

**Insert HEI logo**

**Name………………………………………………**

**Number…………………………………………..**

**Cohort…………………………........................**

**Personal Tutor…………………………………**

**England Nursing Associate**

**PRACTICE ASSESSMENT DOCUMENT**

**PAD 1**

## NAPAD, Standards of proficiency for nursing associates, (NMC 2018)

Please keep your Practice Assessment Document with you at all times in practice in order to review your progress with your Practice Supervisor, Practice Assessor and/or Academic Assessor

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## This work is in collaboration with HEE Regions across England involving a range of stakeholders including universities and practice partners. This Practice Assessment Document has been developed from the Pan London Practice Assessment Document for pre-registration nursing that was developed by the Pan London Practice Learning Group (PLPLG).

**Terminology**

Throughout the document the term student is used. “Student” has been used to be consistent with the terminology used by the NMC in their documentation *Standards for pre-registration Nursing Associate* Programmes (2018).

**`**

**Protected learning time**

Organisations must ensure that nursing associate students have protected learning time in line with one

of these two options (NMC 2018)

Option A: nursing associate students are supernumerary when they are learning in practice

Option B: nursing associate students who are on work-placed learning routes:

* are released for at least 20 percent of the programme for academic study
* are released for at least 20 percent of the programme time, which is assured

protected learning time in external practice placements, enabling them to develop

the breadth of experience required for a generic role, and

* protected learning time must be assured for the remainder of the required programme hours.

**Welcome to the Practice Assessment Document (PAD)**

**Student responsibilities**

This Practice Assessment Document is designed to support and guide you towards successfully achieving the criteria set out in the *Standards of proficiency for nursing associates* and *Standards for education and training* (NMC 2018).

The PAD makes up a significant part of your overall programme assessment. It will need to be processed through formal University systems. Continuous assessment is an integral aspect of assessment in practice and you are expected to show evidence of consistent achievement. You should engage positively in all learning opportunities, take responsibility for your own learning and know how to access support. You will work with and receive written feedback from a range of staff including Practice Supervisors and Practice Assessors and you are required to reflect on your learning.

You are responsible for raising concerns with a nominated person in the practice setting in a timely manner. You should also alert staff to any reasonable adjustments that may be required to support your learning.

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

The Ongoing Achievement Record (OAR) is a separate document that contains two parts. Part A summarises your achievements in each placement and with the main document provides a comprehensive record of your professional development and performance in practice. Part B has been developed by your university to reflect local requirements.

You are responsible for the safekeeping and maintenance of the PAD. It should be available to your Practice Supervisor, Practice Assessor and Academic Assessor at all times when you are in placement together with the OAR. Alterations should be made in this document by crossing through with one line, with a signature and date.

You will have access to confidential information when in practice placements. The PAD should not contain any patient/service user/carer identifiable information. Contents must not be disclosed to any unauthorised person or removed, photocopied or used outside the placement or university.

People must be offered the opportunity to give and if required withdraw their informed consent to student participation in their care and staff in practice will provide guidance as required. Before approaching any patient/service user/carer for feedback you must discuss with your Practice Supervisor/Practice Assessor who will facilitate consent.

**Practice Supervisor responsibilities** (Registered nurse/nursing associate or other registered health/social care professional)

In many practice areas the student will be supported by a number of Practice Supervisors. Some areas may adopt a team based approach due to the nature of the experience.

As a Practice Supervisor you have an important role in supporting and guiding the student through their learning experience to ensure safe and effective learning. This includes facilitating learning opportunities including any reasonable adjustments the student may need to get maximum benefit from the placement. It is your responsibility to contribute to the student’s assessment through the recording of regular feedback on their progress towards, and achievement of their proficiencies.

Specific feedback must be provided to the Practice Assessor on the student’s progress.

**Supervision in other placement areas** (i.e. those areas where there are no health/social care registrants)

A range of staff can support student learning and have a vital role in student learning and development though may not be contributing formally to assessment of proficiencies.

However, these staff members are encouraged to support learning and can provide valuable

student feedback within the PAD on the *Record of communication/additional feedback pages*.

**Practice Assessor responsibilities** (Registered nurse/nursing associate)

As a Practice Assessor you have a key role in assessing and confirming the student’s proficiency providing assurance of student achievements and competence. This includes facilitating learning opportunities including any reasonable adjustments the student may need to get maximum benefit from the placement. You will observe the student, conduct and record student assessments informed by student reflections, feedback from Practice Supervisors and other relevant people to confirm achievement. You will liaise with the Academic Assessor scheduling communication at relevant points.

There are numerous elements requiring assessment in practice. One or more Practice Supervisors can contribute to the assessment of some of the proficiencies in discussion with you, but they must be working in their scope of practice.

When assessing the student, you should take into account sources of evidence that encompass knowledge, skills, attitudes and the views of those receiving care. Comments should acknowledge those exceptional students who are exceeding expectations for their stage in practice or who have particularly commendable attitudes, behaviours, knowledge or skills.

If the student is not meeting the required standards this should be highlighted as a development need. If there is a cause for concern or a fitness for practice issue that requires prompt action, an Action Plan should be instigated to address specific needs or concerns within a specified timeframe. In the event of this, seek guidance from the Academic Assessor and/or senior practice representative.

**Academic Assessor responsibilities**

Academic Assessors are Registered Nurses or Registered Nursing Associate and are nominated for each

part of the educational programme. The same Academic Assessor cannot contribute to the student

assessment in consecutive parts. The Academic Assessor will work in partnership with the Practice Assessor

to evaluate and recommend the student for progression for each part of the educational programme. The

Academic Assessor will enable scheduled communication and collaboration with the Practice Assessor and

this communication can take a variety of forms.

**Flexibility in assessment approach**

In exceptional circumstances if a student does not have access to specific learning opportunities to enable

assessment of all the proficiencies in year 1/ PAD 1 they may be permitted to meet these in PAD 2 as per

their local university policy – see the university specific pages for details. Where required these proficiencies must be agreed by the practice assessor who must ensure she/he has liaised with the academic assessor. The student must then present PAD 1 at the beginning of year 2 to their practice assessor to ensure completion of the identified proficiencies in PAD 2.

On occasions students may also have the opportunity to meet additional proficiencies in Year 1/ PAD 1 as

per local university policy. These can be recorded on the ‘Additional proficiencies’ page in this PAD by the

Practice Assessor. Achievement of these must then be explored as part of the initial interview in PAD 2, as

further experience to consolidate these proficiencies may be required.

**All communications/ additional feedback (not already recorded in the scheduled interviews) from the Practice Supervisors, Practice Assessor and Academic Assessor and other staff members needs to be recorded on the relevant pages in the PAD.**

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

Assessment criteria in the PAD are based on the NMC *Standards of proficiency for nursing associates* (NMC 2018).

**Components of Assessment and Feedback (see individual university guidance/regulations)**

**Professional Values**: Professional Values reflect a number of proficiency statements and are captured under the 4 sections of The Code (NMC 2018). All must be achieved *by the end of each placement period.*

**Proficiencies:** These reflect aspects of the 6 Platforms, communication and relationship management skills and nursing procedures (NMC 2018). These can be assessed in a range of placements, but must be achieved at least once *by the end of the year. There may be occasions when a small number may be achieved in PAD 2 – depending on local university policy.*

**Episode of Care:** This holistic assessment(s) facilitates and demonstrates the student’s progress and must be achieved *by the end of the year.*

**Medicines Management**: There is one assessment included in each PAD and this must be achieved

*by the end of the year.*

**Patient/Service User/Carer Feedback Form:** Feedback will be sought in relation to how the student cared for the person receiving care. This is not formally assessed, but will contribute to overall student feedback.

**Recording Additional Experiences and Feedback:** There are additional pages for the student to record reflections on their own learning and pages to record communication and additional feedback from all those supporting learning and assessment.

**Ongoing Achievement Record:** The OAR summarises overall achievements and provides a comprehensive record of student development and overall performance.

###### **Process of practice assessment**

**Prior to placement:**

Student makes contact to obtain relevant information to support their preparation for practice (for placements external to workplace)



**Placement Orientation – see orientation checklist**

**Initial Interview**

Learning and development needs are identified and planned



**Mid-Point Interview**

Progress, learning and development needs are identified by the Practice Assessor



**Final Interview**

Progress and achievement are explored by the Practice Assessor, who also completes summary in OAR.

**Further information / guidance is included in the university specific pages (overleaf) and in the**

***Practice Assessment Document Guide***

Insert HEI guidelines.

2 pages maximum

This can include your AEIs assessment requirements such as number

of attempts and referral processes.

Reasonable adjustments are referred to in the PAD but you may wish

to add specific AEI processes here or in your student handbook.

**Criteria for Assessment in Practice**

**Overall Framework; these criteria should be achieved by the end of each year.**

Practising independently with minimal supervision, provides and monitors care, demonstrating increasing knowledge skills and confidence.

Guided participation in care and performing with increasing knowledge, skills and confidence.

Year 1

Year 2

## **Part 1: Guided participation in Care**

**‘Achieved’ must be obtained in all three criteria by the student**

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

**List of Practice Supervisors**

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name**  (please print) | **Job Title** | **Signature** | **Initials** | **Placement** |
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**List of Practice Assessors**

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

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| --- | --- | --- | --- | --- |
| **Name**  (please print) | **Job Title** | **Signature** | **Initials** | **Placement** |
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| **List of Academic Assessors**  A sample signature must be obtained for all entries within this document | | | | |
| **Name**  (please print) | **Job Title** | **Signature** | **Initials** | **Placement** |
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**Placement 1**

**Placement Provider:**

(e.g. Trust/Organisation)

**Name of Placement Area:**

**Type of Experience:**

(e.g. Community/Ward based)

**Placement Telephone Number:**

**Placement Contact Email:**

**Start Date………………….. End Date……….………. No. of Hours…………………**

**Nominated person to support student and address concerns** (e.g. Area Manager, Practice Educator or Student Coordinator)

**Name: Designation:**

**Contact email address:**

**Academic Assessor Details** (for part)**:**

**Name: Designation:**

**Contact email address:**

**Practice Assessor Details:**

**Name: Designation:**

**Contact email address:**

**Placement 1: Orientation**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **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 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:   * fire alarms * fire exits * fire extinguishers |  |  |  |  |
| Resuscitation policy and procedures have been explained Tel: .......................... |  |  |  |  |
| Resuscitation equipment has been shown and explained |  |  |  |  |
| The student knows how to summon help in the event of an emergency |  |  |  |  |
| The student is aware of where to find local policies   * health and safety * incident reporting procedures * infection control * handling of messages and enquiries * other policies |  |  |  |  |
| The student has been made aware of information governance requirements |  |  |  |  |
| The shift times, meal times and reporting sick policies have been explained |  |  |  |  |
| The student is aware of his/her professional role in practice. |  |  |  |  |
| Policy regarding safeguarding has been explained |  |  |  |  |
| The student is aware of the policy and process of raising concerns |  |  |  |  |
| Lone working policy has been explained (if applicable) |  |  |  |  |
| Risk assessments/reasonable adjustments relating to  disability/learning/pregnancy needs have been discussed (where disclosed) |  |  |  |  |
| **The following criteria need to be met prior to use** | | | | |
| The student has been shown and given a demonstration of the moving and handling equipment used in the placement area |  |  |  |  |
| The student has been shown and given a demonstration of the medical devices used in the  placement area |  |  |  |  |

**Placement 1: Initial Interview**

(This can be completed by a Practice Supervisor or Practice Assessor.

If completed by the PS they must discuss and agree with the PA) This meeting should take place within the first week of the placement

**Placement Area Name:**

|  |  |
| --- | --- |
| **Student to identify learning and development needs** (with guidance from the Practice Supervisor) | |
| **Taking available learning opportunities into consideration, the student and Practice Supervisor/Practice Assessor to negotiate and agree a learning plan.** | |
| **Outline of learning plan** | **How will this be achieved?** |
|  |  |
| Learning plan for placement agreed by Practice Assessor (where applicable) YES/NO  **Student’s Name: Signature: Date: Practice Supervisor/Assessor’s Name:**  **Signature: Date:** | |

**Professional Values in Practice**

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, 2018)*.* Professional Values reflect a number of proficiency statements and are captured under the 4 sections of The Code. (1 BAP 1.2)

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

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Achieved Mid-Point Yes/No** | **Initial/ Date** | **Achieved Final Yes/No** | **Initial/ Date (Final)** |
| **Prioritise people** | | | | |
| 1. The student maintains confidentiality in accordance with the NMC code.  (1 BAP 1.1) |  |  |  |  |
| 2. The student is non-judgemental, respectful and courteous at all times when interacting with patients/service users/carers and all colleagues. (1 BAP 1.10, BAP 1.11 A 1.8) |  |  |  |  |
| 3. The student maintains the person’s privacy and dignity, seeks consent prior to care, challenges discriminatory behaviour and advocates on their behalf. (1 BAP 1.4, 1 BAP 1.11, 3PMC 3.8, 3PMC 3.21) |  |  |  |  |
| 4. The student is caring, compassionate and sensitive to the needs of others. (1 BAP 1.11) |  |  |  |  |
| 5. The student understands their professional responsibility in adopting and promoting a healthy lifestyle for the well-being of themselves and others. (1 BAP 1.5,  1.6) |  |  |  |  |
| **Practise effectively** | | | | |
| 6. The student maintains consistent, safe and person- centred practice. (1BAP 1.11, 3PMC 3.1) |  |  |  |  |
| 7. The student is able to work effectively within the inter-disciplinary team demonstrating an awareness of the roles, responsibilities and scope of practice of the team members with the intent of building professional relationships. (1BAP 1.10, 4 WIT 4.1) |  |  |  |  |
| 8. The student makes a consistent effort to engage in the requisite standards of care and learning based on best available evidence.  (1 BAP 1.7, 1.15, 1.17) |  |  |  |  |
| **Preserve safety** | | | | |
| 9. The student demonstrates openness (candour), trustworthiness and integrity. (1 BAP 1.3) |  |  |  |  |
| 10. The student reports any concerns to the appropriate professional member of staff when appropriate e.g. safeguarding. (1BAP 1.3, 1BAP.1.12, 3PMC 3.7, 3PMC 3.24) |  |  |  |  |
| 11. The student demonstrates the ability to listen, seek clarification and carry out instructions safely. (A1.1, A1.7) |  |  |  |  |
| 12. The student is able to recognise and work within the limitations of own knowledge, skills and professional  boundaries and understand that they are responsible for their own actions. (1BAP 1.1, 1BAP 1.15) |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | **Achieved Mid-Point Yes/No** | **Initial/ Date** | **Achieved Final Yes/No** | **Initial/ Date (Final)** |
| **Promote professionalism and trust** | | | | | |
| 13. The student’s personal presentation and dress code is in accordance with the local policy. (1 BAP 1.16) | |  |  |  |  |
| 14. The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement.  (1BAP 1.1, 1BAP 1.16) | |  |  |  |  |
| 15. The student demonstrates that they are self-aware and can recognise their own emotions and those of others in different situations. (1BAP 1.8, 1BAP 1.10, 1BAP 1.15) | |  |  |  |  |
| **Mid-point assessment Practice Supervisor Name:**  **Reviewed and agreed by Practice Assessor Practice Assessor Name:** | **Signature:**  **Signature:** | |  | **Date:**  **Date:** | |
| **End point: Student reflection on meeting Professional Values** | | | | | |
| **Choose one example from your practice on this placement to demonstrate how you practice within the NMC Code** *(ensure confidentiality is maintained).* For each placement, please select a different section of The Code to reflect on.  **Student Name: Signature: Date:** | | | | | |
| **Final assessment - please add comments on Final Interview Page**  **Practice Assessor Name: Signature: Date:** | | | | | |

**If there are any issues/areas for concern, these must be recorded. ‘Not Achieved’ must trigger an Action Plan. This must involve the Practice Supervisor and the Practice Assessor (as appropriate) in liaison with the Academic Assessor.**

**Placement 1: Mid-Point Interview**

This discussion must take place half way through the placement

|  |
| --- |
| **Student’s self-assessment/reflection on progress**  Reflect on your overall progression referring to your personal learning needs, professional values and proficiencies. Identify your strengths and document areas for development. |
| **Knowledge:** |
| **Skills:** |
| **Attitudes and values:** |
| **Practice Assessor’s comments**  Discuss with the student their self-assessment and comment on their progression using the criteria for Assessment in Practice Descriptors, detailing evidence used to come to your decision. |
| **Knowledge:** |
| **Skills:** |
| **Attitudes and values:** |

**Placement 1: Mid-Point Review**

**Ongoing learning and development needs**

To be agreed between Practice Assessor and Student – sign and date all entries below

|  |  |
| --- | --- |
| **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.** | |
| **Learning and development needs** | **How will these be achieved?** |
|  |  |
| **Student’s Name: Signature: Date:**  **Practice Assessor’s Name: Signature: Date:**  *Any outstanding learning and development needs are to be discussed and documented at the final interview.* | |

**Placement 1: Final Interview**

This should take place towards the end of the placement

|  |
| --- |
| **Student’s self-assessment/reflection on progress**  Reflect on your overall progression referring to your personal learning needs, professional values and proficiencies. Identify your strengths and document areas for development. |
| **Knowledge:** |
| **Skills:** |
| **Attitudes and values:** |
| **Practice Assessor’s comments**  Discuss with the student their self-assessment and comment on their progression using the criteria for Assessment in Practice Descriptors, detailing evidence used to come to your decision. |
| **Knowledge:** |
| **Skills:** |
| **Attitudes and values:** |

**Please record any further comments on the next page**

**Learning and Development Needs**

To be agreed between the Practice Assessor and Student

|  |
| --- |
| **Practice Assessor to identify specific areas to take forward to the next placement** |

|  |
| --- |
| **Was an Action Plan required to support the student? YES / NO**  **If Yes, was the Academic Assessor informed? YES / NO** |

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

**Patient/Service User/Carer Feedback Form**

**Practice Supervisors/Practice Assessors should obtain consent from patients/service users/carers**

**who should feel able to decline to participate.**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Tick if you are: The Patient/Service User Carer/Relative** | | | | | |
| **How happy were you with the way the student …** | Very Happy  MC900423171[1] | Happy  MC900423169[1] | I’m not sure  MC900434403[1] | Unhappy  MC900423165[1] | Very unhappy  MC900423163[1] |
| **…cared for you?** |  |  |  |  |  |
| **…listened to you?** |  |  |  |  |  |
| **…understood the way you felt?** |  |  |  |  |  |
| **talked to you?** |  |  |  |  |  |
| **…showed you respect?** |  |  |  |  |  |

|  |
| --- |
| **What did the student do well?** |
| **What could the student have done differently?** |
| **Practice Supervisor/Practice Assessor:**  **Name: Signature: Date:**  **Student Name: Signature: Date:** |

***This form has been co-produced by Pan London Service Users across 4 fields of practice, 2013.* More pages can be downloaded as per University guidelines**

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

|  |
| --- |
| **Student Reflection:** Reflect on your learning from additional learning opportunities with members of the multi-disciplinary team who are supervising your learning and summarise below: |
|  |
| **Practice Supervisor’s Comments:**  **Practice Supervisor Name: Signature: Date:** |
| **Student Reflection:** Reflect on your learning from additional learning opportunities with members of the multi-disciplinary team who are supervising your learning and summarise below: |
| **Student Name: Signature: Date:** |
| **Practice Supervisor’s Comments:**  **Practice Supervisor Name: Signature: Date:** |

**More pages can be downloaded as per University guidelines**

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

|  |
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| **Practice Supervisor’s Comments:**  **Practice Supervisor Name: Signature: Date:** |
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| **Student Name: Signature: Date:** |
| **Practice Supervisor’s Comments:**  **Practice Supervisor Name: Signature: Date:** |

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

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| --- |
| **Student Reflection:** Reflect on your learning from additional learning opportunities with members of the multi-disciplinary team who are supervising your learning and summarise below: |
|  |
| **Practice Supervisor’s Comments:**  **Practice Supervisor Name: Signature: Date:** |
| **Student Reflection:** Reflect on your learning from additional learning opportunities with members of the multi-disciplinary team who are supervising your learning and summarise below: |
| **Student Name: Signature: Date:** |
| **Practice Supervisor’s Comments:**  **Practice Supervisor Name: Signature: Date:** |

**More pages can be downloaded as per University guidelines**

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

|  |
| --- |
| **Student Reflection:** Reflect on your learning from additional learning opportunities with members of the multi-disciplinary team who are supervising your learning and summarise below: |
|  |
| **Practice Supervisor’s Comments:**  **Practice Supervisor Name: Signature: Date:** |
| **Student Reflection:** Reflect on your learning from additional learning opportunities with members of the multi-disciplinary team who are supervising your learning and summarise below: |
| **Student Name: Signature: Date:** |
| **Practice Supervisor’s Comments:**  **Practice Supervisor Name: Signature: Date:** |

**More pages can be downloaded as per University guidelines**

**Record of communication/additional feedback**

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

|  |  |
| --- | --- |
| **Communication/additional feedback** | |
|  | |
| **Name:**  **Signature:** | **Designation:**  **Date:** |
| **Communication/additional feedback** | |
|  | |
| **Name:**  **Signature:** | **Designation:**  **Date:** |
| **Communication/additional feedback** | |
|  | |
| **Name:**  **Signature:** | **Designation:**  **Date:** |

**More pages can be downloaded as per University guidelines**

**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.

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

**More pages can be downloaded as per University guidelines**

**Assessment of Proficiencies**

Incorporating Platforms 1 – 6

Annexe A: Communication and relationship management skills

Annexe B: Procedures to be undertaken by the nursing associate

These proficiencies reflect the Standards of Proficiency for Nursing Associates (NMC 2018).

Assessment of Proficiencies are undertaken across the year. 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 year. If a proficiency is assessed as Achieved (YES) early in the year it is expected that the student maintains that level of competence.

The Grade Descriptors are ‘Yes’ (this proficiency has been achieved), ‘No’ (this proficiency has not been achieved). Refer to

Criteria for Assessment in Practice on page 7 for further details.

The Practice Supervisor can contribute to the assessment of some of these proficiencies by providing specific feedback regarding the

student level of performance and achievement to the Practice Assessor in line with the SSSA.

**Flexibility in assessment approach**

In exceptional circumstances if a student does not have access to specific learning opportunities to enable assessment of all the proficiencies in year 1/ PAD 1 they may be permitted to meet these in PAD 2 as per their local university policy – see the university specific pages for details. Where required these proficiencies must be agreed by the practice assessor who must ensure she/he has liaised with the academic assessor. The student must then present PAD 1 at the beginning of year 2 to their practice assessor to ensure completion of the identified proficiencies in PAD 2.

On occasions students may also have the opportunity to meet additional proficiencies in Year 1/ PAD 1 as per local university policy. These can be recorded on the ‘Additional proficiencies’ page in this PAD by the Practice Assessor. Achievement of these must then be explored as part of the initial interview in PAD 2, as further experience to consolidate these proficiencies may be required

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**PAD 1 Assessment of Performance:** The individual completing the assessment should draw on a range of observed experiences in which the student demonstrates the required knowledge, skills, attitudes and values to achieve high quality person-centred/family- centred care, ensuring all care is underpinned by effective communication skills.

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| **Contributes to the provision and monitoring of safe and compassionate evidence based care** | | | | | | | | |
|  | **YES = Achieved, NO = Not Achieved** | | | | | | | |
| Assessment 1 | | Assessment 2 | | Assessment 3 | | Assessment 4 | |
|  | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date |
| 1. Demonstrates an understanding of human development from conception to death to enable delivery of safe and effective care (3 PMC 3.1) |  |  |  |  |  |  |  |  |
| 2. Applies knowledge of commonly encountered mental, physical, behavioural and cognitive health conditions and maintains clear, accurate and timely records.  (3 PMC 3.3, 1 BAP 1.2, 1 BAP 1.14, A1.9) |  |  |  |  |  |  |  |  |
| 3. Understands and applies relevant legal, regulatory and governance requirements, policies, and ethical frameworks, including any mandatory reporting duties, to all areas of practice. (1 BAP 1.2) |  |  |  |  |  |  |  |  |
| 4. Works in partnership with people, families and carers to encourage shared decision- making to manage their own care  when appropriate. (1BAP 1.10, 3 PMC 3.5) |  |  |  |  |  |  |  |  |

***If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.***

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|  | **Contributes to the provision and monitoring of safe and compassionate evidence based care** | | | | | | | | |
|  | | **YES = Achieved, NO = Not Achieved** | | | | | | | |
| Assessment 1 | | Assessment 2 | | Assessment 3 | | Assessment 4 | |
|  | | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date |
| 5. Uses appropriate approaches to develop therapeutic relationships in providing an appropriate level of care to support people with a range of mental, physical, cognitive and behavioural health challenges. (1 BAP 1.9 A 3.1, 3.PMC 3.3) | |  |  |  |  |  |  |  |  |
| 6. Provides person centred care to people experiencing symptoms such as anxiety, confusion, pain and breathlessness using verbal and non-verbal communication and appropriate use of open and closed questioning. (A1.3, A1.4, A1.5, A2.8, B2.1, B2.5) | |  |  |  |  |  |  |  |  |
| 7. Takes appropriate action in responding promptly when a person’s condition has deviated from their normal state and they may be showing signs of deterioration or distress, considering mental, physical, cognitive and behavioural health. (3PMC 3.11, B1.2) | |  |  |  |  |  |  |  |  |
| 8. Observe and maintain comfort levels, rest and sleep patterns demonstrating understanding of the specific needs of the person being cared for. (3 PMC 3.8, B 2.1) | |  |  |  |  |  |  |  |  |

***If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.***

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|  | **Contributes to the provision and monitoring of safe and compassionate evidence based care** | | | | | | | | |
|  | | **YES = Achieved, NO = Not Achieved** | | | | | | | |
| Assessment 1 | | Assessment 2 | | Assessment 3 | | Assessment 4 | |
|  | | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date |
| 9. Maintains privacy and dignity in implementing care to promote rest, sleep and comfort and encourages independence where  appropriate. (3.PMC 3.8, B 2.4, B 2.6) | |  |  |  |  |  |  |  |  |
| 10. Observe and reassess skin and hygiene status and determines the need for intervention, making sure that the individual remains as independent as possible. (3PMC 3.10, B3.1) | |  |  |  |  |  |  |  |  |
| 11. Provides appropriate assistance with washing, bathing, shaving and dressing and uses appropriate bed making techniques. (B 2.2 B 3.2, B3.3) | |  |  |  |  |  |  |  |  |
| 12. Advises people with their diet and nutritional needs, taking cultural practices into account and uses appropriate aids to assist when needed. (3 PMC3.9, B4.2) | |  |  |  |  |  |  |  |  |
| 13. Can record fluid intake and output to identify signs and symptoms of dehydration or fluid retention, accurately record and escalate as necessary. (3PMC 3.9, B 4.3, B4.4) | |  |  |  |  |  |  |  |  |
| 14. Assists with toileting, maintaining dignity and privacy and managing the use of appropriate aids including pans, bottles and commodes. (3PMC 3.9, B5.2) | |  |  |  |  |  |  |  |  |

***If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.***

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| **Contributes to the provision and monitoring of safe and compassionate evidence based care** | | | | | | | | |
|  | **YES = Achieved, NO = Not Achieved** | | | | | | | |
| Assessment 1 | | Assessment 2 | | Assessment 3 | | Assessment 4 | |
|  | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date |
| 15. Selects and uses continence and feminine hygiene products, for example, pads, sheaths and  appliances as appropriate. (B5.2) |  |  |  |  |  |  |  |  |
| 16. Uses appropriate risk assessment tools to determine the ongoing support and intervention needed regarding an individual’s mobility and safety and the level of independence and self-care they can manage. (3 PMC 3.10, B6.1, B 6.2) |  |  |  |  |  |  |  |  |
| 17. Uses a range of appropriate moving and handling techniques  and equipment to support people with impaired mobility ensuring appropriate use of pressure relieving techniques. (B 2.3, B6.3, B6.4) |  |  |  |  |  |  |  |  |
| 18. Consistently utilises evidence based hand washing techniques.  (B8.6) |  |  |  |  |  |  |  |  |
| 19. Observes and responds rapidly to potential infection risks using appropriate guidelines and utilises personal protection  equipment appropriately. (B8.1 – B 8.5) |  |  |  |  |  |  |  |  |
| 20. Demonstrates understanding of safe decontamination and safe disposal of waste, laundry and sharps. (B8.7, B8.8) |  |  |  |  |  |  |  |  |

***If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.***

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| **Contributes to the provision and monitoring of safe and compassionate evidence based care** | | | | | | | | |
|  | **YES = Achieved, NO = Not Achieved** | | | | | | | |
| Assessment 1 | | Assessment 2 | | Assessment 3 | | Assessment 4 | |
|  | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date |
| 21. Effectively uses manual techniques and electronic devices to take, record and interpret vital signs to identify signs of improvement, deterioration or concern and  escalate as appropriate. (B1.2) |  |  |  |  |  |  |  |  |
| 22. Accurately measure weight and height, calculate body mass index and recognise healthy ranges and clinical significance  of low/high readings. (B1.1) |  |  |  |  |  |  |  |  |
| 23. Collect and observe sputum, urine (routine analysis) and stool specimens, interpreting findings and reporting as appropriate. (B1.5) |  |  |  |  |  |  |  |  |
| 24. Accurately undertakes person centred risk assessments proactively using established assessment and improvement tools and escalating hazards as appropriate. (5ISQC 5.3 5ISQC 5.4, B 6.2) |  |  |  |  |  |  |  |  |
| 25. Applies the principles of health and safety regulations to maintain safe work and care environments and proactively responds to potential hazards.  (5ISQC 5.1, 5ISQC 5.4), |  |  |  |  |  |  |  |  |

***If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.***

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| **Contributes to the provision and monitoring of safe and compassionate evidence based care** | | | | | | | | |
|  | **YES = Achieved, NO = Not Achieved** | | | | | | | | |
| Assessment 1 | | Assessment 2 | | Assessment 3 | | Assessment 4 | | |
|  | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date | |
| 26. Acts in line with appropriate local and national evidence-based frameworks to seek advice, report or escalate risks, and implement actions as appropriate to maintain the quality of care (5ISQC 5.6, 5ISQC 5.8) |  |  |  |  |  |  |  |  | |
| 27. Understand the principles of safe and effective administration and optimisation of medicines in accordance with local and national policies (3 PMC 3.15, B 10.1 – 10.10) |  |  |  |  |  |  |  |  | |
| 28. Recognises the different ways by which medicines can be prescribed and demonstrates the ability to recognise the effects of medicines, allergies, drug sensitivity, side effects, contradictions and adverse reaction (3 PMC 3.16, 3.17, B 10.4 – 10.10) |  |  |  |  |  |  |  |  | |
| 29. Demonstrates the ability to undertake accurate drug calculations ( B.10.2) |  |  |  |  |  |  |  |  | |

***If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.***

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|  | **Contributes to the provision and monitoring of safe and compassionate evidence based care** | | | | | | | | |
|  | | **YES = Achieved, NO = Not Achieved** | | | | | | | |
| Assessment 1 | | Assessment 2 | | Assessment 3 | | Assessment 4 | |
|  | | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date | Yes/No | Sign/Date |
| 30. Demonstrates an understanding of the roles of the different providers of healthcare and is able to work collaboratively in interdisciplinary teams across all sectors of health and social care. (6.CIC 6.1) | |  |  |  |  |  |  |  |  |
| 31. Demonstrate an understanding of the challenges of providing safe nursing care for people with co- morbidities and complex care needs including physical,  psychological and socio-cultural needs. (6CIC 6.2, 6CIC 6.3) | |  |  |  |  |  |  |  |  |
| 32. Understand the principles and processes involved in supporting people and families so that they can maintain their independence  and avoid unnecessary interventions and disruptions to their lives (6 CIC 6.4) | |  |  |  |  |  |  |  |  |
| 33. Provides accurate, clear, verbal, digital or written information when handing over care responsibilities to others. (A1.9, A1.10, A1.11) | |  |  |  |  |  |  |  |  |
| 34. Recognise and accommodates sensory impairments during all communications providing support for those using personal communication aids. (A 2.5, 2.6) | |  |  |  |  |  |  |  |  |

***If any proficiency has not been assessed or is not applicable to the Practice area, please leave blank.***

**Additional Proficiencies**

On occasions students may also have the opportunity to meet additional proficiencies in Year 1/ PAD 1 as per their local university

Policy. These can be recorded below by the Practice Assessor. Achievement of these must then be explored as part of the initial interview in

PAD 2, as further experience to consolidate these proficiencies may be required.

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

|  |  |  |  |
| --- | --- | --- | --- |
| **Proficiency** | **Achieved YES / NO** | **Comments** | **Signature of Practice Assessor / Date** |
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**Part 1 Episode of Care - Formative**

(This assessment is to support development/ feedback and can be facilitated by a practice supervisor)

There is also a summative assessment required before final submission of Part 1.

**Guidelines**

**The practice supervisor/assessor and student will identify an appropriate episode of direct care to enable the student to demonstrate effective communication and relationship management skills (Annex A) in promoting health and preventing ill health (2 PHPIH). Professionalism underpins all aspects of the student’s performance. (BAP 1)**

Students are required to use appropriate approaches and techniques considering the person’s motivation, capacity and need for reasonable adjustment applying understanding of mental capacity and health legislation as appropriate.

**Learning outcomes**

**The student is able to:**

1. Work in partnership with the person receiving care, their families and carers (where appropriate), to provide evidence based, compassionate

and safe nursing care (3PMC 3.5).

1. Demonstrate the underpinning communication skills for providing and monitoring care (3 PMC 3.4, A 1.2,1.5, 1.11)
2. Communicate effectively to support people to prevent ill health and manage any health challenges (2PHPIH 2.2)
3. Identify the impact of lifestyle choices on the individual’s mental and physical health and wellbeing and demonstrates the principles of health promotion and preventing ill health. (2 PHPIH 2.1)
4. Demonstrate effective skills for working in professional teams (4 WIT 4.1)
5. Demonstrate that they have maintained professional values and demonstrates knowledge of safety and safeguarding for the person receiving care and the carers and/or family. (1 BAP 1.1)

|  |  |  |
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|  | **Student reflection on an episode of care** | |
| **Within your reflection, describe the episode of care and how you communicated effectively to promote health and prevent ill health.** | | **What did you do well?**  **What would you have done differently?** |

|  |  |  |  |
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| **Practice Assessor feedback**  Based on the student’s reflection, your observation and discussion of the episode of care, please assess and comment on the following:  **Yes = Achieved, No = Not Achieved (Refer to Criteria for Assessment in Practice)** | | | |
| **Standard of proficiency** | **Yes/No** | **Comments** | |
| Applies the principles of health promotion and improvement as appropriate when caring for the individual and their families and demonstrate understanding of the importance of health screening. (2 PHPIH 2.1, 2.4, 2.7) |  |  | |
| Demonstrates understanding of the contribution of the individuals social circumstances, behaviours and lifestyle choices to their mental, physical and behavioural health outcomes. (2 PHPIH 2.6) |  |  | |
| Uses appropriate verbal and non-verbal communication skills to explain to the individual and family how their lifestyle choices may influence their health and checks understanding using clarification techniques. (A1.1, A1.3, A 1.4, A1.7, A2.2) |  |  | |
| Utilises a range of communication skills when working with others in the team, and recognises when to refer to others in order to provide an accurate response. (1.BAP 1.9, A2.7, A4.1) |  |  | |
| Recognises how a person’s capacity affects their ability to make decisions about their own care and to give or withhold consent. (3 PMC 3.21) |  |  | |
| **Student’s Name:**  **Practice Supervisor/Practice Assessor’s Name:**  **Signature: Date:** | | **Signature:** | **Date:** |

**Part 1 Episode of Care - Summative**

This assessment must be completed prior to submission of the completed Part 1.

This summative episode of care assessment must be undertaken by the Practice Assessor.

**Guidelines**

**The practice supervisor/assessor and student will identify an appropriate episode of direct care to enable the student to demonstrate effective communication and relationship management skills (Annex A) in promoting health and preventing ill health**

**(2 PHPIH). Professionalism underpins all aspects of the student’s performance. (BAP 1)**

Students are required to use appropriate approaches and techniques considering the person’s motivation, capacity and need for reasonable adjustment applying understanding of mental capacity and health legislation as appropriate.

**Learning outcomes**

**The student is able to:**

1. Work in partnership with the person receiving care, their families and carers (where appropriate), to provide

evidence based, compassionate and safe nursing care (3 PMC 3.5).

1. Demonstrate the underpinning communication skills for providing and monitoring care (3 PMC 3.4. A 1.2,1.5, 1.11)
2. Communicate effectively to support people to prevent ill health and manage their health challenges (2PHPIH 2.2)
3. Identify the impact of lifestyle choices on the individual’s mental and physical health and wellbeing and demonstrates the principles of health promotion and preventing ill health. (2 PHPIH 2.1)
4. Demonstrate effective skills for working in professional teams (4 WIT 4.1)
5. Demonstrate that they have maintained professional values and demonstrates knowledge of safety and safeguarding for the person receiving care and the carers and/or family. (1 BAP 1.1)

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| --- | --- | --- |
|  | **Student reflection on an episode of care** | |
| **Within your reflection, describe the episode of care and how you communicated effectively to promote health and prevent ill health.** | | **What did you do well?**  **What would you have done differently?** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Practice Assessor feedback**  Based on the student’s reflection, your observation and discussion of the episode of care, please assess and comment on the following:  **Yes = Achieved, No = Not Achieved (Refer to Criteria for Assessment in Practice)** | | | |
| **Standard of proficiency** | **Yes/No** | **Comments** | |
| Applies the principles of health promotion and improvement as appropriate when caring for the individual and their families and demonstrate understanding of the importance of health screening. (2 PHPIH 2.1, 2.4, 2.7) |  |  | |
| Demonstrates understanding of the contribution of the individuals social circumstances, behaviours and lifestyle choices to their mental, physical and behavioural health outcomes. (2 PHPIH 2.6) |  |  | |
| Uses appropriate verbal and non-verbal communication skills to explain to the individual and family how their lifestyle choices may influence their health and checks understanding using clarification techniques. (A1.1, A1.3, A 1.4, A1.7, A2.2) |  |  | |
| Utilises a range of communication skills when working with others in the team, and recognises when to refer to others in order to provide an accurate response. (1.BAP 1.9, A2.7, A4.1) |  |  | |
| Recognises how a person’s capacity affects their ability to make decisions about their own care and to give or withhold consent. (3 PMC 3.21) |  |  | |
| **Student’s Name:**  **Practice Supervisor/Practice Assessor’s Name: Signature: Date:** | | **Signature:** | **Date:** |

**Part 1 Medicines Management**

This assessment must be completed by the end of Part 1 where the student safely administers medicines to a group of patients/service users or a caseload of patients/service users in community settings.

During Part 1 the student should be developing their knowledge, skills and competencies in relation to the safe administration of medicines. This assessment should normally be undertaken with a small group of patients/service users or caseload.

The student must be allowed a number of practice opportunities to administer medicines under supervision prior to this assessment.

**The student must work within the legal and ethical frameworks that underpin safe and effective medicines management and work within national and local policies**

**Regulatory requirements:** *Standards of proficiency for nursing associates* (NMC 2018)*, The Code* (NMC 2015), *A Competency Framework for all Prescribers* (The Royal Pharmaceutical Society 2016)

The aim of this assessment is to demonstrate the student’s knowledge and competence in administering medications safely.

**Learning outcomes** (Annexe B 10.1 – 10.10)

**The student is able to:**

1. Demonstrate and apply knowledge to recognise how medicines act and interact in the systems of the body, their therapeutic actions, contraindications and side effects. (3 PMC 3.15, 3.16, A10.3)
2. Carry out an initial and continued assessment of people receiving care and their ability to self-administer their own medications. (B10.1)
3. Prepare medications where necessary, safely and effectively administer these via common routes, maintains accurate records and is aware of the laws, policies, regulations and guidance which underpin medicines management. (B10.4)
4. Safely and accurately perform medicines calculations for a range of medications. (1BAP 1.13, B10.2)
5. Coordinate the process and procedures involved in managing the safe discharge, move or transition between care settings of the person. (6 CIC 6.6)
6. Maintain safety and safeguard the patient from harm, including non-compliance, demonstrating understanding of the Mental Capacity Act (DH 2005) the Mental Health Act (DH 1983, amended 2007), where appropriate. (5ISQC 5.1)

|  |  |  |  |  |  |
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| **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.   * Right patient/service user * Right medication * Right time/Date/Valid period * Right dose/last dose * Right route/method * Special instructions |  | 11. | Describes/demonstrates the procedure in the event of reduced capacity and non-adherence |  |
|  | 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   * Asks patient/service user. * Checks prescription chart or identification band |  | 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 |  |

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| **Practice Assessor Feedback** |
|  |
| **Student reflection on learning and development** |
|  |
| **Student’s Name: Signature: Date:**  **Practice Assessor’s Name: Signature: Date:** |

**Action Plan**

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

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

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

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| --- | --- | --- | --- | --- |
| **Placement Name Date action plan initiated:** | | | | |
| **Nature of concern**  **Refer to Professional Value(s), Proficiency and/or Episode of Care (S**pecific**)** | **What does the student need to demonstrate;** *objectives and measure of success* **(M**easurable**, A**chievable and  **R**ealistic**)** | **Support available and who is responsible** | **Date for review**  **(T**imed**)** | **Review/feedback** |
|  |  |  |  | **Date:** |
| **Comments:** |
| **Student’s Name:** | **Signature:** | **Date:** | | **Practice Assessor** |
| **Practice Assessor’s Name:** | **Signature:** | **Date:** | | **Name:** |
| **Academic Assessor’s Name:** | **Signature:** | **Date:** | | **Signature:** |

**Action Plan**

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

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

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

|  |  |  |  |  |
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| **Placement Name Date action plan initiated:** | | | | |
| **Nature of concern**  **Refer to Professional Value(s), Proficiency and/or Episode of Care (S**pecific**)** | **What does the student need to demonstrate;** *objectives and measure of success* **(M**easurable**, A**chievable and  **R**ealistic**)** | **Support available and who is responsible** | **Date for review**  **(T**imed**)** | **Review/feedback** |
|  |  |  |  | **Date:** |
| **Comments:** |
| **Student’s Name:** | **Signature:** | **Date:** | | **Practice Assessor** |
| **Practice Assessor’s Name:** | **Signature:** | **Date:** | | **Name:** |
| **Academic Assessor’s Name:** | **Signature:** | **Date:** | | **Signature:** |

**PRACTICE HOURS**

***Please start a new page per placement***

***To be completed as per your local University Requirements***

**Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by a member of staff**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Date** | **Placement** | **Total Hrs** | **Staff**  **Initials** | **Shift Type** |  | **Date** | **Placement** | **Total Hrs** | **Staff**  **Initials** | **Shift Type** |
| Example of hours confirmation | | | | | | Sun | 1/7/19 | Pixie Ward | 7.5 | FF | E |
| Mon |  |  |  |  |  | Mon |  |  |  |  |  |
| Tue |  |  |  |  |  | Tue |  |  |  |  |  |
| Wed |  |  |  |  |  | Wed |  |  |  |  |  |
| Thu |  |  |  |  |  | Thu |  |  |  |  |  |
| Fri |  |  |  |  |  | Fri |  |  |  |  |  |
| Sat |  |  |  |  |  | Sat |  |  |  |  |  |
| Sun |  |  |  |  |  | Sun |  |  |  |  |  |
|  |  | **Weekly Total =** |  |  |  |  |  | **Weekly Total =** |  |  |  |
| Mon |  |  |  |  |  | Mon |  |  |  |  |  |
| Tue |  |  |  |  |  | Tue |  |  |  |  |  |
| Wed |  |  |  |  |  | Wed |  |  |  |  |  |
| Thu |  |  |  |  |  | Thu |  |  |  |  |  |
| Fri |  |  |  |  |  | Fri |  |  |  |  |  |
| Sat |  |  |  |  |  | Sat |  |  |  |  |  |
| Sun |  |  |  |  |  | Sun |  |  |  |  |  |
|  |  | **Weekly Total =** |  |  |  |  |  | **Weekly Total =** |  |  |  |
| Mon |  |  |  |  |  | Mon |  |  |  |  |  |
| Tue |  |  |  |  |  | Tue |  |  |  |  |  |
| Wed |  |  |  |  |  | Wed |  |  |  |  |  |
| Thu |  |  |  |  |  | Thu |  |  |  |  |  |
| Fri |  |  |  |  |  | Fri |  |  |  |  |  |
| Sat |  |  |  |  |  | Sat |  |  |  |  |  |
| Sun |  |  |  |  |  | Sun |  |  |  |  |  |
|  |  | **Weekly Total =** |  |  |  |  |  | **Weekly Total =** |  |  |  |

**Total hours of completed practice on this page Figures Words**

**Total hours of Sickness/Absence on this page Figures Words**

**Staff member:** I have checked the hours of experience recorded by the student,

Signed: **(Staff member)** Name (print):

Placement Area: \_\_\_­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

**Declaration by Student:** I confirm that the hours recorded on this sheet are a true and accurate account of the shifts I have worked.

Signed: : \_\_\_­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(Student)** Date:

**It is expected that the student will work a range of shifts to meet NMC Requirements**

|  |
| --- |
| **Shift Codes D = Day Shift, N= Night Shift, S= Sickness, A = Absent** |