

# PRACTICE SUPERVISOR WORKSHOP

*Facilitator's Guide*

**PLPLG**

*Developing London's Future Nurses Together*

## Practice Supervisor Worksh0p

This training session is one of the PLPLG SSSA development modules for Practice Supervisors and Practice Assessors. This material provides a half day workshop (3 ½ hours) aimed at Practice Supervisors with no previous experience of supervising students. This can be shortened by taking out the role play activities in feedback and coaching.

This facilitator guide provides a lesson plan with approximate timings, content and activity which accompany the PowerPoint presentation. Each slide has additional notes to assist the trainer, where required. These are provided in this guide. Also attached is the activity worksheet which can be copied and distributed to delegates. A copy of the answers is also included..

### Lesson Plan

Timings	Slide	Activity or Topic	Trainer Notes
5 mins	2	Aims and Learning Outcomes	Introduce the workshop Go through objectives
25 mins	3-8	Changes to the NMC, standards for supervision and assessment, roles and responsibilities	Go through the changes to the NMC and talk through the impact of this. Outline the standards and how this can be approached and completed. Explain and discuss practice learning and the opportunities a student has through their development. Consider the different roles in supervision and assessment. Ask delegates to discuss in pairs to consider how the student will seek advice and feedback from their assessors and supervisors and how the chain works in terms of their roles and responsibilities to the student.
5 mins	9	Delegate activity	Give delegates a copy of Worksheet One and ask them to consider who is responsible for each activity
10 mins	10-11	Summary of roles Academic Assessor	Review roles in terms of assessment and documentation. Focus on the Academic Assessor role and how they will work with the student in terms of their responsibilities.
5 mins	12	Assessment	Using the brief scenarios, consider who would be most appropriate for each activity
20 mins	13 -15	Initial interview and	Go through requirements of initial

		SLOT analysis	interview and look at SLOT analysis. Get delegates to work in pairs or small groups and ask them to consider a SLOT (Worksheet Two) for a newly registered nurse. This can be done either from experience or through role play (which works better)
10 mins	16-17	Kolb learning cycle and learning styles	Go through Kolb's learning cycle. Consider an example relevant to the workplace. Introduce Honey & Mumford's learning styles. Consider the different styles and provide ideas for training opportunities for each style. Emphasise these are preferences only and do not mean people only learn in fixed ways. Consider there are other learning styles, ie VAK or VARK. Encourage delegates to consider their learning style preferences and activities best suited to them
10 mins	18-20	Learning objectives and activity	Focus on the next stage which is turning learning needs into objectives through prioritising learning needs, identifying learning activities and setting SMART objectives. Ask delegates to work in pairs and identify one SMART objective from their SLOT
15 mins	21-25	What is Assessment? Different types of assessment. Methods of assessment. Evidence. Service user feedback and considerations	Go through slides – ask delegates to think about recent assessments they may have had, how did it make them feel? How does a student feel?
10 mins	26-28	Questioning	Go through the place of questioning in assessment. Look at the different types of question. Ask delegates to work in pairs and consider what sort of questions they could ask when assessing a student
10 mins	29-34	Documentation, validity and reliability	Go through the documentation requirements, look at the four areas and samples on slides which apply to the practice supervisor. Look at reliability and validity and ask group for examples

5 mins	35	Activity – quick assessment	Ask delegates to call out answers to the questions on the slide, or select certain delegates to answer
10 mins	35-36	Feedback	Ask delegates what feedback is. Go through different types, ie constructive, positive and destructive. Ask delegates to work in pairs / small groups and consider the rules of giving feedback. Put answers on a flip chart. Go through slide
20 mins	37-40	Johari window, Kipling's Men, IAID and activity	Go through Johari window and how this relates to feedback and developing self-awareness for self-improvement. Go through Kipling's men and relate to giving feedback. Ask delegates to work in small pairs to consider the scenarios (Worksheet Three) and the feedback that would be given. If sufficient time, use for role play
10 mins	41	Activity	Ask delegates to consider definitions for each of the different terms. Explain and give examples of when each is used in supervision.
10 mins	42-49	GROW and SOAR models of coaching	Explain that GROW is the most popular model of coaching, however it is individual preference. SOAR works well with students as it begins by exploring their foundation before identifying their goal. Explain the importance of delegates planning their own questions.
20 mins	50-51	Activities	Ask delegates to consider questions they could ask for each stage. Then using role plays (Worksheet Four), ask delegates to work in pairs or triads to role play coaching
5 mins	52	Review	Review learning outcomes and ask delegates for questions

## Notes for slides:

Slide	Trainer notes
5	<p>This is one of the important changes for student supervision. Where previously students were supported by a named mentor and co-mentors (in some settings), they will now be supported by a range of professionals. This may include:</p> <ul style="list-style-type: none"> <li>• Healthcare assistants, support workers and nursing associates</li> <li>• Allied health professionals – physiotherapists, occupational therapists, speech and language therapists, radiotherapists and other AHPs</li> <li>• Psychologists in mental health settings</li> </ul> <p>A practice supervisor can be <b>any</b> registered healthcare professional. Newly registered nurses may also be practice supervisors for students</p>
6	<p>Consider how the different roles interact with each other before going into the detail of the different roles</p>
7	<p>The responsibilities of the Practice Supervisor, according to the NMC Guidelines for Standards of Student Supervision and Assessment include:</p> <p>3.1 serve as role models for safe and effective practice in line with their code of conduct</p> <p>3.2 support learning in line with their scope of practice to enable the student to meet their proficiencies and programme outcomes</p> <p>3.3 support and supervise students, providing feedback on their progress towards, and achievement of, proficiencies and skills</p> <p>3.4 have current knowledge and experience of the area in which they are providing support, supervision and feedback, and</p> <p>3.5 receive ongoing support to participate in the practice learning of students. <a href="http://www.nmc.org.uk">www.nmc.org.uk</a> Standards for student supervision and assessment</p> <p>4. Practice supervisors: contribution to assessment and progression</p> <p>Approved education institutions, together with practice learning partners, must ensure that practice supervisors:</p> <p>4.1 contribute to the student's record of achievement by periodically recording relevant observations on the conduct, proficiency and achievement of the students they are supervising</p> <p>4.2 contribute to student assessments to inform decisions for progression</p> <p>4.3 have sufficient opportunities to engage with practice assessors and academic assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising, and</p> <p>4.4 are expected to appropriately raise and respond to student conduct and competence concerns and are supported in practice</p>
8	<p>The role of the Practice Assessor, according to the NMC Standards for Student Supervision and Assessment include:</p> <p>7.1 practice assessors conduct assessments to confirm student</p>

	<p>achievement of proficiencies and programme outcomes for practice learning</p> <p>7.2 assessment decisions by practice assessors are informed by feedback sought and received from practice supervisors</p> <p>7.3 practice assessors make and record objective, evidenced-based assessments on conduct, proficiency and achievement, drawing on student records, direct observations, student self-reflection, and other resources</p> <p>7.4 practice assessors maintain current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing</p> <p>7.5 a nominated practice assessor works in partnership with the nominated academic assessor to evaluate and recommend the student for progression for each part of the programme, in line with programme standards and local and national policies</p> <p>7.6 there are sufficient opportunities for the practice assessor to periodically observe the student across environments in order to inform decisions for assessment and progression</p> <p>7.7 there are sufficient opportunities for the practice assessor to gather and coordinate feedback from practice supervisors, any other practice assessors, and relevant people, in order to be assured about their decisions for assessment and progression</p> <p>7.8 practice assessors have an understanding of the student's learning and achievement in theory</p> <p>7.9 communication and collaboration between practice and academic assessors is scheduled for relevant points in programme structure and student progression</p> <p>7.10 practice assessors are not simultaneously the practice supervisor and academic assessor for the same student, and</p> <p>7.11 practice assessors for students on NMC approved prescribing programmes support learning in line with the NMC Standards for prescribing programmes.</p>
10	<p>Go through the different roles and responsibilities at various points of placement. The slide shows different colours for different features of documentation and assessment.</p> <p>Emphasise that there are modules, ie assessing learning needs and assessing learning in practice that will provide additional learning and guidance for both practice supervisors and practice assessors in supporting students</p>
11	<p>According to the NMC Guidelines and student Standards for Supervision and Assessment, the Academic Assessor is responsible for:</p> <p>9.1 academic assessors collate and confirm student achievement of proficiencies and programme outcomes in the academic environment for each part of the programme</p> <p>9.2 academic assessors make and record objective, evidence-based decisions on conduct, proficiency and achievement, and recommendations for progression, drawing on student records and</p>

	<p>other resources</p> <p>9.3 academic assessors maintain current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing and confirming</p> <p>9.4 the nominated academic assessor works in partnership with a nominated practice assessor to evaluate and recommend the student for progression for each part of the programme, in line with programme standards and local and national policies</p> <p>9.5 academic assessors have an understanding of the student's learning and achievement in practice</p> <p>9.6 communication and collaboration between academic and practice assessors is scheduled for relevant points in programme structure and student progression</p> <p>9.7 academic assessors are not simultaneously the practice supervisor and practice assessor for the same student.</p>
14	Go through the SLOT analysis with different examples of each of the categories to contextualise for a student
16	<p>Kolb's Learning Cycle developed in 1984 shows four stages:</p> <p><b>Concrete experience</b> A new situation or experience which provokes a reaction and begins the learning experience</p> <p><b>Reflection</b> The second stage during which we review our experience, think about what we have done and how we have felt</p> <p><b>Abstract conceptualisation</b> During the third stage we begin to interpret and analyse the experience and develop a hypothesis</p> <p><b>Active experimentation</b> The final stage as we test our hypothesis with a new experience or situation which incorporates our learning</p>
17	<p>Learning styles were developed by Peter Honey and Thomas Mumford in 1980s following Kolb's work on learning. They identified four styles and although we will learn through all styles we will have a preference for one or more:</p> <p>Activists learn best by engaging fully in a task and getting on with things. They like action, simulation, games, activity and even role play sometimes. Their motto is to try anything once. The challenge for an activist is to think about possible impact before acting</p> <p>Reflectors are the quieter ones who like to observe, think and reflect about something before trying. They like to learn through observation, reading and thinking rather than engaging in activity. Can sometimes be slower to absorb knowledge but knowledge will remain longer. Challenge is to get reflectors to act!</p> <p>Theorists want to have all the facts and detail before making a decision or trying anything else. They like to absorb information, will continually question 'why' and enjoy research. Challenge is to get theorists to act without all the facts!</p> <p>Pragmatists are like activists with a mission – they want to engage and</p>

	<p>get on with things but only where there is a link to application. They are constantly looking for the best ways to do things but will not always try things that are a little 'creative'. They need a defined link</p>
18	<p>Consider prioritising learning needs which will depend on the individual, their experience, confidence and the setting with the requirements. Only set two or three objectives for personal development for each period.</p> <p>Encourage the preceptee to identify preferred ways of learning and to come up with ideas so that they assume responsibility for their own learning. Emphasise that there are a number of different ways of learning including shadowing, on the job, e-learning, reflection, independent study (depends on setting)</p> <p>Ensure objectives are SMART with a specified timeframe, outcome and measure of success</p>
22	<p><b>Diagnostic assessment</b> -carried out at the beginning of a placement or programme, often based on student's own self-awareness and self-assessment. A SLOT analysis is a useful tool to encourage students to reflect and identify strengths, learning needs, opportunities and threats. Will include assessment of knowledge, skills, attitude, experience, confidence. It provides a baseline from which learning objectives can be established</p> <p><b>Formative assessment</b> – Continuous assessment throughout programme involving regular feedback which may be based around learning objectives. Helps to monitor progress, provide regular feedback to motivate and encourage. Feeds into action plans. Will usually be evidence based with information provided to inform feedback</p> <p><b>Summative assessment</b> – Usually quite a formal process at specific points, eg end of a programme or placement. Assessment against pre-set criteria and may take form of observation, OSCE, question and answer or assignments or exams. Tends to be more judgemental and conclusive</p>
23	<p><b>Direct observation</b> – consider if student needs more guidance or further practice. Would shadowing or role modelling help? Consider how the student reacts in terms of behaviour and attitude. Don't forget that your presence may have an impact causing a student to be nervous</p> <p><b>Questioning of related evidence-based practice</b> – asking questions to test a student on their base knowledge or theory underpinning activities</p> <p><b>Working alongside the student</b> – assessing competence, confidence, attitude and behaviour whilst working with a student during an episode of care, visit to a patient's home, working in an acute or community setting.</p> <p><b>Feedback</b> this may come from a variety of sources including other healthcare professionals, service users and families, practice supervisors, colleagues – can be formally gathered through the</p>



	<p>Practice assessment document. May add credibility as it provides different perspectives</p> <p><b>Case studies</b> – discussion of different scenarios which may include patient stories, others’ experiences or case studies to assess the student’s understanding and how they would deal with a situation.</p> <p><b>Presentation</b> – getting the student to give a formal or informal presentation on a topic, experience or interest. Encourages student to research, prepare and develop confidence</p> <p><b>Reflective accounts</b> - encourages learning through experience through developing self-awareness and ability to critically analyse and evaluate episodes of care. Demonstrates knowledge and learning whilst informing future practice</p>
24	<p>Assessments will provide evidence or supporting information which may be used in an overall assessment of a student’s learning in practice. Notes should be taken during observation (or immediately afterwards) and it is helpful to encourage students to reflect on their own assessment to consider areas of strength and areas of potential development. Feedback from colleagues, healthcare professionals or service users is also helpful, however this should be written and be unbiased. The more feedback from different sources the better as it provides a more balanced perspective and can be particularly helpful if there are concerns with performance, helping to inform decision making.</p> <p><b>Involving service users in assessment</b></p> <p>Health policy initiatives encourage a more active role for patients, service users and carers as they have become a fundamental voice in informing assessments. However certain ethical implications must be considered and patients / others must not feel forced to provide feedback on a student. The feedback form available in the Pan London Practice Assessment Document should be used to gather feedback from service users to ensure consistency.</p> <p>It is very important to remember that students should be assessed against pre-set standards and not against peers or assessor expectations which may be subject to bias.</p>
25	<p>There are a number of considerations when selecting service users including the above points. There may be an unconscious bias in selecting services users to provide feedback based on culture, religions, language and personality. Additionally there may be a natural inclination to solicit feedback from patients who are appreciative, undemanding, have expressed positive views and who do not complain.</p> <p>However, literature suggests that this service user feedback is instrumental in highlighting performance issues in care particularly in areas like dignity, communication, compassion and privacy..</p>
26	<p>Consider how questions can and should be used to elicit information from students</p>

27	<p>The different types of question:</p> <ul style="list-style-type: none"> <li>• <b>Closed</b> – usually provide one-word answers, useful in fact finding and otherwise limited in providing information</li> <li>• <b>Open</b> – broad questions which may provide a lot of information, depending on the respondee</li> <li>• <b>Probing</b> – also known as the funnel technique – may start with open questions and become more restrictive. Probing questions pick up on what the student is saying and probe further. They are particularly helpful in getting to the root cause of a problem</li> <li>• <b>Leading</b> – questions which guide a person to the appropriate response</li> <li>• <b>Rhetorical</b> – do not require a response but are encouraging the listener to think about the questions / topic</li> <li>• <b>Recall</b> – questions which encourage a listener to remember or recall something. These are useful in linking to other topics / incidents</li> <li>• <b>Reflective</b> – questions which use reflective verbs like ‘think’ or ‘feel’ and encourage the listener to respond at a different level by engaging with their feelings</li> </ul>
29	<p>Stress that assessors are accountable for the decisions made and therefore these must be appropriately informed. Assessors should be systematic in finding appropriate information, feedback and other evidence to justify any decisions made. All decisions should be recorded in the student PLPAD against the appropriate competence</p>
33	<p>Inadequate feedback from colleagues, practice supervisors or service users, particularly where feedback may cause doubts on performance or attitude Bias towards student which may be positive or negative, which may impact on assessment causing unfairness Insufficient opportunities to observe and assess certain skills, competencies or behaviours. This can be due to the setting or the workload or chances of working alongside the student Student may not be sufficiently prepared for assessment or may be very nervous Pre-conceived ideas based on other students’ or previous experiences. Important to assess each student as an individual against the requirements of stage of practice and not against peers or other students Important to know the documentation, who does what, when it should be done, who is responsible for signing off Workload pressures and feeling stressed if it’s a particularly busy day or there are few opportunities towards the end of placement</p>
34	<ul style="list-style-type: none"> <li>• Types of assessment – diagnostic, formative, summative</li> <li>• Methods of assessment – Observation, Q&amp;A, working alongside a student, feedback from others, discussion (case study),</li> </ul>

	<p>presentation, reflective questioning</p> <ul style="list-style-type: none"> <li>• Types of question – closed, open, probing, leading, rhetorical, recall and reflective</li> <li>• Main areas of assessment include professional values, proficiencies, episode of care and medicines management</li> <li>• Reliability may be affected by a number of factors including: inadequate feedback, bias, insufficient opportunity or inappropriate methods, student’s own readiness, pre-conceived ideas, uncertainty of documentation, workload pressures</li> </ul>
35	<p>Consider the rules of giving feedback – what should people do, what shouldn’t they do. Afterwards discuss findings, list on flip chart before going to next slide</p>
36	<p>Review some of the rules of giving feedback</p> <ul style="list-style-type: none"> <li>• Care about what you say and how you say it</li> <li>• Give feedback as soon as feasible</li> <li>• Only give feedback to develop another person and never to make yourself feel better</li> <li>• Be clear, concise and specific with recent examples to illustrate the feedback</li> <li>• Be positive, constructive and objective whilst sticking to the facts</li> <li>• Praise where appropriate</li> <li>• Avoid the word ‘but’ and negative language</li> <li>• Avoid confrontation</li> <li>• Feedback should not be judgmental or accusatory</li> <li>• Use positive language</li> <li>• Focus on present and future – not the past</li> <li>• Explore alternatives, share ideas and look for way forward together</li> <li>• Use your own experience to suggest alternatives</li> <li>• Focus on behaviour not personality and attitudes that can be changed</li> <li>• Own your feedback</li> <li>• Involve the individual in their feedback by asking questions and listening</li> <li>• Feedback should enable and empower an individual</li> <li>• Always summarise at the end to confirm the feedback and any agreed action</li> </ul>
37	<p>Developed by Joseph Luft and Harrington Ingham in 1955, Johari’s Window considers the four domains that make up a person. Through an understanding and self-awareness, we can develop our personalities and our relationships with others. Feedback is essential in understanding and developing the ‘blind self’. Empowering others through delegation and positive feedback encourages people to explore the ‘unknown self’ The four domains are:</p> <ul style="list-style-type: none"> <li>• Hidden self – this is the area known only to oneself – secret hopes, dreams, thoughts, fears that are not shared with</li> </ul>

	<p>everyone</p> <ul style="list-style-type: none"> <li>• Known self – this is the public face and the personality that other people know. It will include strengths, knowledge, skills, way people look and interact with others. This area is known by oneself and by others</li> <li>• Blind self – this is the blind spot – the areas we do not know about ourselves. These may be negative aspects of which we are unaware of positive qualities in those lacking self-esteem. In giving feedback, we are addressing this area</li> <li>• Unknown self – this is the area unknown to self and others – it can only be explored through opportunity and a willingness to try new things</li> </ul> <p>Not all the domains will be the same size – some people are very private people who do not like to share with others; some are very public people who are open and disclose a lot about themselves. Johari’s Window is helpful in giving feedback and useful as a self-awareness tool. It can be used as a blank grid for someone to complete for themselves and identify areas of development and growth.</p>
38	<p><b>What</b> – consider the feedback you need to give. What are the key messages? What is the situation? What examples do you have? What sort of feedback is it – positive, constructive, negative, informative?</p> <p><b>Where</b> – all feedback should be given in a quiet place without interruption, particularly constructive or negative feedback. Whilst some people say praise and positive feedback should be given in front of others, this is not advised as others may feel less valued, whilst the recipient may feel embarrassed</p> <p><b>When</b> – consider the timing. Feedback should be given as soon as possible to an event whilst it remains fresh giving time to prepare the approach, however consideration should be given to the timing of the feedback for the individual, with thought for how they may be feeling, ie if they have just come from a long shift or difficult interaction</p> <p><b>How</b> – consideration for how the feedback will be given with examples that may be provided, thought for the vocabulary being suited to the recipient. Feedback should be given with sensitivity and creating a dialogue involving listening and questioning. Feedback should be clear and concise, avoiding generalization</p> <p><b>Why</b> – feedback should only be given to help someone to develop or do things more effectively, to improve a situation or to make people aware of certain information or standards</p> <p><b>Who</b> – think about the person who is receiving the feedback, consider how they will feel and react, ensure you are prepared for their reaction. Also consider to whom you should give feedback</p>
39	<p><b>The IAID Model of Feedback</b></p> <p>This model provides a four stage process through which to conduct a meaningful feedback session. By beginning by asking questions,</p>

	<p>engaging with the individual and providing the opportunity for them to offer their views and perspective, the facilitator is empowering the individual. When an individual admits that a situation could have been handled better, they are owning the problem and taking responsibility. They are demonstrating a level of self-awareness and a willingness to consider change.</p> <p>INPUT - Ask for their input – comments, perceptions and opinions. This empowers individuals to own responsibility for the concern</p> <p>ACTIVITY - Identify the activity and consider both positive and negative behaviours. Remain objective and impartial, describing without emotion</p> <p>IMPACT - Identify the impact of the action in terms of service and others, with consideration of why this needs development</p> <p>DESIRED OUTCOME - Identify changes or what should happen. Look at alternatives and way forward. Consider action plan for future, support needed and when you will review</p>
41	<p>In supervising, managing and developing people there are a number of different techniques that we use – coaching, instructing, advising, teaching, counselling and mentoring. Each of these is distinct with a defined purpose and although one of the most useful techniques, coaching is frequently mis-understood.</p> <p>Ask delegates to work in pairs or small groups to consider definitions of the different terms. You may also want to consider asking them for examples of different situations when each is most appropriate</p>
42	<p>The dictionary defines a coach as “a privately owned carriage used to transport from one place to another”- and whilst this may refer to a vehicle, this is exactly what coaching is about. A good coach will help an individual move forward from where they are to where they want or need to be.</p> <p>The premise of coaching is that the answers lie within the individual and it is through careful questioning and follow-through from a coach that the individual will reach decisions on how to move forward. This may be done within a short session or over several sessions. As it is the individual who comes up with the solutions (not the coach), they are more likely to be committed to following through and achieving. A coach is therefore a facilitator who encourages the thought process without giving advice or instruction.</p> <p>Where an individual is coached over a period of time they begin to internalise the coaching idea and become able to think through the process themselves, becoming more independent.</p>
43	<p><b>Coaching</b> is improving performance through a range of learning experiences to identify areas for improvement. This may involve helping someone to solve a problem, learn a new skill, address a difficult area or achieve a goal</p>

	<p><b>Advising</b> is giving opinions or information which may or may not be taken. Guiding or giving advice based on your own experience</p> <p><b>Instructing</b> is teaching others or giving instruction on how something should be done. This includes demonstrating practical skills</p> <p><b>Teaching</b> is about passing on knowledge or skill to another person and facilitating their learning</p> <p><b>Counselling</b> is encouraging others to take responsibility for a problem. It focuses on past experience</p> <p><b>Mentoring</b> has different meanings in different contexts. It is typically less formal, combines elements of all the above and is aimed at helping people to realise their potential. Within healthcare, mentors are responsible for developing and assessing students and learners</p> <p>The key to successful management or supervision is to understand when each of these core skills is required. When is coaching the better option and when is it more effective to provide answers, advice or instruction.</p>
44	<p><b>GROW</b></p> <p>Probably the most popular method is GROW – attributed to John Whitmore (1980s) which identifies a four stage process beginning with identifying the Goal for the individual, then considering the Reality or current situation, then clarifying the Objective before determining the Will or Way forward. For each stage, the coach will ask a number of questions. Whilst each coach will have their own preferred questions, the following provide examples of the types of question that can be asked at each stage:</p> <p><b>Goal</b></p> <p>What is the subject matter or issue you would like to discuss?  What outcome are you seeking by the end of this session?  What is your time frame for reaching that goal?</p> <p><b>Reality</b></p> <p>What is the present situation in more detail?  What and how great is your concern about it?  How much control do you personally have over the outcome?  What is really the issue here, the heart of the problem or the bottom line?</p> <p><b>Options</b></p> <p>What are all the different ways you could approach this issue?  Make a list of all the alternatives, complete and partial solutions?  What else could you do?  Which would give you most satisfaction?</p> <p><b>Will</b></p> <p>Which options do you choose?  To what extent does this meet your objectives?  What are your criteria and measurements for success?  When precisely are you going to start and finish each step?</p>

45	<p><b>SOAR</b></p> <p>An alternative model, also with four stages, focuses on considering the Situation initially before identifying the Outcome, looking at potential Actions and completing the cycle with Review and Reflect. Designed to complete the coaching cycle with the opportunity to review and reflect which fits well with Nursing and encourages reflection and review of what has gone well</p>
46	<p>Emphasise that not everyone feels comfortable asking the same questions and will want to phrase them differently, use different language or approach in a different way. This is perfectly acceptable as the coach needs to be comfortable with the coaching process. Ask delegate to consider a couple of questions they might like to ask at this stage</p>

On the following page there are templates and activities (please refer to lesson plan):

- Worksheet One – roles and responsibilities (with answers!)
- Worksheet Two – SLOT template
- Worksheet Three – scenarios for giving feedback
- Worksheet Four – scenarios for coaching

## Worksheet One - Roles and Responsibilities – Activity

For each of the following responsibilities tick the appropriate box/es for who you think it should be

<b>Responsibility</b>	<b>Practice Supervisor</b>	<b>Practice Assessor</b>	<b>Academic Assessor</b>
<b>Gather and coordinate feedback on student performance</b>			
<b>Provides feedback on progress</b>			
<b>Shares relevant observations with practice assessor and academic assessor</b>			
<b>Work in partnership with nominated academic assessor</b>			
<b>Support learning in line with NMC standards</b>			
<b>Initial interview per placement</b>			
<b>Have an understanding of the student's learning and achievement in practice</b>			
<b>Collaborate with practice assessors at relevant points in programme structure</b>			
<b>Supervision of student's medicines management</b>			
<b>Maintain current knowledge and expertise</b>			
<b>Confirm student achievement of proficiencies and programme outcomes in the academic environment</b>			
<b>Supervision of student's episode(s) of care</b>			
<b>Completes OAR at end of each placement &amp; at programme progression</b>			
<b>Signs off Service User Feedback</b>			



## Answers to Activity

<b>Responsibility</b>	<b>Practice Supervisor</b>	<b>Practice Assessor</b>	<b>Academic Assessor</b>
<b>Gather and coordinate feedback on student performance</b>		<input type="checkbox"/>	
<b>Provides feedback on progress</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Shares relevant observations with practice assessor and academic assessor</b>	<input type="checkbox"/>		
<b>Work in partnership with nominated academic assessor</b>		<input type="checkbox"/>	
<b>Support learning in line with NMC standards</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Initial interview per placement</b>	<input type="checkbox"/>		
<b>Have an understanding of the student's learning and achievement in practice</b>			<input type="checkbox"/>
<b>Collaborate with practice assessors at relevant points in programme structure</b>			<input type="checkbox"/>
<b>Supervision of student's medicines management</b>		<input type="checkbox"/>	
<b>Maintain current knowledge and expertise</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Confirm student achievement of proficiencies and programme outcomes in the academic environment</b>			<input type="checkbox"/>
<b>Supervision of student's episode(s) of care</b>		<input type="checkbox"/>	
<b>Completes OAR at end of each placement &amp; at programme progression</b>		<input type="checkbox"/>	
<b>Signs off Service User Feedback</b>	<input type="checkbox"/>		

## Worksheet Two – SLOT Analysis template

<b>Strengths</b>	<b>Learning Needs</b>
<b>Opportunities</b>	<b>Threats</b>

## **Worksheet Three – Giving Feedback Scenarios**

### **Scenario One**

Your student is in her first year on her second placement. You note that she is completing the observations chart incorrectly. You need to give her feedback.

### **Scenario Two**

Your student is in her second year child nursing and is looking after an 8-year old child receiving a blood transfusion. The patient's mother has just complained that her child has the wrong name band on. You need to provide feedback to your student

### **Scenario Three**

Your student is a third year learning disabilities nurse. You and your colleagues have noticed she is often on her phone checking messages. You need to provide feedback

### **Scenario Four**

Your student is a second year mental health nurse and is doing a CAMHS placement. He does not seem to be engaged in the placement and you have noticed he is often sitting around doing nothing. You need to give him feedback

### **Scenario Five**

Your student is a third year nurse and you have noticed that she has just gone to treat a patient with D&V without wearing PPE. You need to give her feedback

## **Worksheet Four – Coaching Scenarios**

### **Scenario One**

Your student is in her first year and first placement as an adult nurse and you have noticed that she is putting clinical waste in the yellow bin. You need to coach her on the correct protocol and reasoning behind it.

### **Scenario Two**

Your student is a first year mental health nurse. You have noticed that her hand hygiene is not very good and she frequently forgets to wash her hands. You need to coach her on the correct protocol and reasoning behind it.

### **Scenario Three**

Your student is a first year learning disabilities nurse on her first placement. You are conducting the initial interview and want to coach her through the process

### **Scenario Four**

Your student is a second year child nurse and although her communication with children is good, her communication with parents is not very good as she doesn't make eye contact and appears to come across quite blunt. You need to coach her through this.

### **Scenario Five**

Your student is a first year adult nursing student on a medical ward. Her attitude towards her appearance is very relaxed – she is wearing a light coloured nail varnish and plimsolls. You need to coach her through this to help her understand why correct uniform is required.