

Student		Programme Lead
Name		Name
Number	Cohort	Email address
Email address		Personal Tutor
NMC Number (PIN)	Expiry Date	Name
Signature		Email address
Placement provider		

[University logo here]

PAN LONDON PRACTICE ASSESSMENT DOCUMENT

Specialist Community Public Health Nursing (Health Visitor)

PGDip/MSc

Standards of proficiency for specialist community public health nurses (NMC 2022)



University of
Hertfordshire **UH**



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Keep your Practice Assessment Document with you at all times in practice in order to record and review your progress with your Practice Supervisor, Practice Assessor and Academic Assessor

Acknowledgements



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This Practice Assessment Document (PAD) master template has been developed by the Pan London group of universities in collaboration with colleagues from:

- Bournemouth University
- Sheffield Hallam University
- Ulster University
- University of Bolton
- University of Northampton and
- University of Surrey.



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This PAD in Word version is available from the Pan London Practice Learning Group website: <https://plplg.uk>

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Welcome to the Practice Assessment Document (PAD)

Introduction

This document is your ongoing record of achievement in practice learning. It is designed to record evidence that you meet the required proficiencies and outcomes for the Specialist Community Public Health Nurse (SCPHN) programme of study, in line with the NMC standards for student supervision and assessment¹. At the point of SCPHN registration, you are required to demonstrate that you meet the requirements of the Nursing and Midwifery Council² for your field of practice (health visitor, school nurse, occupational health nurse).

The PAD makes up a significant part of your overall programme assessment. It will be subject to formal university procedures. If you require further guidance about any aspect of the SCPHN PAD, please seek guidance from your Academic Assessor.

Commonly used terminology

Please familiarise yourself with the terms and acronyms you will find in this document.

Academic Assessor (AA): This is the person nominated by your university to collate and confirm your achievement of proficiencies and recommend your registration to the NMC at the end of your programme. The Academic Assessor must be a registered SCPHN within your field of practice. Academic assessors cannot undertake the role of practice supervisor or practice assessor. *See also 'Academic Assessor responsibilities' below.*

Academic representative: This is the person employed by a university to support students on SCPHN programmes. This could be a link lecturer, personal tutor or another member of the academic team. It may be your Academic Assessor.

Alternative learning experience: A location, team or experience that is away from / different than your main practice placement, where you will be able to acquire knowledge and skills that complement the ones you can learn in your main placement.

Consolidation of practice: The final practice period of your programme set by your university where you are assessed by your Practice Assessor as meeting the requirements of the NMC.

Evidence: Documentation supporting your achievement of the proficiencies and programme outcomes required by the NMC. This may include observation and discussion as well as records of meetings, communications/additional feedback, alternative learning experiences, client/service user/carers feedback and reflective journal/additional evidence.

Learning period: A stage in the programme which represents a cycle of learning and

¹ [NMC \(2018\) Standards for student supervision and assessment](#)

² [NMC \(2022\) Standards of proficiency for specialist community public health nurses](#)

assessment, at the end of which your progress will be evaluated before continuing to the next learning period. The period length will be determined by your university and could be a term, semester or other length depending on your programme. Refer to your university guidelines for more information.

NMC: Nursing and Midwifery Council

PAD: Practice Assessment Document

People Who Use Services: Members of the public who have used the SCPHN service either individually or by belonging to a group, also known as 'service users'.

Practice Assessor (PA): A registered SCPHN who is nominated by the practice placement provider (e.g. NHS Trust), having been appropriately prepared for the role to meet the SSSA standards. The Practice Assessor will undertake reviews and assessments, working with the Practice Supervisor and Academic Assessor. Practice assessors cannot undertake the role of practice supervisor simultaneously for the same student. *See also 'Practice Assessor responsibilities' below.*

Practice Lead: The person employed by the practice placement provider (e.g. NHS Trust) to support student SCPHN in practice and manage their practice learning experience, in partnership with the Programme Lead.

Practice placement: The location where you are undertaking your practice learning, and where you will be supervised and assessed.

Practice Supervisor (PS): A registered SCPHN (or has relevant SCPHN practice experience in accordance with SSSA standards) who will supervise and support a student in practice. The Practice Supervisor will provide verbal and written feedback to the student. Practice supervisors cannot undertake the role of practice assessor simultaneously for the same student. *See also 'Practice Supervisor responsibilities' below.*

Proficiencies: Knowledge and skills that must be achieved by the end of your SCPHN programme to demonstrate that you meet the requirements of the NMC³. You can view the full list of core and field-specific proficiencies in the Assessment of Proficiencies form.

Programme Lead: The person employed by the university to manage the SCPHN programme and provide overall guidance and support to students in practice, in partnership with the Practice Lead.

SCPHN: Specialist Community Public Health Nurse

SSSA: Standards for Student Supervision and Assessment, set by the NMC.

³ [NMC \(2022\) Standards of proficiency for specialist community public health nurses](#)

Responsibilities for those completing the SCPHN PAD

Student responsibilities

Continuous assessment is an integral aspect of assessment in practice and you are expected to show evidence of consistent achievement.

You should:

- engage positively with all learning opportunities
- take responsibility for your own learning
- know how to access support, both within practice and from your university.

You will work with and receive written feedback from a range of professional staff and you are required to reflect on your learning.

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

You are responsible for the safekeeping and maintenance of the PAD. It should be kept with you and available to your Practice Supervisor, Practice Assessor and Academic Assessor at all times. Alterations should be made by crossing through with one line, signed and dated.

You will have access to confidential information when in your practice placement. The ePAD must not contain any patient/service user/carer/practitioner identifiable information and you must sign the **Student Declaration** form to confirm this. Contents must not be disclosed to any unauthorised person or downloaded, copied or used outside your placement or university.

As an NMC registrant, you are required to demonstrate high standards of professional conduct at all times and your attitudes and behaviours will be monitored during your placement. You will review professional values with your Practice Assessor and confirm your commitment to them at the start of your placement using the **Professional Values in Practice** form.

Practice Supervisor responsibilities

(Registered SCPHN with current knowledge and experience in the field of practice)

As a Practice Supervisor you have an important role in supporting and guiding the student through their learning experience towards safe and effective practice. This includes:

- facilitating learning opportunities (including any reasonable adjustments the student may need to get maximum benefit)
- support and supervision of students, providing feedback on their progress towards achievement of proficiency and skills
- having 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.

Practice Assessor responsibilities

(Registered SCPHN with appropriate experience in the field of practice and prepared for the role)

As a Practice Assessor you have a key role in assessing the student's proficiency, providing assurance of achievements and competence to practice safely and effectively. To do this you will:

- complete the Learning Agreement with the student at the start of each learning period, taking into account their learning needs self assessment
- periodically observe the student across environments to inform decisions for assessment and progression
- consider the student's reflections on their learning and feedback from Practice Supervisors and other professionals to inform decisions for assessment and progression

When assessing the student, you should take into account sources of evidence that encompass knowledge, skills, attitudes and the views of those receiving care.

You will liaise with the Academic Assessor, scheduling progress reviews at relevant points. If the student is not making sufficient progress, this must be addressed in an action plan meeting, which must include the student and the Academic Assessor.

Academic Assessor responsibilities

(Member of faculty in the university who is a registered SCPHN in the field of practice and prepared for the role)

The Academic Assessor will:

- understand the student's learning and achievement in practice
- enable scheduled progress review with the student and Practice Assessor
- work in partnership with the Practice Assessor to evaluate the student for progression at the end of each learning period
- evaluate and recommend the student to the NMC for SCPHN registration at the end of the programme
- be the initial point of contact for the student or Practice Assessor if an issue arises in practice.

Easy reference guide: Staff responsibilities in the SCPHN PAD
These responsibilities reflect the requirements of the NMC⁴

	Practice Supervisor (PS) (registered SCPHN)	Practice Assessor (PA) (registered SCPHN, prepared for role)	Academic Assessor (AA) (nominated by the university)	Non-SCPHN professional (e.g. registered nurse, social worker, midwife)
Can I complete the learning agreement with the student?	No	Yes, complete the Learning Agreement form with the student at the start of each learning period.	No	No
Can I assess that a student has met a proficiency statement?	No. The role of the PS is to support the student in acquiring skill and knowledge to enable them to achieve proficiency.	Yes. The role of the PA is to assess the student periodically and record their progress towards / achievement of proficiencies.	No, you cannot act as the AA and PA or PS.	No
	You cannot act as the PS and PA for the same student.			
Can I provide feedback to inform the formative and summative assessments?	Yes, this is an important role of the PS. Complete the Additional Feedback form or the Record of Meeting form as appropriate.	Yes, complete the Additional Feedback form or the Record of Meeting form as appropriate.	Yes, complete the Additional Feedback form or the Record of Meeting form as appropriate.	Yes, complete the Additional Feedback form.
Can I complete the formative and summative assessments?	No	Yes. The role of the PA is to confirm student achievement by undertaking reviews at relevant points in each learning period.	No	No
Should I write an action plan if I am concerned about the student's performance?	No, record your concerns in the Additional Feedback form and contact the PA.	Yes, in partnership with the AA. You must also complete the action plan review with the AA.	Yes, in partnership with the PA. You must also complete the action plan review with the PA.	No, record your concerns in the Additional Feedback form and contact the PA.

⁴ [NMC \(2018\) Standards for student supervision and assessment](#)

Guidance for using the PAD to facilitate learning and assessment in practice

Components of Practice Learning and Assessment (Also refer to your university guidance/regulations)

Proficiencies: These comprise the 6 spheres of knowledge and skills defined by the NMC for SCPHN programmes. Proficiencies in the PAD are taken from the [NMC Standards of Proficiency for Specialist Community Public Health Nurses \(SCPHN\)](#) (NMC 2022). These can be gained in the practice placement or alternative learning experiences and must be assessed as 'Demonstrated' at least once by the end of the programme. Students are required to evidence their achievement. Practice Assessors are required to assess the student's progress towards and achievement of proficiencies periodically to ensure the student is progressing in line with expectations. *See the Proficiencies section of the PAD for more information.*

Feedback: Practice Supervisors, the Practice Assessor and other staff working with the student are expected to provide constructive feedback to aid the student's practice learning and to assist the Practice Assessor in the assessment of the student's progress. Staff should use the relevant form for the meeting / learning experience or the Record of Communication / Additional Feedback form.

Students should also seek feedback from a client/service user/carer relating to an episode of care provided by the student. The Client/Service user/Carer Feedback form has been specially designed for this purpose. This will also be considered by the Practice Assessor in the assessment of the student's progress.

Student Self Assessment and Reflection: Students are expected to take responsibility for their learning. This is demonstrated in their learning needs self assessments and their reflections on learning opportunities and experiences. They are required to reflect on their needs and progress at specific points during each learning period, for example:

- Self assessment (start of each learning period)
- Following the formative assessment meeting (middle of each learning period)
- Following the summative assessment meeting (end of each learning period)

In addition, students should document their reflection on alternative learning experiences when they arise, and use the reflective journal as directed by the university.

Learning Agreement: The Practice Assessor and student will jointly review the student's learning needs self assessment and create a plan for the learning period.

Formative Assessment: Practice Assessors should conduct a formative assessment as per the university's guidance. This assessment allows adjustments to be made to the learning plan for the remainder of the period if needed.

Summative Assessment: Practice Assessors are required to conduct a summative assessment at the end of a learning period. In this assessment the Practice Assessor will evaluate whether the student has reached the level required to progress onto the next

learning period (or for NMC registration at the end of the programme). They will also check and confirm the recorded practice hours and agree with the student how to make up any missing hours.

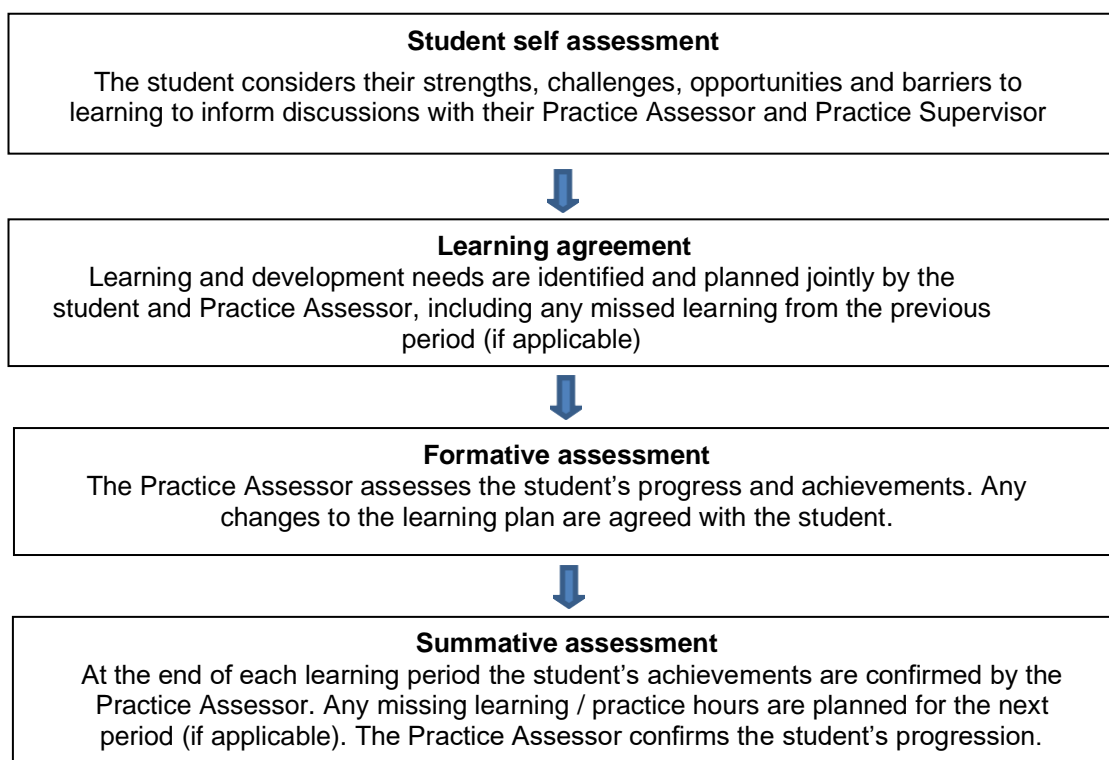
Progress Review: The Practice Assessor and Academic Assessor will meet with the student periodically to review the student's progress together. This allows the Academic Assessor to keep up to date with the student's achievements and provide an input to their learning plan if needed.

Action Plan: The Practice Assessor and Academic Assessor will meet with the student if the student's performance causes concern and they require additional support. The action plan will put Practice Supervisor and Practice Assessor support in place to ensure the student reaches specified objectives during a certain time period. The student's achievement of those objectives will be reviewed by the Practice Assessor and Academic Assessor with the student at the end of that period.

Alternative Learning Experience: Students should record and reflect on the practice learning they have gained during alternative experiences, i.e. those away from / different than their main practice placement. They should aim to get written comments from the person supervising their learning if applicable.

Process of Practice Assessment

The diagram below explains the forms available in the PAD to support the practice learning planning and assessment cycle.



Contact your Academic Assessor if you require further guidance about any aspect of the SCPHN PAD.

Additional University Guidance

Heading level 2

Individual University Guidance

(remove page if not required; refresh the table of contents)

PAD Signatory Record

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

Practice Supervisors' Signatures and Contact Details

Practice Supervisors are Specialist Community Public Health Nurses (SCPHN). Students are assigned to Practice Supervisors who are registered SCPHNs with appropriate equivalent experience for the student's field of practice and are appropriately prepared for the role. Other supervisors and practice representatives should also provide their details and sample signature on this page.

Name		Signature		Initials	
Email		Job Title		Organisation/ Location	
Name		Signature		Initials	
Email		Job Title		Organisation/ Location	
Name		Signature		Initials	
Email		Job Title		Organisation/ Location	
Name		Signature		Initials	
Email		Job Title		Organisation/ Location	
Name		Signature		Initials	
Email		Job Title		Organisation/ Location	
Name		Signature		Initials	
Email		Job Title		Organisation/ Location	
Name		Signature		Initials	
Email		Job Title		Organisation/ Location	
Name		Signature		Initials	
Email		Job Title		Organisation/ Location	

Practice Assessors' Signatures and Contact Details

Practice Assessors are Specialist Community Public Health Nurses (SCPHN). Students are assigned to Practice Assessors who are registered SCPHNs with appropriate equivalent experience for the student's field of practice and are appropriately prepared for the role.

Name		Signature		Initials		NMC PIN / Expiry date	
Email		Job Title		Organisation/ Location			
Name		Signature		Initials		NMC PIN / Expiry date	
Email		Job Title		Organisation/ Location			
Name		Signature		Initials		NMC PIN / Expiry date	
Email		Job Title		Organisation/ Location			

Academic Assessors' Signatures and Contact Details

Other academic representatives should also provide their details and sample signature below.

Name		Signature		Initials	
Email		Job Title		Role	
Name		Signature		Initials	
Email		Job Title		Role	
Name		Signature		Initials	
Email		Job Title		Role	
Name		Signature		Initials	
Email		Job Title		Role	

Practice Learning Calendar

Use this page to keep track of your key forms during your programme.

Learning Period 1			
Start date		End date	
Form completion dates			
	Target	Scheduled	Actual
Self Assessment 1			
Learning Agreement 1			
Formative Assessment 1			
Summative Assessment 1			

Learning Period 2			
Start date		End date	
Form completion dates			
	Target	Scheduled	Actual
Self Assessment 2			
Learning Agreement 2			
Formative Assessment 2			
Summative Assessment 2			

Learning Period 3			
Start date		End date	
Form completion dates			
	Target	Scheduled	Actual
Self Assessment 3			
Learning Agreement 3			
Formative Assessment 3			
Summative Assessment 3			

Student Declaration

This page must be completed within the first 2 weeks of your placement.

Student Declaration

Confidentiality and Anonymity

All information recorded within this PAD must be anonymised to ensure the protection of patients, clients, service users, carers and practitioners. In order to maintain confidentiality in accordance with the NMC (2018), forms that are completed in the PAD must not contain identifying information.

Tick to confirm

☐

I confirm that all information recorded within this PAD will be anonymised

Reasonable Adjustments for Practice Learning

Your placement provider must take account of students' individual needs and personal circumstances, including making reasonable adjustments for students with disabilities. The purpose of reasonable adjustments is to prevent students with disabilities from being at a substantial disadvantage, and requires changes to be made to accommodate disability or learning differences as set out in equalities and human rights legislation (NMC Part 2: Standards for student supervision and assessment, 2018). You can request any reasonable adjustments that are required to support your practice learning, if you wish to do so. It is up to you to decide whether to disclose any information.

You must tick one of the boxes below

☐

I confirm that I have had the opportunity to discuss reasonable adjustments with my placement provider *

☐

Not applicable

* Please ensure you follow your university's processes to identify any reasonable adjustments necessary for you to undertake learning in practice. Please contact your university's disability support team if you need assistance.

Student Signature **Date**

Learning Period 1

Professional Values in Practice

Use this form to discuss professional values with your Practice Assessor at the start of the placement.

Professional Values in Practice

SCPHN students, as NMC registrants, are required to demonstrate high standards of professional conduct at all times. You should be able to articulate the underpinning values of The Code (NMC 2018). Your conduct will be monitored against the professional value statements below, which reflect the 4 sections of The Code.

Supervisors may raise any concerns with students and the student should respond positively to adjusting their behaviour. Any serious or ongoing concerns must be documented by the Practice Supervisor and brought to the attention of the Practice Assessor, who will liaise with the Academic Assessor and support the student using an action plan.

Prioritise people

1. The student maintains confidentiality in accordance with the NMC code and recognises limits to confidentiality, for example public interest and protection from harm.
2. The student is non-judgemental, respectful and courteous at all times when interacting with clients/people who use services/carers and colleagues.
3. The student maintains the person's privacy and dignity, seeks consent prior to care, challenges discriminatory behaviour and advocates on their behalf.
4. The student is caring, compassionate and sensitive to the needs of others demonstrating positive role modelling.
5. The student understands their professional responsibility in adopting and promoting a healthy lifestyle for the well-being of themselves and others.

Practise effectively

6. The student consistently delivers safe, person-centred and evidence based care ensuring patients/service users/carers are at the centre of decision-making.
7. The student is able to work confidently and as an equal partner within the inter-disciplinary team and can build effective professional relationships.
8. The student makes consistent effort to engage in and reflect on their learning, contributing to their own professional development and supporting the learning and development of others.
9. The student demonstrates leadership skills and is able to work autonomously, seeks support where appropriate and responds positively to feedback.

Preserve safety

10. The student demonstrates openness (candour), trustworthiness and integrity.
11. The student reports any concerns to a member of staff when appropriate and escalates as required (as per local policy/professional guidance) e.g. safeguarding.
12. The student demonstrates the appropriate listening skills, seeks clarification where appropriate and carries out instructions safely.
13. The student is able to recognise and work within the limitations of own knowledge, skills and professional boundaries and understand that they are responsible for their own actions.

Professional Values in Practice Continued

Promote professionalism and trust

14. The student's personal presentation and dress code is in accordance with the local policy.
15. The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement.
16. The student demonstrates that they use critical self-reflection and supervision to gain insight into their own values, taking into consideration the possible impact on the caring relationship and the decision making process.
17. The student acts as a role model in promoting a professional image and acts as an ambassador for the profession.

Student declaration

Tick to confirm

☐

I confirm that I will maintain the standard of conduct expected in practice

Practice Assessor

Name **Signature**

Student Signature **Date**

Self Assessment 1

Undertake this initial self assessment at the start of your placement. This will help inform your discussions with your Practice Supervisor, Practice Assessor and the learning agreement. Identify any current strengths, challenges, opportunities or barriers that are likely to affect your practice learning.

Self Assessment 1	
Strengths - <i>What qualities, transferable skills and experience do you have that will help you in your practice learning?</i>	Challenges - <i>In which areas do you think you need to make improvements?</i>
Opportunities - <i>How will you make the most of your practice learning?</i>	Barriers - <i>What could stop you from achieving your practice learning goals?</i>
Student Signature Date	

Learning Agreement 1

Use this form to discuss and record your learning agreement with your Practice Assessor at the start of your placement.

Learning Agreement 1			
Student to identify learning and development needs (informed by their self assessment for this period)		Taking available learning opportunities into consideration, the student and Practice Assessor to agree a learning plan for this period	
		Outline of learning plan	How will achievement be demonstrated?
Date / time of next assessment meeting	Practice Assessor	Student	
	Name	Signature	
	Signature	Date	

Formative Assessment 1

This form will be used by your Practice Assessor to discuss and document your progress and any changes to your learning plan. This assessment should take place half way through the learning period.

Formative Assessment 1	
Date/time of meeting	Location of meeting
Practice Assessor's comments and recommendations	
Identify the student's key strengths and achievements to date	
Identify areas that require further development during this learning period	
Formative Assessment 1 Continued	

Practice Assessor's confirmation of evidence

The Practice Assessor to confirm that the student has reached the level required at this point in the learning period

☐

Yes

☐

No*

** You must contact the Academic Assessor and complete an action plan if there is insufficient evidence of achievement*

Date / time of next assessment meeting

Practice Assessor

Name Signature

Student Signature Date

Student Reflection following Formative Assessment 1

To be completed after your formative assessment meeting.

Student reflection

Student Signature Date

Summative Assessment 1

This form will be used by your Practice Assessor to discuss and document your progress and confirm your progression to the next learning period. This assessment must take place at the end of the learning period.

Summative Assessment 1	
Date/time of meeting	Location of meeting
Practice Assessor's comments and recommendations	
Identify the student's key strengths and achievements to date	
Identify areas that require further development in the next learning period	
Practice Assessor's confirmation of evidence	
The Practice Assessor to confirm that the student has reached the level required to progress onto the next learning period	
<input type="checkbox"/> Yes	<input type="checkbox"/> No*
<i>* You must contact the Academic Assessor and complete an action plan if there is insufficient evidence of achievement</i>	

Summative Assessment 1 Continued

Practice Assessor's confirmation of practice hours

The Practice Assessor to review the student's practice hours record and confirm that it is accurate and sufficient

☐

Yes

☐

No*

** You should agree a plan with the student about how missed practice hours will be made up*

Date / time of next assessment meeting

Practice Assessor

Name Signature

Student Signature Date

Student Reflection following Summative Assessment 1

To be completed after your summative assessment meeting.

Student reflection

Student Signature Date

Learning Period 2

Self Assessment 2

Use this form to update your assessment of your learning strengths and needs at the start of your next learning period.

Self Assessment 2	
Strengths - <i>What qualities, transferable skills and experience do you have that will help you in your practice learning?</i>	Challenges - <i>In which areas do you think you need to make improvements?</i>
Opportunities - <i>How will you make the most of your practice learning?</i>	Barriers - <i>What could stop you from achieving your practice learning goals?</i>
Student Signature Date	

Learning Agreement 2

Use this form to discuss and record your learning agreement with your Practice Assessor for the second learning period. This must be completed at the start of the learning period.

Learning Agreement 2			
Student to identify learning and development needs (informed by their self assessment for this period)		Taking available learning opportunities into consideration, the student and Practice Assessor to agree a learning plan for this period	
Date / time of next assessment meeting	Practice Assessor Name Signature		Student Signature Date

Formative Assessment 2

This form will be used by your Practice Assessor to discuss and document your progress and any changes to your learning plan. This assessment should take place half way through the learning period.

Formative Assessment 2	
Date/time of meeting	Location of meeting
Practice Assessor's comments and recommendations	
Identify the student's key strengths and achievements to date	
Identify areas that require further development during this learning period	
Formative Assessment 2 Continued	

Practice Assessor's confirmation of evidence

The Practice Assessor to confirm that the student has reached the level required at this point in the learning period

☐

Yes

☐

No*

** You must contact the Academic Assessor and complete an action plan if there is insufficient evidence of achievement*

Date / time of next assessment meeting

Practice Assessor

Name Signature

Student Signature Date

Student Reflection following Formative Assessment 2

To be completed after your formative assessment meeting.

Student reflection

Student Signature Date

Summative Assessment 2

This form will be used by your Practice Assessor to discuss and document your progress and confirm your progression to the next learning period. This assessment must take place at the end of the learning period.

Summative Assessment 2	
Date/time of meeting	Location of meeting
Practice Assessor's comments and recommendations	
Identify the student's key strengths and achievements to date	
Identify areas that require further development in the next learning period	
Practice Assessor's confirmation of evidence	
The Practice Assessor to confirm that the student has reached the level required to progress onto the next learning period	
<input type="checkbox"/> Yes	<input type="checkbox"/> No*
<i>* You must contact the Academic Assessor and complete an action plan if there is insufficient evidence of achievement</i>	

Summative Assessment 2 Continued

Practice Assessor's confirmation of practice hours

The Practice Assessor to review the student's practice hours record and confirm that it is accurate and sufficient

☐

Yes

☐

No*

** You should agree a plan with the student about how missed practice hours will be made up*

Date / time of next assessment meeting

Practice Assessor

Name Signature

Student Signature Date

Student Reflection following Summative Assessment 2

To be completed after your summative assessment meeting.

Student reflection

Student Signature Date

Learning Period 3

Self Assessment 3

Use this form to update your assessment of your learning strengths and needs at the start of your final learning period.

Self Assessment 3	
Strengths - <i>What qualities, transferable skills and experience do you have that will help you in your practice learning?</i>	Challenges - <i>In which areas do you think you need to make improvements?</i>
Opportunities - <i>How will you make the most of your practice learning?</i>	Barriers - <i>What could stop you from achieving your practice learning goals?</i>
Student Signature Date	

Learning Agreement 3

Use this form to discuss and record your learning agreement with your Practice Assessor for the final learning period. This must be completed at the start of the learning period.

Learning Agreement 3			
Student to identify learning and development needs (informed by their self assessment for this period)		Taking available learning opportunities into consideration, the student and Practice Assessor to agree a learning plan for this period	
		Outline of learning plan	
		How will achievement be demonstrated?	
Date / time of next assessment meeting	Practice Assessor		Student
	Name		Signature
	Signature		Date

Formative Assessment 3

This form will be used by your Practice Assessor to discuss and document your progress and any changes to your learning plan. This assessment should take place half way through the learning period.

Formative Assessment 1	
Date/time of meeting	Location of meeting
Practice Assessor's comments and recommendations	
Identify the student's key strengths and achievements to date	
Identify areas that require further development during this learning period	

Formative Assessment 3 Continued

Practice Assessor's confirmation of evidence

The Practice Assessor to confirm that the student has reached the level required at this point in the learning period

☐

Yes

☐

No*

** You must contact the Academic Assessor and complete an action plan if there is insufficient evidence of achievement*

Date / time of next assessment meeting

Practice Assessor

Name Signature

Student Signature Date

Student Reflection following Formative Assessment 3

To be completed after your formative assessment meeting.

Student reflection

Student Signature Date

Summative Assessment 3

This form will be used by your Practice Assessor to discuss and document your progress and confirm your progression to registration. This assessment must take place at the end of the final learning period.

Summative Assessment 3	
Date/time of meeting	Location of meeting
Practice Assessor's comments and recommendations	
Identify the student's key strengths and achievements to date	
Identify areas that require further development	
Practice Assessor's confirmation of evidence	
The Practice Assessor to confirm that the student has reached the level required for progression	
<input type="checkbox"/> Yes	<input type="checkbox"/> No*
<div><i>* You must contact the Academic Assessor and complete an action plan if there is insufficient evidence of achievement</i></div>	

Summative Assessment 3 Continued

Practice Assessor's confirmation of practice hours

The Practice Assessor to review the student's practice hours record and confirm that it is accurate and sufficient

☐

Yes

☐

No*

** You should agree a plan with the student about how missed practice hours will be made up*

Practice Assessor

Name Signature

Student Signature Date

Student Reflection following Summative Assessment 3

To be completed after your summative assessment meeting.

Student reflection

Student Signature Date

Supporting Evidence

Supporting Evidence

The forms in this section allow you to document, collect feedback and reflect on your practice learning experiences. This evidence is then available to be referenced towards your achievement of proficiencies (see the 'Proficiencies' section). Read this guidance to ensure you use them effectively. **Information you record within these forms must be anonymised to ensure the protection of clients, people who use services, carers and practitioners.**

Communication / Additional Feedback: Practice Supervisors, the Practice Assessor and other staff working with or supervising the student (including the Academic Assessor and academic representatives) are expected to provide constructive feedback to aid the student's practice learning and to assist the Practice Assessor in the assessment of the student's progress. (However, if the feedback is related to an alternative learning experience then use the Alternative Learning Experience form. If the feedback is related to a meeting with the student then use the Record of Meeting form. These forms allow more detailed information to be recorded.) Students should use the Reflective Journal /Additional Evidence form to record their reflection on the feedback they've received. The Communication/ Additional Feedback form can also be used to record ad hoc communication between professional staff and the student.

Alternative Learning Experience: Students should record and reflect on the practice learning they have gained during alternative experiences, i.e. those away from / different than their main practice placement. They should aim to receive comments from the person supervising their learning (if applicable).

Client/Service user/Carer Feedback: Students should seek feedback periodically from a client/service user/carers relating to an episode of care provided by the student. The Client/Service user/Carer Feedback form has been specially designed for this purpose. This will also be considered by the Practice Assessor in the assessment of the student's progress. Students should use the reflective journal /additional evidence form to record their reflection on the feedback they have received. Students should aim to gather feedback from a client/service user/carers at least 3 times during their programme. Client/service user/carers contact details must not be recorded in this document, but the Practice Supervisor/Assessor may request them from the student where they wish to obtain further information from the person.

Record of Meeting: This form is for meetings between the student and members of staff (practice or university) that are not formal assessment or progress review meetings, which have their own forms. This form allows the student to provide a reflection on the meeting before it is signed off by the member of staff the student is meeting with.

Reflective Journal / Additional Evidence: Students can use this form to reflect on feedback or learning experiences where this isn't covered in other form templates. They can also use it to provide evidence of practice learning achievements. Universities may provide further guidance to students on how they wish this form to be used.

Record of Communication/Additional Feedback

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

Communication/Additional Feedback (Ref: CAF1)

Context for your communication/feedback

Your communication/feedback

Name Signature

Designation Date

Communication/Additional Feedback (Ref: CAF1)

Context for your communication/feedback

Your communication/feedback

Name Signature

Designation Date

Communication/Additional Feedback (Ref: CAF3)

Context for your communication/feedback

Your communication/feedback

Name Signature

Designation Date

Communication/Additional Feedback (Ref: CAF4)

Context for your communication/feedback

Your communication/feedback

Name Signature

Designation Date

Communication/Additional Feedback (Ref: CAF5)

Context for your communication/feedback

Your communication/feedback

Name Signature

Designation Date

Communication/Additional Feedback (Ref: CAF6)

Context for your communication/feedback

Your communication/feedback

Name Signature

Designation Date

Record of Alternative Learning Experiences

Use these forms to record your alternative experiential learning.

Alternative Learning Experience (Ref: ALE1)	
Location	Date(s)
Who you learnt from (individual or team)	
Student reflection	
Supervisor's comments	
Learning Experience Supervisor (also add your details to the PAD signatory record) Name Signature Student Signature Date	

Alternative Learning Experience (Ref: ALE2)	
Location	Date(s)
Who you learnt from (individual or team)	
Student reflection	
Supervisor's comments	
Learning Experience Supervisor (also add your details to the PAD signatory record) Name Signature Student Signature Date	






Alternative Learning Experience (Ref: ALE3)	
Location	Date(s)
Who you learnt from (individual or team)	
Student reflection	
Supervisor's comments	
Learning Experience Supervisor (also add your details to the PAD signatory record) Name Signature Student Signature Date	






Alternative Learning Experience (Ref: ALE4)	
Location	Date(s)
Who you learnt from (individual or team)	
Student reflection	
Supervisor's comments	
Learning Experience Supervisor (also add your details to the PAD signatory record) Name Signature Student Signature Date	






Alternative Learning Experience (Ref: ALE5)	
Location	Date(s)
Who you learnt from (individual or team)	
Student reflection	
Supervisor's comments	
Learning Experience Supervisor (also add your details to the PAD signatory record) Name Signature Student Signature Date	

Alternative Learning Experience (Ref: ALE6)	
Location	Date(s)
Who you learnt from (individual or team)	
Student reflection	
Supervisor's comments	
Learning Experience Supervisor (also add your details to the PAD signatory record) Name Signature Student Signature Date	

Client/Service User/Carer Feedback Form

Client/Service User/Carer Feedback Form (Ref: CSUCF1)					
Students should obtain consent from clients / people who use services / carers, who should feel able to decline to participate.					
We would like to hear your views about the way the Specialist Community Public Health Nurse (SCPHN) student has supported your care. Your feedback will not change the way you are cared for but will support learning.					
Tick if you are: The Client/Service User <input type="checkbox"/> Carer/Relative <input type="checkbox"/>					
How happy were you with the way the SCPHN student ...	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 SCPHN student do well?					
What could the SCPHN student have done differently?					
Practice Supervisor / Practice Assessor					
Name			Signature		
Student Signature			Date		
This form is based on the one co-produced by Pan London Service Users across four fields of practice, 2013.					

Client/Service User/Carer Feedback Form (Ref: CSUCF2)					
Students should obtain consent from clients / people who use services / carers, who should feel able to decline to participate.					
We would like to hear your views about the way the Specialist Community Public Health Nurse (SCPHN) student has supported your care. Your feedback will not change the way you are cared for but will support learning.					
Tick if you are: The Client/Service User <input type="checkbox"/> Carer/Relative <input type="checkbox"/>					
How happy were you with the way the SCPHN student ...	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 SCPHN student do well?					
What could the SCPHN student have done differently?					
Practice Supervisor / Practice Assessor					
Name Signature					
Student Signature Date					
This form is based on the one co-produced by Pan London Service Users across four fields of practice, 2013.					

Client/Service User/Carer Feedback Form (Ref: CSUCF3)					
Students should obtain consent from clients / people who use services / carers, who should feel able to decline to participate.					
We would like to hear your views about the way the Specialist Community Public Health Nurse (SCPHN) student has supported your care. Your feedback will not change the way you are cared for but will support learning.					
Tick if you are: The Client/Service User <input type="checkbox"/> Carer/Relative <input type="checkbox"/>					
How happy were you with the way the SCPHN student ...	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 SCPHN student do well?					
What could the SCPHN student have done differently?					
Practice Supervisor / Practice Assessor					
Name Signature					
Student Signature Date					
This form is based on the one co-produced by Pan London Service Users across four fields of practice, 2013.					

Record of Meetings

Use these pages to record meetings between the student and their Practice Supervisor, Practice Assessor, Academic Assessor or other practice or academic representative.

Meeting Record (Ref: MR1)	
Date/time of meeting	Location of meeting (e.g. if online, please state 'online')
Attendees	
Summary of meeting	
Student's comments	
Practice Supervisor / Practice Assessor / Academic Assessor / other representative	
Name Signature	
Student Signature Date	

Meeting Record (Ref: MR2)	
Date/time of meeting	Location of meeting (e.g. if online, please state 'online')
Attendees	
Summary of meeting	
Student's comments	
Practice Supervisor / Practice Assessor / Academic Assessor / other representative	
Name Signature	
Student Signature Date	

Meeting Record (Ref: MR3)	
Date/time of meeting	Location of meeting (e.g. if online, please state 'online')
Attendees	
Summary of meeting	
Student's comments	
Practice Supervisor / Practice Assessor / Academic Assessor / other representative Name Signature Student Signature Date	

Meeting Record (Ref: MR4)	
Date/time of meeting	Location of meeting (e.g. if online, please state 'online')
Attendees	
Summary of meeting	
Student's comments	
Practice Supervisor / Practice Assessor / Academic Assessor / other representative Name Signature Student Signature Date	

Meeting Record (Ref: MR5)	
Date/time of meeting	Location of meeting (e.g. if online, please state 'online')
Attendees	
Summary of meeting	
Student's comments	
Practice Supervisor / Practice Assessor / Academic Assessor / other representative Name Signature Student Signature Date	

Meeting Record (Ref: MR6)	
Date/time of meeting	Location of meeting (e.g. if online, please state 'online')
Attendees	
Summary of meeting	
Student's comments	
Practice Supervisor / Practice Assessor / Academic Assessor / other representative Name Signature Student Signature Date	

Reflective Journal / Additional Evidence

Use these pages to record your reflection in practice or any additional evidence to support your progression and achievement.

Reflective Journal/Additional Evidence (Ref: RJAE1)

Practice Supervisor / Practice Assessor

Name Signature

Student Signature Date

Reflective Journal/Additional Evidence (Ref: RJAE2)

Practice Supervisor / Practice Assessor

Name Signature

Student Signature Date

Reflective Journal/Additional Evidence (Ref: RJAE3)

Practice Supervisor / Practice Assessor

Name Signature

Student Signature Date

Reflective Journal/Additional Evidence (Ref: RJAE4)

Practice Supervisor / Practice Assessor

Name **Signature**

Student Signature **Date**

Reflective Journal/Additional Evidence (Ref: RJAE5)

Practice Supervisor / Practice Assessor

Name **Signature**

Student Signature **Date**

Reflective Journal/Additional Evidence (Ref: RJAE6)

Practice Supervisor / Practice Assessor

Name **Signature**

Student Signature **Date**

Reflective Journal/Additional Evidence (Ref: RJAЕ7)

Practice Supervisor / Practice Assessor

Name **Signature**

Student Signature **Date**

Reflective Journal/Additional Evidence (Ref: RJAЕ8)

Practice Supervisor / Practice Assessor

Name **Signature**

Student Signature **Date**

Reflective Journal/Additional Evidence (Ref: RJAЕ9)

Practice Supervisor / Practice Assessor

Name **Signature**

Student Signature **Date**

Reflective Journal/Additional Evidence (Ref: RJAЕ10)**Practice Supervisor / Practice Assessor**

Name Signature

Student Signature Date

Reflective Journal/Additional Evidence (Ref: RJAЕ11)**Practice Supervisor / Practice Assessor**

Name Signature

Student Signature Date

Reflective Journal/Additional Evidence (Ref: RJAЕ12)**Practice Supervisor / Practice Assessor**

Name Signature

Student Signature Date

Proficiencies and Progress Review

Criteria for Assessment in Practice

Assessment of proficiencies

The NMC has defined proficiencies within 6 spheres of influence that the SCPHN student must achieve to become registered⁵ (see below). In the PAD, these are listed by sphere in the Proficiencies section.

The six spheres of influence	Specialist Community Public Health Nursing core standards of proficiencies for HV, SN, OHN and PHN	Core and Field Specific Proficiencies
	Core = HV SN OHN PHN	
Sphere A	Autonomous specialist community public health nursing practice	Core only
Sphere B	Transforming specialist community public health nursing practice: evidence, research, evaluation and translation	Core only
Sphere C	Promoting human rights and addressing inequalities: assessment, surveillance and intervention	Core + HV or SN or OHN
Sphere D	Population health: enabling, supporting and improving health outcomes of people across the life course	Core + HV or SN or OHN
Sphere E	Advancing public health services and promoting healthy places, environments and cultures	Core + HV or SN or OHN
Sphere F	Leading and collaborating: from investment to action and dissemination	Core + HV or SN or OHN

Taken from 'Standards of proficiency for specialist community public health nurses', NMC (2022).

Proficiencies can be achieved in your practice placement or alternative learning experiences, but your evidence must be assessed and signed off by your Practice Assessor.

The Assessment of Proficiencies form allows the Practice Assessor to sign off the level the student has reached at the point of assessment, according to the descriptors below:

Participated	The student has worked closely with their SCPHN Practice Supervisor / other professionals and has taken part in providing care or other activity with full supervision and direction.
Contributed	The student has worked in partnership with their SCPHN Practice Supervisor / other professionals and has shown appropriate knowledge and skill, contributing to care or other activity with appropriate supervision and direction.
Demonstrated	The student has worked in partnership with their SCPHN Practice Supervisor / other professionals and has shown the application of knowledge, provided care or led activity with minimal supervision, demonstrating safe and effective practice.

⁵ [NMC \(2022\) Standards of proficiency for specialist community public health nurses](#)

It is not an NMC requirement that student learning is assessed incrementally. Depending on a student's knowledge and skill they may be assessed as having 'Demonstrated' a proficiency without having been previously assessed at 'Participated' and 'Contributed' levels.

Similarly, it is not an NMC requirement that students must achieve proficiencies in a specific order. The NMC requires that **all proficiencies must be demonstrated by the end of the programme for the student to be accepted onto the register.**

However, students and Practice Assessors must follow university guidelines where specific learning objectives have been put in place for their programmes.

Use of evidence to support proficiency achievement

The PAD is designed to enable the student to document evidence that they have achieved the required skills. In the proficiencies tables, the column 'Reference to evidence' is where the student should insert the method(s) by which they demonstrate that they have achieved the required outcome. Students can draw on a variety of supporting evidence documented in the PAD:

- Communication / Additional Feedback (CAF)
- Alternative Learning Experience (ALE)
- Client/Service user/Carer Feedback (CSUCF)
- Meeting Record (MR)
- Reflective Journal / Additional Evidence (RJAE)

Students must cross-reference the specific PAD form that they are using as evidence, e.g. 'ALE1'. See the example below. In addition, evidence can be provided within the form as:

- 'Observation', whereby the Practice Assessor has watched the student demonstrate the proficiency
- 'Discussion', whereby the Practice Assessor has assessed the student as achieving the proficiency through discussion with the student
- A short description of how the proficiency was demonstrated, including simulation and role-play.

Universities may provide guidelines for students and Practice Assessors concerning how each proficiency may be achieved using alternative assessment strategies.

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
A.1 demonstrate the ability to practice with a high level of autonomy, entrepreneurship and innovation as a specialist community public health nurse			SAC	10/3/23	ALE1, MR5, Discussion	SAC	17/5/23

The Practice Assessor's assessment of 'Demonstrated' proficiency achievement must be substantiated by reference to evidence. Assessment of progress at the 'Participated' and 'Contributed' levels may be signed off by the Practice Assessor or Practice Supervisor, and does not require supporting evidence.

Assessment of Proficiencies

Sphere A: Autonomous specialist community public health practice

	Participated		Contributed		Demonstrated		
	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>							
A.1 demonstrate the ability to practice with a high level of autonomy, entrepreneurship and innovation as a specialist community public health nurse			<i>SAC</i>	10/3/23	ALE1, MR5, Discussion	<i>SAC</i>	17/5/23
A.2 be an effective ambassador, role model and compassionate leader, and a positive influence on the profession							
A.3 use an expanded knowledge of the links between global and national socio-economic and political strategies and policies and public health to drive and influence their own field of SCPHN practice							
A.4 select and apply relevant legal, regulatory and governance requirements, policies and ethical frameworks to their specialist community public health practice, differentiating between the devolved legislatures of the UK							
A.5 lead on the application of legislation, guidance and advice regarding sustainable development goals, including environmental factors and other pollutants that affect the health and wellbeing of people now and in the future							

<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>	Participated		Contributed		Demonstrated		
	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
A.6 influence and promote health as a fundamental human right and as a shared value through engagement, inclusion and participation							
A.7 make professional judgements and decisions, and work in complex, unfamiliar and unpredictable environments, proactively identifying actions and solutions to problems that may have many interacting factors							
A.8 lead and promote public health provision that is person-centred, anti-discriminatory, culturally competent and inclusive							
A.9 demonstrate critical awareness of stigma and the potential for bias, taking action where necessary to educate others and resolve issues arising from both							
A.10 recognise the need for and lead on action to provide reasonable adjustments for people, groups and communities, influencing public health policy change and best practice							
A.11 demonstrate the advanced numeracy, literacy, digital and technological skills required to meet the needs of people, communities and the wider population, to ensure safe and effective specialist public health nursing practice.							

Sphere B: Transforming specialist community public health nursing practice: evidence, research, evaluation and translation

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
B.1 assess the impact and benefits of local and national health and other policies on the health and wellbeing of people, communities and populations							
B.2 identify, evaluate and proficiently use multiple sources of evidence and research relevant to people, communities and populations to inform specialist community public health nursing practice							
B.3 identify gaps in research, evidence and policy that impact on public health nursing practice and influence how to address these							
B.4 utilise and effectively participate in new areas of research across interdisciplinary and interagency teams related to public health priorities and interventions							
B.5 use reliable data, statistics and informatics to lead on and support policies and programmes that improve the health outcomes of people, communities and populations							
B.6 identify where insufficient information and data is available to inform public health priorities and national intervention strategies and how this may be addressed by							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
refining data sets or in recognising the need for further study							
B.7 critically appraise epidemiological research and demonstrate its use in evidence-based specialist public health nursing practice							
B.8 synthesise and apply knowledge from research, evaluation, audit and global innovation that leads to improvements in the health of people, communities and populations and addresses health inequalities							
B.9 apply the evidence base theory and principles of public health and nursing practice to support innovative approaches to influence people's motivation, choices and behaviours							
B.10 critically appraise the evidence that informs new innovations in public health programmes, including genomics, and evaluate early success measures and impact on population health outcomes							
B.11 share outcomes and lessons learned from audit, research and evaluation in specialist public health nursing practice locally and nationally and across sectors through professional and peer reviewed processes							

Sphere C: Promoting human rights and addressing inequalities assessment, surveillance and intervention

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
C.1 critically analyse the factors that may lead to inequalities in health outcomes and health inequity and take appropriate action to mitigate their impact on people, communities and populations							
C.2 demonstrate compassionate leadership in applying human rights, equality, diversity and inclusion, to improve the health and wellbeing of people, communities and populations							
C.3 appreciate the legal, ethical, moral and spiritual needs and challenges that may be faced when promoting population health, helping to mitigate barriers that enable people and families to live to their full potential							
C.4 assess the impact of complexity and comorbidity and their impact on people, communities and populations, in order to share knowledge and lead on person-centred public health approaches							
C.5 develop, promote and support opportunities to educate individuals on the risks to themselves and others of the abuse of tobacco, alcohol and other substances and potentially addictive behaviours							
C.6 conduct, interpret and evaluate health assessment and screening, surveillance and profiling checks and							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
interventions, and immunisation and vaccination programmes for people, communities and populations							
C.7 ensure equitable and accessible services for all through improved health literacy communication and networking							
C.8 consult with, listen to and support people, communities and populations when assessing, planning and co-producing public health interventions							
C.9 use models, evidence and concepts to plan, conduct and evaluate population level interventions to address specific public health issues							
C.10 apply understanding of determinants of health to develop culturally responsive and inclusive public health interventions with people, communities and populations							
C.11 lead on identifying vulnerable people, families, communities and populations and take action to support, safeguard and protect them, and coordinate timely care and other responsive support when needed.							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the SCPHN health visitor will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
C.HV1 critically analyse and apply evidence-based knowledge of the determinants of health, intergenerational cycles of deprivation and health inequalities that affect the mental, physical, cognitive, behavioural, social, and spiritual health and wellbeing of children, parents, carers and families							
C.HV2 provide support to parents, carers and families in understanding what is needed to secure healthy development and wellbeing of infants and children							
C.HV3 continually assess and skilfully adapt to different environments and complex situations in order to identify and advocate for those families most at risk, while at all times safeguarding the welfare of the child and others at risk							
C.HV4 play a significant role in promoting mental health for parents, families, infants and children during the perinatal period and in the assessment and early identification of perinatal mental ill health							
C.HV5 provide care and support to infants, children, parents and families where appropriate and facilitate access to specialist mental health services according to the level of need							
C.HV6 promote infant mental health and early identification of infant distress, providing support to families							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the SCPHN health visitor will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
to enable them to prioritise and respond to their infant's needs							
C.HV7 initiate appropriate evidence-based person-centred interventions to promote healthy relationships and minimise risks of domestic violence, child maltreatment and other forms of abuse within the family and the developmental impact of parental conflict on children							
C.HV8 use their professional judgement to observe, recognise and respond to signs of abuse and neglect across the life course, recognising that individual safeguarding needs will differ.							

Sphere D: Population health: enabling, supporting and improving health outcomes across the life course

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
D.1 recognise, critically evaluate and monitor trends in global and national strategies and programmes for preventative interventions and promotion of health to inform specialist public health practice locally, nationally and globally							
D.2 recognise and accommodate any future developments in the application of genomics into their SCPHN practice to support prevention and early intervention in the health of the population across the life course							
D.3 appreciate and use community assets and resources to support positive health and wellbeing of people, communities and populations							
D.4 in partnership with people, adopt a life course approach when assessing the public health needs of people, communities and populations							
D.5 empower people, communities and populations to connect effectively with local initiatives, support networks, community assets, programmes and resources that support their health and wellbeing							
D.6 apply specialist knowledge of social prescribing to support individual, community and population health outcomes							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
D.7 critically apply knowledge of behavioural, psychological and social sciences to the health of people across the life course, and to communities and populations, to enhance collaborative, strength-based therapeutic relationships							
D.8 appreciate the importance of medicines management with respect to administration, optimisation and reconciliation, and the positive impact of correct medicines management on people's current and future health outcome							
D.9 assess the health status and health literacy of populations across the life course and their related determinants of health							
D.10 use culturally appropriate, evidence-based approaches to assess, support and monitor the health and wellbeing of people, and appropriately refer to specialist services if necessary							
D.11 critically apply knowledge of populations, places, communities and determinants of health to inform key areas of specialist public health practice							
D.12 in partnership with communities, develop and implement plans for local communities and populations to positively affect public health outcomes							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
D.13 lead on and contribute to policy and reporting into environmental, social-structural factors, and individual behaviours that impact on the health of people across the life course							
D.14 use data and observation to evaluate the effectiveness and acceptability of services that seek to improve health outcomes of their intended users, and be able to identify trends or a need for improvement.							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the SCPHN health visitor will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
D.HV1 demonstrate specialist knowledge and understanding of infant and child anatomy, physiology, genetics, genomics and development when undertaking programmed health assessment and development reviews							
D.HV2 apply specialist knowledge and use validated tools to deliver holistic health assessments and programmed health and development reviews, working in partnership with parents and families to promote health and identify emergent and existing concerns including vulnerability and inequality, and facilitate and prioritise support and/or early intervention for the child and family as appropriate							
D.HV3 assess for early signs of atypical patterns of development, or significant anomalies that may result in disability or emotional, physical or developmental health needs or risks, and deliver evidence-based anticipatory guidance or targeted intervention tailored to individual and family circumstances and needs							
D.HV4 apply advanced level communication and interpersonal skills to establish trusting relationships which are respectful of families' capabilities, priorities and values							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the SCPHN health visitor will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
D.HV5 work in partnership with families to continually assess, and appraise the impact of known strengths, changing circumstances and relationships on child and family health and wellbeing and adapt support accordingly, acknowledging the needs of the family as a whole and prioritising support on the basis of immediate and continuing risk and need							
D.HV6 work in partnership with families to promote, educate and support sensitive, responsive relationships between parents and their children through the application of specialist knowledge of early emotional development, theories and models of attachment and the impacts of positive and enduring parental-child relationships							
D.HV7 evaluate the effects of trauma on child development and how they adjust to those effects, and work in partnership with children and families who are affected by trauma to strengthen their resilience							
D.HV8 critically apply specialist knowledge of the anatomy, neurodevelopment, physiology and epigenetics relevant to infant nutrition, including the implications of infant feeding, weaning and early food behaviour for optimum child and maternal health, child physical and socio-emotional development and							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the SCPHN health visitor will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
future behaviour patterns							
D.HV9 using a strength-based approach support children and families to identify risks to healthy weight in childhood, promoting family nutrition and supporting them to make optimum and available choices, referring to other services according to need and risk							
D.HV10 work in partnership with families to support positive, nurturing child and family relationships, and in promoting the benefits for children learning life skills in the home environment							
D.HV11 support parents and families who receive a life changing or life limiting diagnosis during pregnancy and in the early years, and in partnership with them use a strength-based and empowering approach to respond to their needs, which may be complex							
D.HV12 use specialist knowledge to facilitate access to a range of appropriate and effective available resources to support children, parents and families with additional needs due to mental and/or physical ill health, learning disabilities or physical disability, and/or those living with multiple, complex, long term conditions							
D.HV13 support children, parents and families to develop motivation and self-advocacy when raising							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the SCPHN health visitor will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
awareness of opportunities for local grants, financial support and other local community assets and services							
D.HV14 advise parents, carers and families on symptom identification and relief, enabling them to manage minor illnesses and injuries safely and effectively, and in knowing when to seek support for further treatment where necessary							
D.HV15 provide evidence-based support and advice on child, adolescent and adult sexual and reproductive health and contraception							
D.HV16 provide, evidence-based support to bereaved parents, children and families in the event of miscarriage, stillbirth or parental death and refer to additional support as appropriate.							

Sphere E: Advancing Public Health services and promoting healthy places, environments and cultures

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
E.1 critically appraise and apply strategies and initiatives that improve home, community and workplace cultures and environments to enhance the health and wellbeing of people and communities in the places they live, learn and work							
E.2 critically appraise the use of new and assistive technologies that support and influence people's choices for their own health and wellbeing, and assist with access to services							
E.3 demonstrate professional business and financial acumen when developing and presenting business cases to create investment for change and value for money							
E.4 tailor nationwide programmes or commission new services that promote healthy cultures, environments and behaviours for local implementation and evaluate their effectiveness							
E.5 lead and support a culture of learning and continuous professional development for colleagues, and with interdisciplinary and interagency teams							
E.6 recognise individual abilities and learning needs when applying the standards of education and training for pre- and post-registration nursing,							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
midwifery and nursing associate students, in order to educate, supervise and assess effectively							
E.7 promote and lead effective public health workplace cultures that benefit people, communities and populations							
E.8 advance public health through identifying sustainable development goals and prepare to take action on risks to the environment and its impact on the health and wellbeing of people							
E.9 share information regarding communicable diseases and approaches necessary for communicable disease surveillance, infection prevention and control, including immunisation and vaccination programmes							
E.10 know how to assess and manage major incidents and outbreaks including contamination and communicable disease across local or wider boundaries							
E.11 know how to identify, critically analyse and manage new and enduring hazards and risks to health at local, national and global levels							
E.12 plan for emergencies and pandemic threats to population health taking account of the direct and wider risk, impacts and hierarchy of controls on health and wellbeing and service provision.							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the SCPHN health visitor will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
E.HV1 work in partnership with parents and carers to promote child safety, reduce risk behaviours and enhance awareness of the differentials of risk in relation to the child's age, stage of development and home environment							
E.HV2 respect parents' and carers' need for autonomy and control with sensitivity to a wide range of attitudes, values, beliefs, expectations, faiths, cultures and approaches to parenting, using a transparent approach whilst simultaneously safeguarding the welfare of the children at all times							
E.HV3 demonstrate sensitivity and respect for privacy in assessing whether the child or family's home situation and environment is appropriate for facilitating and encouraging open discussion and disclosure of personal issues							
E.HV4 evaluate community health needs and assets, and advance practice through community profiling, the synthesis and application of data and information, use of informatics, and other techniques							
E.HV5 develop sustainable and innovative health visiting strategies that contribute to place-based complex interventions and improve public health outcomes for children and families, reporting outcomes and areas for improvement in line with							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the SCPHN health visitor will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
local and national governance and audit requirements.							

Sphere F: Leading and collaborating: from investment to action and dissemination

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
F.1 lead public health services that promote and improve the health and wellbeing of people, communities and populations							
F.2 lead teams that are effective in delivering public health services, both on their own and in collaboration with others							
F.3 assess service requirements influencing and leading on policy development and strategic planning to address population health needs incorporating approaches for prevention and risk management							
F.4 monitor and report on the outcomes of strategy and policy implementation and make recommendations for improvement including changes to commissioning							
F.5 evaluate the efficacy of service provision by triangulating information obtained from audit, continuous improvement activity, governance, risk management and performance monitoring							
F.6 compassionately lead and support a culture of critical reflection and continuous professional development that promotes team and interdisciplinary learning							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the Specialist Community Public Health Nurse will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
F.7 build alliances and partnerships that support equality, diversity and inclusion, collaboration and sharing of new ideas and innovations and be able to agree shared goals and priorities							
F.8 use a range of advanced communication skills with people, communities, peers and interdisciplinary and interagency colleagues, including use of digital and other modalities to support communication in virtual and remote environments							
F.9 communicate simple and complex public health information in a variety of formats, tailored for different community and population audiences							
F.10 use a range of techniques to influence, challenge, and persuade peers and senior stakeholders in relation to public health strategies and policies that affect people, communities and populations							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the SCPHN health visitor will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
F.HV1 lead creative, flexible approaches to engage parents and carers in child health promotion programmes, providing advice and support to enable co-design and collective decision making							
F.HV2 lead discussions and collaborate on the development of services for children with high impact health and care needs and ensure workforce readiness for implementation							
F.HV3 involve, escalate, report and make decisions with interdisciplinary and interagency teams on the immediate and continuing risk of domestic violence, child maltreatment and other forms of abuse to the safety of infants, children and families and collaborate on all necessary actions							
F.HV4 lead interdisciplinary and interagency discussions and make decisions regarding the referral, transfer, support and management of children and families where there are complex mental or physical health needs and/or concerns							
F.HV5 work in partnership with midwives and other interdisciplinary and interagency teams and services during the antenatal period and first days of the infant's life to ensure consistency and continuity of care for infants, parents and carers, and a smooth transition between midwifery							

	Participated		Contributed		Demonstrated		
<i>At the point of registration, the SCPHN health visitor will be able to:</i>	PS/PA Initials	Date	PS/PA Initials	Date	Reference to evidence	PA Initials	Date
and health visiting services							
F.HV6 work in partnership with school nurses to ensure the transition of support for the child and family from the health visitor to the school nursing service is positive, seamless and effective.							

Record of Progress Review Meetings

These pages should be used to record progress review meetings between the student and their Practice Assessor, Practice Supervisor(s) and Academic Assessor (or other representatives).

Progress Review Meeting	
Date/time of meeting	Location of meeting
Attendees	
Summary of meeting	
<p>The Practice Assessor to confirm that the student has reached the level required at this point in the learning period</p> <p> <input type="checkbox"/> Yes <input type="checkbox"/> No </p>	
Practice Assessor's comments	
Academic Assessor's comments	
Student's comments	
<p>Practice Assessor Name Signature</p> <p>Academic Assessor Name Signature</p> <p>Student Signature Date</p>	

Progress Review Meeting	
Date/time of meeting	Location of meeting
Attendees	
Summary of meeting	
<p>The Practice Assessor to confirm that the student has reached the level required at this point in the learning period</p> <p> <input type="checkbox"/> Yes <input type="checkbox"/> No </p>	
Practice Assessor's comments	
Academic Assessor's comments	
Student's comments	
<p>Practice Assessor Name Signature</p> <p>Academic Assessor Name Signature</p> <p>Student Signature Date</p>	

Progress Review Meeting	
Date/time of meeting	Location of meeting
Attendees	
Summary of meeting	
<p>The Practice Assessor to confirm that the student has reached the level required at this point in the learning period</p> <p> <input type="checkbox"/> Yes <input type="checkbox"/> No </p>	
Practice Assessor's comments	
Academic Assessor's comments	
Student's comments	
<p>Practice Assessor Name Signature</p> <p>Academic Assessor Name Signature</p> <p>Student Signature Date</p>	

Action Plan

An action plan is required when a student's performance requires additional support. The student, Practice Assessor and Academic Assessor should complete this form collaboratively in line with NMC SSSA requirements⁶.

Action Plan	
Date/time of meeting	Location of meeting
Attendees (name and role, including the student)	
<i>The SMART principles should be used to construct the Action Plan</i>	
Nature of concern <i>Refer to Proficiencies (Specific)</i>	
What does the student need to demonstrate? <i>Objectives and measure of success (Measurable, Achievable and Realistic)</i>	
Support available and who is responsible	
Student declaration: I agree with the content of this action plan <input type="checkbox"/> Yes <input type="checkbox"/> No	
Student's comments	
Date/time for review (Timed)	
Practice Assessor Name Signature Academic Assessor Name Signature Student Signature Date	

⁶ [NMC \(2018\) Standards for student supervision and assessment](#)

Action Plan Review

Use this form to record the review of the student's progress towards or completion of their action plan objectives. The student, Practice Assessor and Academic Assessor should complete this form collaboratively.

Action Plan Review	
Date/time of meeting	Location of meeting
Attendees (name and role, including the student)	
Has the student achieved the action plan objectives? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Practice Assessor's comments	
Academic Assessor's comments	
Student declaration: I agree with the outcome of this action plan review <input type="checkbox"/> Yes <input type="checkbox"/> No	
Student's comments	
Date/time for further review (if required)	
Practice Assessor Name Signature	
Academic Assessor Name Signature	
Student Signature Date	

Use this second form if the student was given an extension of time to complete their action plan objectives. The student, Practice Assessor and Academic Assessor should complete this form collaboratively.

Action Plan Review	
Date/time of meeting	Location of meeting
Attendees (name and role, including the student)	
Has the student achieved the action plan objectives? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Practice Assessor's comments	
Academic Assessor's comments	
Student declaration: I agree with the outcome of this action plan review <input type="checkbox"/> Yes <input type="checkbox"/> No	
Student's comments	
Practice Assessor Name Signature Academic Assessor Name Signature Student Signature Date	

Practice Hours

Record of Practice Hours

To be completed as per your university requirements

Ensure details are printed CLEARLY and sickness/absence days identified.

All hours recorded, alterations and totals must be initialised by a staff member.

Attendance Type Codes

PP = Practice Placement

ALE = Alternative Learning Experience

S = Sickness, A = Absence

	Date	Attendance Type	Total Hours	Staff Initials
Eg. Fri	2/6/23	PP	7.5	SAC
Mon				
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Total hours of PP practice on this page	
Total hours of ALE practice on this page	

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

Practice Assessor - I have checked and confirm the hours and totals recorded on this page

Name Signature

Student - I confirm that the hours recorded on this page are a true and accurate record

Student Signature Date

PRACTICE HOURS (Page 2)

To be completed as per your university requirements
Ensure details are printed CLEARLY and sickness/absence days identified.
All hours recorded, alterations and totals must be initialled by a staff member.

Attendance Type Codes	
PP	= Practice Placement
ALE	= Alternative Learning Experience
S	= Sickness, A = Absence

	Date	Attendance Type	Total Hours	Staff Initials
Eg. Fri	2/6/23	PP	7.5	SAL
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Total hours of PP practice on this page	
Total hours of ALE practice on this page	

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

Practice Assessor - I have checked and confirm the hours and totals recorded on this page

Name Signature

Student - I confirm that the hours recorded on this page are a true and accurate record

Student Signature Date

PRACTICE HOURS (Page 3)

To be completed as per your university requirements
Ensure details are printed CLEARLY and sickness/absence days identified.
All hours recorded, alterations and totals must be initialled by a staff member.

Attendance Type Codes
PP = Practice Placement
ALE = Alternative Learning Experience
S = Sickness, A = Absence

	Date	Attendance Type	Total Hours	Staff Initials
Eg. Fri	2/6/23	PP	7.5	SAL
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Total hours of PP practice on this page	
Total hours of ALE practice on this page	

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

Practice Assessor - I have checked and confirm the hours and totals recorded on this page

Name **Signature**

Student - I confirm that the hours recorded on this page are a true and accurate record

Student Signature **Date**

PRACTICE HOURS (Page 4)

To be completed as per your university requirements
Ensure details are printed CLEARLY and sickness/absence days identified.
All hours recorded, alterations and totals must be initialled by a staff member.

Attendance Type Codes	
PP	= Practice Placement
ALE	= Alternative Learning Experience
S	= Sickness, A = Absence

	Date	Attendance Type	Total Hours	Staff Initials
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Total hours of PP practice on this page	
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Total hours of sickness on this page	
Total hours of absence on this page	

Practice Assessor- I have checked and confirm the hours and totals recorded on this page

Name **Signature**

Student - I confirm that the hours recorded on this page are a true and accurate record

Student Signature **Date**

PRACTICE HOURS (Page 5)

To be completed as per your university requirements
Ensure details are printed CLEARLY and sickness/absence days identified.
All hours recorded, alterations and totals must be initialled by a staff member.

Attendance Type Codes	
PP	= Practice Placement
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S	= Sickness, A = Absence

	Date	Attendance Type	Total Hours	Staff Initials
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Total hours of PP practice on this page	
Total hours of ALE practice on this page	

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

Practice Assessor - I have checked and confirm the hours and totals recorded on this page

Name **Signature**

Student - I confirm that the hours recorded on this page are a true and accurate record

Student Signature **Date**

PRACTICE HOURS (Page 6)

To be completed as per your university requirements
Ensure details are printed CLEARLY and sickness/absence days identified.
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Attendance Type Codes	
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Total hours of PP practice on this page	
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Total hours of sickness on this page	
Total hours of absence on this page	

Practice Assessor - I have checked and confirm the hours and totals recorded on this page

Name **Signature**

Student - I confirm that the hours recorded on this page are a true and accurate record

Student Signature **Date**

PRACTICE HOURS (Page 7)

To be completed as per your university requirements
Ensure details are printed CLEARLY and sickness/absence days identified.
All hours recorded, alterations and totals must be initialled by a staff member.

Attendance Type Codes	
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Total hours of PP practice on this page	
Total hours of ALE practice on this page	

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

Practice Assessor - I have checked and confirm the hours and totals recorded on this page

Name **Signature**

Student - I confirm that the hours recorded on this page are a true and accurate record

Student Signature **Date**

PRACTICE HOURS (Page 8)

To be completed as per your university requirements
Ensure details are printed CLEARLY and sickness/absence days identified.
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Attendance Type Codes	
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S	= Sickness, A = Absence

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Total hours of PP practice on this page	
Total hours of ALE practice on this page	

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

Practice Assessor - I have checked and confirm the hours and totals recorded on this page

Name **Signature**

Student - I confirm that the hours recorded on this page are a true and accurate record

Student Signature **Date**

Practice Hours Summary

This summary is to be completed by the Practice Assessor at the end of the programme.

Practice Hours Summary																					
Practice Placement (PP) Hours																					
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Practice Assessor Name Signature Date																					

End of Programme

Practice Assessor's End of Programme Approval

This form is to be completed by the Practice Assessor at the end of the programme.

Practice Assessor's End of Programme Approval

Practice Assessor's confirmation

I confirm that I have been in communication with the Academic Assessor regarding the student's performance and achievement

☐

Yes

☐

No

I confirm that the student has achieved the required level of proficiency in practice and provided sufficient evidence to demonstrate their attainment within their field of practice

☐

Yes

☐

No

I confirm that if an action plan was required, it has been reviewed and the objectives met

☐

Yes

☐

No

☐

Not applicable

I confirm that I have verified the student's practice hours record as accurate

☐

Yes

☐

No

Final outcome

☐

PASS

☐

FAIL

Practice Assessor's comments

Practice Assessor

Name Signature

Date

NMC Number (PIN) Expiry Date

Academic Assessor's End of Programme Approval

This form is to be completed by the Academic Assessor at the end of the programme.

Academic Assessor's End of Programme Approval

Academic Assessor's confirmation

I confirm that I have seen the Practice Assessor's End of Programme Approval

☐

Yes

☐

No

I have reviewed the assessment documentation and can confirm the student has been assessed by the Practice Assessor as fit to practice safely and effectively. I recommend the student for progression to the Nursing and Midwifery Council register for Specialist Community Public Health Nursing.

☐

Yes

☐

No

Academic Assessor's comments

Academic Assessor

Name Signature

Date

NMC Number (PIN) Expiry Date