

**NURSING**

**Guide to using the PAD**

**BSc (Hons) Nursing (all Fields)**

NMC (2018) Future Nurse: Standards of proficiency for registered nurses

This PAD Guide is based on the PLPAD guide

**Completing the Practice Assessment Document**

|  |  |
| --- | --- |
| **Contents** | **Page number** |
| Introduction | 3-5 |
| Practice learning process | 6 |
| Criteria for assessment in practice | 7 |
| Criteria for assessment in practice – overall framework Parts 1 – 3 | 8 |
| Student responsibilities | 10 |
| Practice Supervisor responsibilities | 11 |
| Practice Assessor responsibilities | 12 |
| Academic Assessor responsibilities | 13 |
| Document signatories and checklist for assessed documents | 14 |
| Orientation | 15 |
| Initial, mid-point and final interview | 16 |
| Professional values | 17 |
| Patient/Service User/Carer Feedback Form | 18 |
| Record of working with and learning from others/inter-professional working | 19 |
| Record of communication and additional feedback | 20 |
| Record of peer feedback – Part 2 and Part 3 only | 21 |
| Proficiencies | 22 |
| Episode of care | 23 |
| Medicines Management | 24 |
| Action plan | 25 |
| Record of practice hours | 26 |
| Ongoing achievement record (OAR) | 27 |
| How does the PAD relate to different fields of practice? | 29-32 |

# Introduction

The purpose of this guide is to provide guidance for the completion of the BSc (Hons) Nursing (all fields of practice) MYE PAD V2 with general guidelines provided for each element within the PAD.

The MYE PAD 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). It has been developed to ensure that student nurses are prepared to successfully meet the NMC (2018) *Future Nurse: Standards of proficiency for registered nurses* at the point of registration. The NMC standards specify the knowledge and skills that Registered Nurses must demonstrate when caring for people of all ages and across all care settings and comprise seven platforms and two annexes. The role of the Nurse in the 21st century is to provide care for people who have complex mental, physical, cognitive and behavioural care needs across a range of settings including people’s own homes, in the community or hospital or any health care setting.

The platforms are:

1. Being an accountable professional
2. Promoting health and preventing ill health
3. Assessing needs and planning care
4. Providing and evaluating care
5. Leading and managing nursing care and working in teams
6. Improving safety and quality of care
7. Coordinating care

Annexe A: Communication and relationship management skills Annexe B: Nursing procedures

The outcome statements within the standards of proficiency apply across all fields of nursing practice (Adult, Children and Mental Health) and all care settings as Registered Nurses must be able to meet the person-centred, holistic needs of the people they encounter in their practice who may be at any stage of their life and who may have a range of mental, physical, cognitive or behavioural health challenges.

The annexes within the standards of proficiency also apply across all fields and demonstrate what Registered Nurses should be able to demonstrate at the point of Registration. *The level of expertise and knowledge required for both annexes will vary dependent on the chosen field(s) of practice. Registered Nurses must be able to demonstrate the ability to undertake these skills and procedures at an appropriate level for their intended field of practice.*

Practice Supervisors, Practice Assessors and Academic Assessors have an important role in supporting and guiding the student through their learning experience. This includes facilitating any reasonable adjustments the student may require to achieve the maximum benefit from the placement. Descriptions of these roles can be found within this guide.

As well as undertaking the required assessments, the role of the Practice Supervisor and Practice Assessor also includes identifying relevant learning opportunities and creating learning and development plans with the student.

The PAD’s has been designed around the following Components of Assessment and Feedback:

* + Initial, Mid-Point and Final Interviews per placement
  + Professional Values
  + Proficiencies
  + Episode(s) of Care
  + Medicines Management
  + Patient/Service User/Carer Feedback Form
  + Record of working with and learning from others/inter-professional working
  + Record of communication/additional feedback
  + Record of peer feedback – Parts 2 & 3
  + Ongoing Achievement Record

|  |  |
| --- | --- |
| 2D_colour_72dpi**Three Counties School of Nursing and midwifery** | **practice learning process** |

|  |  |
| --- | --- |
| **Prior to placement**   * Placement allocation uploaded to SOLE – please locate contact details in the SOLE placement directory. You will normally have 2 placements per year (Part) * Contact placement a minimum of 2 weeks prior to the start date | |
|  | |
| **Placement One**   * Induction within 2 days * Initial interview held during first week of placement with PS and/or PA – identify learning opportunities and learning needs/reasonable adjustments * PS/PA/AA details to be provided in the document * Student to sign declaration form * Date of mid-point interview agreed * PS provides ongoing support and feedback. Raises concerns if necessary | **Placement Two**   * Induction within 2 days * Initial interview held during first week of placement with PS and/or PA – identify learning opportunities and learning needs/ reasonable adjustments * PS/PA/AA details to be provided in the document * Date of mid-point interview agreed * PS provides ongoing support and feedback. Raises concerns if necessary |
|  | |
| **Mid-point interview**   * Completed between student and PA (PS can sign mid-point professional values) * PA gathers feedback from PS and others * Overall progression and achievement to date – knowledge, skills and attitude/values * If concerns exist and/or an action plan is required, AA and PF notified – by email, phone call, e-pad * Date for final interview agreed * Zoned academic (ZA) will visit all students during year one and during year 2 and 3 will visit if support requested. They may complete additional visits at the request of the AA. | **Mid-point interview**   * Completed between student and PA (PS can sign mid-point professional values) * PA gathers feedback from PS and others * Overall progression and achievement to date – knowledge, skills and attitude/values * If concerns exist and/or an action plan is required, AA and PF notified – by email, phone call, e-pad * Date for final interview agreed * Zoned academic (ZA) will visit all students during year one and during year 2 and 3 will visit if support requested. They may complete additional visits at the request of the AA. |
|  | |
| **Final Interview (formative)**   * PA gains feedback from PS * Prior to interview PA and AA will discuss student progress – by email, phone call, e-pad. AA may attend final interview if PA requests (ZA may represent AA if required) * Completed between student and PA * Placement hours recorded * All sections in PAD and OAR completed and signed * Confirmation that student is making satisfactory progress, if not a supportive action plan will be put in place to support progression to placement 2 | **Final Interview (summative)**   * PA gathers feedback from PS * Prior to interview PA and AA will discuss student progress – by email, phone call, e-pad. AA may attend final interview if PA requests (ZA may represent AA if required) * Completed between student and PA * Placement hours recorded * All sections in PAD and OAR completed and signed * Confirmation that the student has achieved all requirements for the Part (Year) |
|  | |
| **End of Placement Two**  **Submission of PAD and OAR is completed electronically by date identified in practice learning module outline**  Module lead records pass/fail and arranges moderation of the PADs with the module team and practice partners and arranges for external examiner to moderate PADs. Moderation reports completed | |
|  | |
| **Pass**   * AA completes OAR confirming progression and achievement following disucussion with PA - by email, phone call, e-pad * Where students have passed placement, but are still required to complete placement hours – arrangments to achieve these hours will be made by the practice panel | **Fail**   * AA completes OAR * Referred to Practice Panel – reviews practice fail to confirm process followed, review claims for mitigation and decide reassessment – attended by AA and PA (or representative). Reassessment placement arrangements made and confirmed in writing to the student * Where fail due to persistent non-achievement of professional values, student may be referred to fitness to practice processes |
|  | |
| **Examinarion board**  Ratifies proggression for students who have sucessfully passed the Part (Year) of the programme  Ratifies fails – students allowed one reassessment attempt of 4 weeks (min) – fail at reassessment unless mitigation exists will result in the student being withdrawn from their studies | |

|  |  |
| --- | --- |
| Three Counties School of Nursing and Midwifery | PRACTICE SUPERVIORS & PRACTICE ASSESSORS:‘SPEAKING UP’MANAGING STUDENT ISSUES IN PRACTICE |

***Please note:*** *This process does not replace normal processes for supporting students on placement or the usual assessment of practice documentation of student progress*

|  |  |  |
| --- | --- | --- |
| **Practice Supervisor/Practice Assessor has general query relating to student learning or personal** **development. Including learning difficulty or disability** |  | Contact Practice Facilitator/Educator for support/ referral to appropriate support services. Practice Facilitator/Educator contact Programme team as required.  Where serious concerns exist about student support for their learning please complete - ***Cause for concern form completed.*** |

|  |  |  |
| --- | --- | --- |
| **Practice Supervisor/Practice Assessor/Other member of placement team or fellow student has a concern about a student’s welfare, including safeguarding issues, bullying/harassment, mental or physical health concerns** |  | Contact Practice Facilitator/Educator – who will contact the programme team: Programme lead and Academic Assessor.  ***Cause for concern form completed.*** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Student reports a concern to Practice Supervisor/Practice Assessor/midwife/ nurse in charge about observed aspects of care/conduct** |  | Practice Supervisor/Practice Assessor/Nurse/  Midwife in charge to discuss concern with student |  | For serious unresolved incidents, Practice Supervisor/Practice Assessor/Nurse/Midwife to inform Practice Facilitator/Educator who will liaise with University of Worcester.  Student to be supported by the University to write any statement regarding incidents  ***Cause for concern form completed.*** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Serious concern about student performance or conduct that breaches professional codes of conduct** |  | Practice Supervisor/Practice Assessor/Nurse/Midwife in Charge suspends placement pending an investigation |  | Practice Supervisor/Practice Assessor/Nurse/ Midwife in Charge to notify Practice Facilitator/Educator. If Practice Facilitator/Educator unavailable to speak please contact Work Based Learning Support Office (WBLSO) on (01905 855375) or email: practice@worc.ac.uk  ***Cause for concern form completed.*** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Student fails to attend practice and has not reported absence/ sickness to placement** |  | Placement informs WBLSO and Practice Facilitator/Educator |  | WBLSO contact student and feedback to placement.  Prolonged unreported absence – ***Cause for concern form completed.*** |

|  |  |
| --- | --- |
| **Three Counties School of Nursing and Midwifery** | **NURSING, NURSING ASSOCIATE AND MIDWIFERY STUDENTS:**  **‘SPEAKING UP’**  **RAISING CONCERNS IN PRACTICE** |

*As a student on a professional programme you have a responsibility to highlight concerns you have about standards of clinical practice including unsafe practice*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **You have a concern that may impact on your progress & / or you feel you need additional support in placement including support for a learning difficulty or disability** |  | Discuss with Practice Supervisor/Practice Assessor/Nurse Midwife / in Charge.  If unresolved, contact Practice Facilitator/Educator.  Allow 3 days for Practice Facilitator/Educator to respond. |  | If no response after 3 days:  **Nursing & Nursing Associate students** contact programme team via email at **practice@worc.ac.uk**  **Midwifery students** contact your personal academic tutor.  ***A cause for concern form may be completed to document your concerns.*** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **You observe a serious incident / have a concern about an aspect of patient care or have an accident in practice** |  | Discuss with Practice Supervisor/Practice Assessor/Nurse Midwife / in Charge.  Inform Practice Facilitator/Educator. |  | If unresolved or it is inappropriate to discuss with Practice Supervisor/Practice Assessor/Nurse Midwife / in Charge - Inform Practice Facilitator/Educator & for **Nursing and Nursing Associate** students email practice@worc.ac.uk  **Midwifery students** contact your personal academic tutor  ***A cause for concern form will be completed.*** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **You are asked to make or write a statement about an incident/event in practice** |  | Before statement is made: **Nursing & Nursing Associate students** contact programme team via email at practice@worc.ac.uk  **Midwifery students** contact your personal academic tutor |  | Programme team / personal academic tutor will inform Practice Facilitator/Educator and your Academic Assessor.  Support will be provided by the University to write any statement regarding incidents.  ***A cause for concern form completed will be completed.*** |

|  |  |  |
| --- | --- | --- |
| **You have concerns about a student’s welfare, including safeguarding issues, bullying/harassment, mental or physical health concerns** |  | Contact Practice Facilitator/Educator – who will contact the programme team: Programme lead and Academic Assessor.  ***A cause for concern form will be completed will be completed.*** |

# 

|  |  |
| --- | --- |
| **Three Counties School of Nursing and Midwifery** | **ADVICE NOTES** |

**Practice Facilitator/Educator:** refers to generic term for practice facilitator, clinical educator, practice educator, practice education facilitator, practice placement manager – each setting has an identified **Practice Facilitator/Educator**, who is the **nominated person** to offer support and guidance to students. Details of the placements nominated **Practice Facilitator/Educator** are available on your ARC placement details.

**Worcestershire Acute Hospitals NHS Trust**:

Direct Line PF Team: 01905 760472. Team mobile 07764 921542

Tel: Ext. 36767, Tel: Ext. 36719, Tel: Ext. 36769

Midwifery: Tel: Ext. 36768

**Worcestershire Health and Care NHS Trust**

Tel: 07423452914, Tel:07803437907

Email: [WHCNHS.practicefacilitators@nhs.net](mailto:WHCNHS.practicefacilitators@nhs.net)

**Wye Valley NHS Trust**

Tel: 01432 383307

Midwifery: Tel: 01432383360 ext: 3360

Email: [Practice.Educators@wvt.nhs.uk](mailto:Practice.Educators@wvt.nhs.uk)

**2gether NHS Foundation Trust**

Chris Betteridge: [chris.betteridge@nhs.net](mailto:chris.betteridge@nhs.net) Tel: 07825 430118

**Herefordshire and Worcestershire Partnership–Nursing Associate Apprentices**

[whcnhs.nursingassociate@nhs.net](mailto:whcnhs.nursingassociate@nhs.net)

**Independent Sector**

Sarah Weaver: [s.weaver@worc.ac.uk](mailto:s.weaver@worc.ac.uk) Tel: 01905543029

**Gloucestershire Hospitals NHS Foundation Trust**

Asha Dhany: [asha.dhany@nhs.net](mailto:asha.dhany@nhs.net) Tel: 0300 4225527

Deborah Slade: [d.slade@nhs.net](mailto:d.slade@nhs.net) Tel: 0300 4226102

Sian Harrington: [sian.harrington@nhs.net](mailto:sian.harrington@nhs.net)

**Dudley Hospitals NHS Foundation Trust**

Bobby Pujeh [el.pujeh@nhs.net](mailto:el.pujeh@nhs.net)

Kerri-Ann Bradley [kerri-ann.bradley@nhs.net](mailto:kerri-ann.bradley@nhs.net)

**Nursing/Nursing Associate programme team:**

[Practice@worc.ac.uk](mailto:Practice@worc.ac.uk) Emails to this address are received by: Programme leads, Deputy Programme/cohort leads. Your concern or request for support will be responded to within 1 working day and may be forwarded to the most suitable party e.g. for concerns or request for support with learning difficulty or disability, your concern or request would be forwarded to Firstpoint, they may also contact your Academic Assessor.

**Midwifery students**:

Contact your personal academic tutor, who will forward your concern or request for additional support to the most appropriate person e.g. your programme lead or Academic Assessor.

**WBLSO**:

Work Based Learning Support Office, University of Worcester.

WBLSO office hours Monday‐ Friday 9am‐ 4.30pm (do not telephone at weekends/ bank holidays).

Tel: 01905 855375. Outside office hours email: [wblso@worc.ac.uk.](mailto:wblso@worc.ac.uk)

Emails will be responded to within 1 working day

**Where a serious concern is reported to WBLSO** they will contact the student to request further details and acknowledge the serious concern. WBLSO will contact the Practice Facilitator/Educator who will liaise with mentor/ charge nurse. WBLSO will also contact Nursing, Nursing Associate or Midwifery Programme Lead/ team who will liaise with student, Practice Facilitator/Educator and Academic Assessor as necessary.

# Criteria for Assessment in Practice

Within the PAD three key statements have been developed to reflect the level of performance that the student is required to demonstrate at the end of each Part, as well as the level of assistance that may be required at each stage where the student by the end of the Part is practising independently, competently and confidently.

BSc (Hons) Nursing (all fields of Practice): The following three levels of performance are to be met by the end of each Part

|  |  |
| --- | --- |
| **By the end of Part 1** | Guided participation in care and performing with increasing confidence and competence |
| **By the end of Part 2** | Active participation in care with minimal guidance and performing with increased confidence and competence |
| **By the end of Part 3** | Practising independently with minimal supervision and leading and co-ordinating care with  confidence |

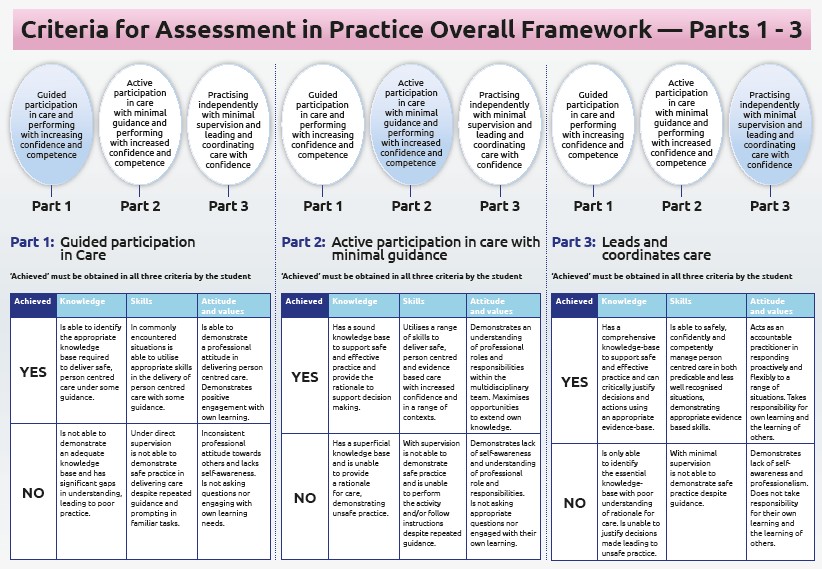
In addition to achieving the required level of performance at the end of the Part the student is assessed against a specified set of criteria related to knowledge, skills, attitudes and values for each component of assessment within the PAD. These criteria are used to assess the student on different placements across the year as they work towards the overall performance level to be achieved by the end of the Part. For details of the criteria in each Part refer to Table 1&2.

If the student’s performance gives cause for concern at the mid-point interview or at any point during the experience feedback must be given and an action plan written to enable the student to address this prior to the final interview. The Practice Assessor must communicate with and involve the Academic Assessor in this process.

# Statement regarding the use of the term “Parts”

For BSc (Hons) Nursing (all fields) there are three PADs, which incorporate the range of NMC (2018) Standards of proficiency for Nursing. A Part for the programme equates to a year. With Part 1=Level 4/Year 1, Part 2=Level 5/Year 2 & Part 3= Level 6/Year 3

# Table 1: Criteria for Assessment in Practice Overall Framework Parts 1 – 3: BSc Nursing (all fields)



|  |  |
| --- | --- |
| **Student Responsibilities** | |
| You should take responsibility for your own learning and know how to access support and;   * Engage positively with all learning opportunities * Understand the assessment requirements * Work with and receive written feedback from a range of staff (including identified Practice Supervisors) and Service-Users * Reflect on your own learning * Provide feedback on learning experience * Sign the student conduct declaration (once per Part)   **FAQs**  **Q: When should I contact my allocated placement?**  **A:** It is advisable to contact your allocated placement in advance of starting your placement to obtain the information you need to enable you to prepare.  **Q: Will I have a named contact on placement?**  **A:** You will have a nominated person to support you and address any concerns. This will be a member of the Practice Education team linked to the setting, with details provided in the SOLE Placement Directory.  **Q: Who will supervise me on placement?**  **A:** You will be supported by a number of Practice Supervisors who will support your learning and can contribute to assessment.  **Q: Who will assess me on placement?**  **A:** You will have a nominated Practice Assessor for your placement, who is responsible for assessing and confirming proficiency and achievement. The Practice Assessor will liaise with the Practice Supervisor and Academic Assessor to obtain feedback on your progress.  **Q: Will there be support from the University when on placement? A**: You will have a named Academic Assessor for each Part of the programme. The Academic Assessor will liaise with your Practice  Assessor. If you have any concerns on placement you should raise these with the university as soon as possible. Each setting also has a Zoned Academic attached to it, who will visit all students in Part 1, and attend as requested in Part 2 (and Part 3 Nursing only) and will be involved if an action plan is required. |  |

|  |  |
| --- | --- |
| **Practice Supervisor Responsibilities** | |
| Practice Supervisors (PS) are Registered Nurses, Nursing Associates or Midwives or Registered health or social care professionals. They have current knowledge and experience and are appropriately prepared for the role;   * Ensures learning opportunities are facilitated * Contributes to assessment and records regular feedback * Seeks feedback from other supervisors   **FAQs**  **Q: What is my role in supporting the student?**  **A:** You have responsibilities for overseeing the student’s progress during the placement. You will undertake the initial interview in the placement with the student which includes supporting the student to identify their learning opportunities and completion of the learning plan.  **Q: What is my role in assessing the student?**  **A:** The Practice Assessor has responsibility for student assessment. Practice Supervisors have an important role in contributing to assessment and giving regular feedback and the following can be undertaken by the Practice Supervisor to contribute to the student’s assessment;   * Initial interview on placement * Professional Values at midpoint interview * Proficiencies as appropriate and relevant to your scope of practice and professional role   **Q: What is my relationship with other identified roles?**  **A:** You will record feedback on the student’s progress and liaise with other Practice Supervisors and the Practice Assessor to give feedback to inform the Practice Assessor’s decisions.  **Q: What if I am not a registered nurse and supervising the student? A:** A range of Registered health or social care professionals can support and supervise student learning and contribute to the student’s assessment within their scope of practice. |  |

|  |  |
| --- | --- |
| **Practice Assessor Responsibilities** | |
| Practice Assessors (PA) are Registered Nurses (for student nurses) with current knowledge and expertise and are appropriately prepared for the role;   * Conducts assessments, informed by feedback from Practice Supervisors * Makes and records objective decisions, drawing on records, observations, student reflection and other resources * Periodically observes the student * Gathers and coordinates feedback from Practice Supervisors and other relevant people * Schedules communication with Academic Assessors at relevant points   **FAQs**  **Q: What is my role in assessing the student?**  **A:** You have responsibility for student assessment and will liaise with the PS to obtain feedback and Academic Assessors to discuss student achievement and progression. You will review assessment documentation in the PAD that has been completed by a range of other health or social care professionals who have contributed to aspects of assessment.  **Q: What specific elements do I need to assess and document? A:** The Practice Assessor assesses;  **On each placement:**   * Initial interview (can be undertaken by PA or PS; if PS undertakes, must be agreed by PA) * Midpoint interview * Professional Values at final interview * Final interview * Confirmation of proficiencies   **During the part:**   * Episodes of Care and Medicines Management   **Q: What is my responsibility when a student’s performance causes concern?**  **A:** If a student requires an Action Plan, you should liaise with the  Academic Assessor and the nominated Practice Educator/Facilitator. The Academic Assessor may ask the Zoned Academic to visit the student to provide additional support. |  |

|  |  |
| --- | --- |
| **Academic Assessor Responsibilities** | |
| Academic Assessors are Registered Nurses and are nominated for each Part of the programme and are appropriately prepared for the role;   * Works in partnership with the Practice Assessor to evaluate and recommend the student for progression for each part of the programme * Has understanding of the student’s learning and achievement in practice * Enables scheduled communication and collaboration between Academic and Practice Assessors   **FAQs**  **Q: What is my role in relation to student assessment?**  **A:** The student has an Academic Assessor for each Part of the programme and will provide continuity and have an overview of student achievement to inform progression. If there is cause for concern in relation to the student’s performance you should be involved in agreeing an Action Plan.  **Q: Who will I liaise with?**  **A:** You will communicate and collaborate with the Practice Assessor at relevant scheduled points during the Part. This may be in person, via email or telephone as appropriate.  **Q: What is my responsibility in relation to the student’s progression towards registration?**  **A:** The Academic Assessor will review and confirm the overall achievement in the PAD and recommend progression to the next Part of the programme or registration in the OAR. |  |

|  |  |
| --- | --- |
| **Document Signatories and Checklist for assessed documents** | |
| There are separate pages for Practice Supervisors, Practice Assessors and Academic Assessors to record information. It is your responsibility to complete these details.  Any Registered professional who writes in the PAD must complete the appropriate signatories page. This includes the record of orientation, record of communication and/or record of practice hours.  This is required by the University to cross reference and prevent falsification of records.  Please ensure that you insert your name, signature and date as required throughout the document.  **Checklist for assessed documents:**  At the end of each placement in the final interview, the Practice Assessor completes the checklist to confirm all components have been assessed and records signed.  **Practice Supervisors, Practice Assessors and Academic Assessors Declaration:**  By signing in the PAD you are confirming:   * You have completed Preparation that has helped you in supporting and assessing learners in practice * You understand your responsibilities in supporting learners in relation to your code (NMC 2018; HCPC 2017) * You know how to seek support when concerns arise and are aware of UW raising Concerns Algorithm * You have a working knowledge of current nursing programme requirements and assessment strategies * You have support and resources to complete the role |  |

|  |  |
| --- | --- |
| **Orientation** | |
| There are some elements of orientation that **must** be completed on the first day on placement. Refer to orientation page in the Practice Assessment Document.  **FAQs**  **Q: Who can orientate the student and complete this page?**  **A:** An appropriate member of staff familiar with the area, as identified by the nominated person/local manager can complete the student orientation and sign the appropriate section of the PAD.  Complete the appropriate signatory page. |  |

|  |  |
| --- | --- |
| **Initial, Mid-point and Final Interview** | |
| The interviews provide a formal record of student learning, reflections and achievement. Students are encouraged to take responsibility for their own learning and record reflections.  **Initial interview:**  This is completed by the student with support from the Practice Supervisor or Practice Assessor who will identify the learning opportunities available during the placement and will reflect on their achievements. If the Practice Supervisor completes the initial interview with the student this needs to be confirmed by the Practice Assessor.  **Mid-point interview:**  This is completed by the student and the Practice Assessor who will review progress and if there are causes for concern the Practice Assessor will liaise with the Academic Assessor and complete an action plan.  **Final interview:**  This is completed by the student and the Practice Assessor. For placement one, they will review progress and confirm the student is making satisfactory progression (if not an action plan will be put in place in collaboration with the Academic Assessor). For placement 2 (end of the Part) they will review progress and confirm achievement. At the end of the interview the Practice Assessor must complete the checklist for assessed documents. |  |

|  |  |
| --- | --- |
| **Professional Values** | |
| 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). The Professional Values reflect a number of proficiency statements and are captured under the four sections of The Code.  **Student reflection on meeting Professional Values:**  The student selects one example from practice on each placement to demonstrate how they practise within The Code. Confidentiality in relation to people receiving care and service providers should be maintained. For each placement a different area of The Code should be selected to reflect on.  **Student achievement:**  Where other components have been assessed and achieved e.g. a proficiency assessed at the beginning of the Part, the student needs to demonstrate continued competence and confidence in the proficiency. Professional Value statement 8 enables the assessor to ensure and record that the student is meeting this requirement.  **FAQs**  **Q: Who assesses the professional values?**  **A:** The Practice Supervisor or Practice Assessor can assess the mid- point professional values. If the Practice Supervisor assesses the mid- point this will be reviewed and agreed by the Practice Assessor. The final Professional Values on each placement are assessed by the Practice Assessor who will discuss and review with the student their reflection. If there are any concerns raised these should be discussed with the Academic Assessor. |  |

|  |  |
| --- | --- |
| **Patient/Service User/Carer Feedback Form** | |
| Within each placement there is a page for the student to receive feedback directly from someone they have cared for and/or carers. Practice Supervisors or Practice Assessors are asked to support students by facilitating this and asking people or their families to complete the form and they should sign this on completion. It may not be possible to have this completed in every placement.  **FAQs:**  **Q: Who asks the person receiving care or carer to complete the form?**  **A:** The Practice Supervisor/Practice Assessor should obtain consent from patients/service users/carers who should feel able to decline to participate.  **Q: Does the person receiving care or carer have to sign the form?**  **A:** No.  **Q: How is the feedback used in the assessment process by the Practice Supervisor and Practice Assessor?**  **A:** The student will reflect on the feedback provided by the patient/service user/carer and discuss the outcomes, including any changes to practice that need to be made which can be included in the interviews or in an Action plan. |  |

|  |  |
| --- | --- |
| **Record of Working with and Learning from Others/Inter-professional working** | |
| Students will have opportunities across all Parts to work with other professions across a range of teams and agencies and will be able to gain an understanding of the different roles and responsibilities and importance of teamwork in providing person centred care.  **Student reflection:**  Students should reflect on their learning when working with members of the multi-disciplinary team and document this. The Practice Supervisor will discuss the student’s reflection and comment on their experience.  **FAQs**  **Q: How are the reflections used in the assessment process by the Practice Supervisor and Practice Assessor?**  **A:** The Practice Supervisor will discuss the student’s reflection on their learning from others and provide relevant feedback to the Practice Assessor as appropriate. The Practice Assessor will review documented records where the student has worked with other health and social care professionals and incorporate into assessment where appropriate. |  |

|  |  |
| --- | --- |
| **Record of Communication and 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 assessment of the student.  Complete the relevant signatory page.  This is for additional feedback that has not previously been documented in the PAD.  **FAQs**  **Q: Should other members of the team be Registered professionals? A:** No. It may be appropriate for an experienced health care assistant to give feedback on working with the student. However, they would not be formally contributing to assessment decisions.  **Q: What type of information should be recorded?**  **A:** Any relevant information that can be used in the assessment process, or that records the student’s progression.  **Zoned Academics** are required to complete the record of communication/additional feedback when they visit a student on placement. |  |

|  |  |
| --- | --- |
| **Record of peer feedback – Part 2 and Part 3 only** | |
| These records can be completed by the student’s peers i.e. other students who have worked alongside you or have had the opportunity to discuss your learning needs with you. If you have facilitated a teaching session on placement you can use this form below to obtain feedback.  **FAQs**  **Q: Which students can complete peer feedback?**  **A:** Any student in practice that you have worked with regularly. This could be Nursing, Nursing Associate, Midwifery, Allied Health, Medical and/or Social Work students.  **Q: How is peer feedback used in the assessment process by the Practice Supervisor and Practice Assessor?**  **A:** The Practice Supervisor will discuss with the student the feedback they have received from peers in relation to how they support other student’s learning in practice and facilitate teaching. The Practice Assessor will review documented peer feedback where the student has received feedback from other students and incorporate into assessment where appropriate. |  |

|  |  |
| --- | --- |
| **Proficiencies** | |
| Assessment of proficiencies are undertaken across the Part. These can be assessed in a range of placements. If a proficiency is assessed as achieved early in the Part it is expected that the student maintains that level of competence and could be re-assessed in subsequent placements during the part. This is underpinned by Professional Value 8.  **FAQs**  **Q: Who assesses the Proficiencies?**  **A**: Practice Supervisors and other Registered health or social care professionals can contribute to the assessment of proficiencies, within their scope of practice. Practice Assessors will also assess proficiencies and have responsibility for confirming that proficiencies have been met at the final interview.  **For Nursing Students:**  **Achievement of Parts 2 and 3 proficiencies:**  To support the student progressing effectively through the programme and in utilising the valuable opportunities available across a range of placements certain Proficiencies have been identified that can be met in Part 2 **OR** Part 3. These are listed in the Part 2 and Part 3 documents and the OAR. The Practice Assessor needs to complete this at the end of Part 2 and Part 3. Any Proficiencies not met in Part 2 are then identified as the student needing to achieve these in Part 3.  **Q: How will the student know which Proficiencies can be undertaken in Part 2 or Part 3?**  **A:** The Practice Supervisor or Practice Assessor will discuss the learning opportunities on the placement with the student during the initial interview.  **Q: How will the student, Practice Assessor and Academic Assessor know if the Proficiencies have been achieved in Part 2 or are being carried forward to Part 3?**  **A:** This will be recorded both in the PAD and the OAR. | **OAR** |

|  |  |
| --- | --- |
| **Episode of Care: Assessment must be completed by a Practice Assessor** | |
| Episodes of Care are holistic assessments which enable the student to demonstrate progression across a number of platforms and must be achieved by the end of the Part. Effective communication and relationship management skills underpin all aspects of care.  **For Nursing Students:**  **Part 1:**  **Formative** - Episode of direct care meeting the needs of a person receiving care.  **Summative** - Episode of direct care meeting the needs of a person receiving care.  **Part 2:**  **Episode 1** - Group of people receiving care or individual with complex care needs.  **Episode 2** - Group of people receiving care with increasingly complex health and social care needs.  **Part 3:**  **Episode 1** - Supervising and teaching a junior learner in practice, based on the delivery of direct person-centred care.  **Episode 2** - Organisation and management of care for a group/caseload of people with complex care covering all seven platforms.  The student and the Practice Assessor should identify the appropriate placement and episode of care to complete this assessment. As there is only one opportunity for assessment the planning should take this into consideration to maximise the learning for the student.  **Student reflection:**  An integral component of this assessment is the student reflection on the delivery of person centred care. |  |

|  |  |
| --- | --- |
| **Medicines Management: This assessment must be completed by a Practice Assessor.** | |
| The students is required to undertake a Medicines Management assessment during each Part.  The student and the Practice Assessor should identify the appropriate placement to complete this assessment. As there is only one opportunity for assessment the planning should take this into consideration to maximise the learning for the student. The student should be allowed a number of practice opportunities to administer medicines under supervision prior to this assessment.  By the end of Part 3 the student should be consolidating their knowledge, skills and competence in relation to the safe administration of medicines within the required regulatory frameworks relating to *Future Nurse* (NMC 2018), *The Code*, (NMC 2018) and *A Competency Framework for all Prescribers* (The Royal Pharmaceutical Society 2016). |  |

|  |  |
| --- | --- |
| **Action Plan** | |
| There are Action Plans available within each Part. An Action Plan should be completed if there is cause for concern in relation to the student’s performance. For example, failure to achieve components of assessment such as Professional Values.  If a student requires an Action Plan, the Practice Assessor should liaise with the Academic Assessor and is responsible for reviewing progress and ensuring support and learning is available. Depending on the AEI and the practice placement’s policy, the Practice Assessor may have to inform the nominated person on placement.  **FAQs**  **Q: What timescale should be used for the student to achieve the Action Plan?**  **A:** This will depend on the area of concern and the frequency of learning opportunities available within the length of the placement. The student has to be able to attend and engage in learning in order to achieve the action plan.  **Q: How much support and learning should be provided?**  **A:** This will depend on the Part that the student is undertaking and the complexity of the area of concern. The student has to be able to demonstrate competence or professionalism relevant to the stage of the programme.  **Q: What happens if the student does not achieve the objectives within the Action Plan by the stated review date?**  **A**: The Practice Assessor will need to document their decision regarding whether the student has failed the placement and communicate the outcome with the Academic Assessor. |  |

|  |  |
| --- | --- |
| **Record of Practice Hours** | |
| Students are required to provide evidence of having completed the required number of practice hours for NMC Registration.  Members of staff on placement must verify the student’s hours at the end of each shift/week on this form. Staff verifying practice hours must complete the relevant signatory page towards the front of the PAD.  Students will have specific information from their university regarding how this is reported and recorded.  **FAQs**  **Q: Is the staff member responsible for verifying all the hours recorded?**  **A:** No, the staff member is only calculating those hours documented on the practice hours page once the six weeks are complete. |  |

|  |  |
| --- | --- |
| **Ongoing Achievement Record (OAR)** | |
| The Ongoing Achievement Record (OAR) summarises the student’s achievements in each placement and with the Practice Assessment Document (PAD) provides a comprehensive record of professional development and performance in practice.  The Practice Assessor completes the summary page at the end of each placement and at the end of each Part completes the progression statement.  The Academic Assessor confirms the completion of each placement, adds comments and at the end of each Part completes the progression statement.  **Listed in the OAR - Achievement of Parts 2 and 3 proficiencies:** To support the student progressing effectively through the programme and in utilising the valuable opportunities available across a range of  placements certain proficiencies have been identified that can be met in Part 2 **OR** Part 3. These are listed in Part 2, Part 3 and in the OAR. The Practice Assessor needs to complete this at the end of Part 2 and Part  3. Any proficiencies not met in Part 2 are then identified as the student needing to achieve these in Part 3.  **FAQs**  **Q: Should the Academic Assessor be present when the OAR is completed?**  **A:** The Academic Assessor liaises with the Practice Assessor to confirm progression at the end of each Part in the PAD and OAR. Communication must be scheduled for this to occur and may be face to face or though other communication methods. If the student has not achieved assessment in order to progress, the Practice Assessor and the Academic Assessor will liaise and complete an Action Plan. |  |

# How does the Practice Assessment Document relate to different fields of practice?

The *Future Nurse: Standards of proficiency for registered nurses* (NMC 2018) form the content of all the assessment items of the PAD.

The NMC standards specify the knowledge and skills that Registered Nurses must demonstrate when caring for people of all ages and across all care settings. The role of the nurse in the 21st century is to provide care for people who have complex mental, physical, cognitive and behavioural care needs across a range of settings including people’s own home, in the community or hospital or any health and social care setting.

The outcome statements within the standards of proficiency apply across all fields of Nursing (adult, children, learning disabilities and mental health) and all care settings as Registered Nurses must be able to meet the person-centred, holistic needs of the people they encounter in their practice who may be at any stage of their life and who may have a range of mental, physical, cognitive or behavioural health challenges.

The annexes within the standards of proficiency also apply across all fields and demonstrate what Registered Nurses should be able to demonstrate at the point of registration. Annex A specifies the communication and relationship management skills required and Annex B specifies the nursing procedures that Registered Nurses must demonstrate safely. *The level of expertise and knowledge required for both annexes will vary dependent on the chosen field(s) of practice. Registered Nurses must be able to demonstrate the ability to undertake these skills and procedures at an appropriate level for their intended field(s) of practice.*

**Assessment items and guidance for fields:**

1. ***Professional Values*** – all professional values are of relevance to all fields equally and are assessed using the same approaches to the demonstration of these values in practice.
2. ***Proficiencies, including skills and procedures*** – these should be assessed within the field of practice that the student is undertaking. However, when considering the person’s age and a range of mental, physical, cognitive and behavioural health challenges, the student can learn and be assessed across different health and social care settings. Simulation in practice can also be used as a strategy for learning and assessment.

Examples Part 1: *‘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.’* Adult Nursing – a person with dementia receiving nursing care in a surgical ward Mental Health Nursing – a person with anxiety receiving nursing care in their own home

Learning Disabilities Nursing – a person with moderate learning disabilities and depression receiving nursing care in an in-patient service Children’s Nursing – a child or young person who is responding to the pain that they are experiencing from a surgical procedure in a day surgery unit

Examples Part 1: ‘*7. Takes appropriate action in responding promptly to signs of deterioration or distress considering mental, physical, cognitive*

*and behavioural health’*

Adult Nursing – a person with anxiety and depression who has self-harmed receiving nursing care in an in-patient ward (e.g. mental health placement)

Mental Health Nursing – a person with psychosis who is threatening physical harm to others and has hand injuries receiving nursing care in their own home

Learning Disabilities Nursing – a person with severe learning disabilities who is having a tonic clonic seizure receiving nursing care in a specialist day service

Children’s Nursing – a child or young person who has self-harmed receiving nursing care in an in-patient service

Examples Part 1: *‘15. Selects and uses appropriate continence and feminine hygiene products, for example pads, sheaths and appliances as*

*appropriate.’’*

Adult Nursing – a person who has undergone medical procedures requiring the person to remain prone receiving nursing care Mental Health Nursing – an older adult with depression receiving nursing care in an in-patient ward

Learning Disabilities Nursing – a person with profound learning disabilities who is fully dependent for all needs to be met receiving nursing care by a community nurse

Children’s Nursing – a young person who is recovering from bi-lateral fractured femurs receiving nursing care in a ward

Examples Part 2: *‘3. Recognise people at risk of self-harm and/or suicidal ideation and demonstrate knowledge and skills required to support person-centred evidence-based practice using appropriate risk assessment tools as needed’*

Adult Nursing – a person with wounds to face and hands and suspected fractured arm who has taken alcohol and/or drugs receiving nursing care in A&E

Mental Health Nursing – a person with psychosis who is responding to voices to kill themselves receiving nursing care in psychiatric intensive care

Learning Disabilities Nursing – a person with severe learning disabilities who hits themselves on the head/face to gain staff response receiving nursing care by a community nurse

Children’s Nursing – a child or young person who is repeatedly attempting to pull out their PEG button receiving nursing care in their own home

Examples Part 2: ‘*27. Manage and monitor blood component transfusions in line with local policy and evidence based practice’*

Adult Nursing – a person with severe stab wounds post-surgery receiving nursing care in intensive care Mental Health Nursing – a person who is older with anaemia who is receiving nursing care in a medical ward Learning Disabilities Nursing – a person with cancer receiving nursing care in an outpatient’s oncology service

Children’s Nursing –a child or young person who has sickle cell disease who is receiving nursing care in a ward

Examples Part 2: ’30. *Demonstrates awareness of strategies that develop resilience in themselves and others and applies these in practice e.g. solution focused therapies or talking therapies’*

Adult Nursing – a person with dementia who is spending a lot of time looking for their baby receiving nursing care in a nursing home Mental Health Nursing – a person with depression who has had abdominal surgery who is very upset receiving nursing care

Learning Disabilities Nursing – a person with long term anxiety who has stopped taking medication receiving nursing care in their own home Children’s Nursing – a young person who is a single mother who is extremely distressed as her first baby who is four weeks old has severe vomiting requiring medical intervention receiving nursing care

Examples Part 3: ‘9. *Is able to support people distressed by hearing voices or experiencing distressing thoughts or perceptions’*

Adult Nursing – a person with psychosis who is actively responding to voices they are hearing by shouting at the television receiving nursing care in an in-patient service

Mental Health Nursing – a person who is a young person who has anorexia and is distressed about their weight gain receiving nursing care in an in-patient service

Learning Disabilities Nursing – a person with mild learning disabilities who has depression who is upset about their lack of family and friendships receiving nursing care by a community nurse

Children’s Nursing – a young person who has ADHD and anxiety and is experiencing a panic attack receiving nursing care by a community nurse

Examples Part 3: ‘*12. Manages the care of people who are receiving IV fluids and accurately records fluid intake and output, demonstrating*

*understanding of potential complications’*

Adult Nursing – a person who is older and admitted due to dehydration receiving nursing care

Mental Health Nursing – a person who has contracted e-coli receiving nursing care on an inpatient ward Learning Disabilities Nursing – a person with unstable diabetes receiving nursing care on an inpatient ward Children’s Nursing – a person who is young person who has cancer and is receiving nursing care

Examples Part 3: ‘*26. Evaluates the quality of peoples’ experience of complex care, maintains optimal independence and avoids unnecessary*

*interventions and disruptions to their lifestyle’*

Adult Nursing – a person with diabetes and cancer receiving nursing care in a joint out-patient appointment to establish the best approach to least invasive treatment

Mental Health Nursing – a person with long-term anxiety and depression receiving nursing care in a group therapy model focussing on solution

–focused therapy

Learning Disabilities Nursing – a person with mild learning disabilities who lives alone and has epilepsy, depression and hypertension due to obesity receiving nursing care in a multi-agency approach to ensuring on-going support and intervention

Children’s Nursing – a child or young person who has a life-limiting condition that is deteriorating and is receiving nursing care in a hospice

1. ***Episode of Care*** – these must be undertaken in the field of practice which the student is undertaking. These episodes of care relate to; a person receiving care, a group of people receiving care, people with complex needs receiving care, junior learners in practice and a group/caseload of people with complex needs receiving care. The student and Practice Assessor will discuss the episodes of care and agree what the assessment will consist of and when this should be undertaken.
2. ***Medicines Management*** – these assessments can be carried out in any setting where there is regular dispensing and administrating of medicines to individuals or groups, either in the field of practice the student is undertaking or in any other experiential placement. The level of complexity is enhanced each year. The student and Practice Assessor will agree when this should be undertaken.