Practice Assessment Document (PAD) Scotland

Student's Name: _____

University: _____

University ID: _____

Programme: _____

Year of Intake: _____

Field of Practice: _____

GLOSSARY OF TERMS AND ABBREVIATIONS

AEI	Approved Education Institution
BLS	Basic Life Support
CHEF	Care Home Education Facilitator
CPR	Cardiopulmonary Resuscitation
MH	Manual Handling
HAI	Healthcare Associated Infection
HEI	Higher Education Institution
NES	NHS Education for Scotland
NHS	National Health Service
NHSS	National Health Service Scotland
NMC	Nursing and Midwifery Council
PAD	Practice Assessment Document
Part 1	Year One approximately
Part 2	Year Two approximately
Part 3	Year Three (& Year Four) approximately
PEF	Practice Education Facilitator
PLE	Practice Learning Experience
PSMAV	Prevention & Safe (Therapeutic) Management of Aggression and Violence.
SIPCEP	Scottish Infection Prevention & Control Education Pathway

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SECTION 1: GUIDANCE

1.0. Introduction to the Scottish Practice Assessment Document (PAD)

All Scottish Higher Education Institutions (HEIs) deliver their pre-registration nursing programmes in accordance with the Nursing and Midwifery Council (NMC) Future Nurse: Standards of Proficiency for Registered Nurses (NMC, 2018a; 2018b; 2018c; 2018d) and the European Union Directive 2005/36/EC requirements. All Scottish HEIs have worked collaboratively to produce a single Practice Assessment Document (PAD) for Scotland, which must be completed by all nursing students undertaking a pre-registration nursing programme.

The purpose of the PAD is to provide a record of your practice learning progress and achievement of learning outcomes throughout each practice learning experience (PLE). This allows current and future practice supervisors; practice assessors and academic assessors to see an overview of your progress from the first PLE through to the last.

The PAD is an integral part of the learning process. It is not simply a catalogue of learning activities; rather, will provide clear evidence of the learning that has occurred. The PAD provides an opportunity to demonstrate evidence of learning from academic activities and application to practice learning as well as from practice experience; it is particularly important to demonstrate achievement of the (NMC) Future Nurse: Standards of Proficiency for Registered Nurses (NMC, 2018a).

As a pre-registration nursing student, you will have consented to the carrying of your practice assessment document throughout the duration of your programme. You will also have confirmed that you recognise the importance of the PAD to your ongoing learning, supported by your practice supervisor, and assessment of your proficiency, undertaken by your practice assessor and academic assessor for each part and for your future practice.

1.1. Your responsibilities as a student within practice learning experiences

Your PAD is an important tool in presenting an overall picture of your achievement and progression through your programme. It provides evidence for your practice supervisors and assessors about your achievements and/or needs. This is in accordance with the NMC (2018d) which states, that "*all proficiencies are recorded in an ongoing record of achievement*" (NMC 2018d, p.11).

As a student it is your responsibility to:

- Take a proactive approach to practice and personal learning by developing learning plans.
- Complete the pre practice learning activities prior to the start of the PLE.
- Be aware who your academic assessor is and the Practice Education Facilitator (PEF/CHEF) for the area.
- Identify the approved mechanism by which you, as a student, may raise concerns about the safety of service users. This is addressed through the "Raising Concerns in Practice" in your Practice Learning Handbook and you MUST make yourself aware of your responsibilities in relation to this aspect of your role.
- Always seek consent from service users at all times and you must respect the rights of a service user to decline your participation in care, or to decline care, at all times.
- <u>Provide access to your PAD on day 1 of each PLE and thereafter,</u> so that your supervisor/assessor can review your progress to date. Failure to do so may result in a delay to the commencement of your placement.
- Ensure that your practice supervisor/assessor signs 'record of signatories' form once they have reviewed your PAD.
- Ensure all actions and entries in your PAD are undertaken in collaboration with your practice supervisor/assessor and documented by them.
- Identify experiences and learning opportunities with practice supervisor/assessor to enable the achievement of practice learning outcomes, NMC Proficiencies, communication and relationship management skills and nursing procedures and personal objectives.
- Critically reflect in and on your practice and document within your PAD.
- Demonstrate your ability to integrate theoretical learning with practice.
- Share with your practice supervisors and assessors evidence of learning and development to inform assessment of performance.
- Ensure that all elements of the assessment section are completed fully and signed before you leave your PLE.
- Ensure that your practice supervisor/practice assessor completes and signs your 'attendance record'.
- On completion of the PLE, individual HEI procedures will be followed for your submission of documentation.
- Ensure that you have knowledge of the requirements and declare your Good Health and Good Character. You must declare a Good Health and Good Character for every part of your programme and for entry to the register.
- Ensure that you have knowledge of the requirements of the NMC (2015) *Duty of Candour* and act upon this accordingly at all times.

In addition to the activities described above, as a student you must be aware of the requirement to complete an evaluation after each PLE; this is part of the formal university audit process.

This PAD will show your achievements, progression through the programme and contribute to the decision for entry to the register. If you have any questions regarding this document or how to use it please do not hesitate to speak to your academic assessor/module/year/programme leader.

The Nursing and Midwifery Council (2018d p10,) state that: *"Approved education institutes together with practice learning partners must ensure that students are supernumerary".*

Supernumerary status means that: *"Students in practice or work-placed learning must be supported to learn. This may include being supernumerary, meaning that they are not counted as part of the staffing required for safe and effective care in that setting"* NMC (2018c, p4).

"The decision on the level of supervision provided for students should be based on the needs of the individual student. The level of supervision can decrease with the student's increasing proficiency and confidence." NMC (2018c, p4).

This means that you have supernumerary status whilst within the practice learning environment; you are not to be 'counted in the numbers' but you will make an active contribution to the provision of care under a varying degree of supervision whilst on your programme of study.

1.2. The roles of Nominated Person, Practice Supervisors, Assessors and Academic Assessors

You will have a number of practice learning experiences throughout your programme. During your PLEs responsibility for supervision and assessment will lie with a practice supervisor, practice assessor and an academic assessor (NMC 2018c, p8).

Nominated Person

There is a nominated person for each practice setting to actively support you and address student concerns. In Scotland this nominated person in each PLE is a practice supervisor.

Practice Supervisor

There may be a number of practice supervisors in each learning environment who will support and supervise you as a student however, you must have a nominated practice supervisor identified to actively support you and address any concerns you may have during this experience. They can be any registered health and social care professional working in a practice environment, but most of the time they will be nurses or midwives. Practice supervisors will have been prepared and supported to take up their role and will have up-to-date knowledge and experience relevant to the supervision they must provide for you. All NMC registered nurses and midwives are capable of supervising students.

Practice supervision will enable you to learn and safely achieve proficiency and autonomy in your professional role. Your supervision will reflect your learning needs and stage of learning.

Your practice supervisor will act as a role model and in line with their scope of practice. They will provide you with support and feedback, liaising with colleagues and your practice assessor to document your progress and summative assessments as part of this practice assessment document.

Practice Assessor

Your practice assessor will in collaboration with your practice supervisor(s), create sufficient opportunities to periodically observe your practice across environment(s) in order to inform the decisions they reach for your assessment and progression in practice.

Your practice assessor works in partnership with your academic assessor to evaluate and recommend your progression for each part of the programme. This will be in line with programme standards and local and national policies. They will maintain current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing. Your practice assessors will have an understanding of your learning and achievement in theory and will collaborate with your academic assessors to reach a decision as part of the assessment process. The same person cannot be your practice assessor and practice supervisor simultaneously.

Academic Assessor

Your academic assessors make and record objective, evidence based decisions on your conduct, proficiency and achievement. They will also make recommendations for progression based on your assessments, practice assessment document and other resources. They will collate and confirm your achievement of proficiencies and programme outcomes in the academic environment for each part of the programme

Academic assessors maintain their current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing and confirming. They will have an understanding of your learning and achievement in practice.

Your nominated academic assessor will work in partnership with your nominated practice assessor to evaluate your learning and make recommendations for progression for each part of the programme. This will be in line with programme standards and local and national policies.

Your academic assessor will collaborate with your practice assessors at scheduled points in the programme.

Your academic assessor cannot simultaneously be your practice supervisor or practice assessor.

Please read the following information which will assist you to understand the assessment process, including how services users, carers and other professionals' contribute to your assessment, the need for a risk assessment to be carried out in certain circumstances, reasonable adjustment, any cause for concerns and attendance.

1.3. Performance review process

1.3.1 Pre-practice activities

Pre-practice learning activities including practice information

The University has set designated activities and it is essential that you complete these prior to commencing your PLE. Information about your PLE that will help you to complete these activities will be available via your University electronic platform. These pre placement learning activities focus on the nature of the care area, the practice placement profile, the service user, and the nature of common conditions that may be encountered. These activities will enable you to identify potential learning opportunities thereby facilitating the development of a learning plan to achieve the required proficiencies (detailed in Section 2), skills and procedures (NMC 2018a) whilst within the practice learning environment. These pre-practice activities will be documented as complete by a practice supervisor in the PAD once you commence your PLE.

1.3.2 Orientation and preliminary meeting

Orientation and Preliminary Meeting: orientation and induction to practice learning environment

Your preliminary meeting must include completion of the checklist of topics of discussion. This should take place within the first 48 hours of starting your PLE. As part of this conversation, your supervisor/assessor will familiarise you with the practice learning environment and review your previous learning development plans. This will give you the opportunity to identify the range of learning available.

Your supervisor/assessor must record this in your PAD. At this point, you should agree and document the dates for your interim feedback meeting and final assessment.

It is also helpful to review any NMC Proficiencies, communication and relationship management skills and nursing procedures (NMC 2018a) and learning outcomes that you think may be met in the PLE.

You **must** ensure that your practice supervisor(s) complete the details required within section 1.8a - the Record of Signatories, and you must sign to confirm that all signatures in this PAD are authentic.

You **must** ensure that your practice assessor completes the details required within section 1.8b - the Record of Signatories, and you must sign to confirm that all signatures in this PAD are authentic.

You **must** also ensure that your academic assessor completes the details required within section 1.8c - the Record of Signatories, and you must sign to confirm that all signatures in this PAD are authentic.

1.3.3 Interim feedback meeting

Interim feedback meeting – practice supervisor and/or assessor and student

You should plan to meet with your supervisor/assessor regularly to discuss your progress and to review your learning plan. You should reflect on your progress regularly and this will inform your interim feedback meeting.

Your interim feedback meeting is formative, documented and signed by you, your supervisor and/or assessor in the PAD.

Situations may arise when your supervisor or assessor raises concerns about your knowledge, proficiency, professionalism or fitness to progress. The NMC Code (2018e) reminds registrants of their professional accountability and responsibilities and your practice supervisors would be expected to "*appropriately raise and respond to student conduct and competency concerns*" (NMC 2018c, p7).

It is important that you speak with your supervisor and/or assessor and your academic assessor to work collaboratively to address any issues. In section 3, there is guidance for addressing these issues, please take time to read the information.

1.3.4 Final performance

Final Performance Assessment

It is your responsibility, in collaboration with your practice assessor, to ensure the completion and documentation of your summative assessment of performance. This should be completed during the last few days of the PLE. Your practice assessor will review your progress and in collaboration with your academic assessor will identify evidence to support their professional judgement. Others who have supported your learning will be asked to provide evidence to develop your assessment. You should seek feedback from service users/carers to inform your learning and development.

Following this assessment, you should reflect on your progress and document this along with your learning needs and use this to inform your Learning Development Plan in your next PLE.

1.4. Feedback from service users and carers

The NMC (2018b p6, 1.12; p12, 5.14) values the role of service users, carers and professional colleagues in assessment of your practice learning and advocate their involvement in the assessment process. As such, we would encourage you to consider feedback received from these individuals when reviewing your performance with your practice supervisors and take cognisance of this when preparing to discuss your final written performance assessment with your practice assessor. You and your practice supervisors should seek feedback from service users and carers on your abilities in relation to how you communicate, how you respect the service user as an individual and the care that you provided.

Please note the following guidance:

- You should try to seek feedback from service users/carers **at least once per practice learning experience, but a minimum of once per PART**. If additional

opportunities arise, these should be actioned and additional documentation can be inserted within the PAD to reflect any further feedback you receive.

- **You <u>must seek consent</u> from the service user/carer and respect that service users and carers have the right to refuse to participate. If they do not want to, you must assure them that this will not affect their future care or treatment**.
- It is your practice supervisors' responsibility to collate and document this feedback in a sensitive, anonymous manner within your PAD in the appropriate section.
- Feedback received in other formats (for example the receipt of cards, emails to PLE staff or University) should be recorded within the Service User/Carer Feedback pages, **anonymised** and reflected upon.
- Please also refer to the NHS Education for Scotland (NES) document -NHS Education for Scotland (NES) (2013) *Evaluation of Current Practices to Involve Service Users and Carers in Practice Assessment in 11 Higher Education Institutes (HEIs) in Scotland.*

1.5. Risk assessment

Introduction:

During a programme of pre-registration nurse education each accredited HEI has a duty of care to ensure that you are safe while undertaking PLEs. The HEI and practice providers work collaboratively to support all students. According to current Health and Safety legislation (Management of Health and Safety at Work Regulations, 1999) some groups of student nurses must be aware of particular hazards in the practice setting. Students under the age of 18 (young workers) and those who are pregnant or breastfeeding, may need additional consideration to ensure that they are not exposed to undue risk. Students from these groups should be risk assessed on arrival in the PLE.

If you fall within any of these categories whilst a student, it is your responsibility to:

- Alert the university as soon as possible if you are pregnant or will be under the age of 18 when you first commence practice or if you are returning to a practice learning environment following maternity leave and are still breastfeeding.
- Consent to sharing information. While any information divulged by you will be treated sensitively, it will be necessary to share information relating to your situation with the member of staff responsible for the practice-learning environment Edinburgh Napier University: please see further information in your Practice Learning Handbook. A link to this document can be found on page 229.
- Comply with measures recommended to manage risk.

Please refer to your Practice Learning Handbook for information about:

- Student Nurses as Young workers
- Students Nurses who are pregnant or breastfeeding
- Outline of roles and responsibilities in relation to risk assessment process

1.6. Reasonable adjustments

Reasonable adjustments may have to be made to allow those with a disability to achieve proficiency. The NMC state that Universities and practice learning partners '*must take account of students' individual needs and personal circumstances when allocating their practice learning including making reasonable adjustments for students with disabilities'* (NMC 2018d p10). It is important to recognise that reasonable adjustments can be made to support you and to assess how you can demonstrate that you have met a standard or proficiency. Whilst every attempt will be made to make reasonable adjustments to support your learning in practice, the requirement remains that you must demonstrate achievement of the NMC standards and proficiencies.

Ultimately, it is your own responsibility to inform the practice supervisor/assessor of any reasonable adjustment in practice that you may require. It is therefore good practice to discuss this provision prior to or at the preliminary meeting and consider whether reasonable adjustments can be made to enable you to practise safely and effectively. Adjustments may be put in place for the duration of your placement or for shorter periods of time to address a temporary requirement.

You, your practice supervisor/assessor and other members of practice education staff can make feedback on how the reasonable adjustments are working on the interim feedback meeting pages. Further information on policies and reasonable adjustments can be accessed via Government sites, the NMC, your placement provider and within your Practice Learning Handbook.

1.7. Attendance

The NMC Standards for pre-registration nursing education (NMC 2018d, (annexe 1), p13) state that as a student nurse, you must achieve 2,300 hours in practice during your programme. Attendance at practice is mandatory. It is therefore essential that practice hours are recorded and any absence hours are retrieved. It is your professional responsibility (NMC 2018e, *The Code*) to follow relevant HEI and practice policy and procedures when reporting absence.

1.7.1 Working time directive

- The Placements Office at Edinburgh Napier University is located on the third floor 3.b.43 at Sighthill Campus and allocates the number of hours/weeks that you must attend your PLE. As a student you must not negotiate any reduction to the allocated time.
- As a student you are expected to work the shifts allocated by the practice learning environment. Any requests for alteration to designated shift patterns for any reason should be made to the practice learning environment manager /HEI.
- During your Programme, the NMC requires all students to undertake practice learning that enables you to experience the full 24 hour, 7 days per week care of patients.
- When in clinical practice, you are expected to work within the shift pattern of that practice learning environment. Students are normally expected to work a minimum of 30 hours per week and a maximum of 48 hours per week. The

average time worked should be 37.5 hours per week over the duration of the programme.

- As a student, you must ensure that any other work that you regularly undertake does not result in you working more than 48 hours per week. This is to ensure the health and safety of you as a student nurse, your colleagues and the patients and clients in your care. **Note** that whilst in a PLE that has 1 day/week in university the maximum number of hours able to be worked in practice is **42**
- Guidance regarding young workers (Under 18 years) can be found in section 1.5 and your Practice Learning Handbook.

1.7.2 Attendance record sheets

- Attendance records are important documents in that they provide evidence to confirm that students have achieved the minimum NMC requirement of 2,300 hours of practice during the pre-registration nursing programme.
- Hours worked may be checked by students via their InPlace account
- Both students and practice supervisor/assessor are responsible for ensuring attendance records are accurate and signed.
- Attendance records should accurately reflect the number of hours worked in practice exclusive of meal breaks.
- You should submit your timesheet via MyProgress at the end of each PLE.
- Attendance records should not be signed in advance. If the practice supervisor and/or assessor is not going to be on duty during the last few days of your PLE the attendance records for these days should be signed by another member of staff.
- If the practice learning environment closes because of a public holiday, you can either work in a different environment on that day or make up the time at another time.
- Any time missed on placements will require to be made up in future placements; refer to practice learning handbook.

1.7.3 Authorised absence

Please refer to the attendance policy in your programme handbook. For absences of up to and including 3 days, a self-certificate is not required; for absences of 4 – 7 days a self-certificate is required; for absences of over 7 days a fit note should be submitted to the programme administration team in room 3B48 Sighthill Campus.

1.7.4 Unauthorised absence

If you accrue significant periods of unauthorised absence this will be addressed through the HEIs disciplinary policy and procedures. This may ultimately result in your discontinuation from the programme.

1.7.5 Reporting sickness / absence

If you are unable to attend the practice learning experience, for any reason, you must fulfil the following responsibilities either personally or by asking someone to act on your behalf:

- Contact your Academic assessor or module leader to let them know that you are absent stating your reason for non-attendance.
- Phone the practice learning environment before the start of the shift or as soon as possible thereafter also stating your reason for non-attendance. Note that certain hospitals and health centres operate a policy where, if a person who is off sick does not phone in by a certain time, they are automatically marked absent, even if they phone in later. Please remember that it is courteous to inform colleagues in the practice learning environment. Students should provide the practice learning environment with a contact number. This will only be held while the student is on practice and will be deleted when the PLE has ended.

1.7.6 Returning from sickness / absence

As a student you should phone the practice learning environment to tell them when you are returning and contact your HEI when you have returned to the workplace. A medical certificate/fit note is required for all sickness of 7 days or more. Failure to present this will result in you still being recorded as sick/absent and this may have implications for your attendance record on the programme.

1.8a Record of signatories – Practice Supervisor

PLEASE COMPLETE AT THE START OF EVERY PRACTICE LEARNING EXPERIENCE.
NB. Practice Supervisors must be NMC registered nurse or midwife or another registered health and social care professional (NMC 2018c, p6)

PLE	PLE Name	Practice Supervisor Name (print)	Practice Supervisor Signature. *I confirm that I have been suitably prepared for the role of practice supervisor*	Practice Supervisor Initials	Practice Supervisor's field of nursing practice/ profession	Students sign to confirm that all signatures in this document are authentic	Date
One	**Ward 5 GRI**	**CLAIRE COCHRANE**	Claire Cochrane	CAC	Adult	Nursing student	

1.8b Record of signatories – Practice Assessor

PLEASE COMPLETE AT THE START OF EVERY PRACTICE LEARNING EXPERIENCE.
NB. Practice Assessors must be a registered nurse on the same part of the register as the student or have appropriate equivalent experience for the student's field of practice

PLE	PLE Name	Practice Assessor Name (print)	Practice Assessor Signature *I confirm that I have been suitably prepared for the role of practice assessor*	Practice Assessor Initials	Practice Assessor's field of practice	Students sign to confirm that all signatures in this document are authentic	Date
One	Ward 5 GRI	JACQUELINE BLACK	Jacqueline Black	JB	Adult	Nursing student	

1.8c Record of signatories – Academic Assessor

PLEASE COMPLETE FOR EACH PART OF THE PROGRAMME.
NB. Academic Assessors must be a registered nurse on the same part of the register as the student, or have appropriate equivalent experience for the student's field of practice

PART of PROGRAMME	**Academic Assessor Name (print)**	**Academic Assessor Signature** ***I confirm that I have been suitably prepared for the role of practice assessor***	**Academic Assessor Initials**	**Academic assessor's field of practice**	**Date**
Part One	**Robert Brown**	Robert Brown	RB	Adult	

SECTION 2: PRACTICE LEARNING EXPERIENCES (PLE)

2.0. Programme outline

2020 PRE-REGISTRATION NURSING CURRICULUM

The information below is intended for student nurses, practice supervisors and practice assessors

Edinburgh Napier University has developed this new pre-registration nursing programme in accordance with the professional, regulatory requirements specified by the Nursing and Midwifery Council (NMC 2018a), for the award of a degree in Nursing. NMC standards for supervision and assessment of students in the practice environment were published in 2018 and set out expectations for the learning, support and supervision of our students. The standards can be found on the NMC website at:

https://www.nmc.org.uk/standards-for-education-and-training/standards-for-student-supervision-and-assessment/ [accessed 13.2.20].

The School of Health and Social Care at Edinburgh Napier University is committed to developing nurses of the future who make a positive difference to people's lives on the individual, family and community level. The programme provides the opportunity for students to develop proficiency in skills, knowledge and confidence to meet the mental, physical and behavioural needs of people of all ages. This will be accomplished through educational provision that equips our students to provide high quality, *person-centred compassionate care across all settings.

The programme is designed to provide clear links between theory module content, and application to practice. This is further strengthened through the placement specific Preparation for Practice classes that occur prior to the placement. Once engaged in placement learning, the student continues to be supported through study days, reflective activities and the Virtual Learning Environment (VLE) as well as having access to the full University support systems such as pastoral care, student services, student union and Personal Development Teacher (PDT

It is a requirement that students keep a record of their learning experiences. This includes provision of evidence to support successful attainment of NMC outcomes and competencies. This record should be made available to their practice assessor at the beginning of a new experience to enable discussion of strengths, and areas for improvement. It should also include information concerning additional supervision or support provided.

All Edinburgh Napier University pre-registration nursing students undertake 2,300 hours of practice learning (including any award of Recognition of Prior Learning).Students are expected to ensure that the necessary record of learning and assessment within practice is logged in the "MyProgress" platform throughout the length of their programme. We therefore value the contribution of practice supervisors and assessors, and welcome provision of comprehensive written accounts of progression within each assessed area. For support and guidance in fulfilling this part of your role, please contact the Practice Education Facilitator supporting your area.

**The term person-centred is used throughout this document however, in relation to Child Health nursing this would include family centred care.*

PRACTICE LEARNING EXPERIENCES

The BN/MN pathway has 1 route to achieve registration however some students require individually managed programme due to a variety of reasons. When a student requires an individually managed programme they may not complete the practice learning experiences within the same time period as the 3 year programme planner. For these students, the following table and PAD will be populated to indicate what practice learning experiences have been completed to guide the practice supervisor/assessor. Recognition of Prior Learning (RPL) will be considered for students transferring from other Programmes for example and will be indicated on the table below and in the PAD documentation.

Table 1: Overview of Practice Learning Placements and (RPL)

		3 parts	Managed Programme
1.	Practice learning experience one	√	RPL y/n
2.	Practice learning experience Two)	√	RPL y/n
Practice assessor - The final placement in year 1 the practice assessor must confirm the student suitability to progress into part 2 of the programme			
3.	Practice learning experience three	√	RPL y/n
4.	Nursing Practice Four (Primary care experience)	√	RPL y/n
Practice assessor - The final placement in year 2 the practice assessor must confirm the student suitability to progress into part 3 of the programme			
5.	Practice learning experience Five	√	RPL y/n
6.	Mobility experience. This is an optional activity offered to students		
7.	Practice learning experience six	√	RPL y/n

Practice learning experiences will have provided students with 24-hour seven day care in primary, secondary and social care environments by the end of the programme.

According to NMC Standards programmes must include two progression points, normally separating the programme into three equal parts. Edinburgh Napier University has these progression points at the end of year 1 and year 2, where the practice assessor will be required to confirm that the student has achieved modules' learning outcomes and has therefore demonstrated competency at the desired level. The practice assessor in the final placement will then sign to confirm that based on the overall assessment evidence the students are competent to register. However, final confirmation lies with the SHSC Dean of School.

2.0.1. Programme flow/planner

Edinburgh Napier University
Training Programme: 2020 Curriculum

YEAR ONE

07.09.20	14.09.20	21.09.20	28.09.20	05.10.20	12.10.20	19.10.20	26.10.20	02.11.20	09.11.20	16.11.20	23.11.20	30.11.20	07.12.20	14.12.20	21.12.20	28.12.20	04.01.21	11.01.21	18.01.21	25.01.21	01.02.21	08.02.21	15.02.21	22.01.21	01.03.21	08.03.21	15.03.21	22.03.21	29.03.21	05.04.21	12.04.21	19.04.21	26.04.21	03.05.21	10.05.21	17.05.21	24.05.21	31.05.21	07.06.21	14.06.21	21.06.21	28.06.21	05.07.21	12.07.21	19.07.21	26.07.21	02.08.21	09.08.21	16.08.21	23.08.21	30.08.21
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15					1	2	3	4	5	6	7	8	9	10	11			12	13	14	15			1	2	3	4	5	6	7	8	9	10	11	12	13	ITW
Week One	**Theory Modules:** Caring For Self And Others Understanding Body Systems												Exam Week		Christmas Holidays			PLE(1) (PB)	**Theory Module:** Developing Identity And Role in ***Field*** Nursing											Easter Holiday	Theory Cont			Exam Week			**Theory Module:** Assessing Community And Patient Wellness													
	Practice Learning Experience (PLE) 1: Preparation for Nursing Practice 1 Online/Simulation and Clinical Skills																		**(PLE) 1: [PB]**						**(PLE) 1:** Skills/Simulation **(S/S)**						**(PLE) 1:** Skills Cont						**(PLE) 1** Retrieval **(PLE)2:[PB]** OR **(PLE)2:S/S**				**(PLE)2:[PB]** OR **(PLE)2:SKILLS** **(PLE)2:[PB]** OR **(PLE)2:SKILLS**				**Summer Holidays**				**(PLE)2** Retrieval OR **(PLE)2** SKILLS			

YEAR TWO

06.09.21	13.09.21	20.09.21	27.09.21	04.10.21	11.10.21	18.10.21	25.10.21	01.11.21	08.11.21	15.11.21	22.11.21	29.11.21	06.12.21	13.12.21	20.12.21	27.12.21	03.01.22	10.01.22	17.01.22	24.01.22	31.01.22	07.02.22	14.02.22	21.02.22	28.02.22	07.03.22	14.03.22	21.03.22	28.03.22	04.04.22	11.04.22	18.04.22	25.04.22	02.05.22	09.05.22	16.05.22	23.05.22	30.05.22	06.06.22	13.06.22	20.06.22	27.06.22	04.07.22	11.07.22	18.07.22	25.07.22	01.08.22	08.08.22	15.08.22	22.08.22	29.08.22
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15					1	2	3	4	5	6	7	8	9	10	11	12			13	14	15			1	2	3	4	5	6	7	8	9	10	11	12	13	ITW
Week One/ PLE 2 RETRIEVAL	**Theory Module**: Assessing Need And Delivering Holistic Care In ***Field*** Nursing												Exam Week		Christmas Holidays				**Theory Module:** Understanding Research And Evidence-Based Practice											Easter Holiday		Revision Week	Exam Week			**Theory Modules:** Recognising And Responding To Altered Health In ***Field*** Nursing Working In Health And Social Care Teams													
	(PLE) 3: Skills/ Simulation	**(PLE) 3: [PB]** 32 hours per week																	**(PLE) 4:** Skills/Simulation						**(PLE) 4:** and/or Mobility **[PB]**											**(PLE) 3** OR **(PLE) 4:** Retrieval **(PLE) 4:** Skills LAB/Online						**Summer Holidays**		**(PLE) 4:** Skills LAB/Online						

YEAR THREE

05.09.22	12.09.22	19.09.22	26.09.22	03.10.22	10.10.22	17.10.22	24.10.22	31.10.22	07.11.22	14.11.22	21.11.22	28.11.22	05.12.22	12.12.22	19.12.22	26.12.22	02.01.23	09.01.23	16.01.23	23.01.23	30.01.23	06.02.23	13.02.23	20.02.23	27.02.23	06.03.23	13.03.22	20.03.23	27.03.23	03.04.23	10.04.23	17.04.23	24.04.23	01.05.23	08.05.23	15.05.23	22.05.23	29.05.23	05.06.23	12.06.23	19.06.23	26.06.23	03.07.23	10.07.23	17.07.23	24.07.23	31.07.23	07.08.23	14.08.23	21.08.23	28.08.23
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15					1	2	3	4	5	6	7	8	9	10	11			12	13	14	15			1	2	3	4	5	6	7	8	9	10	11	12	13	ITW
Week One	**Theory Module:** Managing Complexity In ***Field*** Nursing Promoting Care Quality And Improving Safety												Exam Week		Christmas Holidays			PLE(5): (PB)	**Theory Module:** Leading In Health And Social Care Teams Transitioning To Professional Practice											Easter Holiday	Theory Cont			Exam Week	**(PLE) 6 [PB]**																		Summer Holidays			
	(PLE) 5: [PB]						**(PLE) 5:** Essential Skills: Online/Simulation												**(PLE) 5: [PB]**						**(PLE) 5:** Essential Skills/Online/ Simulation						**PLE (5)** Skills																				

PB: (Practice Based)
(PLE) 1-6: (Assessment: Completion of Practice Assessment Documentation)
SS: (Skills/ Simulation)

2.1. Assessment criteria

Background Information

Student supervision and assessment in practice requires that practice supervisors and assessors work together with you as a student to facilitate your learning. This, combined with the input of your academic assessor, will help to ensure a robust assessment process for each part of your programme, and at the point of professional registration.

The assessment process includes your supervision and support in practice and the assessment of your performance based on specific components which have been determined by the Nursing and Midwifery Council (NMC 2018a). These are outlined as part of this documentation and your practice supervisors and assessors should review this information prior to engaging in the supervision and assessment of your performance in practice.

Assessment Components

There are two components to your assessment

1. Platforms and Proficiencies
2. Skills and Procedures

1. Platforms and Proficiencies

These are assessed for every practice learning experience (PLE). There are 7 platforms, each of which has associated proficiencies (NMC 2018a). As a student you must achieve all proficiencies for each platform during your programme. Each of the platforms are listed below, including the number of proficiencies associated with each. **All proficiencies detailed within the 'Platforms and Proficiencies' Section of the document must be achieved.** Evidence of this achievement of the proficiencies will be assessed in line with the levels of the participation in care framework. Using the levels of this framework to assess your performance will ensure that this assessment confirms that there has been progression in your performance as you progress through your programme of study. It is the responsibility of the practice supervisor and practice assessor to discuss your progress together, and with others including consideration of feedback from service users and carers and, through this collaborative dialogue, determine whether or not you have achieved each of the platform proficiencies at the required level of performance. The outcome of this assessment will then be reviewed and confirmed by your academic assessor at the end of each PART:

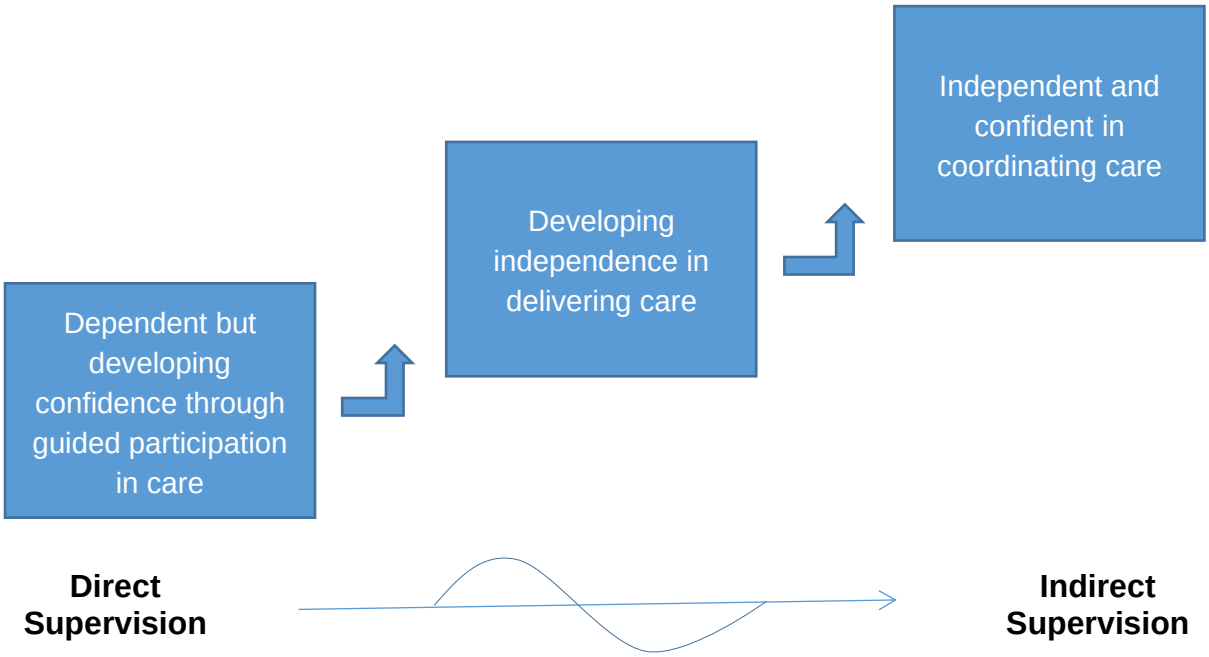
- **Platform 1 - Being an accountable professional**
  - 20 proficiencies to be achieved
- **Platform 2 – Promoting health and preventing ill health**
  - 12 proficiencies to be achieved
- **Platform 3 – Assessing needs and planning care**
  - 16 proficiencies to be achieved
- **Platform 4 – Providing and evaluating care**
  - 18 proficiencies to be achieved
- **Platform 5 – Leading and managing nursing care and working in teams**

    - 12 proficiencies to be achieved
- **Platform 6 – Improving safety and quality of care**
    - 12 proficiencies to be achieved
- **Platform 7 – Coordinating care**
    - 13 proficiencies to be achieved

Assessment of Proficiencies through Participation in Care

The practice assessor will ultimately be responsible for determining the assessment outcome in practice, however, this will involve collaborative discussion with others who support and come into contact with you as you progress through each Part of your programme. The participation in care framework below is designed to assist you, and those supporting and assessing you, to identify the level of your performance for each of the proficiencies associated with each of the platforms.

- **Participation in Care – Dependent to Independent (PLPAD 2.0)***



The description of each level of participation, detailed in the diagram above, and explained in more detail below, will help you and your practice supervisor(s)/assessor(s) to understand what is expected of you as a student by the end of each Part of your programme. The explanation below outlines the expected level of performance which must be demonstrated by the end of each Part, as well as the level of assistance you can expect to receive from your practice supervisor(s)/assessor;

- **Participation in Care – Explanation of Levels of Participation**

    - **Dependent** – Minimal standard of participation in care to be achieved by the end of Part 1 of nursing students' programme.
        - You will be working closely with your practice supervisor who will direct and guide you. Through this guided participation in care, you

will be able to demonstrate delivery of safe, effective, person-centred care in a professional manner using appropriate nursing skills. You will also demonstrate a professionalism in your attitudes and values as well as a positive attitude to own learning

- **Developing Independence** – Minimum standard of participation in care to be achieved by the end of Part 2 of nursing students' programme
  - You will be developing independence and your practice supervisor will offer guidance and support when required. You will actively participate in care with this guidance and will demonstrate increasing confidence and competence. You will also demonstrate an understanding of professional roles and responsibilities and will maximise opportunities to extend your own knowledge

- **Independent** – Minimum standard of participation in care to be achieved by the end of Part 3 of nursing students' programme
  - You will be working independently and your practice supervisor will offer a more indirect form of supervision. You will demonstrate the ability to lead and coordinate care, and the ability to act as an accountable and responsive practitioner, demonstrating a comprehensive knowledge base that informs safe and effective practice. You will also assume responsibility for your own learning, as well as the learning of others

*****Adapted with permission from: Pan London Practice Learning Group (2019). *Pan London Practice Assessment Document 2.0* available from*:* www.plplg.uk

2. Annexes A and B: Skills and Procedures

In addition to the platforms and proficiencies, detailed above, there are also skills and procedures. These skills and procedures must be **safely demonstrated** before being confirmed by your practice supervisor/practice assessor. This will mostly take place in the practice environment however, in exceptional circumstances for example, if it is not possible to perform cardiopulmonary resuscitation in practice, you may be able to achieve these through simulation. Clinical skills and procedures practiced and safely demonstrated in both practice and simulation will be documented and signed for within the PAD as part of the 'Annexes A and B Skills and Procedures' section.

Your practice supervisor and practice assessor must discuss your progress and, through this collaborative dialogue, and also through discussion with others, determine whether or not you have safely demonstrated both the skills and procedures. The sets of skills and procedures identified by NMC as having to be safely demonstrated prior to entry to the NMC register are detailed below:

- **Communication and relationship management skills**
  - **Skill Set 1** – Underpinning communication skills for assessing, planning, providing and managing best practice, evidence-based nursing care
    - 12 skills

  - **Skill Set 2** – Evidence-based, best practice approaches to communication for supporting people of all ages, their families and carers in preventing ill health and in managing their care

        - 9 skills
    - **Skill Set 3** – Evidence-based, best practice communication skills and approaches for providing therapeutic interventions
        - 9 skills
    - **Skill Set 4** – Evidence-based, best practice communication skills and approaches for working with people in professional teams
        - 11 skills

- **Nursing Procedures**
    - **Procedure Set 1 – Procedures for assessing people's needs for person-centred care**
        - 26 procedures
    - **Procedure Set 2 – Procedures for the planning, provision and management of person-centred nursing care**
        - 90 procedures

Skill and Procedure Achievement

The Annexe skills and procedures are provided as a list as part of this Practice Assessment Document (PAD) and you must safely demonstrate each of these to enable your practice supervisor/assessor to sign to confirm that this has taken place. Safely demonstrating skills and procedures will take place throughout each part of your programme and will, more often than not, involve a number of practice supervisors, as well as, potentially, the practice assessor. *It is therefore important that at the start of each placement, you review all skills and procedures with your practice supervisor to help you to determine which skills and procedures you could potentially work towards safely demonstrating in each* area. Opportunities should be noted within the Learning Development Plan at the start of your PLE. Any skill or procedure that has been safely demonstrated must continue to be demonstrated safely whenever the opportunity arises in practice.

Your practice supervisors and assessors must not only communicate with one another, but must also provide you with frequent feedback on your performance, indicating how you can best improve the safe demonstration of these skills and procedures going forward. Areas of strength and aspects for development should also be discussed and documented at all times to feed forward for each subsequent PLE.

2.2. Mandatory Training

This must be signed by the student and verified by an academic member of staff when sessions are attended/completed.

	Pre Practice	**Part 1**	**Part 2**	**Part 3 & 4**
Manual Handling (Statutory)	Theory and Practice to support achievement of A-F, or A-D, as per 'The Scottish Manual Handling Passport' Scheme	Practice to support achievement of E-F (if not done pre practice)	Annual update	Annual update
Student Signature:				
HEI Signature:				
Date:				
Prevention & Safe (Therapeutic) Management of Violence and Aggression	Breakaway technique – theory and practice	Theory and Practice	Theory Refresher	Theory and Practice
Student Signature:				
HEI Signature:				
Date:				
Fire Safety (Statutory)	Learn Pro Community Module *Fire Safety Awareness* Online Assessment		Lecture / Online Assessment	Lecture / Online Assessment
Student Signature:				
HEI Signature:				
Date:				
Better Blood Transfusion			Safe Transfusion Practice Module 1	
Student Signature:				
HEI Signature:				
Date:				

2.3. Record of compulsory practice skills

Practice Skills	Pre Practice	Part 1	Part 2	Part 3 & 4
Cardio-Pulmonary Resuscitation (*Theory and Practice*)	BLS		BLS/AED	BLS/AED or ILS
Student Signature:				
HEI Signature:				
Date:				
Control of Infection	No. 4 Hand Hygiene **	SIPCEP Foundation Pathway		
Student Signature:				
HEI Signature:				
Date:				
Safe Medicate Numeracy	Part 1:Safe Medicate Numeracy assessment	Part 2:Safe Medicate Numeracy assessment	Part 3:Safe Medicate Numeracy assessment (100%)	
Student Signature:				
HEI Signature:				
Date:				
Adult Support and Protection		Learn Pro Community Module: *Adult Support and Protection*		
Student Signature:				
HEI Signature:				
Date:				
Child Wellbeing (Protection) for the general contact workforce		Learn Pro Community Module		
Student Signature:				
HEI Signature:				
Date:				
Skin Surveillance				
Student Signature:				
HEI Signature:				
Date:				

2.3. Record of compulsory practice skills continued

Field specific skills	Informed Level	Skilled Level	
Dementia Promoting Excellence Framework			
Student Signature:			
HEI Signature:			
Date:			

PART 1 (Pink pages)
Practice Learning Experiences (2)

Practice Learning Experience (PLE) 1

Practice Learning Experience (PLE) 2

PRACTICE LEARNING EXPERIENCE 1

NUR07112

PART 1 PLE 1

PRACTICE LEARNING EXPERIENCE

Information for Students	
1.	Please check the information produced by the Practice Placement Team to ensure you complete the correct section of the PAD.
2.	Please contact your PLE prior to your start date to confirm who your nominated practice supervisor is and to confirm your shift pattern.
3.	Please note that it is expected that your working hours reflects the range of hours expected of registered nurses (NMC 2018d). This includes working weekends and night shifts; please refer to your Practice Learning Handbook for more details.
4.	Please ensure that you liaise with your practice supervisor to secure dates for your interim review of progress and your final assessment. This should take place during your initial discussions with your practice supervisor.
5.	Please note the expected practice hours to be achieved whilst within this PLE and ensure that your shift pattern will enable you to achieve these hours.
6.	Please refer to and discuss the skills and procedures with your practice supervisor to identify any skills that can be safely demonstrated within the PLE.

PRE-PRACTICE LEARNING ACTIVITIES PART 1: PLE 1			
PRACTICE LEARNING EXPERIENCE DETAILS			
Student Name:		Intake:	
Student ID:		Year:	
Practice Learning Environment: Telephone Number:		Start date: Finish date:	

PLE Type:	
Name of PEF/CHEF:	
Nominated Practice Supervisor Name:	
Nominated Practice Assessor Name:	
Nominated Academic Assessor Name:	

Prior to the commencement of each practice learning environment, the student should:

1. Make contact with the practice learning environment and ascertain the shift patterns in operation, the name of your designated practice supervisor/ assessor and if appropriate, arrange a pre-practice experience visit.
2. Read the appropriate practice learning environment profile, which can be accessed on the student portal/via InPlace/QMPLE.
3. Briefly summarise what the practice learning environment does:

4. From the *Learning Opportunities* outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
5. Considering the service user group that attend the practice learning experience, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these. ○ From your search, identify two key articles on the topic and list below (using appropriate reference style) ○ In the space below provide a brief summary of these two articles and outline any best practice recommendations in relation to these
Article 1 – Article 2 - Condition / situation

6. In relation to the practice learning environment you are about to enter, identify any related learning from your theory modules that will support your learning within this care environment. Please note your thoughts below:		
7. In relation to the practice learning environment that you are about to enter, identify any related learning from the preparation for practice (or skills sessions) that will support your learning within this care environment. Please note your thoughts below:		
Practice Supervisor – please sign to confirm that the pre-practice learning activities have been completed by the student		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/ or Assessor Signature:*

MODULE LEARNING OUTCOMES

PART 1: PLE 1

Module Summary:

This module will introduce you to the Simulation and Clinical Skills Centre and your first practice learning experience within a range of health and social care settings.

Through simulation and clinical skills sessions, online learning and a period in a health and social care practice you will be introduced to a range of skills, policies, initiatives and services in ways that contribute to assuring the health and wellbeing of yourself and of others as part of interprofessional health and social care services.

In the module you will learn about the influence that carers, families and environment have on health and wellbeing and, under supervision, participate in a range of communication, relationship management and procedural skills

At each stage you will be supported and assessed by suitably trained professionals based on skills and proficiencies outlined in your Practice Assessment Document (PAD).

Module learning outcomes:

LO 1: Practice in accordance with the NMC Code: Professional Standards of Practice and Behaviour (NMC, 2015) for nurses and midwives to develop core professional values of honesty, integrity and without discrimination

LO 2: Demonstrate effective communication, relationship management and procedural skills which are evidence-based, safe, effective, compassionate and respectful

LO 3: Participate in a range of skills to meet the physical and mental health needs of individuals of all ages under supervision of a health and/or social care professional

LO 4: Appreciate the role of the nurse working in collaboration with other fields of practice and other professions to promote a culture of safety and high quality care.

ORIENTATION & PRELIMINARY MEETING PART 1: PLE 1

In accordance with the ***NHS Education for Scotland (2008) Quality Standards for Practice Placements***, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	**Please initial when complete**
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident /incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and final assessment	

LEARNING DEVELOPMENT PLAN PART 1: PLE 1		
Please use the space below to summarise the main points arising from the preliminary meeting with the student and discussion around the students learning development plan. **Please identify skills and procedures that could be achieved within area:**		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*
Agreed date for next meetings	**Interim:**	**Final:**

INTERIM FEEDBACK MEETING PART 1: PLE 1
Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments): **Platform 1: Being an accountable professional** **Platform 2: Promoting health and preventing ill health** **Platform 3: Assessing needs and planning care** **Platform 4: Providing and evaluating care** **Platform 5: Leading and managing nursing care and working in teams**

Platform 6: Improving safety and quality of care **Platform 7: Coordinating care** **Skills and Procedures:**			
Student feedback:			
Have any issues been referred to the practice and/or academic assessor?		**Yes**	**No**
Development Support Plan (see Section 3)		**Yes**	**No**
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/ or Assessor Signature:*	

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4)

PART 1: PLE 1

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:
You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

Please tick if you are: The patient/service user ☐ Carer/Relative ☐

How happy were you with the way the student nurse….	**Very happy**	**Happy**	**I'm not sure**	**Unhappy**	**Very unhappy**
…cared for you?					
…listened to your needs?					
…understood the way you felt?					
…talked to you?					
…showed you respect?					

What did the student nurse do well?

What could the student nurse have done differently?

Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK PART 1: PLE 1		
Please note any other forms of service user/carer feedback (eg cards, letters, emails). ***Please ensure anonymity is maintained***		
Use the box below to record your thoughts and feelings on all service user/carer feedback received:		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/ or Assessor Signature:*

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES PART 1: PLE 1	
Student Name:	**STUDENT ID:** **Intake/Year Group:**
Name of Placement:	**Practice Supervisor:**
Name and Location of Organisation/Professional Visited:	
Individual overseeing student's opportunity comments – Please comment on student performance and what learning has taken place?	
Print Name: **Date:**	**Sign:**
Student reflection - please reflect on what you have learned?	
Date:	
Student signature:	

ADDITIONAL NOTES PART 1: PLE 1			
Date	**Time**	**Detail**	**Signature**
		Student, practice supervisors, practice assessors, academic assessors can add notes to this page	

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR PART 1: PLE 1	
Student Name:	**STUDENT ID:**
	Intake/Year Group:
The minimum level of performance for this part of the programme is **DEPENDENT**. This means that the student nurse requires continuous or frequent support from the practice supervisor/assessor but is developing confidence through guided participation in care. Please comment on the Platforms below:	
Platform 1: Being an accountable professional **Platform 2: Promoting health and preventing ill health** **Platform 3: Assessing needs and planning care**	

Platform 4: Providing and evaluating care

Platform 5: Leading and managing nursing care and working in teams

Platform 6: Improving safety and quality of care

Platform 7: Coordinating care

Please comment on progress towards safely demonstrating the skills and procedures in Annex A and B. Identify aspects for the student to focus on in future PLEs.		
Date ____/____/____	*Student Signature:*	*Practice Assessor's Signature:*

Module Learning Outcomes (please initial)	**PASS**	**FAIL**
LO1		
LO2		
LO3		
LO4		

Practice Assessor Overall Summative Assessment Comments	
Overall result for this PLE	**PASS / FAIL / GRADE**
Name of Practice Assessor (print full name)	
Signature of Practice Assessor:	
Designation:	Date:

Practice Assessor Confirmatory Statement	
I confirm that: student nurse (print full name) _____ following a period of _____ hours of attendance at placement (please refer to attendance record), and through objective evidence-based assessments, has: **ACHIEVED / NOT ACHIEVED** (Please delete as appropriate) the expected level of **DEPENDENT**	
Signature of Practice Assessor:	
Date:	
Student Statement	
I _____ (write name in capital letters) have received feedback on my performance and have had the opportunity to reflect and discuss this with the Practice Assessor. Please write comments below:	
Student signature:	Date:

ATTENDANCE RECORD PART 1: PLE 1	
Student Name and ID	
Module Name	
Programme and year	
Field of Practice	
Practice learning environment	

Week No	Week beginning	M	T	W	T	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12.5	12.5	12.5	DO	DO	37.5	S. Nurse
1										
2										
3										
					Total number of hours **… weeks = …hrs**					

See section 1.7.1 for maximum hours worked per week

Key: U=University DO=Day Off

C=Compassionate leave S=Sick A=Absent (not sick)

Date ____/____/____	*Student Signature:*	*Practice Assessor/ Supervisor Signature:*

PRE-PRACTICE LEARNING ACTIVITIES PART 1: PLE 1			
PRACTICE LEARNING EXPERIENCE DETAILS			
Student Name:		Intake:	
Student ID:		Year:	
Practice Learning Environment: Telephone Number:		Start date: Finish date:	

PLE Type:	
Name of PEF/CHEF:	
Nominated Practice Supervisor Name:	
Nominated Practice Assessor Name:	
Nominated Academic Assessor Name:	

Prior to the commencement of each practice learning environment, the student should:

8. Make contact with the practice learning environment and ascertain the shift patterns in operation, the name of your designated practice supervisor/ assessor and if appropriate, arrange a pre-practice experience visit.
9. Read the appropriate practice learning environment profile, which can be accessed on the student portal/via InPlace/QMPLE.
10. Briefly summarise what the practice learning environment does:

11. From the *Learning Opportunities* outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
12. Considering the service user group that attend the practice learning experience, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these. ○ From your search, identify two key articles on the topic and list below (using appropriate reference style) ○ In the space below provide a brief summary of these two articles and outline any best practice recommendations in relation to these
Article 1 – Article 2 - Condition / situation

13. In relation to the practice learning environment you are about to enter, identify any related learning from your theory modules that will support your learning within this care environment. Please note your thoughts below:		
14. In relation to the practice learning environment that you are about to enter, identify any related learning from the preparation for practice (or skills sessions) that will support your learning within this care environment. Please note your thoughts below:		
Practice Supervisor – please sign to confirm that the pre-practice learning activities have been completed by the student		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/ or Assessor Signature:*

Practice Learning Experience 2

NUR07113

PART 1 PLE 2

PRACTICE LEARNING EXPERIENCE

Information for Students	
1.	Please check the information produced by the Practice Placement Team to ensure you complete the correct section of the PAD.
2.	Please contact your PLE prior to your start date to confirm who your nominated practice supervisor is and to confirm your shift pattern.
3.	Please note that it is expected that your working hours reflects the range of hours expected of registered nurses (NMC 2018d). This includes working weekends and night shifts; please refer to your Practice Learning Handbook for more details.
4.	Please ensure that you liaise with your practice supervisor to secure dates for your interim review of progress and your final assessment. This should take place during your initial discussions with your practice supervisor.
5.	Please note the expected practice hours to be achieved whilst within this PLE and ensure that your shift pattern will enable you to achieve these hours.
6.	Please refer to and discuss the skills and procedures with your practice supervisor to identify any skills that can be safely demonstrated within the PLE.

PRE-PRACTICE LEARNING ACTIVITIES PART 1: PLE 2			
PRACTICE LEARNING EXPERIENCE DETAILS			
Student Name:		Intake:	
Student ID:		Year:	
Practice Learning Environment: Telephone Number:		Start date: Finish date:	

PLE Type:	
Name of PEF/CHEF:	
Nominated Practice Supervisor Name:	
Nominated Practice Assessor Name:	
Nominated Academic Assessor Name:	

Prior to the commencement of each practice learning environment, the student should:

15. Make contact with the practice-learning environment and ascertain the shift patterns in operation, the name of your designated practice supervisor/ assessor and if appropriate, arrange a pre-practice experience visit.
16. Read the appropriate practice learning environment profile, which can be accessed on the student portal/via InPlace/QMPLE.
17. Briefly summarise what the practice learning environment does:

18. From the *Learning Opportunities* outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
19. Considering the service user group that attend the practice learning experience, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these. ○ From your search, identify two key articles on the topic and list below (using appropriate reference style) ○ In the space below provide a brief summary of these two articles and outline any best practice recommendations in relation to these
Article 1 – Article 2 - Condition / situation

20. In relation to the practice learning environment you are about to enter, identify any related learning from your theory modules that will support your learning within this care environment. Please note your thoughts below:		
21. In relation to the practice learning environment that you are about to enter, identify any related learning from the preparation for practice (or skills sessions) that will support your learning within this care environment. Please note your thoughts below:		
Practice Supervisor – please sign to confirm that the pre-practice learning activities have been completed by the student		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/ or Assessor Signature:*

MODULE LEARNING OUTCOMES

PART 1: PLE 2

Module Summary:

This practice module will develop your ability to observe and participate in assessment, delivery and evaluation of compassionate patient care within a range of health and social care settings.

You will reflect on how health and social care standards and policies are used in practice to improve care within your practice learning experience.

In collaboration with Practice Supervisors/ Assessors you will identify local health principles and priorities and recognise major causes and social determinants of health.

Through simulation clinical skills sessions, online and work-based learning you will, under supervision, engage in a range of skills, and observe and participate in the assessment, delivery and evaluation of compassionate care as part of the inter-professional team within health and social care settings.

You will work with patients and carers in a relationship-based way that reflects a professional commitment to equality and diversity working in collaboration with members of the health and social care team to provide carer for individuals and their families.

You will develop skills commensurate with Part One of the BN programme that emphasise effective communication, compassionate partnership working. At each stage you will be supported and assessed by suitably trained professionals based on skills and proficiencies outlined in your Practice Assessment Document (PAD).

Module Learning Outcomes:

LO 1: Gain an appreciation of local health and care principles, practice, policies and procedures and consider their impact on social determinants and addressing strengths and weaknesses in minimising health and inequalities in health and illness.

LO 2: Identify and demonstrate the importance of developing the knowledge and skills required in nursing practice to enhance decision-making to promote health and wellness of individuals and families across the lifespan.

LO3: Develop communication, relationship management and procedural skills applied in a holistic, non-judgemental, caring, sensitive and accessible manner.

LO4: Recognise the role of others who work in health and social care settings and collaborate with them to promote safe, individualised care.

ORIENTATION & PRELIMINARY MEETING PART 1: PLE 2

In accordance with the ***NHS Education for Scotland (2008) Quality Standards for Practice Placements***, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	**Please initial when complete**
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident /incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and final assessment	

LEARNING DEVELOPMENT PLAN PART 1: PLE 2		
Please use the space below to summarise the main points arising from the preliminary meeting with the student and discussion around the students learning development plan. **Please identify skills and procedures that could be achieved within area:**		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*
Agreed date for next meetings	**Interim:**	**Final:**

INTERIM FEEDBACK MEETING PART 1: PLE 2
Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments): **Platform 1: Being an accountable professional** **Platform 2: Promoting health and preventing ill health** **Platform 3: Assessing needs and planning care** **Platform 4: Providing and evaluating care** **Platform 5: Leading and managing nursing care and working in teams**

Platform 6: Improving safety and quality of care **Platform 7: Coordinating care** **Skills and Procedures:**			
Student feedback:			
Have any issues been referred to the practice and/or academic assessor?		**Yes**	**No**
Development Support Plan (see Section 3)		**Yes**	**No**
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/ or Assessor Signature:*	

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4)

PART 1: PLE 2

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:
You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

Please tick if you are: The patient/service user ☐ Carer/Relative ☐

How happy were you with the way the student nurse….	**Very happy**	**Happy**	**I'm not sure**	**Unhappy**	**Very unhappy**
…cared for you?					
…listened to your needs?					
…understood the way you felt?					
…talked to you?					
…showed you respect?					

What did the student nurse do well?

What could the student nurse have done differently?

Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK PART 1: PLE 2		
Please note any other forms of service user/carer feedback (eg cards, letters, emails). ***Please ensure anonymity is maintained***		
Use the box below to record your thoughts and feelings on all service user/carer feedback received:		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/ or Assessor Signature:*

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES PART 1: PLE 2	
Student Name:	**STUDENT ID:** **Intake/Year Group:**
Name of Placement:	**Practice Supervisor:**
Name and Location of Organisation/Professional Visited:	
Individual overseeing student's opportunity comments – Please comment on student performance and what learning has taken place?	
Print Name: **Date:**	**Sign:**
Student reflection - please reflect on what you have learned?	
Date:	
Student signature:	

ADDITIONAL NOTES PART 1: PLE 2			
Date	**Time**	**Detail**	**Signature**
		Student, practice supervisors, practice assessors, academic assessors can add notes to this page	

FINAL ASSESSMENT: END OF PLE 2 TO BE COMPLETED BY PRACTICE ASSESSOR PART 1: PLE 2	
Student Name:	**STUDENT ID:**
	Intake/Year Group:
The minimum level of performance for this part of the programme is **DEPENDENT**. This means that the student nurse requires continuous or frequent support from the practice supervisor/assessor, but is developing confidence through guided participation in care. Please comment on the Platforms below:	
Platform 1: Being an accountable professional **Platform 2: Promoting health and preventing ill health** **Platform 3: Assessing needs and planning care**	

Platform 4: Providing and evaluating care

Platform 5: Leading and managing nursing care and working in teams

Platform 6: Improving safety and quality of care

Platform 7: Coordinating care

Please comment on progress towards safely demonstrating the skills and procedures in Annex A and B. Identify aspects for the student to focus on in future PLEs.		
Date ____/____/____	*Student Signature:*	*Practice Assessor's Signature:*

Module Learning Outcomes (please initial)	**PASS**	**FAIL**
LO1		
LO2		
LO3		
LO4		

Practice Assessor Overall Summative Assessment Comments	
Overall result for this PLE	**PASS / FAIL / GRADE**
Name of Practice Assessor (print full name)	
Signature of Practice Assessor:	
Designation:	Date:

Practice Assessor Confirmatory Statement	
I confirm that: student nurse (print full name) _____ following a period of _____ hours of attendance at placement (please refer to attendance record), and through objective evidence-based assessments, has: **ACHIEVED / NOT ACHIEVED** (Please delete as appropriate) the expected level of **DEPENDENT**	
Signature of Practice Assessor:	
Date:	
Student Statement	
I _____ (write name in capital letters) have received feedback on my performance and have had the opportunity to reflect and discuss this with the Practice Assessor. Please write comments below:	
Student signature:	Date:

ATTENDANCE RECORD PART 1: PLE 2	
Student Name and ID	
Module Name	
Programme and year	
Field of Practice	
Practice learning environment	

Week No	Week beginning	M	T	W	T	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12.5	12.5	12.5	DO	DO	37.5	S. Nurse
1										
2										
3										
					Total number of hours **… weeks = …hrs**					

See section 1.7.1 for maximum hours worked per week

Key: U=University DO=Day Off

C=Compassionate leave S=Sick A=Absent (not sick)

Date ____/____/____	*Student Signature:*	*Practice Assessor/ Supervisor Signature:*

CONFIRMATION OF COMPLETION - PART 1

Practice Assessor Confirmation of Proficiency

This feedback should be informed by feedback sought from practice supervisors and assessors (see previous pages) and any other relevant people in order to be assured about your decision. Review platform proficiencies section for the part to ensure all have been signed as achieved.

Practice Assessor: Confirmation of Achievements of Platforms **END OF PART 1:** ***Please initial the relevant column***		
	Achieved	**Not achieved**
Platform 1: Being an accountable professional		
Platform 2: Promoting health and preventing ill-health		
Platform 3: Assessing needs and planning care		
Platform 4: Providing and evaluating care		
Platform 5: Leading and managing nursing care and working in teams		
Platform 6: Improving safety and quality of care		
Platform 7: Co-ordinating care		

Practice Assessor: Comment on areas of development for safe demonstration of skills and procedures (Annexes A & B)

Practice Assessor Confirmatory Statement – END OF PART 1
I confirm that in partnership with the nominated Academic Assessor, student nurse (print name) _____ has **ACHIEVED/NOT ACHIEVED** (please delete as appropriate) all platforms (and proficiencies) at the **DEPENDENT** level for Part 1 of the programme and, **RECOMMEND/DO NOT RECOMMEND** (please delete as appropriate) progression to **PART 2**.
Signature of Practice Assessor:
Date:

Academic Assessor Confirmatory Statement (HEI use only) – END OF PART 1
I confirm that in partnership with the nominated Practice Assessor, student nurse (print name) _____ has **ACHIEVED/NOT ACHIEVED** (please delete as appropriate) all platforms (and proficiencies) at the **DEPENDENT** level for Part 1 of the programme and, **RECOMMEND/DO NOT RECOMMEND** (please delete as appropriate) progression to **PART 2**.
Comments:
Signature of Academic Assessor:
Date:

HEI USE ONLY	
Number of hours for Part 1	
Hours carried forward to Part 2	
Retrieval programme required?	YES / NO (delete as appropriate)

PART 2 (Yellow pages)
Practice Learning Experiences (2)

Practice Learning Experience (PLE) 3

Practice Learning Experience (PLE) 4

PRACTICE LEARNING EXPERIENCE 3

NUR08106

PART 2 PLE 3

PRACTICE LEARNING EXPERIENCE

Information for Students	
1.	Please check the information produced by the Practice Placement Team to ensure you complete the correct section of the PAD.
2.	Please contact your PLE prior to your start date to confirm who your nominated practice supervisor is and to confirm your shift pattern.
3.	Please note that it is expected that your working hours reflects the range of hours expected of registered nurses (NMC 2018d). This includes working weekends and night shifts; please refer to your Practice Learning Handbook for more details.
4.	Please ensure that you liaise with your practice supervisor to secure dates for your interim review of progress and your final assessment. This should be done during your initial discussions with your practice supervisor.
5.	Please note the expected clinical hours to be achieved whilst within this PLE and ensure that your shift pattern will enable you to achieve these hours.
6.	Please refer to discuss the skills and procedures with your practice supervisor to identify any skills that can be achieved within the PLE.

PRE-PRACTICE LEARNING ACTIVITIES PART 2: PLE			
PRACTICE LEARNING EXPERIENCE DETAILS			
Student Name:		Intake:	
Student ID:		Year:	
Practice Learning Environment: Telephone Number:		Start date: Finish date:	

PLE Type:	
Name of PEF/CHEF:	
Nominated Practice Supervisor Name:	
Nominated Practice Assessor Name:	
Nominated Academic Assessor Name:	

Prior to the commencement of each practice learning environment, the student should:

1. Make contact with the practice learning environment and ascertain the shift patterns in operation, the name of your designated practice supervisor/assessor and if appropriate, arrange a pre-practice experience visit.
2. Read the appropriate practice learning environment profile, which can be accessed on the student portal/via InPlace/QMPLE.
3. Briefly summarise what the practice learning environment does:

4. From the *Learning Opportunities* outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
5. Considering the service user group that attend the practice learning experience, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these. ○ From your search, identify two key articles on the topic and list below (using appropriate reference style) ○ In the space below provide a brief summary of these two articles and outline any best practice recommendations in relation to these
Article 1 – Article 2 - Condition / situation

6. In relation to the practice learning environment that you are about to enter, identify any related learning from your theory modules that would support your learning within this care environment. Please note your thoughts below:		
7. In relation to the practice learning environment that you are about to enter, identify any related learning from the preparation for practice (or skills sessions) that would support your learning within this care environment. Please note your thoughts below:		
Practice Supervisor/Assessor – please sign to confirm that the pre-practice learning activities have been completed by the student		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*

MODULE LEARNING OUTCOMES

PART 2: PLE 3

Module Summary:

This practice module will develop your practice proficiency commensurate with Part 2 of the BN programme. This will involve demonstration of your ability to assess, plan, deliver and evaluate care provision indicating increasing accountability for your actions.

You will participate in clinical decision-making and team-working to deliver effective, seamless care through inter-professional collaboration and in partnership with service-users and their families.

Through simulation and clinical skills sessions, online and work-based learning you will, under supervision, work demonstrating your ability to use communications skills e.g., SBARs, broaden and deepen your relationship skills and develop more advanced procedural skills

You will develop skills commensurate with Part Two of the BN programme that emphasise effective communication, compassionate partnership working. At each stage you will be supported and assessed by suitably trained professionals based on skills and proficiencies outlined in your Practice Assessment Document (PAD).

Module learning outcomes:

LO 1: Work in a collaborative manner to assess, plan, deliver and evaluate nursing interventions for people of all ages, who access health and social care across sectors.

LO2: Describe interpersonal values and attitudes conducive to building positive therapeutic relationships with people, individuals and groups.

LO 2: Demonstrate utilisation of communication and other collaborative tools to assure effective inter-professional collaboration in the provision of effective person-centred care as a member of the care delivery team.

LO4: Practice and critical analysis of evidence and decision-making skills, required to care and support people with altered health needs

ORIENTATION & PRELIMINARY MEETING PART 2: PLE 3

In accordance with the ***NHS Education for Scotland (2008) Quality Standards for Practice Placements***, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	**Please initial when complete**
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident /incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and final assessment	

LEARNING DEVELOPMENT PLAN PART 2: PLE 3		
Please use the space below to summarise the main points arising from the preliminary meeting with the student and discussion around the students learning development plan. **Please review skills achieved to date and identify skills and procedures that could be achieved within area:**		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*
Agreed date for next meetings	**Interim:**	**Final:**

INTERIM FEEDBACK MEETING PART 2: PLE 3
Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments): **Platform 1: Being an accountable professional** **Platform 2: Promoting health and preventing ill health** **Platform 3: Assessing needs and planning care** **Platform 4: Providing and evaluating care** **Platform 5: Leading and managing nursing care and working in teams**

Platform 6: Improving safety and quality of care **Platform 7: Coordinating care** **Skills and Procedures:**			
Student feedback:			
Have any issues been referred to the practice and/or academic assessor?		**Yes**	**No**
Development Support Plan (see Section 3)		**Yes**	**No**
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*	

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4)

PART 2: PLE 3

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:
You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

Please tick if you are: The patient/service user ☐ Carer/Relative ☐

How happy were you with the way the student nurse….	**Very happy**	**Happy**	**I'm not sure**	**Unhappy**	**Very unhappy**
…cared for you?					
…listened to your needs?					
…understood the way you felt?					
…talked to you?					
…showed you respect?					

What did the student nurse do well?

What could the student nurse have done differently?

Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK PART 2: PLE 3		
Please note any other forms of service user/carer feedback (e.g. cards, letters, emails). ***Please ensure anonymity is maintained.***		
Use the box below to record your thoughts and feelings on all service user/carer feedback received:		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES PART 2: PLE 3	
Student Name:	**STUDENT ID:** **Intake/Year Group:**
Name of Placement:	**Practice Supervisor:**
Name and Location of Organisation/Professional Visited:	
Individual overseeing student's opportunity comments – Please comment on student performance and what has been learnt	
Print Name: **Date:**	**Sign:**
Student reflection - please reflect on what you have learnt:	
Date:	
Student signature:	

ADDITIONAL NOTES PART 2: PLE 3			
Date	Time	Detail	Signature
		Student, practice supervisors, practice assessors, academic assessors can add notes to this page	

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR PART 2: PLE 3	
Student Name:	**STUDENT ID:**
	Intake/Year Group:
The minimum level of performance for this part of the programme is **DEVELOPING INDEPENDENCE**. This means that the student nurse will be delivering safe and effective care through guided participation in care under increasingly indirect supervision from you in your role as practice supervisor/assessor. Please comment on the Platforms below:	
Platform 1: Being an accountable professional **Platform 2: Promoting health and preventing ill health** **Platform 3: Assessing needs and planning care**	

Platform 4: Providing and evaluating care

Platform 5: Leading and managing nursing care and working in teams

Platform 6: Improving safety and quality of care

Platform 7: Coordinating care

Please comment on progress towards safely demonstrating the skills and procedures in Annex A and B. Identify aspects for the student to focus on in future PLEs.		
Date ____/____/____	*Student Signature:*	*Practice Assessor's Signature:*

Module Learning Outcomes (please initial)	**PASS**	**FAIL**
LO1		
LO2		
LO3		
LO4		

Practice Assessor Overall Summative Assessment Comments	
Overall result for this PLE	**PASS / FAIL / GRADE**
Name of Practice Assessor (print full name)	
Signature of Practice Assessor:	
Designation:	Date:

Practice Assessor Confirmatory Statement
I confirm that: student nurse (print full name) _____ following a period of _____ hours of attendance at placement (please refer to attendance record), and through objective evidence-based assessments, has: **ACHIEVED / NOT ACHIEVED** (Please delete as appropriate) the expected level of **DEVELOPING INDEPENDENCE**
Signature of Practice Assessor:
Date:

Student Statement	
I _____ (write name in capital letters) have received feedback on my performance and have had the opportunity to reflect and discuss this with the Practice Assessor. Please write comments below:	
Student signature:	Date:

ATTENDANCE RECORD PART 2: PLE 3	
Student Name and ID	
Module Name	
Programme and year	
Field of Practice	
Practice learning environment	

Week No	Week beginning	M	T	W	T	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12.5	12. 5	12.5	DO	DO	37.5	S. Nurse
1										
2										
3										
					Total number of hours **… weeks = …hrs**					

See section 1.7.1 for maximum hours worked per week

Key: U=University DO=Day Off

C=Compassionate leave S=Sick A=Absent (not sick)

Date ____/____/____	*Student Signature:*	*Practice Assessor/ Supervisor Signature:*

PRACTICE LEARNING EXPERIENCE 4

NUR08107

PART 2 PLE 4

PRACTICE LEARNING EXPERIENCE

Information for Students	
1.	Please check the information produced by the Practice Placement Team to ensure you complete the correct section of the PAD.
2.	Please contact your PLE prior to your start date to confirm who your nominated practice supervisor is and to confirm your shift pattern.
3.	Please note that it is expected that your working hours reflects the range of hours expected of registered nurses (NMC 2018d). This includes working weekends and night shifts; please refer to your Practice Learning Handbook for more details.
4.	Please ensure that you liaise with your practice supervisor to secure dates for your interim review of progress and your final assessment. This should be done during your initial discussions with your practice supervisor.
5.	Please note the expected clinical hours to be achieved whilst within this PLE and ensure that your shift pattern will enable you to achieve these hours.
6.	Please refer to discuss the skills and procedures with your practice supervisor to identify any skills that can be achieved within the PLE.

PRE-PRACTICE LEARNING ACTIVITIES PART 2: PLE 4			
PRACTICE LEARNING EXPERIENCE DETAILS			
Student Name:		Intake:	
Student ID:		Year:	
Practice Learning Environment: Telephone Number:		Start date: Finish date:	

PLE Type:	
Name of PEF/CHEF:	
Nominated Practice Supervisor Name:	
Nominated Practice Assessor Name:	
Nominated Academic Assessor Name:	

Prior to the commencement of each practice learning environment, the student should:

8. Make contact with the practice learning environment and ascertain the shift patterns in operation, the name of your designated practice supervisor/assessor and if appropriate, arrange a pre-practice experience visit.
9. Read the appropriate practice learning environment profile, which can be accessed on the student portal/via InPlace/QMPLE.
10. Briefly summarise what the practice learning environment does:

11. From the *Learning Opportunities* outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
12. Considering the service user group that attend the practice learning experience, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these. ○ From your search, identify two key articles on the topic and list below (using appropriate reference style) ○ In the space below provide a brief summary of these two articles and outline any best practice recommendations in relation to these
Article 1 – Article 2 - Condition / situation

13. In relation to the practice learning environment that you are about to enter, identify any related learning from your theory modules that would support your learning within this care environment. Please note your thoughts below:		
14. In relation to the practice learning environment that you are about to enter, identify any related learning from the preparation for practice (or skills sessions) that would support your learning within this care environment. Please note your thoughts below:		
Practice Supervisor/Assessor – please sign to confirm that the pre-practice learning activities have been completed by the student		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*

MODULE LEARNING OUTCOMES

PART 2: PLE 4

Module Summary:

This practice module will develop your practice proficiency commensurate with Part 2 of the BN programme.

This will involve demonstration an increased range of communication, relationship management and procedural skills and an ability to analyse and utilise evidence to inform clinical decision-making.

You will develop and demonstrate an increasing ability to work autonomously and coordinate care within the context of the wider health and social care team.

You will also demonstrate developing clinical leadership proficiency as you care for those with altered care needs offering support and guidance to other health and care staff.

At each stage you will be supported and assessed by suitably trained professionals based on skills and proficiencies outlined in your Practice Assessment Document (PAD).

Module learning outcomes:

LO 1: Demonstrate the role of a safe, effective and person-centred nurse within your field of practice

LO2: Utilise a problem-solving approach in providing evidence-based nursing care and begin to practice autonomously in care delivery in health and social care settings.

LO 3: Demonstrate ability to coordinate care as a member of an inter-professional team

LO4: Extend and enhance clinical leadership and decision-making skills, required to care and support people with altered health needs

ORIENTATION & PRELIMINARY MEETING PART 2: PLE 4

In accordance with the ***NHS Education for Scotland (2008) Quality Standards for Practice Placements***, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	**Please initial when complete**
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident /incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and final assessment	

LEARNING DEVELOPMENT PLAN PART 2: PLE 4		
Please use the space below to summarise the main points arising from the preliminary meeting with the student and discussion around the students learning development plan. **Please review skills achieved to date and identify skills and procedures that could be achieved within area:**		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*
Agreed date for next meetings	**Interim:**	**Final:**

INTERIM FEEDBACK MEETING PART 2: PLE 4
Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments): **Platform 1: Being an accountable professional** **Platform 2: Promoting health and preventing ill health** **Platform 3: Assessing needs and planning care** **Platform 4: Providing and evaluating care** **Platform 5: Leading and managing nursing care and working in teams**

Platform 6: Improving safety and quality of care **Platform 7: Coordinating care** **Skills and Procedures:**			
Student feedback:			
Have any issues been referred to the practice and/or academic assessor?		**Yes**	**No**
Development Support Plan (see Section 3)		**Yes**	**No**
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*	

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4)

PART 2: PLE 4

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:
You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

Please tick if you are: The patient/service user ☐ Carer/Relative ☐

How happy were you with the way the student nurse….	**Very happy**	**Happy**	**I'm not sure**	**Unhappy**	**Very unhappy**
…cared for you?					
…listened to your needs?					
…understood the way you felt?					
…talked to you?					
…showed you respect?					

What did the student nurse do well?

What could the student nurse have done differently?

Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK PART 2: PLE 4		
Please note any other forms of service user/carer feedback (e.g. cards, letters, emails). ***Please ensure anonymity is maintained.***		
Use the box below to record your thoughts and feelings on all service user/carer feedback received:		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES PART 2: PLE 4	
Student Name:	**STUDENT ID:** **Intake/Year Group:**
Name of Placement:	**Practice Supervisor:**
Name and Location of Organisation/Professional Visited:	
Individual overseeing student's opportunity comments – Please comment on student performance and what has been learnt	
Print Name: **Date:**	**Sign:**
Student reflection - please reflect on what you have learnt:	
Date:	
Student signature:	

ADDITIONAL NOTES PART 2: PLE 4			
Date	Time	Detail	Signature
		Student, practice supervisors, practice assessors, academic assessors can add notes to this page	

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR PART 2: PLE 4	
Student Name:	**STUDENT ID:**
	Intake/Year Group:
The minimum level of performance for this part of the programme is **DEVELOPING INDEPENDENCE**. This means that the student nurse will be delivering safe and effective care through guided participation in care under increasingly indirect supervision from you in your role as practice supervisor/assessor. Please comment on the Platforms below:	
Platform 1: Being an accountable professional **Platform 2: Promoting health and preventing ill health** **Platform 3: Assessing needs and planning care**	

Platform 4: Providing and evaluating care

Platform 5: Leading and managing nursing care and working in teams

Platform 6: Improving safety and quality of care

Platform 7: Coordinating care

Please comment on progress towards safely demonstrating the skills and procedures in Annex A and B. Identify aspects for the student to focus on in future PLEs.		
Date ____/____/____	*Student Signature:*	*Practice Assessor's Signature:*

Module Learning Outcomes (please initial)	**PASS**	**FAIL**
LO1		
LO2		
LO3		
LO4		

Practice Assessor Overall Summative Assessment Comments	
Overall result for this PLE	**PASS / FAIL / GRADE**
Name of Practice Assessor (print full name)	
Signature of Practice Assessor:	
Designation:	Date:

Practice Assessor Confirmatory Statement
I confirm that: student nurse (print full name) _____ following a period of _____ hours of attendance at placement (please refer to attendance record), and through objective evidence-based assessments, has: **ACHIEVED / NOT ACHIEVED** (Please delete as appropriate) the expected level of **DEVELOPING INDEPENDENCE**
Signature of Practice Assessor:
Date:

Student Statement	
I _____ (write name in capital letters) have received feedback on my performance and have had the opportunity to reflect and discuss this with the Practice Assessor. Please write comments below:	
Student signature:	Date:

ATTENDANCE RECORD PART 2: PLE 4	
Student Name and ID	
Module Name	
Programme and year	
Field of Practice	
Practice learning environment	

Week No	Week beginning	M	T	W	T	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12.5	12. 5	12.5	DO	DO	37.5	S. Nurse
1										
2										
3										
					Total number of hours **… weeks = …hrs**					

See section 1.7.1 for maximum hours worked per week

Key: U=University DO=Day Off

C=Compassionate leave S=Sick A=Absent (not sick)

Date ____/____/____	*Student Signature:*	*Practice Assessor/ Supervisor Signature:*

CONFIRMATION OF COMPLETION - PART 2

Practice Assessor Confirmation of Proficiency

This feedback should be informed by feedback sought from practice supervisors and assessors (see previous pages) and any other relevant people in order to be assured about your decision. Review platform proficiencies section for the part to ensure all have been signed as achieved.

Practice Assessor: Confirmation of Achievements of Platforms **END OF PART 2:** ***Please initial the relevant column***		
	Achieved	**Not achieved**
Platform 1: Being an accountable professional		
Platform 2: Promoting health and preventing ill-health		
Platform 3: Assessing needs and planning care		
Platform 4: Providing and evaluating care		
Platform 5: Leading and managing nursing care and working in teams		
Platform 6: Improving safety and quality of care		
Platform 7: Co-ordinating care		

Practice Assessor: Comment on areas of development for safe demonstration of skills and procedures (Annexes A & B)

Practice Assessor Confirmatory Statement – END OF PART 2
I confirm that in partnership with the nominated Academic Assessor, student nurse (print name) _____ has **ACHIEVED/NOT ACHIEVED** (please delete as appropriate) all platforms (and proficiencies) at the **DEVELOPING INDEPENDENCE** level for Part 2 of the programme and, **RECOMMEND/DO NOT RECOMMEND** (please delete as appropriate) progression to **PART 3**.
Signature of Practice Assessor:
Date:

Academic Assessor Confirmatory Statement (HEI use only) – END OF PART 2	
I confirm that in partnership with the nominated Practice Assessor, student nurse (print name) _____ has **ACHIEVED/NOT ACHIEVED** (please delete as appropriate) all platforms (and proficiencies) at the **DEVELOPING INDEPENDENCE** level for Part 2 of the programme and, **RECOMMEND/DO NOT RECOMMEND** (please delete as appropriate) progression to **PART 3**.	
Comments:	
Signature of Academic Assessor:	
Date:	
Designation:	Date:

HEI USE ONLY	
Number of hours for Part 2	
Hours carried forward to Part 3	
Retrieval programme required?	YES / NO (delete as appropriate)

PART 3 (Green pages)
Practice Learning Experiences (2)

Practice Learning Experience (PLE) 5

Practice Learning Experience (PLE) 6

PRACTICE LEARNING EXPERIENCE 5

NUR09129

PART 3 PLE 5

PRACTICE LEARNING EXPERIENCE

Information for Students	
1.	Please check the information produced by the Practice Placement Team to ensure you complete the correct section of the PAD.
2.	Please contact your PLE prior to your start date to confirm who your nominated practice supervisor is and to confirm your shift pattern.
3.	Please note that it is expected that your working hours reflects the range of hours expected of registered nurses (NMC 2018d). This includes working weekends and night shifts; please refer to your Practice Learning Handbook for more details.
4.	Please ensure that you liaise with your practice supervisor to secure dates for your interim review of progress and your final assessment. This should be done during your initial discussions with your practice supervisor.
5.	Please note the expected clinical hours to be achieved whilst within this PLE and ensure that your shift pattern will enable you to achieve these hours.
6.	Please refer to discuss the skills and procedures with your practice supervisor to identify any skills that can be achieved within the PLE.

PRE-PRACTICE LEARNING ACTIVITIES PART 3: PLE 5			
PRACTICE LEARNING EXPERIENCE DETAILS			
Student Name:		Intake:	
Student ID:		Year:	
Practice Learning Environment: Telephone Number:		Start date: Finish date:	

PLE Type:	
Name of PEF/CHEF:	
Nominated Practice Supervisor Name:	
Nominated Practice Assessor Name:	
Nominated Academic Assessor Name:	

Prior to the commencement of each practice learning environment, the student should:

1. Make contact with the practice learning environment and ascertain the shift patterns in operation, the name of your designated practice supervisor/assessor and if appropriate, arrange a pre-practice experience visit.
2. Read the appropriate practice learning environment profile, which can be accessed on the student portal/via InPlace / QMPLE
3. Briefly summarise what the practice learning environment does:

4. From the *Learning Opportunities* outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
5. Considering the service user group that attend the practice learning experience, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these. ○ From your search, identify two key articles on the topic and list below (using appropriate reference style) ○ In the space below provide a brief summary of these two articles and outline any best practice recommendations in relation to these
Article 1 – Article 2 - Condition / situation

6. In relation to the practice learning environment that you are about to enter, identify any related learning from your theory modules that would support your learning within this care environment. Please note your thoughts below:		
7. In relation to the practice learning environment that you are about to enter, identify any related learning from the preparation for practice (or skills sessions) that would support your learning within this care environment. Please note your thoughts below:		
Practice Supervisor/Assessor – please sign to confirm that the pre-practice learning activities have been completed by the student		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/ or Assessor Signature:*

MODULE LEARNING OUTCOMES

PART 3: PLE 5

Module Summary:

This practice module will develop your practice proficiency commensurate with Part 3 of the BN programme.

This will involve deepening and broadening demonstration of a range of communication, relationship management and procedural skills and an ability to analyse and utilise evidence to inform clinical decision-making.

You will be encouraged to reflect both in action and on action in your decision-making and problem-solving skills.

You will work co-productively with clients with complex problems to deliver coordinated care with an increasing ability to work autonomously and coordinate care within the context of the wider health and social care team.

You will also be leading safe, effective and person-centred care using best available evidence and liaising effectively with health and social care colleagues to assure seamless service user journeys through the health and social care system.

At each stage you will be supported and assessed by suitably trained professionals based on skills and proficiencies outlined in your Practice Assessment Document (PAD).

Module learning outcomes:

LO 1: Work under indirect supervision to provide and coordinate evidence-based nursing care

LO 2: Evaluate care delivery applying patient safety policies and guidelines

LO3: Extend and enhance clinical leadership and decision-making skills, required to care and support people with complex health needs as part of an inter-professional team

LO4: Demonstrate communication, relationship management and procedural skills commensurate with Part 3 of BN Programme

ORIENTATION & PRELIMINARY MEETING PART 3: PLE 5

In accordance with the ***NHS Education for Scotland (2008) Quality Standards for Practice Placements***, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	**Please initial when complete**
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident /incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and final assessment	

LEARNING DEVELOPMENT PLAN PART 3: PLE 5		
Please use the space below to summarise the main points arising from the preliminary meeting with the student and discussion around the students learning development plan. **Please review skills achieved to date and identify skills and procedures that could be achieved within area:**		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*
Agreed date for next meetings	**Interim:**	**Final:**

INTERIM FEEDBACK MEETING PART 3: PLE 5
Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments): **Platform 1: Being an accountable professional** **Platform 2: Promoting health and preventing ill health** **Platform 3: Assessing needs and planning care** **Platform 4: Providing and evaluating care** **Platform 5: Leading and managing nursing care and working in teams**

Platform 6: Improving safety and quality of care **Platform 7: Coordinating care** **Skills and Procedures:**			
Student feedback:			
Have any issues been referred to the practice and/or academic assessor?		**Yes**	**No**
Development Support Plan (see Section 3)		**Yes**	**No**
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*	

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4)

PART 3: PLE 5

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:
You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

Please tick if you are: The patient/service user ☐ Carer/Relative ☐

How happy were you with the way the student nurse….	**Very happy**	**Happy**	**I'm not sure**	**Unhappy**	**Very unhappy**
…cared for you?					
…listened to your needs?					
…understood the way you felt?					
…talked to you?					
…showed you respect?					

What did the student nurse do well?

What could the student nurse have done differently?

Date ____/____/____	*Student Signature:*	*PS &/or PA Signature:*

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK PART 3: PLE 5		
Please note any other forms of service user/carer feedback (eg cards, letters, emails). ***Please ensure anonymity is maintained.***		
Use the box below to record your thoughts and feelings on all service user/carer feedback received:		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES PART 3: PLE 5	
Student Name:	**STUDENT ID:** **Intake/Year Group:**
Name of Placement:	**Practice Supervisor:**
Name and Location of Organisation/Professional Visited:	
Individual overseeing student's opportunity comments – Please comment on student performance and what has been learnt	
Print Name: **Date:**	**Sign:**
Student reflection - please reflect on what you have learnt:	
Date:	
Student signature:	

ADDITIONAL NOTES PART 3: PLE 5			
Date	Time	Detail	Signature
		Student, practice supervisors, practice assessors, academic assessors can add notes to this page	

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR PART 3: PLE 5	
Student Name:	**STUDENT ID:**
	Intake/Year Group:
The minimum level of performance for this part of the programme is **INDEPENDENT**. This means that the student nurse independently and confidently coordinates care, whilst acknowledging their own limitations, through guided participation in care under indirect supervision from you in your role as practice supervisor/assessor. Please comment on the Platforms below:	
Platform 1: Being an accountable professional **Platform 2: Promoting health and preventing ill health** **Platform 3: Assessing needs and planning care**	

Platform 4: Providing and evaluating care

Platform 5: Leading and managing nursing care and working in teams

Platform 6: Improving safety and quality of care

Platform 7: Coordinating care

Please comment on progress towards safely demonstrating the skills and procedures in Annex A and B. Identify aspects for the student to focus on in future PLEs.		
Date ____/____/____	*Student Signature:*	*Practice Assessor's Signature:*

Module Learning Outcomes (please initial)	**PASS**	**FAIL**
LO1		
LO2		
LO3		
LO4		

Practice Assessor Overall Summative Assessment Comments	
Overall result for this PLE	**PASS / FAIL / GRADE**
Name of Practice Assessor (print full name)	
Signature of Practice Assessor:	
Designation:	Date:

Practice Assessor Confirmatory Statement
I confirm that: student nurse (print full name) _____ following a period of _____ hours of attendance at placement (please refer to attendance record), and through objective evidence-based assessments, has: **ACHIEVED / NOT ACHIEVED** (Please delete as appropriate) the expected level of **INDEPENDENT**
Signature of Practice Assessor:
Date:

Student Statement	
I _____ (write name in capital letters) have received feedback on my performance and have had the opportunity to reflect and discuss this with the Practice Assessor. Please write comments below:	
Student signature:	Date:

ATTENDANCE RECORD PART 3: PLE 5	
Student Name and ID	
Module Name	
Programme and year	
Field of Practice	
Practice learning environment	

Week No	Week beginning	M	T	W	T	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12	12	12	DO	DO	36	S. Nurse
1										
2										
3										
					Total number of hours **… weeks = …hrs**					

See section 1.7.1 for maximum hours worked per week

Key: U=University DO=Day Off

C=Compassionate leave S=Sick A=Absent (not sick)

Date ____/____/____	*Student Signature:*	*Practice Assessor/ Supervisor Signature:*

PRACTICE LEARNING EXPERIENCE 6

NUR09130

PART 3 PLE 6

PRACTICE LEARNING EXPERIENCE

Information for Students	
1.	Please check the information produced by the Practice Placement Team to ensure you complete the correct section of the PAD.
2.	Please contact your PLE prior to your start date to confirm who your nominated practice supervisor is and to confirm your shift pattern.
3.	Please note that it is expected that your working hours reflects the range of hours expected of registered nurses (NMC 2018d). This includes working weekends and night shifts; please refer to your Practice Learning Handbook for more details.
4.	Please ensure that you liaise with your practice supervisor to secure dates for your interim review of progress and your final assessment. This should be done during your initial discussions with your practice supervisor.
5.	Please note the expected clinical hours to be achieved whilst within this PLE and ensure that your shift pattern will enable you to achieve these hours.
6.	Please refer to discuss the skills and procedures with your practice supervisor to identify any skills that can be achieved within the PLE.

PRE-PRACTICE LEARNING ACTIVITIES PART 3: PLE 6			
PRACTICE LEARNING EXPERIENCE DETAILS			
Student Name:		Intake:	
Student ID:		Year:	
Practice Learning Environment: Telephone Number:		Start date: Finish date:	

PLE Type:	
Name of PEF/CHEF:	
Nominated Practice Supervisor Name:	
Nominated Practice Assessor Name:	
Nominated Academic Assessor Name:	

Prior to the commencement of each practice learning environment, the student should:

8. Make contact with the practice learning environment and ascertain the shift patterns in operation, the name of your designated practice supervisor/assessor and if appropriate, arrange a pre-practice experience visit.
9. Read the appropriate practice learning environment profile, which can be accessed on the student portal/via InPlace / QMPLE
10. Briefly summarise what the practice learning environment does:

11. From the *Learning Opportunities* outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
12. Considering the service user group that attend the practice learning experience, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these. ○ From your search, identify two key articles on the topic and list below (using appropriate reference style) ○ In the space below provide a brief summary of these two articles and outline any best practice recommendations in relation to these
Article 1 – Article 2 - Condition / situation

13. In relation to the practice learning environment that you are about to enter, identify any related learning from your theory modules that would support your learning within this care environment. Please note your thoughts below:		
14. In relation to the practice learning environment that you are about to enter, identify any related learning from the preparation for practice (or skills sessions) that would support your learning within this care environment. Please note your thoughts below:		
Practice Supervisor/Assessor – please sign to confirm that the pre-practice learning activities have been completed by the student		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/ or Assessor Signature:*

MODULE LEARNING OUTCOMES

PART 3: PLE 6

Module Summary:

This practice module will develop your practice proficiency commensurate with Part 3 of the BN programme. This will involve demonstrating your readiness to transition to the role of a registered nurse in your field of practice. You will demonstrate your ability to practice independently and confidently in delivering, coordinating and leading safe, effective, person-centred care. You will engage effectively in inter-professional team working demonstrating a high level of proficiency in communication, relationship management and procedural skills.

You will work co-productively with clients with complex problems to deliver coordinated care with an increasing ability to work autonomously and coordinate care within the context of the wider health and social care team.

You will also be leading safe, effective and person-centred care using best available evidence and liaising effectively with health and social care colleagues to assure seamless service user journeys through the health and social care system.

You will demonstrate in depth knowledge of governance risk assessment, and management, quality processes, service evaluation, service improvement and the impact these have on service design and delivery.

You will support and supervise junior staff demonstrating your knowledge of professional and organisational values and ability to teach others.

At each stage you will be supported and assessed by suitably trained professionals based on skills and proficiencies outlined in your Practice Assessment Document (PAD).

Module learning outcomes:

LO 1: Demonstrate knowledge and proficiencies consistent with readiness to transition to registered nurse including ability to support and supervise junior staff.

LO2: Demonstrate and evaluate your ability to coordinate and lead the delivery of safe, effective, person-centred care.

LO 3: Demonstrate professional accountability and confident and autonomous working practices within the boundaries of the NMC code

LO 4: Interpret policies and guidance on governance risk assessment, and management, quality processes, service evaluation, service improvement and the impact these have on service design and delivery.

LO5: Demonstrate communication, relationship management and procedural skills commensurate with Part 3 of BN Programme

LO6: Demonstrate an ability to work effectively within an inter-professional team

ORIENTATION & PRELIMINARY MEETING PART 3: PLE 6

In accordance with the ***NHS Education for Scotland (2008) Quality Standards for Practice Placements***, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	**Please initial when complete**
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident /incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and final assessment	

LEARNING DEVELOPMENT PLAN PART 3: PLE 6		
Please use the space below to summarise the main points arising from the preliminary meeting with the student and discussion around the students learning development plan. **Please review skills achieved to date and identify skills and procedures that could be achieved within area:**		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*
Agreed date for next meetings	**Interim:**	**Final:**

INTERIM FEEDBACK MEETING PART 3: PLE 6
Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments): **Platform 1: Being an accountable professional** **Platform 2: Promoting health and preventing ill health** **Platform 3: Assessing needs and planning care** **Platform 4: Providing and evaluating care** **Platform 5: Leading and managing nursing care and working in teams**

Platform 6: Improving safety and quality of care **Platform 7: Coordinating care** **Skills and Procedures:**			
Student feedback:			
Have any issues been referred to the practice and/or academic assessor?		**Yes**	**No**
Development Support Plan (see Section 3)		**Yes**	**No**
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*	

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4)

PART 3: PLE 6

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:
You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

Please tick if you are: The patient/service user ☐ Carer/Relative ☐

How happy were you with the way the student nurse….	**Very happy**	**Happy**	**I'm not sure**	**Unhappy**	**Very unhappy**
…cared for you?					
…listened to your needs?					
…understood the way you felt?					
…talked to you?					
…showed you respect?					

What did the student nurse do well?

What could the student nurse have done differently?

Date ____/____/____	*Student Signature:*	*PS &/or PA Signature:*

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK PART 3: PLE 6		
Please note any other forms of service user/carer feedback (eg cards, letters, emails). ***Please ensure anonymity is maintained.***		
Use the box below to record your thoughts and feelings on all service user/carer feedback received:		
Date ____/____/____	*Student Signature:*	*Practice Supervisor and/or Assessor Signature:*

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES PART 3: PLE 6	
Student Name:	**STUDENT ID:** **Intake/Year Group:**
Name of Placement:	**Practice Supervisor:**
Name and Location of Organisation/Professional Visited:	
Individual overseeing student's opportunity comments – Please comment on student performance and what has been learnt	
Print Name: **Date:**	**Sign:**
Student reflection - please reflect on what you have learnt:	
Date:	
Student signature:	

ADDITIONAL NOTES PART 3: PLE 6			
Date	Time	Detail	Signature
		Student, practice supervisors, practice assessors, academic assessors can add notes to this page	

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR PART 3: PLE 6	
Student Name:	**STUDENT ID:**
	Intake/Year Group:
The minimum level of performance for this part of the programme is **INDEPENDENT**. This means that the student nurse independently and confidently coordinates care, whilst acknowledging their own limitations, through guided participation in care under indirect supervision from you in your role as practice supervisor/assessor. Please comment on the Platforms below:	
Platform 1: Being an accountable professional **Platform 2: Promoting health and preventing ill health** **Platform 3: Assessing needs and planning care**	

Platform 4: Providing and evaluating care

Platform 5: Leading and managing nursing care and working in teams

Platform 6: Improving safety and quality of care

Platform 7: Coordinating care

Please comment on progress towards safely demonstrating the skills and procedures in Annex A and B. Identify aspects for the student to focus on in future PLEs.		
Date ____/____/____	*Student Signature:*	*Practice Assessor's Signature:*

Module Learning Outcomes (please initial)	**PASS**	**FAIL**
LO1		
LO2		
LO3		
LO4		
LO5		
LO6		

Practice Assessor Overall Summative Assessment Comments	
Overall result for this PLE	**PASS / FAIL / GRADE**
Name of Practice Assessor (print full name)	
Signature of Practice Assessor:	
Designation:	Date:

Practice Assessor Confirmatory Statement
I confirm that: student nurse (print full name) _____ following a period of _____ hours of attendance at placement (please refer to attendance record), and through objective evidence-based assessments, has: **ACHIEVED / NOT ACHIEVED** (Please delete as appropriate) the expected level of **INDEPENDENT**
Signature of Practice Assessor:
Date:

Student Statement	
I _____ (write name in capital letters) have received feedback on my performance and have had the opportunity to reflect and discuss this with the Practice Assessor. Please write comments below:	
Student signature:	Date:

ATTENDANCE RECORD PART 3: PLE 6	
Student Name and ID	
Module Name	
Programme and year	
Field of Practice	
Practice learning environment	

Week No	Week beginning	M	T	W	T	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12	12	12	DO	DO	36	S. Nurse
1										
2										
3										
					Total number of hours **… weeks = …hrs**					

See section 1.7.1 for maximum hours worked per week

Key: U=University DO=Day Off

C=Compassionate leave S=Sick A=Absent (not sick)

Date ____/____/____	*Student Signature:*	*Practice Assessor/ Supervisor Signature:*

CONFIRMATION OF COMPLETION - PART 3

Practice Assessor Confirmation of Proficiency
This feedback should be informed by feedback sought from practice supervisors and assessors (see previous pages) and any other relevant people in order to be assured about your decision. Review platform proficiencies section for the part to ensure all have been signed as achieved.

Practice Assessor: Confirmation of Achievements of Platforms **END OF PART 3:** ***Please initial the relevant column***		
	Achieved	**Not achieved**
Platform 1: Being an accountable professional		
Platform 2: Promoting health and preventing ill-health		
Platform 3: Assessing needs and planning care		
Platform 4: Providing and evaluating care		
Platform 5: Leading and managing nursing care and working in teams		
Platform 6: Improving safety and quality of care		
Platform 7: Co-ordinating care		

Practice Assessor: Comment on safe demonstration of skills and procedures (Annexes A & B) [ALL must be completed by the end of Part 3]:

Practice Assessor Confirmatory Statement – END OF PART 3
I confirm that in partnership with the nominated Academic Assessor, student nurse (print name) _____ has **ACHIEVED/NOT ACHIEVED** (please delete as appropriate) all platforms (and proficiencies) and skills at procedures at the **INDEPENDENT** level for Part 3 of the programme and, **RECOMMEND/DO NOT RECOMMEND** (please delete as appropriate) progression to **THE REGISTER**.
Signature of Practice Assessor:
Date:

Academic Assessor Confirmatory Statement (HEI use only) – END OF PART 3
I confirm that in partnership with the nominated Practice Assessor, student nurse (print name) _____ has **ACHIEVED/NOT ACHIEVED** (please delete as appropriate) all platforms (and proficiencies) and skills at procedures at the **INDEPENDENT** level for Part 3 of the programme and, **RECOMMEND/DO NOT RECOMMEND** (please delete as appropriate) progression to **THE REGISTER**.
Comments:
Signature of Academic Assessor:
Date:

HEI USE ONLY	
Number of hours for Part 3	
Retrieval programme required?	YES / NO (delete as appropriate)

PLATFORMS AND PROFICIENCIES

The proficiencies are grouped under seven platforms followed by two annexes; this section focuses on the platforms and proficiencies and the annexes are explained in more detail in the next section.

This section contains the platforms and the related proficiency statements for each Part of your programme. In keeping with the Participation in Care Framework, there are suggested examples of how you can evidence achievement of each proficiency at the required level. The examples also help explain ways in which you might be able to evidence the progression of your developing knowledge, skills, values and your increasing independence in practice to your practice supervisor (PS)/practice assessor (PS). Please remember, the examples provided are only suggestions and it is therefore not a requirement that these specific examples are assessed.

Shading has been used to distinguish which proficiencies must be achieved in each part, meaning that by the point of entry to the register, all proficiencies should have been achieved across your programme of study. See explanation below for this achievement:

- **Part 1 - ALL non-shaded proficiencies must be achieved at the dependent level by the end of this Part**
- **Part 2 - ALL non-shaded proficiencies must be achieved at the developing independence level by the end of this Part**
- **Part 3 - ALL non-shaded proficiencies must be achieved at the independent level by the end of this Part**

If a proficiency has been signed as achieved in a previous Practice Learning Experience (PLE) of the Part, you must continue to demonstrate the achievement of the required level of participation within all subsequent PLEs. An explanation of the levels of the participation in care framework has been provided to help you and your practice supervisor and practice assessor work together to document this.

Participation in Care Framework

The expected level of performance for **PART ONE** is **Dependent**. This means that you will be working closely with your practice supervisor who will direct and guide you. Through guided participation in care, you will be able to demonstrate delivery of safe, effective person-centred care in a professional manner using appropriate nursing skills.

The expected level of performance for **PART TWO** is **Developing Independence.** This means that you will be developing independence and your practice supervisor will offer guidance and support when required. You will actively participate in care with this guidance and will demonstrate increasing confidence and competence.

The expected level of performance for **PART THREE** is **Independent**. You will be working independently and your practice supervisor will offer a more indirect form of supervision. You will demonstrate the ability to lead and coordinate care, and the ability to act as an accountable practitioner, demonstrating a comprehensive knowledge base that informs safe and effective practice.

Mapping to the EU Directives and The Code (NMC 2018)

Each proficiency from the 7 platforms have been mapped to The Code (NMC 2018). Each proficiency has also been mapped to the clinical instruction elements of the EU directives. This mapping is visible below each proficiency statement. This will allow practice supervisors, practice assessors and academic assessors to be assured that, when students achieve each proficiency, they are, as a consequence of this mapping, also demonstrating that their practice is in adherence to the expectations of The Code (NMC 2018) for a registered nurse. This mapping also ensures that the clinical instruction aspects of the EU Directives are met as part of proficiency achievement.

Coding of EU Directives to Support Mapping to NMC (2018) Future Nurse: Standards of proficiency for registered nurses

Article 31 (V.2 Nurse Responsible for General Care) - '5.2.1 Training programme for nurses responsible for general care - the training leading to the award of a formal qualification of nurses responsible for general care shall consist of the following two parts…' (NMC 2018; p15-16)			
B. Clinical Instruction		General and specialist medicine	B.1
		General and specialist surgery	B.2
		Child care and paediatrics	B.3
		Maternity care	B.4
		Mental health and psychiatry	B.5
		Care of the old and geriatrics	B.6
		Home nursing	B.7

Platform 1: Being an accountable professional

Registered nurses act in the best interests of people, putting them first and providing nursing care that is person-centred, safe and compassionate. They act professionally at all times and use their knowledge and experience to make evidence-based decisions about care. They communicate effectively, are role models for others, and are accountable for their actions. Registered nurses continually reflect on their practice and keep abreast of new and emerging developments in nursing, health and care.

Platform 1: Being an accountable professional			
1.1	understand and act in accordance with *The Code* (2015): Professional standards of practice and behaviour for nurses and midwives, and fulfil all registration requirements		
	All statements outlined as part of *The Code* (NMC 2018) :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Demonstrates:- *Professional behaviour and appearance, honesty and integrity, good timekeeping, adherence to appropriate policies and protocols, accurate record keeping, accountability for own actions, accepts and acts on constructive feedback, respect for the privacy and dignity of others, appropriate information sharing.*	*Demonstrates:-* *Professional behaviour and appearance, honesty and integrity, good timekeeping, adherence to appropriate policies and protocols, accurate record keeping, accountability for own actions, accepts and acts on constructive feedback, respect for the privacy and dignity of others, appropriate information sharing.*	*Demonstrates:-* *Professional behaviour and appearance, honesty and integrity, good timekeeping, adherence to appropriate policies and protocols, accurate record keeping, accountability for own actions, accepts and acts on constructive feedback, respect for the privacy and dignity of others, appropriate information sharing.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

1.2	understand and apply relevant legal, regulatory and governance requirements, policies, and ethical frameworks, including any mandatory reporting duties, to all areas of practice, differentiating where appropriate between the devolved legislatures of the United Kingdom		
	The Code (NMC 2018)12.1; 14.3; 16.1; 16.2; 16.3; 17.3; 18.2; 20.4; 23.1; 25.2 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Discusses with PS/PA the legal basis underpinning practice, for example, Children's Act, MH Act, Power of Attorney, Guardianship, Carers' Act. Demonstrate the ability to work in line with The Code, to raise concerns appropriately.	*Demonstrate ability to recognise specific issues relating to the legal basis for practice, for example, Children's Act, MH Act, Power of Attorney, Guardianship, Carers' Act. Practices in line with the Code, to raise concerns appropriately.*	*Selects and applies appropriate legal, regulatory and governance; legal basis for practice, for example, Children's Act, MH Act, Power of Attorney, Guardianship, Carers' Act. Critically reflects on self and others' practice in line with The Code and is able to raise concerns appropriately.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
1.3	understand and apply the principles of courage, transparency and the professional duty of candour, recognising and reporting any situations, behaviours or errors that could result in poor care outcomes		
	The Code (NMC 2018) 9.3; 14.1; 14.2; 14.3; 16.1; 16.2; 16.3; 16.4; 16.5; 16.6; 17.1; 17.2; 17.3; 20.8; 25.1 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Demonstrate the ability to work in line with The Code, raises concerns appropriately. Awareness of duty of candour. Understanding of medication errors and how to escalate these.	*Demonstrate the ability to work in line with The Code, raises concerns appropriately. Explicit awareness of duty of candour. Understanding of medication errors and how to escalate these.*	*Critically reflects upon practice in line with The Code, raises concerns appropriately. Effectively and appropriately implements duty of candour. Report and document all adverse event appropriately.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

1.4	demonstrate an understanding of, and the ability to challenge, discriminatory behaviour		
	The Code (NMC 2018) 1.1; 1.3; 1.5; 3.4; 4.4; 7.3; 9.3; 16.1; 16.4; 16.6; 17.1; 17.2; 17.3; 20.2 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with the PS/PA demonstrate knowledge of the protected characteristics of discriminatory behaviour e.g. age, race, pregnancy religion or belief, disability, gender, marital status, sexual orientation. Can discuss appropriate mechanisms to highlight concerns.	*Able to identify and respond appropriately to challenging situations involving discrimination. Is able to identify situations where discriminatory behaviour may occur in clinical practice. Provides support to people when discriminatory behaviours are evident.*	*Acts as a role model in providing uncompromised, non-judgemental care whilst respecting the individuality of others. Demonstrate the ability to challenge discrimination. Exhibits confidence in engaging with courageous conversation. Takes an active role in reporting and documenting poor or discriminatory behaviour. Provides unambiguous, constructive feedback to others where discriminatory behaviours are evident. Acts as an advocate as required.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
1.5	understand the demands of professional practice and demonstrate how to recognise signs of vulnerability in themselves or their colleagues and the action required to minimise risks to health		
	The Code (NMC 2018) 4.4; 8.1; 8.2; 8.4; 8.7; 9.1; 9.2; 9.3; 11.1; 11.2; 11.3; 13.3; 15.3; 16.1; 16.2; 16.6; 19.4; 20.2; 20.3; 20.5; 20.8; 20.9 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART THREE – Independent**
	Practices within local procedures around self-care and responsibility for oneself. Reporting sickness absence in line with local guidelines. Is able to seek support for self. Can identify critical or adverse incidents and considers how these may impact on professional practice.	*Practices within local procedures around self-care and also care of colleagues. Starts to develop analysis of critical incidents. Identifies vulnerability in colleagues and signpost opportunities for support and improving future practice.*	*Take responsibility for promoting care of vulnerable members of the team in line with local procedures. Follows appropriate reporting mechanisms. Is supportive of others experiencing vulnerability. Reflect on critical or adverse incidents to inform or change practice.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

1.6	understand the professional responsibility to adopt a healthy lifestyle to maintain the level of personal fitness and wellbeing required to meet people's needs for mental and physical care		
	The Code (NMC 2018) 20.9 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA demonstrate an understanding of the importance of one's own health in relation to being able to care for others.	*Can identify appropriate actions, agencies and support mechanisms to promote and maintain personal mental and physical health.*	*Clear evidence within the practice environment of the student's physical and emotional health to enable them to support the care needs of others.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
1.7	demonstrate an understanding of research methods, ethics and governance in order to critically analyse, safely use, share and apply research findings to promote and inform best nursing practice		
	The Code (NMC 2018) 6.1; 6.2; 8.4; 9.2; 10.6; 19.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Engages with pre-practice learning activities and identifies evidence that supports best nursing practice within this context. Appears keen to learn from the current evidence base related to the practice area. Actively seeks out opportunities to engage in scholarly activity within the practice area.	*Actively seeks out opportunities to engage in scholarly activity within the practice area. Developing awareness of current evidence or research related to clinical area / client group. Can identify deficits in the research methods or evidence base.*	*Can interpret, analyse and apply research to promote and enhance best possible nursing practice in the practice learning environment. Actively shares evidence from research findings with colleagues.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

1.8	demonstrate the knowledge, skills and ability to think critically when applying evidence and drawing on experience to make evidence informed decisions in all situations		
	The Code (NMC 2018) 6.2; 13.1; 15.1; 17.3; 19.2; 19.3; 22.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Is aware of current research relating to the practice learning environment and its practices, client group and significant others. Seek out opportunities to source evidence to support learning within practice.	*Developing knowledge and understanding of research and how to integrate this with previous experience to inform decisions and practises within the practice area / client group.*	*Apply research and evidence to patient care and planning care. Problem solve and prioritise patient care in accordance with current research evidence. Identifies gaps in own knowledge and takes appropriate steps to address.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
1.9	understand the need to base all decisions regarding care and interventions on people's needs and preferences, recognising and addressing any personal and external factors that may unduly influence their decisions		
	The Code (NMC 2018) 1.1; 1.3; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 3.4; 4.1; 4.2; 4.3; 4.4; 5.5; 7.3; 7.4 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In association with PS/PA engages in the holistic multifactorial assessment of clients Is developing communication and listening /interview skills which gather information required to inform person-centred care planning. Is aware of the need to utilise various sources of information to compile a thorough assessment of the client's needs and preferences.	*Communicate effectively with the client group and significant others. Is able to assess social, cultural differences and provide effective and appropriate care. Understand concept of unconscious bias. Reflect upon feedback from clients to enhance future assessment activity and client interactions.*	*Initiates skilled communication with the client group and significant others to establish the person's needs and preferences. Effectively assesses social, cultural differences and plans effective and appropriate care. Is non-discriminatory and non-judgemental in planning or prioritising care delivery. Actively reflects upon feedback from various sources to enhance future assessment activity and client interactions and satisfaction.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

1.10	demonstrate resilience and emotional intelligence and be capable of explaining the rationale that influences their judgments and decisions in routine, complex and challenging situations		
	The Code (NMC 2018) 1.4; 2.3; 2.4; 2.5; 4.1; 5.2; 6.2; 7.1; 9.2; 9.3; 14.1; 15.1; 18.1; 19.2; 19.4; 20.2; 20.6 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Able to engage confidently with people within the practice area. Sensitive to needs of others. Participates actively in routine care delivery/activities within the practice area with appropriate supervision. Developing confidence is explaining the rationale for a variety of routine actions/ care decisions.	*Engages confidently with a wide range of people within and out-with the practice area. Developing confidence in assuming responsibility for the delivery of care/routine activities within the practice setting. Sensitive to the needs of others and can adapt care in line with changing situations/preferences. Understands and provides clear explanations regarding decisions made within the care setting.*	*Assumes responsibility for liaison with a wide range of people within and out-with the practice area. Is confident and competent in assuming responsibility for the delivery of care in more complex situations within the practice setting. Sensitive to the changing needs of others and can adapt care in line with evolving situations/preferences. Is confident and competent in rationalising decisions made within the care setting even in more complex and challenging situations.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
1.11	communicate effectively using a range of skills and strategies with colleagues and people at all stages of life and with a range of mental, physical, cognitive and behavioural health challenges		
	The Code (NMC 2018) 1.1; 7.1; 7.2; 7.3; 7.4; 7.5; 8.2; 8.3; 9.3; 20.10 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Appropriate use of verbal and non-verbal communication skills. Actively listens, recognises and responds to verbal and non-verbal communication. Participates in producing accurate, clear and legible documentation. Participate in ward rounds/ MDT/case conference/ handovers.	*Developing confidence and competence in appropriate use of verbal and non-verbal communication skills. Produces accurate, clear and legible documentation. Adopts an active role in ward rounds/MDT/case conference/ handovers.*	*Confidently and clearly presents and shares verbal and written reports with individuals and groups Lead ward rounds/ MDT/case conference/ handovers, formulate and document plans. Analyse and accurately records and shares digital information and data.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

1.12	demonstrate the skills and abilities required to support people at all stages of life who are emotionally or physically vulnerable		
	The Code (NMC 2018) 1.1; 1.3; 1.5; 2.1; 2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 3.4; 4.1; 4.2; 4.3; 5.5; 7.4; 13.1; 13.2; 13.3; 13.4; 15.3; 17.1; 17;2; 17.3; 20.5 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In association with the PS/PA is able to provide reassurance to clients. Is aware of appropriate support structures and agencies. Demonstrates empathy in communicating with clients. Is aware of the need to report any perceived vulnerability to senior staff. Is aware of principles of de-escalation.	*Provides reassurance to clients. Is aware and able to participate in appropriate referrals to appropriate agencies. Demonstrate Empathy. Demonstrates ability to utilise appropriate and timely de-escalation.*	*Is confident and competent in providing effective reassurance in a variety of situations. Takes the lead in undertaking appropriate referrals. Is skilled in demonstrating sensitive and empathic care. Is skilled and confident in utilising appropriate and timely de-escalation.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

1.13	demonstrate the skills and abilities required to develop, manage and maintain appropriate relationships with people, their families, carers and colleagues		
	The Code (NMC 2018) 1.1; 2.5; 2.6; 4.4; 5.5; 7.3; 7.5; 8.1; 8.2; 9.3; 17.3; 20.1; 20.2; 20.3; 20.6; 20.7; 20.8; 21.1; 21.2; 21.3; 21.5; 21.6 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Utilise verbal and non-verbal communication skills. Developing ability to actively listen and respond to verbal cues from others. Demonstrates empathy when interacting with people, their families, carers and colleagues. Aware of the need to engage in appropriate information sharing. Developing a professional disposition when interacting with all people.	*Developing confidence and competence in engaging in verbal and non-verbal communication with others. Engages in active listen to identify relevant information from patients, their families and carers. Responds appropriately to verbal cues from others. Demonstrates empathy when interacting with people, their families, carers and colleagues. Engages confidently in appropriate information sharing. Developing a professional disposition when interacting with all people.*	*Is confident and competent in engaging in verbal and non-verbal communication with others. Actively engages in active listen to identify relevant information from patients, their families and carers. Is skilled in recognising and responding to verbal cues from others. Demonstrates empathy when interacting with people, their families, carers and colleagues. Confidently and appropriately identifies relevant information for sharing with appropriate individuals/agencies. Always presents self in a professional manner when interacting with all people*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

1.14	provide and promote non-discriminatory, person-centred and sensitive care at all times, reflecting on people's values and beliefs, diverse backgrounds, cultural characteristics, language requirements, needs and preferences, taking account of any need for adjustments		
	The Code (NMC 2018) 1.3; 1.5; 3.4; 5.5; 7.2; 7.3; 7.4; 20.2; 24.1 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Participates in active listening and appropriate questioning techniques to identify individual needs and preferences. Understand the need to assess social and cultural differences and provide effective and appropriate care. Aware of the concept of unconscious bias. Under supervision is able to adapt care to be person-centred and sensitive to individual needs.	*Developing confidence and competence in active listening and appropriate questioning techniques to identify individual needs and preferences. Is able to assess social and cultural differences and provide effective and appropriate care. Understands the concept of unconscious bias. Is able to adapt care to be person-centred and sensitive to individual needs.*	*Competently engages in non-discriminatory and person-centred care at all times. Engages in active listening, and skilled questioning utilising appropriate techniques to identify individual needs and preferences. Competently assesses social and cultural differences and provide effective person-centred and individually adjusted care. Avoids unconscious bias*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
1.15	demonstrate the numeracy, literacy, digital and technological skills required to meet the needs of people in their care to ensure safe and effective nursing practice		
	The Code (NMC 2018) 10.1; 10.3; 10;4; 10.5; 10.6; 14.3; 17.2; 18.1; 18.2; 18.3; 20.10 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Participating in using numeracy, literacy and digital technology in the care of service users, medicine management and monitoring.	*Developing confidence in using numeracy, literacy and digital technology in the care of service users medicine management and monitoring.*	*Confidently and accurately engages in the use of numeracy, literacy and digital technology in the care of service users, their medicine management and monitoring.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

1.16	demonstrate the ability to keep complete, clear, accurate and timely records		
	The Code (NMC 2018) 2.5; 4.2; 5.2; 5.4; 5.5; 7.5; 8.2; 8.6; 9.1; 10.1; 10.2; 10.3; 10.4; 10.5; 10.6; 13.2; 14.3; 16.2; 17.2; 18.1; 18.2; 18.3; 18.5; 20.10. 21.4; 23.1 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Participates in sharing clear and accurate verbal statements and written reports in patient notes and documentation.	*Developing confidence and competence in sharing clear and accurate verbal statements and written reports in patient notes, documentation or handovers.*	*Confidently and accurately presents and shares verbal and written statements in patient notes and documentation. Provides clear verbal, digital or written information and instructions when delegating or handing over responsibility for care.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
1.17	take responsibility for continuous self-reflection, seeking and responding to support and feedback to develop their professional knowledge and skills		
	The Code (NMC 2018) 8.4; 9.2; 22.3; 23.1; 24.2 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Seeking feedback with PS/PA from service users, carers and MDT professionals. Engage in reflection.	*Seeking feedback with PS/PA from service users, cares and MDT professionals and using this for development/ inform future practice. Actively engages in reflection.*	*Taking the lead to obtain feedback from service users, cares and MDT professionals and using information for personal and professional development/ inform future practice. Utilises reflection to inform action.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

1.18	demonstrate the knowledge and confidence to contribute effectively and proactively in an interdisciplinary team		
	The Code (NMC 2018) 3.3; 5.4; 6.1; 8.1; 8.2; 8.3; 8.4; 8.5; 8.6; 8.7; 9.1; 9.3; 9.4; 10.2; 11.1; 11.3; 13.2; 13.3; 16.1; 16.5; 17.2; 19.4; 20.3; 25.1 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Attend and participate in appropriate MDT meetings, ward rounds, demonstrates effective and appropriate communication with team.	*Attend and participate in MDT meetings and engages in effective and appropriate communication with team members.*	*Takes and active role in MDT meetings fostering effective, appropriate and informed communication with team.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
1.19	act as an ambassador, upholding the reputation of their profession and promoting public confidence in nursing, health and care services		
	The Code (NMC 2018) 1.1; 2.2; 3.2; 3.4; 5.1; 6.2; 7.1; 8.1; 9.3; 9.4; 11.1; 12.1; 13.5; 14.1; 16.1; 16.2; 16.3; 16.4; 16.5; 16.6; 17.3; 19.1; 19.2; 20.1; 20.2; 20.3; 20.7; 20.8; 20.9; 21.1; 21.2; 22.1; 22.2; 22.3; 23.1; 23.2; 23.3 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA demonstrate an understanding of the importance of professional values within the practice environment. Acts in a professional manner with all staff and people in the care environment. Understands the need to respect the privacy and dignity of others and is aware of the need for appropriate information sharing. Is aware of policies and protocols relating to professional practice and acts on feedback provided.	*Acts as a role model to junior students. Developing confidence and competence in practicing in a professional manner whilst becoming more aware of personal and professional limitations. Acts appropriately to protect the privacy and dignity of others and demonstrates appropriate information sharing. Is able to relate policies and protocols to professional behaviour and performance.*	*Acts as a role model to other students and colleagues demonstrating professionalism at all times whilst accepting personal and professional limitations. Acts in a way which inspires confidence in colleagues and clients. Actively protects the privacy and dignity of others and demonstrates appropriate information sharing. Takes a lead role in ensuring that policies and protocols are followed. Reports and documents poor or discriminatory behaviour. Provides unambiguous, constructive feedback to others where discriminatory behaviours are evident. Acts as an advocate as required.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

1.20	safely demonstrate evidence-based practice in all skills and procedures stated in Annexes A and B		
	The Code (NMC 2018) 4.3; 6.1; 6.2; 17.3; 18.2; 19.2; 19.3; 20.4; 20.6; 22.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Achieving skills and procedures and demonstrates safe practice as detailed in the PAD.	*Achieve skills and procedures and demonstrates safe practice as detailed in the PAD.*	*Achieve all skills and procedures and demonstrates safe and effective practice as detailed in the PAD.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

Platform 2: Promoting health and preventing ill health

Registered nurses play a key role in improving and maintaining the mental, physical and behavioural health and wellness of people, families, communities and populations. They support and enable people at all stages of life and in all care settings to make informed choices about how to manage health challenges in order to maximise their quality of life and improve health outcomes. They are actively involved in the prevention of and protection against disease and ill health and engage in public health, community development and global health agendas, and in the reduction of health inequalities.

Platform 2: Promoting health and preventing ill health			
2.1	understand and apply the aims and principles of health promotion, protection and improvement and the prevention of ill health when engaging with people		
	The Code (NMC 2018) 1.3; 2.2; 2.3; 2.4; 3.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA demonstrate a foundation understanding of these principles. Support people to make positive health choices.	*Apply your understanding of these principles to support people to make positive health choices.*	*Deliver a health promotion or health promoting activity to a person or group of people. Work within the parameters of national health protection policy e.g. Smoking Health and Social Care (Scotland) Act 2005.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

2.2	demonstrate knowledge of epidemiology, demography, genomics and the wider determinants of health, illness and wellbeing and apply this to an understanding of global patterns of health and wellbeing outcomes		
	The Code (NMC 2018) 3.1; 6.1; 6.2; 22.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA demonstrate a foundation understanding of these principles.	*Demonstrate knowledge of epidemiology, demography, genomics and the wider determinants of health, illness and wellbeing and apply this to an understanding of global patterns of health and wellbeing outcomes.*	*Be able to relate core theories, concepts, principles and terminology to individual or groups within your care.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
2.3	understand the factors that may lead to inequalities in health outcomes		
	The Code (NMC 2018) 3.1; 3.3; 3.4; 4.3; 6.2; 17.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA demonstrate a foundation understanding of these principles.	*In conversation demonstrate an understanding of the core theories, concepts, principles and terminology of health inequalities and health outcomes and their impact on the people in your care.*	*Relate the core theories, concepts and principles of health inequalities and health outcomes to the care needs of individuals and groups in your care.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

2.4	identify and use all appropriate opportunities, making reasonable adjustments when required, to discuss the impact of smoking, substance and alcohol use, sexual behaviours, diet and exercise on mental, physical and behavioural health and wellbeing, in the context of people's individual circumstances		
	The Code (NMC 2018) 2.2; 2.3; 2.4; 3.1; 7.1; 7.2; 7.3; 7.4; 8.2; 8.3; 13.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Observe and have reflective discussion about promoting health in relation to one or more of these health behaviours.	*Recognise appropriate opportunities to discuss promoting health choices with people in relation to one or more of these health behaviours.*	*Create opportunities to discuss promoting health choices with people or groups of people in relation to one or more of these health behaviours.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
2.5	promote and improve mental, physical, behavioural and other health related outcomes by understanding and explaining the principles, practice and evidence-base for health screening programmes		
	The Code (NMC 2018) 1.3; 2.2.; 2.3; 2.4; 2.5; 3.1; 6.1; 6.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
		Apply your understanding of these principles to support people to make informed health choices.	*Identify where a person could engage in health screening and support them in making an informed choice about this.*
		ACHIEVED Signature Date	ACHIEVED Signature Date

2.6	understand the importance of early years and childhood experiences and the possible impact on life choices, mental, physical and behavioural health and wellbeing		
	The Code (NMC 2018) 6.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA demonstrate a foundation understanding of the above.	*In conversation demonstrate an understanding of the core theories, concepts, principles and terminology of health inequalities and health outcomes and their impact on the people in your care.*	*Apply your understanding of the core theories, concepts and principles to care planning and delivery taking in to account a person's experiences.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
2.7	understand and explain the contribution of social influences, health literacy, individual circumstances, behaviours and lifestyle choices to mental, physical and behavioural health outcomes		
	The Code (NMC 2018) 2.2; 2.3; 2.4; 3.1; 7.1; 7.2; 7.3; 7.4; 8.2; 8.3; 13.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA demonstrate a foundation understanding of the above.	*In conversation demonstrate an understanding of the core theories, concepts, principles and terminology of health behaviours and health outcomes and their impact on the people in your care.*	*Apply your understanding of the core theories, concepts and principles to care planning and delivery taking in to account a person's experiences.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

2.8	explain and demonstrate the use of up to date approaches to behaviour change to enable people to use their strengths and expertise and make informed choices when managing their own health and making lifestyle adjustments		
	The Code (NMC 2018) 1.3; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 3.1; 3.2; 3.3; 6.1; 6.1; 6.2; 7.3; 8.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
		Recognise and apply techniques such as teachback, motivational interviewing or other similar approaches to enable people to make informed choices.	*Recognise opportunities to apply techniques such as teachback, motivational interviewing or other similar approaches to enable people to make informed choices. Integrate appropriate behaviour change approaches to your practice.*
		ACHIEVED Signature Date	ACHIEVED Signature Date
2.9	use appropriate communication skills and strength-based approaches to support and enable people to make informed choices about their care to manage health challenges in order to have satisfying and fulfilling lives within the limitations caused by reduced capability, ill health and disability		
	The Code (NMC 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 3.4; 4.1; 4.2; 4.3; 4.4; 5.4; 5.5; 7.1; 7.2; 7.3; 7.4; 7.5; 8.2; 8.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Use appropriate communication skills to support people to make informed choices about their care.	*Use appropriate communication skills and strengths-based approaches to support people to make informed choices about their care.*	*Work collaboratively to identify people's individual strengths and support them to identify personally meaningful goals.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

2.10	provide information in accessible ways to help people understand and make decisions about their health, life choices, illness and care		
	The Code (NMC 2018) 7.1; 7.2; 7.3; 7.4; 7.5 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
		Use a range of information sources e.g. translators, alternative language, audio or graphics, to meet individual needs.	*Identify the need for and utilise a range of information sources e.g. translators, alternative language, audio or graphics, to meet individual needs.*
		ACHIEVED Signature Date	ACHIEVED Signature Date
2.11	promote health and prevent ill health by understanding and explaining to people the principles of pathogenesis, immunology and the evidence-base for immunisation, vaccination and herd immunity		
	The Code (NMC 2018) 1.3; 1.4; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 4.1; 5.2; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4; 7.5 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
		Consider the core theories, concepts, principles and terminology in conversation with your PS/PA.	*Explain the core theories, concepts, principles and terminology in accessible language to individuals or groups.*
		ACHIEVED Signature Date	ACHIEVED Signature Date
2.12	protect health through understanding and applying the principles of infection prevention and control, including communicable disease surveillance and antimicrobial stewardship and resistance		
	The Code (NMC 2018) 1.2; 1.4; 2.2; 5.4; 5.5; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4; 7.5; 8.2; 17.1; 17.3; 18.1; 18.3; 19.2; 19.3; 19.4 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Understand and apply the principles of infection prevention and control in your practice.	*Apply and support others to apply the principles of infection prevention and control in your practice.*	*Support best practice in the application of the principles of infection prevention and control in your practice.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

Platform 3: Assessing needs and planning care.

Registered nurses prioritise the needs of people when assessing and reviewing their mental, physical, cognitive, behavioural, social and spiritual needs. They use information obtained during assessments to identity the priorities and requirements for person-centred and evidence- based nursing interventions and support. They work in partnership with people to develop person-centred care plans that take into account their circumstances, characteristics and preferences.

Platform 3: Assessing needs and planning care			
3.1	demonstrate and apply knowledge of human development from conception to death when undertaking full and accurate person-centred nursing assessments and developing appropriate care plans		
	The Code (NMC 2018) 1.4; 2.1; 2.2; 2.4; 3.1; 4.2; 5.5; 6.2; 7.1; 10.1; 13.1; 13.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Participation in nursing assessment and planning of care. For each, discuss with PS/PA the stage of human development and the implications for care planning.	*Initiate and complete nursing assessments and plans of care. For each, explore with PS/PA the stage of human development and the implications for care planning.*	*Independently complete nursing assessments and plans of care. Analyse with PS/PA the stage of human development and the implications for care planning.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
3.2	demonstrate and apply knowledge of body systems and homeostasis, human anatomy and physiology, biology, genomics, pharmacology and social and behavioural sciences when undertaking full and accurate person-centred nursing assessments and developing appropriate care plans		
	The Code (NMC 2018) 2.1; 3.1; 3.2; 3.3; 6.1; 6.2; 10.1; 13.1; 13.2; 17.3; 18.1; 18.2; 18.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Participation in nursing assessment and planning of care. Discuss with PS/PA the aspects listed in 3.2 and impact and influence on nursing assessment and care planning.	*Initiate and complete nursing assessments and plans of care. Explore with PS/PA the aspects listed in 3.2 and the impact and influence on nursing assessment and care planning.*	*Independently complete nursing assessments and plans of care. Analyse with PS/PA the aspects listed in 3.2 and the impact and influence on nursing assessment and care planning.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

3.3	demonstrate and apply knowledge of all commonly encountered mental, physical, behavioural and cognitive health conditions, medication usage and treatments when undertaking full and accurate assessments of nursing care needs and when developing, prioritising and reviewing person-centred care plans		
	The Code (NMC 2018) 2.1; 3.1; 3.2; 3.3; 6.1; 6.2; 10.1; 13.1; 13.2; 17.3; 18.1; 18.2; 18.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Participation in nursing assessment and planning of care. For each, demonstrate knowledge of conditions and the impact this will have on planning care.	*Initiate, complete and review nursing assessments and plans of care. For each, apply knowledge of conditions and illustrate the impact this will have on planning care.*	*Independently complete and review nursing assessments and plans of care. For each, apply knowledge of conditions and evaluate the impact this will have on planning care.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
3.4	understand and apply a person-centred approach to nursing care, demonstrating shared assessment, planning, decision making and goal setting when working with people, their families, communities and populations of all ages		
	The Code (NMC 2018) 1.1.; 1.3; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.3; 3.4; 4.1; 4.2; 4.3; 5.5; 6.1; 7.1; 10.1; 13.1; 13.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Participation in nursing assessment and planning of care. For each, demonstrate and discuss the importance of working in partnership with people to assess and plan care.	*Working collaboratively with people, assess, plan and deliver care devising individualised goals.*	*Working collaboratively with people, assess, plan, deliver and evaluate care devising individualised goals.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

3.5	demonstrate the ability to accurately process all information gathered during the assessment process to identify needs for individualised nursing care and develop person-centred evidence-based plans for nursing interventions with agreed goals		
	The Code (NMC 2018) 1.1.; 1.3; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.3; 3.4; 4.1; 4.2; 4.3; 5.5; 6.1; 7.1; 10.1; 13.1; 13.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Participation in nursing assessment and planning of care and in discussion with your PS/PA, develop a person-centred plan of care with agreed goals.	*Initiate and complete nursing assessments and plans of care. Interpret data gathered and in discussion with your PS/PA, explore and devise a person-centred plan of care with agreed goals.*	*Independently complete nursing assessments and plans of care. Interpret and synthesise data gathered, explore and devise a person-centred plan of care with agreed goals.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
3.6	effectively assess a person's capacity to make decisions about their own care and to give or withhold consent		
	The Code (NMC 2018) 1.3; 1.5; 2.3; 2.4; 2.5; 2.6; 3.2; 3.3; 3.4; 4.1; 4.2; 4.3; 4.4; 7.2; 7.3; 7.4; 7.5; 17.1; 17.2; 17.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In collaboration with PS/PA, assess a person's capacity to consent and make decisions about care.	*Demonstrate the ability to assess a person's capacity to consent and make decisions about care.*	*Assess a person's capacity to consent and make decisions about care.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
3.7	understand and apply the principles and processes for making reasonable adjustments		
	The Code (NMC 2018) 1.3; 1.5; 2.1; 2.3; 2.4; 2.5; 2.6; 3.3; 3.4; 4.1; 4.2; 4.3; 4.4; 5.1; 10.1; 17.1; 17.2; 17.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
		Recognises individual needs and adapts practice to meet individual care requirements.	*Assess individual needs and initiate adaptations to practice to meet individual care requirements.*
		ACHIEVED Signature Date	ACHIEVED Signature Date

3.8	understand and apply the relevant laws about mental capacity for the country in which you are practising when making decisions in relation to people who do not have capacity		
	The Code (NMC 2018) 1.3; 1.5; 2.1; 2.5; 3.1; 3.4; 4.1; 4.2; 4.1; 4.4; 5.1; 5.2; 5.5; 7.1; 7.5; 10.1 :EU clinical instruction Directives B3; B5; B6; B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
		Apply knowledge of legal frameworks to inform assessment of capacity.	*Apply knowledge of legal frameworks to the assessment of capacity and the implications for assessing and planning care.*
		ACHIEVED Signature Date	ACHIEVED Signature Date
3.9	recognise and assess people at risk of harm and the situations that may put them at risk, ensuring prompt action is taken to safeguard those who are vulnerable		
	The Code (NMC 2018) 1.5; 3.1; 3.4; 4.3; 5.4; 8.5; 8.6; 14.1; 13.2; 13.4; 14.1; 14.2; 14.3; 15.2; 15.3; 16.1; 16.2; 16.4; 17.1; 17.2; 17.3 :EU clinical instruction Directives B3; B4; B5; B6; B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Demonstrate the ability to identify people who are or may be vulnerable.	*In collaboration with your PS/PA, participate in assessing people at risk of harm and initiate safeguarding measures.*	*Independently identify and assess people at risk of harm or potential harm, initiating safeguarding measures and escalating where appropriate.*
	Achieved Signature Date	Achieved Signature Date	Achieved Signature Date

3.10	demonstrate the skills and abilities required to recognise and assess people who show signs of self-harm and/or suicidal ideation		
	The Code (NMC 2018) 2.6; 3.1; 4.3; 6.2; 7.1; 7.3; 7.5; 8.6; 13.1; 13.2; 13.3; 13.4; 15.1; 15.1; 15.3; 17.1 :EU clinical instruction Directives B3; B4; B5		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
		In collaboration with your PS/PA, explore how to recognise and discuss / participate in assessing people who show signs of self-harm and/or suicidal ideation.	*Independently identify and assess people who show signs of self-harm and/or suicidal ideation.*
		ACHIEVED Signature Date	ACHIEVED Signature Date
3.11	undertake routine investigations, interpreting and sharing findings as appropriate		
	The Code (NMC 2018) 1.4; 2.1; 6.2; 8.1; 8.2; 8.3; 8.4; 8.5; 13.1; 13.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Complete observations (eg Temp, P, BP) and investigations (eg specimen collection) and discuss findings with PS/PA.	*Complete routine investigations, analyse findings and in collaboration with your PS/PA share as appropriate.*	*Identify appropriate investigations based upon assessment data. Analyse findings and share with relevant others.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
3.12	interpret results from routine investigations, taking prompt action when required by implementing appropriate interventions, requesting additional investigations or escalating to others		
	The Code (NMC 2018) 1.4; 2.1; 6.2; 8.1; 8.2; 8.3; 8.4; 8.5; 13.1; 13.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Consider any abnormalities from 3.11 and with assistance from your PS/PA, consider further investigations required.	*Interpret any abnormalities from 3.11 and in collaboration with your PS/PA, implement necessary actions and consider if further investigations are required.*	*Interpret any abnormalities from 3.11 and, implement necessary actions and consider if further investigations are required.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

3.13	demonstrate an understanding of co-morbidities and the demands of meeting people's complex nursing and social care needs when prioritising care plans		
	The Code (NMC 2018) 2.1; 2.2; 2.3; 3.1; 3.2; 6.1; 6.2; 13.1; 13.2; 18.1; 22.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
		In collaboration with your PS/PA apply knowledge of co-morbidities to identify priorities of care when planning care.	*Applying knowledge of co-morbidities, prioritise care to meet the demands of people's complex nursing and social care needs.*
		ACHIEVED Signature Date	ACHIEVED Signature Date
3.14	identify and assess the needs of people and families for care at the end of life, including requirements for palliative care and decision making related to their treatment and care preferences		
	The Code (NMC 2018) 1.2; 1.4; 2.1; 2.2; 3.2; 6.1; 6.2; 7.3; 13.1; 13.2; 18.1; 22.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Participate in or in discussion with your PS/PA, demonstrate an understanding of assessment and planning of palliative care.	*Participate in or in discussion with your PS/PA, contribute to the assessment and planning of palliative care.*	*In collaboration with people and families, assess and plan palliative care to meet individual preferences and requirements.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

3.15	demonstrate the ability to work in partnership with people, families and carers to continuously monitor, evaluate and reassess the effectiveness of all agreed nursing care plans and care, sharing decision making and readjusting agreed goals, documenting progress and decisions made		
	The Code (NMC 2018) 1.1; 2.1; 2.2; 2.3; 2.4; 2.6; 3.1; 3.2; 3.3; 3.4; 5.2; 5.4; 5.5; 7.1; 7.3; 8.1; 8.2; 8.3; 13.1; 13.1; 13.2; 13.3 :EU clinical instruction Directives B3; B5; B6; B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Under direct supervision, review plans of care with PS/PA and participate in documenting progress and any appropriate adjustments to plans of care.	*In collaboration with your PS/PA, review plans of care, document progress and implement appropriate adjustments to plans of care.*	*In collaboration with people, evaluate plans of care, document progress and implement appropriate adjustments to plans of care.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
3.16	demonstrate knowledge of when and how to refer people safely to other professionals or services for clinical intervention or support		
	The Code (NMC 2018) 2.1; 7.1; 8.1; 8.2; 8.3; 8.4; 8.5; 11.1; 13.2; 13.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
		In collaboration with your PS/PA, discuss relevant referral processes and action where opportunities arise.	*Safely refer people to relevant services based upon assessment of need.*
		ACHIEVED Signature Date	ACHIEVED Signature Date

Platform 4: Assessing needs and planning care

Registered nurses take the lead in providing evidence-based, compassionate and safe nursing interventions. They ensure that care they provide and delegate is person-centred and of a consistently high standard. They support people of all ages in a range of care settings. They work in partnership with people, families and carers to evaluate whether care is effective and the goals of care have been met in line with their wishes, preferences and desired outcomes.

Platform 4: Assessing needs and planning care			
4.1	demonstrate and apply an understanding of what is important to people and how to use this knowledge to ensure their needs for safety, dignity, privacy, comfort and sleep can be met, acting as a role model for others in providing evidence based person-centred care		
	The Code (NMC 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 3.4; 4.1; 4.2; 4.3; 4.4; 5.1; 5.2; 5.3; 5.4; 5.5; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 8.2; 8.3; 8.4; 8.5; 8.6; 8.7; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3; 13.4; 13.5; 19.2; 20.1; 20.2; 20.3; 20.8; 25.1; 25.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Communicates effectively with people to identify their goals and uses this information to plan and evaluate care in collaboration with PS/PA. In collaboration with PS/PA, undertake risk assessments prior to initiating care. Updates documentation and maintain accurate records. Ensures care promotes patient dignity and privacy.	*Communicates effectively with people to identify their goals and uses this information to plan and evaluate care with increasing independence. Undertakes risk assessments whilst delivering care. Updates documentation and maintain accurate records. Ensures care promotes patient dignity and privacy.*	*Communicates effectively with people to identify their goals and uses this information to independently plan and evaluate care. Undertakes risk assessments whilst delivering care and responds appropriately to changing situations. Updates documentation and maintain accurate records. Ensures care promotes patient dignity and privacy and acts a role model for others.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

4.2	work in partnership with people to encourage shared decision making in order to support individuals, their families and carers to manage their own care when appropriate		
	The Code (NMC 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6;; 3.1; 3.2; 3.3; 3.4; 4.1; 4.2; 4.3; 4.4; 5.1; 5.2; 5.3; 5.4; 5.5; 7.1; 7.2; 7.3; 7.4; 7.5 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In collaboration with PS/PA, uses appropriate communication skills to support people, families and carers to manage their care when appropriate.	*Uses appropriate communication skills to support people, families and carers to manage their care when appropriate.*	*Identifies opportunities to participate in shared decision making with people, families and carers to manage their care when appropriate.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
4.3	demonstrate the knowledge, communication and relationship management skills required to provide people, families and carers with accurate information that meets their needs before, during and after a range of interventions		
	The Code (NMC 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 3.4; 4.1; 5.2; 5.5; 7.1; 7.2; 7.3; 7.4; 7.5; 14.2; 18.2; 18.3; 20.6; 20.7; 20.10 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with the PS/PA demonstrates understanding of the knowledge and skills needed to support people, families and carers before, during and after a range of interventions. Demonstrates an understanding of the principles of informed consent, breaking bad news, withdrawing consent/refusing treatment, duty of candour and other relevant issues.	*Obtains informed consent prior to nursing interventions. In collaboration with PS/PA, answers questions from patients/families or refers on as appropriate. Uses range of information sources e.g. translators, alternative language, audio or graphics, props to meet individual needs.*	*Takes an active role in supporting people and families prior to and after interventions. Where appropriate, provides patients/families with results from procedures or refers on where necessary. Identifies additional support services which the person may require/makes referrals to other services.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

4.4	demonstrate the knowledge and skills required to support people with commonly encountered mental health, behavioural, cognitive and learning challenges, and act as a role model for others in providing high quality nursing interventions to meet people's needs		
	The Code (NMC 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 3.4; 4.1; 4.2; 4.3; 5.1; 5.2; 5.3; 5.4; 5.5; 6.2; 7.1; 7.2; 7.3; 7.4; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3; 13.4; 17.1; 17.2; 17.3; 20.1; 20.2; 20.3; 20.4; 20.5; 20.6; 20.8; 22.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with the PS/PA, discusses a number of common mental health conditions in the practice area and approaches to treatment. In collaboration with PS/PA, communicates effectively with people of all abilities. In collaboration with the PS/PA, provides evidence based nursing care to reduce the negative impacts of mental ill health.	*Demonstrates ability to support people with a number of common mental health conditions. Communicates effectively with people of all abilities. Uses techniques and aides to ensure effective communication. Provides evidence based nursing care to reduce the negative impacts of mental ill health.*	*Takes an active role in planning and evaluating care with people with a range of commonly encountered mental health, behavioural, cognitive and learning challenges. Acts as a role model by ensuring care is evidence based and challenges appropriately when not. Identifies gaps in own knowledge and takes steps to address.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

4.5	demonstrate the knowledge and skills required to support people with commonly encountered physical health conditions, their medication usage and treatments, and act as a role model for others in providing high quality nursing interventions when meeting people's needs		
	The Code (NMC 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 4.1; 4.2; 5.1; 5.2; 5.3; 5.4; 5.5; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3; 13.4; 18.1; 18.2; 18.3; 20.1; 20.2; 20.3; 20.4; 20.5; 20.6; 20.8; 22.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with the PS/PA, discusses a number of common physical conditions in the practice area and approaches to treatment. In conversation with the PS/PA, discusses the principles of medicines management and pharmacology of medicines commonly prescribed in the practice area. In collaboration with the PS/PA, provides evidence based nursing care to reduce the negative impacts of physical ill health.	*Demonstrates ability to support people with a number of common physical health conditions. Communicates effectively with people regarding their medicines management. Provides evidence based nursing care to reduce the negative impacts of physical ill health.*	*Takes an active role in planning and evaluating care with people with a range of commonly encountered physical health challenges. Acts as a role model by ensuring care is evidence based and challenges appropriately when not. Identifies gaps in own knowledge and takes steps to address.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

4.6	demonstrate the knowledge, skills and ability to act as a role model for others in providing evidence-based nursing care to meet people's needs related to nutrition, hydration and bladder and bowel health		
	The Code (NMC 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 4.1; 4.2; 5.1; 5.2; 5.3; 5.4; 5.5; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3; 13.4; 20.1; 20.2; 20.3; 20.4; 20.5; 20.6; 20.8; 22.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with PS/PA, explains the signs and symptoms of dehydration and malnutrition. In collaboration with PS/PA, uses evidence based tools to assess fluid and nutritional needs and bladder and bowel function. Assists with toileting whilst maintaining privacy and dignity. Reports any problems with bladder/bowel function to PS/PA.	*Undertakes assessment of fluid and nutritional needs using evidence based tools and reports back to PS/PA. Undertakes assessment of bladder and bowel function using evidence based tools and reports back to PS/PA. Identifies when people may need referral to other health care professionals or services. Communicates effectively with people to set appropriate goals regarding fluid and nutritional intake. Assists with toileting whilst maintaining privacy and dignity.*	*Takes an active role in planning and evaluating nursing care to address people's fluid and nutritional needs. Takes an active role in planning and evaluating nursing care to promote bladder and bowel function health. Makes safe and appropriate referrals to other health care professionals or services in relation to fluid/nutrition and bladder/bowel health. Acts as a role model by ensuring care is evidence based and challenges appropriately when not. Identifies gaps in own knowledge and takes steps to address.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

4.7	demonstrate the knowledge, skills and ability to act as a role model for others in providing evidence-based, person-centred nursing care to meet people's needs related to mobility, hygiene, oral care, wound care and skin integrity		
	The Code (NMC 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 4.1; 4.2; 5.1; 5.2; 5.3; 5.4; 5.5; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3; 13.4; 20.1; 20.2; 20.3; 20.4; 20.5; 20.6; 20.8; 22.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In collaboration with the PS/PA, provides evidence based nursing care which meets people's needs regarding mobility, hygiene, oral care, wound care and skin integrity.	*Uses evidence based tools to assess people's needs regarding mobility, hygiene, oral care, wound care and skin integrity and reports back to PS/PA. Provides evidence based care which meets people's needs regarding mobility, hygiene, oral care, wound care and skin integrity with increasing independence. Identifies when people may need referral to other health care professionals or services.*	*Takes an active role in planning and evaluating nursing care to address people's needs regarding mobility, hygiene, oral care, wound care and skin integrity. Makes safe and appropriate referrals to other health care professionals or services in relation to mobility, hygiene, oral care, wound care and skin integrity needs. Acts as a role model by ensuring care is evidence based and challenges appropriately when not. Identifies gaps in own knowledge and takes steps to address.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

4.8	demonstrate the knowledge and skills required to identify and initiate appropriate interventions to support people with commonly encountered symptoms including anxiety, confusion, discomfort and pain		
	The Code (NMC 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 3.3; 4.1; 4.2; 4.3; 5.1; 5.2; 5.3; 5.4; 5.5; 6.1; 6.2; 8.1; 8.2; 8.3; 8.5; 8.6; 11.1; 11.2; 11.3; 13.1; 13.2; 13.3; 13.4 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with PS/PA, discusses a range of interventions for people with commonly encountered symptoms. *In collaboration with PS/PA, provides evidence based nursing care to people with a range of commonly encountered symptoms.*	*Uses evidence based tools to assess commonly encountered symptoms and discusses findings with PS/PA.* *Provides evidence based care to people with commonly encountered symptoms with increasing independence.* *Identifies when people may need referral to other health care professionals or services.*	*Takes an active role in planning and evaluating nursing care to address commonly encountered symptoms.* *Makes safe and appropriate referrals to other health care professionals or services in relation to commonly encountered symptoms. Acts as a role model by ensuring care is evidence based and challenges appropriately when not.* *Identifies gaps in own knowledge and takes steps to address.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

4.9	demonstrate the knowledge and skills required to prioritise what is important to people and their families when providing evidence-based person-centred nursing care at end of life including the care of people who are dying, families, the deceased and the bereaved		
	The Code (NMC 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with PS/PA, discusses the principles of palliative care. In collaboration with the PS/PA, provides evidence based palliative care. In conversation with the PS/PA, discusses sources of support for people who are dying and for the bereaved.	*Provides evidence based palliative care with increasing independence. Identifies when people may need referral to other health care professionals or services.*	*Takes an active role in planning and evaluating palliative nursing care. Makes safe and appropriate referrals to other health care professionals or services in relation to people requiring palliative care and the bereaved. Acts as a role model by ensuring care is evidence based and challenges appropriately when not. Identifies gaps in own knowledge and takes steps to address.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
4.10	demonstrate the knowledge and ability to respond proactively and promptly to signs of deterioration or distress in mental, physical, cognitive and behavioural health and use this knowledge to make sound clinical decisions		
	The Code (NMC 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with PS/PA, discusses common signs and symptoms of deteriorating mental and physical health. Identifies when people are experiencing a deterioration in mental or physical health and alerts clinical staff promptly and appropriately.	*Continuously and proactively assesses people for signs of deterioration in mental or physical health and alerts clinical staff promptly and appropriately in the event of a deterioration.*	*Continuously and proactively assesses people for signs of deterioration in mental or physical health and demonstrates sound clinical decision making in the event of a deterioration.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

4.11	demonstrate the knowledge and skills required to initiate and evaluate appropriate interventions to support people who show signs of self-harm and/or suicidal ideation		
	The Code (NMC 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with PS/PA, discusses common signs of self-harm and suicide ideation.	*Identifies when people show signs of self-harm and/or suicide ideation and alerts clinical staff promptly and appropriately.*	*Recognises people at risk of self-harm and/or suicidal ideation and demonstrates the knowledge and skills required to support person-centred care using evidence based risk assessment tools.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
4.12	demonstrate the ability to manage commonly encountered devices and confidently carry out related nursing procedures to meet people's needs for evidence based, person-centred care		
	The Code (NMC 2018) N/A :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with PS/PA, demonstrates an understanding of the safe and effective use of devices commonly encountered in the practice area. In collaboration with the PS/PA, safely and effectively uses devices commonly encountered in the practice area. Recognises and reports when devices are not functioning as required.	*Safely and effectively uses devices commonly encountered in the practice area with increasing independence where appropriate. Recognises when devices are not functioning as required and makes sound clinical decisions regarding malfunction.*	*Safely and effectively uses devices commonly encountered in the practice area with increasing independence where appropriate. Recognises when devices are not functioning as required and makes sound clinical decisions regarding malfunction with increasing confidence.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

4.13	demonstrate the knowledge, skills and confidence to provide first aid procedures and basic life support		
	The Code (NMC 2018) 1.4; 6.2; 15.1; 15.2; 15.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In discussion with PS/PA, demonstrate knowledge of first aid procedures. Know where in the learning environment to find first aid equipment and personnel. In discussion, demonstrate awareness of basic life support procedures and equipment.	*In discussion with PS/PA, demonstrate knowledge of first aid procedures. Know where in the learning environment to find first aid equipment and personnel. Demonstrate awareness of basic life support procedures and ways of summoning help. Demonstrate orientation to BLS equipment in the learning environment and an awareness of the student role in life support.*	*In discussion with PS/PA, demonstrate knowledge of first aid procedures. Where possible demonstrate first aid skills. Know where in the learning environment to find first aid equipment and personnel, including escalation procedures when required. Demonstrate knowledge of basic life support procedures. Demonstrate ability to perform BLS and knowledge of equipment within the learning environment. Understand how to summon assistance and escalate as required.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
4.14	understand the principles of safe and effective administration and optimisation of medicines in accordance with local and national policies and demonstrate proficiency and accuracy when calculating dosages of prescribed medicines		
	The Code (NMC 2018) 18.1; 18.2; 18.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Shadow your PS/PA carrying out medications administration. Demonstrate safe and effective practice in distinct processes of medicines administration, eg identity check, preparation of medication, drawing up an injectable preparation or administering a topical product. In discussion with PS/PA demonstrate understanding of medicines management policies. Demonstrate safe and effective disposal of waste.	*Shadow your PS/PA carrying out medications administration and participate in supervised medications management. Demonstrate safe and effective practice in supervised medicines administration and drug calculations. Demonstrate understanding of medicines management policies and where to seek assistance should support be required. Demonstrate safe and effective disposal of waste.*	*Safely and effectively administer medications, supervised by your PS/PA. Complete drug calculations independently, checked by PS/PA. Demonstrate compliance with medicines management policies and awareness of where to find information and support.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

4.15	demonstrate knowledge of pharmacology and the ability to recognise the effects of medicines, allergies, drug sensitivities, side effects, contraindications, incompatibilities, adverse reactions, prescribing errors and the impact of polypharmacy and over the counter medication usage		
	The Code (NMC 2018) 18.1; 18.2; 18.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In discussion with PS/PA, demonstrate knowledge of the effects of common drugs. Identify signs of allergy or adverse drug reactions and know how to summon help. In discussion, demonstrate understanding of polypharmacy and use of OTC medication.	*Demonstrate knowledge of the effects of common drugs. Identify signs of allergy or adverse drug reactions and know how to summon help. In discussion, demonstrate understanding of polypharmacy and use of OTC medication. Identify polypharmacy on admission or prescribing paperwork. Demonstrate understanding of where to find pharmacological information. In discussion, demonstrate knowledge of prescribing error procedures.*	*Demonstrate knowledge of the effects of drugs and recognise side effects. Identify signs of allergy or adverse drug reactions and know how to summon help. Demonstrate understanding of polypharmacy and challenge it when encountered. Demonstrate understanding of where to find pharmacological information. Demonstrate knowledge of prescribing error procedures and of the safe prescription processes.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
4.16	demonstrate knowledge of how prescriptions can be generated, the role of generic, unlicensed, and off-label prescribing and an understanding of the potential risks associated with these approaches to prescribing		
	The Code (NMC 2018) 18.1; 18.2; 18.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In discussion with PS/PA, demonstrate understanding of prescription generation. Show awareness of risks associated with prescribing and how to seek assistance.	*Demonstrate understanding of safe prescription generation. Show awareness of risks associated with prescribing, alternative sources of medication and understand reporting procedures.*	*Challenge poor prescribing in the learning environment. Understand the source of further information. Demonstrate ability to source pharmacological information from both written sources and practitioners.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

4.17	apply knowledge of pharmacology to the care of people, demonstrating the ability to progress to a prescribing qualifications on following registration		
	The Code (NMC 2018) 18.1; 18.2; 18.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Demonstrate in discussion that you are aware of prescribing procedures. Discuss the pharmacological effects of medications encountered in the learning environment and demonstrate understanding of the necessary administration procedures.	*Understand and demonstrate prescribing procedures, supervised by your PS/PA. Discuss the pharmacological effects of medications encountered in the learning environment and demonstrate understanding of the necessary administration procedures.*	*Understand and demonstrate prescribing procedures independently, checked by your PS/PA. Discuss the pharmacological effects of medications encountered in the learning environment and demonstrate understanding of the necessary administration procedures.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
4.18	demonstrate the ability to co-ordinate and undertake the processes and procedures involved in routine planning and management of safe discharge home or transfer of people between care settings		
	The Code (NMC 2018) 3.3; 5.4 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Observe the discharge/transfer process with your PS/PA. Demonstrate understanding of the details and arrangements which need to be considered. Demonstrate your ability to document arrangements made in records. In discussion, demonstrate awareness of the necessary communication required for safe and effective discharge/transfer.	*Take part, alongside your PS/PA, in a conversation about discharge home/transfer. Demonstrate understanding of the details and arrangements which need to be considered and how to make the necessary plans. Demonstrate your ability to document arrangements made in records. Demonstrate awareness of the necessary communication required for safe and effective discharge/transfer.*	*Initiate and carry out a conversation about discharge home/transfer with your PS/PA observing. Make arrangements, with support of your supervisor and record these arrangements appropriately.* *Initiate and carry out communication between stakeholders in the discharge or transfer of an individual, observed by your supervisor.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

Platform 5: leading and managing nursing care and working in teams

Registered nurses provide leadership by acting as a role module for best practice in the delivery of nursing care. They are responsible for managing nursing care and are accountable for the appropriate delegation and supervision of care provided by others in the team including lay carers. They play an active and equal role in the interdisciplinary team, collaborating and communicating with a range of colleagues.

Platform 5: Leading and managing nursing care and working in teams			
5.1	understand the principles of effective leadership, management, group and organisational dynamics and culture and apply these to team working and decision-making		
	The Code (NMC 2018) 4.3; 4.4; 5.4; 6.2; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 8.2; 8.3; 8.4; 8.5; 8.6; 8.7; 9.1; 9.2; 9.3; 9.4; 10.1; 10.2; 10.3; 10.4; 10.5; 11.1; 11.2; 11.3; 13.2; 13.3; 13.5; 15.1; 15.3; 16.1; 16.2; 16.3; 17.2; 19.1; 19.2; 19.4; 20.1; 20.3; 20.5; 20.6; 20.7; 20.8; 20.9; 20.10; 25.1; 25.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Discuss with PS/PA principles of leadership and working within teams.	*Demonstrate ability to work effectively within a team recognising how dynamics and culture influence decision-making.*	*Initiate leadership in care delivery and demonstrate understanding of organisational dynamics and culture.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
5.2	understand and apply the principles of human factors, environmental factors and strength-based approaches when working in teams		
	The Code (NMC 2018) 1.1; 1.3; 1.4; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 3.4; 4.2; 4.2; 4.3; 5.1; 5.2; 5.3; 5.5; 7.1; 7.2; 7.3; 7.4; 7.5; 8.2; 13.2; 13.3; 13.4; 16.2; 16.3; 17.3; 19.2; 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Discuss with PS/PA principles of effective team working.	*Demonstrate ability to recognise how human, environmental factors impact on team function.*	*Demonstrate ability to effectively lead and promote team cohesion and function.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

5.3	understand the principles and application of processes for performance management and how these apply to the nursing team		
	The Code (NMC 2018) 8.1; 8.2; 8.4; 8.7; 9.1; 9.2; 9.3; 9.4; 11.1; 11.2; 11.3; 12.1; 13.5; 16.1; 16.2; 16.3; 16.4; 16.5; 16.6; 19.1; 19.2; 19.3; 19.4; 20.1; 20.2; 20.3; 20.5; 20.8; 22.2; 22.3; 23.1; 23.2; 23.3; 23.4; 23.5; 24.1; 24.2; 25.1; 25.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
		Discuss how performance concerns can affect practice. Discuss local policies for escalation and seeking support.	*Gather and reflect on feedback from a variety of sources, using it to improve your practice and performance.*
		ACHIEVED Signature Date	ACHIEVED Signature Date
5.4	demonstrate an understanding of the roles, responsibilities and scope of practice of all members of the nursing and interdisciplinary team and how to make best use of the contributions of others involved in providing care		
	The Code (NMC 2018) 5.4; 8.2; 8.3; 8.4; 8.5; 8.6; 9.3; 11.1; 11.2; 11.3; 13.2; 13.3; 13.5; 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Discuss with PS/PA the principles of an effective Multi-disciplinary team (MDT).	*Demonstrate an understanding of the roles of all those within the MDT and how they impact on the delivery of care.*	*As an active member of the MDT, lead and manage team collaboration to enhance and co-ordinate patient care.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

5.5	safely and effectively lead and manage the nursing care of a group of people, demonstrating appropriate prioritisation, delegation and assignment of care responsibilities to others involved in providing care		
	The Code (NMC 2018) 5.4; 6.2; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 8.2; 8.3; 8.4; 8.5; 8.6; 8.7; 9.1; 9.2; 9.3; 9.4; 10.1; 10.2; 10.3; 10.4; 10.5; 11.1; 11.2; 11.3; 13.2; 13.3; 13.5; 15.1; 15.3; 16.1; 16.2; 16.3; 17.2; 19.1; 19.2; 19.4; 20.1; 20.3; 20.5; 20.6; 20.7; 20.8; 20.9; 20.10; 25.1; 25.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
		In collaboration with PS/PA using appropriate prioritisation and delegation principles assign care responsibilities to appropriate care providers eg, HCSW.	*Demonstrate leadership of prioritisation, delegation and assignment of care responsibilities to a group of people.*
		ACHIEVED Signature Date	ACHIEVED Signature Date
5.6	exhibit leadership potential by demonstrating an ability to guide, support and motivate individuals and interact confidently with other members of the care team		
	The Code (NMC 2018) 7.1; 7.4; 7.5; 8.1; 8.2; 8.4; 8.7; 9.1; 9.2; 9.3; 11.1; 11.2; 11.3; 2-.2; 20.3; 20.8; 25.1; 25.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Demonstrate ability to interact and communicate with members of the care team.	*Demonstrate appropriate use of support and motivational skills with members of the care team.*	*Demonstrate leadership in guiding, supporting and motivating individuals to interact confidently.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

5.7	demonstrate the ability to monitor and evaluate the quality of care delivered by others in the team and lay carers		
	The Code (NMC 2018) 8.4; 9.1; 9.3; 20.2; 25.1; 25.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Discuss with PS/PA the principles of evaluation of quality care delivery.	*In collaboration with PS/PA demonstrate ability to identify, monitor and evaluate quality of care delivery.*	*Demonstrate ability to appraise, monitor and evaluate the care delivered by team members.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
5.8	support and supervise students in the delivery of nursing care, promoting reflection and providing constructive feedback, and evaluating and documenting their performance		
	The Code (NMC 2018) 6.1; 7.1; 7.4; 7.5; 9.4; 10.1; 10.2; 10.3; 10.4; 10.5; 11.1; 11.2; 11.3; 20.8; 25.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
		Engage in supervision of junior students, reflecting and providing feedback on their performance.	*Demonstrate effective support and supervision for learners, engage in reflective discussions evaluating and documenting performance.*
		ACHIEVED Signature Date	ACHIEVED Signature Date

5.9	demonstrate the ability to challenge and provide constructive feedback about care delivered by others in the team, and support them to identify and agree individual learning needs		
	The Code (NMC 2018) 2.1; 3.4; 8.2; 8.4; 9.1; 9.3; 9.4; 20.3; 20.5; 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
		Discuss with PS/PA challenging situations and managing expectations of others within the team. Reflect on own personal learning outcomes and identifying needs.	*Demonstrate ability to discuss, challenge and construct positive feedback within the team. Encourage other learners to meet learning outcomes.*
		ACHIEVED Signature Date	ACHIEVED Signature Date
5.10	contribute to supervision and team reflection activities to promote improvements in practice and services		
	The Code (NMC 2018) 8.2; 8.4; 9.1; 9.2; 9.3; 9.4; 11.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Discuss and explore with PS/PA methods to promote and demonstrate good practice and activities to improve services within a team.	*Demonstrate ability to contribute to group discussions / reflection on improvements in practice and service.*	*Lead a group in discussing activities to promote and formulate improvements in practice and services within the team.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

5.11	effectively and responsibly use a range of digital technologies to access, input, share and apply information and data within teams and between agencies		
	The Code (NMC 2018) 8.2; 8.6; 10.4; 10.5; 10.6; 20.4 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Discuss and identify with PS/PA a range of digital technologies within the working environment.	*In collaboration with PS/PA demonstrate ability to share and record information within the team and other agencies utilising digital technologies.*	*Ability to input, access and share relevant information/data utilising digital technologies within the team and other agencies.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
5.12	understand the mechanisms that can be used to influence organisational change and public policy, demonstrating the development of political awareness and skills		
	The Code (NMC 2018) 8.2; 9.2; 20.3; 20.7 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Discuss with PS/PA elements of organisational policies and impact of political influences.	*In collaboration with PS/PA demonstrate ability to distinguish between organisational and political changes.*	*Ability to analyse and recognise internal and external influences on organisational change policies and political awareness.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

Platform 6: Improving safety and quality of care

Registered nurses make a key contribution to the continuous monitoring and quality improvement of care and treatment in order to enhance health outcomes and people's experience of nursing and related care. They assess risks to safety or experience and take appropriate action to manage those, putting the best interests, needs and preferences of people first.

Platform 6: Improving safety and quality of care			
6.1	understand and apply the principles of health and safety legislation and regulations and maintain safe work and care environments		
	The Code (NMC 2018) 13.4, 16.1, 19.1, 19.2, 19.3, 19.4, 20.4 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA demonstrate a foundation understanding of the principles of health and safety legislation and regulations.	*Be able to reflect on your knowledge of the principles of health and safety legislation and regulations to the maintenance of safe work and care environments.*	*Be able to understand and apply the processes of health and safety legislation when any circumstances impact on a safe work and care environment.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
6.2	understand the relationship between safe staffing levels, appropriate skills mix, safety and quality of care, recognising risks to public protection and quality of care, escalating concerns appropriately		
	The Code (NMC 2018) 8.5, 10.2, 11.1, 16.1, 19.1, 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider the relationships between safe staffing and skill mix. Know where to access the HEI and NMC guidance about raising concerns.	*In conversation with your PS/PA consider the evidence that demonstrates the relationship between safe staffing levels, appropriate skills mix, safety and quality of care, recognising risks to public protection and quality of care.*	*In conversation with your PS/PA explain the processes involved in raising concerns appropriately. Consider the impact on public protection and quality of care.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

6.3	comply with local and national frameworks, legislation and regulations for assessing, managing and reporting risks, ensuring the appropriate action is taken		
	The Code (NMC 2018) 3.4, 43, 10.2, 14.1, 16.1, 17.2, 17.3, 19.1, 19.4, 20.4, 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider the local and national frameworks, legislation and regulations for assessing, managing and reporting risks and their impact on your practice.	*In conversation with your PS/PA consider how you will action the local and national frameworks, legislation and regulations for assessing, managing and reporting risks and their impact on your practice.*	*In your practice be able to demonstrate how you comply with local and national frameworks, legislation and regulations for assessing, managing and reporting risks and ensure the appropriate action is taken and documented.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
6.4	demonstrate an understanding of the principles of improvement methodologies, participate in all stages of audit activity and identify appropriate quality improvement strategies		
	The Code (NMC 2018) 6.2, 8.4, 10.2, 19.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider the principles of quality improvement.	*In conversation with your PS/PA consider the range of methodologies available to develop practice and how you might use them.*	*Participate in audit activity in your PLE and share with your PS/PA how the outcomes may inform quality improvement.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

6.5	demonstrate the ability to accurately undertake risk assessments in a range of care settings, using a range of contemporary assessment and improvement tools		
	The Code (NMC 2018) 8.6, 10.2, 19.1, 19.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider the principles of risk assessment and the tools that may be available to do this.	*Under supervision undertake a risk assessment using evidence based contemporary tools.*	*Assess and document risk assessments in your PLEs.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
6.6	identify the need to make improvements and proactively respond to potential hazards that may affect the safety of people		
	The Code (NMC 2018) 8.5, 8.6, 10.2, 16.1, 17.2, 19.2, 20.4, 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA discuss risk reduction strategies.	*Under supervision implement risk reduction strategies.*	*Initiate risk reduction strategies in response to hazards.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
6.7	understand how the quality and effectiveness of nursing care can be evaluated in practice, and demonstrate how to use service delivery evaluation and audit findings to bring about continuous improvement		
	The Code (NMC 2018) 8.4, 8.6, 19.2, 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider how nursing care can be evaluated and how findings may be used to improve practice.	*Under supervision participate in evaluations in and of practice, for example completing audits or assisting people to complete evaluations.*	*Identify changes or improvements that have taken place as a consequence of service evaluation and consider the evidence base to support them.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

6.8	demonstrate an understanding of how to identify, report and critically reflect on near misses, critical incidents, major incidents and serious adverse events in order to learn from them and influence their future practice		
	The Code (NMC 2018) 8.4, 8.6, 9.2, 10.2, 16.1, 19.1, 19.2, 22.3, 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider the process used to identify and report near misses, critical incidents, major incidents and serious adverse events.	*Participate with your PS/PA to complete the appropriate documentation to report near misses, critical incidents, major incidents and serious adverse events.*	*Develop your understanding of how to identify, report and critically reflect on near misses, critical incidents, major incidents and serious adverse events by using for example the Quality Improvement Scotland or Healthcare Improvement Scotland websites.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
6.9	work with people, their families, carers and colleagues to develop effective improvement strategies for quality and safety, sharing feedback and learning from positive outcomes and experiences, mistakes and adverse outcomes and experiences		
	The Code (NMC 2018) 2.1, 2.2, 5.2, 5.4, 8.1, 8.4, 8.5, 8.6, 9.1, 9.2, 10.2, 10.6, 16.4, 19.1, 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Take some time to observe your PS/PA and other colleagues seeking and responding to feedback from people, their families, carers and colleagues.	*In conversation with your PS/PA consider the strategies used to develop effective improvement strategies.*	*Participate in activities that enable you to work with people, their families, carers and colleagues to achieve the above.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

6.10	apply an understanding of the differences between risk aversion and risk management and how to avoid compromising quality of care and health outcomes		
	The Code (NMC 2018) 1.3, 4.1, 4.3, 5.4, 17.1, 19.1, 20.3, 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider the differences between risk aversion and risk management.	*In conversation with your PS/PA consider the methodologies used to develop for example SIGN or NICE Guidelines and their potential use.*	*Critically reflect on the difference between risk aversion and risk assessment and the implications for safe effective person-centred care.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
6.11	acknowledge the need to accept and manage uncertainty, and demonstrate an understanding of strategies that develop resilience in self and others		
	The Code (NMC 2018) 1.3, 3.1, 6.1, 8.7, 13.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA develop an understanding of the concept of resilience.	*Use reflection as an approach to help you accept and manage uncertainty.*	*Create opportunities to participate in critical reflection with others and keep a reflective diary to help develop resilience in yourself and others.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
6.12	understand the role of registered nurses and other health and care professionals at different levels of experience and seniority when managing and prioritising actions and care in the event of a major incident		
	The Code (NMC 2018) 7.1, 8.1, 8.5, 10.1, 11.1, 13.3, 13.4, 15.1, 15.3, 19.1, 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA develop an understanding of what may be considered a major incident – eg public health, traumatic event, adverse weather.	*Review the major incident protocols for your PLEs and share your understanding with your PS/PA.*	*Critically reflect on any major incidents that have recently occurred and consider the various roles and responsibilities of registered nurses and other health and care professionals.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

Platform 7: Coordinating care

Registered nurses play a leadership role in coordinating and managing the complex nursing and integrated care needs of people at any stage of their lives, across a range of organisations and settings. They contribute to processes of organisational change through an awareness of local and national policies.

Platform 7: Coordinating Care			
7.1	understand and apply the principles of partnership, collaboration and interagency working across all relevant sectors		
	The Code (NMC 2018) 2.1, 8.1, 8.2, 8.3, 8.4, 8.5, 8.6, 9.3, 13.2, 13.3, 17.2 :EU clinical instruction Directives		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA demonstrate a foundation understanding of the principles of partnership and interdisciplinary working.	*Plan and coordinate the care of people in your PLE and take and make referrals to other agencies and professionals.*	*Plan and coordinate complex care and consider the influence local and national policy may have on care.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
7.2	understand health legislation and current health and social care policies, and the mechanisms involved in influencing policy development and change, differentiating where appropriate between the devolved legislatures of the United Kingdom		
	The Code (NMC 2018) 4.3, 18.2, 20.4 :EU clinical instruction Directives		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA demonstrate a foundation understanding of some of the health and social care policies that influence the PLE.	*In conversation with your PS/PA demonstrate an understanding of the key methodologies applied to influence policy.*	*Seek out opportunities to speak with others about health and social care legislation and apply the knowledge to your practice.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

7.3	understand the principles of health economics and their relevance to resource allocation in health and social care organisations and other agencies		
	The Code (NMC 2018) 6.1, 25.1 :EU clinical instruction Directives		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider some aspects of health economics and nursing's role in governance.	*In conversation with your PS/PA consider the allocation of resources for complex care and nursing interventions.*	*In conversation with your PS/PA consider the allocation of resources for complex care across disciplines and agencies.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
7.4	identify the implications of current health policy and future policy changes for nursing and other professions and understand the impact of policy changes on the delivery and coordination of care		
	The Code (NMC 2018) 6.2, 13.5, 17.3, 18.2, 20.4, 22.3 :EU clinical instruction Directives		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA identify some of the organisations that influence or develop policy.	*In conversation with your PS/PA identify and discuss the impact of policy on the specific PLE.*	*In conversation with your PS/PA and others consider how current and future health policy may influence the delivery and coordination of care.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

7.5	understand and recognise the need to respond to the challenges of providing safe, effective and person-centred nursing care for people who have co-morbidities and complex care needs		
	The Code (NMC 2018) 1.3, 2.4, 3.3, 4.3, 5.5, 6.1, 6.2, 7.1, 7.4, 8.3, 8.6, 10.2, 13.2, 13.3, 17.1, 18.3, 19.1, 25.1 :EU clinical instruction Directives		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider the needs of a person with co-morbidities and complex care needs. Share your understanding of person-centred care.	*In conversation with your PS/PA explain how you recognise and respond to the challenges of providing safe, effective person-centred care.*	*With your PS/PA critically reflect on your practice when providing safe, effective and person-centred nursing care for people who have co-morbidities and complex care needs.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
7.6	demonstrate an understanding of the complexities of providing mental, cognitive, behavioural and physical care services across a wide range of integrated care settings		
	The Code (NMC 2018) 4.1, 4.3, 8.1, 10.1, 17.3 :EU clinical instruction Directives		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider some of the complexities of mental, cognitive, behavioural and physical care.	*In conversation with your PS/PA share your understanding of the complexities of mental, cognitive, behavioural and physical care in the PLE.*	*In conversation with your PS/PA and in your practice, demonstrate your understanding of the complexities of mental, cognitive, behavioural and physical care in a range of PLEs.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

7.7	understand how to monitor and evaluate the quality of people's experience of complex care		
	The Code (NMC 2018) 2.1, 7.1 :EU clinical instruction Directives		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider how you can communicate with people to enable them to share their experience of care.	*In conversation with your PS/PA consider the range of approaches you can use to monitor and evaluate care.*	*Demonstrate your understanding of how you will combine the range of approaches you can use to monitor and evaluate care to ensure a positive experience.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
7.8	understand the principles and processes involved in supporting people and families with a range of care needs to maintain optimal independence and avoid unnecessary interventions and disruptions to their lives		
	The Code (NMC 2018) 2.1, 2.5, 3.1, 3.3, 4.1, 4.3, 5.5, 7.1, 7.2, 7.4, 8.3, 10.2, 20.5 :EU clinical instruction Directives		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider some of the principles and processes that may optimise a person's independence.	*In conversation with your PS/PA share your understanding of some of the principles and processes that enable people and families with a range of care needs to maintain optimal independence.*	*Demonstrate your understanding of how to optimise independence and avoid unnecessary interventions and disruptions to people's lives.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

7.9	facilitate equitable access to healthcare for people who are vulnerable or have a disability, demonstrate the ability to advocate on their behalf when required, and make necessary reasonable adjustments to the assessment, planning and delivery of their care		
	The Code (NMC 2018) 3.1, 3.3, 3.4, 4.3, 7.1, 7.2, 13.2 :EU clinical instruction Directives		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	Discuss with your PS/PA what equitable access to healthcare for people who are vulnerable or have a disability might be. Talk about legislation that might support you in this e.g. Mental Health (Care and Treatment) (Scotland) Act 2003.	*Demonstrate how you would facilitate access to healthcare for people by advocating for them and working with their beliefs and values.*	*Using your professional knowledge, demonstrate and document your practice of advocating for people and making reasonable adjustments to your assessment, planning and delivery of care.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
7.10	understand the principles and processes involved in planning and facilitating the safe discharge and transition of people between caseloads, settings and services		
	The Code (NMC 2018) 2.3, 3.3, 4.3, 5.5, 7.1, 7.4, 8.3, 10.3, 13.2, 25.1 :EU clinical instruction Directives		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider some of the principles and processes that may influence safe discharge or transition of care between settings and services.	*In conversation and practice with your PS/PA share your understanding of some of the principles and processes that enable safe discharge and transition by participating in related activities.*	*Using your professional knowledge of the principles and processes, participate in and document the activities the safe discharge and transition of people between caseloads, settings and services.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

7.11	demonstrate the ability to identify and manage risks and take proactive measures to improve the quality of care and services when needed		
	The Code (NMC 2018) 8.6, 10.2, 14.1, 14.3, 16.1, 19.1, 19.2, 19.4, 25.1 :EU clinical instruction Directives		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider how nurses may identify and manage risk.	*In conversation with your PS/PA identify risks in the PLE and consider how these may be managed.*	*With your PS/PA demonstrate how you use your professional knowledge to improve quality of care and services by responding to and managing risk.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
7.12	demonstrate an understanding of the processes involved in developing a basic business case for additional care funding by applying knowledge of finance, resources and safe staffing levels		
	The Code (NMC 2018) 6.1, 21.3, 25.1 :EU clinical instruction Directives		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider the processes involved in funding care by for example discussing the Health and Care (Staffing) (Scotland) Bill or Indicator of Relative Need processes.	*In conversation with your PS/PA consider how you would participate in processes to develop a business case for additional funding for care.*	*Using your professional knowledge participate in activities and conversations with colleagues who are developing a basic business case for additional care funding.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

7.13	demonstrate an understanding of the importance of exercising political awareness throughout their career, to maximise the influence and effect of registered nursing on quality of care, patient safety and cost effectiveness		
	The Code (NMC 2018) 1.5, 2.2, 20.8		
	PART 1 - Dependent	**PART 2 - Developing Independence**	**PART 3 - Independent**
	In conversation with your PS/PA consider the importance of exercising political awareness by engaging with literature from a variety of organisations, e.g. your university student union, the Nursing and Midwifery Council, The Royal College of Nursing or UNISON.	*Consider how you may participate in activities that may influence and effect the role of registered nursing on quality of care, patient safety and cost effectiveness. This may be by reviewing literature, attending conferences or taking part in surveys.*	*Participate in conversations and activities that enable you to demonstrate your understanding of being politically aware.*
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

SKILLS AND PROCEDURES (ANNEXES A & B)

There are communication and relationship management skills (listed first) and nursing procedures (listed second) that you must be able to safely demonstrate on entry to the NMC register. We will now refer to these as ‘skills’ and ‘procedures’. Equally, on entry to the NMC register, you must be able to undertake these skills and procedures safely and effectively in order to provide compassionate, evidence-based, person-centred nursing care. A holistic approach to the care of people is essential and all skills and procedures should be carried out in a way, which reflects cultural awareness and ensures that the safety, needs, priorities, expertise and preferences of people are always valued and taken into account.

On entry to the register, all newly registered nurses, in all fields of practice, must demonstrate the ability to provide nursing interventions and support for people of **all** ages, who require nursing procedures during the processes of assessment, diagnosis, care and treatment for mental, physical, cognitive and behavioural health challenges. Where a student has declared an additional support need it is essential that appropriate reasonable adjustments are made to ensure that all procedures can be undertaken safely.

As a student you will be able to observe and practise some of these skills and procedures through simulation. However, simulation should only be in *exceptional circumstances* and it is expected that you will be able to practise and safely demonstrate each of these skills and procedures during your practice learning experiences; you will be guided by your university regarding simulated skills as you progress through your programme. **You are therefore expected, by the point of registration (the end of your programme), to have reached the level of being able to safely demonstrate each of the skills and procedures at least once in either practice or in simulation.**

Communication and relationship management skills (NMC 2018a)			
1. At the point of registration, the registered nurse will be able to safely demonstrate underpinning communication skills for assessing, planning, providing and managing best practice, evidence based nursing care:			
Section	**Skill**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
1.1	Actively listens, recognises and responds to verbal and non-verbal cues		
1.2	Uses prompts and positive verbal and non-verbal reinforcement		
1.3	Uses appropriate non-verbal communication including touch, eye contact and personal space		
1.4	Makes appropriate use of open and closed questioning		
1.5	Uses caring conversation techniques		
1.6	Checks understanding and uses clarification techniques		
1.7	Demonstrates awareness of own unconscious bias in communication encounters		
1.8	Writes accurate, clear, legible records and documentation		
1.9	Confidently and clearly presents and shares verbal and written reports with individuals and groups		
1.10	Analyses and clearly records and shares digital information and data		
1.11	Provides clear verbal, digital or written information and instructions when delegating or handing over responsibility for care		

2. At the point of registration, the registered nurse will be able to safely demonstrate evidence based, best practice approaches to communication for supporting people of all ages, their families and carers in preventing ill health and in managing their care:			
Section	**Skill**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
2.1	Shares information and checks understanding about the causes, implications and treatment of a range of common health conditions including: • anxiety		
	• depression		
	• memory loss		
	• diabetes		
	• dementia		
	• respiratory disease		
	• cardiac disease		
	• neurological disease		
	• cancer		
	• skin problems		
	• immune deficiencies		
	• psychosis		
	• stroke		
	• arthritis		
2.2	Uses clear language and appropriate, written materials, making reasonable adjustments where appropriate in order to optimise people's understanding of what has caused their health condition and the implications of their care and treatment		

2. At the point of registration, the registered nurse will be able to safely demonstrate evidence based, best practice approaches to communication for supporting people of all ages, their families and carers in preventing ill health and in managing their care:			
Section	**Skill**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
2.3	Recognises and accommodates sensory impairments during all communications		
2.4	Supports and manages the use of personal aids		
2.5	Identifies the need for, and manages a range of alternative communication techniques		
2.6	Uses repetition and positive reinforcement strategies		
2.7	Assesses motivation and capacity for behaviour change and clearly explains cause and effect relationships related to common health risk behaviours including: • smoking		
	• obesity		
	• sexual practice		
	• alcohol		
	• substance use		
2.8	Provides information and explanation to people, families and carers, and responds to questions about their treatment and care and possible ways of preventing ill health to enhance understanding		
2.9	Engages in difficult conversations, including breaking bad news and supports people who are feeling emotionally or physically vulnerable or in distress, conveying compassion and sensitivity		

3. At the point of registration, the registered nurse will be able to safely demonstrate evidence based, best practice communication skills and approaches for providing therapeutic interventions			
Section	**Skill**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
3.1	Motivational interview techniques		
3.2	Solution focused therapies		
3.3	Reminiscence therapies		
3.4	Talking therapies		
3.5	De-escalation strategies and techniques		
3.6	Cognitive behavioural therapy techniques		
3.7	Play therapy		
3.8	Distraction and diversion strategies		
3.9	Positive behaviour support approaches		

4. At the point of registration, the registered nurse will be able to safely demonstrate evidence-based, best practice communication skills and approaches for working with people in professional teams			
Section	**Skill**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
4.1	**Demonstrate effective supervision, teaching and performance appraisal through the use of:**		
	4.1.1 Clear instructions and explanations when supervising, teaching or appraising others		
	4.1.2 Clear instructions and check understanding when delegating care responsibilities to others		
	4.1.3 Unambiguous, constructive feedback about strengths and weaknesses and potential for improvement		
	4.1.4 Encouragement to colleagues that helps them to reflect on their practice		
	4.1.5 Unambiguous records of performance		
4.2	**Demonstrate effective personal and team management through the use of:**		
	4.2.1 Strengths based approaches to developing teams and managing change		
	4.2.2 Active listening when dealing with team members' concerns and anxieties		
	4.2.3 A calm presence when dealing with conflict		
	4.2.4 Appropriate and effective confrontation strategies		
	4.2.5 De-escalation strategies and techniques when dealing with conflict		
	4.2.6 Effective co-ordination and navigation skills through:		
	4.2.6.1 Appropriate negotiation strategies		
	4.2.6.2 Appropriate escalation procedures		
	4.2.6.3 Appropriate approaches to advocacy		

Nursing Procedures (NMC 2018a)			
Part 1: At the point of registration, the student nurse will be able to safely demonstrate procedures for assessing people's needs for person-centred care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
1. Use evidence based, best practice approaches to take a history, observe, recognise and accurately assess people of all ages:			
1.1	**Mental Health and wellbeing status**		
	1.1.1 Signs of mental and emotional distress or vulnerability		
	1.1.2 Cognitive health status and wellbeing		
	1.1.3 Signs of cognitive distress and impairment		
	1.1.4 Behavioural distress based needs		
	1.1.5 Signs of mental and emotional distress including: • agitation		
	• aggression		
	• challenging behaviour		
	1.1.6 Signs of self-harm and/or suicidal ideation		
1.2	**Physical health and wellbeing**		
	1.2.1 Symptoms and signs of physical ill health		
	1.2.2 Symptoms and signs of physical distress		
	1.2.3 Symptoms and signs of • deterioration		
	• sepsis		

Part 1: At the point of registration, the student nurse will be able to safely demonstrate procedures for assessing people's needs for person-centred care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
2. Use evidence based, best practice approaches to undertake the following procedures:			
2.1	Take, record and interpret vital signs manually and via technological devices		
2.2	Undertake: • venepuncture		
	• cannulation		
	• blood sampling		
	• interpreting normal and common abnormal blood profiles and venous blood gases		
2.3	Set up and manage routine electrocardiogram (ECG) investigations		
	• interpret normal and commonly encountered abnormal traces		
2.4	Manage and monitor blood component transfusions		
2.5	Manage and interpret: • cardiac monitors		
	• infusion pumps		
	• blood glucose monitors		
	• other monitoring devices		
2.6	Accurately measure weight and height, calculate body mass index		
	• recognise healthy ranges and clinically significant low/high readings		

Part 1: At the point of registration, the student nurse will be able to safely demonstrate procedures for assessing people's needs for person-centred care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
2.cont/ Use evidence based, best practice approaches to undertake the following procedures:			
2.7	Undertake a whole body systems assessment including: • respiratory		
	• circulatory		
	• neurological		
	• musculoskeletal		
	• cardiovascular		
	• skin status		
2.8	Undertake chest auscultation and interpret findings		
2.9	Collect and observe specimens, undertaking routine analysis and interpreting findings: • sputum		
	• urine		
	• stool		
	• vomit		
2.10	Measure and interpret blood glucose levels		
2.11	Recognise and respond to signs of all forms of abuse		

Part 1: At the point of registration, the student nurse will be able to safely demonstrate procedures for assessing people's needs for person-centred care			
Section	**Procedure** (may be appropriate to attain at a higher level for the different fields)	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
2.cont/ Use evidence based, best practice approaches to undertake the following procedures:			
2.12	Undertake, respond to and interpret neurological observations and assessments		
2.13	Identify and respond to signs of: • deterioration		
	• sepsis		
2.14	Administer basic mental health first aid		
2.15	Administer basic physical first aid		
2.16	Recognise and manage, providing appropriate basic life support • seizures		
	• choking		
	• anaphylaxis		
2.17	Recognise and respond to challenging behaviour, providing appropriate safe holding and restraint		

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
3. Use evidence based, best practice approaches for meeting the needs for care and support with rest, sleep, comfort and the maintenance of dignity, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions			
3.1	Observe and assess comfort and pain levels and rest and sleep patterns		
3.2	Use appropriate bed-making techniques including those required for people who are unconscious or who have limited mobility		
3.3	Use appropriate positioning and pressure-relieving techniques		
3.4	Take appropriate action to ensure privacy and dignity at all times		
3.5	Take appropriate action to reduce or minimise pain or discomfort		
3.6	Take appropriate action to reduce fatigue, minimise insomnia, support improved rest, and sleep hygiene		

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
4. Use evidence based, best practice approaches for meeting the needs for care and support with hygiene and the maintenance of skin integrity, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.			
4.1	Observe, assess and optimise skin and hygiene status and determine the need for support and intervention		
4.2	Use contemporary approaches to the assessment of skin integrity and use appropriate products to prevent or manage skin breakdown		
4.3	Assess needs for and provide appropriate assistance with washing, bathing, shaving and dressing		
4.4	Identify and manage skin irritations and rashes		
4.5	Assess needs for and provide appropriate care and decide when an onward referral is needed for: • oral care		
	• dental care		
	• eye care		
	• nail care		

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
4. cont/ Use evidence based, best practice approaches for meeting the needs for care and support with hygiene and the maintenance of skin integrity, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.			
4.6	Use aseptic techniques when undertaking wound care including: • dressings		
	• pressure bandaging		
	• suture removal		
	• vacuum closures		
4.7	Use aseptic techniques when managing wound and drainage processes		
4.8	Assess, respond and effectively manage • pyrexia		
	• hypothermia		

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
5. Use evidence based, best practice approaches for meeting the needs for care and support with nutrition and hydration, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.			
5.1	Observe, assess and optimise: • nutrition status and determine the need for intervention and support		
	• hydration status and determine the need for intervention and support		
5.2	Use contemporary nutritional assessment tools		
5.3	Assist with feeding and drinking and use appropriate feeding and drinking aids		
5.4	Record fluid intake and output and identify, respond to and manage dehydration or fluid retention		
5.5	Identify, respond to and manage nausea and vomiting		
5.6	Insert oral/nasal/gastric tubes		
	manage oral/nasal/gastric tubes		
	remove oral/nasal/gastric tubes		

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
5. cont/ Use evidence based, best practice approaches for meeting the needs for care and support with nutrition and hydration, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.			
5.7	Manage artificial nutrition and hydration using: • oral		
	• enteral		
	• parenteral routes		
5.8	Manage the administration of IV fluids		
5.9	Manage fluid and nutritional infusion pumps and devices.		

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
6. Use evidence based, best practice approaches for meeting the needs for care and support with bladder and bowel health, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.			
6.1	Observe and assess level of urinary and bowel continence to determine the need for support and intervention assisting with toileting, maintaining dignity and privacy and managing the use of appropriate aids		
6.2	Select and use appropriate continence products; insert, manage and remove catheters for all genders; and assist with self-catheterisation when required		
6.3	Manage bladder drainage		
6.4	Assess bladder and bowel patterns to identify and respond to constipation, diarrhoea and urinary and faecal retention		
6.5	Administer enemas and suppositories and undertake rectal examination and manual evacuation when appropriate		
6.6	Undertake stoma care identifying and using appropriate products and approaches		

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
7. Use evidence based, best practice approaches for meeting the needs for care and support with mobility and safety, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.			
7.1	Observe and use evidence-based risk assessment tools to determine need for support and intervention to optimise mobility and safety, and to identify and manage risk of falls using best practice risk assessment approaches		
7.2	Use a range of contemporary moving and handling techniques and mobility aids		
7.3	Use appropriate moving and handling equipment to support people with impaired mobility		
7.4	Use appropriate safety techniques and devices		

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
8. Use evidence based, best practice approaches for meeting the needs for respiratory care and support, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.			
8.1	Observe and assess the need for intervention and respond to restlessness, agitation and breathlessness using appropriate interventions		
8.2	Manage the administration of oxygen using a range of routes and best practice approaches		
8.3	Take and interpret peak flow and oximetry measurements		
8.4	Use appropriate nasal and oral suctioning techniques		
8.5	Manage inhalation, humidifier and nebuliser devices		
8.6	Manage airway and respiratory processes and equipment		

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
9. Use evidence based, best practice approaches for meeting the needs for care and support with the prevention and management of infection, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.			
9.1	Observe, assess and respond rapidly to potential infection risks using best practice guidelines		
9.2	Use standard precautions protocols		
9.3	Use effective aseptic, non-touch techniques		
9.4	Use appropriate personal protection equipment		
9.5	Implement isolation procedures		
9.6	Use evidence-based hand hygiene techniques		
9.7	Safely decontaminate equipment and environment		
9.8	Safely use and dispose of waste, laundry and sharps		
9.9	Safely assess and manage invasive medical devices and lines		

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
10. Use evidence based, best practice approaches for meeting the needs for care and support at the end of life, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.			
10.1	Observe, and assess the need for intervention for people, families and carers, identify, assess and respond appropriately to uncontrolled symptoms and signs of distress including: • pain		
	• nausea		
	• thirst		
	• constipation		
	• restlessness		
	• agitation		
	• anxiety		
	• depression		
10.2	Manage and monitor effectiveness of symptom relief medication, infusion pumps and other devices		
10.3	Assess and review preferences and care priorities of the dying person and their family and carers		

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
10.cont/ Use evidence based, best practice approaches for meeting the needs for care and support at the end of life, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.			
10.4	Understand and apply: • organ and tissue donation protocols		
	• advanced planning decisions		
	• living wills and health and lasting powers of attorney for health		
10.5	Understand and apply DNACPR (do not attempt cardiopulmonary resuscitation) decisions and		
	• verification of expected death		
10.6	Provide care for the deceased person and the bereaved respecting cultural requirements and protocols		

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
11. Procedural competencies required for best practice, evidence-based medicines administration and optimisation.			
11.1	Carry out initial and continued assessments of people receiving care and their ability to self-administer their own medications		
11.2	Recognise the various procedural routes under which medicines can be prescribed, supplied, dispensed and administered; and the laws, policies, regulations and guidance that underpin them		
11.3	Use the principles of safe remote prescribing and directions to administer medicines		
11.4	Undertake accurate drug calculations for a range of medications		
11.5	Undertake accurate checks, including transcription and titration, of any direction to supply or administer a medicinal product		
11.6	Exercise professional accountability in ensuring the safe administration of medicines to those receiving care		
11.7	Administer injections using the following routes and manage injection equipment: • intramuscular		
	• subcutaneous		
	• intradermal		
	• intravenous		
11.8	Administer medications using a range of routes		

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care			
Section	**Procedure**	**Demonstrated safely in practice whilst acknowledging own limitations** ***Please date and sign***	**Demonstrated safely through simulation whilst acknowledging own limitations** ***Please date and sign***
11.cont/ Procedural competencies required for best practice, evidence-based medicines administration and optimisation.			
11.9	Administer and monitor medications using vascular access devices and enteral equipment		
11.10	Recognise and respond to adverse or abnormal reactions to medications		
11.11	Undertake safe storage, transportation and disposal of medicinal products		

SECTION 3: POLICIES, GUIDELINES, PROTOCOLS

3.0 Raising and escalating a concern guidance

3.1 Development Support Plans

3.2 Involvement of pre-registration adult nursing & midwifery students in medicine administration – a guide for assessors

3.3 Risk assessments

3.4 Collations sheets (university use only):

3.4.1 Simulation and clinical skills

3.4.2 Safemedicate

3.0 Raising a concern in practice

What is whistleblowing and what is a concern?

Whistleblowing is a term used when an individual(s) raises a concern(s) that relate to disclosing actions and behaviours that may cause harm. Disclosures and reports are made in relation to public safety and interest (NHS Lothian, 2016) This can include issues that have happened, are currently happening, or are likely to happen and may include (but are not limited to);

- Poor patient care
- Poor patient safety
- Unsafe working environment
- Fraud
- Falsification of information
- Breach of legal obligations
- Abuse

The person blowing the whistle is usually not directly or personally affected by the danger or illegality (Public Concern at Work, 2014; Scottish Government, 2011). Consequently, the whistle-blower rarely has a personal interest in the outcome of the investigation with their concern.

As a student nurse or midwife, you may need to raise a concern that directly relates to and may have a negative impact on your own learning and experiences. This may include;

- Poor learning cultures
- Poor staff attitudes towards learners
- Lack of opportunity
- Lack of appropriate support and supervision

If you are raising a concern regarding your personal learning, in these circumstances, you should follow your university or employers' raising a concern in practice procedure. In some situations, it may be difficult to make the distinction between a personal concern and whistleblowing and if in doubt advice should be sought from an appropriate source such as your University (e.g. Personal Tutor or Programme Leader).

Your responsibilities as a student of the School of Health and Social Care

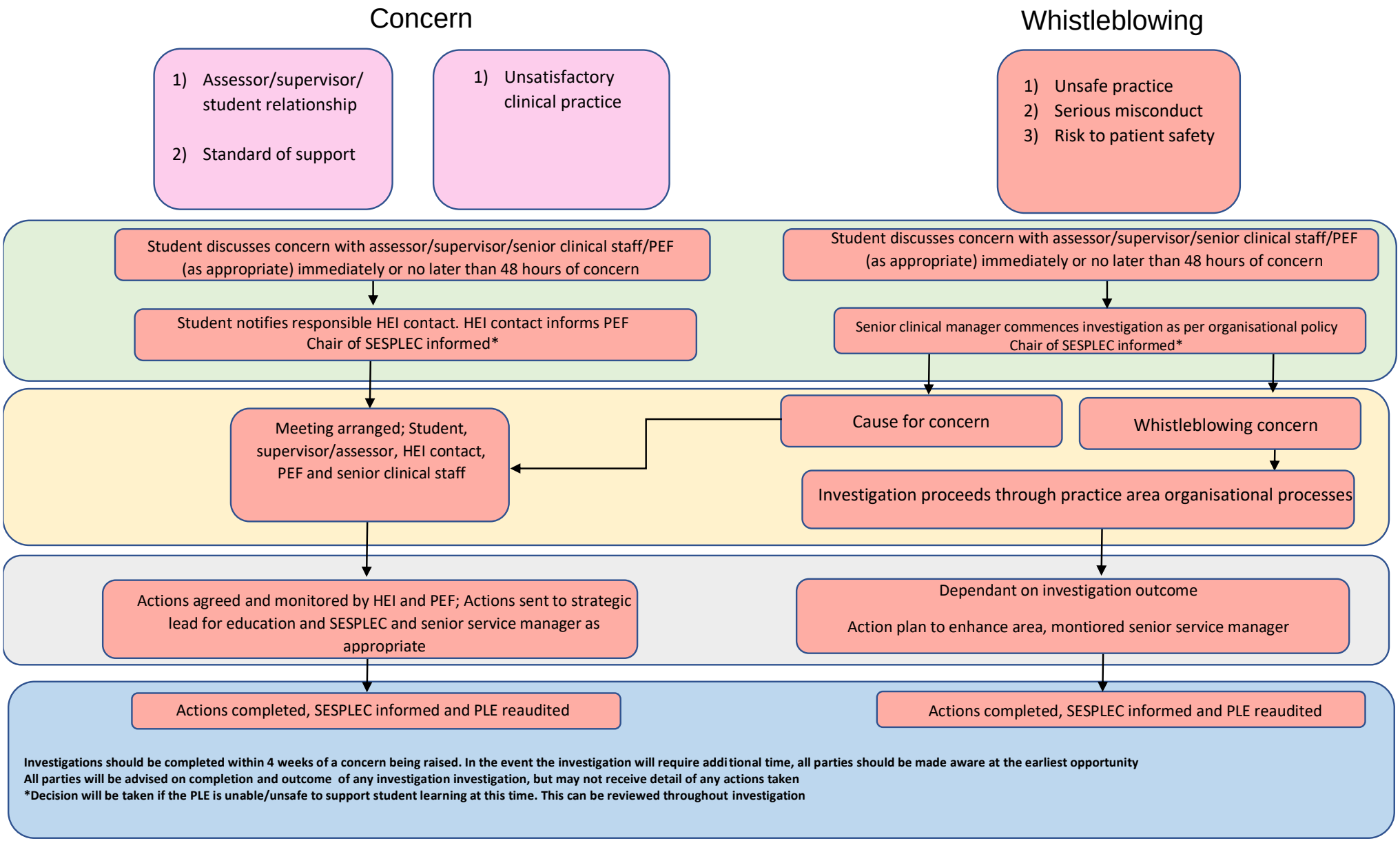
The University operates an open, 'no blame' culture in which students and staff can safely raise concerns about malpractice, risks or issues which may cause harm to patients, clients and carers. In the pursuit of service excellence and patient care. The University encourages all staff and students to seek continuous improvement in the way in which they carry out their day to day responsibilities.

As a student of health and social care you have a responsibility to make the safeguarding and personal interests of patients, clients and carers a priority and take action, where required, to protect them if you consider they may be at risk (NMC, 2015). Regardless of the context of care delivery it is important that you are aware of the mechanism to report concerns appropriately so that at all times you are practicing within The Code: Professional Standards of Practice and Behaviour for Nurses and Midwives (NMC, 2015).

As a student of healthcare, you have a duty to ensure that any concerns in practice are identified and raised at the earliest opportunity (NMC, 2015). You also have the right to have these concerns listened to and acted upon appropriately. Should you need to raise any concerns about your practice learning experiences, support will be made available to you through the HEI.

Further information on raising concerns in practice for student nurses and midwives can be found here. As a student nurse or midwife, you have a responsibility to familiarise yourself with local policy and procedure, this should include understanding the role of whistleblowing champions such as Speak Up Ambassadors.

Raising a concern in practice – process flow chart



Raising a concern in practice - Reporting Form

Referral Form to be completed by individual reporting a concern under the Public Interest Disclosure Act (1998).

Part 1 - The student reporting client wellbeing/safety or risk of harm should complete Part 1 and then forward to the practice supervisor/Senior Clinical staff/PEF and their Academic assessor/PDT. This should then be made available to strategic lead for practice learning).

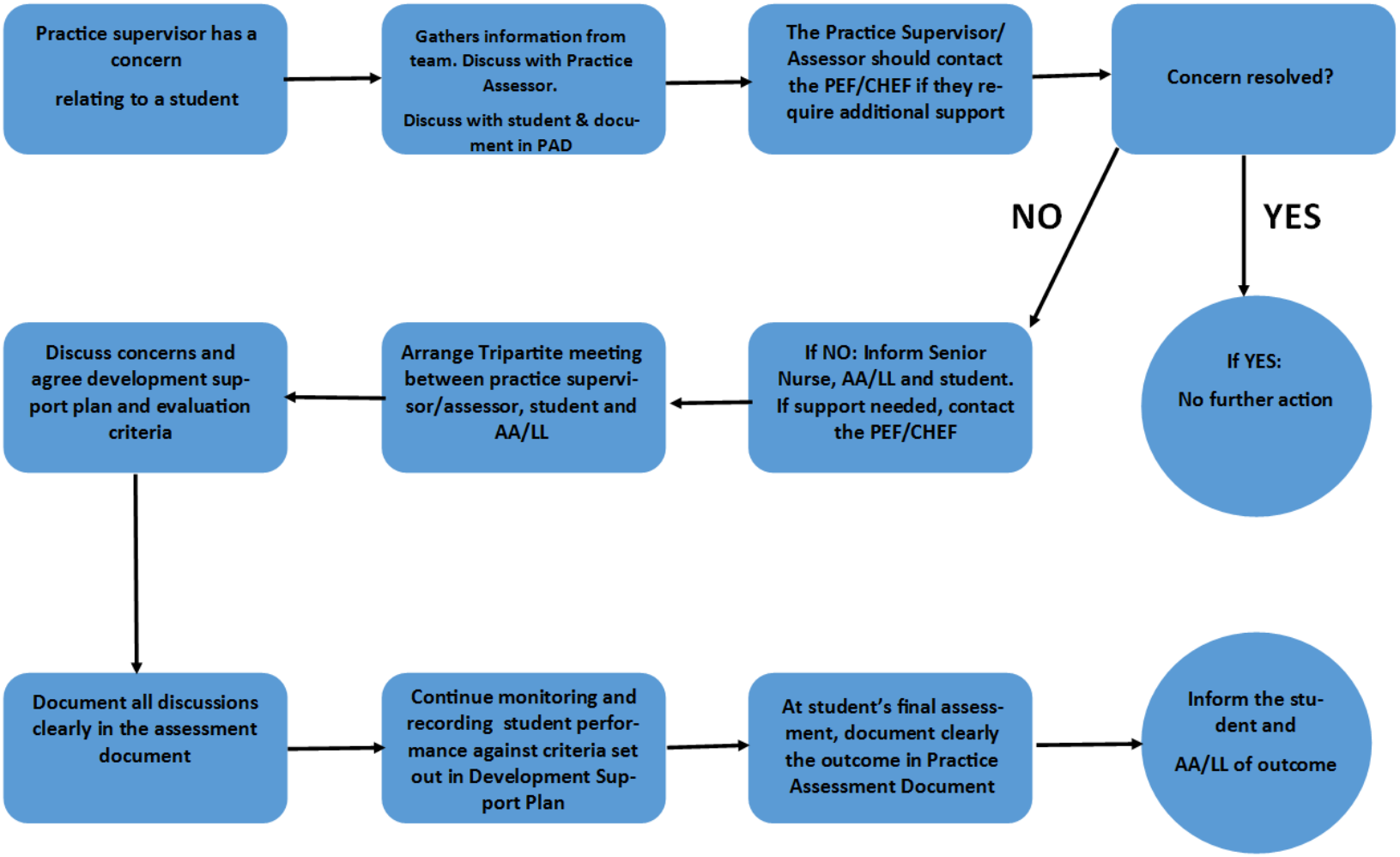
Part 1. Details of the Concern	**Area**	**Date of incident**	**Date of report**
*Please explain what you saw and/or heard including dates, times and any witnesses (names). Please provide as many **factual** details as you can*			
Student Name:	**Date:**		

Contact Number:	**Time:**	
Part 2. Investigation of Concern – University Representative		
	Name	**Date**
Concern received by (University AA/PDT)		
Action		
Resolved	Yes	No
Concern passed for investigation (NHS/Non NHS)		
Part 3. Investigation – Chair of South East Scotland Practice Learning and Education Committee		
Action		
Part 4. **Referred to Senior Academic** **(E.g. Dean of School/Subject lead) By Chair of SESPLEC**	Name	Date
Part 5. Feedback to student	Name	Date

3.1 Development Support Plan

During your practice learning experience, you may require more support to achieve particular learning outcomes or professional standards. In order to ensure a supportive framework for this we provide you and your practice supervisor & assessor a development plan and feedback document below. This should be used to record any areas of concern and your development progress in relation to this. These documents must be kept as part of your PAD to ensure consistency of assessment across practice areas.

HEI SPECIFIC FLOWCHART FOR RAISING PROFICIENCIES CONCERNS



KEY:
AA = Academic Assessor; LL = Liaison Lecturer; PEF = Practice Education Facilitator; CHEF = Care Home Practice Education **Example**

Development Support Plan:

Development Need Identified: Student demonstrates a very limited theory, knowledge and skills in relation to medicine administration for current stage of pre reg nursing programme					
Specific areas to be addressed	**Related Platform number /proficiency**	**Participation in Care** **Level**	**Learning Resources/actions**	**Evidence of achievement**	**Achievement/** **Review date**

DEVELOPMENT SUPPORT PLAN FEEDBACK

DATE	PROGRESS	SIGNATURE: Student & P. Supervisor & P. Assessor

Example of Development Support Plan:

Development Need Identified: Student demonstrates a very limited theory, knowledge and skills in relation to medicine administration for current stage of pre reg nursing programme					
Specific areas to be addressed	**Related Platform number /proficiency**	**Participation in Care** **Level**	**Learning Resources/actions**	**Evidence of achievement**	**Achievement/** **Review date**
Student is required to enhance their skills and knowledge to the required level in relation to medicine administration	Platform 1.15/1.20 Platform 3.3 Platform 4 .5/ 4.14/4.15	Developing independence	• *Revist The Code (NMC)* • *Review PAD/procedures* • *Read the NHS policy of medication management and administration*	Explain via discussion your understanding of the code in relation to the areas of development Through discussion explain the policy and the importance for this policy	Complete action and Review by 1/1/2020 Complete action and Review by 1/1/2020
		Developing independence	• *With your supervisor/assessor participate in medication administrations* • *Under supervision safely administer and record the prescribe medication for 5 consecutive drug administrations* • *Identify 5 common drugs each week. understanding what they are used for, side effects and contraindications*	Through participation/observation /discussion demonstrate proficiency Discussion. Q&A sessions. Evidence within medicine management workbook	Complete action and Review by 7/1/2020 on-going/complete for end of placement

DEVELOPMENT SUPPORT PLAN FEEDBACK ***with example of feedback***

DATE	PROGRESS	SIGNATURE: Student & P. Supervisor P. Assessor
3/1/2020	*Development plan was agreed on the 1/1/2020.* *Student nurse has accessed and review the NMC code and through discussion with myself, the student was able to highlight the 4 pillars and identify the keys areas that are required for a registrant nurse in relation to medicine management and administration. This learning action has been achieved.* *The student is still reviewing the NHS policy, is able to provide limited information so this learning action will be reviewed at the next review meeting 7/1/2020.* *Participation/shadowing of medicine administration is ongoing .The student is able to explain the process and safety checks required. This learning action is still on going.*	

3.3 Risk assessments

Student Nurses as young workers

Definition: The term **'Young Worker'** means a worker who has attained the age of 16 but not the age of 18. A number of nursing students particularly at the beginning of their programme will be aged 17.

Background: Young workers are afforded all the protection of general health and safety law – the right to information, training, supervision and to a safe and healthy workplace. There are however specific restrictions that apply to workers aged under 18 years.

Restrictions The Management of Health and Safety at Work Regulations 1999, regulation 19,(5) requires that persons under 18 years of age should not be employed to undertake work that is, beyond their physical or psychological capacity, exposes them to radiation or harmful substances, involves a risk of accidents they are unlikely to recognise because of a lack of training or experience or involves a risk to their health from extreme heat, noise or vibration.

Hours The Working Time (Amendment) Regulations 2002 limit the hours per week and per day a child or young person (under 18) can work, and set out minimum rest periods. Workers aged 16 and 17 are entitled to 12 consecutive hours of rest in any 24 hour period. They are also entitled to a rest period of no less than 48 hours in each seven day period, compared to 24 hours for an adult worker. The UK opt-out from the Working Time Regulations does not apply to under-18s. Young workers are never allowed to work more than 40 hours a week and must have a 30 minute break away from their work if the work exceeds 4.5 hours.

Night Shift Due to the restrictions young workers should not work night shifts within hospital and health care settings.

Risk Assessment Young workers

In order to comply with the Management of Health and Safety at Work Regulations 1999, a specific young worker risk assessment must be completed.

Student Nurses who are pregnant or new mothers

During pregnancy, nursing students must be particularly aware of potential health and safety hazards in the workplace as they face many risks to their health and the health of their unborn child.

For Pregnancy or Breastfeeding

Cytotoxic medicines. These are highly potent materials; some might have a more serious effect upon the foetus or the breastfed infant. Pregnant or breastfeeding students should not be involved in cleaning spillages or dealing with extravasation and should only be involved in administration if the risk of splashes has been virtually eliminated.

Solvents. High exposures to solvents produce a greater risk to the foetus or infant than to adults. There is little such work in the health service. Seek advice from health and safety if you have pregnant or breastfeeding students doing prolonged work with solvents, e.g. prosthetics.

Ionising Radiation. The foetus is more susceptible to ionising radiation than are adults. Staff routinely exposed to x-rays or to radiation from radioactive substances are subject to exposure monitoring. The results of this monitoring show that for most staff exposures are much less than the statutory limits that apply during pregnancy. Nevertheless, further precautions may be advised to reduce still further the risk of accidental exposure. Therefore, exposure of pregnant women should be as low as reasonably practicable, and certainly below the statutory dose limit for pregnant women. Nursing mothers should not be allocated a practice learning experience where the risk of contamination from ionising radiation is high. Working conditions should also ensure that pregnant women do not receive accidental exposures to radioactive contamination (IRR 1999). Students who are pregnant, may wish to make sure they leave the controlled area while X-rays are being taken.

Mercury. Mercury is toxic to the central nervous system; the CNS of the foetus (and infant) is more vulnerable than that of adults, especially during the first trimester. The exposure to mercury that may arise following the spillage of mercury in a thermometer or sphygmomanometer is negligible if the guidelines are followed. If there is a large or awkward spillage from a sphygmomanometer, the student should be discouraged from cleaning this and should get someone who is not pregnant to follow the clean-up procedure.

Infection Risks. Some infections (Rubella, Listeria, Toxoplasmosis, Hepatitis, HIV, VZV and CMV) are more serious for pregnant or breastfeeding students. If any of these are known to be present among staff or patients, or are often present in the patient group, consult the Occupational Health Service for further advice or consider alternative practice learning allocation.

For Pregnancy only

Manual Handling. The ability to handle loads is not diminished by pregnancy except in two respects. 1) as the size of the abdomen increases, the load is displaced further from the spine so the maximum load the person can safely handle diminishes. If

heavy work is expected, consult the manual handling adviser

2) In the final weeks of pregnancy, the ligaments become looser so the risk of injury from manual work is increased. Often this would occur during the maternity leave but students who are keen to work as long as possible may need to be excluded from heavy work during the later stages. Consult the manual handling department if in doubt.

Inhaled antibiotics and Nitric Oxide. Pentamidine, ribavirin, and perhaps nitric oxide, are suspected of having a greater risk for pregnant staff/ students than for others. Local guidelines should be in place for students allocated to practice areas where exposure to these substances occurs. Pregnant staff/ students should be excluded from routine administration except for short term relief during lunch breaks etc.

Violence. The foetus is physically well protected but is nevertheless vulnerable to kicks and punches. Pregnant students should be excluded from care of patients who are likely to lash out violently and from teams who are called upon to restrain violent patients.

Night work and long hours. The Management of Health and Safety at Work regulations require employers to adapt the hours of pregnant staff (including avoiding night work altogether) if their GP or Occupational Health Service inform them in writing that this is necessary. It is reasonable to suggest that the same opportunities be afforded to students on practice. Any student who is pregnant, that appears to be experiencing difficulties, should be encouraged to consult their GP to identify whether there is a requirement to adapt their pattern of work.

Anaesthetics. Some years ago there was concern that the risk of low birth weight or spontaneous abortion was increased with exposure to nitrous oxide or the volatile anaesthetic agents. These fears have been shown to be invalid (at least so far) for the anaesthetics exposures experienced nowadays. There is no reason to exclude pregnant or breastfeeding staff from any theatre work or recovery room work unless there are doubts about the efficacy of the ventilation. Seek advice from health and safety if in doubt.

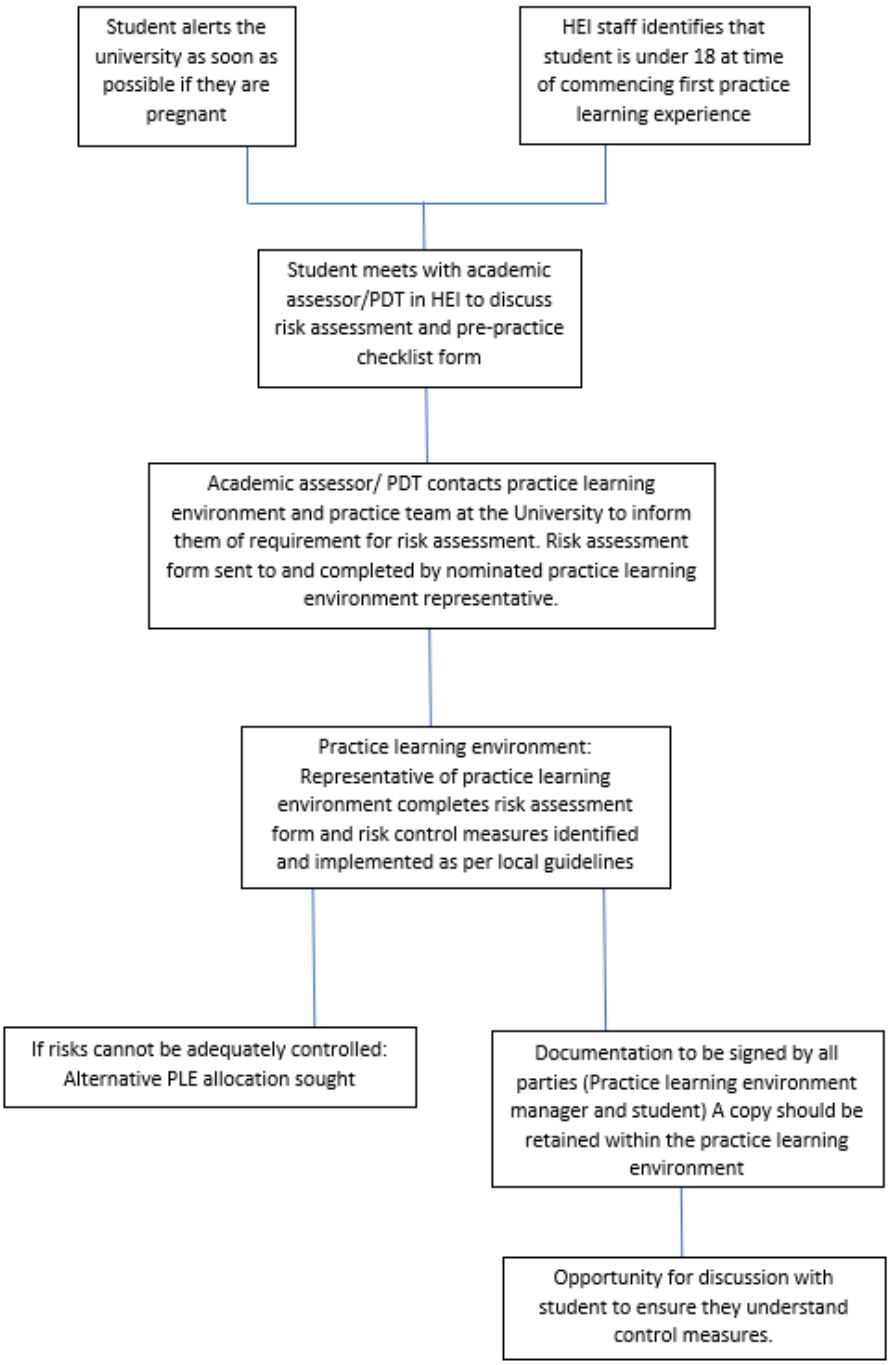
MRI.

1) Main static magnetic field. There is no evidence that the fields typically used in clinical MRI (about 1.5Tesla) will damage the developing foetus.
2) Time varying field – gradients. There is some equivocal data to suggest an effect on animal embryos from prolonged exposures. Significant exposure would only occur if the staff member was standing right next to the scanner bore (the 'doughnut' shaped part) for a substantial period, such as in an interventional procedure. 3) Radiofrequency fields. These are more a concern for pregnant patients being scanned due to their heating effect. Outside the scanner bore effects are negligible. 4) Acoustic

noise. The scanner produces a loud banging during operation which may exceed 100 decibels. It is thought that the foetus is sensitive to noise.

It is recommended that pregnant staff should not: enter the scan room during the first trimester; remain in the scan room during a scan at any time in their pregnancy.

Flow chart indicating the responsibilities of individuals at various stages of the risk assessment process:



Risk Assessments

Young Persons Pre- practice learning Checklist

Department: Practice learning environment Title:

Name of Young Person: Commencement Date:

Date of Birth:

The following criteria must be achieved prior to a young person commencing practice:

Person nominated to be in overall charge of the young person while on practice (clinician)?

Has a risk assessment been carried out? **Yes / No**

Have any additional control measures required been identified? **Yes / No**

Has the risk assessment taken account of special Health and Safety needs which the young person may have as a result of e.g. any physical or learning disability or health issues e.g. allergies?

Yes / No/ Not Applicable

Have arrangements been made for induction/orientation to the unit? **Yes/ No**

Have suitable arrangements been made for assessment of the young person? **Yes/ No**

Have necessary arrangements for personal safety and freedom from sexual harassment and bullying been considered? **Yes/ No**

Have you completed and returned the young worker risk assessment form to the University, keeping a copy for your records? **Yes/ No**

HEI staff member:

Completed by (name): Date:

Signature Designation:

Student:

Completed by Name: Date:

Signature

I agree that my details are shared with the relevant PLE manager and assessor for the purposes of completing a risk assessment prior to practice

Young Persons Risk Assessment Form

The guidance requires you to identify the hazards in your workplace and determine whether your existing risk control measures are adequate for a young worker. Generally if these meet the criteria for an adult worker (i.e. 18 or over) these will meet the criteria for a young worker but there may be a small range of circumstances where, because of their age, the risk may be increased and/or the control measures require to be adapted.

Name **Date of Birth**

Work Location **Start Date:**

Date of Assessment:

Does the work involve:

Blood and / or body fluids?	Yes / no
Hazardous substances?	Yes / no
Ionizing radiation?	Yes / no
Dealing with refuse / waste?	Yes / no
Excessive Noise?	Yes / no
Gases and gas cylinders?	Yes / no
Biological agents?	Yes / no
Manual handling?	Yes / no
Computer use for periods in excess of 1 hour at a time?	Yes / no
Possible / known exposure to abusive or violent situations?	Yes / no

Other situations where youth / lack of experience could present a risk? Please state:

Control measures to reduce the risk of injury in addition to existing workplace control measures required to meet the needs of young workers including details of any activities they will not be asked to undertake

Assessment completed by:

Clinical Manager I agree to support this student according to local policies and procedures	
Completed by Name: Signature	Date: Designation:
HEI staff member	
Completed by Name: Signature	Date: Designation:
Student nurse/midwife	
•I confirm that I have reviewed the risk assessment with the HEI staff and Clinical manager •I confirm that I have reviewed the potential risks as outlined in the risk assessment •I confirm that I am aware of measures to control risks and will work within recommendations while on practice Completed by Name: Signature	Date:

Pregnancy Pre- practice learning Checklist

Department: Practice learning environment Title:

Name of Student: Commencement Date:

The following criteria must be achieved prior to a student who is pregnant commencing practice:

Person nominated to be in overall charge of the student while on practice(clinician)?

Has a risk assessment been carried out? **Yes/ No**

Have any additional control measures required been identified? **Yes/ No**

Has the risk assessment taken account of special Health and Safety needs which the young person may have as a result of e.g. any physical or learning disability or health issues e.g. allergies? **Yes/ No/ Not Applicable**

Have you completed and returned the student who is pregnant risk assessment form to the University, keeping a copy for your records? **Yes/ No**

HEI staff member

Completed by Name: Date:

Signature Designation:

Student:

Completed by Name Date:

Signature

I agree that my details can be shared with the relevant PLE manager and assessor for the purposes of completing a risk assessment prior to practice learning experience

New and Expectant Mothers Risk Assessment form

Name of Student: Date of Birth:

Practice learning environment: Commencement Date:

Details: e.g. Due date

The HEI placing a student who is also an expectant Mother in a practice setting is required to undertake a risk assessment to ensure the safety and wellbeing of the student. The Health and Safety Executive (HES 2010) identify a list of potential risks to the student who is an expectant Mother which should be considered and addressed: Does the work involve:

Lifting/ carrying of heavy loads	**Yes/ No**
Standing or sitting for long lengths of time	**Yes/ No**
Exposure to infectious diseases	**Yes/ No**
Exposure to Lead	**Yes/ No**
Exposure to Mercury	**Yes/ No**
Exposure to Cytotoxic medication	**Yes/ No**
Exposure to MRI or ionising radiation:	**Yes/ No**
Exposure TO SOLVENTS	**Yes/ No**
Work RELATED STRESS	**Yes/ No**
Workstations	**Yes/ No**
Other people's smoking in the workplace	**Yes/ No**
Threat of violence in the workplace	**Yes/ No**
Long working hours	**Yes/ No**
Excessively noisy workplaces	**Yes/ No**

Control measures undertaken to reduce the risk to the expectant mother in addition to the existing workplace control measures required:

Assessment completed by:

Clinical Manager I agree to support this student according to local NHS Lothian / Borders policies and procedures	
Completed by Name:	Date:
Signature	Designation:
HEI staff member	
Completed by Name:	Date:
Signature	Designation:

3.4 Collation sheets

3.4.1 Simulation and Clinical Skills:

Programme part one

Nursing Procedure	**Date Achieved**
Basic Life Support	
Children's Basic Life Support (CH&LD only)	
Choking	
Manual Handling	
Prevention and Management of Violence and Aggression	
Fire Safety - Learnpro: • What is Fire? • Firefighting Equipment • Fire Procedure NHS Lothian fire safety video	
Handwashing	
SIPCEP	
Personal Protective Equipment	

Programme part two

Nursing Procedure	**Date Achieved**
Basic Life Support	
Children's Basic Life Support (CH&LD only)	
Manual Handling	
Fire Safety - Learnpro: • What is Fire? • Firefighting Equipment • Fire Procedure NHS Lothian fire safety video	
Catheterisation	
Safe Blood Transfusion	
Automated external defibrillator	
Seizure management	

<u>Programme part three</u>

Nursing Procedure	Date Achieved
Basic Life Support/simulation	
Children's Basic Life Support (CH&LD only)	
Manual Handling	
Fire Safety - Learnpro: • What is Fire? • Firefighting Equipment • Fire Procedure NHS Lothian fire safety video	
Venepuncture and cannulation	
ECG	
Intravenous infusion devices	
Anaphylaxis	

3.4.2 Safemedicate

Numeracy is a requisite skill for safe and effective practice as a registered nurse (Nursing and Midwifery Council (NMC), 2018a).

For example, the ability to understand numerical trends, to calculate dosages of prescribed medicines and intravenous fluid infusion rates is essential for patient safety.

As part of your undergraduate BN or MN nursing degree, the NMC (2018b, p11) stipulates that you must pass 'a health numeracy assessment related to nursing proficiencies and calculation of medicines' with a score of 100%.

There is also an NMC requirement that you can demonstrate the ability 'to progress to a prescribing qualification following registration' (NMC, 2018a, p18).

Edinburgh Napier University has utilized the expertise of an online company who provide a gradual progression to these numeracy skills using **safeMedicate**. Through completing online learning modules, practice questions, and formative assessments throughout your course you will be well prepared to sit the final summative assessments during year 3.

You will be issued a password for **safeMedicate** at the beginning of trimester 2 in year 1. A summary of the work to complete through your course is detailed below:

Year 1 (PLEs 1 & 2):

- Complete all Essential Skills modules:
    - Introduction
    - Prescriptions and SI Units
    - Tablets and Capsules
    - Liquid Medicines
    - Injections
    - I.V. Infusions
- Carry out as many 'Practice Your Skills' questions as required
- Authentic Diagnostic Assessment - Formative (Target Mark 80%)
- Authentic Assessment – Formative (Target Mark 80%)
- Healthcare Numeracy Assessment, Point Of Entry Assessment – Formative (Target Mark 80%)

Year 2 (PLEs 3 & 4):

- Complete modules on:
    - Bodyweight & Surface Area
    - Injectable Medicines
- Carry out as many 'Practice your Skills' questions as required
- Authentic Diagnostic Assessment - Formative (Target Mark 90%)
- Authentic Assessment – Formative (Target Mark 90%)
- Healthcare Numeracy Assessment, Point Of Registration Assessment – Formative (Target Mark 90%)

Year 3 (PLE 5):

- Complete module on:

    - Prescribing Calculations
- Carry out as many ‘Practice your Skills’ questions as required
- Authentic Diagnostic Assessment - Formative (Target Mark 100%)
- **Authentic Assessment – Summative (Pass Mark 100%)**
- **Healthcare Numeracy Assessment Point Of Registration – Summative (Pass Mark 100%)**

You should only attempt the formative and summative assessments once you are proficient at the ‘practice your skills’ questions which are available for each module and can be done as many times as needed. These questions will provide you with feedback and so you will be able to identify the areas where you need more practice.

You can repeat the formative and summative assessments as many times as is necessary until you achieve the required target mark or pass mark. You can access each assessment once per day.

Please note that the target marks are set to ensure student development and to help Academic Assessors identify students who may require additional support with their numeracy skills. Following adequate learning, revision and practice, if you cannot attain the target mark please contact your Academic Assessor as soon as possible to ensure support is put in place.

Completion of these modules and your formative and summative assessments will be recorded by your Academic Assessor. You are required to upload your safeMedicate record as evidence of your work onto Myprogress once per year. This is done by clicking on ‘**My Record**’ on the top menu bar within safeMedicate. Then click on the blue ‘**Print Record**’ button. As the print destination select ‘**Save as PDF**’. This file can then be uploaded onto Myprogress.

If you have any questions related to safeMedicate please email safemedicate@napier.ac.uk

Myprogress/PAD Forms for Students to Complete:

Year 1 – safeMedicate: Essential Skills Modules which include

- Introduction
- Prescriptions and SI Units
- Tablets and Capsules
- Liquid Medicines
- Injections
- I.V. Infusions

Authentic Diagnostic Assessment - Formative (Target Mark 80%)

Achieved:

Yes

No

Authentic Assessment – Formative (Target Mark 80%)

Achieved:

Yes

No

Healthcare Numeracy Assessment, Point Of Entry Assessment – Formative (Target Mark 80%)

Achieved:

Yes

No

Year 2 – safeMedicate Modules: Bodyweight & Surface Area and Injectable Medicines Modules

Authentic Diagnostic Assessment - Formative (Target Mark 90%)

Achieved:

Yes

No

Authentic Assessment – Formative (Target Mark 90%)

Achieved:

Yes

No

Healthcare Numeracy Assessment, Point Of Registration Assessment – Formative (Target Mark 90%)

Achieved:

Yes

No

Year 3 – safeMedicate Modules: Prescribing Calculations

Authentic Diagnostic Assessment - Formative (Target Mark 100%)

Achieved:

Yes

No

Authentic Assessment – **Summative (Pass Mark 100%)**

Achieved:

Yes

No

Healthcare Numeracy Assessment Point Of Registration – **Summative (Pass Mark 100%)**

Achieved:

Yes

No

USEFUL REFERENCES FOR STAFF AND STUDENTS

Health and Safety Executive (1999) *Management of Health and Safety at Work Regulations Approved Code of Practice and guidance L21* (2nd edition) HSE Books 2000 ISBN 0 7176 2488 9

NHS Education for Scotland (NES) (2013). *Evaluation of Current Practices to Involve Service Users and Carers in Practice Assessment in 11 Higher Education Institutes (HEIs) in Scotland.* [online]. NES. available from: https://www.nes.scot.nhs.uk/media/2063151/nes_user_and_carers_final_report_word_290313-no_appendix_inc_nes__and_gcu_logo_wsv.pdf [accessed 05/08/19]

NHS Education for Scotland (NES) (2018). Practice Learning Handbook: for Practice Supervisors and Practice Assessors. NES. available from: https://www.nes.scot.nhs.uk/media/4337239/handbook_for_practice_supervisors_and_assessors.pdf [accessed 13.2.20]

Nursing and Midwifery Council (NMC) General Medical Council (GMC) (2015) *Openness and honesty when things go wrong: the professional duty of candour* NMC/GMC available from: https://www.nmc.org.uk/globalassets/sitedocuments/nmc-publications/openness-and-honesty-professional-duty-of-candour.pdf [accessed 05/08/19]

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Nursing and Midwifery Council (2018b) *Standards framework for nursing and midwifery education (part 1)* NMC available from: https://www.nmc.org.uk/standards-for-education-and-training/standards-framework-for-nursing-and-midwifery-education/ [accessed 05/08/19]

Nursing and Midwifery Council (2018c) *Standards for student supervision and assessment (part 2)* NMC available from: https://www.nmc.org.uk/standards-for-education-and-training/standards-for-student-supervision-and-assessment/ [accessed 05/08/19]

Nursing and Midwifery Council (2018d) *Standards for pre-registration nursing programmes (part 3)* NMC available from: https://www.nmc.org.uk/standards/standards-for-nurses/standards-for-pre-registration-nursing-programmes/ [accessed 05/08/19]

Nursing and Midwifery Council (2018e) *The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates* NMC available from: https://www.nmc.org.uk/standards/code/ [accessed 05/08/19]

APPENDIX 1

Coding of EU Directives to Support Mapping to NMC (2018) Future Nurse: Standards of proficiency for registered nurses

Article 31 (V.2 Nurse Responsible for General Care) - '5.2.1 Training programme for nurses responsible for general care - the training leading to the award of a formal qualification of nurses responsible for general care shall consist of the following two parts…' (NMC 2018; p15-16)			
B. Clinical Instruction		General and specialist medicine	B.1
		General and specialist surgery	B.2
		Child care and paediatrics	B.3
		Maternity care	B.4
		Mental health and psychiatry	B.5
		Care of the old and geriatrics	B.6
		Home nursing	B.7