

**PAN LONDON PRACTICE LEARNING ENVIRONMENT AUDIT**

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| **Introduction**  The purpose of the educational audit is to review, monitor and enhance the quality of the practice learning environment, in line with professional body regulations.  This document was initially prepared for practice learning environments for Nursing and Midwifery Council (NMC) approved programmes by the Pan London Practice Learning Group (PLPLG) but has been adapted with the assistance of staff from Canterbury Christ Church University (CCCU) to be also used for programmes approved by the Health and Care Professions Council (HCPC) and the General Medical Council (GMC).  **See the list of AEIs** **(Approved Education Institutions) on Page 2.**  **Section 1 and 2** apply to all programmes. **Section 3,** i.e. 3.1-3.8 may apply to all but there are specific standards in 3.9 pertaining to the individual professional groups.  If the audit is being used for one professional group only – for e.g. Nursing and Midwifery then only 3.8.1 needs to be completed. If for example the area is supporting students on both NMC and HCPC approved programmes then sections 3.8.1 and 3.8.2 would need to be completed or 3.8.2 and 3.8.3 if it relates to HCPC programmes and GMC.  **It is essential that all relevant professional groups contribute to the audit where required**.  The educational audit process may lead to the production of a specific action plan, where needed. The purpose of this action plan is to ensure that the practice learning environment continues to meet agreed standards or is supported in enhancing quality where necessary.  Read the **Top Tips guide** on page 15 for more advice on using this audit tool. | **Name of Trust/ Organisation**: |  |
| **Name of**  **Practice Learning Environment/s:** |  |
| **Manager's Name/s:** |  |
| **Address:** |  |
| **Post Code:** |  |
| **Telephone Number:** |  |
| **Email Address:** |  |
| **Persons Completing the Audit and Designation** |  |
| **Date of Audit:** |  |
| **Date of last Audit:** |  |
| **Main Focus/ Speciality of Practice Learning Environment:** |  |
| **Cluster Audit:** If there is a group of practice areas (usually 2 or 3), with a similar and shared approach to practice learning it may be possible to undertake one audit. The ‘cluster’ needs to be agreed locally by the AEI in liaison with their partner organisation. Areas need to be identified above.  The audit will ‘normally’ be undertaken every **two years** unless there is a significant change in the learning environment. Ongoing monitoring will be undertaken in a number of ways, e.g. through student and staff feedback, partnership review meetings and informed by CQC and other related reports. | |

**Section 1: Practice Learning Environment Information**

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| **Practice Development Manager/Clinical Placement Facilitator/Lead Educational Supervisors** | |
| **Name:** |  |
| **Role:** |  |
| **Telephone Number:** |  |
| **E-mail Address:** |  |
|  | |
| **Name:** |  |
| **Role:** |  |
| **Telephone Number:** |  |
| **E-mail Address:** |  |
|  | |
| **Organisation Lead for Education** | |
| **Name:** |  |
| **Telephone Number:** |  |
| **E-mail Address:** |  |

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| --- | --- |
| **The following AEIs use this placement for student learning:** | |
| BPP | Middlesex University |
| Buckinghamshire New University | University of Greenwich |
| City, University of London | University of Hertfordshire |
| Canterbury Christ Church University | University of East London |
| Kingston University London | University of West London |
| King’s College London | London South Bank University |
| Brunel University London | University of Roehampton London |
| London Metropolitan University | Other: |
| Other: | Other: |

**Where practice environments are shared by students from a number of AEIs, one joint audit is undertaken and shared by all the relevant AEIs.**

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| **Please list Allied Health Professional (AHP) and / or Medical education programmes that are being considered as part of this audit:** | | |
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**Maximum number of students that can be supervised and/or assessed in the practice learning environment (Please indicate specific programme and level/year of student).**

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| **Programme** | **Level/year of student** | **Maximum student numbers** |
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**Any change to the established placement capacity must be discussed with the Organisation Lead for Education in liaison with an AEI senior representative.**

**Any agreed change must be planned to take into account those students already allocated so that other alternatives can be sought if needed. Immediate changes will only be possible in exceptional circumstances as agreed between the Organisational Lead for Education and the AEI senior representative.**

**If a change in current numbers is required has this discussion taken place with the appropriate Organisation Lead for Education and AEI senior representative as per above  Yes  No**

**If YES please provide details : (this may also require an action in Section 4.0)**

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**If No – Please include as an action in Section 4.**

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| **Placement Support: AEI Designated Staff Details**  **Please also indicate which professions this individual represents** | |
| AEI: |  |
| Name: |  |
| Telephone Number: |  |
| E-mail Address: |  |
| **Profession/Designation:** |  |
|  | |
| AEI: |  |
| Name: |  |
| Telephone Number: |  |
| E-mail Address: |  |
| Profession/Designation: |  |
|  | |
| AEI: |  |
| Name: |  |
| Telephone Number: |  |
| E-mail Address: |  |
| Profession/Designation: |  |
|  | |
| AEI: |  |
| Name: |  |
| Telephone Number: |  |
| E-mail Address: |  |
| Profession/Designation: |  |

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| **Date of most recent CQC Report:** |  | | |
| **The most recent CQC Report demonstrates that all reviewed standards have been met.** | | **Yes** | **No** |
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| **If any concerns have been highlighted the AEI has been informed and a risk assessment has been undertaken to evaluate any impact on the student practice learning experience and recorded as part of an action plan as appropriate.** | **Yes** | **No** | **N/A** |
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| --- | --- | --- | --- |
| **Do you agree to immediately notify the AEI of any service provision changes that might affect the student’s ability to meet the specified learning outcomes?** | | **Yes** | **No** |
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| **Please give details of any anticipated changes:** |  | | |
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| **List of learning opportunities (including inter-professional learning) available in the practice learning environment.** These should be tailored to the student’s stage of learning, proficiencies and programme outcomes. Please record any actions required in the Action Plan. |
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| **Please indicate which members of the multidisciplinary team the students will have opportunities to gain experience with. Please add additional practitioners not listed as appropriate:** | | |
| Nurses | Doctors | Midwives |
| Physiotherapists | Occupational Therapists | Health Visitors |
| Dieticians | Psychologists | Operating Department Practitioners |
| Chiropodists | District Nurses | Healthcare Assistants |
| Social Workers | Speech and Language Therapists | Podiatrists |
| Nursing Associates | Physician Assistant | Radiographers |
| Osteopaths | Orthoptists | Paramedics |
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**Section 2: Health and Safety**

**Practice Learning Environment Health and Safety Lead (where applicable):**

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| --- | --- |
| **Name:** | **Telephone Number:** |
| **E-mail Address:** |  |

**Trust/Organisation Health and Safety Manager:**

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| --- | --- |
| **Name:** | **Telephone Number:** |
| **E-mail Address:** |  |

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| **All learning environments optimise safety and quality, taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders** | |
| **Yes** | **No**  (Please note any actions in the Action Plan) |

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| **The learning culture prioritises the safety of people, including carers, students and educators, and enables professional values to be upheld.** | |
| **Yes** | **No** |

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| **Policies/guidance available in the practice learning environment and all staff aware of them** | | |
|
|  | YES | NO |
| Health and Safety |  |  |
| Confidentiality Policy |  |  |
| Equality and Diversity |  |  |
| Manual Handling |  |  |
| Violence and Aggression |  |  |
| Infection Prevention Control |  |  |
| Adult/Child Safeguarding policies |  |  |
| Information Governance |  |  |
| The Code (NMC 2018) |  |  |
| Guidance on Raising concerns, NMC (2018) |  |  |
| GMC Promoting Excellence (2015) |  |  |
| HCPC Guidance on Conduct, Performance and Ethics for Staff and Students |  |  |
| SET 5 Practice Based Learning (HCPC 2017) |  |  |
| Fire |  |  |
| Other |  |  |

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| **Accidents and incidents:** | | |
|  | **YES** | **NO** |
| **Are you aware of a formal procedure for reporting and recording accidents and incidents?** |  |  |
| **Have you procedures to be followed in the event of serious or imminent danger to people at work?** |  |  |
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| **Are risk assessments kept under regular review?** | **Yes** | **No** |
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| **Are the results of risk assessment implemented?** | **Yes** | **No** |
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| **All staff understand the procedures for alerting the AEI with immediate effect and acting upon any serious untoward incidents, which involve students, within two working days - (minimum)** | |
| **Yes** | **No** |

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| **Student evaluation of practice has been reviewed and acted upon in a prompt manner; this may have resulted in effective practice being shared or student concerns raised and managed appropriately ?** (Please note any actions in the Action Plan) | |
| **Yes** | **No** |

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| **Service user feedback has been reviewed reflecting high standards of care delivery. This may be patient /family surveys of student feedback in PADs as appropriate.**  (Please note any actions in the Action Plan) | |
| **Yes** | **No** |

**Section 3: Professional Body Standards**

* **Standards for Student Supervision and Assessment (SSSA)** Specific to all Nursing and Midwifery Council Approved programmes.
* **Standards for Practice-based learning and Assessment.** specific to all Health and Care Professions Council Approved programmes
* **Promoting Excellence: Standards for Medical Education and Training**. Specific to General Medical Council Approved programmes

*Please indicate the professional group being reflected in this audit below.*

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| **3.1 There are sufficient numbers of:**   * **Practice Supervisors, Practice Assessors (NMC)** * **Practice Educators (HCPC)** * **Lead Educational Supervisors (GMC) to support the agreed capacity**   (Please note any actions in the Action Plan) | |
| **Yes** | **No** |
| *This may need to be confirmed by the Practice Development Manager/Clinical Placement Facilitator/Manager/Education Lead* | |

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| **3.2 All Practice Assessors/ Practice Educator/Educational Supervisors details are kept up to date on the organisations’ database \* and have opportunities to receive on-going support.**  (Please note any actions in the Action Plan) | |
| **Yes** | **No** |
| *This will need to be confirmed by the Practice Development Manager/Clinical Placement Facilitator/Manager/Education Lead* | |

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| **\*For Private, Voluntary and Independent Sector:**  **Please list names of available Practice Assessors/Practice Educators and date of preparation.** | |
| **Name of Practice Assessor/Practice Educator** | **Date of preparation for role** |
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| **For providers of primary care medical education placements, please list details of all available educational supervisors (GMC only)** | | | | | | | |
| **Name of Lead Educational Supervisor** | **Accredited GP Trainer** | | **Accredited GP Supervisor** | | **Date approval expires** | **PGCert** | |
|  | Yes | No | Yes | No |  | Yes | No |
|  | Yes | No | Yes | No |  | Yes | No |
|  | Yes | No | Yes | No |  | Yes | No |
|  | Yes | No | Yes | No |  | Yes | No |
|  | Yes | No | Yes | No |  | Yes | No |

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| **3.3. Students should be supervised by registered health or social care professionals based on the students learning needs and stage of learning.**  (Please note any actions in the Action Plan) | |
| **Yes** | **No** |

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| **3.4a Practice Supervisors, Practice Assessors (NMC), Practice Educators (HCPC) and Lead Educational Supervisors (GMC) have supported time and resources to enable them to fulfil their roles in addition to their other professional responsibilities**  (Please note any actions in the Action Plan) | |
| **Yes** | **No** |
| **3.4b Have GP Educators been appraised as educators (GMC only)?** | |
| **Yes** | **No** |

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| **3.5 Practice Supervisors, Practice Assessors (NMC), Practice Educators (HCPC), and Lead Educational Supervisors (GMC) have supported time and resources to enable them to fulfil their roles in addition to their other professional responsibilities**  (Please note any actions in the Action Plan) | |
| **Yes** | **No** |

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| **3.6a Nursing students should be assigned a Practice Assessor who is a Registered Nurse.** (Please note any actions in the Action Plan) | |
| **Yes** | **No** |

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| **3.6b Nursing Associate students should be assigned a Practice Assessor who is a Registered Nurse or Nursing Associate**  (Please note any actions in the Action Plan) | |
| **Yes** | **No** |

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| **3.6c Midwifery students are assigned to Practice Assessors who are registered Midwives.**  (Please note any actions in the Action Plan) | |
| **Yes** | **No** |

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| --- | --- |
| **3.6d SCPHN students are assigned to Practice Assessors who are registered SCPHN.**  (Please note any actions in the Action Plan) | |
| **Yes** | **No** |

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| --- | --- |
| **3.6e AHP students should be assigned a Practice Educator who must have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, must be on the relevant part of the Register.**  (Please note any actions in the Action Plan) | |
| **Yes** | **No** |

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| **3.6f Medical Students should have a Lead Educational Supervisor who is recognised by the GMC**  (Please note any actions in the Action Plan) | |
| **Yes** | **No** |

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| **3.6g Students who are on other NMC approved post-registration qualifications are assigned a Practice Assessor in accordance with relevant programme standards – e.g. prescribing programmes:** (Please note any actions in the Action Plan) | |
| **Yes** | **No** |

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| **3.7 Student evaluation of practice has been reviewed and acted upon in a prompt manner; this may have resulted in effective practice being shared or student concerns raised and managed appropriately ?** (Please note any actions in the Action Plan) | |
| **Yes** | **No** |

**3.8 Educational Standards**

**3.8.1 Standards for Student Supervision and Assessment**

**(SSSA, NMC 2018)**

| **3.8.1 SSSA (NMC)** | **Yes** | **No** | **Evidence/Examples**  (Please note any actions in the Action Plan) |
| --- | --- | --- | --- |
| **Effective practice learning**  Students receive a comprehensive orientation and there is a nominated person for each practice setting to actively support students and address student concerns. |  |  |  |
| **Supervision of students**  There is sufficient coordination and continuity of support and supervision of students to ensure safe and effective learning experiences.   * Students work within a scope of practice that is appropriate to their level of skills and experience. * Levels of supervision and autonomy should reflect the individual learners progress |  |  |  |
| **Practice Supervisors:**   * Are suitably prepared and receive ongoing support * Provide student feedback and contribute to assessments (within their scope of practice). * Raise concerns regarding student’s performance as appropriate |  |  |  |
| **Practice Assessors:**   * Are suitably prepared and receive ongoing support * Have appropriate equivalent experience for the student’s field of practice (as applicable) * Obtain feedback from the practice supervisors/others and conduct assessments * Liaise with and confirm progression with the academic assessor * Raise concerns as appropriate and act on these with the academic assessor |  |  |  |
| **Academic Assessors:**   * Enables collaboration with the Practice Assessor to confirm progression * Supports the Practice Assessor when concerns are raised |  |  |  |

**3.8.2 Standards of Education and Training SET 5 (HCPC)**

| **3.8.2 Standards of Education and Training SET 5 (HCPC)** | **Yes** | **No** | **Evidence/Examples**  (Please note any actions in the Action Plan) |
| --- | --- | --- | --- |
| **Ensuring quality of practice based learning**  Learners receive a comprehensive orientation and there are processes in place to respond when any concerns, difficulties or incidents arise, which could prevent a learner’s success when providing practice-based learning, or if there is evidence which may call into question the suitability of the practice-based learning environment. |  |  |  |
| **Practice-based learning must take place in an environment that is safe and supportive for learners and service users.**   * Learners work within a scope of practice that is appropriate to their level of skills and experience. * Levels of supervision and autonomy should reflect the individual learner’s progress. |  |  |  |
| **Ensuring adequate number of appropriately qualified and experienced staff**  Qualifications and experience of staff are appropriate to the specific aspects of practice-based learning they are involved in, and that they are able to effectively support learning and assessment. |  |  |  |
| **Practice Educators:**   * Must have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, must be on the relevant part of the Register. * Must have access to the information they need in a timely manner in order to be prepared for practice‑based learning * Must have undertaken regular training which is appropriate to their role, learners’ needs and the delivery of the learning outcomes of the programme. |  |  |  |

**3.8.3 Promoting Excellence: Standards for Medical Education and Training (GMC)**

| **3.8.3 Promoting Excellence: Standards for Medical Education and Training (GMC)** | **Yes** | **No** | **Evidence/Examples**  (Please note any actions in the Action Plan) |
| --- | --- | --- | --- |
| **Educational Supervisors:**  Educators must be selected against suitable criteria and receive an appropriate induction to their role, access to appropriately funded professional development and training for their role, and an appraisal against their educational responsibilities |  |  |  |
| Trainers must have enough time in job plans to meet their educational responsibilities so that they can carry out their role in a way that promotes safe and effective care and a positive learning experience. |  |  |  |
| Educators must have access to appropriately funded resources they need to meet the requirements of the training programme or curriculum. |  |  |  |
| **Ensuring adequate number of appropriately qualified and experienced staff**  Organisations must support educators by dealing effectively with concerns or difficulties they face as part of their educational responsibilities. |  |  |  |
| Organisations must support educators to liaise with each other to make sure they have a consistent approach to education and training, both locally and across specialties and professions. |  |  |  |
| Lead Educational Supervisors must be developed and supported, as set out in GMC requirements for recognising and approving trainers |  |  |  |
| The seven criteria of GP Trainer approval outlined by the GMC are met. These include:   1. ensuring safe and effective patient care through training 2. establishing and maintaining an environment for learning 3. teaching and facilitating learning 4. enhancing learning through assessment 5. supporting and monitoring educational progress 6. guiding personal and professional development 7. continuing professional development as an educator. |  |  |  |

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| 4.0 SUMMARY OF PRACTICE LEARNING ENVIRONMENT AUDIT & ACTION PLAN\*If a cluster audit has been undertaken please ensure actions are specific to the individual team/area as appropriate | | | | | | | |
| Name of Practice Learning Environment/s | | Trust/Organisation | | | | Date of Audit | |
|  | |  | | | |  | |
|  | | | | | | | |
| OVERALL STRENGTHS TO INCLUDE EXAMPLES OF EFFECTIVE/INNOVATIVE PRACTICE: | | | | | | | |
|  | | | | | | | |
| AREAS FOR ONGOING MONITORING AND DEVELOPMENT: (to be reflected in the actions below) | | | | | | | |
|  | | | | | | | |
| **Actions to be undertaken**  (Please specify clearly if the action relates to a specific professional group). | | | **Review Date** | | **Key Person/s** | | **Progress** |
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| CONFIRMATION OF STAFF UNDERTAKING AUDIT | | | | | | | |
|  | ***Print Name*** | | | ***Signature*** | | | |
| **PRACTICE LEARNING ENVIRONMENT STAFF:** |  | | |  | | | |
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| **AEI STAFF:** |  | | |  | | | |
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| **OTHER:** |  | | |  | | | |

\* A copy of the completed document will be sent to all of those present including the area manager.

 If this document is completed online then only printed names are required (not signatures).

**Top Tips for completing this audit tool**

* The audit can be undertaken as a face to face meeting or online via Zoom or Teams in order to enhance participation from all staff members required to attend. The most appropriate approach is to be agreed locally.
* See page 1 for reference to ‘cluster audits’ and this can be discussed with your local AEI.
* An initial self-evaluation by local practice staff should draw on sources of evidence such as their induction pack, available learning resources, student evaluations, service user feedback and local policies.
* The self-evaluation should be completed /part completed in advance and shared with the AEI staff who will be undertaking the audit. The local practice area must identify which professional groups need to be represented by the audit and ensure the appropriate individuals contribute to the audit process.
* Senior students on a particular placement could be invited to participate in the audit process as part of their learning experience.
* Learning opportunities on Page 4 should be completed in advance of the audit, where possible. These may just require minor amendments from the previous audit. A senior student could support this activity.
* The self-evaluation will be discussed / added to during the scheduled audit and joint actions agreed.
* If the learning environment is supporting students from across a range of healthcare programmes there should be representatives from all identified professionals contributing to the audit process.
* If the practice area is being reviewed for a single profession then only the related standards in Section 3 need to be completed – e.g. 3.8.1 if the area is being reviewed for NMC approved programmes only.
* If multiple AEIs are accessing a specific placement area then only one audit needs to be completed and it is the responsibility of the AEI undertaking the audit to share the document with all other AEIs listed. If a specific AEI then wishes to add other healthcare professional groups at a later stage they should take responsibility to update the audit tool to reflect this.
* All actions require a review date and there should be a clear process in place to review and update these actions. This may vary as per AEI processes.