

**Notepad for Practice Assessor Preparation**

This notepad has been developed for use in conjunction with the Workbook for practice assessor preparation. Please use the workbook to guide you through the different activities and make notes here. You can then use this as evidence for appraisal, professional development and revalidation and to show your employer that you have completed practice assessor preparation.

Please note this is a lengthy document as it contains a section of the MYEPAD. You are advised not to print all of this.

**Learning Outcomes:**

***By the end of this preparation participants will be able to:***

1. Enhance their understanding of the NMC Standards for Student Supervision and Assessment and the inter-relationship between the 3 roles of Practice Supervisor, Practice Assessor and Academic Assessor.

2. Recognise key elements of an effective practice based assessment process from the perspective of the practice assessor role

3. Demonstrate knowledge of the assessment process and assessment document, with specific reference to the practice assessors role, responsibility and accountability in protecting the public.

4. Identify local support mechanisms available to the practice assessor to enable them to develop emotional resilience and personal support strategies for this role.

**Activity 1: Introduction**

Make a few notes below about your experiences as a supervisor and any concerns you may have about this or the assessor role. Is there anything also you want to find out as part of this preparation for the assessor role?

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| --- | --- |
| Experiences | Concerns |
| Opportunities | I need more detail on; |

**Activity 2: SSSA and the role of the practice assessor**

After you have listened to the short presentation, make some notes here about any queries or thoughts you may have on the role of the assessor

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**Activity 3: Principles of assessment.**

Please work through the activities in the PowerPoint presentation as advised.

**Activity 4: Giving Feedback**

Think of a time you have received feedback and consider:

* How did it make you feel?
* How was the feedback structured?
* What words were used to give praise or tell you improvement was needed?
* Did it have an effect on your learning?

Make some notes here:

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Having watched the video on feedback that uses Pendleton’s framework (1984), make some notes on how feasible it is to use this structure in your role as an assessor.

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**Activity 5: Using the MYEPAD as an assessor**

Having reviewed the two timelines which option do you choose?

Option 1

Option 2

Reflect and make some notes on your decision:

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Who is responsible for completing the assessment? Put the following key components of the practice assessment in to the appropriate boxes below. Remember that the assessment may be undertaken or contributed to by more than one role.

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| ***Introduction and orientation Initial interview Midpoint interview Midpoint professional values Final interview Final professional values Complete record of attendance*** | ***Episode of care 1 Episode of care 2 Assessment of proficiencies Working with others Record of communication Medicines management Service user carer feedback Peer feedback*** | ***Complete OAR Confirm assessment in OAR Provide feedback Formative assessment Summative assessment Continuous feedback Develop an action plan Escalate and raise concerns.*** |

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| Practice Supervisor | Practice Assessor | Academic Assessor |
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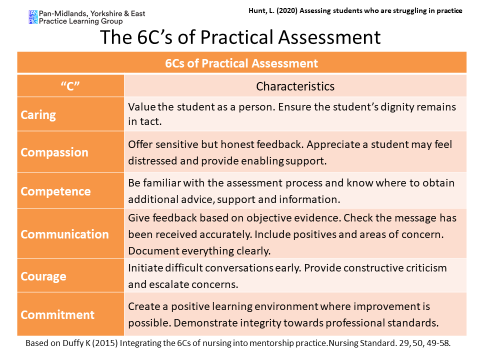
Consider your responses and make some notes of your decisions and focus on the specific elements of assessment that the practice assessor is required to do:

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**Activity 6: Assessment of proficiency.**

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| Write your proficiency here; |
| Note the assessment method you would plan and any evidence you might ask the student for in order to assess if they have met this proficiency (or not?) |
| How would your assessment plan differ as the student moves through the programme - from a new student to nearing completion?  **1st year – new student?**  **Final year – near to completing?** |
| How do you know your assessment on this proficiency is valid, reliable and objective? (from the podcast you heard at activity 3). |

**Activity 7: Struggling Students – the evidence base**

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Assessing a struggling student is challenging for the student and the assessor. These can be used as a basis for maintaining a constructive relationship. When these are taken into account the student is more likely to remain constructive and continue to develop their abilities.

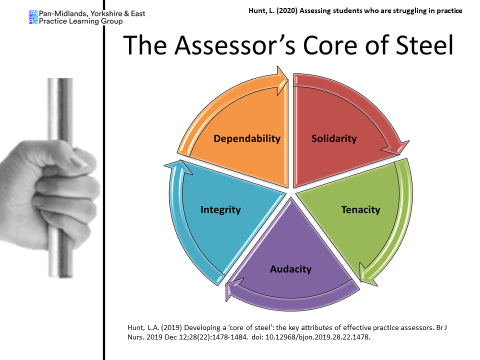
**ACTIVITY: Which order would you prioritise these in when managing a struggling student? Consider why? What decisions do you make as you rank the 6C’s in a priority list below?**

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| **1** |  |
| **2** |  |
| **3** |  |
| **4** |  |
| **5** |  |
| **6** |  |

More detail on the coercive strategies in this presentation can be found at:

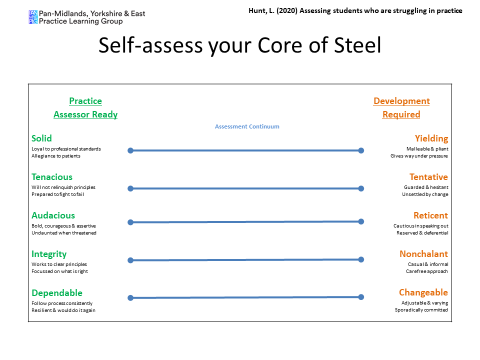
Hunt, L.A., McGee, P., Gutteridge, R., Hughes, M. (2016) Manipulating Mentors’ Assessment Decisions: Do underperforming student nurses use coercive strategies to influence mentors’ practical assessment decisions? Nurse Education in Practice 20, 154-162.

If you have access to articles via a work or university library you may want to read more about this.



More detail on this model can be found at:

Hunt, L.A. (2019) Developing a ‘core of steel’: the key attributes of effective practice assessors. Br J Nurs. 2019 Dec 12;28(22):1478-1484. doi: 10.12968/bjon.2019.28.22.1478



Looking at the slide above and the information from that podcast, assess your core of steel. Where are your strengths? Which segments do you need to further develop?

**Activity 8: Supporting Struggling Students**

This activity is the final podcast. As you listen consider how the information links to your area of work and what support would be available to you if you had a struggling student. There are no other associated activities.

**Activity 9: Case Studies – Struggling Students**

**Please use the MYEPAD case study example document on the next page to work through these case studies as detailed in your workbook.**

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| |  |  |  | | --- | --- | --- | | **Name** | Meriel Swann |  | | **Number** | 7654321 | | **Cohort** | September 2019 | | **Field** | Adult Nursing | |  | | | |  | TO BE USED AS PART OF PRACTICE ASSESSOR PREPARATION |

Please note that this is an example copy of the MYEPAD for Parts 1,2,3. Pages and content have been removed and this resource is for training purposes only.

**PRACTICE ASSESSMENT DOCUMENT**

**NURSING**

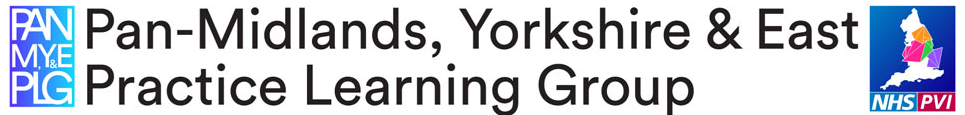
**PART 1**

**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).



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.

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| **Criteria for Assessment in Practice**  **Overall Framework Parts 1 - 3 to be achieved by the end of the part** |

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| Guided participation in care and performing with increasing confidence and competence |  | Active participation in care with minimal guidance and performing with increased confidence and competence |  | Practising independently with minimal supervision and leading and coordinating care with confidence |

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|  | Part 1 |  | Part 2 |  | Part 3 |  |

*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 1: Guided participation in care and performing with increased confidence and competence**

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

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| **Achieved** | **Knowledge** | **Skills** | **Attitude and Values** |
| **Yes** | Is able to identify the appropriate knowledge base required to deliver safe, person-centred care under some guidance. | In commonly encountered situations is able to utilise appropriate skills in the delivery of person-centred care with some guidance. | Is able to demonstrate a professional attitude in delivering person-centred care. Demonstrates positive engagement with own learning. |
| **No** | Is not able to demonstrate an adequate knowledge base and has significant gaps in understanding, leading to poor practice. | Under direct supervision is not able to demonstrate safe practice in delivering care despite repeated guidance and prompting in familiar tasks. | Inconsistent professional attitude towards others and lacks self-awareness. Is not asking questions nor engaging with own learning needs. |

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| **Placement 1** |

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| **Placement Provider:** HELS NHS Trust  (e.g. Trust/Organisation)  **Name of Placement Area:** Ward 1 Surgical  **Type of Experience:** Acute surgery/Ward Based  (e.g. Community/Ward Based)  **Placement Telephone Number:** 0121 0001111  **Placement Contact Email :** n/a  **Start Date** : 06/01/2020. **End Date** : 01/03/2020…….. **No. of Hours** : 320 |

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| **Nominated Person to Support Student and Address Concerns**  **Name :** Andrew Rose **Designation :** Practice Placement Manager  **Contact Email:** a.rose@nhshels.co.uk |

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| **Practice Assessor Details:**  **Name :** Lizzie Blue **Designation :** Staff Nurse  **Contact Email: l**.blue@nhshels.co.uk |

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| **Academic Assessor Details** (for part) :  **Name :** Chris Beech **Designation :** Senior Lecturer  **Contact Email:** Chris.Beech@ac.uk |

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| **Placement 1: Orientation** |

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|  | **Ward 1 Surgical** | |
| **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)** |
| **The following criteria need to be met within the first day of placement** | | |
| A general orientation to the health and social care placement setting has been undertaken | MS 07/01/2020 | JB 07/01/2020 |
| The local fire procedures have been explained and  Telephone number provided. Tel: …………………… | MS 07/01/2020 | JB 07/01/2020 |
| The student has been shown the:   * fire alarms * fire exits * fire extinguishers | MS 07/01/2020 | JB 07/01/2020 |
| Resuscitation policy and procedures have been explained and telephone number provided  Tel.: ……………………………….. | MS 07/01/2020 | JB 07/01/2020 |
| Resuscitation equipment has been shown and explained | MS 07/01/2020 | JB 07/01/2020 |
| The student knows how to summon help in the event of an emergency | MS 07/01/2020 | JB 07/01/2020 |
| The student is aware of where to find local policies:   * health and safety * incident reporting procedures * infection prevention and control * handling of messages and enquiries * other policies | MS 07/01/2020 | JB 07/01/2020 |
| The student has been made aware of information governance requirements | MS 07/01/2020 | JB 07/01/2020 |
| The shift times, meal times and reporting sickness and absence policies have been explained | MS 07/01/2020 | JB 07/01/2020 |
| The student is aware of their professional role in practice | MS 07/01/2020 | JB 07/01/2020 |
| Policy regarding safeguarding has been explained | MS 07/01/2020 | JB 07/01/2020 |
| The student is aware of the policy and process of raising concerns | MS 07/01/2020 | JB 07/01/2020 |
| Lone working policy has been explained *(if applicable)* | MS 07/01/2020 | JB 07/01/2020 |
| Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed) | MS 07/01/2020 | JB 07/01/2020 |
| **The following criteria need to be met prior to use** | | |
| The student has been shown and given a demonstration of the moving and handling equipment used in the placement area | MS 07/01/2020 | JB 07/01/2020 |
| The student has been shown and given a demonstration of the medical devices used in the placement area | MS 07/01/2020 | JB 07/01/2020 |

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| **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.

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| **Placement Area Name: Ward 1 Surgical** | |
| **Student to identify learning and development needs** *(with guidance from the practice supervisor or practice assessor)* | |
| Admission of Patients – what assessments are needed  Personal Hygiene needs of patients – how to assist or undertake  Medication Administration  Preparation of Patients for surgery  Observations of patients – what is needed after surgery. | |
| **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?** |
| Admission of patients  Patients personal hygiene  Medication Administration  Preparation of patients for surgery  Observations | Observation of supervisors and other staff, then undertake admissions under supervision  Assist supervisors and other staff with patients hygiene needs  Work with supervisors on medication administration round. Learn common medicines for this area  Help supervisors and other staff prepare patients for surgery.  Undertake patient observations and report abnormalities to supervisors |
| Learning plan for placement agreed by practice assessor *(where applicable)* : YES / NO  **Student's Name:** Meriel Swann  **Signature:** M. Swann **Date:** 07/01/2020  **Practice Supervisor/Assessor's Name:**  **Signature:** J Black **Date:** 07/01/2020 | |
| **Professional Values in Practice (Part 1)** | | | |

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)** |
| --- | --- | --- | --- | --- |
| **Prioritise People** | | | | |
| 1. The student maintains confidentiality in accordance with the NMC code. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| 1. The student is non-judgemental, respectful and courteous at all times when interacting with patients/service users/carers and all colleagues. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| 1. The student maintains the person's privacy and dignity, seeks consent prior to care and advocates on their behalf. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| 1. The student is caring, compassionate and sensitive to the needs of others. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| 1. The student understands their professional responsibility in adopting and promoting a healthy lifestyle for the well-being of themselves and others. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| **Practise Effectively** | | | | |
| 1. The student maintains consistent, safe and person-centred practice. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| 1. The student is able to work effectively within the inter-disciplinary team with the intent of building professional relationships. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| 1. The student makes a consistent effort to engage in the requisite standards of care and learning based on best available evidence. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| **Preserve Safety** | | | | |
| 1. The student demonstrates openness (candour), trustworthiness and integrity. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| 1. The student reports any concerns to the appropriate professional member of staff when appropriate, e.g. safeguarding. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| 1. The student demonstrates the ability to listen, seeks clarification and carries out instructions safely. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| 1. 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. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
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| **Promote Professionalism and Trust** | | | | |
| 1. The student's personal presentation and dress code is in accordance with the local policy. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| 1. The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| 1. The student demonstrates that they are self-aware and can recognise their own emotions and those of others in different situations. | Yes | JB 31/01/2020 | Yes | L.B 24/02/2020 |
| **Mid-Point Assessment**  **Practice Supervisor's Name: J Black Signature:** J Black  **Date:31/01/2020**  **Reviewed and agreed by practice assessor**  **Practice Assessor's Name: L Blue Signature:** L. Blue **Date:03/02/2020** | | | | |
| **End Point: Student Reflection on meeting Professional Values** | | | | |
| **Choose one example from your practice on this placement to demonstrate how you practice within the NMC Code** *(ensure confidentiality is maintained).* For each placement, please select a different section of The Code to reflect on.  Professional value-1 Confidentiality  **What?** – I answered the telephone on a shift and a woman asked if Miss X had had her operation. I asked who I was speaking to and she said she was Miss X’s aunty. I explained I couldn’t give her that information over the telephone and please could she contact a family member who had Miss X’s permission to share information. The person was quite upset that I couldn’t tell her but I explained again that as I couldn’t verify her identity I had to protect the patient’s information. She then understood and said she would call Miss X’s partner.  **So What?** I knew that the NMC Code states I must respect a person’s right to privacy plus the Trusts confidentiality policy states I must not divulge information to unknown persons. It was difficult as the person sounded very concerned about Miss X but I managed to calmly explain why I could not tell her the information.  Now What? If the situation arose again I would still make sure I did not give out personal information. Perhaps I will ask patients if they would like to nominate a named person for other to contact where possible. I will also read up on confidentiality issues from the lecture we had in university. | | | | |
| **Student Name: Meriel Swann**  **Signature:** M. Swann **Date:** 24/02/2020 | | | | |
| **Final Assessment** - [please add comments on Final Interview Page]  **Practice Assessor's Name:** L. BLUE  **Signature:** L. Blue **Date:** 24/02/2020 | | | | |

**If there are any issues/areas for concern, these must be recorded. 'Not Achieved' must trigger an action plan. This must involve the practice supervisor and the practice assessor (as appropriate) in liaison with the nominated person / academic assessor (see page 8).**

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| **Placement 1: Mid-Point Interview** |

This discussion must take place half way through the placement.

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| **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:** I understand most of the assessments needed for a safe admission. I would like to learn more about falls assessments.  My knowledge of common medications is developing and I can answer most of my supervisor’s questions. I need to learn some more and more about routes of administration.  I understand what is needed to safely prepare a patient for surgery and I know how to help a patient with their hygiene needs.  I am able to recognise abnormal observations and report them to my supervisor. | | |
| **Skills:** I have consolidated my vital signs observations. I would like more practice at manual blood pressures.  I have, under supervision, safely given a sub cutaneous injection.  I have learnt about post-operative wound care.  My communication is improving and I am more confident to chat to patients. I would like to practice handover a patient. | | |
| **Attitudes and Values:**  I have realised people may not always want what we suggest but that I should not take it personally and that they have the right to make their choices. It is important that I always ask people what they would like to do; for example with regard to diet, or washing, or faith requirements. | | |
| **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:** Meriel can identify when a patients observations are abnormal and reports appropriately. Medication knowledge is developing. She still needs to think about why we give a medication by a certain route. Meriel can safely assist patients with their hygiene needs. She understands why it is important to safely prepare a patient for surgery and what is required. | | |
| **Skills:**  Meriel skills are developing nicely. She needs to continue to practice injection technique to boost her confidence. She also needs to gain experience with emptying catheters/catheter care and she has not had opportunity as yet. | | |
| **Attitudes and Values:**  Meriel shows a kind and compassionate attitude to her patients. She has been non-judgemental when patients have gone against medical advice and we have discussed he reasons why patients may choose to do so. | | |
| **Placement 1: Mid-Point Review** |

**Ongoing learning and development needs.**

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

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| **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?** |
| Falls assessments  Manual Blood Pressure  Medicine administration  Catheter care  Handover of a patient | Observe assessments by supervisor then undertake under supervision  Practice manual blood pressure on patients, other students and staff who may be willing for me to practice.  Continue to learn identified common medications and more about routes of administration.  Observe catheter emptying and catheter care then under take under supervision.  Undertake the handover of a patient to my supervisor |
| **Student's Name: Meriel Swann**  **Signature:** M. Swann **Date:** 03/02/2020  **Practice Assessor's Name:**  **Signature:** L. Blue **Date:** 03/02/2020 | |

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

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| **Placement 1: Final Interview** |

This should take place towards the end of the placement.

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| **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:** I understand the main assessment needed to admit a patient safely. I understand how to meet the personal hygiene needs of patients who need help. I know the parameters relating to vital sign observations and when to report abnormal readings. My medication knowledge has improved and I am able to explain some routes of administration. I fully understand the importance of assessing patients prior to having surgery and afterwards. |
| **Skills:** Under supervision I can give subcutaneous injections. I have improved my manual BP technique. I can safely empty a catheter and document correctly on the fluid balance chart. My written and verbal communication skills are improving. I have given handover of a patient to my supervisor. |
| **Attitudes and Values:** I have learnt a lot about how people react under stress and when they are worried. I know when I should seek help. I have learnt that the small things are important to people such as using their preferred name or helping them to get up and dressed and not sit in their pyjamas. I have made sure I have asked for consent from service users before undertaking any episodes of care with them. |
| **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:** Meriel has demonstrated a steady progression of her knowledge particularly medication, assessment and observations. Her communication skills are improving. More practice giving a handover would be useful in future placements. |
| **Skills:** Meriel has safely admitted patients to the ward undertaking the relevant assessments clearly and thoroughly. She has learnt about catheter care and wound assessments. Keep practicing your manual blood pressure observations. |
| **Attitudes and Values:**  Meriel has demonstrated a caring and compassionate nature. She is genuinely interested in people and patients respond well to her. She has ensured she respects patient’s views and wishes even when it may be difficult to understand why they may respond in a particular way. |

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

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| **Placement 1 - Learning and Development Needs** |

To be agreed between the practice assessor and student.

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| **Practice assessor to identify specific areas to take forward to the next placement:**  Communication – practice handover, speaking to MDT practitioners to help build up your confidence further.  Develop assessment knowledge further – there will be different assessments in other areas. Learn about these and how they help the holistic care of patients.  Keep expanding your medication knowledge. |

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| |  |  | | --- | --- | | **Was an action plan required to support the student?**  **If Yes, was the academic assessor informed?** | **YES / NO**  **YES / NO** | | **If Yes, have the objectives been achieved?** | **YES / NO** | |

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| **Checklist for assessed documents** | **Tick** | **Practice assessor Initial** | **Student Initial** |
| The professional value statements have been signed at both mid-point and final interview | **✓** | L.B | MS |
| The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed | **✓** | L.B | MS |
| The practice placement hours have been checked and signed | **✓** | L.B | MS |
| All the interview records and development plans have been completed and signed as appropriate | **✓** | L.B | MS |
| The practice supervisors and practice assessor have printed and signed their name on the appropriate list at the beginning of the document | **✓** | L.B | MS |
| The practice assessor has completed the Ongoing Achievement Record (OAR) | **✓** | L.B | MS |
| **Student's Name: Meriel Swann**  **Signature:** M. Swann **Date:** 24/02/2020  **Practice Assessor's Name: Lizzie Blue**  **Signature:** L. Blue **Date:** 24/02/2020  **Additional Signature** *(if applicable, e.g. nominated person / academic assessor)***:**  **Signature and designation:**   **Date:** | | | |

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| **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

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| **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 Carer/Relative**  ✓ | | | | | |
| **How happy were you with the way the student nurse……..** | ***Very Happy*** | ***Happy*** | ***I'm Not Sure*** | ***Unhappy*** | ***Very Unhappy*** |
| MC900423171[1] | MC900423169[1] | MC900434403[1] | MC900423165[1] | MC900423163[1] |
| **….. cared for you?** | **⭘✓** | **⭘** | **⭘** | **⭘** | **⭘** |
| **….. listened to you?** | **⭘✓** | **⭘** | **⭘** | **⭘** | **⭘** |
| **….. understood the way you felt?** | **⭘** | **⭘✓** | **⭘** | **⭘** | **⭘** |
| **….. talked to you?** | **⭘✓** | **⭘** | **⭘** | **⭘** | **⭘** |
| **…..showed you respect?** | **⭘✓** | **⭘** | **⭘** | **⭘** | **⭘** |
| **What did the student nurse do well?**  She understood and respected when I did not feel up to doing something. But then she came back later to check if I felt up to it then. | | | | | |
| **What could the student nurse have done differently?**  Sometimes she seemed a little hesitatant which made me feel a bit nervous. | | | | | |
| **Practice Supervisor/Practice Assessor's Name:** Joe Black  **Signature:** J Black **Date:** 24/01/2020  **Student's Name:** Meriel Swann  **Signature:** M. Swann **Date:** 24/01/2020 | | | | | |
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| **Record of Working With and Learning From Others/Inter-professional Working** |

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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. |
| Today I worked with the ward physiotherapist. I was surprised because the role of a physiotherapist is extremely varied. The physio assessed the physical condition of a patient, to diagnose problems and implement a treatment plan. The physio also helped patients to walk, or helping others to cope with crutches, walking frames, or wheelchairs. I was interested to understand the physio is also responsible for educating their patients and their families. |
| **Student's Name:** Meriel Swann  **Signature:** M. Swann **Date:** 20th January 2020 |
| **Practice Supervisor's Comments:** Meriel was attentive and willing to learn about the role of a physiotherapist. Meriel demonstrated a kind and caring approach to the patients. |
| **Practice Supervisor's Name: J Black**  **Signature:** J Black **Date:** 20th January 2020 |
| **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. |
| Today I observed the pharmacist. It was interesting to see how they gave information to multidisciplinary health care team. The pharmacist also prepares medications by reviewing the prescription chart. |
| **Student's Name:** Meriel Swann  **Signature:** M. Swann **Date:** 17th February 2020 |
| **Practice Supervisor's Comments:** Meriel was attentive and willing to learn about the role of a pharmacist |
| **Practice Supervisor's Name:** J. Black  **Signature:**  J Black **Date:** 17th February 2020 |

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

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| **Record of Communication/Additional Feedback** |

These records can be completed by practice supervisors, practice assessors, academic assessors or any other members of the team involved in the supervision and/or assessment of the student.

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| **Communication/Additional Feedback** |
| Meriel administered medication for two patients under my direct supervision. She was able to systematically check the prescription chart thoroughly. Meriel has been practising her medicines calculations with my supervision. We worked together looking through the BNF and Meriel checked for allergies demonstrating an understanding of the risks and managing these.  We decided Meriel she will learn 5 commonly used medicines on the ward, Meriel will work towards improving her communication when offering support/advice/education to patients. |
| **Name:** M. White **Designation:** Staff Nurse  **Signature:** M White **Date:** 24th January 2020 |
| **Communication/Additional Feedback** |
| Meriel administered medication for three patients under my direct supervision. She was able to systematically check the prescription chart thoroughly. We worked together looking through the BNF and Meriel checked for allergies demonstrating an understanding of the risks and managing these.  Meriel is developing an understanding of the 5 commonly used medicines on the ward, Meriel’s communication skills are improving when she is offering support/advice/education to patients. |
| **Name:** M. White **Designation:** Staff Nurse  **Signature:** M White **Date:** 23 Feb 2020 |
| **Communication/Additional Feedback** |
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| **Name:**  **Designation:**  **Signature: Date:** |

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

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| **Placement 2** |

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| **Placement Provider:**  (e.g. Trust/Organisation)  **Name of Placement Area:** Theatres  **Type of Experience:** Specialised Department  (e.g. Community/Ward Based)  **Placement Telephone Number:** 0121 123 4567  **Placement Contact Email:**  **Start Date** : 27 April 2020.. **End Date** : 29th June 2020….. **No. of Hours** : 360 hours |

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| **Nominated Person to Support Student and Address Concerns**  **Name :** Nikita Low **Designation :** Practice Placement Manager  **Contact Email:** [n.low@nhshels.co.uk](mailto:n.low@nhshels.co.uk) |

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| **Practice Assessor Details:**  **Name :** Sam Day **Designation :** Staff Nurse  **Contact Email:** [s.day@nhshels.co.uk](mailto:s.day@nhshels.co.uk) |

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| **Academic Assessor Details** (for part) :  **Name :** Chris Beech **Designation :** Senior Lecturer  **Contact Email:** [Chris.Beech@ac.uk](mailto:Chris.Beech@ac.uk) |

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| **Placement 2: Orientation** |

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|  | **Ward 2 Surgery** | |
| **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)** |
| **The following criteria need to be met within the first day of placement** | | |
| A general orientation to the health and social care placement setting has been undertaken | MS 27/04/2020 | SG 27/04/2020 |
| The local fire procedures have been explained and  Telephone number provided. Tel: …………………… | MS 27/04/2020 | SG27/04/2020 |
| The student has been shown the:   * fire alarms * fire exits * fire extinguishers | MS 27/04/2020 | SG 27/04/2020 |
| Resuscitation policy and procedures have been explained and telephone number provided  Tel.: ……………………………….. | MS 27/04/2020 | SG 27/04/2020 |
| Resuscitation equipment has been shown and explained | MS 27/04/2020 | SG 27/04/2020 |
| The student knows how to summon help in the event of an emergency | MS 27/04/2020 | SG 27/04/2020 |
| The student is aware of where to find local policies:   * health and safety * incident reporting procedures * infection prevention and control * handling of messages and enquiries * other policies | MS 27/04/2020 | SG 27/04/2020 |
| The student has been made aware of information governance requirements | MS 27/04/2020 | SG 27/41/2020 |
| The shift times, meal times and reporting sickness and absence policies have been explained | MS 27/04/2020 | SG 27/04/2020 |
| The student is aware of their professional role in practice | MS 27/04/2020 | SG 27/04/2020 |
| Policy regarding safeguarding has been explained | MS 27/04/2020 | SG 27/04/2020 |
| The student is aware of the policy and process of raising concerns | MS 27/04/2020 | SG 27/04/2020 |
| Lone working policy has been explained *(if applicable)* | MS 27/04/2020 | SG27/04/2020 |
| Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed) | MS 27/04/2020 | SG 27/04/2020 |
| **The following criteria need to be met prior to use** | | |
| The student has been shown and given a demonstration of the moving and handling equipment used in the placement area | MS 27/04/2020 | SG 27/04/2020 |
| The student has been shown and given a demonstration of the medical devices used in the placement area | MS 27/04/2020 | SG 27/04/2020 |

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| **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.

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| **Placement Area Name: Ward 1 Surgical** | |
| **Student to identify learning and development needs** *(with guidance from the practice supervisor or practice assessor)* | |
| During this placement I would knowledge and skills in all aspects of the patient’s care focusing on the Admission of Patients, preparing patients for surgery, theatre and recovery and post operative care.  Personal Hygiene needs of patients and patient observations.  Medication Administration to complete my Medicine Administration Assessment.  Working with the multidisciplinary team  I feel I need to develop my confidence in my communication and interpersonal skills. Documentation and record keeping. | |
| **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?** |
| Work with members of the multidisciplinary team on the ward and in the theatre department.  Follow a patient’s journey through theatre, from admission to discharge.  Undertake medicines management assessment.  Undertake episode of care assessment | Meriel will have the opportunity to work with a range of practice supervisors and other staff on the ward and in theatre.  Assist supervisors and other staff with patients observations and personal care  Work with supervisors on medication administration round. Focus on developing knowledge of common medicines for this area in preparation for medicine administration assessment. |
| Learning plan for placement agreed by practice assessor *(where applicable)* : YES / NO  **Student's Name:** Meriel Swann  **Signature:** M. Swann **Date:** 27/04/2020  **Practice Supervisor/Assessor's Name:**  **Signature:** S Green **Date:** 27/04/2020 | |
| **Please complete the Midpoint Professional Values**  **Professional Values in Practice (Part 1)** | | | |

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)** |
| --- | --- | --- | --- | --- |
| **Prioritise People** | | | | |
| 1.The student maintains confidentiality in accordance with the NMC code. |  |  |  |  |
| 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 and advocates on their behalf. |  |  |  |  |
| 4.The student is caring, compassionate and sensitive to the needs of others. |  |  |  |  |
| 5.The student understands their professional responsibility in adopting and promoting a healthy lifestyle for the well-being of themselves and others. |  |  |  |  |
| **Practise Effectively** | | | | |
| 6.The student maintains consistent, safe and person-centred practice. |  |  |  |  |
| 7.The student is able to work effectively within the inter-disciplinary team with the intent of building professional relationships. |  |  |  |  |
| 8.The student makes a consistent effort to engage in the requisite standards of care and learning based on best available evidence. |  |  |  |  |
| **Preserve Safety** | | | | |
| 9.The student demonstrates openness (candour), trustworthiness and integrity. |  |  |  |  |
| 10.The student reports any concerns to the appropriate professional member of staff when appropriate, e.g. safeguarding. |  |  |  |  |
| 11.The student demonstrates the ability to listen, seeks clarification and carries out instructions safely. |  |  |  |  |
| 12.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. |  |  |  |  |
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| **Promote Professionalism and Trust** | | | | |
| 13.The student's personal presentation and dress code is in accordance with the local policy. |  |  |  |  |
| 14.The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement. |  |  |  |  |
| 15.The student demonstrates that they are self-aware and can recognise their own emotions and those of others in different situations. |  |  |  |  |
| **Mid-Point Assessment**  **Practice Supervisor's Name: Signature:**   **Date:**  **Reviewed and agreed by practice assessor**  **Practice Assessor's Name: Signature:**  **Date:** | | | | |
| **End Point: Student Reflection on meeting Professional Values** | | | | |
| **Choose one example from your practice on this placement to demonstrate how you practice within the NMC Code** *(ensure confidentiality is maintained).* For each placement, please select a different section of The Code to reflect on. | | | | |
| **Student Name:**    **Signature: Date:** | | | | |
| **Final Assessment** - [please add comments on Final Interview Page]  **Practice Assessor's Name:**  **Signature: Date:** | | | | |

**If there are any issues/areas for concern, these must be recorded. 'Not Achieved' must trigger an action plan. This must involve the practice supervisor and the practice assessor (as appropriate) in liaison with the nominated person / academic assessor (see page 8)**

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| **Placement 2: Mid-Point Interview** |

This discussion must take place half way through the placement.

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| **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:**  I have started to gain a better understanding of the assessment process. I am able to recognise alteration is the patient observation and if they are scoring on the NEWs chart I am able to raise my concerns to my supervisor or the nurse in charge. I need to keep expanding my medication knowledge through looking at the BNF and learning the common drugs use on placement but I am becoming more confident in drug administration. | | |
| **Skills:**  I feel that I have gained confidence in undertaking personal care and patient observation. I am developing my communication and interpersonal skills and I have been involved in patient handover. I feel by working and speaking with the MDT practitioners it has helped me to build up your confidence further. I have been involved in medicine administrations and I have also gained experience in admitting patients to the ward and in theatre. | | |
| **Attitudes and Values:**  I feel that I have shown a positive attitude during this placement and showed willing to learn and carry out tasks under supervisor. I feel more confident in looking after patients which I believe makes my patient centred care more reliable and calming for the patient. I feel that I am able to approach the patient with kindness and compassion. I am gaining confident although if I am not sure I will away seek advice. I feel that I have proven to be a trustworthy and reliable nursing student. | | |
| **Please complete the Midpoint Review**  **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.

|  |  |
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| **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*

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| **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

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| *Please answer the following questions relating to the student nurse* | | | | |
| **Q1. Did the student nurse talk to you?** | | | | |
| Yes | | | | |
| **Q2. Was the student nurse kind to you?** | | | | |
| Yes, very | | | | |
| **Q3. Did the student nurse listen to you?** | | | | |
| Yes, she was very helpful | | | | |
| **Colour in how many stars you would give the student nurse** | | | | |
|  | | | | |
|  |  |  |  |  |
| **Please use this space to draw a pitucre of the student nurse** | | | | |
| **Practice Supervisor/Practice Assessor's Name:**  **Signature: Sarah Green Date:** 23 May 2020  **Student's Name: Meriel Swann**  **Signature:** M. Swann **Date:** 23 May 2020 | | | | |

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| **Placement 2- Record of working with and learning from others/inter-professional working** |

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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. |
| Today I spent time with the anaesthetist. I observed how she ensured that general anaesthetic was safely administered to the patient and how she ensured that the patient was kept asleep and pain free throughout the operation. Afterwards she ensure the anaesthetic was reversed so the patient was woken up. She made sure that the patient had pain management medication (analgesia) prescribed for any pain after the operation. I did not realise how important the anaesthetist role was and how closely they work with the surgeon to ensure the patient is safe throughout the whole procedure. |
| **Student's Name:** Meriel Swann  **Signature:** M. Swann **Date:** 04/05/20202 |
| **Practice Supervisor's Comments:**  Meriel has taken on board some valuable aspects of team working whilst observing the anaesthetist today. She has been able to explain to me the key aspects of the role. She has also learnt a little about some of the medications used in theatre as anaesthetic agents and common analgesics. |
| **Practice Supervisor's Name:** Sarah Green  **Signature:** S. Green **Date:** 04/05/2020 |
| **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. |
| I spent time in theatre following a patient’s journey to theatre. I learnt how important the checklist that we complete on the ward is and how the patient’s safety is maintained by all the checks that are done in theatre before the patient has their operation. It was interesting to watch the operation and it has helped me understand the anatomy of the body a little more. The recovery aspect of the patients was interesting and especially how staff ensure the patient’s pain was addressed. Following this I am going to read up about ‘Never incidents’ as this was a term I was told about on my visit and how they can be prevented. I am also going to look at how to assess patient’s pain especially if they cannot communicate very well. |
| **Student's Name:** Meriel Swann  **Signature:** M. Swann **Date:** 20/05/2020 |
| **Practice Supervisor's Comments:**  Meriel has settled in well during her time with the theatres team. She has asked appropriate questions around safety checks and has been able to observe several different types of procedures. She has assisted with the recovery of patients and has taken on board the important aspects of theatre care. She has also developed her knowledge of infection prevention and control measure in theatres. |
| **Practice Supervisor's Name:** Sarah Green  **Signature: S. Green Date:** 20/05/2020 |

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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. |
| Today I shadowed the dietitian and watched how she assessed a lady’s nutritional needs. The lady had Alzheimer’s disease and was getting agitated about sitting down to eat and drink. The dietitian discussed with the lady and her family alternatives that could be tried to help improve dietary intake. She explained to me that due to the disease people can forget to eat and drink and also they may not sit still long enough to take adequate nutrition and hydration. By looking at alternatives such as food they can carry or finger foods this may help encourage the person to eat. I had never thought about the fact that people with dementia may not eat enough and suddenly realised that they would starve if we did not try to help intervene. I will certainly look out for instances where people with dementia may not be eating or drinking enough in the future. |
| **Student's Name:** Meriel Swann  **Signature:** M. Swann **Date: 2**2nd May 2020 |
| **Practice Supervisor's Comments:**  This has been a valuable learning opportunity for Meriel in relation to dietary needs. She has been very observant when documenting patient’s dietary intake since shadowing the dietitian. |
| **Practice Supervisor's Name:** Daniel Red  **Signature: Daniel Red Date: 2**2nd May 2020 |
| **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. |
| This morning I spent time with the speech and language team (known as SALT). The assessment I saw was for safety when swallowing food and drink. When people have advanced dementia they may have difficulty swallowing and aspirate. This is when the food or drink goes into their lungs and not down their oesophagus. I learnt that this can lead to an infection often called aspiration pneumonia. I realised it is very important to have an assessment carried out to make sure the person does not aspirate.  The SALT team can recommend that a person becomes nil by mouth or may liaise with the dietitian to have thicker foods provided to try to help avoid aspiration.  I will observe patients when they are eating and drinking and if there appears to be any problems then ask mentor whether they should be referred for a SALT assessment. |
| **Student's Name:** Meriel Swann  **Signature:** M. Swann **Date:** 29th May 2020 |
| **Practice Supervisor's Comments:**  Meriel has been proactive when observing our patients with advanced dementia and asking whether they have been or need to be referred to the SALT team. She has been able to explain to me why this is an important assessment and the consequences of not acting upon this information. |
| **Practice Supervisor's Name:** Daniel Red  **Signature: Daniel Red Date**: 29th May 2020 |

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

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| **Placement Area 2 - Record of Communication/Additional Feedback** |

These records can be completed by practice supervisors, practice assessors, academic assessors or any other members of the team involved in the supervision and/or assessment of the student.

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| **Communication/Additional Feedback** |
| Meriel confidence has developed when communicating with the patients. Meriel has been practising her medicines calculations with my supervision, she is able to safely perform accurate medicines calculations.  Meriel is clear at checking prescriptions thoroughly and also checks for patient allergies, by asking the patient and checking the prescription chart and identification band. Under direct supervision Meriel maintains accurate records. Meriel is able to offer patient further support and education. |
| **Name:** Daniel Red  **Designation:** staff nurse  **Signature: Daniel Red Date:** 20th May 2020 |
| **Communication/Additional Feedback** |
| Merial has been a keen student whilst with the team in theatres. She has maintained her professionalism at all times ensuring that she has been punctual, respected both patients and staff members. She was a little hesitate to ask questions to start with, I think due to this being a new area but as time went on she became more confident to ask.  She was very interested in how patients are assessed and how safety was maintained. We would be happy to have Meriel back. |
| **Name: Sarah Green Designation:** Staff Nurse  **Signature: S. Green Date:** 20/05/2020 |
| **Communication/Additional Feedback** |
|  |
| **Name: Designation:**  **Signature: Date:** |

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

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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.

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| **Part 1 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 achieve high quality person/family-centred care in an increasingly confident manner, ensuring all care is underpinned by effective communication skills. |

|  | **Assessment 1** | | **Assessment 2** | | **Assessment 3** | | **Assessment 4** | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Yes/No** | **Sign/Date** | **Yes/No** | **Sign/Date** | **Yes/No** | **Sign/Date** | **Yes/No** | **Sign/Date** |
| 1. Demonstrates and apply knowledge of commonly encountered presentations to inform a holistic nursing assessment including physical, psychological and socio-cultural needs. | Yes | L. Blue  09/03/2020 |  | S day  29/05/2020 |  |  |  |  |
| 2. Demonstrates understanding of a person's age and development in undertaking an accurate nursing assessment. | Yes | L. Blue  09/03/2020 | Yes | S day  29/05/2020 |  |  |  |  |
| 3. Accurately processes all information gathered during the assessment process to identify needs for fundamental nursing care and develop and document person-centred care plans. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 4. Work in partnership with people, families and carers to encourage shared decision-making to manage their own care when appropriate. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 5. Demonstrates an understanding of the importance of therapeutic relationships in providing an appropriate level of care to support people with mental health, behavioural, cognitive and learning challenges. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 6. Provides person-centred care to people experiencing symptoms such as anxiety, confusion, pain and breathlessness using verbal and non-verbal communication and appropriate use of open and closed questioning. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 7. Takes appropriate action in responding promptly to signs of deterioration or distress considering mental, physical, cognitive and behavioural health. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 8. Assesses comfort levels, rest and sleep patterns demonstrating understanding of the specific needs of the person being cared for. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 9. Maintains privacy and dignity in implementing care to promote rest, sleep and comfort and encourages independence where appropriate. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 10. Assesses skin and hygiene status and determines the need for intervention, making sure that the individual remains as independent as possible. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 11. Assists with washing, bathing, shaving and dressing and uses appropriate bed making techniques. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 12. Supports people with their diet and nutritional needs, taking cultural practices into account and uses appropriate aids to assist when needed. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 13. Can explain the signs and symptoms of dehydration of fluid retention and accurately records fluid intake and output. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 14. Assists with toileting, maintaining dignity and privacy and managing the use of appropriate aids including pans, bottles and commodes. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 15. Selects and uses continence and feminine hygiene products, for example, pads, sheaths and appliances as appropriate. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 16. Assesses the need for support in caring for people with reduced mobility and demonstrates understanding of the level of intervention needed to maintain safety and promote independence. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 17. Uses a range of appropriate moving and handling techniques and equipment to support people with impaired mobility. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 19. Identifies potential infection risks and responds appropriately using best practice guidelines and utilises personal protection equipment appropriately. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 20. Demonstrates understanding of safe decontamination and safe disposal of waste, laundry and sharps. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 21. Effectively uses manual techniques and electronic devices to take, record and interpret vital signs, and escalate as appropriate. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 22. Accurately measure weight and height, calculate body mass index and recognise healthy ranges and clinical significance of low/high readings. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 23. Collect and observe sputum, urine and stool specimens, undertaking routine analysis and interpreting finding. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 24. Accurately undertakes person-centred risk assessments proactively using a range of evidence based assessment and improvement tools. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 25. Applies the principles of health and safety regulations to maintain safe work and care environments and proactively responds to potential hazards. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 26. Demonstrates an understanding of the principles of partnership, collaboration and multi-agency working across all sectors of health and social care. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 27. Demonstrate an understanding of the challenges of providing safe nursing care for people with co-morbidities including physical, psychological and socio-cultural needs. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 28. Understand the principles and processes involved in supporting people and families so that they can maintain their independence as much as possible. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |
| 29. Provides accurate, clear, verbal, digital or written information when handing over care responsibilities to others. | Yes | L. Blue  09/03/2020 | Yes | S Day  29/05/2020 |  |  |  |  |

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| **Part 1 Episode of Care – Formative**   **(to support development & gain feedback)** |

This assessment must be completed by the end Part 1.

The Part 1 summative episode of care (final) assessment will be undertaken by the practice assessor.

**The practice supervisor/assessor and student will identify an appropriate episode of direct care involving meeting the needs of a person/family receiving 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:**

* Promoting health and preventing ill health
* Assessing needs and planning care
* Providing and evaluating care
* Improving safety and quality of care
* 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. Work in partnership with the person receiving care, their families and carers (where appropriate), can undertake an accurate assessment and provide evidence based, compassionate and safe nursing care.
2. Demonstrate understanding and can apply the relevant knowledge and skills to meet the individual's needs relating to dignity, comfort, hygiene and mobility.
3. Communicate effectively utilising appropriate verbal and non-verbal skills in the delivery of person-centred care decisions, taking into consideration the use of personal communication aids as appropriate.
4. Identify the impact of lifestyle choices on the individual's mental and physical health and wellbeing and demonstrates the principles of health promotion and preventing ill health.
5. Demonstrate that they have maintained professional values and demonstrates knowledge of safety and safeguarding for the person receiving care and the carers and/or family.

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| **Student Reflection on an Episode of Care** |

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| **Within your reflection, describe the episode of care and how you assessed, planned, delivered and evaluated person-centred care.** |
| During my shift I looked after a pre-operative patient. I completed the pre-operative assessment with my supervisor. I was able to assess and plan their individual needs relating to dignity, comfort, hygiene and mobility. I was able to communicate effectively using verbal and non-verbal skills. I took into consideration the patient had a hearing aid when preparing them for theatre.  I assessed and planned the patient’s medical, physical, psychological and spiritual needs before surgery. I helped co-ordinate care by liaising with the family to plan for the patients discharge home. I spent time with the patient and family talking about the impact of lifestyle choices on their mental and physical health and wellbeing, demonstrating the principles of health promotion and preventing ill health. |
| **What did you do well?** |
| I feel I explained the operation to the patient and family well. This offered an ideal opportunity to establish that the patient still wanted the operation to go ahead and that he fully understood why he was having the procedure. It also allowed the patient to understand the benefits and disadvantages of having the surgery; what will happen in hospital in terms of any drips, drains or pain control they may need; and details of the surgical procedure. |
| **What would you have done differently?** |
| I would like to improve my understanding of the role of the pharmacist in the first part of the pre-operative assessment, who gives advice on changing treatments or stopping medications, such as the contraceptive pill, aspirin and warfarin. |

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| **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) | | | |
| **Standard of Proficiency** | **Yes/No** | **Comments** | | |
| **Promoting health and preventing ill health**  Applies the principles of health promotion and improvement as appropriate when caring for the individual and their families. | Yes | Meriel has a growing understanding of the applied the principles of health promotion and improvement when caring for the individual and their families. | | |
| **Assessing needs and planning care**  Takes an accurate history and undertakes a person-centred assessment in order to plan effective care. | Yes | Meriel confidence is developing when taking an accurate history and undertaking a person-centred assessment in order to plan effective care. | | |
| **Providing and evaluating care**  Provides person-centred evidence-based care in managing dignity, comfort, hygiene and mobility needs of the individual. | Yes | Meriel provides a good standard of person-centred evidence-based care in managing dignity, comfort, hygiene and mobility needs of the individual. | | |
| **Improving safety and quality of care**  Undertakes relevant risk assessment (e.g. falls, skin integrity, mental capacity), that must be required and demonstrates an understanding of the difference between risk aversion and risk management. | Yes | Meriel ability to undertake relevant risk assessment is developing. She is demonstrating an understanding of the difference between risk aversion and risk management. | | |
| **Co-ordinating care**  Utilises a range of communication skills to effectively engage with the person receiving care, their family/carers and members of the multi-disciplinary team in the provision and evaluation of care. | Yes | Meriel uses a range of communication skills to effectively engage with the patients receiving care, their family/carers and members of the multi-disciplinary team in the provision and evaluation of care. | | |
| **Student's Name:** Meriel Swann  **Practice Assessor's Name:** L. Blue | | | **Signature:** M. Swann  **Signature:** L. Blue | **Date:** 17 Feb 2020  **Date:** 17/2/20 |

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| **Part 1 Episode of Care - Summative** |

This assessment must be completed by the end of Part 1 by the student's practice assessor during a specific episode of care.

**The practice assessor and student will identify an appropriate episode of direct care involving meeting the needs of a person/family receiving care. Professionalism underpins all aspects of the student's 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 of nursing:**

* Promoting health and preventing ill health
* Assessing needs and planning care
* Providing and evaluating care
* Improving safety and quality of care
* 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. Work in partnership with the person receiving care, their families and carers (where appropriate), can undertake an accurate assessment and provide evidence based, compassionate and safe nursing care.
2. Demonstrate understanding and can apply the relevant knowledge and skills to meet the individual's needs relating to dignity, comfort, hygiene and mobility.
3. Communicate effectively utilising appropriate verbal and non-verbal skills in the delivery of person-centred care decisions, taking into consideration the use of personal communication aids as appropriate.
4. Identify the impact of lifestyle choices on the individual's mental and physical health and wellbeing and demonstrates the principles of health promotion and preventing ill health.
5. Demonstrate that they have maintained professional values and demonstrates knowledge of safety and safeguarding for the person receiving care and the carers and/or family.

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| **Student Reflection on an Episode of Care** |

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| **Within your reflection, describe the episode of care and how you assessed, planned, delivered and evaluated person-centred care.** |
| During my shift I looked after a post-operative patient. I completed the post-operative assessment with my supervisor. I was able to assess and plan their individual needs relating to dignity, pain and comfort, surgical site, hygiene and mobility. I was able to communicate effectively using verbal and non-verbal skills.  I closely monitored the patient in order to identify early and prevent any complications from occurring. I recorded the patient’s blood pressure, breathing, temperature, and pulse. I also assessed the surgical site for signs of bleeding or infection. |
| **What did you do well?** |
| I feel I showed care and compassion. I talked to the patient explaining everything I did to help alleviate any fears and anxiety by maintaining a calm presence. I monitored and assessed the patient closely for any deterioration in condition, by implementing the patients post-operative care plan. I understand post-operative patients are at risk of clinical deterioration. It is important to read local policies to help reduce potential problems. The early warning score system are used to identify deteriorating patients. The early warning score are based on the patient’s pulse and respiratory rate, systolic blood pressure, temperature and level of consciousness. Additional monitoring may include pain assessment, capillary refill time, percentage of oxygen administered, oxygen saturation, central venous pressure, infusion rates and hourly urine output. |
| **What would you have done differently?** |
| I would like to feel more confident when a patient’s condition is identified as deteriorating, I plan to pass on this information verbally to my supervisor or nurse in charge by using the Situation, Background, Assessment and Recommendation (SBAR) tool. |

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| **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) | | | |
| **Standard of Proficiency** | **Yes/No** | **Comments** | | |
| **Promoting health and preventing ill health**  Applies the principles of health promotion and improvement as appropriate when caring for the individual and their families. | Yes | Meriel applies the principles of health promotion and improvement when caring for the individual and their families. | | |
| **Assessing needs and planning care**  Takes an accurate history and undertakes a person-centred assessment in order to plan effective care. | Yes | Meriel confidence has developed when taking an accurate history and undertaking a person-centred assessment in order to plan effective care. | | |
| **Providing and evaluating care**  Provides person-centred evidence based care in managing dignity, comfort, hygiene and mobility needs of the individual. | Yes | Meriel provides a good standard of person-centred evidence-based care in managing dignity, comfort, hygiene and mobility needs of the individual. | | |
| **Improving safety and quality of care**  Undertakes relevant risk assessment (e.g. falls, skin integrity, mental capacity), that must be required and demonstrates an understanding of the difference between risk aversion and risk management. | Yes | Meriel undertakes relevant risk assessment is developing. She has demonstrated an understanding of the difference between risk aversion and risk management. | | |
| **Co-ordinating care**  Utilises a range of communication skills to effectively engage with the person receiving care, their family/carers and members of the multi-disciplinary team in the provision and evaluation of care. | Yes | Meriel uses a range of communication skills to effectively engage with the patients receiving care, their family/carers and members of the multi-disciplinary team in the provision and evaluation of care. | | |
| **If any of the Standards are 'Not Achieve' this will require a re-assessment and the academic assessor must be informed.** | | | | |
| **Student's Name:** Meriel Swann  **Practice Assessor's Name:** S. Day | | | **Signature:** M. Swann  **Signature:** S. Day | **Date:** 24 May 2020  **Date:** 24/5/20 |

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| **Part 1 Medicines Management** |

This assessment must be completed by the end of Part 1 where the student safely administers medicines to a group of patients/service users or a caseload of patients/service users in any care settings.

During Part 1 the student should be developing their knowledge and skills in relation to the safe administration of medicines. This assessment should normally be undertaken with one or more patients/service users.

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 ensure students can perform safe administration of medicines under direct supervision.

**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 routine medications where necessary, safely and effectively administer these via common routes and maintains accurate records.
3. Safely and accurately perform medicines calculations.
4. Demonstrate that they have maintained appropriate professional values, expected attitudes and behaviours during the administration of medicines.
5. Maintain safety and safeguard the patient from harm, demonstrating understanding of the Mental Capacity Act (DH 2005) and the Mental Health Act (DH 1983, amended 2007), where appropriate.

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| **Part 1 Medicines Management** |

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| --- | --- |
| 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. | Yes |
| 1. Communicates appropriately with the patient/service user. Provides clear and accurate information and checks understanding. | Yes |
| 1. Understands safe storage of medications in the care environment. | Yes |
| 1. Maintains effective hygiene/infection control throughout. | Yes |
| 1. Checks prescriptions thoroughly:  * Right patient/service user * Right medication * Right time/date/valid period * Right dose/last dose * Right route/method * Special instructions | Yes |
| 1. Checks for allergies demonstrating an understanding of the risks and managing these as appropriate:  * Asks patient/service user * Checks prescription chart or identification band | Yes |
| 1. Prepares medications safely. Checks expiry date. Notes any special instructions/contraindications. | Yes |
| 1. Calculates doses accurately and safely:  * Demonstrates to assessor the component parts of the calculation * Minimum of three calculations undertaken | Yes |
| 1. Checks and confirms the patient/service user's identity and establishes consent. (ID band or other confirmation if in own home). | Yes |
| 1. Administers or supervises self-administration safely under direct supervision. Verifies that oral medication has been swallowed. | Yes |
| 1. Describes/demonstrates the procedure in the event of reduced capacity and non-adherence. | Yes |
| 1. Safely utilises and disposes of equipment. | Yes |
| 1. Maintains accurate records:  * Records, signs and dates where safely administered. | Yes |
| 1. Monitors effects and is aware of common side effects and how these are managed. | Yes |
| 1. Uses appropriate sources of information, e.g. British National Formulary. | Yes |
| 1. Offers patient/service user further support/advice/education, including discharge/ safe transfer where appropriate. | Yes |

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| **Practice Assessor's Feedback** | | |
| Meriel confidence has developed when communicating with the patients. She is able to provide clear and accurate information and checks the patients understanding. Meriel has a high standard of effective hygiene and infection control throughout the medication round. Meriel has been practising her medicines calculations with my supervision, she is able to safely perform the minimum of three accurate medicines calculations.  Meriel is clear at checking prescriptions thoroughly and also checks for patient allergies, demonstrating an understanding of the risks and managing these, by asking the patient and checking the prescription chart and identification band. Under direct supervision Meriel maintains accurate records. Meriel is able to offer patient further support and education, including discharge information. | | |
| **Student Reflection on Learning and Development** | | |
| I feel my confidence has grown during my placement when communicating with the patients. I am able to talk to patients and check their understanding. I feel it is really important to demonstrate a high standard of hand hygiene and infection control throughout the medication round. I have been practising medicines calculations with my Assessor and I am now able to safely perform accurate medicines calculations.  I am able to check the prescription chart thoroughly and also check for patient allergies. I feel I am able to understand the risks and how to manage these, by asking the patient and checking the prescription chart and identification band. I feel more confident completing records and offering patients further support and education about their discharge arrangements to go home.  Learning the 5 commonly used medicines on the ward has helped my confidence and development on the ward. | | |
| **Student's Name:** Meriel Swann  **Practice Assessor's Name:** S. Day | **Signature:** M. Swann  **Signature:** S. Day | **Date :** 13 June 2020  **Date :** 13/6/20 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| |  |  |  | | --- | --- | --- | | **Name** | Josh Atkins |  | | **Number** | 1010098 | | **Cohort** | Year 2 | | **Field** | Mental Health | |  | | | |  | This section is for use with case study 2 |

**PRACTICE ASSESSMENT DOCUMENT**

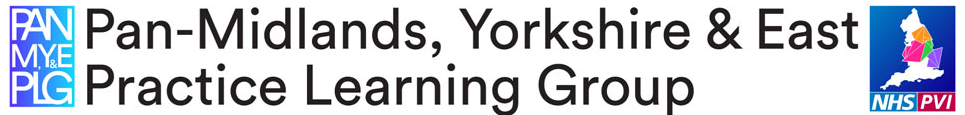
**NURSING**

**PART 2**

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).



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

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| **Criteria for Assessment in Practice**  **Overall Framework Parts 1 - 3 to be achieved by the end of the part** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Guided participation in care and performing with increasing confidence and competence |  | Active participation in care with minimal guidance and performing with increased confidence and competence |  | Practising independently with minimal supervision and leading and coordinating care with confidence |

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|  | Part 1 |  | Part 2 |  | Part 3 |  |

*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 2: Active participation in care with minimal guidance and performing with minimal guidance and with increased confidence and competence**

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

|  |  |  |  |
| --- | --- | --- | --- |
| **Achieved** | **Knowledge** | **Skills** | **Attitude and Values** |
| **Yes** | Has a sound knowledge base to support safe and effective practice and provide the rationale to support decision making. | Utilises a range of skills to deliver safe, person centred and evidence based care with increased confidence and in a range of contexts. | Demonstrates an understanding of professional roles and responsibilities within the multidisciplinary team. Maximises opportunities to extend own knowledge. |
| **No** | Has a superficial knowledge base and is unable to provide a rationale for care, demonstrating unsafe practice. | With supervision is not able to demonstrate safe practice and is unable to perform the activity and/or follow instructions despite repeated guidance. | Demonstrates lack of self-awareness and understanding of professional role and responsibilities. Is not asking appropriate questions nor engaged with their own learning. |

Please complete the Professional Values

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| **Professional Values in Practice (Part 2)** |

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)** |
| --- | --- | --- | --- | --- |
| **Prioritise People** | | | | |
| 1.The student maintains confidentiality in accordance with the NMC code. |  |  |  |  |
| 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 and advocates on their behalf. |  |  |  |  |
| 4.The student is caring, compassionate and sensitive to the needs of others. |  |  |  |  |
| 5.The student understands their professional responsibility in adopting and promoting a healthy lifestyle for the well-being of themselves and others. |  |  |  |  |
| **Practise Effectively** | | | | |
| 6.The student maintains consistent, safe and person-centred practice based on best available evidence. |  |  |  |  |
| 7.The student manages appropriate and constructive relationships within the inter-disciplinary team with the intent of building 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 the potential to lead and work autonomously, seeks support where appropriate and responds positively to feedback. |  |  |  |  |
| **Preserve Safety** | | | | |
| 10.The student demonstrates openness (candour), trustworthiness and integrity. |  |  |  |  |
| 11.The student reports any concerns to a member of staff when appropriate, 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. |  |  |  |  |
| **Promote Professionalism and Trust** | | | | |
| 14.The student's personal presentation and dress code is in accordance with the local policy. |  |  |  |  |
| 15.The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement. |  |  |  |  |
| 16.The student demonstrates that they use self-reflection and supervision to gain insight into their own values, taking into consideration the possible impact on the caring relationship and decision making process. |  |  |  |  |
| **Mid-Point Assessment**  **Practice Supervisor's Name: Signature: Date:**  **Reviewed and agreed by Practice Assessor**  **Practice Assessor's Name: Signature: Date:** | | | | |
| **End Point: Student Reflection on meeting Professional Values** | | | | |
| **Choose one example from your practice on this placement to demonstrate how you practice within the NMC Code of Conduct** *(ensure confidentiality is maintained).* For each placement, please select a different section of The Code to reflect on. | | | | |
| **Student Name:**  **Signature: Date:** | | | | |
| **Final Assessment** - [please add comments on Final Interview Page]  **Practice Assessor's Name:**  **Signature: Date:** | | | | |

If there are any issues/areas for concern, these must be recorded. 'Not Achieved' must trigger an action plan. This must involve the practice supervisor and the practice assessor (as appropriate) in liaison with the academic assessor.

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| **Name** | Rachel Coupe |  | This section is for use with case study 3 |
| **Number** | 297200 |
| **Cohort** | Year 3 |
| **Field** | Adult |
|  | | |

**PRACTICE ASSESSMENT DOCUMENT**

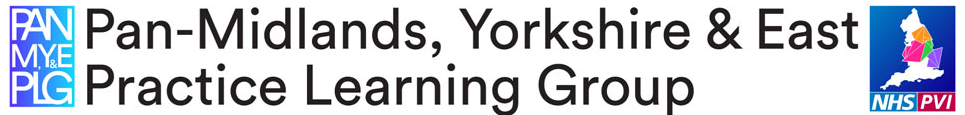
**NURSING**

**PART 3**

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

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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

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| **Criteria for Assessment in Practice**  **Overall Framework Parts 1 - 3 to be achieved by the end of the part** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Guided participation in care and performing with increasing confidence and competence |  | Active participation in care with minimal guidance and performing with increased confidence and competence |  | Practising independently with minimal supervision and leading and coordinating care with confidence |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Part 1 |  | Part 2 |  | Part 3 |  |

*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** |
| **Yes** | 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. |
| **No** | 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. |

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| **Placement 2: Mid-Point Interview** |

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| **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:**  I feel that I am progressing well and have achieved some of my NMC proficiencies during this placement.  I still feel that I need to improve in aspects of drug administration; knowledge of how drugs work and injection technique, but I am motivated and willing to learn. |
| **Skills:**  I find my time management challenging and sometimes find it difficult to get my work completed on time and get flustered when there are lots of things happening or need to be done; I also feel very nervous during handover; I think I will get more organised with more experience. |
| **Attitudes and Values:**  I feel that I am kind and caring and I have received positive feedback from patients. I am professional at all time. I always attend placement on time and wear my uniform. |
| **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:**  Rachel is progressing slowly. She is motivated and trying well. She is now aware of emergency procedures and where we keep equipment on the ward. |
| **Skills:**  Rachel has made some good progress in achieving several of her proficiencies however we have identified some areas for development and developed an action plan to support Rachel to progress. |
| **Attitudes and Values:**  Rachel has received some good user carer feedback; she is always punctual and professionally presented. |

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| **Placement 2: Mid-Point Review** |

This discussion must take place half way through the placement.

**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?** |
| General knowledge of medication and injection technique. In particular Rachel is not able to identify common drugs used in surgery and has found it difficult to draw up injections as she hasn’t developed the dexterity required, and is very nervous when giving injections to patients.  Organisational and time management skills. In particular Rachel sometimes finds it difficult to get work completed on time and gets flustered when there are lots of things happening or need to be done, as a result she struggles to prioritise care when caring for a small group of patients.  Confidence in verbally communicating clear patient progress to members of the team. In particular Rachel is very nervous during nursing handovers and finds it challenging to be able to report clear patient progress to members of the team, as a result she sometimes omits essential information about patients. | To meet the required level of competence for the above learning outcomes, Rachel requires more practice with medicines management, organisational, time management and communication skills.  We have developed and agreed action plans to address these areas. |
| **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.*

Please complete the Action Plan

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| **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.

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| --- | --- | --- | --- | --- | --- | --- |
| **Placement Name :** |  | | | **Date Action Plan Initiated :** | |  |
| **Nature of Concern**  **Refer to Professional Value(s). Proficiency and/or Episode of Care** (**S**pecific) | | **What Does the Student Need to Demonstrate?**  *Objectives and measures of success*  (**M**easurable, **A**chievable and **R**ealistic) | | **Support Available and Who Is Responsible** | | **Date for Review**  (**T**imed) |
|  | |  | |  | |
|  | |  | |  | |  |
| **Student's Name :**  **Practice Assessor's Name :**  **Academic Assessor's Name:** | | | **Signature :**  **Signature :**  **Signature :** | | **Date :**  **Date :**  **Date :** | |
| **Review/Feedback** | | | | | | |
| **Have the objectives been achieved? YES/NO**  **Comments:**  **Practice Assessor Name: Signature: Date:** | | | | | | |

END OF MYEPAD

**Activity 9: case study**

Having worked through the case studies, please use this space for any further additional notes/reflections on the activity.

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**Activity 10: Support for Practice Assessors**

As a practice assessor you will be able to access support when you require it from the academic assessor assigned to your student, and also from staff within your organisation who support supervisors and assessors.

Make sure you take some time to check with your colleagues who is available in your organisation to support you in your role as a practice assessor.

**Activity 11 (Optional) Supporting Learning Needs.**

If you have chosen to review the learning content for this optional activity then reflect on the following;

* Please think about yourself as a learner, what are you feeling or thinking if you were asked whether you have a disability? If you do, would you be happy to disclose this?
* Now think about the role you will have as a practice assessor, what you may be feeling or thinking when asking a student, you are supporting, whether they may have a disability?
* As a practice assessor, what would be your role and responsibility to a student (who has declared a disability) in terms of patient care delivery, patient safety, working within your organisation and to the standards of the Code (NMC, 2018)?
* Would you know when to seek assistance in supporting a student with a disability and whom to refer to?

**Activity 12: Reviewing the Learning Outcomes.**

Having read the learning outcomes again make any notes here on your achievement of these outcomes:

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**Completion:**

Complete the certificate on the next page and return **the certificate only** to your register holder.

Contact details for your organisation will be found in the workbook.



This certificate confirms that

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
from

Workplace (ward / dep’t / team) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name / location of organisation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has prepared for the role of a practice assessor, aligned to the NMC Standards for student supervision and assessment (NMC 2018) through completion of an online workbook.

By submitting this certificate they confirm they have met the following learning outcomes:

1. Enhanced their understanding of the NMC Standards for Student Supervision and Assessment and the inter-relationship between the 3 roles of Practice Supervisor, Practice Assessor and Academic Assessor.

2. Recognised key elements of an effective practice based assessment process from the perspective of the practice assessor role

3. Demonstrated knowledge of the assessment process and assessment document, with specific reference to the practice assessors role, responsibility and accountability in protecting the public.

4. Identified local support mechanisms available to the practice assessor to enable them to develop emotional resilience and personal support strategies for this role.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_