

# SOUTH PAD PRACTICE ASSESSMENT DOCUMENT

University of Chichester

**An Exemplar Guide for Students, Practice Supervisors,  
Practice Assessors and Academic Assessors**

**BSc (Hons) Nursing**

Adapted from the work done by Erika Thorne (University of Brighton)

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Health Education England

## An Overview of the South Practice Assessment Document

This guide has been adapted from the materials supplied by the Pan London Practice Learning Group in their development of the Pan London Assessment Document. This work has been led by Jane Fish (Project Manager).

### Aims of This Guide

- For it to be used by both students and all staff involved in practice learning and assessment as an aid memoire for completion of PAD
- To ensure that the key principles are understood and completed by students, practice supervisors, practice assessors and academic assessors
- To provide a visual aid to help with completion of the PAD and OAR and should be read in combination with the Guide to Using the South PAD document

There are a number of key principles that apply across all AEI's within the South PAD area. In addition **HEI's will have identified specific programme regulations** that must be adhered to – you will find these at the start of each PAD for each Part.

### Overall Summary of the PAD

- Each document is known as 'Parts' to reflect the NMC progression points for the course; e.g. part 1 may equate to year 1 of the course. Each individual HEI will specify how the parts are allocated for their course
- There are **4 mandatory** components to the PAD
  1. Professional Values (must be completed each placement)
  2. Proficiencies (must be completed by the end of the part)
  3. Episodes of Care x 2 (must be completed by the end of the part)
  4. Medicine Management x 1 (must be completed by the end of the part)

In Parts 2 and 3 there are 14 proficiencies marked with an asterisk\* - these proficiencies can be achieved in either Part 2 or 3 but all must be achieved by end of Part 3. A record of the complete asterisked\* proficiencies is provided in the Ongoing Achievement Record (OAR)

- An initial, mid-point and final interview **MUST** be completed for all students
- Range of Service User feedback forms are available. This will be facilitated by the practice supervisor and/or practice assessor.
- Range of additional feedback paperwork – includes Peer Feedback, Other Health Care Professionals, and Additional Communications to provide insight into the students learning and progression
- List to record all practice supervisors and practice assessors for each placement and academic assessor for the Part
- Grading of practice may occur in some HEI's - please be aware of HEI specific requirements
- All students will have an Ongoing Record of Achievement (OAR) – this is a single document that provides a summary view of the students' progress across placements and parts

### Completing the Practice Assessment Document

Section 1 -Preparation for student placement:- <ul style="list-style-type: none"> <li>• <a href="#">Signatory List</a></li> <li>• <a href="#">Placement Information</a></li> <li>• <a href="#">Orientation</a></li> </ul>	3 4 5-6
Section 2 - Recording student progress/objectives/feedback <ul style="list-style-type: none"> <li>• <a href="#">Initial/Mid and End Interviews</a></li> <li>• <a href="#">Service User feedback</a></li> <li>• <a href="#">Record of working with and learning from others/inter-professional working</a></li> <li>• <a href="#">Peer Feedback</a></li> <li>• <a href="#">Record of communication/additional feedback</a></li> </ul>	7-11 12  13 14 14
Section 3 - Principles for Assessment <ul style="list-style-type: none"> <li>• <a href="#">Assessment Descriptors and advice students/practice supervisors/practice assessors</a></li> <li>• <a href="#">Assessment of Professional Values</a></li> <li>• <a href="#">Assessment of Proficiencies</a></li> <li>• <a href="#">Episodes of Care and Medicine Management – Summative Assessment by Practice Assessors only</a></li> </ul>	15-16  17 - 18 19 - 21 22 – 26
Section 4 - <a href="#">Action Plans</a>	27-28
Section 5 – <a href="#">Ongoing Achievement Record</a> (OAR)	29

***Remember: If concerns are highlighted at any stage during the placement then the academic assessor must be informed and an Action Plan completed.***

***The academic assessor will contact the relevant Practice Liaison Lecturer Team (PLL) to forward on concerns and to ensure support is given to both student and practice colleagues***

## Section 1: Preparation for Student Placement

Signatory List for Practice Supervisors/Practice Assessors and Academic Assessors

Any Registered professional who writes in the PAD or OAR must complete the appropriate signatories' page. This includes the record of orientation, record of communication and/or record of practice hours. The page can be found at the start of each PAD for the relevant Part

It is the practice supervisor, practice assessor and academic assessor's responsibility to complete this section

Students should remind their practice supervisor, practice assessor and academic assessor that this is a requirement

This is to ensure the university can assure the NMC that correct processes have been followed and that all practice supervisors, practice assessors and academic assessors are properly up to date and qualified to verify the student's competence. Those supervisors/assessors who are not registered nurses should indicate their professional qualification

### Example of a completed Signatory List

List of Practice Supervisors				
A sample signature must be obtained for all entries within this document				
Name (please print)	Job Title	Signature	Initials	Placement
<i>Frankie Jones</i>	<i>Staff Nurse</i>	<i>FJones</i>	<i>FJ</i>	<i>Ward 2b</i>
<i>Mark Matthews</i>	<i>Staff Nurse</i>	<i>MMatthews</i>	<i>MM</i>	<i>Rapid Response Team</i>
List of Practice Assessors				
A sample signature must be obtained for all entries within this document				
Name (please print)	Job Title	Signature	Initials	Placement
<i>Alan Peterson</i>	<i>Senior Staff Nurse</i>	<i>APeterson</i>	<i>AP</i>	<i>Ward 2b</i>
<i>Sam Makepiece</i>	<i>Charge Nurse</i>	<i>SMakepiece</i>	<i>SM</i>	<i>Rapid Response Team</i>
List of Academic Assessors				
A sample signature must be obtained for all entries within this document				
Name (please print)	Job Title	Signature	Initials	Placement
<i>Holly Grey</i>	<i>Senior Lecturer</i>	<i>HGrey</i>	<i>HG</i>	<i>Part 1</i>

## Placement Information

Students should complete these sections prior to the initial interview

### Placement Provider:

(e.g. Trust/Organisation) *St Elsewhere Community Trust*

Name of Placement Area: *Rapid Response Team*

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

Placement Telephone number *01234 56789*

Placement Contact Email: *RRT@stelsewhere.nhs*

Start Date: *8/04/2019*. End Date: *14/06/2019* No. of Hours *37.5 hours per week*

### Nominated person to support student and address concerns:

Name: *Jack Straw*

Designation: *Practice Education Facilitator*

Contact email address *J.Straw@nhs.net*

### Practice Assessor Details

Name: *Sam Makepiece*

Designation: *Charge Nurse*

Contact email address: *SMakepiece@nhs.net*

### Academic Assessor Details (for part):

Name: *Holly Grey*

Designation: *Senior Lecturer*

Contact email address: *HGrey@uni.ac.uk*

## Orientation

This section can be completed by the Practice Supervisor or a designated member of staff in the placement area

There are some elements of orientation that must be completed on the first day on placement as highlighted below\*

Risk Assessments/reasonable adjustments – should be discussed with the Practice Supervisor and noted below

	Placement Area 1		Placement Area 2 (if app.)	
Name of Placement Area				
Name of Staff Member				
This should be undertaken by a member of staff in the Placement Area	Initial/Date (Student)	Initial/Date (Staff signature)	Initial/Date (Student)	Initial/Date (Staff signature)
The following criteria need to be met within the first* day/week in placement				
*A general orientation to the health and social care placement setting has been undertaken				
*The local fire procedures have been explained Tel.....				
The student has been shown the: <ul style="list-style-type: none"> <li><input type="checkbox"/> fire alarms*</li> <li><input type="checkbox"/> fire exits*</li> <li><input type="checkbox"/> fire extinguishers*</li> </ul>				
*Resuscitation policy and procedures have been explained Tel: .....				
*Resuscitation equipment has been shown and explained				
*The student knows how to summon help in the event of an emergency				
The student is aware of where to find local policies <ul style="list-style-type: none"> <li><input type="checkbox"/> health and safety</li> <li><input type="checkbox"/> incident reporting procedures</li> <li><input type="checkbox"/> infection control</li> <li><input type="checkbox"/> handling of messages and enquiries</li> <li><input type="checkbox"/> other policies</li> </ul>				
The student has been made aware of information governance requirements				
*The shift times, mealtimes and reporting sick policies have been explained.				
The student is aware of his/her professional role in practice.				
Policy regarding safeguarding has been explained				

The student is aware of the policy and process of raising concerns				
Lone working policy has been explained (if applicable)				
Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed)				
The following criteria need to be met prior to use				
*The student has been shown and given a demonstration of the moving and handling equipment used in the placement area				
The student has been shown and given a demonstration of the medical devices used in the placement area				

Practice Supervisors should use the relevant risk assessment documentation for the University and ensure they follow specific university processes where required. The orientation checklist allows for orientation to be carried out in two areas as some students may attend more than one area as part of their placement experience.

## Section 2. Recording student progress/objectives/feedback

### Initial Interview

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

<p><b>Student to identify learning and development needs (with guidance from the Practice Supervisor)</b></p> <p><i>Develop Confidence in assessing patients in the community who are acutely unwell</i></p> <p><i>Develop skills in communicating news to relatives/patients about their condition</i></p> <p><i>Practice handing over/referring patients to other HCP's</i></p> <p><i>Learn more about how the RRT work as an multi-disciplinary team</i></p>	
<p><b>Taking available learning opportunities into consideration, the student and Practice Supervisor/Practice Assessor to negotiate and agree a learning plan.</b></p>	
<p><b>Outline of learning plan</b></p> <ul style="list-style-type: none"> <li><i>To assess patients (initially under supervision) when on home visits</i></li> <li><i>Stuart to carry out supervised handover/referral of care</i></li> <li><i>Stuart to initially observe communication with relatives and then to carry out supervised communication with patients/relatives</i></li> <li><i>Stuart to spend time with each professional body that makes up the RRT to appreciate their role in the team</i></li> </ul>	<p><b>How will this be achieved?</b></p> <ul style="list-style-type: none"> <li><i>Patients will be identified as suitable for assessment by the relevant HCP and Stuart to be supported in taking the lead on the assessment/handover/referral of patient</i></li> <li><i>Communication with relatives/patients will be enabled initially following conversation with HCP but latterly initiated by Stuart</i></li> <li><i>Weekly meeting with myself (practice supervisor) to discuss progression</i></li> <li><i>Off duty will identify opportunities to work alongside members of MDT</i></li> </ul>
<p>Learning plan for placement agreed by Practice Assessor (where applicable) <span style="background-color: yellow;">YES</span>/NO</p> <p>Student's Name: <i>Stuart Marl</i>                      Signature: <i>SMarl</i>      Date: <i>10/04/2019</i></p> <p>Practice Supervisor/Assessor's Name: <i>Mark Matthews (PS) / Sam Makepiece (PA)</i></p> <p>Signature: <i>MMatthews (PS)/ SMakepiece (PA)</i>                      Date: <i>10/04/2019</i></p>	



## Mid-Point Interview

This is completed by the student and the Practice Supervisor and Practice Assessor who will review progress and if there are causes for concern the Practice Assessor will liaise with the Academic Assessor and complete an [action plan](#)

The date for the midpoint interview should be identified at the beginning of the placement. This ensures that both the practice supervisor, practice assessor and student are allocated the same shift and time is set aside for the interview to take place. Students should prepare for the interview by completing their self-assessment/reflection on progress. The midpoint interview is an opportunity for the practice supervisor, practice assessor and student to reflect on the first half of the placement, review all feedback both whilst planning for the second part of the placement. This meeting should be an opportunity for the student to discuss their documented reflection on their learning, including their strengths and developments linking to learning outcomes and professional values.

### Advice for Students

#### Advice for students:

Your reflection should include evidence to support your self-assessment. Give examples of how you've demonstrated appropriate knowledge, professional values and essential skills.

<b>Personal Learning Needs</b>	<ul style="list-style-type: none"><li>• Am I meeting my personal learning needs set at the beginning of placement?</li><li>• How am I achieving these?</li></ul>
<b>Professional Value</b>	<ul style="list-style-type: none"><li>• What professional values have I achieved and how?</li><li>• What professional values need developing?</li></ul>
<b>Proficiencies</b>	<ul style="list-style-type: none"><li>• What Proficiencies have I achieved and how?</li><li>• What Proficiencies need developing?</li></ul>

#### Advice for Practice Supervisors and Practice Assessors:

Consider the following areas for discussion and review

<b>Personal Learning Needs</b>	<ul style="list-style-type: none"><li>• Is the student meeting their personal learning needs that they set at beginning of placement?</li><li>• What evidence supports this?</li><li>• Has there been any concerns/interruptions that has hindered this?</li></ul>
<b>Professional Value</b>	<ul style="list-style-type: none"><li>• What professional values is the student achieving?</li><li>• What professional values need developing?</li><li>• What evidence supports both of these points?</li></ul>
<b>Proficiencies</b>	<ul style="list-style-type: none"><li>• What Proficiencies is the student achieving?</li><li>• What Proficiencies need developing and why?</li><li>• What evidence supports both of these points?</li></ul>

<b>Student's self-assessment/reflection on progress</b> <b>Reflect on your overall progression referring to your personal learning needs, professional values and proficiencies. Identify your strengths and document areas for development.</b>	
<b>Knowledge:</b> <i>I have been assessed and achieved some of the proficiencies around communication, assessment and recognition of deterioration. I have practiced handing over to other staff, but still feel under confident especially when talking to relatives about the patient's condition</i>	
<b>Skills:</b> <i>I have been given opportunities to practice the skills of assessment and communication, but find the lack of knowledge about patient's medications and conditions difficult. I am also struggling with discussing the deterioration of the patients with the patient and their relatives</i>	
<b>Attitudes and values:</b> <i>I believe that I act in a professional manner at all times. There have been a couple of times when I have been late due to bus timetables and I have spoken about this with my practice supervisor and a plan has been formed as to how to contact the placement if this happens again</i>	
<b>Practice Assessor's comments</b> <b>Discuss with the student their self-assessment and comment on their progression using the criteria for Assessment in Practice Descriptors, detailing evidence used to come to your decision.</b>	
<b>Knowledge:</b> <i>Stuart has been working hard to develop his knowledge of the more common conditions encountered on this placement. He needs to develop confidence in this new knowledge to help him communicate more effectively with other HCP's, patients and relatives. We have agreed that Stuart needs to understand commonly used medications in more detail</i>	
<b>Skills:</b> <i>Stuart is developing clear and empathetic communication skills with patients and relatives, but lacks confidence in his abilities. He is good at picking up on non-verbal cues. More practice will help Stuart to overcome his nervousness at handover</i>	
<b>Attitudes and values:</b> <i>Stuart recognizes his limitations, although does need to step out of his comfort zone at times to develop further. There have been 3 occasions of lateness and 2 of absenteeism and Stuart and I have discussed this and agreed that if this happens again he is to text both Mark and myself, so that we are aware of a) his personal welfare and b) when he will be on duty</i>	
<b>Following the Mid-Point interview the student is to identify their learning and development needs for the remainder of the placement and negotiate with their Practice Assessor how these will be achieved.</b>	
<b>Learning and development needs</b>	<b>How will these be achieved?</b>
<ul style="list-style-type: none"> <li>Gain more confidence in handing over to other HCPs, especially medical profession using SBAR</li> <li>To develop knowledge on commonly used drugs</li> <li>Stuart to spend time with each professional body that makes up the RRT to appreciate their role in the team</li> <li>To ensure communication about attendance is maintained</li> </ul>	<ul style="list-style-type: none"> <li>Observe trained staff communicating with other agencies plus be prepared to take the lead more frequently. Be open to receiving feedback.</li> <li>Stuart to be provided with a list of common encountered medications and to develop cue cards around these to help with knowledge and understanding</li> <li>Off duty will identify opportunities to work alongside members of MDT</li> <li>Must attend every shift as planned to ensure learning objectives are met</li> </ul>
<b>Student's Name:</b> <i>Stuart Marl</i> <b>Signature:</b> <i>S Marl</i> <b>Date:</b> <i>10/05/2019</i>  <b>Practice Assessor's Name:</b> <i>Sam Makepiece</i> <b>Signature:</b> <i>S Makepiec</i> <b>Date:</b> <i>10/05/2019</i> <b>Any outstanding learning and development needs are to be discussed and documented at the final interview.</b>	

## Final Interview

This is completed by the **student and the Practice Assessor** who will review progress and confirm achievement. At the end of the interview the Practice Assessor must complete the checklist for assessed documents.

### Student Advice

Use this section to identify specific learning opportunities that you feel would help you develop during your next practice learning experience. Revisit the advice for mid-point interview to help with this

### Practice Assessor Advice

Use this section to summarise areas the student has achieved and any areas of non-achievement. Revisit the advice for mid-point interview to help with this. There should be an action plan completed at this time if the student has not achieved any outcome

#### Student's self-assessment/reflection on progress

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

##### Knowledge:

*I believe that I have learnt a lot from this placement and know more about conditions such as COPD, Chronic Asthma, Diabetes and Heart Failure. I still need to know more about drugs.*

##### Skills:

*I still feel under confident about discussing patient's conditions with relatives and at handover. I have enjoyed improving my skills in assessment and clinical decision making and have achieved proficiencies in these, although have been frustrated at times when I am not allowed to do things independently*

##### Attitudes and values:

*I believe that I have been professional at all times, although I know there are concerns expressed about my attendance and appearance. I have spoken to Mark about these and he is aware of why I have struggled with both of these things*

#### Practice Assessor's comments

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

##### Knowledge:

*Stuart has developed his knowledge well regarding COPD and Diabetes but could still develop more knowledge in the management of heart failure. This is partly because Stuart has been absent for a number of shifts towards the end of this placement. He also did not engage in the development of cue cards regarding medications as agreed*

##### Skills:

*Due to lack of attendance Stuart has not really had the opportunity to develop his handover skills and gain confidence in this, which is a shame as he demonstrated good potential at the start of this placement to achieve this*

##### Attitudes and values:

*Professional Value No's 14 and 15 has not been met despite discussions at mid-point and an action plan drawn up in the 2<sup>nd</sup> part of the placement to help Stuart meet this. Stuart (when present on placement) shows a willingness to learn and participate in care, but over the latter part of the placement his attendance has remained sporadic, and when present his appearance is disheveled and uniform is stained and unclean*

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

*Attendance needs to be addressed and Stuart is to meet with his Personal Tutor and Student Support on return to uni to review the issues he has raised with myself and Mark his Practice Supervisor. Stuart needs to develop his knowledge on medications and continue to develop his skills on communication with HCP's and handover of patients*

Was an Action Plan required to support the student?

**YES** / NO

If Yes, was the Academic Assessor informed?

**YES** / NO

See Page 28 for more about [Action Plans](#)

Checklist for assessed documents	Tick	Practice Assessor Initial	Student Initial
The professional value statements have been signed at both Mid-Point and Final Interview	✓	SM	SM
The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed	✓	SM	SM
The practice placement hours have been checked and signed	✓	SM	SM
All the interview records and development plans have been completed and signed as appropriate	✓	SM	SM
The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document.	✓	SM	SM
The Practice Assessor has completed the Ongoing Achievement Record (OAR)	✓	SM	SM
Student's Name: <i>Stuart Marl</i> Signature: <i>SMarl</i> Date: <i>13/06/2019</i> Practice Assessor's Name: <i>Sam Makepiece</i> Signature: <i>SMakepiece</i> Date: <i>13/06/2019</i> Additional Signature (If Applicable e.g. Academic Assessor) Name: <i>Holly Grey</i> Signature: <i>HGrey</i> Date: <i>13/06/2019</i>			

## Service User/Carer Feedback

### Advice for Students

The student will reflect on the feedback provided by the patient/service user/carers and discuss the outcomes, including any changes to practice that need to be made which can be included in the interviews or in an Action plan.

### Advice for Practice Supervisors/Practice Assessors

Please obtain consent from patients/service users/carers/families, who should feel able to decline to participate. The practice supervisor/practice assessor should offer the service user the option of completing the service user feedback themselves or offers to complete it with them. It is important that the student receives feedback from a service user once every placement if possible. There may well be instances where service user feedback is not appropriate and practice supervisors/practice assessors should use their discretion

Below is an example of 1 of the 4 forms that can be used

Tick if you are:	The Patient/Service User		<del>Carer</del> /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 you?					
...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?					
Practice Supervisor/Practice Assessor					
Name:	Signature:		Date:		
Student Name:	Signature:		Date:		

## Record of working with and learning from others/inter-professional working

### Advice for Students

Students should reflect on their learning when working with members of the multi- disciplinary team and document this. Additional learning experiences (such as undertaken through spokes) should reflect learning that is in addition to the usual day to day learning experiences available in a placement area. All additional learning experiences should be undertaken through discussion with your practice supervisor to ensure they are appropriate for your level of learning. There is no set time period for an additional learning opportunity. The length is dependent on the experience being undertaken but must be discussed and agreed by your practice supervisor.

### Advice for Practice Supervisors/Practice Assessors/Other Designated Registered Health Care Professionals

The Practice Supervisor or designated other Registered Health Care Professional will discuss the student's reflection on their learning from others and provide relevant feedback to the Practice Assessor as appropriate. The Practice Assessor will review documented records where the student has worked with other health and social care professionals and incorporate into assessment where appropriate.

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

<b>Student Name:</b>	<b>Signature:</b>	<b>Date:</b>
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#### Practice Supervisor's Comments:

<b>Practice Supervisor Name:</b>	<b>Signature:</b>	<b>Date:</b>
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#### Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summaries below:

<b>Student Name:</b>	<b>Signature:</b>	<b>Date:</b>
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#### Practice Supervisor's Comments:

<b>Practice Supervisor Name:</b>	<b>Signature:</b>	<b>Date:</b>
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### Record of peer feedback

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

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

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

### Record of communication/additional feedback

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

#### Advice for Students

Students can seek feedback from staff members they have been working with on a daily basis as this will be useful feedback for their mentors/ supervisors

#### Advice for Practice Supervisors/Practice Assessors/Academic Assessors and Others

If students require additional advice, support, or development of action plans then these meetings should be recorded here. For example, after the mid-point interview if identification of additional needs re student progression has been identified – then please record the meetings here but fill out an [action plan](#) as per usual practice

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

### Section 3: Principles for Assessment

Levels of Expected Supervision and Achievement dependent on Part

#### Part 1

#### Part 2

#### Part 3

Guided participation  
in care and  
performing with  
increasing  
confidence and  
competence

Active participation in  
care with minimal  
guidance and performing  
with increased  
confidence and  
competence

Practicing  
independently with  
minimal supervision  
and leading and  
coordinating care  
with confidence

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, 2018, p 5). This should be taken into account when assessing the students against the proficiencies and episodes of care/medicine management for the relevant part. This is achieved in combination with the criteria below.

**Criteria for Assessment – Achieved MUST be obtained across all 3 components to pass the element under assessment**

#### Part 1: Guided participation in Care

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

#### Part 2: Active participation in care with minimal guidance and increasing confidence

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



### Part 3: Leads and coordinates care

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

#### Advice for Students

Students are continually assessed. To pass a proficiency students must demonstrate Knowledge, Skills and Attitudes and Values appropriate to the Part (see above). To help with this consider the following:

- Need to participate in activities that involve the proficiencies you want to be assessed in
- Need to demonstrate knowledge by providing evidence of supportive reading/learning for the proficiencies to be achieved
- Actively seek feedback from other HCP's who you have worked with in support of the proficiencies you want to achieve.
- Ensure feedback is documented under either Peer Support or Record of working with and learning from others/inter-professional working
- Can discuss with the PS PA examples from practice that they have participated in to meet the relevant proficiency
- Students may wish to keep a record of participation with reflection as a tool as an aide memoire.

#### Advice for Practice Supervisors and Practice Assessors

The levels of expected supervision and achievement provide guidance of expected performance that a student should be working towards achieving by the end of the respective part. Use this in conjunction with the Criteria for Assessment relevant to the Part to assist in the decision-making process regarding progression and achievement. Evidence should be sought via the various feedback mechanisms as discussed on pages 12-14 of this guide. To help with this consider the following points: -

- Have you tested the students' knowledge and understanding appropriate to the part?
- Has the student demonstrated appropriate professional values?
- Have you observed/tested the student performing the proficiency/episode of care?
- Have you received testimonial from patients/service users/carers/relatives?
- Have you received feedback from other members of staff?
- Is all the above documented?

**Remember** - If the student's performance gives cause for concern at the mid-point interview or at any point during the experience feedback must be given and an action plan written to enable the student to address this prior to the final interview. The Practice Assessor must communicate with and involve the Academic Assessor in this process.

### **Advice for Students**

Assessment of Professional Values is done via continuous assessment and feedback is given and documented at mid-point and end point interviews. However feedback can be given at any time if required using the record of communication/feedback sheets.

Students must provide a comment on how they felt they had achieved the value at any point during the placement but are advised to have reflected upon at least a third of all the Professional Values by midpoint and then to have completed all by final interview

### **Advice for Practice Supervisors and Practice Assessors**

Assessment of professional values is a continuous process and practice supervisors, and practice assessors should provide specific evidence of where standards are being met / not met at the midpoint and end of placement, or more frequently if required.

Students should be assessed on **ALL** professional values during **EVERY PLACEMENT**

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

The Practice Assessor has responsibility for assessing Professional Values though the Mid-Point review, which can also be completed by a Practice Supervisor in liaison with the Practice Assessor

### **Student achievement: Important information if student is not maintaining competence of assessed elements**

Where other components have been assessed and achieved e.g. a proficiency assessed at the beginning of the Part, the student needs to demonstrate continued competence and confidence in the proficiency. Professional Value statement 8 enables the assessor to ensure and record that the student is meeting this requirement

If the student is not achieving any aspect of professional values this must be identified as a development need with the student. If it continues, an [action plan](#) will be required.

Action plans should reflect specific areas of concern and be completed as early in the placement as possible to ensure the student has the maximum time and opportunity to develop. If there are any issues/areas for concern, these must be recorded as 'Not Achieved' and **must trigger an Action Plan**. The joint Action Plan must involve the Practice Assessor and Academic Assessor and/or delegated representative from the student's university e.g. Practice Liaison Lecturer/Link Lecturer.

## Exemplar of Professional Values to be assessed

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

	Achieved Mid-Point Yes/No	Initial/ Date	Achieved Final Yes/No	Initial/ Date (Final)
Prioritise people				
1. The student maintains confidentiality in accordance with the NMC code.	Yes	10/4/2019	Yes	13/6/2019
2. The student is non-judgmental, respectful and courteous at all times when interacting with patients/service users/carers and all colleagues.	Yes	10/4/2019	Yes	13/6/2019
Practice effectively				
6. The student maintains consistent, safe and person- centered practice based on best available evidence.	Yes	10/4/2019	Yes	13/6/2019
7. The student manages appropriate and constructive relationships within the inter-disciplinary team with the intent of building professional relationships.	Yes	10/4/2019	Yes	13/6/2019
8. The student makes consistent effort to engage in and reflect on their learning, contributing to their own professional development and supporting the learning and development of others.	Yes	10/4/2019	No	13/6/2019
Preserve safety				
10. The student demonstrates openness (candour), trustworthiness and integrity.	Yes	10/4/2019	Yes	13/6/2019
11. The student reports any concerns to a member of staff when appropriate e.g. safeguarding.	Yes	10/4/2019	Yes	13/6/2019
Promote professionalism and trust				
14. The student's personal presentation and dress code is in accordance with the local policy.	Yes	10/4/2019	No	13/6/2019
15. The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement.	No	10/4/2019	No	13/6/2019
Mid-point assessment				
Practice Supervisor Name: Mark Matthews		Signature: MMatthews		Date:10/04/2019
Reviewed and agreed by Practice Assessor		Signature: SMakepiece		Date:10/04/2019
Practice Assessor Name: Sam Makepiece				
End point: Student reflection on meeting Professional Values				
Choose one example from your practice on this placement to demonstrate how you practice within the NMC Code of Conduct (ensure confidentiality is maintained). For each placement, please select a different section of The Code to reflect on				
Reflection on No 1 – Confidentiality – I have observed and am aware of the need to obtain patient permission prior to discussing a patient's condition with a relative. This can be hard at times when the relative insists on knowing and the patient does not want them told. I came across this with an elderly patient who had cancer and was insistent that their daughter should not know. The daughter was not happy and was threatening to complain, the RN sat down with the daughter and discussed sharing of information. In the end the daughter understood.				
Student Name: Stuart Marl		Signature: SMarl		Date:10/06/2019
Final assessment - please add comments on Final Interview Page				
Practice Assessor Name: Sam Makepiece		Signature: SMakepiece		Date:13/06/2019

## Assessment of Proficiencies

The proficiencies ***“apply to all registered nurses, but the level of expertise and knowledge required will vary depending on the chosen field(s) of practice”***. (NMC, *Future Nurse*, 2018, p22, 26)

Assessment of Proficiencies are undertaken across the Part. These can be assessed in a range of placements but need to be assessed as Achieved (YES) at least once by the end of the Part. If a proficiency is assessed as Achieved (YES) early in the Part, it is expected that the student maintains that level of competence and can be re-assessed in subsequent placements at the Practice Assessor’s discretion. Professional Value No 8 can be used if a student does not maintain competency of a proficiency

Proficiencies include skills and procedures and should be assessed within the field of practice that the student is undertaking. However, when considering the person’s age and a range of mental, physical, cognitive, and behavioural health challenges, the student can learn and be assessed across different health and social care settings.

The Grade Descriptors are ‘Yes’ (This proficiency has been achieved), ‘No’ (this proficiency has not been achieved). Refer to [Criteria for Assessment in Practice](#) for further details. Some of the proficiencies may be met within simulated learning as per the individual university’s policy. [Hyperlink](#)

Proficiencies marked with an \* can be met in either Part 2 or Part 3; please refer to the OAR to confirm achievement of these.

### Achievement of Proficiencies:

As student’s progress through each part of the programme the proficiencies will vary by number and level of difficulty. For example in Part 1 = 29; Part 2 = 22; Part 3 =27. There are 14 Proficiencies that can be achieved in either Part 2 or Part 3 (92 in total)

### Advice for Students

Students are continually assessed. To pass a proficiency students must demonstrate Knowledge, Skills and Attitudes and Values appropriate to the Part. To help with this consider the following:

- Need to participate in activities that involve the proficiencies you want to be assessed in
- Need to demonstrate knowledge by providing evidence of supportive reading/learning for the proficiencies to be achieved
- Actively seek feedback from other HCP’s who you have worked with in support of the proficiencies you want to achieve.
- Ensure feedback is documented under either Peer Support or Record of working with and learning from others/inter-professional working
- Can discuss with the PS PA examples from practice that they have participated in to meet the relevant proficiency
- Students may wish to keep a record of participation with reflection as a tool as an aide memoire.

### Advice for Practice Supervisors and Practice Assessors

The levels of expected supervision and achievement provide guidance of expected performance that a student should be working towards achieving by the end of the respective part. Use this in conjunction with the Criteria for Assessment relevant to the Part to assist in the decision-making process regarding

progression and achievement. Evidence should be sought via the various feedback mechanisms as discussed on pages 12-14 of this guide. To help with this consider the following points: -

- Have you tested the students' knowledge and understanding appropriate to the part?
- Has the student demonstrated appropriate professional values?
- Have you observed/tested the student performing the proficiency/episode of care?
- Have you received testimonial from patients/service users/carers/relatives?
- Have you received feedback from other members of staff?
- Is all the above documented?

**In Addition Practice Supervisors and Practice Assessors** are advised to consider these under the 5 clusters as many are related and can be achieved in combination. Also remember when that a number of the proficiencies can be achieved whilst undertaking an Episode of Care Summative Assessment with a Practice Assessor

Part1	Part2	Part 3
Participates in assessing needs and planning person-centered care	Participates in assessing needs and planning person-centered care with increased confidence	Confidently assess needs and plans person-centered care
Participates in providing and evaluating person-centered care	Participates in providing and evaluating person-centered care with increased confidence	Confidently delivers and evaluates person-centered care
Participates in procedures for the planning, provision, and management of person-centered care	Participates in procedures for the planning, provision, and management of person-centered care with increased confidence	Confidently manages the procedure in assessing, providing, and evaluating care
Participates in improving safety and quality of person-centered care	Participates in improving safety and quality of person-centered care with increased confidence	Confidently contributes to improving safety and quality person-centered care
Participates in the co-ordination of person-centered care	Participates in the co-ordination of person-centered care with increased confidence	Confidently co-ordinates person-centered care

#### **If a student does not achieve a Proficiency by the end of a Part**

It must have been discussed between the student, practice supervisor and practice assessor that a student is struggling to achieve a proficiency. The academic assessor must have been notified early on in the process. An **Action Plan** must also be completed to allow every opportunity for the student to achieve.

A decision regarding not-achievement is made at the final interview on the final placement and recorded as 'Not Achieved'. Practice Assessors should record this by writing an 'NO' in the box. They should then date and sign the assessment and record this in the 'Learning and Development Needs' page in the PAD (part of the final interview paperwork)

### Example from the proficiencies

The individual completing the assessment should draw on a range of observed experiences in which the students demonstrates the required knowledge, skills, attitudes and values to achieve high quality person/family-centered care in an increasingly confident manner, ensuring all care is underpinned by effective communication skills.

Please remember that students do not have to be assessed on every proficiency in every placement, but if assessed and passed must maintain that competence

Participates in assessing needs and planning person-centered care with increased confidence								
	YES = Achieved, NO = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
1. Support people to make informed choices to promote their wellbeing and recovery, assessing their motivation and capacity for change using appropriate therapeutic interventions e.g. cognitive behavioural therapy techniques. (2PHPIH 2.8, 2.9, 2.10, A2.7, A 3.6)								
2. Apply the principles underpinning partnerships in care demonstrating understanding of a person's capacity in shared assessment, planning, decision- making and goal setting. (1BAP 1.9, 2PHPIH 2.9, 3ANPC 3.4, 4 PEC 4.2)								
* 3. Recognise people at risk of self-harm and/or suicidal ideation and demonstrates the knowledge and skills required to support person-centred evidence-based practice using appropriate risk assessment tools as needed. (3ANPC 3.9, 3.10, 4PEC 4.11)								

Those marked with an \* can be assessed in Part 2 or Part 3. Please record in OAR as well on achievement

## Episodes of Care

Episodes of Care are holistic assessments which enable the student to demonstrate progression across a number of platforms and must be achieved by the end of the Part. Effective communication and relationship management skills underpin all aspects of care. This assessment must be completed by a Practice Assessor

### Part 1:

**Formative** - Episode of direct care meeting the needs of a person receiving care. - can be completed by Practice Supervisor who must feed back to the Practice Assessor

**Summative** - Episode of direct care meeting the needs of a person receiving care.

### Part 2:

**Summative:** Episode of Care 1 - group of people receiving care or individual with complex care needs.

**Summative:** Episode of Care 2 - group of people receiving care with increasingly complex health and social care needs.

### Part 3:

**Summative:** Episode of Care 1 - Supervising and teaching a junior learner in practice, based on the delivery of direct person-centered care.

**Summative:** Episode of Care 2 - organisation and management of care for a group/caseload of people with complex care covering all seven platforms.

The Student and Practice Assessor should identify an appropriate time and patient to complete an Episode of care. The discussion should include expectations based on the [Levels of Expected Supervision and Assessment Criteria](#) against the Learning outcomes for that Episode of Care. In addition recognition of the proficiencies that also could be included within the assessment should also be identified.

### Advice for Students

This is a summative assessment and therefore 1 attempt is allowed to achieve this assessment per placement. If an Episode of Care is undertaken in placement and not achieved, then a 2<sup>nd</sup> Opportunity to retake the assessment will be given in Placement 2

To pass an Episode of Care assessment students must demonstrate [Knowledge, Skills and Attitudes and Values](#) appropriate to the Part (see page 15 ). To help with this consider the following:

- Familiarise themselves with the Aims and Learning Outcomes for each Episode of Care as each one is different
- Discuss with your Practice Supervisor about having Formative assessments on the Episode of Care – this is built into Part 1, but is good practice for students to do this in Part 2 and Part 3
- Need to participate in activities that relate to the Episode of Care you are being assessed in
- Need to demonstrate knowledge by providing evidence of supportive reading/learning for the proficiencies to be achieved
- Actively seek feedback from other HCP's who you have worked with in support of the proficiencies you want to achieve.

- An integral component of the assessment is the student reflection on the delivery of care being assessed – so make sure you complete it fully and at the time of the assessment.

### **Advice for Practice Assessors**

This is a summative assessment and therefore 1 attempt is allowed to achieve this assessment per placement. If an Episode of Care is undertaken in placement and not achieved, then a 2<sup>nd</sup> Opportunity to retake the assessment will be given in Placement 2

The levels of [expected supervision and achievement](#) provide guidance of expected performance that a student should be working towards achieving by the end of the respective part. Use this in conjunction with the Criteria for Assessment relevant to the Part to assist in the decision-making process regarding progression and achievement. Evidence should be sought via the various feedback mechanisms as discussed on pages 12-14 of this guide. To help with this consider the following points: -

- Have you tested the students' knowledge and understanding appropriate to the part?
- Has the student demonstrated appropriate professional values?
- Have you observed/tested the student performing the proficiency/episode of care?
- Have you received testimonial from patients/service users/carers/relatives?
- Have you received feedback from other members of staff
- Is all the above documented?

In addition, Remember that an Episode of Care will also meet a number of Proficiencies, so please review and complete as required

**Remember** - If the student's performance gives cause for concern at the mid-point interview or at any point during the experience feedback must be given and an [action plan](#) written to enable the student to address this prior to the final interview. The Practice Assessor must communicate with and involve the Academic Assessor in this process.



## Exemplar of completed student reflection

Student reflection on an episode of care	
<p><b>Within your reflection describe the episode of care and how you assessed, planned, delivered and evaluated person-centered care.</b></p> <p><i>I undertook a holistic assessment of a patient who had just been referred to the Rapid Response Team. I undertook a full set of observations and completed the referral paperwork.</i></p> <p><i>I ensured that the patient was happy to be assessed, explaining the process before starting it. I also asked whether she wanted anyone with her during the assessment. I checked her peak flow and blood glucose level, and asked her about any medications that she took. I also asked the patient what she thought the problem was, so I could hear it in her own words.</i></p> <p><i>After the assessment, on discussion with my Practice Assessor, we decided on a plan of care to manage the patient's chest infection and prevent re-admission to hospital. I contacted the physiotherapist (who is part of the team) and asked for an urgent assessment by them and used SBAR to help me do this. I discussed with the patient about getting help at home for meals and support with personal needs, which she agreed to and this was arranged. I also arranged for the prescription of antibiotics to be delivered. Finally I arranged a follow-up review with the patient for the next day</i></p> <p><b>What did you do well?</b></p> <p><i>I communicated well with the patient and struck up a rapport which she stated made her feel comfortable. I remembered to think about additional assessments such as peak flows and CBG's</i></p> <p><b>What would you have done differently?</b></p> <p><i>I should have led the discussion with my practice assessor regarding what I thought should happen for the patient, instead of being hesitant to suggest ideas, which in hindsight were correct</i></p>	<p><b>Describe how you have begun to work more independently in the provision of care and the decision making process.</b></p> <p><i>Now I am familiar with the assessment process I am using my initiative and starting elements of it without prompting from my supervisor/assessor.</i></p> <p><i>I am initiating conversations with patients and relatives. I am not waiting to be asked to make referrals but confirming with my supervisor that I will be taking the lead on this and then doing it</i></p> <p><b>What learning from this episode of care could be transferred to other areas of practice?</b></p> <p><i>To have more confidence in my knowledge and abilities and to put myself forward and suggest care more freely</i></p> <p><i>Need to learn more about chest auscultation and maybe spend a day with the physiotherapist</i></p>

### Exemplar of completed assessment feedback by Practice Assessor

<b>Practice Assessor feedback</b> Based on the student's reflection, your observation and discussion of the episode of care, please assess and comment on the following: <b>YES = Achieved No = Not Achieved (Refer to Criteria for Assessment in Practice)</b>		
<b>Proficiencies</b>	<b>Yes/No</b>	<b>Comments</b>
<b>Promoting health</b> Applies knowledge of healthy lifestyle choices in relation to the person/persons physical health, mental health and wellbeing. e.g. smoking cessation. (2PHPIH 2.1, 2PHPIH 2.4, A2.8)	Yes	<i>Stuart recognised that the patient's COPD was not well controlled at the moment and recognised that the patient was requiring more frequent nebulizers to support her breathing. He also recognised that this was impacting on her ability to feed and care for herself – which in turn would also impact upon her ability to get better</i>
<b>Assessing needs and planning care</b> Accurately undertakes a comprehensive assessment and identifies need and plans care for a range of health needs. (3ANPC 3.2, 3ANPC 3.3)	Yes	<i>Stuart initiated and completed a full assessment on the patient, using his initiative by adding in peak flow assessments and review of medications. Stuart also managed to obtain a sputum sample which helped with the decision making for the patients plan of care. Planning care, Stuart (when prompted) came up with some good ideas about what was required for the patient</i>
<b>Providing and evaluating care</b> Demonstrates safe, compassionate, person- centered, evidence based care that respects and maintains the person/persons dignity and human rights when managing a range of commonly encountered presentations e.g. anxiety, pain, restlessness, confusion. (4PEC 4.4, 4PEC4.5)	Yes	<i>Stuart's demeanour and use of non-verbal communication skills immediately put the patient at ease. He communicated clearly and accurately with the patient and included her in the planning of care, making sure her wishes were heard and understood</i>
<b>Improving safety and quality of care</b> Accurately undertakes risks assessments and demonstrates an understanding of local and national frameworks for managing and reporting risks. (6 ISQC 6.1, 6ISQC 6.7)	Yes	<i>Stuart recognised the vulnerability of the patient in not being able to maintain her self-care at home and initiated a referral to the Help at home services. Stuart completed the appropriate risk assessment forms clearly and completely</i>
<b>Leading nursing care and working in teams</b> Uses effective communication skills to manage the care of a small group of people/individuals with complex care needs, demonstrating the ability to prioritise care recognising when and whom to refer/delegate to as appropriate. (1BAP 1.11, 5LMNCWIT 5.4, 5.5, 7CC7.5)	Yes	<i>Stuart used the SBAR tool well when referring the patient to the physiotherapist. Clear written documentation on the referrals to home support and in the nursing documentation were also completed</i>
<b>If any of the Standards are 'Not Achieved' this will require a re-assessment and the Academic Assessor must be informed</b>		
<b>Student's signature: : SMarl                      Date: 12/4/2019</b> <b>Practice Assessor's signature: SMakepiece Date: 12/4/2019</b>		

## Summative Assessments II (Completed by Practice Assessors Only)

### Medicine Management

The aim of this assessment is to demonstrate the student's knowledge and competence in administering medications safely. **Students Must** familiarise themselves with the learning outcomes for the assessment and practice time can be sought with the Practice Supervisor prior to summative with the Practice Assessor

The student and the Practice Assessor should identify the appropriate placement to complete this assessment. As there is only one opportunity for assessment the planning should take this into consideration to maximise the learning for the student. The student should be allowed a number of practice opportunities to administer medicines under supervision prior to this assessment

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

#### Section 4: Action Planning

An Action Plan should be completed if there is cause for concern in relation to the student's performance. For example, failure to achieve components of assessment such as Professional Values.

If a student requires an Action Plan, the Practice Assessor should liaise with the Academic Assessor and is responsible for reviewing progress and ensuring support and learning is available. Depending on the HEI and the practice placement's policy, the Practice Assessor may have to inform the nominated person on placement.

Use the SMART principle to action planning:

**S** - Be **specific** about your action(s)

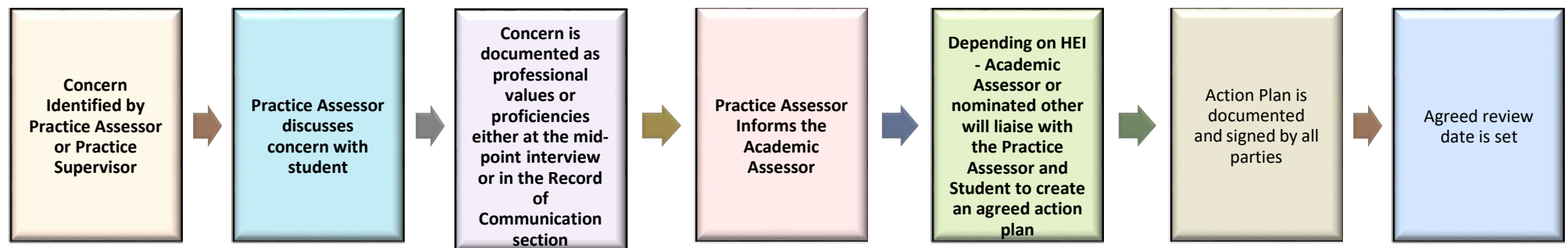
**M**- Ensure your action(s) is **measurable** with a clearly defined outcome

**A**- Make sure your action(s) is **achievable**. Is it an appropriate outcome for your stage of study?

**R**- Check that your action(s) is **realistic** taking account of your time, ability and resources

**T**- Make sure your action(s) is **time** restricted. Set an achievable time frame with deadlines and milestones to check progress.

#### Checklist for what to do when an Action Plan is required



### Exemplar of a Completed Action Plan

Placement Name <i>Rapid Response Team</i>		Date action plan initiated: <i>29<sup>th</sup> May 2019</i>		
Nature of concern  Refer to Professional Value(s), Proficiency and/or Episode of Care (Specific)	What does the student need to demonstrate; objectives and measure of success (Measurable, Achievable and Realistic)	Support available and who is responsible	Date for review  (Timed)	Review/feedback
<i>Professional Value 14</i> <i>The Student's personal presentation and dress code is in accordance with the local policy</i>	<i>Stuart must attend placement with a clean uniform for every shift</i> <i>Stuart must comb his hair and ensure fingernails are clean and short for every shift</i>	<i>Stuart is responsible to ensure this occurs</i> <i>Support is available from his personal tutor and student support at university</i> <i>Practice supervisor and/or practice assessor will monitor compliance</i>	<i>Weekly and at end of placement</i>	<b>Date: 13/6/2019</b>  <b>Comments:</b> <i>Stuart has not fully addressed the reasons for his attire and poor attendance. This is to be further investigated on return to Uni by his personal tutor and Student support</i>  <i>Stuart will need to demonstrate better attendance and professional attire at his next placement</i>
<i>Professional Value 15</i> <i>The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement</i>	<i>Stuart must attend on time every pre-agreed shift for the remainder of the placement</i> <i>If Stuart is unwell, then he must follow university policy regarding notifying placements and the university for absence</i> <i>Stuart must provide his practice supervisor access to the attendance sheet so that attendance can be recorded</i>	<i>Stuart is responsible to ensure this occurs</i> <i>Support is available from his personal tutor and student support at university</i> <i>Practice supervisor and/or practice assessor will monitor compliance</i>		
<b>Student's Name:</b> <i>Stuart Marl</i>		<b>Signature:</b> <i>SMarl</i>	<b>Date:</b> <i>29/5/2019</i>	<b>Practice Assessor</b> <b>Name:</b> <i>Sam Makepiece</i>  <b>Signature:</b> <i>SMakepiece</i>
<b>Practice Assessor's Name:</b> <i>Sam Makepiece</i>		<b>Signature:</b> <i>SMakepiece</i>	<b>Date:</b> <i>29/5/2019</i>	
<b>Academic Assessor's Name:</b> <i>Holly Grey</i>		<b>Signature:</b> <i>HGrey</i>	<b>Date:</b> <i>29/5/2019</i>	

## Section 5 Ongoing Achievement Record (OAR)

### Ongoing Achievement Record

**The Ongoing Achievement Record (OAR)** summarises the student's achievements in each placement and with the Practice Assessment Document (PAD) provides a comprehensive record of professional development and performance in practice across all 3 parts

**The Practice Assessor** completes the summary page at the end of each placement. At the end of each Part they must also complete the progression statement.

Also listed in the OAR – is the Achievement of those proficiencies that can be completed in either Part 2 or Part 3. The Practice Assessor needs to complete this at the end of Part 2 identifying those proficiencies not met and needing to be achieved in Part 3. The Practice assessor will also need to do this at the end of Part 3 – at which point all Proficiencies **MUST** have been achieved.

**The Academic Assessor** confirms the completion of each placement, adds comments and at the end of each Part completes the progression statement.

Organisation/Placement Provider: <i>St Elsewhere Community Trust</i>		
Name of Practice Area: <i>Rapid Response Team</i>		
Type of Experience: <i>Acute Community Placement</i>		
Telephone/email contact: <i>01234 56789/RRT@stelsewhere.nhs</i>		
Start Date: <i>8/04/2019</i> . End Date: <i>14/06/2019</i> No. of Hours <i>37.5 hours per week</i>		
Summary of students strengths and areas for further development: <i>Stuart is capable of being an active and positive member of the nursing team. When engaged he demonstrates motivation to learn and can apply knowledge to his practice and is very patient-centric in his nursing care. Stuart needs to work on his confidence and challenge himself more, but this will only be achieved if he fully attends placements and engages with the feedback process.</i>		
Has the student achieved the professional values?	Yes/No	
Has the student achieved the agreed proficiencies?	Yes/No	
Has the student achieved their agreed learning and development needs?	Yes/No	
Has the student completed the required hours?	Yes/No	
Has an Action Plan been put in place (if yes See PAD Document)	Yes/No	
<b>Student's Name:</b> <i>Stuart Marl</i>	<b>Signature:</b> <i>SMarl</i>	<b>Date:</b> <i>13/06/2019</i>
<b>Practice Assessor's Name:</b> <i>Sam Makepiece</i>	<b>Signature:</b> <i>SMakepiece</i>	<b>Date:</b> <i>13/06/2019</i>
Academic Assessors Comments/Review of PAD document: (This can be completed following the final review) <i>The personal tutor will be following up with Stuart (appointment has been arranged) to discuss concerns raised in practice. The action plan written needs to be carried forward for his next placement and this will be discussed with his next practice supervisor/assessor</i> <b>Name:</b> <i>Holly Grey</i> <b>Signature:</b> <i>HGrey</i>		
		<b>Date:</b> <i>20/6/2019</i>

## Progression Statement for Part 1 and Part 2

To be completed at the end of each part by the Practice Assessor and the Academic Assessor

<b>Practice Assessor:</b>	
In addition to the achievement of professional values and proficiencies	
Has the student achieved the Episode of Care?	Yes/No
Has the student achieved Medicine Management?	Yes/No
I can confirm that I have been in communication with the Academic Assessor regarding the student's performance and status.	
I confirm that the student has participated in care (with guidance), achieved all the requirements of Part 1 and is performing with increasing confidence and competence.	
Practice Assessor: <i>(print name below)</i>	
Practice Assessor's signature:	Date:
I recommend that the student can progress to Part 2	
Academic Assessor: <i>(print name below)</i>	
Academic Assessor's signature:	Date:

## End of Programme Statement (Part 3)

<b>Practice Assessor:</b>	
In addition to the achievement of professional values and proficiencies	
Has the student achieved the Episode of Care 1?	Yes/No
Has the student achieved the Episode of Care	Yes/No
Has the student achieved Medicines	Yes/No
I confirm that I have been in communication with the Academic Assessor regarding the student's performance and achievement.	
I confirm that the student is practising independently with minimal supervision, achieved all the requirements of Part 3 and is leading and coordinating care with confidence.	
Practice Assessor: <i>(print name below)</i>	
Practice Assessor (Signature):	Date:

I have reviewed the assessment documentation and student reflections and can confirm the student has been assessed by the Practice Assessor as fit to practice safely and effectively with minimal supervision and I recommend the student for progression to the Nursing and Midwifery Council register for the United Kingdom.	
Student Name: <i>(print name)</i>	
Academic Assessor: <i>(print name below)</i>	
Academic Assessor's signature:	Date:

To be completed by Practice Assessor and the Academic Assessor

