s) of practice"***. (NMC, Future Nurse, 2018, p22, 26).

Assessment of Proficiencies are undertaken across the Part. These can be assessed in a range of placements but need to be assessed as Achieved (YES) at least once by the end of the Part. If a proficiency is assessed as Achieved (YES) early in the Part it is expected that the student maintains that level of competence and can be re-assessed in subsequent placements at the practice assessor's discretion.

The Grade Descriptors are 'Yes' (this proficiency has been achieved) or 'No' (this proficiency has not been achieved). Refer to Criteria for Assessment in Practice for further details.

Some of the proficiencies may be met within simulated learning as per the individual university's policy.

Proficiencies marked with an \* can be met in either Part 2 or Part 3; please refer to the Ongoing Achievement Record (OAR) to confirm achievement of these.

### Part 3 Assessment of Performance

The individual completing the assessment should draw on a range of observed experiences in which the students demonstrates the required knowledge, skills, attitudes and values to co-ordinating high quality person/family-centred care, ensuring all care is underpinned by effective communication skills.

Those marked with an \* may have been met in Part 2. Record achievement of Part 3 proficiencies marked \*3 in OAR as well.

	YES = Achieved; NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
	If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.							
Confidently assesses needs and plans person-centred care								
1. Utilises a range of strategies/ resources (including relevant diagnostic equipment) to undertake a comprehensive whole body assessment to plan and prioritise evidence-based person-centred care.								
2. Assesses a persons' capacity to make best interest decisions about their own care and applies processes for making reasonable adjustments when a person does not have capacity.								
3. Actively participates in the safe referral of people to other professionals or services such as cognitive behavioural therapy or talking therapies across health and social care as appropriate.								

	YES = Achieved; NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
	If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.							
Confidently assesses needs and plans person-centred care								
*4. Recognises signs of deterioration (mental distress/emotional vulnerability/physical symptoms) and takes prompt and appropriate action to prevent or reduce risk of harm to the person and others using for example positive behavioural support or distraction and diversion strategies.								
5. Accurately and legibly records care, with the use of available digital technologies where appropriate, in a timely manner.								
6. Works in partnership with people, families and carers using therapeutic use of self to support shared decision-making in managing their own care.								
7. Manages a range of commonly encountered symptoms of increasing complexity including pain, distress, anxiety and confusion.								
Confidently assesses needs and plans person-centred care								
8. Uses skills of active listening, questioning, paraphrasing and reflection to support therapeutic interventions using a range of communication techniques as required.								

	YES = Achieved; NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
	If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.							
9. Is able to support people distressed by hearing voices or experiencing distressing thoughts or perceptions.								
<b>Confidently manages the procedures in assessing, providing and evaluating care</b>								
10. Manages all aspects of personal hygiene, promotes independence and makes appropriate referrals to other healthcare professionals as needed (e.g. dentist, optician, audiologist).								
11. Manages the care of people with specific nutrition and hydration needs demonstrating understanding of and the contributions of the multi-disciplinary team.								
12. Manages the care of people who are receiving IV fluids and accurately records fluid intake and output, demonstrating understanding of potential complications.								
<b>Confidently manages the procedures in assessing, providing and evaluating care</b>								
*13. Manages the care of people receiving fluid and nutrition via infusion pumps and devices including the administration of medicines where required.								
14. Manages and monitor the effectiveness of symptom relief medication, with the use of infusion pumps and other devices.								

	YES = Achieved; NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
	If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.							
15. Manages the care of people with specific elimination needs for example urinary and faecal incontinence and stoma care.								
16. Demonstrates an understanding of the need to administer enemas and suppositories and undertake rectal examination and digital rectal evacuation as appropriate.								
17. Demonstrates the ability to respond and manage risks in relation to infection prevention and control and take proactive measures to protect public health e.g. immunisation and vaccination policies.								

Confidently manages the procedures in assessing, providing and evaluating care								
18. Understands roles, responsibilities and scope of practice of all members of the multi-disciplinary team and interacts confidently when working with these members.								
19. Effectively manages and prioritises the care needs of a group of people demonstrating appropriate communication and leadership skills to delegate responsibility for care to others in the team as required.								

	YES = Achieved; NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
	If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.							
20. Monitors and evaluates the quality of care delivery by all members of the team to promote improvements in practice and understand the process for performance management of staff (if required).								
<b>Confidently contributes to improving safety and quality of person-centred care</b>								
21. Actively participates in audit activity and demonstrates understanding of appropriate quality improvement strategies.								
22. Undertakes accurate risk assessments and demonstrates an understanding of relevant frameworks, legislation and regulations for managing and reporting risks.								
<b>Confidently contributes to improving safety and quality of person-centred care</b>								
23. Participates in appropriate decision-making regarding safe staffing levels, appropriate skill mix and understands process for escalating concerns.								
24. Demonstrates understanding of processes involved in managing near misses, critical incidents or major incidents.								

	YES = Achieved; NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
	If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.							
Confidently co-ordinates person-centred care								
25. Co-ordinates the care for people with complex co-morbidities and understands the principles of partnership collaboration and inter-agency working in managing multiple care needs.								
26. Evaluates the quality of people's experience of complex care, maintains optimal independence and avoids unnecessary interventions and disruptions to their lifestyle.								
27. Engages in difficult conversations including breaking bad news with compassion and sensitivity.								

<b>Confidently co-ordinates person-centred care</b>								
28. Facilitates the safe discharge and transition of people with complex care needs advocating on their behalf when required.								
29. Assess and reviews the individual care needs and preferences of people and their families and carers at the end of life, respecting cultural requirements and preferences.								

The following proficiencies can be achieved in Part 2 or Part 3. These are currently reflected in the Part 2 document and the OAR. The Practice assessor should check the student record in the OAR to confirm if the proficiencies have been achieved or not in Part 2. If the student is achieving these proficiencies in Part 3, record achievement below and in the OAR.

	YES = Achieved; NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
	If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.							
Part 2, No.3 Recognise people at risk of self-harm and/or suicidal ideation and demonstrates the knowledge and skills required to support person-centred evidence-based practice using appropriate risk assessment tools as needed.								
Part 2, No.4 Demonstrates an understanding of the needs of people and families for care at the end of life and contributes to the decision-making relating to treatment and care preferences.								
Part 2, No.10 Utilises aseptic techniques when undertaking wound care and in managing wound and drainage processes (including management of sutures and vacuum removal where appropriate).								
Part 2, No.14 Insert, manage and remove urinary catheters for all genders and assist with clean, intermittent self-catheterisation where appropriate.								



	YES = Achieved; NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
	If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.							
Part 2, No.15 Undertakes, responds to and interprets neurological observations and assessments and can recognise and manage seizures (where appropriate).								
Part 2, No.19 Undertakes a comprehensive respiratory assessment including chest auscultation e.g. peak flow and pulse oximetry (where appropriate) and manages the administration of oxygen using a range of routes.								
Part 2, No.20 Uses best practice approaches to undertake nasal and oral suctioning techniques.								
Part 2, No.24 Undertakes an effective cardiac assessment and demonstrates the ability to undertake and ECG and interpret findings.								
Part 2, No.25 Demonstrates knowledge and skills related to safe and effective venepuncture and can interpret normal and abnormal blood profiles.								

	YES = Achieved; NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
	If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.							
Part 2, No.26 Demonstrates knowledge and skills related to safe and effective cannulation in line with local policy.								
Part 2, No.27 Manage and monitor blood component transfusions in line with local policy and evidence-based practice.								
Part 2, No.28 Can identify signs and symptoms of deterioration and sepsis and initiate appropriate interventions as required.								

## Part 3 Episode of Care - 1

This assessment must be undertaken and assessed by the practice assessor by the end of Part 3.

**The student will be given the opportunity to supervise and teach a junior learner/colleague in practice and provide a written reflection on this experience. This needs to be based on the delivery of direct person-centred care. Professionalism underpins all aspects of the students' performance.**

The aim of this assessment is to demonstrate the student's progression in the following five platforms within the *Future Nurse: Standards of Proficiency (including skills from Annexe A and B)* (NMC 2018) **in the context of their intended field(s) of practice:**

- Assessing needs and planning care
- Providing and evaluating care
- Improving safety and quality of care.
- Leading nursing care and working in teams
- Co-ordinating care.

Effective communication and relationship management skills underpin all aspects of care. (Annexe A).

Students are required to use appropriate approaches and techniques considering the person's motivation, capacity and need for reasonable adjustment, applying understanding of mental capacity and health legislation as appropriate.

### Learning Outcomes

The student is able to:

1. Supervise and teach less experienced students and colleagues, appraising the quality of the nursing care they provide, documenting performance, promoting reflection and providing constructive feedback.
2. Demonstrate an understanding of the factors that both facilitate and impede learning in practice.
3. Demonstrate leadership potential in the assessment, planning, implementation and evaluation of care.
4. Apply the appropriate knowledge and skills in appraising the quality of the nursing care provided by the junior learning colleague.
5. Demonstrate effective verbal, non-verbal communication and interpersonal skills in engaging with the learner and others involved in the care and act as a positive role model.
6. Critically reflect on their own role and the role of the nurse in the supervision, facilitation and evaluation of learning for the whole team.

## Student Reflection on an Episode of Care

Within your reflection, describe the episode of care and how you planned and supervised the junior learner/peer in practice who delivered person-centred care.

What did you do well?

What would you have done differently?

What learning from this episode of care will support your professional development going forward in your teaching and learning role?

## Practice Assessor Feedback

Based on the student's reflection, your observation and discussion of the episode of care, please assess and comment on the following:

YES = Achieved; NO = Not Achieved (Refer to Criteria for Assessment in Practice)		
Proficiencies	Yes/No	Comments
<b>Assessing, planning, providing and evaluating care</b> Chooses an appropriate care activity for the junior learner/peer to engage in and considers the learner's needs and their current level of knowledge and skills.		
<b>Improving safety and quality of care</b> The student undertakes a risk assessment to ensure that the person(s) receiving care is not at risk from the learner/care activity. Continuous supervision and support is provided to the junior learner/peer throughout the care activity.		
<b>Leading nursing care and working in teams</b> Effectively prepares the junior learner/peer and provides them with clear instructions and explanations about the care activity they are to engage in.		
<b>Co-ordinating care</b> Effectively communicates throughout the care activity, evaluates the care given and provides the junior learner/peer with constructive verbal and written feedback.		
<b>If any of the Standards are 'Not Achieved' this will require a re-assessment and the academic assessor must be informed.</b>		
<b>Student's Name:</b>	<b>Signature:</b>	<b>Date:</b>
<b>Practice Assessor's Name:</b>	<b>Signature:</b>	<b>Date</b>

## Part 3 Episode of Care - 2

This assessment must be undertaken and assessed by the practice assessor by the end of Part 3.

**The practice assessor and student will identify an appropriate episode of direct care involving the organisation and management of care for a group/caseload of people with complex care needs. Professionalism underpins all aspects of the student's performance.**

The aim of this assessment is to demonstrate the student's progression in the following six platforms within the *Future Nurse: Standards of Proficiency (including skills from Annexe A and B)* (NMC 2018) **in the context of their intended field of nursing:**

- Promoting health and preventing ill health
- Assessing needs and planning care
- Providing and evaluating care
- Improving safety and quality of care
- Leading and managing nursing care and working in teams
- Co-ordinating care.

Effective communication and relationship management skills underpin all aspects of care. (Annexe A).

Students are required to use appropriate therapeutic approaches and techniques considering the person's motivation, capacity and need for reasonable adjustment, applying understanding of mental capacity and health legislation as appropriate.

### Learning Outcomes

The student is able to:

1. Demonstrate the knowledge, skills and ability to co-ordinate the care for a group of people with complex and multiple needs and act as a role model in managing person-centred, evidence-based approach to care.
2. Evaluate a team based approach to the quality of care delivery and demonstrates understanding of the roles, responsibilities and scope of practice of all team members.
3. Demonstrate leadership potential in the assessment, planning, implementation and evaluation of care within the practice setting through effective interaction and engagement with people, services and communities.
4. Critically appraise the quality and effectiveness of nursing care, demonstrate how to use service delivery evaluation in practice and how to bring about service improvement and audit findings to improve care.

## Student Reflection on an Episode of Care

**Briefly outline how you have delivered high quality, complex care, and give the rationale for the decisions you have made.**

**Reflect on how you use leadership skills to supervise and manage others**

**Reflect on how you delivered verbal information and handover in relation to person-centred care.**

## Student Reflection on an Episode of Care

Reflect on how you have worked in partnership with health and social care professionals, service users, carers and families ensuring that decision-making about care is shared.

What did you do well?

What would you have done differently?

What learning from this episode of care could be transferred to other areas of practice?



## Practice Assessor Feedback

Based on the student's reflection, your observation and discussion of the episode of care, please assess and comment on the following:

	YES = Achieved; NO = Not Achieved (Refer to Criteria for Assessment in Practice)	
Proficiencies	Yes/No	Comments
<b>Promoting health and preventing ill health</b> Discusses the possible influences on the person's/group of people's mental health and physical health and can highlight a range of factors impacting on them and the wider community.		
<b>Assessing needs and planning care</b> Utilises relevant knowledge and skills to undertake a comprehensive assessment, continually monitoring a person's condition, interpret signs of deterioration or distress and escalate appropriately.		
<b>Providing and evaluating care</b> Applied relevant knowledge and skills in the provision of more complex person-centred, evidence-based care demonstrating effective communication skills and the ability to document effectively.		
<b>Improving safety and quality of care</b> Undertakes relevant risk assessments, discusses risk management and can propose improvements to enhance the quality of care.		
<b>Co-ordinating and leading nursing care</b> Supports the person/persons receiving care and their families in maintaining independence and minimising disruption to their lifestyle, demonstrating understanding of the need for multi-agency working.		
<b>If any of the Standards are 'Not Achieved' this will require a re-assessment and the academic assessor must be informed.</b>		
<b>Student's Name:</b>	<b>Signature:</b>	<b>Date:</b>
<b>Practice Assessor's Name:</b>	<b>Signature:</b>	<b>Date:</b>

## Part 3 Medicines Management

This assessment must be completed by the end of Part 3 where the student safely administers medicines to a group of patients/service users or a caseload of patients/service users in community settings.

During Part 3 the student should be consolidating their knowledge, skills and competencies in relation to the safe administration of medicines. This assessment should normally be undertaken with a small group of patients/service users or caseload.

The student must be allowed a number of practice opportunities to administer medicines under supervision prior to this assessment.

**The student must work within the legal and ethical frameworks that underpin safe and effective medicines management and work within national and local policies.**

**Regulatory requirements:** *Future Nurse: Standards of Proficiency for Registered Nurses* (NMC 2018), *The Code* (NMC 2018), *A Competency Framework for all Prescribers* (The Royal Pharmaceutical Society 2016).

The aim of this assessment is to demonstrate the student's knowledge and competence in administering medications safely.

### Learning Outcomes

The student is able to:

1. Apply knowledge of pharmacology, how medicines act and interact in the systems of the body, and their therapeutic action.
2. Prepare medications where necessary, safely and effectively administer these via common routes, maintains accurate records.
3. Demonstrate proficiency and accuracy when calculating dosages for a range of prescribed medicines.
4. Administer and monitor medications using vascular access devices and enteral equipment, where appropriate.
5. Recognise and respond to adverse or abnormal drug reactions to medications.
6. Maintain safety and safeguard the patient from harm, including awareness of non-adherence, demonstrating understanding of the Mental Capacity Act (DH 2005) and the Mental Health Act (DH 1983, amended 2007), where appropriate.

## Part 3 Medicines Management

YES = Achieved; NO = Not Achieved	
Competency	Yes/No
1. Is aware of the patient/service user's plan of care and the reason for medication demonstrating knowledge of pharmacology for commonly prescribed medicines within the practice area.	
2. Communicates appropriately with the patient/service user. Provides clear and accurate information and checks understanding.	
3. Understands safe storage of medications in the care environment.	
4. Maintains effective hygiene/infection control throughout.	
5. Checks prescriptions thoroughly: <ul style="list-style-type: none"> <li>• Right patient/service user</li> <li>• Right medication</li> <li>• Right time/date/valid period</li> <li>• Right dose/last dose</li> <li>• Right route/method</li> <li>• Special instructions</li> </ul>	
6. Checks for allergies demonstrating an understanding of the risks and managing these as appropriate: <ul style="list-style-type: none"> <li>• Asks patient/service user</li> <li>• Checks prescription chart or identification band</li> </ul>	
7. Prepares medications safely. Checks expiry date. Notes any special instructions/contraindications.	
8. Calculates doses accurately and safely: <ul style="list-style-type: none"> <li>• Demonstrates to assessor the component parts of the calculation</li> <li>• Minimum of three calculations undertaken</li> </ul>	
9. Checks and confirms the patient/service user's identity and establishes consent. (ID band or other confirmation if in own home).	
10. Administers or supervises self-administration safely under direct supervision. Verifies that oral medication has been swallowed.	
11. Describes/demonstrates the procedure in the event of reduced capacity and non-adherence.	
12. Safely utilises and disposes of equipment.	
13. Maintains accurate records: <ul style="list-style-type: none"> <li>• Records, signs and dates where safely administered.</li> </ul>	
14. Monitors effects and is aware of common side effects and how these are managed.	
15. Uses appropriate sources of information, e.g. British National Formulary.	
16. Offers patient/service user further support/advice/education, including discharge/ safe transfer where appropriate.	

**Practice Assessor's Feedback****Student Reflection on Learning and Development****Student's Name:****Signature:****Date:****Practice Assessor's Name:****Signature:****Date:**

## Action Plan

An action plan is required when a student's performance causes concern.

Practice assessor must liaise with the academic assessor.

The **SMART** principles should be used to construct the action plan.

Placement Name :		Date Action Plan Initiated :	
Nature of Concern Refer to Professional Value(s). Proficiency and/or Episode of Care (Specific)	What Does the Student Need to Demonstrate? <i>Objectives and measures of success</i> (Measurable, Achievable and Realistic)	Support Available and Who Is Responsible	Date for Review (Timed)
Student's Name :		Signature :	
Practice Assessor's Name :		Signature :	
Academic Assessor's Name:		Signature :	
<b>Review/Feedback</b>			
Have the objectives been achieved?		YES/NO	
Comments:			
Practice Assessor Name:		Signature:	
		Date:	

## Action Plan

An action plan is required when a student's performance causes concern.

Practice assessor must liaise with the academic assessor.

The **SMART** principles should be used to construct the action plan.

Placement Name :		Date Action Plan Initiated :	
Nature of Concern Refer to Professional Value(s). Proficiency and/or Episode of Care (Specific)	What Does the Student Need to Demonstrate? <i>Objectives and measures of success</i> (Measurable, Achievable and Realistic)	Support Available and Who Is Responsible	Date for Review (Timed)
Student's Name :		Signature :                      Date :	
Practice Assessor's Name :		Signature :                      Date :	
Academic Assessor's Name:		Signature :                      Date :	
<b>Review/Feedback</b>			
Have the objectives been achieved?		YES/NO	
Comments:			
Practice Assessor Name:		Signature:                      Date:	

## PRACTICE HOURS

*Please start a new page per placement*

**To be completed as per your local University Requirements**

Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialised by a member of staff

	Date	Placement	Total Hrs	Staff Initials	Shift Type		Date	Placement	Total Hrs	Staff Initials	Shift Type
Example of hours confirmation						Sun	1/7/19	Pixie Ward	7.5	FF	E
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			

**Total hours of completed practice on this page**

**Figures**

**Words**

**Total hours of sickness/absence on this page**

**Figures**

**Words**

**Staff Member:** I have checked the hours of experience recorded by the student:

Signed: \_\_\_\_\_ (Staff Member)      Name (print): \_\_\_\_\_

Placement Area: \_\_\_\_\_      Date: \_\_\_\_\_

**Declaration by Student:** I confirm that the hours recorded on this sheet are a true and accurate account of the shifts I have worked.

Signed: \_\_\_\_\_ (Student)      Name (print): \_\_\_\_\_

**It is expected that the student will work a range of shifts to meet NMC requirements.**

Shift Codes - D = Day Shift    N = Night Shift    S = Sickness    A = Absent

## Health Education England

This Practice Assessment Document has been developed by the Pan London Practice Learning Group in collaboration with practice partners, mentors, academic staff, students and service users across the London Region. This work has been led by Jane Fish as Project Manager.

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