

Nursing Practice Assessment Document 2.0 (PAD)

Guide to using the PAD

BSc (Hons)/PG Dip/MSc Programmes

PLPAD 2.0, Future Nurse: Standards of proficiency for registered nurses, (NMC 2018)



Completing the Practice Assessment Document

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Introduction

The purpose of this guide is to provide guidance for the completion of the Nursing Pan London Practice Assessment Document (PAD) 2.0. General guidelines are provided for each element within the PAD. This guidance should be read alongside specific instructions that may apply to individual Universities.

The PLPAD 2.0 has been developed to ensure that student nurses are prepared to successfully meet the *Future Nurse: Standards of proficiency for registered nurses* (NMC 2018) 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, 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. *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.*

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 and ensuring that the student is supernumerary without being counted as part of the staffing for safe and effective care in the practice setting. 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 document 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/interprofessional working
- Record of communication/additional feedback
- Record of peer feedback – Parts 2 & 3
- Ongoing Achievement Record

[N.B. The screen shots currently include the Mapping Codes from the *Future Nurse: Standards of proficiency for registered nurses (NMC 2018)*. Following validation the mapping codes are removed from the documents. The screen shots in this Guide will be updated following validation.]

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. The following three levels of performance are to be met by the end of each Part: refer to table 1

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

Table 1

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 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.

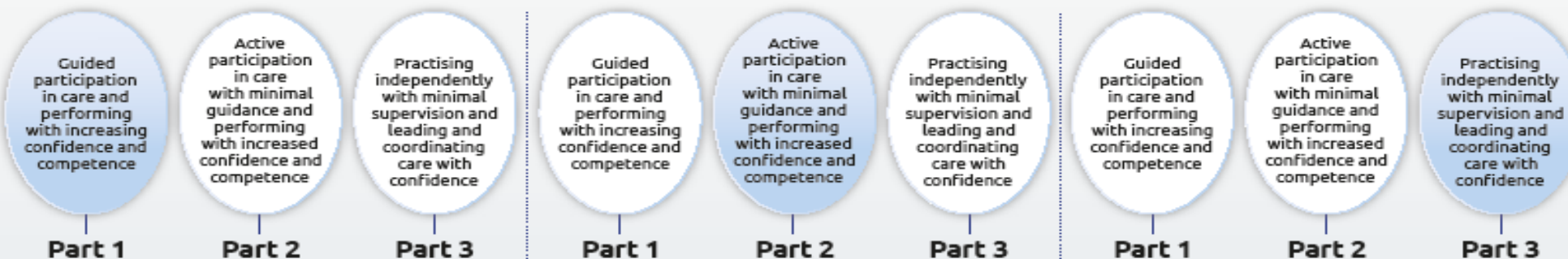
Within the PAD there are guidelines relating to how the assessment is managed within each University, and the student should ensure that they have read and understood these.

Statement regarding the use of the term "Parts"

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

Criteria for Assessment in Practice Overall Framework Parts 1 – 3

Criteria for Assessment in Practice Overall Framework — Parts 1 - 3



Part 1: Guided participation in Care

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

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

Part 2: Active participation in care with minimal guidance

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

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

Part 3: Leads and coordinates care

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

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

Table 2

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

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 could be a Placement Manager, Ward Manager, Team Leader, Service Manager or other.

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. (refer to page 8)

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. (refer to page 9)

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. (refer to page 10 and university guidelines)

Placement 1

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

Name of Placement Area:

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

Placement Telephone Number:

Placement Contact Email:

Start Date..... End Date..... No. of Hours.....

Nominated person to support student and address concerns

Name:

Designation:

Contact email address:

Practice Assessor Details:

Name:

Designation:

Contact email address:

Academic Assessor Details (for part):

Name:

Designation:

Contact email address:

Practice Supervisor Responsibilities

Practice Supervisors (PS) are Registered Nurses 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.

Placement 1: Initial Interview

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

Placement Area Name:

Student to identify learning and development needs (with guidance from the Practice Supervisor)

Taking available learning opportunities into consideration, the student and Practice Supervisor/Practice Assessor to negotiate and agree a learning plan.

Outline of learning plan

How will this be achieved?

Learning plan for placement agreed by Practice Assessor (where applicable) YES/NO

Student's Name:

Signature:

Date:

Practice Supervisor/Assessor's Name:

Signature:

Date:

Practice Assessor Responsibilities

Practice Assessors (PA) are Registered Nurses or Midwives 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 Practice Supervisors 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 Practice Assessor or Practice Supervisor; 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. Depending on the AEI and the local practice placement policy you may have to inform the nominated person.

Placement 1: Final Interview

This should take place towards the end of the placement

Student's self-assessment/reflection on progress

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

Knowledge:

Skills:

Attitudes and values:

Practice Assessor's comments

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

Knowledge:

Skills:

Attitudes and values:

Please record any further comments on the next page

Learning and Development Needs

To be agreed between the Practice Assessor and Student

Practice Assessor to identify specific areas to take forward to the next placement

Was an Action Plan required to support the student?

YES / NO

If Yes, was the Academic Assessor informed?

YES / NO

Checklist for assessed documents	TICK	Practice Assessor Initial	STUDENT Initial
The professional value statements have been signed at both Mid-Point and Final Interview			
The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed			
The practice placement hours have been checked and signed			
All the interview records and development plans have been completed and signed as appropriate			
The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document.			
The Practice Assessor has completed the Ongoing Achievement Record (OAR)			
Student's Name: _____	Signature: _____	Date: _____	
Practice Assessor's Name: _____	Signature: _____	Date: _____	
Additional Signature (If Applicable, e.g. Academic Assessor): Name: _____	Signature: _____	Date: _____	

Academic Assessor Responsibilities

Academic Assessors are Registered Nurses or Midwives 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: In Part 3 to ensure the student is able to provide care, lead and co-ordinate care confidently they will meet with their Practice Assessor or Practice Supervisor weekly to discuss and summarise achievement. The Academic Assessor will review and confirm the overall achievement in the PAD and recommend progression to registration in the OAR.

End of Part 1

To be completed by the Practice Assessor and Academic Assessor

Practice Assessor:

In addition to the achievement of professional values and proficiencies

Has the student achieved the Episode of Care? Yes/No

Has the student achieved Medicines Management? Yes/No

I confirm that the student has participated in care (with guidance), achieved all the requirements of Part 1 and is performing with increasing confidence and competence.

Practice Assessor: *(print name below)*

Practice Assessor's signature:

Date:

I recommend that the student can progress to Part 2.

Academic Assessor: *(print name below)*

Academic Assessor's signature:

Date:

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.

List of Practice Supervisors

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

Name (please print)	Job Title	Signature	Initials	Placement

Checklist for assessed documents	Tick	Practice Assessor Initial	Student Initial
The professional value statements have been signed at both Mid-Point and Final Interview			
The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed			
The practice placement hours have been checked and signed			
All the interview records and development plans have been completed and signed as appropriate			
The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document.			
The Practice Assessor has completed the Ongoing Achievement Record (OAR)			
Student's Name: _____ Signature: _____ Date: _____			
Practice Assessor's Name: _____ Signature: _____ Date: _____			
Additional Signature (If Applicable, e.g. Academic Assessor): Name: _____ Signature: _____ Date: _____			

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.

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

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, 2015). 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.

Professional Values in Practice (Part 1)

Students are required to demonstrate high standards of professional conduct at all times during their placements. Students should work within ethical and legal frameworks, and be able to articulate the underpinning values of The Code (NMC, 2015). Professional Values reflect a number of proficiency statements and are captured under the 4 sections of The Code. (1BAP 1.2)

The Practice Assessor has responsibility for assessing Professional Values through the Mid-Point review can be completed by a Practice Supervisor in liaison with the Practice Assessor.

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

	Achieved Mid-Point Yes/No	Initial Date	Achieved Final Yes/No	Initial Date (Final)
Prioritise people				
1. The student maintains confidentiality in accordance with the NMC code. (1 BAP 1.1)				
2. The student is non-judgemental, respectful and courteous at all times when interacting with patients/service users/carers and all colleagues. (1 BAP 1.14)				
3. The student maintains the person's privacy and dignity, seeks consent prior to care and advocates on their behalf. (3 ANPC 3.6, 4PEC 4.1)				
4. The student is caring, compassionate and sensitive to the needs of others. (1 BAP 1.14)				
5. The student understands their professional responsibility in adopting and promoting a healthy lifestyle for the well-being of themselves and others. (1 BAP 1.5, 1.6)				
Practise effectively				
6. The student maintains consistent, safe and person-centred practice. (4 PEC)				
7. The student is able to work effectively within the inter-disciplinary team with the intent of building professional relationships. (1 BAP 1.13, 1 BAP 1.18, 5 LNCWIT 5.4)				
8. The student makes a consistent effort to engage in the requisite standards of care and learning based on best available evidence. (1 BAP 1.7, 1.8, 1.17)				
Promote trust				
9. The student demonstrates openness (candour), trustworthiness and integrity. (1 BAP 1.3)				
10. The student reports any concerns to the appropriate professional member of staff when appropriate e.g. safeguarding. (1 BAP 1.3, 3 ANPC 3.9)				
11. The student demonstrates the ability to listen, seek clarification and carry out instructions safely. (1 BAP 1.11, A1 1, A1.6)				
12. The student is able to recognise and work within the limitations of own knowledge, skills and professional boundaries and understand that they are responsible for their own actions. (1 BAP 1.8, 1 BAP 1.17)				

	Achieved Mid-Point Yes/No	Initial Date	Achieved Final Yes/No	Initial Date (Final)
Promote professionalism and trust				
13. The student's personal presentation and dress code is in accordance with the local policy. (1 BAP 1.19)				
14. The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement. (1 BAP 1.19)				
15. The student demonstrates that they are self-aware and can recognise their own emotions and those of others in different situations. (1 BAP 1.10)				
Mid-point assessment				
Practice Supervisor Name:		Signature:		Date:
Reviewed and agreed by Practice Assessor		Signature:		Date:
Practice Assessor Name:		Signature:		Date:
End point: Student reflection on meeting Professional Values				
Choose one example from your practice on this placement to demonstrate how you practice within the NMC Code (ensure confidentiality is maintained). For each placement, please select a different section of The Code to reflect on.				
Student Name:		Signature:		Date:
Final assessment - please add comments on Final Interview Page				
Practice Assessor Name:		Signature:		Date:

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/carers 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.

Patient/Service User/Carer Feedback Form

Practice Supervisors/Practice Assessors should obtain consent from patients/service users/carers who should feel able to decline to participate.

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

Tick if you are:	The Patient/Service User <input type="checkbox"/>		Carer/Relative <input type="checkbox"/>		
How happy were you with the way the student nurse...	Very Happy 	Happy 	I'm not sure 	Unhappy 	Very unhappy 
...cared for you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...listened to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...understood the way you felt?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...talked to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...showed you respect?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What did the student nurse do well?

What could the student nurse have done differently?

Practice Supervisor/Practice Assessor:

Name:

Signature:

Date:

Student Name:

Signature:

Date:

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

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 working with and learning from others/inter-professional working

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

Practice Supervisor's Comments:

Practice Supervisor Name:

Signature:

Date:

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

Student Name:

Signature:

Date:

Practice Supervisor's Comments:

Practice Supervisor Name:

Signature:

Date:

More pages can be downloaded as per University guidelines

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 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.

Record of communication/additional feedback
 These records can be completed by Practice Supervisors, Practice Assessors, Academic Assessor or any other members of the team involved in the supervision and/or assessment of the student.

Communication/additional feedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Name:	Designation:
Signature:	Date:

More pages can be downloaded as per University guidelines

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, 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.

Record of peer feedback

Feedback is an essential part of the learning process. Through engaging in peer review and receiving feedback from a number of peers, students are exposed to a greater diversity of perspectives as well as enabling students to develop skills in peer review and feedback. (NMC, 2018 5LMNCWIT 5.8, 5.9)

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

Peer feedback	
Name:	Programme/year:
Signature:	Date:
Peer feedback	
Name:	Programme/year:
Signature:	Date:

More pages can be downloaded as per University guidelines

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.

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.

Part 3 Assessment of Performance: The individual completing the assessment should draw on a range of observed experiences in which the student demonstrates the required knowledge, skills, attitudes and values in co-ordinating high quality person/family centred care, ensuring all care is underpinned by effective communication skills. *Those marked with an * may have been met in Part 2. Record achievement of Part 3 proficiencies marked * 3 in OAR as well.*

Confidently assesses needs and plans person-centred care								
	YES = Achieved, NO = NOT Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
1. Utilises a range of strategies/resources (including relevant diagnostic equipment) to undertake a comprehensive whole body assessment to plan and prioritise evidence-based person-centred care (3ANPC 3.2,3.3)								
2. Assesses a persons' capacity to make best interest decisions about their own care and applies processes for making reasonable adjustments when a person does not have capacity. (1B/AP 1.12, 3ANPC 3.6, 3ANPC 3.7)								
3 Actively participates in the safe referral of people to other professionals or services such as cognitive behavioural therapy or talking therapies across health and social care as appropriate. (3ANPC 3.16, A.3.4, A3.6)								

OAR

Proficiencies	Achievement of Proficiencies in either Part 2 and Part 3			
	Practice Assessor to complete by the end of Part 2		Practice Assessor to complete by the end of Part 3	
	Achieved	Yes/No	Signature	Date
Part 2, No. 3 Recognise people at risk of self-harm and/or suicidal ideation and demonstrates the knowledge and skills required to support person-centred evidence-based practice using appropriate risk assessment tools as needed.				
Part 2, No. 4 Demonstrates an understanding of the needs of people and families for care at the end of life and contributes to the decision-making relating to treatment and care preferences.				
Part 2, No. 10 Utilises aseptic techniques when undertaking wound care and in managing wound and drainage processes (including management of sutures and vacuum removal where appropriate)				
Part 2, No. 14 Insert, manage and remove urinary catheters for all genders and assist with clean, intermittent self-catheterisation where appropriate.				
Part 2, No. 15 Undertakes, responds to and interprets neurological observations and assessments and can recognise and manage seizures (where appropriate).				
Part 2 confirmation				
Student Name:		Signature:		Date:
Practice Assessor's Name:		Signature:		Date:
Part 3 confirmation				
Student Name:		Signature:		Date:
Practice Assessor's Name:		Signature:		Date:

Episode of Care

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. **This assessment must be completed by a Practice Assessor.**

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.

Student reflection on an episode of care	
<p>Within your reflection, describe the episode of care and how you planned and supervised the junior learner/peer in practice who delivered person-centred care.</p>	<p>What would you have done differently?</p>
<p>What did you do well?</p>	<p>What learning from this episode of care will support your professional development going forward in your teaching and learning role?</p>

Practice Assessor feedback		
Based on the student's reflection, your observation and discussion of the episode of care, please assess and comment on the following: YES = Achieved No = Not Achieved (Refer to Criteria for Assessment in Practice)		
Proficiencies	Yes/No	Comments
<p>Assessing, planning, providing and evaluating care Chooses an appropriate care activity for the junior learner/peer to engage in and considers the learner's needs and their current level of knowledge and skills. (SLNCWIT 5.6, 5.7, 5.8)</p>		
<p>Leading nursing care and working in teams Effectively prepares the junior learner/peer and provides them with clear instructions and explanations about the care activity they are to engage in. (SLNCWIT 5.3, 5.4, A4.1.1, 4.1.2)</p>		
<p>Improving safety and quality of care The student undertakes a risk assessment to ensure that the person(s) receiving care is not at risk from the learner/care activity. Continuous supervision and support is provided to the junior learner/peer throughout the care activity. (6ISQC 6.5, 6.6)</p>		
<p>Co-ordinating care: Effectively communicates throughout the care activity, evaluates the care given and provides the junior learner / peer with constructive verbal and written feedback. (CC 7.7, A4.1.1 – 4.1.5)</p>		
<p>If any of the Standards are 'Not Achieved' this will require a re-assessment and the Academic Assessor must be informed</p>		
<p>Student's signature:</p>		<p>Date:</p>
<p>Practice Assessor's signature:</p>		<p>Date:</p>

Medicines Management

The student is required to undertake a Medicines Management assessment during each Part. **This assessment must be completed by a Practice Assessor.**

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.

Dispensing, administering and management of medicines is an integral part of nursing care. The student should be provided with regular opportunities to practice medicines management on all placements where appropriate.

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 2015) and *A Competency Framework for all Prescribers* (The Royal Pharmaceutical Society 2016).

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

Progression Towards Registration – Record of Weekly Meetings in Final Placement

Registered Nurses play a vital role in providing, leading and co-ordinating care that is compassionate, evidence-based, and person-centred. They are accountable for their own actions and must be able to work autonomously, or as an equal partner with a range of other professionals and in interdisciplinary teams. (NMC, 2018, p3).

During the final placement in Part 3 the Practice Assessor should schedule a weekly meeting of one hour per week for the student to reflect, receive feedback and record achievements and to confirm that the student is practising independently and leading and coordinating care with confidence. Some meetings may be undertaken by a Practice Supervisor who is a registered nurses with more than six months experience.

FAQs

Q: What action should be taken if the student is not demonstrating independent practice or leading and coordinating care with confidence?

A: This needs to be discussed with the Academic Assessor and an action plan devised to address the areas of concern.

Progression towards registration – record of weekly meetings in final placement (consolidation placement)
Registered nurses play a vital role in providing, leading and co-ordinating care that is compassionate, evidence-based, and person-centred. They are accountable for their own actions and must be able to work autonomously, or as an equal partner with a range of other professionals and in interdisciplinary teams. (NMC, 2018, p3).

During your final placement a Practice Supervisor (registered nurse with more than six months experience) or nominated Practice Assessor should schedule a weekly meeting of one hour per week for the student to reflect, receive feedback and record achievements and confirm that the student is practising independently with minimal supervision and leading and coordinating care with confidence.

Name of Practice Assessor:		Designation:
Date and time of meeting	During meeting review progression, documentation and summarise key points from discussions	Signatures
		Practice Supervisor/ Assessor: Student:
		Practice Supervisor/ Assessor: Student:
		Practice Supervisor/ Assessor: Student:
		Practice Supervisor/ Assessor: Student:
		Practice Supervisor/ Assessor: Student:
		Practice Supervisor/ Assessor: Student:

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.

Action Plan

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

The Practice Assessor must liaise with the Academic Assessor and senior practice representative

The **SMART** principles should be used to construct the Action Plan.

Placement Name		Date action plan initiated:		
Nature of concern <small>Refer to Professional Value(s), Proficiency and/or Episode of Care (Specific)</small>	What does the student need to demonstrate; objectives and measure of success <small>(Measurable, Achievable and Realistic)</small>	Support available and who is responsible	Date for review <small>(Timed)</small>	Review/feedback
				Date: Comments:
Student's Name:		Signature:	Date:	Practice Assessor Name: Signature:
Practice Assessor's Name:		Signature:	Date:	
Academic Assessor's Name:		Signature:	Date:	

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.

PRACTICE HOURS
Please start a new page per placement
 To be completed as per your local University Requirements
 Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialised by a member of staff

Date	Placement	Total Hrs	Shift Initials	Shift Type	Date	Placement	Total Hrs	Shift Initials	Shift Type	
Example of hours confirmation					Sun	1/7/09	Pedic Ward	T.S	PP	E
Mon					Mon					
Tue					Tue					
Wed					Wed					
Thu					Thu					
Fri					Fri					
Sat					Sat					
Sun					Sun					
		Weekly total =					Weekly total =			
Mon					Mon					
Tue					Tue					
Wed					Wed					
Thu					Thu					
Fri					Fri					
Sat					Sat					
Sun					Sun					
		Weekly total =					Weekly total =			
Mon					Mon					
Tue					Tue					
Wed					Wed					
Thu					Thu					
Fri					Fri					
Sat					Sat					
Sun					Sun					
		Weekly total =					Weekly total =			

Total hours of completed practice on this page	Figure	Words
Total hours of Sickness/Absence on this page	Figure	Words
Staff member: I have checked the hours of experience recorded by the student,		
Signed: _____ (Staff member)	Name (print): _____	
Placement Area: _____	Date: _____	
Declaration by Student: I confirm that the hours recorded on this sheet are a true and accurate account of the shifts I have worked.		
Signed: _____ (Student)	Date: _____	

It is expected that the student will work a range of shifts to meet NMC Requirements
 Shift Codes D = Day Shift, N = Night Shift, S = Sickness, A = Absent

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 through 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.

PART 1 - PLACEMENT 1

To be completed by the Practice Assessor

Organisation/Placement provider:

Name of Practice Area:

Type of Experience:

Telephone/email contacts:

Start date:

End date:

No. of hours allocated:

Summary of student's strengths and areas for further development

Has the student achieved the professional values?

Yes/No

Has the student achieved the agreed skills?

Yes/No

Has the student achieved their agreed learning and development needs?

Yes/No

Has the student completed the required hours?

Yes/No

Has an Action Plan been put in place? (if yes, see PAD document)

Yes/No

Student name: (print name):

Student signature:

Date:

Print Practice Assessor name:

Practice Assessor's signature:

Date:

Number of hours completed:

Outstanding hours:

Number of days of sickness:

Absence:

Authorised/Unauthorised

Academic Assessor's Comments/Review of the PAD document
(This can be completed following the final review)

Name:

Signature:

Date:

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 practice (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

3. **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.
4. **Medicines Management** – these assessments can be carried out in any setting where there is regular dispensing and administering 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.