

Assessment of Practice:
Children's Nursing

Degree programme NMC proficiencies

Assessment of Practice – Children’s Nursing

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Academic tutor name	
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This document remains the property of the University of Southampton and its care is the responsibility of the student named above. It must be presented on request to the University of Southampton.

Record of on-going achievement

My Assessment of Practice document is my “record of on-going achievement” for practice.

I consent to allow the processing of confidential data about me to be shared between successive mentors and with the relevant education providers in the process of assessing my fitness for practice.

I understand that this is an NMC requirement and that it is essential to the pursuance of my programme of study leading to registration

Student signature		Date	
Academic tutor signature		Date	

Protecting the public through professional standards: Accepting appropriate responsibility

There may be times when you are in a position where you may not be directly accompanied by your mentor, supervisor or another registered colleague. As your skills, experience and confidence develop, you will become increasingly able to deal with these situations. However, **you must only participate in interventions for which you have been fully prepared or in which you are properly supervised, and which are in keeping with Trust/practice policy.** If you have any doubts, discuss them as quickly as possible with your mentor or academic tutor.

I have read and understood the above statement			
Student signature		Date	
Academic tutor signature		Date	

All entries must maintain confidentiality of service users.

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Welcome to your assessment of practice document

This guide has been developed to help students and mentors to complete the Assessment of Practice (AOP).

Please read and become familiar with these pages.

We recommend they are read in conjunction with the Faculty and University student handbooks as well as the University regulations which can be accessed through SUSSED www.sussed.soton.ac.uk. Questions arising should be discussed with your academic tutor.

Assessment of practice represents 50% of the pre-registration nursing programme assessment requirements. In keeping with

NMC requirements, your Assessment of Practice document acts as your record of on-going achievement, which is an NMC requirement for registration.

Throughout this document there is guidance on the completion of all elements and more information can be sought from your academic tutor or on the Assessment of Learning in Practice Settings website www.southampton.ac.uk/alps

The mentor's assessment of your practice is fundamental to maintaining professional standards in nursing, so please remind your mentor to read these pages.

Section 1: Guidance for students

Remember, this is YOUR assessment document and you must accept responsibility for accurate completion

- prior to the start of the first practice experience, complete the recommended initial activities including a Professional Development Plan.
- actively participate in initial, interim and final interviews with mentor.
- identify and affirm learning needs with mentor.
- agree an action plan with your mentor for every practice experience.
- take advantage of every opportunity to work with mentor/supervising practitioner.
- take advantage of all the learning opportunities available.
- maintain your AOP document.
- provide your mentor with examples and evidence from practice to demonstrate how the competencies and skills have been achieved.
- make the AOP document available to mentors or academic staff on request.
- co-operate with your mentor to ensure the assessment is completed by the date(s) specified.
- submit the AOP to the Faculty office by the date specified in the assessment calendar.
- complete the on-line evaluation of each practice experience.

Nursing competencies – guiding principles

- Fitness for practice
- Fitness for purpose
- Fitness for award
- Fitness for professional standing

These guiding principles establish the philosophy and values underpinning the NMC's requirements for programmes leading to entry to the register as a nurse. The guiding principles relate to professional competence and fitness for practise. As practice takes place in the real world of healthcare delivery, it is inextricably linked to other aspects of fitness: fitness for purpose, professional academic awards and professional standing.

Practice competence

As a student you are deemed to be competent when you have successfully met the NMC standards for nursing at the end of an NMC approved programme. Practice competence may only be signed off by a mentor who has met the NMC additional criteria (NMC 2008). Graduate Key Skills and employability are the generic, transferable skills which all students develop during the course of their academic studies. These qualities include oral and written communication, competence in study skills, self-awareness and the ability to use reflection on and for learning. Employers are increasingly seeking evidence of skills development within graduate programmes. Mapping these skills in the AOP document enables you to monitor and demonstrate

the acquisition of transferable skills that are useful not only in improving your studies but which can also help you to make the transition to employment after University.

Transferable skills include: managing your own learning; using information technology; working with others including communication skills; numeracy and problem solving.

Progression points

The AOP document has 3 key sections which form the basis of the assessment in practice element of your programme and are taken from the NMC (2010) Standards for Pre-registration nursing

1. **Part 1 of the programme**
2. **Part 2 of the programme**
3. **Part 3 of the programme**

These sections are divided by “progression points” which must be achieved as required to allow you to progress from:

- Part 1 to part 2 of the programme (1st progression point)
- Part 2 to part 3 of the programme (2nd progression point)
- Part 3 of the programme to the NMC register (final progression point)

Within each part you will find the assessments you need to complete which are based on the NMC progression points and consist of competencies as well as essential skills. These are underpinned by four overarching domains

1. Professional values
2. Communication and interpersonal skills
3. Nursing practice and decision-making
4. Leadership, management and team working

These include Essential Skills as well as criteria which must be met in a practice setting where people are receiving care. In some situations you will find that these are achieved through simulation and this will usually be done within the simulated experiences you receive as part of your theoretical input.

If you would like to see the NMC (2010) Standards for pre-registration nursing they can viewed on the NMC website www.nmc-uk.org. On the ALPS website you will also find a link to these standards as well as an in-depth ‘mapping document’ www.southampton.ac.uk/alps

You must work towards all elements of your AOP document during each practice experience.

The following stages have been designed to meet the requirements for progression during the programme

Stage 1 = Part 1 of the programme **Participate and initiate**

Stage 2 = Part 2 of the programme **Initiate and manage**

Stage 3 = Part 3 of the programme **Lead, manage and delegate**

Assessment of competence

The programme is designed around three sequential levels of Outcome and Competence that you have to achieve at different stages of the programme. The levels and criteria for judging achievement are:

Level 1: Participate and initiate (begin to understand the role of the nurse, participate in service user care and begin to initiate care under the supervision of your mentor)

- Participates, or assists in skill and care delivery under the direct supervision of a supervising practitioner
- Acts appropriately when assisting supervising practitioners
- Has a knowledge base and an understanding of the emotional needs of the service user(s) that accompanies the delivery of 'hands on' skills
- Has a knowledge base and an understanding of the physiological needs of the patient
- Needs supervision when performing skills or care delivery
- Always ensures the safety and wellbeing of the service user(s)
- Initiates and prioritises an appropriate personal workload, seeking help when necessary
- Never undertakes anything beyond own stage of proficiency without instruction from, or referring to a supervising practitioner
- Is able to make an assessment of service user(s) needs and initiate care delivery (non-complex cases)

Level 2: Initiate and manage (able to deliver care to service user & family/carer, and manage own workload (non-complex cases))

- Is able to make an assessment of service user(s) needs and initiate care delivery
- Has a sound knowledge base and an ability to meet the emotional needs of the service user(s) that accompanies the delivery of 'hands on' skills
- After instruction and supervised practice can be trusted to practise safely in similar, uncomplicated situations
- May need guidance and support to perform skills and deliver care in unfamiliar or complex situations
- Always ensures the safety and well-being of the service user(s) and others
- Manages and prioritises personal workloads effectively
- Never undertakes anything beyond own stage of proficiency without instruction from, or consulting, a supervising practitioner
- Takes responsibility for, and can justify, own actions

Level 3: Lead, manage and delegate (able to lead, plan, deliver, evaluate and alter as appropriate care to a group of service users & families/carers for complex cases, case load manage, lead care teams, work in multi-disciplinary teams)

- Practices in accordance with the NMC Code (2009)
- Has the skills and ability to practise safely and effectively without the need for direct supervision
- Manages care in order to ensure the safety and well-being of service user(s) at all times
- Able to plan, deliver, delegate, evaluate and alter as appropriate care to service users & families/carers for complex cases
- Lead care teams, work in multi-disciplinary teams
- Support the learning of others
- Is aware of own professional development needs and plans for own personal and professional development
- Takes responsibility and delegates appropriately

How are you assessed in practice?

The assessment process involves you and your named mentor agreeing an action plan at the initial interview outlining the learning experiences available in your area, which will meet some, or all of the outcomes required to be completed in that practice experience. This will then be outlined in the action plan agreed with your mentor for that part of the programme. The interim interview provides an opportunity for you and your mentor to agree the items which have been successfully completed, and action plan to complete those remaining. The final interview allows you to review your learning and to consider your needs and requirements for progression to the next stage of the programme or to registration.

The practice experience provides a work-based environment to enable you to apply the theoretical knowledge and skills learnt in academic module/s. Modular learning outcomes tested through a practice based assessment and specified essential skills must be achieved in each placement.

Distinguishing between summative and formative assessment

We believe that assessment should be more than merely a test of how you perform at given points; rather, it should be an integral part of your learning and growing as a nurse. Assessment should not merely be done to you; rather, it should also be done with you, to guide and enhance your learning. You therefore have a summative assessment at the end of each placement. At all other stages you will be given feedback that will enable you to enhance your learning through the progressive stages. Formative assessment evaluates your progress and provides feedback on your development of knowledge, skills and abilities without passing any formal and final judgement. Summative assessment is the process of evaluating your learning at key progression points in the programme. This will be undertaken at the final interview of each practice experience and your mentor will make the decision whether you have passed that practice experience and for placements 2 and 4 whether you have met the progression criteria. At the end of practice experience 6 your mentor will make the decision whether or not you are eligible to enter the register as a nurse.

Assessment in practice

Each practice experience requires an assessment. The assessment must be carried out by a qualified mentor. The assessment should usually involve one assessor (mentor) and one student but may include other assessors (e.g. new mentor being supervised). Sufficient time should be set aside to complete the assessment. Assessments should be carried out within the context of practice so that evidence of skills, attitudes and knowledge is captured. It may be appropriate to use a combination of assessment methods e.g. questioning and/or direct observation. Questioning allows the mentor to assess knowledge and attitudes, whilst observation measures accuracy of practice and level of autonomy.

Interim review: Formative assessment

As part of the assessment for the module, mentors will complete a formative assessment. Results will be discussed with you at the time of completion to ensure timely feedback so that, where identified, there are opportunities to improve prior to the summative assessment. Where learning needs are identified, feedback should be delivered with sensitivity and in a manner which will enhance learning. Learning needs should be made explicit in the comments section and should be written by both student and mentor following the assessment. If at this stage there are areas that you may not achieve please contact your academic tutor.

Final Review: Summative assessment

Near to the end of the practice experience (or at least following a minimum of four weeks in one practice area) a summative assessment is completed. Results will be discussed with you at the time of completion to ensure timely feedback. Where learning needs are identified, feedback should be delivered with sensitivity and in a manner which will enhance learning. Comments should be written by both student and mentor following the assessment. If a fail is recorded, any learning needs must be documented and made explicit in the comments section.

Skills log

In section 9 you will find a number of clinical skills which are designated as either required or additional as well as space for you to keep a record of any skills which you may have undertaken within your practice experiences. You must ensure that you work with the appropriate level of supervision and do not undertake skills which your mentor feels you are not ready to undertake. AT ALL TIMES you must also adhere to local policy.

Meeting EU directive 2005/36/EC

In section 10 you will find the EU directives. As a student studying to become a registered nurse in the field of adult nursing you must achieve EU directive 2005/36/EC and gain experience in:

- General and specialist medicine
- General and specialist surgery
- Child care and paediatrics
- Maternity care
- Mental health
- Care of the older person
- Home nursing

Identifying and planning how you will meet this directive will be undertaken in conjunction with your academic tutor but please ensure that you discuss each of these with your mentor in practice to determine whether the opportunity will arise in that practice experience.

For more information and guidance on meeting this EU directive, please visit the ALPS website www.southampton.ac.uk/alps

Supplementary medicines

In section 11 identifies the specific medicines management competencies expected of a newly registered nurse in any care environment and is based upon the NMC Standards for Medicine management (2004).

Acuity skills

In section 12 children's nurses will have additional section where they need to record competence in acuity skills.

Section 2: Guidance for mentors

Introduction

Students will normally acquire knowledge, initially in discrete areas (**Participates**) then, with guidance, quickly start to make connections between these areas (**Initiates**) then be able to draw on knowledge gained from a variety of sources and apply it to the situation at hand (**Manages**). Finally the student will begin to lead, manage and delegate care developing skills in the supervision and support of staff. Use of reflection helps guide the student in linking theory and practice. It also helps the student to identify areas where their knowledge is lacking and further research/reading is required. Skill development is fostered through observation in the first instance, as you guide the student through the stages of skill acquisition, highlighting the knowledge underpinning the skill. The student will then practice with your direct supervision. Once you and the student agree they understand what is required, the student should be offered the opportunity to undertake the skill under indirect supervision, on the understanding that you will check the completed work. Once confident that the student performs the skill competently and demonstrates the required knowledge, underpinning the skill, the student is deemed competent. Further practice will facilitate maintenance and enhancement (such as transferability) of that skill.

All team members, mentors, and associate mentors may be involved in facilitating the student's learning. However it is the mentor who is accountable for the final assessment and completion of the assessment documentation. A fundamental requirement of every registered nurse is to support and facilitate students in meeting their learning needs during practice experiences. In some cases, students will require clear guidance and support in developing those aspects of their practice that have been identified to them as being below the required standard. Involvement of the University academic tutor at an early stage will ensure appropriate support is available for the student and you to facilitate the student in improving their practice to achieve the proficiencies. An action plan will be agreed which clearly identifies areas for improvement. You should inform the student and the academic tutor of the student's progress in meeting the requirements of the action plan so that failing to achieve proficiencies is not an unexpected event for any of the parties involved.

You must remember that as the registered practitioner you are responsible for the assessment process and you need to have confidence in your judgement. Please be certain that the student has achieved the appropriate competency level, before awarding a pass. If you are concerned that the student may not be able to achieve the required level, you must alert the academic tutor so that appropriate support can be offered to both the student and you. It is important that the student is not given 'the benefit of the doubt' when assessing.

Assessment of Practice Document

Each student has an assessment of practice (AOP) document which is shared with the mentor throughout the practice experience. This forms the basis of regular discussion of learning needs and also ensures records of achievement are completed regularly.

Each placement requires a clinical assessment. The assessment must be carried out by a qualified mentor who has relevant expertise in assessment. The assessment of performance should involve one assessor (mentor) and one student. Sufficient time should be set aside to complete the assessment.

Assessments should be carried out within the context of practice so that evidence of skills, attitudes and knowledge is captured.

It may be appropriate to use a combination of assessment methods e.g. questioning and/or direct observation.

Questioning allows the mentor to assess knowledge and attitudes, whilst observation measures accuracy of practice and level of autonomy.

Interim review: Formative assessment

As part of the assessment for the module, mentors will complete a formative (practice) assessment using the specified assessment in the AOP document. Results should be discussed with the student at the time of completion to ensure timely feedback so that where identified, there are opportunities to improve prior to the summative assessment. Where learning needs are identified, feedback should be delivered with sensitivity and in a manner which will enhance learning. Learning needs should be made explicit in the comments section and should be written by both student and mentor following the assessment.

Final review: Summative assessment

Near to the end of the practice experience (or at least following a minimum of four weeks in one practice area) a summative assessment is completed of the specified assessment in the AOP document. Results should be discussed with the student at the time of completion to ensure timely feedback. Where learning needs are identified, feedback should be delivered with sensitivity and in a manner which will enhance learning. Comments should be written by both student and mentor following the assessment. If a fail is recorded, any learning needs must be documented and made explicit in the comments section.

Questions that you may want to consider when making an assessment

- Has the student met the performance criteria for achieving a pass?
- Can the student discuss the knowledge underpinning their practice?
- Does the student's self-assessment accurately reflect their performance?

The following guidance has also been developed to help your decision making.

Assessment decision	Criteria
PASS	The student has consistently demonstrated achievement of all of the specified assessment.
FAIL	The student has failed to consistently demonstrate achievement of all the specified criteria.

Achieving and maintaining competencies and skills

Students must achieve and **maintain** each stage of proficiency and skill in order to:

- ensure standards of service user care are maintained.
- progress from each part of the programme.
- prepare for the responsibilities of registration – end of the 2nd part of the programme.
- enter the register – end of the 3rd part of the programme.

First progression point criteria

Criteria that must be met as a minimum requirement by progression point one in any practice setting where people are receiving care, or through simulation.

Areas associated with safety and safeguarding people of all ages, their carers and their families		Related competency domains
1.	Demonstrates safe, basic, person-centred care, under supervision, for people who are unable to meet their own physical and emotional needs.	Professional values Communication and interpersonal skills Nursing practice and decision making
2.	Meets people's essential needs in relation to safety and security, wellbeing, comfort, bowel and bladder care, nutrition and fluid maintenance and personal hygiene, maintaining their dignity at all times.	Professional values Communication and interpersonal skills Nursing practice and decision making
3.	Seeks help where people's needs are not being met, or they are at risk.	Communication and interpersonal skills Nursing practice and decision making Leadership, management and team working
4.	Is able to recognise when a person's physical or psychological condition is deteriorating, demonstrating how to act in an emergency and administer essential first aid.	Nursing practice and decision making Leadership, management and team working
5.	Demonstrates an understanding of how to work within legal and professional frameworks and local policies to safeguard and protect people, particularly children, young people, and vulnerable adults.	Professional values
6.	Is able to recognise, and work within, the limitations of their own knowledge and skills and professional boundaries, understanding that they are responsible for their own actions.	Professional values Nursing practice and decision making
7.	Demonstrates the ability to listen, seek clarity, and carry out instructions safely.	Professional values Communication and interpersonal skills Nursing practice and decision making Leadership, management and team working
8.	Uses and disposes of medical devices safely under supervision according to local and national policy, reporting any incidents or near misses.	Professional values Nursing practice and decision making
9.	Understands and works within the laws governing health and safety at work. Demonstrates safe manual handling techniques, and understands how nurses can help reduce the risk of infection, including effective hand washing.	Professional values Communication and interpersonal skills Nursing practice and decision making
10.	Recognises signs of aggression and takes appropriate action to keep themselves and others safe.	Communication and interpersonal skills Nursing practice and decision making
11.	Safely and accurately carries out basic medicines calculations.	Professional values Nursing practice and decision making
12.	Demonstrates safe and effective communication skills, both orally and in writing.	Communication and interpersonal skills Nursing practice and decision making

Areas associated with professional values and expected attitudes and behaviours towards people, their carers and their families		Related competency domains
13.	Displays a professional image in their behaviour and appearance, showing respect for diversity and individual preferences.	Professional values Communication and interpersonal skills Nursing practice and decision making
14.	Demonstrates respect for people's rights and choices.	Professional values Communication and interpersonal skills Nursing practice and decision making
15.	Acts in a manner that is attentive, kind, sensitive, compassionate and non-discriminatory, that values diversity and acts within professional boundaries.	Communication and interpersonal skills Nursing practice and decision making Leadership, management and team working
16.	Understands the principles of confidentiality and data protection. Treats information as confidential, except where sharing is required to safeguard and protect people.	Communication and interpersonal skills Nursing practice and decision making Leadership, management and team working
17.	Practises honestly and with integrity, applying the principles of <i>The code: Standards of conduct, performance and ethics for nurses and midwives</i> (2008) and the <i>Guidance on professional conduct for nursing and midwifery students</i> (2009).	Professional values Communication and interpersonal skills Nursing practice and decision making Leadership, management and team working
18.	Acts in a way that values the roles and responsibilities of others in the team and Interacts appropriately.	Professional values Communication and interpersonal skills Nursing practice and decision making Leadership, management and team working

Second progression point

Criteria that must be met as a minimum requirement by progression point two in any practice setting where people are receiving care, or through simulation.

Criteria		Related competency domains
1.	Works more independently, with less direct supervision, in a safe and increasingly confident manner.	Professional values Communication and interpersonal skills Nursing practice and decision making Leadership, management and team working
2.	Demonstrates potential to work autonomously, making the most of opportunities to extend knowledge, skills and practice.	Professional values Communication and interpersonal skills Nursing practice and decision making Leadership, management and team working

Entry to the register - KSF Dimensions, Levels and Indicators for band 5 post

Core/Specific	Number	Dimension	Foundation Gateway (Subset Outline)	
			Level	Indicator
Core	C1	Communication	2	A, B, C, D, E
Core	C2	Personal and people development	2	A, B, C, E, F
Core	C3	Health safety and security	2	A, C, D, F
Core	C4	Service improvement	1	A, B, C, D
Core	C5	Quality	2	A, B, C, D, E
Core	C6	Equality and diversity	1	A, B, C, D, E
Specific	HWB2	Assessment and care planning to meet health and wellbeing needs	2	A, B, C, D, E, F
Specific	HWB5	Provision of care to meet health and wellbeing needs	3	A, B, C, E, H, U
Specific	HWB6	Assessment and treatment planning	1	A, B, C, D, E, F
Specific	HWB7	Interventions and treatments	2	A, B, C, D, E, F, G
Specific	G6	People management	1	C, E

KSF role outlines provided by Southampton University Hospital Trust

Dimension	Subset outline	Level indicators
Communication	Level 2: Communicate with a range of people on a range of matters	<ul style="list-style-type: none"> a) communicates with a range of people on a range of matters in a form that is appropriate to them and the situation. b) improves the effectiveness of communication through the use of communication skills. c) constructively manages barriers to effective communication. d) keeps accurate and complete records consistent with legislation, policies and procedures. e) communicates in a manner that is consistent with relevant legislation, policies and procedures.
Personal and people development	Level 2: Develop own knowledge and skills and provide information to others to help their development	<ul style="list-style-type: none"> a) assesses and identifies: <ul style="list-style-type: none"> - feedback from others on own work. - how s/he is applying knowledge and skills in relation to the KSF outline for the post. - own development needs and interests in the current post. - what has been helpful in his/her learning and development to date. b) takes an active part in the development review of own work against the KSF outline for the post with their reviewer and suggests areas for learning and development in the coming year. c) takes responsibility for own personal development and takes an active part in learning opportunities. e) keeps up-to-date records of own development review process. f) offers information to others when it will help their development and/or help them meet work demands.
Health, safety and security	Level 2: Monitor and maintain health, safety and security of self	<ul style="list-style-type: none"> a) identifies and assesses the potential risks involved in work activities and processes for self and others. c) undertakes work activities consistent with: <ul style="list-style-type: none"> - legislation, policies and procedures - the assessment and management of risk. d) takes the appropriate action to manage an emergency summoning assistance immediately when this is necessary. f) supports others in maintaining health, safety and security.
Service improvement	Level 1: Make changes in own practice and offer suggestions for improving services	<ul style="list-style-type: none"> a) discusses with line manager/work team the changes that need to be made in own practice and the reasons for them. b) adapts own practice as agreed and to time seeking support if necessary. c) effectively carries out tasks related to evaluating services when asked. d) passes on to the appropriate person constructive views and ideas on improving services for users and the public.
Quality	Level 2: Maintain quality in own work and encourage others to do so	<ul style="list-style-type: none"> a) acts consistently within legislation, policies, procedures and other quality approaches and encourages others to do so b) works within the limits of own competence and levels of responsibility and accountability in the work team and organisation c) works as an effective and responsible team member d) prioritises own workload and organises own work to meet these priorities and reduce risks to quality e) uses and maintains resources efficiently and effectively and encourages others to do so
Equality and diversity	Level 1: Act in ways that support equality and value diversity	<ul style="list-style-type: none"> a) acts consistently with legislation, policies, procedures and other quality approaches and encourages others to do so. b) works within the limits of own competence and levels of responsibility and accountability in the work team and organisation. c) works as an effective and responsible team member. d) prioritises own workload and organises own work to meet these priorities and reduce risks to quality. e) uses and maintains resources efficiently and effectively and encourages others to do so.

Dimension	Subset outline	Level indicators
Assessment and care planning to meet health and wellbeing needs	Level 2: Contribute to assessing health and wellbeing needs and planning how to meet those needs	<ul style="list-style-type: none"> a) explains the purpose of assessing health and wellbeing needs to the people concerned. b) respects people's dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent. c) assists in the assessment of people's health and wellbeing and related needs and risks as agreed with the care team and consistent with legislation, policies and procedures. d) records and reports back accurately and fully on the assessments undertaken and risks identified. e) offers to the team his/her own insights into the health and well-being needs and wishes of the people concerned. f) makes suggestions on the care, protection and support that will be needed and how this might relate to his/her own work.
Provision of care to meet health and wellbeing needs	Level 3: Plan, deliver and evaluate care to meet people's health and wellbeing needs	<ul style="list-style-type: none"> a) respects people's dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent. b) identifies with the people concerned: <ul style="list-style-type: none"> - goals for the specific activities to be undertaken within the context of their overall care plan and their health and wellbeing needs - the nature of the different aspects of care - the involvement of other people and/or agencies - relevant evidence-based practice and/or clinical guidelines. c) prepares appropriately for the care to be undertaken. e) takes the appropriate action to address any issues or risks. h) makes accurate records of the activities undertaken and any risks. u) undertakes care in a manner that is consistent with: <ul style="list-style-type: none"> - evidence-based practice and/or clinical guidelines - multidisciplinary team working - his/her own knowledge, skills and experience - legislation, policies and procedures
Assessment and treatment planning	Level 1: Undertake tasks related to the assessment of physiological and/or psychological functioning	<ul style="list-style-type: none"> a) checks with relevant information sources to confirm the assessment tasks to be undertaken. b) respects individuals' dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent for the activities to be undertaken. c) prepares appropriately for the task to be undertaken taking into account any risks. d) undertakes and records specified tasks correctly, following delegated procedures or established protocols consistent with legislation, policies and procedures. e) monitors individuals whilst carrying out tasks and identifies and reports any changes in their health and wellbeing. f) reports findings in the appropriate format to the people who need them.
Interventions and treatments	Level 2: Contribute to planning, delivering and monitoring interventions and/or treatments	<ul style="list-style-type: none"> a) discusses the individual's treatment plan and their related condition/illness with the care team and understands his/her own role in delivering interventions and/or treatments within the plan. b) respects individuals' dignity, wishes and beliefs; involves them in shared decision making, and obtains their consent for the interventions and/or treatments to be undertaken. c) identifies any specific precautions or contraindications to the proposed interventions/treatments and takes the appropriate action. d) prepares for, undertakes and records interventions/treatments correctly, and in line with legislation, policies and procedures and/or established protocols. e) supports and monitors people throughout promptly alerting the relevant person when there are unexpected changes in individuals' health and wellbeing or risks. f) provides information to the team on how individuals' needs are changing and feedback on the appropriateness of the individual's treatment plan when there are issues. g) responds to, records and reports any adverse events or incidents relating to the intervention/treatment with an appropriate degree of urgency.
People management	Level 1: Supervise people's work	<ul style="list-style-type: none"> c) gives people support and opportunities to assess their own work and gives them clear, sensitive and appropriate feedback in a way that helps them improve and develop. e) reports poor performance to a relevant person for them to take action.

Grading tool

Criterion assessment grids are provided which are made up of separate rubrics containing descriptive statements.

- The mentor selects one descriptive indicator for each criterion assessed which best describes the student's performance. Each descriptive indicator is the minimum standard which must be achieved: if the student does not meet the descriptor then the lower indicator is selected
- The mentor should then provide a grade (A,B,C,D & E) which best represents the students' performance within that indicator's banding

The mentor can provide support through prompts during the observation or on request from the student. Such actions need to be reflected in the grade awarded depending on the level of supervision provided and comments recorded in the comments section of the AOP.

Where a student receives a grade in any of the borderline fail (D)/fail (E) columns the student will be required to make contact with their academic tutor so that appropriate support can be given. Mentors can request support from the practice support team led by the practice academic coordinator.

Outcomes - removing "achieved status"

Once a competence or skill has been achieved it does not have to be formally re-assessed. However, if the proficiency or skill is not maintained "achieved status must be removed. This can be done by any mentor or students' academic tutor.

If this happens:

- The standard of competence and or skill must be re-achieved before the next summative assessment point and before progression is ratified.
- If outcomes and/or skills are not re-achieved, the student will be failed in the AOP.

Section 3: Additional guidance for students and mentors

Incidents in practice

To be read in conjunction with the University of Southampton guidelines for reporting concerns for students safety available through www.southampton.ac.uk/alps or on request from a University staff member.

Whilst engaged in practice experiences, students may become involved in incidents or accidents. Should this happen, it is important that personnel at the Faculty of Health Sciences are informed, not only to enable the monitoring of health and safety issues but also to offer support and guidance should this be required. The academic tutor must be contacted by the student or their mentor and they will advise the student and mentor of the appropriate action to take. Definitions of what constitutes an “accident” and an “incident” or a “near miss” are available in the student handbook. If there is uncertainty regarding appropriate action to take, contact the Practice Academic Coordinator or academic tutor. In the event of such an occurrence, a form S24 should be completed by the student with help from their academic tutor, and guidelines for completion are included in the document. The form should be returned to the health and safety officer at the Faculty of Health Sciences.

Whenever students are involved in an “accident” or “incident” or a “near miss” and a practice organization “Incident Form” is completed, the student or mentor must contact the academic tutor and report this, even if they have only witnessed but were not directly involved in the situation. The academic tutor will inform the Programme Lead, the Practice Academic Coordinator and the Learning Environment Lead. Follow up action will be agreed and a record will be made in the student’s file. A copy of the incident form must be forwarded to the Programme Lead or academic tutor who will ensure safe storage in the student file.

NB: Please note – students must NEVER write or submit statements that have not been formally endorsed by the University.

Supernumerary status

The primary role of the student undertaking a practice experience is that of a learner and they are required to be supernumerary. Supernumerary status of students means that students are additional to the workforce requirement and staffing figures and we advocate the following principle:

“Students undertaking practice experiences as part of their programme of study are extra to the established numbers in the practice areas. They will be allocated a negotiated workload that is within their scope of practice that meets their required learning needs”.

We recognise that practice experiences vary and that staffing levels may also alter across the sectors, units and even within one unit/ward, team or department. Students are required to experience the 7 day a week, 24 hours per day nature of modern health care and as such should experience a variety of working patterns. Students **should not** interpret supernumerary status as being able to alter allocated working patterns or to have their personal requests constantly honoured.

Ultimately, supernumerary status means that the service would continue to be delivered without the student’s presence. One example of this would be that where a learning opportunity has been identified by the student **and** their mentor/practice educator as important in understanding the service user journey and this involves leaving the placement area to observe and learn from another experience or place of delivery of care e.g. theatre, outpatients, or another service, they are free to do so.

Social networking

The code states that nurses and midwives must “uphold the reputation of your profession at all times” (NMC 2008), as a student nurse you must “uphold the reputation of your chosen profession at all times” (NMC 2009). This means that conduct online and conduct in the real world should be judged in the same way, and should be at a similar high standard. As a student nurse you will jeopardise your ability to join the NMC register, if you:

- share confidential information online
- post inappropriate comments about colleagues or patients
- use social networking sites to bully or intimidate colleagues
- pursue personal relationships with patients or service users
- distribute sexually explicit material
- use social networking sites in any way which is unlawful.

This list is not intended to be exhaustive. If there is any doubt about whether a particular activity online is acceptable, it can be useful to think through a real-world analogy. For example, manipulated photos that are intended to mock individuals would be considered offensive if printed and pinned on workplace notice boards, and are no less offensive when shared online, even when privately shared between friends.

Academic integrity

All members of the University are expected to maintain high standards of academic conduct and professional relationships based on courtesy, honesty, and mutual respect. If you work with academic integrity there are a number of practices you must avoid which are explained in the academic integrity statement for students within your undergraduate student handbook. You are responsible for your own work and conduct, and for ensuring you neither fall accidentally into poor academic practice in your written work nor engage in practices which breach academic integrity.

Falsely claiming to have completed hours of practice or achievement of proficiencies or skills by falsification of signatures constitutes a breach of academic integrity and will result in disciplinary action.

Trouble shooting

Difficulties – what action should be taken?

If you are experiencing difficulties in fulfilling the requirements of the AOP, please address your concerns promptly. In the first instance queries should be addressed to the mentor or nurse in charge. If this does not resolve concerns, contact the academic tutor (first point of call), Programme Lead or Practice Academic Coordinator. (Please refer to the “Managing Student Issues in Practice” poster which should be displayed in your practice area and is contained in this document – see pages 266).

Experience not available

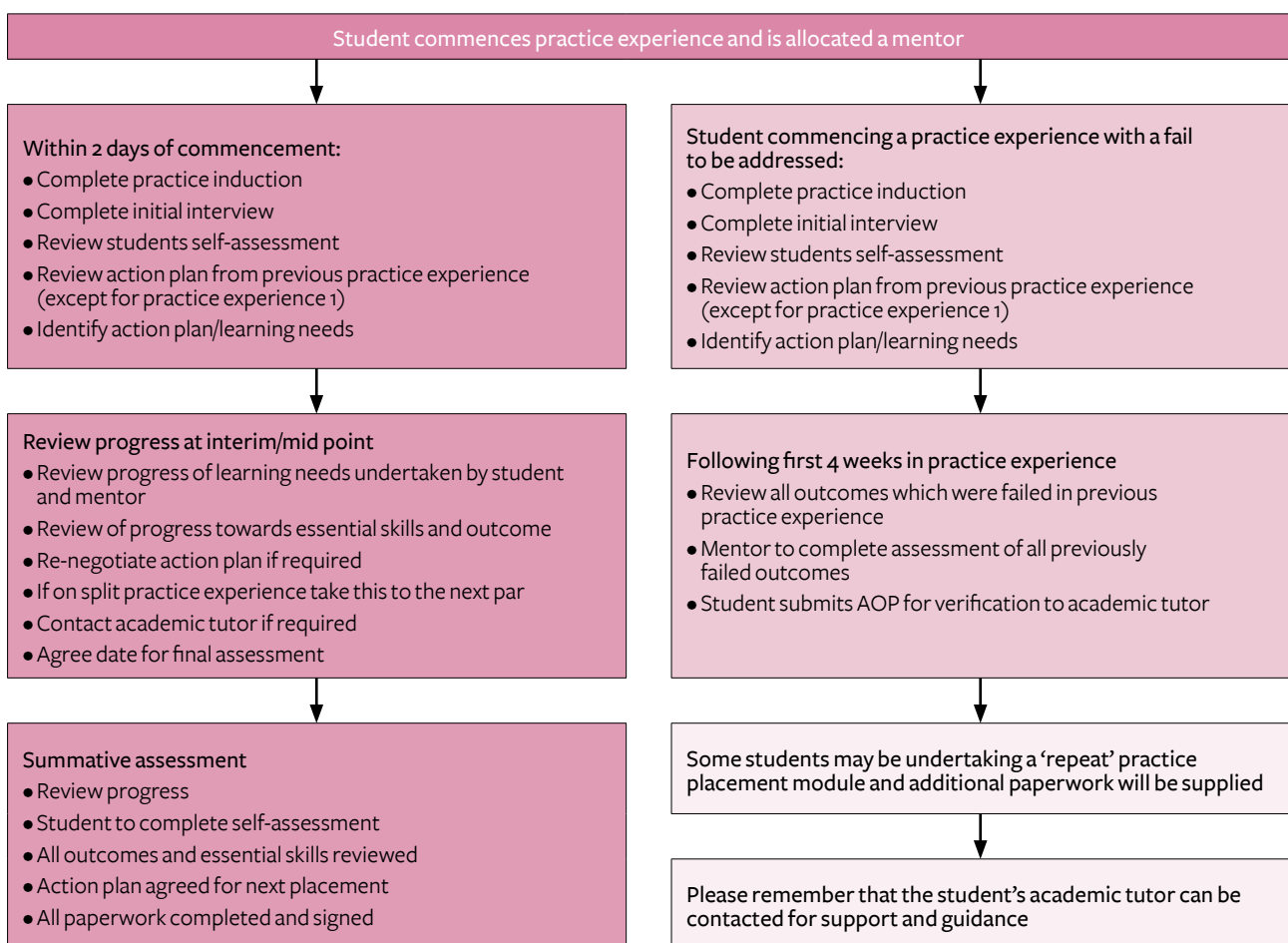
The competencies and the skills log have been designed for use in all practice settings. Please contact your academic tutor if difficulty in achieving proficiencies or skills occurs as identified at the interim interview in any practice experience.

Failed: what happens next?

If you do not complete all aspects of the summative assessment of practice at the first attempt you will be referred. Students are normally allowed a further attempt to complete their AOP. The competencies and or skills not achieved at the required level at the progression point will need to be achieved following the first 4 weeks of your next practice experience. Students who do not achieve the requirements of the AOP at the second attempt may be subject to discontinuation from the programme.

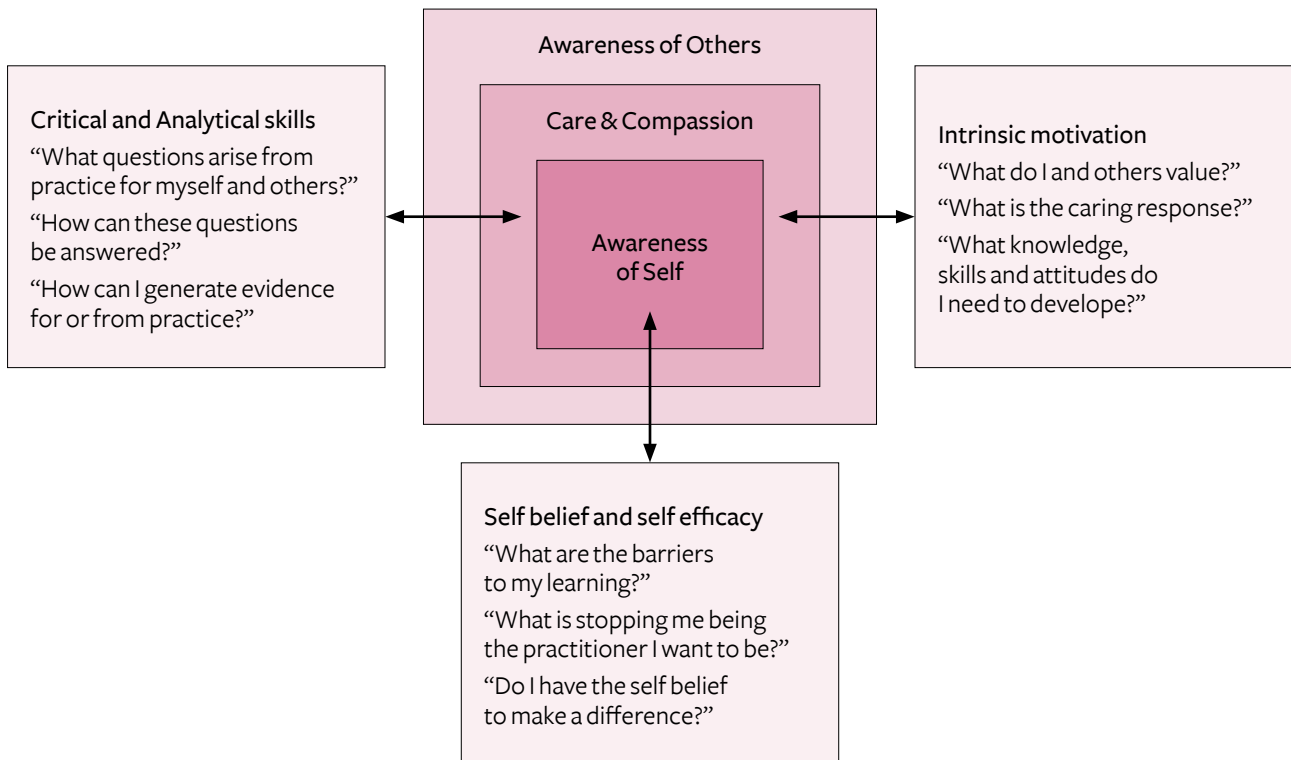
All students who fail a practice experience will be asked to meet with their academic tutor to discuss the next steps.

Undertaking and completing a practice experience



The Southampton Values Based Model

The model emphasises that self-awareness, awareness of others, and the values of care and compassion are central to both education and practice. From these core elements you are encouraged to identify your caring responses which provide the motivation to learn, consider and overcome barriers to your self-efficacy which may inhibit your learning or practice and identify areas of your practice for critical analysis and which require the generation of evidence for practice. The model may be diagrammatically represented as follows:



This model provides “prompt” questions designed to encourage “certain habits of mind” which Sellman (2009) identifies as an educational strategy which will promote the development of the “professionally wise” practitioner. These questions are designed to be of relevance to all learning in both theory and practice settings, and may form the basis of learning through a reflective cycle such as that of Discoll, (2002). Based on an awareness of the values of self and others, the prompt questions may be used to explore any aspect of learning. Examples for the use of the model could include: consideration of how to develop study skills; reflecting on an incident in practice; setting study priorities in relation to “theory” learning, or developing a research question.

Section 4: Record of mandatory skills

Skill	Date and initial when achieved							
	Year 1		Year 2		Year 3		Year 4	
Conflict resolution								
Equality, Diversity and Human Rights								
Fire Safety								
Health and safety								
Infection prevention and control								
Moving and handling								
Resuscitation								
Safeguarding children								
Safeguarding adults								

These skills are based on the NHS South Central Strategic Health Authority (2010) "Statutory and Mandatory Training Framework".
Please note that this record CAN NOT be used as evidence of updates for any external employer.

Section 5: Induction Programme for ALL Pre Registration Nursing & Midwifery Students

		Practice experience					
	Topics to be covered (Mentor initials and date when completed)	1	2	3	4	5	6
Personal issues	Discuss any adjustments re health or learning needs e.g. latex free gloves, dyslexia						
Introduction to staff	Include all staff working within the practice area						
Orientation to practice area	Include: <ul style="list-style-type: none"> • Staff toilets • Staff rest room/canteen • Where to keep personal belongings • Meal breaks • Relevant link areas and who to contact for visits • Inform of university link – name and contact details 						
Professional Conduct and Appearance	Discuss: <ul style="list-style-type: none"> • Dress code • Professional conduct specific to the practice e.g. working guidelines, etiquette in patients' homes, use of mobile phones 						
ID Badge	Explain policy for ID badges						
Confidentiality	Discuss importance of maintaining confidentiality and data protection						
Fire Policy/Procedure	Discuss: <ul style="list-style-type: none"> • Local policy & emergency numbers • Location of fire points, exits, fire extinguishers, fire blankets & Fire Policy • Explain procedure for evacuation & alarm tones • Awareness of risks associated with practice areas 						
Moving & Handling	Discuss: <ul style="list-style-type: none"> • Local policy and relation to practice area • Location of local moving & handling equipment 						
Organisational Policy Folders	Student should be aware of the following policies/procedures <ul style="list-style-type: none"> • Health & Safety • Infection Control • Professional Behaviour • Human Resources e.g. Harassment, Equal Opportunities, Complaints etc. • Occupational Health • Other policies specific to practice area • Smoking 						
Accident & Clinical Incidents	Explain: <ul style="list-style-type: none"> • Procedure for reporting accidents/near misses • Procedure for reporting adverse incidents/near misses • Policy for not being able to gain access to a patients' home (Community) 						
Resuscitation	Explain: <ul style="list-style-type: none"> • Procedure in event of an emergency e.g. cardiac arrest • Emergency contact numbers 						

		Practice experience					
	Topics to be covered (Mentor initials and date when completed)	1	2	3	4	5	6
Duty Rota	Discuss: <ul style="list-style-type: none"> • Location, distance and if/when lone working, any travel issues • Requests • Mentors • Number of students on shifts • Finishing at the end of the day • Nights/weekends/evenings (unsocial hours) Following current guidance from the University of Southampton School of Nursing and Midwifery please advise the students they may not change shifts						
Sickness & Absence	Explain policy for reporting in the event of sickness or absence including notification to Allocations department (School of Nursing & Midwifery).						
Transport Issues	Discuss issues related to car parking, hospital transport across sites, public transport						
Telephone	Discuss: <ul style="list-style-type: none"> • Contact details for Senior Nurse on duty, team members' mobiles • Student contact details • Bleep/pager system 						
Equipment	Explain: <ul style="list-style-type: none"> • Basic function of appropriate equipment and where and how to access 						
Infection Control	The student should be made aware of policies with specific reference to: <ul style="list-style-type: none"> • Needle stick injury • MRSA • Hand washing 						

Section 6: Part 1 of the programme

Nursing professional regulations

In order to enter the register, the NMC requires students to demonstrate achievement of specific outcomes by set “progression points” at the end of part 1, part 2, part 3 (entry to register).

Framework for assessment

In order to pass each practice experience and the end of part 1 progression point you must:

- Achieve all of the progression criteria prior to the progression point (if you achieve these in practice experience 1, they must be maintained in practice experience 2).
- Achieve all of the essential skills required at progression point 1
- Pass the grading in practice tool

Practice experience 1

Name of placement	
Name of Trust/Practice experience provider	
Name of mentor	
Name of buddy/associate mentor	
Phone number of placement	

Learning outcomes

Learning outcomes practice experience 1		Professionalism in Practice - On completion of this module students will consistently:
1.	practise according to the NMC standards of conduct, performance and ethics for nurses and midwives.	
2.	promote a professional image in behaviour and appearance at all times.	
3.	demonstrate adherence to organisational requirements for hygiene, uniform and dress code in order to limit, prevent and control infection.	
4.	demonstrate regular, punctual attendance and have knowledge of, or show application of organisational procedures for reporting absence from placement.	
5.	recognise and work within limitations of their knowledge, skills and professional boundaries.	
6.	demonstrate reflective skills when evaluating own practice.	
7.	demonstrate under supervision safe, person centred care which meets people’s essential care needs.	
Competencies	1st progression point or Essential skills cluster (ESC)	
Domain 1 Competency 1	All nurses must practise with confidence according to The Code: Standards of conduct, performance and ethics for nurses and midwives (2008) and within other recognised: ethical and legal frameworks.	<ul style="list-style-type: none"> • Displays a professional image in their behaviour and appearance, showing respect for diversity and individual preference [PP 13, ESC1(3)]. • People can trust a newly registered nurse to fully comply with hygiene, uniform and dress code in order to limit, prevent and control infection [ESC 24]. <ul style="list-style-type: none"> – Adheres to local policy and national guidelines on dress code for prevention and control of infection including: footwear, hair, piercing and nails. – Maintains a high standard of personal hygiene. – Wears appropriate clothing for the care delivered in all environments. • Acts with honesty and with integrity, applying the principles of The Code: Standards of conduct, performance and ethics for nurses and midwives (2008) and guidance of professional conduct for nursing and midwifery students (2009) [PP 17]. • Adopts a principled approach to care underpinned by the code (NMC, 2008) [ESC 4(3)].

Competencies		1st progression point or Essential skills cluster (ESC)
Domain 1 Competency 2	All nurses must practice in a holistic, non-judgmental, caring and sensitive manner: supports social inclusion: recognises and respects individual choice: and acknowledges diversity. Where necessary, they must challenge inequality, discrimination and exclusion from access to care.	<ul style="list-style-type: none"> ● Acts in a manner that is attentive, kind, sensitive, compassionate and non-discriminatory, that values diversity and acts within professional boundaries [PP15]. ● Is attentive and acts with kindness [ESC 5(1)]. ● Interacts with a person in a manner that is interpreted as warm, sensitive, kind, compassionate, making appropriate use of touch. ● Demonstrates respect for people's rights and choices [PP14, ESC 1(4), ESC 4 (2)]. ● Demonstrates safe, basic person centred care under supervision, for people who are unable to meet their own physical and emotional needs [PP1]. ● Is able to engage with people and build caring professional relationships [ESC 1(5)]. ● Takes a person- centred personalised approach to care [ESC 2]. ● Meets people's essential needs in relation to safety and security, wellbeing, comfort, bowel and bladder care, nutrition and fluid maintenance and personal hygiene, maintaining their dignity at all times [PP2]. ● Demonstrates effective hand hygiene and the appropriate use of standard infection control precautions when caring for people [ESC 22.1].
Domain 1 Competency 8	All nurses must practise independently, recognising the limits of their competence and knowledge. They must reflect on these limits and seek advice from, or refer to, other professionals where necessary.	<ul style="list-style-type: none"> ● Is able to recognise and work within the limitations of their own knowledge and skills and professional boundaries, understanding they are responsible for their own actions [PP 6]. ● Works within limitations of the role and recognises own level of competence [ESC 1 (2)]. ● Accepts delegated activities within limitations of own role, knowledge and skill [ESC15.1]. ● Demonstrates ability to listen, seek clarity and carry out instructions safely [PP7].
Domain 3 Competency 1	They must be able to recognise when the complexity of clinical decisions requires specialist knowledge and expertise, and consult or refer accordingly.	
Domain 4 Competency 4	All nurses must be self-aware and recognise how their own values, principles and assumptions may affect their practice. They must maintain their own personal and professional development, learning from experience, through supervision, feedback reflection and evaluation.	
Guidance to support achievement of competencies of assessment (P1: Professionalism in Practice)		
<p>Care Quality Commission (2010) <i>Essential standards for quality and safety</i> London: Care Quality Commission</p> <p>Department of Health (2010) <i>Essence of Care</i> London: The Stationary Office</p> <p>Faculty of Health Sciences (2009) <i>Uniform Policy</i> Southampton: University of Southampton</p> <p>Faculty of Health Sciences (2008) <i>Absence reporting procedures</i> Southampton: University of Southampton.</p> <p>NMC (2008) <i>The Code: Standards of conduct performance and ethics for nurses and midwives</i> London: NMC.</p> <p>NMC (2010) <i>Standards for pre-registration nursing education</i> London: NMC</p> <p>Taylor, B. (2010) <i>Reflective practice for healthcare professionals: a practical guide</i> Maidenhead: OU Press</p> <p>Local policies for absence reporting and uniform when the student is in placement should also be followed.</p>		

Registrant signature sheet

Practice experience 1

All health care professionals signing student documentation should insert their details below, as indicated.

Name of mentor (please print)	Contact phone number	Name of practice area	Qualification i.e. RN (part 1) or Social worker	Date of last mentor update attended	Signature	Initials

Completing this grid is a requirement for any **professional** who is signing your portfolio or making an entry.

Record of practice experience and visits undertaken during practice experience 1

Dates		Number of hours completed	Type of experience/ service user group visited	Name of facilitator/ practice contact (PLEASE PRINT)	Signature of facilitator/ practice contact	Initials of facilitator/ practice contact	Contact phone number
From	To						

Absence record

Dates		Number of hours missed	Type of absence (e.g. sickness, compassionate leave, medical/dental appointment, absence without authorisation)	Mentor's signature
From	To			

Record of absences made up

Dates		Number of made up hours	Mentor's signature
From	To		

I verify that this is an accurate record of this student's absence and I have checked accuracy with the portal printout	
Mentor signature	

I verify that this is an accurate account which matches the portal record	
Outstanding hours carried forward	Academic tutor signature

Professional development

Self-assessment by student at commencement of practice experience

Self-assessment based on previous practice experience (In first experience you may draw on life experience prior to commencing the course)	
Strengths	Weaknesses
Concerns	Expectations

Please discuss the key points from this assessment with your mentor prior to completing an action plan for this practice experience

Initial interview

To be completed within 2 days of the start of the practice experience

This is done by the student in conjunction with the mentor, and is based upon the self-assessment, previous practice experiences and feedback from other mentors.

Learning need	Action Plan	
Student signature	Date	
Mentor signature	Date	
Proposed date for interim review		

NMC Field specific competencies

Domain 1: Professional values				
Children's nurses must understand their role as an advocate for children, young people and their families, and work in partnership with them. They must deliver child and family-centred care; empower children and young people to express their views and preferences; and maintain and recognise their rights and best interests.				
Competencies	Formative assessment point (can discuss principles)		Summative assessment point (can discuss principles)	
	Mentor initials	Date	Mentor initials	Date
1. All nurses must practise with confidence according to <i>The Code: Standards of conduct, performance and ethics for nurses and midwives</i> (NMC 2008), and within other recognised ethical and legal frameworks. They must be able to recognize and address ethical challenges relating to people's choices and decision-making about their care, and act within the law to help them and their families and carers find acceptable solutions.				
	1.1 Children's nurses must understand the laws relating to child and parental consent, including giving and refusing consent, withdrawal of treatment and legal capacity.			
2. All nurses must practise in a holistic, non-judgmental, caring and sensitive manner that avoids assumptions, supports social inclusion; recognises and respects individual choice; and acknowledges diversity. Where necessary, they must challenge inequality, discrimination and exclusion from access to care.				
	2.1 Children's nurses must recognise that all children and young people have the right to be safe, enjoy life and reach their potential. They must practise in a way that recognises, respects and responds to the individuality of every child and young person.			
3. All nurses must support and promote the health, wellbeing, rights and dignity of people, groups, communities and populations. These include people whose lives are affected by ill health, disability, inability to engage, ageing or death. Nurses must act on their understanding of how these conditions influence public health.				
	3.1 Children's nurses must act as advocates for the right of all children and young people to lead full and independent lives.			
4. All nurses must work in partnership with service users, carers, groups, communities and organisations. They must manage risk, and promote health and wellbeing while aiming to empower choices that promote self-care and safety.				
	4.1 Children's nurses must work in partnership with children, young people and their families to negotiate, plan and deliver child and family-centred care, education and support. They must recognise the parent's or carer's primary role in achieving and maintaining the child's or young person's health and wellbeing, and offer advice and support on parenting in health.			
Domain 2: Communication and interpersonal skills				
Children's nurses must take account of each child and young person's individuality, including their stage of development, ability to understand, culture, learning or communication difficulties and health status. They must communicate effectively with them and with parents and carers.				
1. All nurses must build partnerships and therapeutic relationships through safe, effective and non-discriminatory communication. They must take account of individual differences, capabilities and needs.				
	1.1 Children's nurses must work with the child, young person and others to ensure that they are actively involved in decision-making, in order to maintain their independence and take account of their on-going intellectual, physical and emotional needs.			
2. All nurses must use a range of communication skills and technologies to support person-centred care and enhance quality and safety. They must ensure people receive all the information they need in a language and manner that allows them to make informed choices and share decision making. They must recognise when language interpretation or other communication support is needed and know how to obtain it.				
	2.1 Children's nurses must understand all aspects of development from infancy to young adulthood, and identify each child or young person's developmental stage, in order to communicate effectively with them. They must use play, distraction and communication tools appropriate to the child's or young person's stage of development, including for those with sensory or cognitive impairment.			

Domain 2: Communication and interpersonal skills				
Competencies	Formative assessment point (can discuss principles)		Summative assessment point (can discuss principles)	
	Mentor initials	Date	Mentor initials	Date
3. All nurses must use the full range of communication methods, including verbal, non-verbal and written, to acquire, interpret and record their knowledge and understanding of people's needs. They must be aware of their own values and beliefs and the impact this may have on their communication with others. They must take account of the many different ways in which people communicate and how these may be influenced by ill health, disability and other factors, and be able to recognise and respond effectively when a person finds it hard to communicate.				
	3.1 Children's nurses must ensure that, where possible, children and young people understand their healthcare needs and can make or contribute to informed choices about all aspects of their care.			
Domain 3: Nursing practice and decision-making				
Children's nurses must be able to care safely and effectively for children and young people in all settings, and recognise their responsibility for safeguarding them. They must be able to deliver care to meet essential and complex physical and mental health needs informed by deep understanding of biological, psychological and social factors throughout infancy, childhood and adolescence.				
1. All nurses must use up-to-date knowledge and evidence to assess, plan, deliver and evaluate care, communicate findings, influence change and promote health and best practice. They must make person-centred, evidence-based judgments and decisions, in partnership with others involved in the care process, to ensure high quality care. They must be able to recognise when the complexity of clinical decisions requires specialist knowledge and expertise, and consult or refer accordingly.				
	1.1 Adult nurses must be able to recognise and respond to the needs of all people who come into their care including babies, children and young people, pregnant and postnatal women, people with mental health problems, people with physical disabilities, people with learning disabilities, older people, and people with long term problems such as cognitive impairment.			
	1.2 Children's nurses must use recognised, evidence-based, child-centred frameworks to assess, plan, implement, evaluate and record care, and to underpin clinical judgments and decision-making. Care planning and delivery must be informed by knowledge of pharmacology, anatomy and physiology, pathology, psychology and sociology, from infancy to young adulthood.			
3. All nurses must carry out comprehensive, systematic nursing assessments that take account of relevant physical, social, cultural, psychological, spiritual, genetic and environmental factors, in partnership with service users and others through interaction, observation and measurement.				
	3.1 Children's nurses must carry out comprehensive nursing assessments of children and young people, recognising the particular vulnerability of infants and young children to rapid physiological deterioration.			
5. All nurses must understand public health principles, priorities and practice in order to recognise and respond to the major causes and social determinants of health, illness and health inequalities. They must use a range of information and data to assess the needs of people, groups, communities and populations, and work to improve health, wellbeing and experiences of healthcare; secure equal access to health screening, health promotion and healthcare; and promote social inclusion.				
	5.1 Children's nurses must include health promotion, and illness and injury prevention, in their nursing practice. They must promote early intervention to address the links between early life adversity and adult ill health, and the risks to the current and future physical, mental, emotional and sexual health of children and young people.			
6. All nurses must practise safely by being aware of the correct use, limitations and hazards of common interventions, including nursing activities, treatments, and the use of medical devices and equipment. The nurse must be able to evaluate their use, report any concerns promptly through appropriate channels and modify care where necessary to maintain safety. They must contribute to the collection of local and national data and formulation of policy on risks, hazards and adverse outcomes.				
	6.1 Children's nurses must have numeracy skills for medicines management, assessment, measuring, monitoring and recording which recognise the particular vulnerability of infants and young children in relation accurate medicines calculation.			

Domain 3: Nursing practice and decision-making				
Competencies	Formative assessment point (can discuss principles)		Summative assessment point (can discuss principles)	
	Mentor initials	Date	Mentor initials	Date
8. All nurses must provide educational support, facilitation skills and therapeutic nursing interventions to optimise health and wellbeing. They must promote self-care and management whenever possible, helping people to make choices about their healthcare needs, involving families and carers where appropriate, to maximise their ability to care for themselves.				
8.1 Children's nurses must use negotiation skills to ensure the best interests of children and young people in all decisions, including the continuation or withdrawal of care. Negotiation must include the child or young person, their family and members of the multidisciplinary and interagency team where appropriate.				
9. All nurses must be able to recognise when a person is at risk and in need of extra support and protection and take reasonable steps to protect them from abuse.				
9.1 Children's nurses must understand their central role in preventing maltreatment, and safeguarding children and young people. They must work closely with relevant agencies and professionals, and know when and how to identify and refer those at risk or experiencing harm.				
Domain 4: Leadership, management and team working				
Children's nurses must listen and respond to the wishes of children and young people. They must influence the delivery of health and social care services to optimise the care of children and young people. They must work closely with other agencies and services to ensure seamless and well-supported transition to adult services.				
Competencies	Formative assessment point (can discuss principles)		Summative assessment point (can discuss principles)	
	Mentor initials	Date	Mentor initials	Date
1. All nurses must act as change agents and provide leadership through quality improvement and service development to enhance people's wellbeing and experiences of healthcare.				
1.1 Children's nurses must understand health and social care policies relating to the health and wellbeing of children and young people. They must, where possible, empower and enable children, young people, parents and carers to influence the quality of care and develop future policies and strategies.				
1.2 Children's nurses must ensure that, wherever possible, care is delivered in the child or young person's home, or in another environment that suits their age, needs and preferences.				
6. All nurses must work independently as well as in teams. They must be able to take the lead in coordinating, delegating and supervising care safely, managing risk and remaining accountable for the care given.				
6.1 Children's nurses must use effective clinical decision-making skills when managing complex and unpredictable situations, especially where the views of children or young people and their parents and carers differ. They must recognise when to seek extra help or advice to manage the situation safely.				
7. All nurses must work effectively across professional and agency boundaries, actively involving and respecting others' contributions to integrated person-centred care. They must know when and how to communicate with and refer to other professionals and agencies in order to respect the choices of service users and others, promoting shared decision making, to deliver positive outcomes and to coordinate smooth, effective transition within and between services and agencies.				
7.1 Children's nurses must work effectively with young people who have continuing health needs, their families, the multidisciplinary team and other agencies to manage smooth and effective transition from children's services to adult services, taking account of individual needs and preferences.				

Essential skills clusters

Learning outcome Essential skills (NMC 2010): Care, compassion and communication		
Mentor to initial and date outcome of skills achievement at end of P1 skills	Skills performed under direct supervision	Not achieved
1.0 As partners in the care process, people can trust a newly registered graduate nurse to provide collaborative care based on the highest standards, knowledge and competence.		
<ol style="list-style-type: none"> 1. Articulates the underpinning values of The Code: Standards of conduct, performance and ethics for nurses and midwives (the code) (NMC 2008). 2. Works within limitations of the role and recognises own level of competence. 3. Promotes a professional image. 4. Shows respect for others. 5. Is able to engage with people and build caring professional relationships. 	These ESCs are achieved in the grading grid	
2.0 People can trust the newly registered graduate nurse to engage in person-centred care empowering people to make choices about how their needs are met when they are unable to meet them for themselves.		
<ol style="list-style-type: none"> 1. Takes a person centred, personalised approach to care 	This ESC is achieved in the grading grid	
3.0 People can trust the newly registered graduate nurse to respect them as individuals and strive to help them preserve their dignity at all times.		
<ol style="list-style-type: none"> 1. Demonstrates respect for diversity and individual preference, valuing differences, regardless of personal view. 2. Engages with people in a way that ensures dignity is maintained through making appropriate use of the environment, skills and adopting an appropriate attitude. 3. Uses ways to maximise communication where hearing, vision or speech is compromised. 		
4.0 People can trust in a newly qualified graduate nurse to engage with them and their family or carers within their cultural environments in an acceptant and anti-discriminatory manner, free from harassment and exploitation.		
<ol style="list-style-type: none"> 1. Demonstrates an understanding of how culture, religion, spiritual beliefs, gender and sexuality can impact on illness and disability 2. Respects people's rights. 3. Adopts a principled approach to care underpinned by the code (NMC 2008). 	This ESC is achieved in the grading grid	
5.0 People can trust the newly registered graduate nurse to engage with them in a warm, sensitive and compassionate way.		
<ol style="list-style-type: none"> 1. Takes into account peoples physical and emotional responses when engaging with them. 2. Interacts with the person in a manner that is interpreted as warm, sensitive, kind and compassionate, making appropriate use of touch. 3. Provides person centred care that addresses both physical and emotional needs and preferences. 4. Evaluates ways in which own interactions affect relationships to ensure that they do not impact inappropriately on others. 5. Evaluates ways in which own interactions affect relationships to ensure that they do not impact inappropriately on others. 	This ESC is achieved in the grading grid	
6.0 People can trust the newly registered graduate nurse to engage therapeutically and actively listen to their needs and concerns, responding using skills that are helpful, providing information that is clear, accurate, meaningful and free from jargon.		
<ol style="list-style-type: none"> 1. Communicates effectively both orally and in writing, so that the meaning is always clear. 2. Records information accurately and clearly on the basis of observation and communication. 3. Always seeks to confirm understanding 4. Responds in a way that confirms what a person is communicating. 5. Effectively communicates people's stated needs and wishes to other professionals. 		

Mentor to initial and date outcome of skills achievement at end of P1 skills	Skills performed under direct supervision	Not achieved
7.o People can trust the newly registered graduate nurse to protect and keep as confidential all information relating to them.		
<ol style="list-style-type: none"> 1. Applies the principles of confidentiality. 2. Protects and treats information as confidential except where sharing information is required for the purposes of safeguarding and public protection. 3. Applies the principles of data protection. 		
8.o People can trust the newly registered graduate nurse to gain their consent based on sound understanding and informed choice prior to any intervention and that their rights in decision making and consent will be respected and upheld.		
<ol style="list-style-type: none"> 1. Seeks consent prior to sharing confidential information outside of the professional care team, subject to agreed safeguarding and protection procedures. 		
Learning outcomes Essential skills (NMC 2010) – Organisational aspects of care		
9.o People can trust the newly registered graduate nurse to treat them as partners and work with them to make a holistic and systematic assessment of their needs; to develop a personalised plan that is based on mutual understanding and respect for their individual situation promoting health and well-being, minimising risk of harm and promoting their safety at all times.		
<ol style="list-style-type: none"> 1. Responds appropriately when faced with an emergency or a sudden deterioration in a person's physical or psychological condition (for example, abnormal vital signs, collapse, cardiac arrest, self-harm, extremely challenging behaviour, attempted suicide) including seeking help from an appropriate person. 		
11.o People can trust the newly registered graduate nurse to safeguard children and adults from vulnerable situations and support and protect them from harm.		
<ol style="list-style-type: none"> 1. Acts within legal frameworks and local policies in relation to safeguarding adults and children who are in vulnerable situations. 2. Shares information with colleagues and seeks advice from appropriate sources where there is a concern or uncertainty. 3. Uses support systems to recognise, manage and deal with own emotions. 		
12.o People can trust the newly registered graduate nurse to respond to their feedback and a wide range of other sources to learn, develop and improve services.		
<ol style="list-style-type: none"> 1. Responds appropriately to compliments and comments. 		
14.o People can trust the newly registered graduate nurse to be an autonomous and confident member of the multi-disciplinary or multi agency team and to inspire confidence in others.		
<ol style="list-style-type: none"> 1. Works within the code (NMC 2008) and adheres to the Guidance on professional conduct for nursing and midwifery students(NMC 2010). 	This ESC is achieved in the grading grid	
15.o People can trust the newly registered graduate nurse to safely delegate to others and to respond appropriately when a task is delegated to them.		
<ol style="list-style-type: none"> 1. Accepts delegated activities within limitations of own role, knowledge and skill. 	This ESC is achieved in the grading grid	
17.o People can trust the newly registered graduate nurse to work safely under pressure and maintain the safety of service users at all times.		
<ol style="list-style-type: none"> 1. Recognises when situations are becoming unsafe and reports appropriately. 2. Understands and applies the importance of rest for effective practice. 		
18.o People can trust a newly registered graduate nurse to enhance the safety of service users and identify and actively manage risk and uncertainty in relation to people, the environment, self and others.		
<ol style="list-style-type: none"> 1. Under supervision, works within clinical governance frameworks. 2. Reports safety incidents regarding service users to senior colleagues. 3. Under supervision assesses risk within current sphere of knowledge and competence. 4. Follows instructions and takes appropriate action, sharing information to minimise risk. 5. Under supervision works within legal frameworks to protect self and others. 6. Knows and accepts own responsibilities and takes appropriate action. 		
19.o People can trust the newly registered graduate nurse to work to prevent and resolve conflict and maintain a safe environment.		
<ol style="list-style-type: none"> 1. Recognises signs of aggression and responds appropriately to keep self and others safe. 2. Assists others or obtains assistance when help is required. 		
20.o People can trust the newly registered graduate nurse to select and manage medical devices safely.		
<ol style="list-style-type: none"> 1. Safely uses and disposes of medical devices under supervision and in keeping with local and national policy and understands reporting mechanism relating to adverse incidents. 		

Mentor to initial and date outcome of skills achievement at end of P1 skills	Skills performed under direct supervision	Not achieved
Learning outcomes Essential skills (NMC 2010) – Infection Prevention and control		
21.0 People can trust the newly registered graduate nurse to identify and take effective measures to prevent and control infection in accordance with local and national policy.		
1. Follows local and national guidelines and adheres to standard infection control precautions.		
22.0 People can trust the newly registered graduate nurse to maintain effective standard infection control precautions and apply and adapt these to needs and limitations in all environments.		
1. Demonstrates effective hand hygiene and the appropriate use of standard infection control precautions when caring for all people.	This ESC is achieved in the grading grid	
24.0 People can trust a newly registered graduate nurse to fully comply with hygiene, uniform and dress codes in order to limit, prevent and control infection.		
1. Adheres to local policy and national guidelines on dress code for prevention and control of infection, including: footwear, hair, piercing and nails. 2. Maintains a high standard of personal hygiene. 3. Wears appropriate clothing for the care delivered in all environments.	These ESC is achieved in the grading grid	
Learning outcomes Essential skills (NMC 2010) – Care, compassion and communication		
30.0 People can trust the newly qualified graduate nurse to assist them in creating an environment that is conducive to eating and drinking.		
1. Reports to an appropriate person where there is a risk of meals being missed. 2. Follows food hygiene procedures in accordance with policy.		
Learning outcomes Essential skills (NMC 2010) – Medicines management		
33.0 People can trust the newly registered graduate nurse to correctly and safely undertake medicines* calculations.		
1. Is competent in basic medicines calculations (*) relating to <ul style="list-style-type: none"> ● tablets and capsules ● liquid medicines ● injections including: <ul style="list-style-type: none"> - unit dose - sub and multiple unit dose - SI unit conversion. 		

1 Medicines management is “the clinical cost effective and safe use of medicines to ensure patients get maximum benefit from the medicines they need while at the same time minimising potential harm” (MHRA 2004). As the administration of a medicinal product is only part of the process, these ESCs reflect the process from prescribing, through to dispensing, storage, administration and disposal.

2 A Medicinal product is “Any substance or combination of substances presented for treating or preventing disease in human beings or in animals. Any substance or combination of substances which may be administered to human beings or animals with a view to making a medical diagnosis or to restoring, correcting or modifying physiological functions in human beings or animals is likewise considered a medicinal product” (Council Directive 65/65/EEC).

Formative grading assessment

P1- Professionalism in Practice

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A, B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail D	Fail E	Grade
Safe, person centred care which meets people’s essential care needs. Recognises & works within own limitations. Demonstrates reflective skills to evaluate own practice					
<p>Exceptional ability to provide safe basic person centred care which meets people’s essential care needs. Confident and comprehensive nursing care provided. Excellent reflective ability when evaluating own practice.</p>	<p>Demonstrates a clear ability to provide safe basic person centred care which meets people’s essential care needs. Confident provision of nursing care. Good evidence of reflection when evaluating own practice.</p>	<p>Satisfactory ability to provide safe basic person centred care which meets people’s essential care needs but requires occasional prompting. Lacks confidence in the provision of nursing care. Satisfactory attempt at reflection when evaluating own practice.</p>	<p>Is able to provide safe basic person centred care which meets people’s essential care needs but requires frequent prompting. Lacks confidence to provide nursing care without constant support & guidance. Limited attempt at reflection when evaluating own practice.</p>	<p>Limited ability to provide safe, basic care which meets people’s essential care needs. Not person centred. Requires constant direction in order to carry out safe nursing care. No attempt at reflection to evaluate own practice or poor reflective insight.</p>	
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Professional image: appearance (adherence to organisational requirements for hygiene, uniform and dress code)					
<p>Exemplary professional appearance at all times. Always adheres to dress code and maintains a very high standard of personal hygiene for prevention and control of infection.</p>	<p>Good professional appearance at all times. Consistently adheres to dress code and maintains a good standard of personal hygiene for prevention and control of infection.</p>	<p>Satisfactory professional appearance. Mostly adheres to dress code and maintains a satisfactory standard of personal hygiene for prevention and control of infection.</p>	<p>Professional appearance inconsistent. Often reminded about dress code or inconsistent standard of personal hygiene and therefore prevention & control of infection at risk.</p>	<p>Unprofessional in appearance. Consistently does not follow dress code or inadequate standard of personal hygiene and therefore prevention and control of infection at risk.</p>	
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Professional image: behaviour, values and attitudes					
<p>Exemplary personal values and attitudes consistently demonstrated. Acts with great respect, kindness, compassion and sensitivity. Exceptionally person centred with exemplary professional conduct/behaviour.</p>	<p>Good personal values and attitudes consistently demonstrated. Acts with great respect, kindness, compassion and sensitivity. Consistently person centred with very good professional conduct/behaviour.</p>	<p>Satisfactory personal values and attitudes demonstrated. Never disrespectful, unkind or lacking in compassion or sensitivity. Professional conduct /behaviour satisfactory but could improve person centred approach.</p>	<p>Questionable personal values and attitudes demonstrated. Mostly acts with respect, kindness & compassion but can be insensitive to others through lack of self-awareness of own conduct/behaviour.</p>	<p>Poor personal values and attitudes demonstrated consistently. Conduct, behaviour and attitude consistently unprofessional.</p>	
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Attendance, punctuality and understanding of organisational procedures for absence reporting					
<p>Exemplary in all aspects of attendance. Always punctual, with an exceptional understanding and application of the organisational procedures for absence reporting.</p>	<p>Good in all aspects of attendance. Punctual, with a good understanding and application of the organisational procedures for absence reporting.</p>	<p>Satisfactory in all aspects of attendance. Usually punctual, with a reasonable understanding and application of the organisational procedures for absence reporting.</p>	<p>Unsatisfactory in most aspects of attendance. Inconsistent attendance, with a limited understanding and application of the organisational procedures for absence reporting.</p>	<p>Poor in all aspects of attendance. Unpredictable attendance with failure to implement & failure to understand organisational procedures for absence reporting.</p>	
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Students are expected to photocopy this page and grade themselves before meeting with their mentor

Formative (interim review) - practice experience 1

Student's review of progress

After discussion with your mentor and formative grading, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Student signature

Date

Mentor's review of progress

After discussion with the student and formative grading, please summarise your views about their progress, including strengths, areas for development and identification of any issues affecting your performance

Mentor signature

Date

Following this review of grading, progress review and learning needs:

	YES	NO
Learning needs have been re-explored		
Action plan has been re-negotiated/developed		
Academic tutor must be contacted if any formative fail grades have been awarded or any concerns are raised at this point		

Learning need	Action plan
Student's signature	Date
Mentor's signature	Date
Proposed date for review	

Service user/carer involvement in practice

Consent must be gained from the service user/carer with the mentor present to participate in this exercise. This exercise can be undertaken as a discussion and the mentor should then record the points raised below.

We would like to hear from you about your views of the way nursing students have contributed to the care that you have received. You do not need to disclose your name and the feedback that you give will not affect the care you receive. There is no requirement for you to participate in this exercise (if a carer, this relates to the care given to the service user).

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Additional practitioner feedback

Comments on the student's performance during additional practice experiences/ spoke experiences

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Additional practitioner feedback

Comments on the student's performance during additional practice experiences/ spoke experiences

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Experience 1: Grading in Practice – Formative exercise for Professional attitude and behaviour

Empathy is the ability or process used in understanding the other person's situation and feelings and is an important nursing attribute but in order to develop this in professional manner we need to first become self-aware. The concept of self-awareness is beneficial to nurses on a personal and professional level. In particular we need to recognise how the care we offer service users may be influenced by our values, beliefs and attitudes. In the following exercise undertake some self-reflection and discuss strategies for managing emotion responses with your mentor.

When you have cared for a service user who evoked a strong emotional response reflect on what happened and jot down in this box as many emotions as you can describe:

Worksheet instructions

- Don't worry if any of these emotions seem to contradict each other... that is normal (we can be sad and happy at the same time)
- If you find a word that appears to dominate try to go "below" that feeling – if you are repeatedly saying "I am frightened" try to determine why by asking "Why" at least 5 times. An example might be when nursing someone with challenging behaviours you might write down that you were frightened. *Why am I afraid? Because I was frightened by this service user's behaviour? Why does that make me frightened? Because I felt helpless when the service user shouted. Why does that make me frightened? Because although I am training to be a nurse, I am a human being and I deserve to be treated with dignity and kindness. Why does lack of kindness make me scared? Because too many people in my life treat me that way...*
- Now think about how this emotion may have influenced the way you interacted with this service user?

From your reflection, identify your development needs and explore with your mentor strategies to acknowledge and manage your feelings and discuss these with your mentor. List key ones here for future reference.

- If undertaking this exercise has upset you in any way please discuss this with your mentor or your academic tutor.

Summative grading assessment

P1- Professionalism in Practice

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A,B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail D	Fail E	Grade
Safe, person centred care which meets people’s essential care needs. Recognises & works within own limitations. Demonstrates reflective skills to evaluate own practice					
<p>Exceptional ability to provide safe basic person centred care which meets people’s essential care needs. Confident and comprehensive nursing care provided. Excellent reflective ability when evaluating own practice.</p>	<p>Demonstrates a clear ability to provide safe basic person centred care which meets people’s essential care needs. Confident provision of nursing care. Good evidence of reflection when evaluating own practice.</p>	<p>Satisfactory ability to provide safe basic person centred care which meets people’s essential care needs but requires occasional prompting. Lacks confidence in the provision of nursing care. Satisfactory attempt at reflection when evaluating own practice.</p>	<p>Is able to provide safe basic person centred care which meets people’s essential care needs but requires frequent prompting. Lacks confidence to provide nursing care without constant support & guidance. Limited attempt at reflection when evaluating own practice.</p>	<p>Limited ability to provide safe, basic care which meets people’s essential care needs. Not person centred. Requires constant direction in order to carry out safe nursing care. No attempt at reflection to evaluate own practice or poor reflective insight.</p>	
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Professional image: appearance (adherence to organisational requirements for hygiene, uniform and dress code)					
<p>Exemplary professional appearance at all times. Always adheres to dress code and maintains a very high standard of personal hygiene for prevention and control of infection.</p>	<p>Good professional appearance at all times. Consistently adheres to dress code and maintains a good standard of personal hygiene for prevention and control of infection.</p>	<p>Satisfactory professional appearance. Mostly adheres to dress code and maintains a satisfactory standard of personal hygiene for prevention and control of infection.</p>	<p>Professional appearance inconsistent. Often reminded about dress code or inconsistent standard of personal hygiene and therefore prevention & control of infection at risk.</p>	<p>Unprofessional in appearance. Consistently does not follow dress code or inadequate standard of personal hygiene and therefore prevention and control of infection at risk.</p>	
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Professional image: behaviour, values and attitudes					
<p>Exemplary personal values and attitudes consistently demonstrated. Acts with great respect, kindness, compassion and sensitivity. Exceptionally person centred with exemplary professional conduct/behaviour.</p>	<p>Good personal values and attitudes consistently demonstrated. Acts with great respect, kindness, compassion and sensitivity. Consistently person centred with very good professional conduct/behaviour.</p>	<p>Satisfactory personal values and attitudes demonstrated. Never disrespectful, unkind or lacking in compassion or sensitivity. Professional conduct /behaviour satisfactory but could improve person centred approach.</p>	<p>Questionable personal values and attitudes demonstrated. Mostly acts with respect, kindness & compassion but can be insensitive to others through lack of self-awareness of own conduct/behaviour.</p>	<p>Poor personal values and attitudes demonstrated consistently. Conduct, behaviour and attitude consistently unprofessional.</p>	
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Attendance, punctuality and understanding of organisational procedures for absence reporting					
<p>Exemplary in all aspects of attendance. Always punctual, with an exceptional understanding and application of the organisational procedures for absence reporting.</p>	<p>Good in all aspects of attendance. Punctual, with a good understanding and application of the organisational procedures for absence reporting.</p>	<p>Satisfactory in all aspects of attendance. Usually punctual, with a reasonable understanding and application of the organisational procedures for absence reporting.</p>	<p>Unsatisfactory in most aspects of attendance. Inconsistent attendance, with a limited understanding and application of the organisational procedures for absence reporting.</p>	<p>Poor in all aspects of attendance. Unpredictable attendance with failure to implement & failure to understand organisational procedures for absence reporting.</p>	
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Students are expected to photocopy this page and grade themselves before meeting with their mentor

Summative assessment record

Professionalism in Practice

Grading category		Grade awarded	
Safe, person centred care which meets people's essential care needs. Recognises & works within own limitations. Demonstrates reflective skills to evaluate own practice.			
Professional image: appearance (adherence to organisational requirements for hygiene, uniform and dress code).			
Professional image: behaviour, values and attitudes.			
Attendance, punctuality and understanding of organisational procedures for absence reporting.			
If the student has achieved a D or E in any of the above a fail must be awarded (please circle)		PASS	FAIL
Competency: If the student has not achieved in any of these then a fail must be awarded (please circle)			
Field competencies	PASS	FAIL: list all not achieved	
Essential skills cluster	PASS	List all to be achieved in Practice placement 2	
Practitioner signature		Date	
Student signature		Date	
Moderator signature (if used)		Date	

Summative feedback – practice experience 1

Please use the values model on page 18 to give the student feedback on their practice

Identified areas for further personal and professional development	Suggested activities and experiences that will assist in future development – <i>(This information is essential for future mentors in setting learning objectives)</i>	
Heart: intrinsic motivation <i>(Developing compassionate care)</i>		
Nerve: Self-belief and self-efficacy <i>(Developing themselves and advocating for the service user or carer)</i>		
Brain: Critical and analytical skills <i>(Application of appropriate theory/research to practice)</i>		
Student signature	Date	
Mentor signature	Date	
Academic tutor signature	Date	

Student's review of progress

After discussion with your mentor, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

--

Student signature

Date

Mentor's review of progress

After discussion with the student, please summarise your views about the student's progress, including strengths, areas for development and identification of any issues affecting their performance – please remember that this information will help the next mentor develop appropriate learning experiences for the student

--

Mentor signature

Date

Progression signatures

I confirm that there has been no falsification of evidence within this document (before signing please read the academic integrity statement)		
Student signature	PRINT name	Date
I can confirm that the student has met the grading for this practice placement.		
Mentor signature	PRINT name	Date
I can confirm that the student does not meet the grading for this practice placement.		
Mentor signature	PRINT name	Date
I confirm that the documentation and signatures have been checked and verified		
Academic tutor signature	PRINT name	Date

**This page must be scanned/photocopied and stored in the students file in the Faculty of Health Science,
University of Southampton**

Verification of practice experience 1

Prompt	Yes	No (please state those outstanding)
Progression points met?		
Grading in practice assessment completed and passed?		
Action plan completed?		
Absence record completed and matches portal print out?		
Additional visits completed?		
Additional practitioner feedback completed?		
Service user feedback completed?		
Mentor signature sheet completed?		
All interviews completed and signed?		
Academic tutor signature	PRINT name	Date

This page, must be copied/scanned and stored with the students records with the Faculty of Health Sciences, University of Southampton

These pages are only for the use of those students retrieving a practice experience

Retrieval documentation to be completed at the end of week 4 of the retrieval practice experience

Mentor signature sheet

Retrieval practice experience 1			
Name of placement			
Name of Trust/Practice experience provider			
Name of mentor		Mentor signature	
Name of buddy/associate mentor		Buddy/associate mentor signature	
Phone number of placement			

Initial interview

To be completed within 2 days of the start of the practice experience

This is done by the student in conjunction with the mentor, and is based upon self-assessment, previous failed practice experience and feedback from last mentor.

Learning needs: link to aspects of grading and/or competency and ESCs not achieved and listed below	Action Plan	
Student signature	Date	
Mentor signature	Date	
Proposed date for interim review		

Summative grading assessment

P1- Professionalism in Practice

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A,B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail D	Fail E	Grade
Safe, person centred care which meets people’s essential care needs. Recognises & works within own limitations. Demonstrates reflective skills to evaluate own practice					
<p>Exceptional ability to provide safe basic person centred care which meets people’s essential care needs. Confident and comprehensive nursing care provided. Excellent reflective ability when evaluating own practice.</p>	<p>Demonstrates a clear ability to provide safe basic person centred care which meets people’s essential care needs. Confident provision of nursing care. Good evidence of reflection when evaluating own practice.</p>	<p>Satisfactory ability to provide safe basic person centred care which meets people’s essential care needs but requires occasional prompting. Lacks confidence in the provision of nursing care. Satisfactory attempt at reflection when evaluating own practice.</p>	<p>Is able to provide safe basic person centred care which meets people’s essential care needs but requires frequent prompting. Lacks confidence to provide nursing care without constant support & guidance. Limited attempt at reflection when evaluating own practice.</p>	<p>Limited ability to provide safe, basic care which meets people’s essential care needs. Not person centred. Requires constant direction in order to carry out safe nursing care. No attempt at reflection to evaluate own practice or poor reflective insight.</p>	
<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	
Professional image: appearance (adherence to organisational requirements for hygiene, uniform and dress code)					
<p>Exemplary professional appearance at all times. Always adheres to dress code and maintains a very high standard of personal hygiene for prevention and control of infection.</p>	<p>Good professional appearance at all times. Consistently adheres to dress code and maintains a good standard of personal hygiene for prevention and control of infection.</p>	<p>Satisfactory professional appearance. Mostly adheres to dress code and maintains a satisfactory standard of personal hygiene for prevention and control of infection.</p>	<p>Professional appearance inconsistent. Often reminded about dress code or inconsistent standard of personal hygiene and therefore prevention & control of infection at risk.</p>	<p>Unprofessional in appearance. Consistently does not follow dress code or inadequate standard of personal hygiene and therefore prevention and control of infection at risk.</p>	
<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	
Professional image: behaviour, values and attitudes					
<p>Exemplary personal values and attitudes consistently demonstrated. Acts with great respect, kindness, compassion and sensitivity. Exceptionally person centred with exemplary professional conduct/behaviour.</p>	<p>Good personal values and attitudes consistently demonstrated. Acts with great respect, kindness, compassion and sensitivity. Consistently person centred with very good professional conduct/behaviour.</p>	<p>Satisfactory personal values and attitudes demonstrated. Never disrespectful, unkind or lacking in compassion or sensitivity. Professional conduct /behaviour satisfactory but could improve person centred approach.</p>	<p>Questionable personal values and attitudes demonstrated. Mostly acts with respect, kindness & compassion but can be insensitive to others through lack of self-awareness of own conduct/behaviour.</p>	<p>Poor personal values and attitudes demonstrated consistently. Conduct, behaviour and attitude consistently unprofessional.</p>	
<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	
Attendance, punctuality and understanding of organisational procedures for absence reporting					
<p>Exemplary in all aspects of attendance. Always punctual, with an exceptional understanding and application of the organisational procedures for absence reporting.</p>	<p>Good in all aspects of attendance. Punctual, with a good understanding and application of the organisational procedures for absence reporting.</p>	<p>Satisfactory in all aspects of attendance. Usually punctual, with a reasonable understanding and application of the organisational procedures for absence reporting.</p>	<p>Unsatisfactory in most aspects of attendance. Inconsistent attendance, with a limited understanding and application of the organisational procedures for absence reporting.</p>	<p>Poor in all aspects of attendance. Unpredictable attendance with failure to implement & failure to understand organisational procedures for absence reporting.</p>	
<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	

Students are expected to photocopy this page and grade themselves before meeting with their mentor

Retrieval summative assessment

P1- Professionalism in Practice

Grading category	Grade awarded	
Safe, person-centred care which meets people's essential care needs. Recognises & works within own limitations. Demonstrates reflective skills to evaluate own practice.		
Professional image: appearance (adherence to organisational requirements for hygiene, uniform and dress code)		
Professional image: behaviour, values and attitudes		
Attendance, punctuality and understanding of organisational procedures for absence reporting		
If the student has achieved a D or E in any of the above they must be awarded a fail (please circle)	PASS	FAIL
Competency to be achieved	Achieved	Not achieved
Competency: If the student has not achieved in any of these then a fail must be awarded (please circle)	PASS	FAIL
Practitioner signature	Date	
Student signature	Date	
Moderator signature (if used)	Date	

Summative feedback – practice experience 1

Please use the values model on page 18 to give the student feedback on their practice

Identified areas for further development	Suggested activities and experiences that will assist in future development	
<p>Heart: intrinsic motivation <i>(Developing compassionate care)</i></p>		
<p>Nerve: Self-belief and self-efficacy <i>(Developing themselves and advocating for the service user or carer)</i></p>		
<p>Brain: Critical and analytical skills <i>(Application of appropriate theory/research to practice)</i></p>		
Student signature	Date	
Mentor signature	Date	
Academic tutor signature	Date	

Student's review of progress

After discussion with your mentor, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

--	--

Student signature

Date

Mentor's review of progress

After discussion with the student, please summarise your views about the student's progress, including strengths, areas for development and identification of any issues affecting their performance – please remember that this information will help the next mentor develop appropriate learning experiences for the student.

--	--

Mentor signature

Date

Progression signatures

I confirm that there has been no falsification of evidence within this document (before signing please read the academic integrity statement)		
Student signature	PRINT name	Date
I can confirm that the student has met the required grading for this placement.		
Mentor signature	PRINT name	Date
I can confirm that the student does not meet the required grading for this placement.		
Mentor signature	PRINT name	Date
I confirm that the documentation and signatures have been checked and verified		
Academic tutor signature	PRINT name	Date

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University of Southampton**

Verification of practice retrieval experience 1

Prompt	Yes	No (please state those outstanding)
Progression points met?		
Grading in practice assessment completed and passed?		
Action plan completed?		
Absence record completed and matches portal print out?		
Additional visits completed?		
Additional practitioner feedback completed?		
Service user feedback completed?		
Mentor signature sheet completed?		
All interviews completed and signed?		
Academic tutor signature	PRINT name	Date

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Section 6: Part 1 of the programme - Practice experience 2

Nursing professional regulations

In order to enter the register, the NMC requires students to demonstrate achievement of specific outcomes by set “progression points” at the end of part 1, part 2, part 3 (entry to register).

Framework for assessment

In order to pass each practice experience and the end of part 1 progression point you must:

- Achieve all of the progression criteria prior to the progression point (if you achieve these in practice experience 1, they must be maintained in practice experience 2).
- Achieve all of the essential skills required at progression point 1.
- Pass the grading in practice tool.

Practice experience 2

Name of placement	
Name of Trust/Practice experience provider	
Name of mentor	
Name of buddy/ associate mentor	
Phone number of placement	

Learning outcomes

Learning outcomes practice placement (2)	Communication and compassion - On completion of this module students will consistently:	
1.	demonstrate the ability to engage with people and build caring professional relationships using effective communication and interpersonal skills, always respecting professional boundaries.	
2.	demonstrate active listening skills through use of appropriate non-verbal communication skills.	
3.	demonstrate effective listening by responding in an appropriate way to a range of communication cues.	
4.	use a variety formats to produce clear, concise and complete records, using appropriate professional language to document care and applying the principles of data protection.	
5.	describe and demonstrate application of the principles of confidentiality in professional practice.	
6.	demonstrate achievement of identified core competencies.	
Competencies	1st progression point (PP) Essential Skills Cluster (ESC)	
Domain 2 Competency 1 Domain 2 Competency 5	<ul style="list-style-type: none"> • All nurses must build partnerships and therapeutic relationships through safe effective and non-discriminatory communication. They must take account of individual differences, capabilities and needs. • All nurses must use therapeutic principles to engage, maintain and, where appropriate, disengage from professional caring relationships, and must always respect professional boundaries. 	<ul style="list-style-type: none"> • Acts in a manner that is attentive, kind, sensitive, compassionate and non-discriminatory, that values diversity and acts within professional boundaries [PP15]. • Is able to engage with people and build caring professional relationships ESC1(5). • Interacts with the person in a manner that is interpreted as warm, sensitive, kind and compassionate, making appropriate use of touch [ESC 5(3)].

<p>Domain 2 Competency 3</p>	<ul style="list-style-type: none"> • All nurses must use the full range of communication methods, including verbal, non-verbal and written, to acquire, interpret and record their knowledge and understanding of people's needs. They must be aware of their own values and beliefs and the impact this may have on their communication with others. They must take account of the many different ways in which people communicate and how these may be influenced by ill health, disability and other factors, and be able to recognise and respond effectively when a person finds it hard to communicate. 	<ul style="list-style-type: none"> • Demonstrates safe and effective communication skills, both orally and in writing [PP12, ESC 6(1)]. • Takes into account people's physical and emotional responses when engaging with them [ESC 5(2)]. • Always seeks to confirm understanding [ESC 6(3)]. • Responds in a way that confirms what a person is communicating [ESC 6(4)]. • Effectively communicates people's stated needs and wishes to other professionals [ESC 6(5)]. • Uses ways to maximise communication where hearing, vision or speech is compromised [ESC3(3)]. • Evaluates ways in which own interactions affect relationships to ensure that they do not impact inappropriately on others [ESC 5(5)].
<p>Domain 2 Competency 7</p>	<ul style="list-style-type: none"> • All nurses must maintain accurate, clear and complete records, including the use of electronic formats, using appropriate and plain language. 	<ul style="list-style-type: none"> • Records information accurately and clearly on the basis of observation and communication [ESC 6(2)]. • Practises honestly and with integrity, applying the principles of The Code: Standards of conduct, performance and ethics for nurses and midwives (2008) and the Guidance on professional conduct for nursing and midwifery students (2009) [PP17].
<p>Domain 2 Competency 8</p>	<ul style="list-style-type: none"> • All nurses must respect individual rights to confidentiality and keep information secure and confidential in accordance with the law and relevant ethical and regulatory frameworks, taking account of local protocols. They must also actively share personal information with others when the interests of safety and protection override the need for confidentiality. 	<ul style="list-style-type: none"> • Understands the principles of confidentiality and data protection. Treats information as confidential, except where sharing is required to safeguard and protect people [PP16].
<p>Guidance to support achievement of competencies of assessment (P2: Communication and compassion)</p>		
<p>Department of Health (2003) <i>Confidentiality NHS Code of Practice</i> London: Department of Health Department of Health (2010) <i>Essence of Care</i> London: The Stationary Office McCabe, C. and Timmins, F. (2006) <i>Communication skills for nursing practice</i> Basingstoke: Palgrave Macmillan NMC (2008) <i>The Code: Standards of conduct performance and ethics for nurses and midwives</i> London: NMC NMC (2009) <i>Record keeping: Guidance for nurses and midwives</i> London: NMC NMC (2010) <i>Standards for pre-registration nursing education</i> London: NMC</p>		

Registrant signature sheet

Practice experience 2

All health care professionals signing student documentation should insert their details below, as indicated.

Name of mentor (please print)	Contact phone number	Name of practice area	Qualification i.e. RN (part 1) or Social worker	Date of last mentor update attended	Signature	Initials

Completing this grid is a requirement for any *professional* who is signing your portfolio or making an entry.

Record of practice experience and visits undertaken during practice experience 2

Dates		Number of hours completed	Type of experience/ service user group visited	Name of facilitator/ practice contact (PLEASE PRINT)	Signature of facilitator/ practice contact	Initials of facilitator/ practice contact	Contact phone number
From	To						

Absence record

Dates		Number of hours missed	Type of absence (e.g. sickness, compassionate leave, medical/dental appointment, absence without authorisation)	Mentor's signature
From	To			

Record of absences made up

Dates		Number of made up hours	Mentor's signature
From	To		

I verify that this is an accurate record of this student's absence and I have checked accuracy with the portal printout	
Mentor signature	

I verify that this is an accurate account which matches the portal record	
Outstanding hours carried forward	Academic tutor signature

Professional development

Self-assessment by student at commencement of practice experience

Self-assessment based on previous practice experience	
Strengths	Weaknesses
Concerns	Expectations

Please discuss the key points from this assessment with your mentor prior to completing an action plan for this practice experience

Initial interview

To be completed within 2 days of the start of the practice experience

This is done by the student in conjunction with the mentor, and is based upon the self-assessment, previous practice experiences and feedback from other mentors.

Learning need	Action Plan
Student signature	Date
Mentor signature	Date
Proposed date for interim review	

NMC Field specific competencies

Domain 1: Professional values				
Children's nurses must understand their role as an advocate for children, young people and their families, and work in partnership with them. They must deliver child and family-centred care; empower children and young people to express their views and preferences; and maintain and recognise their rights and best interests.				
Competencies	Formative assessment point (can discuss principles)		Summative assessment point (can discuss principles)	
	Mentor initials	Date	Mentor initials	Date
1. All nurses must practise with confidence according to <i>The Code: Standards of conduct, performance and ethics for nurses and midwives</i> (NMC 2008), and within other recognised ethical and legal frameworks. They must be able to recognize and address ethical challenges relating to people's choices and decision-making about their care, and act within the law to help them and their families and carers find acceptable solutions.				
	1.1 Children's nurses must understand the laws relating to child and parental consent, including giving and refusing consent, withdrawal of treatment and legal capacity.			
2. All nurses must practise in a holistic, non-judgmental, caring and sensitive manner that avoids assumptions, supports social inclusion; recognises and respects individual choice; and acknowledges diversity. Where necessary, they must challenge inequality, discrimination and exclusion from access to care.				
	2.1 Children's nurses must recognise that all children and young people have the right to be safe, enjoy life and reach their potential. They must practise in a way that recognises, respects and responds to the individuality of every child and young person.			
3. All nurses must support and promote the health, wellbeing, rights and dignity of people, groups, communities and populations. These include people whose lives are affected by ill health, disability, inability to engage, ageing or death. Nurses must act on their understanding of how these conditions influence public health.				
	3.1 Children's nurses must act as advocates for the right of all children and young people to lead full and independent lives.			
4. All nurses must work in partnership with service users, carers, groups, communities and organisations. They must manage risk, and promote health and wellbeing while aiming to empower choices that promote self-care and safety.				
	4.1 Children's nurses must work in partnership with children, young people and their families to negotiate, plan and deliver child and family-centred care, education and support. They must recognise the parent's or carer's primary role in achieving and maintaining the child's or young person's health and wellbeing, and offer advice and support on parenting in health.			
Domain 2: Communication and interpersonal skills				
Children's nurses must take account of each child and young person's individuality, including their stage of development, ability to understand, culture, learning or communication difficulties and health status. They must communicate effectively with them and with parents and carers.				
1. All nurses must build partnerships and therapeutic relationships through safe, effective and non-discriminatory communication. They must take account of individual differences, capabilities and needs.				
	1.1 Children's nurses must work with the child, young person and others to ensure that they are actively involved in decision-making, in order to maintain their independence and take account of their on-going intellectual, physical and emotional needs.			

Domain 2: Communication and interpersonal skills				
Children's nurses must take account of each child and young person's individuality, including their stage of development, ability to understand, culture, learning or communication difficulties and health status. They must communicate effectively with them and with parents and carers.				
Competencies	Formative assessment point (can discuss principles)		Summative assessment point (can discuss principles)	
	Mentor initials	Date	Mentor initials	Date
2. All nurses must use a range of communication skills and technologies to support person-centred care and enhance quality and safety. They must ensure people receive all the information they need in a language and manner that allows them to make informed choices and share decision making. They must recognise when language interpretation or other communication support is needed and know how to obtain it.				
	2.1 Children's nurses must understand all aspects of development from infancy to young adulthood, and identify each child or young person's developmental stage, in order to communicate effectively with them. They must use play, distraction and communication tools appropriate to the child's or young person's stage of development, including for those with sensory or cognitive impairment.			
3. All nurses must use the full range of communication methods, including verbal, non-verbal and written, to acquire, interpret and record their knowledge and understanding of people's needs. They must be aware of their own values and beliefs and the impact this may have on their communication with others. They must take account of the many different ways in which people communicate and how these may be influenced by ill health, disability and other factors, and be able to recognise and respond effectively when a person finds it hard to communicate.				
	3.1 Children's nurses must ensure that, where possible, children and young people understand their healthcare needs and can make or contribute to informed choices about all aspects of their care.			
Domain 3: Nursing practice and decision-making				
Children's nurses must be able to care safely and effectively for children and young people in all settings, and recognise their responsibility for safeguarding them. They must be able to deliver care to meet essential and complex physical and mental health needs informed by deep understanding of biological, psychological and social factors throughout infancy, childhood and adolescence.				
1. All nurses must use up-to-date knowledge and evidence to assess, plan, deliver and evaluate care, communicate findings, influence change and promote health and best practice. They must make person-centred, evidence-based judgments and decisions, in partnership with others involved in the care process, to ensure high quality care. They must be able to recognise when the complexity of clinical decisions requires specialist knowledge and expertise, and consult or refer accordingly.				
	1.1 Children's nurses must be able to recognise and respond to the essential needs of all people who come into their care including babies, pregnant and postnatal women, adults, people with mental health problems, people with physical disabilities, people with learning disabilities, and people with long term problems such as cognitive impairment.			
	1.2 Children's nurses must use recognised, evidence-based, child-centred frameworks to assess, plan, implement, evaluate and record care, and to underpin clinical judgments and decision-making. Care planning and delivery must be informed by knowledge of pharmacology, anatomy and physiology, pathology, psychology and sociology, from infancy to young adulthood.			
3. All nurses must carry out comprehensive, systematic nursing assessments that take account of relevant physical, social, cultural, psychological, spiritual, genetic and environmental factors, in partnership with service users and others through interaction, observation and measurement.				
	3.1 Children's nurses must carry out comprehensive nursing assessments of children and young people, recognising the particular vulnerability of infants and young children to rapid physiological deterioration.			

Domain 3: Nursing practice and decision-making					
Children's nurses must be able to care safely and effectively for children and young people in all settings, and recognise their responsibility for safeguarding them. They must be able to deliver care to meet essential and complex physical and mental health needs informed by deep understanding of biological, psychological and social factors throughout infancy, childhood and adolescence.					
Competencies		Formative assessment point (can discuss principles)		Summative assessment point (can discuss principles)	
		Mentor initials	Date	Mentor initials	Date
5. All nurses must understand public health principles, priorities and practice in order to recognise and respond to the major causes and social determinants of health, illness and health inequalities. They must use a range of information and data to assess the needs of people, groups, communities and populations, and work to improve health, wellbeing and experiences of healthcare; secure equal access to health screening, health promotion and healthcare; and promote social inclusion.					
	5.1 Children's nurses must include health promotion, and illness and injury prevention, in their nursing practice. They must promote early intervention to address the links between early life adversity and adult ill health, and the risks to the current and future physical, mental, emotional and sexual health of children and young people.				
6. All nurses must practise safely by being aware of the correct use, limitations and hazards of common interventions, including nursing activities, treatments, and the use of medical devices and equipment. The nurse must be able to evaluate their use, report any concerns promptly through appropriate channels and modify care where necessary to maintain safety. They must contribute to the collection of local and national data and formulation of policy on risks, hazards and adverse outcomes.					
	6.1 Children's nurses must have numeracy skills for medicines management, assessment, measuring, monitoring and recording which recognise the particular vulnerability of infants and young children in relation accurate medicines calculation.				
8. All nurses must provide educational support, facilitation skills and therapeutic nursing interventions to optimise health and wellbeing. They must promote self-care and management whenever possible, helping people to make choices about their healthcare needs, involving families and carers where appropriate, to maximise their ability to care for themselves.					
	8.1 Children's nurses must use negotiation skills to ensure the best interests of children and young people in all decisions, including the continuation or withdrawal of care. Negotiation must include the child or young person, their family and members of the multidisciplinary and interagency team where appropriate.				
9. All nurses must be able to recognise when a person is at risk and in need of extra support and protection and take reasonable steps to protect them from abuse.					
	9.1 Children's nurses must understand their central role in preventing maltreatment, and safeguarding children and young people. They must work closely with relevant agencies and professionals, and know when and how to identify and refer those at risk or experiencing harm.				

Domain 4: Leadership, management and team working				
Children's nurses must listen and respond to the wishes of children and young people. They must influence the delivery of health and social care services to optimise the care of children and young people. They must work closely with other agencies and services to ensure seamless and well-supported transition to adult services.				
1. All nurses must act as change agents and provide leadership through quality improvement and service development to enhance people's wellbeing and experiences of healthcare.				
	1.1 Children's nurses must understand health and social care policies relating to the health and wellbeing of children and young people. They must, where possible, empower and enable children, young people, parents and carers to influence the quality of care and develop future policies and strategies.			
	1.2 Children's nurses must ensure that, wherever possible, care is delivered in the child or young person's home, or in another environment that suits their age, needs and preferences.			
6. All nurses must work independently as well as in teams. They must be able to take the lead in coordinating, delegating and supervising care safely, managing risk and remaining accountable for the care given.				
	6.1 Children's nurses must use effective clinical decision-making skills when managing complex and unpredictable situations, especially where the views of children or young people and their parents and carers differ. They must recognise when to seek extra help or advice to manage the situation safely.			
7. All nurses must work effectively across professional and agency boundaries, actively involving and respecting others' contributions to integrated person-centred care. They must know when and how to communicate with and refer to other professionals and agencies in order to respect the choices of service users and others, promoting shared decision making, to deliver positive outcomes and to coordinate smooth, effective transition within and between services and agencies.				
	7.1 Children's nurses must work effectively with young people who have continuing health needs, their families, the multidisciplinary team and other agencies to manage smooth and effective transition from children's services to adult services, taking account of individual needs and preferences.			

Essential skills clusters

Learning outcome Essential skills (NMC 2010): Care, compassion and communication		
Mentor to initial and date outcome of skills achievement at end of P2 skills	Skills performed under in-direct supervision	Not achieved
1.0 As partners in the care process, people can trust a newly registered graduate nurse to provide collaborative care based on the highest standards, knowledge and competence.		
<ol style="list-style-type: none"> 1. Articulates the underpinning values of The Code: Standards of conduct, performance and ethics for nurses and midwives (the code) (NMC 2008). 2. Works within limitations of the role and recognises own level of competence. 3. Promotes a professional image. 4. Shows respect for others. 5. Is able to engage with people and build caring professional relationships. 	These ESCs are achieved in the grading grid	
2.0 People can trust the newly registered graduate nurse to engage in person-centred care empowering people to make choices about how their needs are met when they are unable to meet them for themselves.		
<ol style="list-style-type: none"> 1. Takes a person centred personalised approach to care. 	This ESC is achieved in the grading grid	
3.0 People can trust the newly registered graduate nurse to respect them as individuals and strive to help them preserve their dignity at all times.		
<ol style="list-style-type: none"> 1. Demonstrates respect for diversity and individual preference, valuing differences, regardless of personal view. 2. Engages with people in a way that ensures dignity is maintained through making appropriate use of the environment, skills and adopting an appropriate attitude. 3. Uses ways to maximise communication where hearing, vision or speech is compromised. 		
4.0 People can trust in a newly qualified graduate nurse to engage with them and their family or carers within their cultural environments in an acceptant and anti-discriminatory manner, free from harassment and exploitation.		
<ol style="list-style-type: none"> 1. Demonstrates an understanding of how culture, religion, spiritual beliefs, gender and sexuality can impact on illness and disability. 2. Respects people's rights. 3. Adopts a principled approach to care underpinned by the code (NMC 2008). 		
5.0 People can trust the newly registered graduate nurse to engage with them in a warm, sensitive and compassionate way.		
<ol style="list-style-type: none"> 1. Takes into account peoples physical and emotional responses when engaging with them. 2. Interacts with the person in a manner that is interpreted as warm, sensitive, kind and compassionate, making appropriate use of touch. 3. Provides person centred care that addresses both physical and emotional needs and preferences. 4. Evaluates ways in which own interactions affect relationships to ensure that they do not impact inappropriately on others. 5. Evaluates ways in which own interactions affect relationships to ensure that they do not impact inappropriately on others. 	This ESC is achieved in the grading grid	
6.0 People can trust the newly registered graduate nurse to engage therapeutically and actively listen to their needs and concerns, responding using skills that are helpful, providing information that is clear, accurate, meaningful and free from jargon.		
<ol style="list-style-type: none"> 1. Communicates effectively both orally and in writing, so that the meaning is always clear. 2. Records information accurately and clearly on the basis of observation and communication. 3. Always seeks to confirm understanding. 4. Responds in a way that confirms what a person is communicating. 5. Effectively communicates people's stated needs and wishes to other professionals. 		

Mentor to initial and date outcome of skills achievement at end of P2 skills	Skills performed under in-direct supervision	Not achieved
7.o People can trust the newly registered graduate nurse to protect and keep as confidential all information relating to them.		
<ol style="list-style-type: none"> 1. Applies the principles of confidentiality. 2. Protects and treats information as confidential except where sharing information is required for the purposes of safeguarding and public protection. 3. Applies the principles of data protection. 		
8.o People can trust the newly registered graduate nurse to gain their consent based on sound understanding and informed choice prior to any intervention and that their rights in decision making and consent will be respected and upheld.		
<ol style="list-style-type: none"> 1. Seeks consent prior to sharing confidential information outside of the professional care team, subject to agreed safeguarding and protection procedures. 		
9.o People can trust the newly registered graduate nurse to treat them as partners and work with them to make a holistic and systematic assessment of their needs; to develop a personalised plan that is based on mutual understanding and respect for their individual situation promoting health and well-being, minimising risk of harm and promoting their safety at all times.		
<ol style="list-style-type: none"> 1. Responds appropriately when faced with an emergency or a sudden deterioration in a person's physical or psychological condition (for example, abnormal vital signs, collapse, cardiac arrest, self-harm, extremely challenging behaviour, attempted suicide) including seeking help from an appropriate person. 		
11.o People can trust the newly registered graduate nurse to safeguard children and adults from vulnerable situations and support and protect them from harm.		
<ol style="list-style-type: none"> 1. Acts within legal frameworks and local policies in relation to safeguarding adults and children who are in vulnerable situations. 2. Shares information with colleagues and seeks advice from appropriate sources where there is a concern or uncertainty. 3. Uses support systems to recognise, manage and deal with own emotions. 		
12.o People can trust the newly registered graduate nurse to respond to their feedback and a wide range of other sources to learn, develop and improve services.		
<ol style="list-style-type: none"> 1. Responds appropriately to compliments and comments. 		
14.o People can trust the newly registered graduate nurse to be an autonomous and confident member of the multi-disciplinary or multi agency team and to inspire confidence in others.		
<ol style="list-style-type: none"> 1. Works within The Code (NMC 2008) and adheres to the Guidance on professional conduct for nursing and midwifery students (NMC 2010). 	This ESC is achieved in the grading grid	
15.o People can trust the newly registered graduate nurse to safely delegate to others and to respond appropriately when a task is delegated to them.		
<ol style="list-style-type: none"> 1. Accepts delegated activities within limitations of own role, knowledge and skill. 	This ESC is achieved in the grading grid	
17.o People can trust the newly registered graduate nurse to work safely under pressure and maintain the safety of service users at all times.		
<ol style="list-style-type: none"> 1. Recognises when situations are becoming unsafe and reports appropriately. 2. Understands and applies the importance of rest for effective practice. 		
18.o People can trust a newly registered graduate nurse to enhance the safety of service users and identify and actively manage risk and uncertainty in relation to people, the environment, self and others.		
<ol style="list-style-type: none"> 1. Under supervision, works within clinical governance frameworks. 2. Reports safety incidents regarding service users to senior colleagues. 3. Under supervision assesses risk within current sphere of knowledge and competence. 4. Follows instructions and takes appropriate action, sharing information to minimise risk. 5. Under supervision works within legal frameworks to protect self and others. 6. Knows and accepts own responsibilities and takes appropriate action. 		
19.o People can trust the newly registered graduate nurse to work to prevent and resolve conflict and maintain a safe environment.		
<ol style="list-style-type: none"> 1. Recognises signs of aggression and responds appropriately to keep self and others safe. 2. Assists others or obtains assistance when help is required. 		
20.o People can trust the newly registered graduate nurse to select and manage medical devices safely.		
<ol style="list-style-type: none"> 1. Safely uses and disposes of medical devices under supervision and in keeping with local and national policy and understands reporting mechanism relating to adverse incidents. 		

Mentor to initial and date outcome of skills achievement at end of P2 skills	Skills performed under in-direct supervision	Not achieved
Learning outcomes Essential skills (NMC 2010): Infection prevention and control		
21.0 People can trust the newly registered graduate nurse to identify and take effective measures to prevent and control infection in accordance with local and national policy.		
1. Follows local and national guidelines and adheres to standard infection control precautions.		
22.0 People can trust the newly registered graduate nurse to maintain effective standard infection control precautions and apply and adapt these to needs and limitations in all environments.		
1. Demonstrates effective hand hygiene and the appropriate use of standard infection control precautions when caring for all people.	This ESC is achieved in the grading grid	
24.0 People can trust a newly registered graduate nurse to fully comply with hygiene, uniform and dress codes in order to limit, prevent and control infection.		
1. Adheres to local policy and national guidelines on dress code for prevention and control of infection, including: footwear, hair, piercing and nails. 2. Maintains a high standard of personal hygiene. 3. Wears appropriate clothing for the care delivered in all environments.	These ESC is achieved in the grading grid	
Learning outcomes Essential skills (NMC 2010): Nutrition and fluid balance		
30.0 People can trust the newly qualified graduate nurse to assist them in creating an environment that is conducive to eating and drinking.		
1. Reports to an appropriate person where there is a risk of meals being missed. 2. Follows food hygiene procedures in accordance with policy.		

Medicines management

Mentor to initial and date outcome of skills achievement at end of P2 skills	Skills performed under direct supervision	Not achieved	Indicative content
Learning outcomes Essential skills (NMC 2010): Medicines management			
33.0 People can trust the newly registered graduate nurse to correctly and safely undertake medicines* calculations.			
1. Is competent in basic medicines calculations (*) relating to: <ul style="list-style-type: none"> ● tablets and capsules ● liquid medicines ● injections including: <ul style="list-style-type: none"> - unit dose - sub and multiple unit dose - SI unit conversion. 			Numeracy skills, drug calculations required to administer medicines safely via appropriate routes including specific requirements for children and other groups.

1 Medicines management is “the clinical cost effective and safe use of medicines to ensure patients get maximum benefit from the medicines they need while at the same time minimising potential harm” (MHRA 2004). As the administration of a medicinal product is only part of the process, these ESCs reflect the process from prescribing, through to dispensing, storage, administration and disposal.

2 A Medicinal product is “Any substance or combination of substances presented for treating or preventing disease in human beings or in animals. Any substance or combination of substances which may be administered to human beings or animals with a view to making a medical diagnosis or to restoring, correcting or modifying physiological functions in human beings or animals is likewise considered a medicinal product” (Council Directive 65/65/EEC).

Formative grading assessment

P2: Communication and compassion.

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A,B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail D	Fail E	Grade
Effective communication and interpersonal skills					
<p>Exceptional communication and interpersonal skills. Communication is safe, effective, compassionate & respectful of professional boundaries.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Good communication and interpersonal skills. Communication is safe, effective, compassionate & respectful of professional boundaries.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Satisfactory communication and interpersonal skills. Communication is mainly effective but is always safe, compassionate and respectful of professional boundaries.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Communication and interpersonal skills lack confidence. Communication is compassionate but inconsistently effective or is not always respectful of professional boundaries.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Communication and interpersonal skills poor. Inability to effectively communicate. Lacks personal self-awareness of professional boundaries.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	
Nonverbal communication skills, interpretation and response					
<p>Demonstrates exceptional active listening skills. Consistently aware of all verbal & nonverbal cues and confidently interprets information and responds skilfully and appropriately.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Good listening skills. Demonstrates awareness of verbal and non-verbal cues & able to interpret information & respond appropriately.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Satisfactory listening skills. Demonstrates some awareness of verbal and non-verbal cues but occasionally misses cues. Mostly responds appropriately.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Listening skills inconsistent. Inability to pick up on some important verbal or non-verbal cues and therefore interpretation and appropriate responses are inadequate.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Poor listening skills. Consistently oblivious to important verbal and non-verbal cues. Responses inappropriate to situation.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	
Record keeping					
<p>Exceptional record keeping (including electronic form) and uses appropriate, clear, concise language to document care. Documentation is safe, accurate, well organised, comprehensive and complete.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Good record keeping (including electronic form) & mainly uses appropriate, clear language to document care. Could be more concise at times. Documentation is safe, accurate and complete. Limited support required.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Satisfactory safe record keeping (including electronic form). Could improve language used to document care. Requires some support to ensure records are complete.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Record keeping is inconsistent (including electronic form). Use of language used to document care is not always appropriate or clear. Requires frequent support to ensure records are safe, accurate and complete.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Poor record keeping (including electronic form). Language used inappropriate, unclear & inaccurate. Requires constant support to ensure records are accurate, safe and complete.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	
Confidentiality in professional practice					
<p>Exceptional understanding and knowledge of the principles of confidentiality in professional practice. Responds in an exemplary way to situations arising in everyday practice within legal and ethical frameworks.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Good understanding and knowledge of the principles of confidentiality in professional practice. Responds in an appropriate way to situations arising in everyday practice in accordance within legal and ethical frameworks.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Satisfactory understanding and knowledge of the principles of confidentiality in professional practice. Satisfactory response to situations arising in everyday practice in accordance within legal and ethical frameworks.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Limited understanding and knowledge of the principles of confidentiality in professional practice. Inaccurate responses to situations arising in everyday practice. Sometimes able to apply legal and ethical frameworks relating to confidentiality. At risk of breaching confidentiality.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Lacks knowledge and fails to understand principles of confidentiality in professional practice. Unsatisfactory response to situations arising in everyday practice. Not able to apply legal and ethical frameworks relating to confidentiality and at risk of, or breaches confidentiality.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	

Students are expected to photocopy this page and grade themselves before meeting with their mentor

Formative (interim review) - practice experience 2

Student's review of progress

After discussion with your mentor and formative grading, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Student signature

Date

Mentor's review of progress

After discussion with your mentor, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Mentor signature

Date

Following this review of progress and learning needs:

	YES	NO
Learning needs have been re-explored		
Action plan has been re-negotiated/developed		
Academic tutor has been contacted		

Learning need	Action plan
Student's signature	Date
Mentor's signature	Date
Proposed date for final interview	

Service user/carer involvement in practice

Consent must be gained from the service user/carer with the mentor present to participate in this exercise.

This exercise can be undertaken as a discussion and the mentor should then record the points raised below.

We would like to hear from you about your views of the way nursing students have contributed to the care that you have received. You do not need to disclose your name and the feedback that you give will not affect the care you receive. There is no requirement for you to participate in this exercise (if a carer, this relates to the care given to the service user).

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Additional practitioner feedback

Comments on the student's performance during additional practice experiences/spoke experiences

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Additional practitioner feedback

Comments on the student's performance during additional practice experiences/spoke experiences

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Grading in Practice - Core attribute achievement

Professionalism	PASS	FAIL
Demonstrates under supervision safe, basic person centred care which meets people's essential care needs.		
Promotes a professional image in behaviour and appearance at all times.		
Demonstrates adherence to organisational requirements for hygiene, uniform and dress code in order to limit, prevent and control infection.		
Demonstrates regular, punctual attendance and has knowledge of, or shows application of organisational procedures for reporting absence from practice experience.		
Recognises and works within limitations of knowledge, skills and professional boundaries.		
Demonstrate reflective skills when evaluating own practice.		

Students must achieve a pass in all core attributes before they can be graded in compassion and communication

Experience 2: Grading in Practice – Formative exercise for communication and compassion

Very often, in our day to day interactions with others, we tend to use repetitive forms of communication and respond using similar range of related interactions because we are not aware that other options are available. This exercise is aimed at helping you identify different sorts of interventions we can use. By identifying a range of interventions we can act more precisely and with a greater sense of intention. The nurse-service user interaction then becomes more structured and less haphazard: we know what we are saying and also have insights into how we are saying it. This gives us greater interpersonal choice.

Consider the first time a service user asked you questions about their diagnosis and associated treatment. How did you feel? How did you deal with this encounter? In particular how did you communicate with the service user (verbally and non-verbally)? Also, how does this interaction compare to how you would now handle such a situation?

Find out about Heron's six category interventions (1989). The six categories are-

- prescriptive (offering advice)
- informative (offering information)
- confronting (challenging)
- cathartic (enabling the expression of feelings;
- catalytic (drawing out)
- supportive (confirming or encouraging)

Then discuss with your mentor how this model for understanding interpersonal relationships will influence your interpersonal relationship with future service users.

Make a list of the key points that you want to remember for future interactions

Remember when clients/relatives ask you about diagnosis and treatment you must refer them to a qualified practitioner

Summative grading assessment

P2: Communication and compassion

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A,B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail D	Fail E	Grade
Effective communication and interpersonal skills					
<p>Exceptional communication and interpersonal skills. Communication is safe, effective, compassionate & respectful of professional boundaries.</p> <p>S M</p>	<p>Good communication and interpersonal skills. Communication is safe, effective, compassionate & respectful of professional boundaries.</p> <p>S M</p>	<p>Satisfactory communication and interpersonal skills. Communication is mainly effective but is always safe, compassionate and respectful of professional boundaries.</p> <p>S M</p>	<p>Communication and interpersonal skills lack confidence. Communication is compassionate but inconsistently effective or is not always respectful of professional boundaries.</p> <p>S M</p>	<p>Communication and interpersonal skills poor. Inability to effectively communicate. Lacks personal self-awareness of professional boundaries.</p> <p>S M</p>	
Nonverbal communication skills, interpretation and response					
<p>Demonstrates exceptional active listening skills. Consistently aware of all verbal & nonverbal cues and confidently interprets information and responds skilfully and appropriately.</p> <p>S M</p>	<p>Good listening skills. Demonstrates awareness of verbal and non-verbal cues & able to interpret information & respond appropriately.</p> <p>S M</p>	<p>Satisfactory listening skills. Demonstrates some awareness of verbal and non-verbal cues but occasionally misses cues. Mostly responds appropriately.</p> <p>S M</p>	<p>Listening skills inconsistent. Inability to pick up on some important verbal or non-verbal cues and therefore interpretation and appropriate responses are inadequate.</p> <p>S M</p>	<p>Poor listening skills. Consistently oblivious to important verbal and non-verbal cues. Responses inappropriate to situation.</p> <p>S M</p>	
Record keeping					
<p>Exceptional record keeping (including electronic form) and uses appropriate, clear, concise language to document care. Documentation is safe, accurate, well organised, comprehensive and complete.</p> <p>S M</p>	<p>Good record keeping (including electronic form) & mainly uses appropriate, clear language to document care. Could be more concise at times. Documentation is safe, accurate and complete. Limited support required.</p> <p>S M</p>	<p>Satisfactory safe record keeping (including electronic form). Could improve language used to document care. Requires some support to ensure records are complete.</p> <p>S M</p>	<p>Record keeping is inconsistent (including electronic form). Use of language used to document care is not always appropriate or clear. Requires frequent support to ensure records are safe, accurate and complete.</p> <p>S M</p>	<p>Poor record keeping (including electronic form). Language used inappropriate, unclear & inaccurate. Requires constant support to ensure records are accurate, safe and complete.</p> <p>S M</p>	
Confidentiality in professional practice					
<p>Exceptional understanding and knowledge of the principles of confidentiality in professional practice. Responds in an exemplary way to situations arising in everyday practice within legal and ethical frameworks.</p> <p>S M</p>	<p>Good understanding and knowledge of the principles of confidentiality in professional practice. Responds in an appropriate way to situations arising in everyday practice in accordance within legal and ethical frameworks.</p> <p>S M</p>	<p>Satisfactory understanding and knowledge of the principles of confidentiality in professional practice. Satisfactory response to situations arising in everyday practice in accordance within legal and ethical frameworks.</p> <p>S M</p>	<p>Limited understanding and knowledge of the principles of confidentiality in professional practice. Inaccurate responses to situations arising in everyday practice. Sometimes able to apply legal and ethical frameworks relating to confidentiality. At risk of breaching confidentiality.</p> <p>S M</p>	<p>Lacks knowledge and fails to understand principles of confidentiality in professional practice. Unsatisfactory response to situations arising in everyday practice. Not able to apply legal and ethical frameworks relating to confidentiality and at risk of, or breaches confidentiality.</p> <p>S M</p>	

Students are expected to photocopy this page and grade themselves before meeting with their mentor

Summative assessment

P2 - Communication and compassion

Grading category		Grade awarded	
Effective communication and interpersonal skills			
Nonverbal communication skills, interpretation and response			
Confidentiality in professional practice			
Confidentiality in professional practice			
If the student has achieved a D or E in any of the above a fail must be awarded (please circle)		PASS	FAIL
Competency and skills achievement: If the student has not achieved in any of these then a fail must be awarded (please circle)			
Field competencies	PASS	FAIL: list all not achieved	
Essential skills cluster	PASS	FAIL: list all not achieved	
Practitioner signature		Date	
Student signature		Date	
Moderator signature (if used)		Date	

Summative feedback – practice experience 2

Please use the values model on page 18 to give the student feedback on their practice

Identified areas for further development	Suggested activities and experiences that will assist in future development	
Heart: intrinsic motivation <i>(Developing compassionate care)</i>		
Nerve: Self-belief and self-efficacy <i>(Developing themselves and advocating for the service user or carer)</i>		
Brain: Critical and analytical skills <i>(Application of appropriate theory/research to practice)</i>		
Student signature	Date	
Mentor signature	Date	
Academic tutor signature	Date	

Student's review of progress

After discussion with your mentor, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Student signature

Date

Mentor's review of progress

After discussion with the student, please summarise your views about the student's progress, including strengths, areas for development and identification of any issues affecting their performance – please remember that this information will help the next mentor develop appropriate learning experiences for the student

Mentor signature

Date

Progression signatures

I confirm that there has been no falsification of evidence within this document (before signing please read the academic integrity statement)		
Student signature	PRINT name	Date
I can confirm that the student has met the required progression point.		
Sign-off mentor signature*	PRINT name	Date
I can confirm that the student does not meet the required progression point.		
Sign-off mentor signature*	PRINT name	Date
I confirm that the documentation and signatures have been checked and verified		
Academic tutor signature	PRINT name	Date

*this indicates best practice

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Verification of practice experience 2

Prompt	Yes	No (please state those outstanding)
Progression points met?		
Grading in practice assessment completed and passed?		
Action plan completed?		
Absence record completed and matches portal print out?		
Additional visits completed?		
Additional practitioner feedback completed?		
Service user feedback completed?		
Mentor signature sheet completed?		
All interviews completed and signed?		
Academic tutor signature	PRINT name	Date

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These pages are only for the use of those students retrieving a practice experience

Retrieval documentation to be completed at the end of week 4 of the retrieval practice experience

Mentor signature sheet

Retrieval practice experience 2			
Name of placement			
Name of Trust/Practice experience provider			
Name of mentor		Mentor signature	
Name of buddy/associate mentor		Buddy/associate mentor signature	
Phone number of placement			

Initial interview

To be completed within 2 days of the start of the practice experience

This is done by the student in conjunction with the mentor, and is based upon self-assessment, previous failed practice experience and feedback from last mentor.

Learning needs: link to aspects of grading or competency and ESCs not achieved		Action Plan
Student signature		Date
Mentor signature		Date
Proposed date for interim review		

Competency to be achieved	Number of essential skill cluster to be achieved

Grading in Practice - Core attribute achievement

Professionalism	PASS	FAIL
Demonstrates under supervision safe, basic person centred care which meets people's essential care needs.		
Promotes a professional image in behaviour and appearance at all times.		
Demonstrates adherence to organisational requirements for hygiene, uniform and dress code in order to limit, prevent and control infection.		
Demonstrates regular, punctual attendance and has knowledge of, or shows application of, organisational procedures for reporting absence from practice experience.		
Recognises and works within limitations of knowledge, skills and professional boundaries.		
Demonstrate reflective skills when evaluating own practice.		

Students must achieve a pass in all core attributes before they can be graded in compassion and communication

Summative grading assessment

P2: Communication and compassion.

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A,B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail D	Fail E	Grade
Effective communication and interpersonal skills					
<p>Exceptional communication and interpersonal skills. Communication is safe, effective, compassionate & respectful of professional boundaries.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Good communication and interpersonal skills. Communication is safe, effective, compassionate & respectful of professional boundaries.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Satisfactory communication and interpersonal skills. Communication is mainly effective but is always safe, compassionate and respectful of professional boundaries.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Communication and interpersonal skills lack confidence. Communication is compassionate but inconsistently effective or is not always respectful of professional boundaries.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Communication and interpersonal skills poor. Inability to effectively communicate. Lacks personal self-awareness of professional boundaries.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	
Nonverbal communication skills, interpretation and response					
<p>Demonstrates exceptional active listening skills. Consistently aware of all verbal & nonverbal cues and confidently interprets information and responds skilfully and appropriately.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Good listening skills. Demonstrates awareness of verbal and non-verbal cues & able to interpret information & respond appropriately.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Satisfactory listening skills. Demonstrates some awareness of verbal and non-verbal cues but occasionally misses cues. Mostly responds appropriately.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Listening skills inconsistent. Inability to pick up on some important verbal or non-verbal cues and therefore interpretation and appropriate responses are inadequate.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Poor listening skills. Consistently oblivious to important verbal and non-verbal cues. Responses inappropriate to situation.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	
Record keeping					
<p>Exceptional record keeping (including electronic form) and uses appropriate, clear, concise language to document care. Documentation is safe, accurate, well organised, comprehensive and complete.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Good record keeping (including electronic form) & mainly uses appropriate, clear language to document care. Could be more concise at times. Documentation is safe, accurate and complete. Limited support required.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Satisfactory safe record keeping (including electronic form). Could improve language used to document care. Requires some support to ensure records are complete.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Record keeping is inconsistent (including electronic form). Use of language used to document care is not always appropriate or clear. Requires frequent support to ensure records are safe, accurate and complete.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Poor record keeping (including electronic form). Language used inappropriate, unclear & inaccurate. Requires constant support to ensure records are accurate, safe and complete.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	
Confidentiality in professional practice					
<p>Exceptional understanding and knowledge of the principles of confidentiality in professional practice. Responds in an exemplary way to situations arising in everyday practice within legal and ethical frameworks.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Good understanding and knowledge of the principles of confidentiality in professional practice. Responds in an appropriate way to situations arising in everyday practice in accordance within legal and ethical frameworks.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Satisfactory understanding and knowledge of the principles of confidentiality in professional practice. Satisfactory response to situations arising in everyday practice in accordance within legal and ethical frameworks.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Limited understanding and knowledge of the principles of confidentiality in professional practice. Inaccurate responses to situations arising in everyday practice. Sometimes able to apply legal and ethical frameworks relating to confidentiality. At risk of breaching confidentiality.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	<p>Lacks knowledge and fails to understand principles of confidentiality in professional practice. Unsatisfactory response to situations arising in everyday practice. Not able to apply legal and ethical frameworks relating to confidentiality and at risk of, or breaches confidentiality.</p> <p><input type="checkbox"/> S <input type="checkbox"/> M</p>	

Students are expected to photocopy this page and grade themselves before meeting with their mentor

Summative assessment

P2 - Communication and compassion

Grading category			Grade awarded	
Effective communication and interpersonal skills				
Nonverbal communication skills, interpretation and response				
Record keeping				
Confidentiality in professional practice				
Please circle either pass or fail (If the student has achieved a D or E in any of the above a fail must be awarded)			PASS	FAIL
Field competencies	PASS	FAIL: list all not achieved		
Essential skills cluster	PASS	FAIL: list all not achieved		
Competency and skills achievement: Please circle either pass or fail. (If the student has not achieved all of the field competencies and all of the essential skills (ESC) then a fail must be awarded).			PASS	FAIL
Practitioner signature			Date	
Student signature			Date	
Moderator signature (if used)			Date	

Summative feedback – practice experience 2

Please use the values model on page 18 to give the student feedback on their practice

Identified areas for further development	Suggested activities and experiences that will assist in future development	
<p>Heart: intrinsic motivation <i>(Developing compassionate care)</i></p>		
<p>Nerve: Self-belief and self-efficacy <i>(Developing themselves and advocating for the service user or carer)</i></p>		
<p>Brain: Critical and analytical skills <i>(Application of appropriate theory/research to practice)</i></p>		
Student signature	Date	
Mentor signature	Date	
Academic tutor signature	Date	

Student's review of progress

After discussion with your mentor, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance.

--	--

Student signature

Date

Mentor's review of progress

After discussion with the student, please summarise your views about the student's progress, including strengths, areas for development and identification of any issues affecting their performance – please remember that this information will help the next mentor develop appropriate learning experiences for the student.

--	--

Mentor signature

Date

Progression signatures

I confirm that there has been no falsification of evidence within this document (before signing please read the academic integrity statement)		
Student signature	PRINT name	Date
I can confirm that the student has met the required progression point.		
Sign-off mentor signature*	PRINT name	Date
I can confirm that the student does not meet the required progression point.		
Sign-off mentor signature*	PRINT name	Date
I confirm that the documentation and signatures have been checked and verified.		
Academic tutor signature	PRINT name	Date

*this indicates best practice

**This page must be scanned/photocopied and stored in the students file in the Faculty of Health Science,
University of Southampton**

Verification of retrieval practice experience 2

Prompt	Yes	No (please state those outstanding)
Progression points met?		
Grading in practice assessment completed and passed?		
Action plan completed?		
Absence record completed and matches portal print out?		
Additional visits completed?		
Additional practitioner feedback completed?		
Service user feedback completed?		
Mentor signature sheet completed?		
All interviews completed and signed?		
Academic tutor signature	PRINT name	Date

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Section 7: Part 2 of the programme

Nursing professional regulations

In order to enter the register, the NMC requires students to demonstrate achievement of specific outcomes by set “progression points” at the end of part 1, part 2, part 3 (entry to register).

Framework for assessment

In order to pass each practice experience and the end of part 2 progression point you must:

- Achieve all of the progression criteria prior to the progression point (if you achieve these in practice experience 3, they must be maintained in practice experience 4).
- Achieve all of the essential skills required at progression point 2
- Pass the grading in practice tool

Practice experience 3

Name of placement	
Name of Trust/Practice experience provider	
Name of mentor	
Name of buddy/associate mentor	
Phone number of placement	

Learning outcomes

Learning outcomes	Practice Placement (3) Single patient care management On completion of this placement the student will consistently:	
1.	demonstrate the ability to communicate using a person centred approach that recognises and respects service user/carer care preferences.	
2.	use accurate skills of observation during assessment.	
3.	demonstrates safe accurate use of diagnostic equipment or tests.	
4.	accurately interpret signs from assessment and respond appropriately.	
5.	evaluate care provided to improve clinical decision making, quality & care outcomes.	
6.	demonstrate achievement of core attributes.	
Competencies	1st progression point or Essential skills cluster (ESC)	
Domain 1 Competency 4	All nurses must work in partnership with service users, carers, families, groups, communities and organisations. They must manage risk, and promote health and wellbeing while aiming to empower choices that promote self-care and safety.	<ul style="list-style-type: none"> • Forms appropriate and constructive professional relationships with families and other carers [ESC1(6)]. • Actively empowers people to be involved in the assessment and care planning process [ESC2.2]. • Determines people’s preferences to maximise comfort & dignity [ESC2.3]. • Actively supports people in their own care and self-care [ESC2.4].

Domain 2 Competency 2	All nurses must use a range of communication skills and technologies to support person-centred care and enhance quality and safety. They must ensure people receive all the information they need in a language and manner that allows them to make informed choices and share decision making. They must recognise when language interpretation or other communication support is needed and know how to obtain it.	<ul style="list-style-type: none"> • Uses strategies to enhance communication and remove barriers to effective communication minimising risk to people from lack of or poor communication [ESC6.6]. • Distinguishes between information that is relevant to care planning and information that is not [ESC7.4].
Domain 3 Competency 1	All nurses must use up-to-date knowledge and evidence to assess, plan, deliver and evaluate care, communicate findings, influence change and promote health and best practice. They must make person-centred, evidence-based judgments and decisions, in partnership with others involved in the care process, to ensure high quality care. They must be able to recognise when the complexity of clinical decisions requires specialist knowledge and expertise, and consult or refer accordingly.	<ul style="list-style-type: none"> • Provides personalised care, or makes provisions for those who are unable to maintain their own activities of living maintaining dignity at all times [ESC2.6]. • Considers with the person and their carers their capability for self-care [ESC2.5]. • Assists people with their care [ESC2.7]. • Acts collaboratively with people and their carers enabling and empowering them to take a shared and active role in the delivery and evaluation of nursing interventions [ESC10.1].
Domain 3 Competency 3	All nurses must carry out comprehensive, systematic nursing assessments that take account of relevant physical, social, cultural, psychological, spiritual, genetic and environmental factors, in partnership with service users and others through interaction, observation and measurement.	<ul style="list-style-type: none"> • Measures and documents vital signs under supervision and responds appropriately to findings outside the normal range [ESC9.6]. • Collects and interprets routine data, under supervision, related to the assessment and planning of care from a variety of sources [ESC9.8]. • Undertakes the assessment of physical, emotional, psychological, social, cultural and spiritual needs, including risk factors by working with the person and records, shares and responds to clear indicators and signs [ESC9.9]. • With the person and under supervision, plans safe and effective care by recording and sharing information based on the assessment [ESC9.10].
Domain 3 Competency 3.1	Adult nurses must safely use a range of diagnostic skills, employing appropriate technology, to assess the needs of service users.	
Domain 3 Competency 10	All nurses must evaluate their care to improve clinical decision-making, quality and outcomes, using a range of methods, amending the plan of care, where necessary, and communicating changes to others.	<ul style="list-style-type: none"> • Reflects on own practice and discusses issues with other members of the team to enhance learning [ESC14.4]. • Takes feedback from colleagues, managers and other departments seriously and shares the messages and learning with other members of the team [ESC12.4].

Absence record

Dates		Number of hours missed	Type of absence (e.g. sickness, compassionate leave, medical/dental appointment, absence without authorisation)	Mentor's signature
From	To			

Record of absences made up

Dates		Number of made up hours	Mentor's signature
From	To		

I verify that this is an accurate record of this student's absence and I have checked accuracy with the portal printout	
Mentor signature	

I verify that this is an accurate account which matches the portal record	
Outstanding hours carried forward	Academic tutor signature

Professional development

Self-assessment by student at commencement of practice experience

Self-assessment based on previous practice experience	
Strengths	Weaknesses
Concerns	Expectations

Please discuss the key points from this assessment with your mentor prior to completing an action plan for this practice experience

Initial interview

To be completed within 2 days of the start of the practice experience

This is done by the student in conjunction with the mentor, and is based upon the self-assessment, previous practice experiences and feedback from other mentors.

Learning need	Action Plan
Student signature	Date
Mentor signature	Date
Proposed date for interim review	

NMC Field specific competencies

Domain 1: Professional values				
Children's nurses must understand their role as an advocate for children, young people and their families, and work in partnership with them. They must deliver child and family-centred care; empower children and young people to express their views and preferences; and maintain and recognise their rights and best interests.				
Competencies	Formative assessment point Can apply the principles		Summative assessment point Can apply the principles	
	Mentor initials	Date	Mentor initials	Date
1. All nurses must practise with confidence according to <i>The Code: Standards of conduct, performance and ethics for nurses and midwives</i> (NMC 2008), and within other recognised ethical and legal frameworks. They must be able to recognize and address ethical challenges relating to people's choices and decision-making about their care, and act within the law to help them and their families and carers find acceptable solutions.				
	1.1 Children's nurses must understand the laws relating to child and parental consent, including giving and refusing consent, withdrawal of treatment and legal capacity.			
2. All nurses must practise in a holistic, non-judgmental, caring and sensitive manner that avoids assumptions, supports social inclusion; recognises and respects individual choice; and acknowledges diversity. Where necessary, they must challenge inequality, discrimination and exclusion from access to care.				
	2.1 Children's nurses must recognise that all children and young people have the right to be safe, enjoy life and reach their potential. They must practise in a way that recognises, respects and responds to the individuality of every child and young person.			
3. All nurses must support and promote the health, wellbeing, rights and dignity of people, groups, communities and populations. These include people whose lives are affected by ill health, disability, inability to engage, ageing or death. Nurses must act on their understanding of how these conditions influence public health.				
	3.1 Children's nurses must act as advocates for the right of all children and young people to lead full and independent lives.			
4. All nurses must work in partnership with service users, carers, groups, communities and organisations. They must manage risk, and promote health and wellbeing while aiming to empower choices that promote self-care and safety.				
	4.1 Children's nurses must work in partnership with children, young people and their families to negotiate, plan and deliver child and family-centred care, education and support. They must recognise the parent's or carer's primary role in achieving and maintaining the child's or young person's health and wellbeing, and offer advice and support on parenting in health.			

Domain 2: Communication and interpersonal skills				
Children's nurses must take account of each child and young person's individuality, including their stage of development, ability to understand, culture, learning or communication difficulties and health status. They must communicate effectively with them and with parents and carers.				
Competencies		Formative assessment point Can apply the principles		Summative assessment point Can apply the principles
		Mentor initials	Date	Mentor initials Date
1. All nurses must build partnerships and therapeutic relationships through safe, effective and non-discriminatory communication. They must take account of individual differences, capabilities and needs.				
	1.1 Children's nurses must work with the child, young person and others to ensure that they are actively involved in decision-making, in order to maintain their independence and take account of their on-going intellectual, physical and emotional needs.			
2. All nurses must use a range of communication skills and technologies to support person-centred care and enhance quality and safety. They must ensure people receive all the information they need in a language and manner that allows them to make informed choices and share decision making. They must recognise when language interpretation or other communication support is needed and know how to obtain it.				
	2.1. Children's nurses must understand all aspects of development from infancy to young adulthood, and identify each child or young person's developmental stage, in order to communicate effectively with them. They must use play, distraction and communication tools appropriate to the child's or young person's stage of development, including for those with sensory or cognitive impairment.			
3. All nurses must use the full range of communication methods, including verbal, non-verbal and written, to acquire, interpret and record their knowledge and understanding of people's needs. They must be aware of their own values and beliefs and the impact this may have on their communication with others. They must take account of the many different ways in which people communicate and how these may be influenced by ill health, disability and other factors, and be able to recognise and respond effectively when a person finds it hard to communicate.				
	3.1 Children's nurses must ensure that, where possible, children and young people understand their healthcare needs and can make or contribute to informed choices about all aspects of their care.			
Domain 3: Nursing practice and decision-making				
Children's nurses must be able to care safely and effectively for children and young people in all settings, and recognise their responsibility for safeguarding them. They must be able to deliver care to meet essential and complex physical and mental health needs informed by deep understanding of biological, psychological and social factors throughout infancy, childhood and adolescence.				
1. All nurses must use up-to-date knowledge and evidence to assess, plan, deliver and evaluate care, communicate findings, influence change and promote health and best practice. They must make person-centred, evidence-based judgments and decisions, in partnership with others involved in the care process, to ensure high quality care. They must be able to recognise when the complexity of clinical decisions requires specialist knowledge and expertise, and consult or refer accordingly.				
	1.1 Children's nurses must be able to recognise and respond to the essential needs of all people who come into their care including babies, pregnant and postnatal women, adults, people with mental health problems, people with physical disabilities, people with learning disabilities, and people with long term problems such as cognitive impairment.			
	1.2 Children's nurses must use recognised, evidence-based, child-centred frameworks to assess, plan, implement, evaluate and record care, and to underpin clinical judgments and decision-making. Care planning and delivery must be informed by knowledge of pharmacology, anatomy and physiology, pathology, psychology and sociology, from infancy to young adulthood.			

Domain 3: Nursing practice and decision-making					
Children's nurses must be able to care safely and effectively for children and young people in all settings, and recognise their responsibility for safeguarding them. They must be able to deliver care to meet essential and complex physical and mental health needs informed by deep understanding of biological, psychological and social factors throughout infancy, childhood and adolescence.					
Competencies		Formative assessment point Can apply the principles		Summative assessment point Can apply the principles	
		Mentor initials	Date	Mentor initials	Date
3. All nurses must carry out comprehensive, systematic nursing assessments that take account of relevant physical, social, cultural, psychological, spiritual, genetic and environmental factors, in partnership with service users and others through interaction, observation and measurement.					
	3.1 Children's nurses must carry out comprehensive nursing assessments of children and young people, recognising the particular vulnerability of infants and young children to rapid physiological deterioration.				
5. All nurses must understand public health principles, priorities and practice in order to recognise and respond to the major causes and social determinants of health, illness and health inequalities. They must use a range of information and data to assess the needs of people, groups, communities and populations, and work to improve health, wellbeing and experiences of healthcare; secure equal access to health screening, health promotion and healthcare; and promote social inclusion.					
	5.1 Children's nurses must include health promotion, and illness and injury prevention, in their nursing practice. They must promote early intervention to address the links between early life adversity and adult ill health, and the risks to the current and future physical, mental, emotional and sexual health of children and young people.				
6. All nurses must practise safely by being aware of the correct use, limitations and hazards of common interventions, including nursing activities, treatments, and the use of medical devices and equipment. The nurse must be able to evaluate their use, report any concerns promptly through appropriate channels and modify care where necessary to maintain safety. They must contribute to the collection of local and national data and formulation of policy on risks, hazards and adverse outcomes.					
	6.1 Children's nurses must have numeracy skills for medicines management, assessment, measuring, monitoring and recording which recognise the particular vulnerability of infants and young children in relation accurate medicines calculation.				
8. All nurses must provide educational support, facilitation skills and therapeutic nursing interventions to optimise health and wellbeing. They must promote self-care and management whenever possible, helping people to make choices about their healthcare needs, involving families and carers where appropriate, to maximise their ability to care for themselves.					
	8.1 Children's nurses must use negotiation skills to ensure the best interests of children and young people in all decisions, including the continuation or withdrawal of care. Negotiation must include the child or young person, their family and members of the multidisciplinary and interagency team where appropriate.				
9. All nurses must be able to recognise when a person is at risk and in need of extra support and protection and take reasonable steps to protect them from abuse.					
	9.1 Children's nurses must understand their central role in preventing maltreatment, and safeguarding children and young people. They must work closely with relevant agencies and professionals, and know when and how to identify and refer those at risk or experiencing harm.				

Domain 4: Leadership, management and team working					
Children's nurses must listen and respond to the wishes of children and young people. They must influence the delivery of health and social care services to optimise the care of children and young people. They must work closely with other agencies and services to ensure seamless and well-supported transition to adult services.					
Competencies		Formative assessment point Can apply the principles		Summative assessment point Can apply the principles	
		Mentor initials	Date	Mentor initials	Date
1. All nurses must act as change agents and provide leadership through quality improvement and service development to enhance people's wellbeing and experiences of healthcare.					
	1.1 Children's nurses must understand health and social care policies relating to the health and wellbeing of children and young people. They must, where possible, empower and enable children, young people, parents and carers to influence the quality of care and develop future policies and strategies.				
	1.2 Children's nurses must ensure that, wherever possible, care is delivered in the child or young person's home, or in another environment that suits their age, needs and preferences.				
6. All nurses must work independently as well as in teams. They must be able to take the lead in coordinating, delegating and supervising care safely, managing risk and remaining accountable for the care given.					
	6.1 Children's nurses must use effective clinical decision-making skills when managing complex and unpredictable situations, especially where the views of children or young people and their parents and carers differ. They must recognise when to seek extra help or advice to manage the situation safely.				
7. All nurses must work effectively across professional and agency boundaries, actively involving and respecting others' contributions to integrated person-centred care. They must know when and how to communicate with and refer to other professionals and agencies in order to respect the choices of service users and others, promoting shared decision making, to deliver positive outcomes and to coordinate smooth, effective transition within and between services and agencies.					
	7.1 Children's nurses must work effectively with young people who have continuing health needs, their families, the multidisciplinary team and other agencies to manage smooth and effective transition from children's services to adult services, taking account of individual needs and preferences.				

Essential skills clusters

Learning outcome Essential skills (NMC 2010): Care, compassion and communication		
Essential skills: The newly qualified graduate nurse should demonstrate the following skills and behaviours.		
Mentor to initial and date outcome of skills achievement at end of P3 skills	Practiced under direct supervision	Not achieved
1.0 As partners in the care process, people can trust a newly registered graduate nurse to provide collaborative care based on the highest standards, knowledge and competence.		
6. Forms appropriate and constructive professional relationships with families and other carers.	This ESC is achieved in the grading grid	
7. Uses professional support structures to learn from experience and make appropriate adjustments.		
2.0 People can trust the newly registered graduate nurse to engage in person centred care empowering people to make choices about how their needs are met when they are unable to meet them for themselves.		
2. Actively empowers people to be involved in the assessment and care planning process.	These ESCs are achieved in the grading grid	
3. Determines people's preferences to maximise comfort & dignity.		
4. Actively supports people in their own care and self-care.		
5. Considers with the person and their carers their capability for self-care.		
6. Provides personalised care, or makes provisions for those who are unable to maintain their own activities of living maintaining dignity at all times.		
7. Assists people with their care.		
6.0 People can trust the newly registered graduate nurse to engage therapeutically and actively listen to their needs and concerns, responding using skills that are helpful, providing information that is clear, accurate, meaningful and free from jargon.		
6. Uses strategies to enhance communication and remove barriers to effective communication minimising risk to people from lack of or poor communication.	This ESC is achieved in the grading grid	
7.0 People can trust the newly registered graduate nurse to protect and keep as confidential all information relating to them.		
4. Distinguishes between information that is relevant to care planning and information that is not.	This ESC is achieved in the grading grid	
8.0 People can trust the newly registered graduate nurse to gain their consent based on sound understanding and informed choice prior to any intervention and that their rights in decision making and consent will be respected and upheld.		
2. Applies principles of consent in relation to restrictions relating to specific client groups and seeks consent for care.		
3. Ensures that the meaning of consent to treatment and care is understood by the people or service users.		
9.0 People can trust the newly registered graduate nurse to treat them as partners and work with them to make a holistic and systematic assessment of their needs; to develop a personalised plan that is based on mutual understanding and respect for their individual situation promoting health and well-being, minimising risk of harm and promoting their safety at all times.		
2. Accurately undertakes and records a baseline assessment of weight, height, temperature, pulse, respiration and blood pressure using manual and electronic devices.	This ESC is achieved in the grading grid	
3. Understands the concept of public health and the benefits of healthy lifestyles and the potential risks involved with various lifestyles or behaviours, for example, substance misuse, smoking, obesity.		
4. Recognises indicators of unhealthy lifestyles	These ESCs are achieved in the grading grid	
5. Contributes to care based on an understanding of how the different stages of an illness or disability can impact on people and carers.		
6. Measures and documents vital signs under supervision and responds appropriately to findings outside the normal range.		
7. Performs routine, diagnostic tests for example urinalysis under supervision as part of assessment process (near client testing).		
8. Collects and interprets routine data, under supervision, related to the assessment and planning of care from a variety of sources.		
9. Undertakes the assessment of physical, emotional, psychological, social, cultural and spiritual needs, including risk factors by working with the person and records, shares and responds to clear indicators and signs.		
10. With the person and under supervision, plans safe and effective care by recording and sharing information based on the assessment		
11. Where relevant, applies knowledge of age and condition-related anatomy, physiology and development when interacting with people.		

Mentor to initial and date outcome of skills achievement at end of P3 skills	Practiced under direct supervision	Not achieved
10.o People can trust the newly registered graduate nurse to deliver nursing interventions and evaluate their effectiveness against the agreed assessment and care plan.		
<ol style="list-style-type: none"> 1. Acts collaboratively with people and their carers enabling and empowering them to take a shared and active role in the delivery and evaluation of nursing interventions. 2. Works within the limitations of own knowledge and skills to question and provide safe and holistic care. 3. Prepares people for clinical interventions as per local policy. 4. Actively seeks to extend knowledge and skills using a variety of methods in order to enhance care delivery. 5. Detects, records, reports and responds appropriately to signs of deterioration or improvement. 	This ESC is achieved in the grading grid	
11.o People can trust the newly registered graduate nurse to safeguard children and adults from vulnerable situations and support and protect them from harm.		
4. Documents concerns and information about people who are in vulnerable situations.		
12.o People can trust the newly registered graduate nurse to respond to their feedback and a wide range of other sources to learn, develop and improve services.		
<ol style="list-style-type: none"> 2. Responds appropriately when people want to complain, providing assistance and support. 3. Uses supervision and other forms of reflective learning to make effective use of feedback. 		
<ol style="list-style-type: none"> 4. Takes feedback from colleagues, managers and other departments seriously and shares the messages and learning with other members of the team. 	This ESC is achieved in the grading grid	
13.o People can trust the newly registered, graduate nurse to promote continuity when their care is to be transferred to another service or person		
<ol style="list-style-type: none"> 1. Assists in preparing people and carers for transfer and transition through effective dialogue and accurate information. 2. Reports issues and people's concerns regarding transfer and transition. 3. Assists in the preparation of records and reports to facilitate safe and effective transfer. 		
14.o People can trust the newly registered graduate nurse to be an autonomous and confident member of the multi-disciplinary or multi agency team and to inspire confidence in others.		
<ol style="list-style-type: none"> 2. Supports and assists others appropriately. 3. Values others' roles and responsibilities within the team and interacts appropriately. 4. Reflects on own practice and discusses issues with other members of the team to enhance learning. 5. Communicates with colleagues verbally, face-to-face and by telephone, and in writing and electronically in a way that the meaning is clear, and checks that the communication has been fully understood. 	This ESC is achieved in the grading grid	
17.o People can trust the newly registered graduate nurse to work safely under pressure and maintain the safety of service users at all times.		
<ol style="list-style-type: none"> 3. Contributes as a team member. 4. Demonstrates professional commitment by working flexibly to meet service needs to enable quality care to be delivered. 5. Uses supervision as a means of developing strategies for managing own stress and for working safely and effectively. 6. Adheres to safety policies when working in the community and in people's homes, for example, lone worker policy. 		
18.o People can trust a newly registered graduate nurse to enhance the safety of service users and identify and actively manage risk and uncertainty in relation to people, the environment, self and others.		
<ol style="list-style-type: none"> 7. Contributes to promote safety and positive risk taking. 8. Under supervision works safely within the community setting taking account of local policies, for example, lone worker policy. 		

Mentor to initial and date outcome of skills achievement at end of P3 skills	Practiced under direct supervision	Not achieved
Learning outcomes Essential skills (NMC 2010) – Infection Prevention and control		
21.o People can trust the newly registered graduate nurse to identify and take effective measures to prevent and control infection in accordance with local and national policy.		
<ul style="list-style-type: none"> 2. Participates in assessing and planning care appropriate to the risk of infection thus promoting the safety of service users. 3. Participates in completing care documentation and evaluation of interventions to prevent and control infection. 4. Aware of the role of the Infection Control Team and Infection Control Nurse Specialist, and local guidelines for referral. 5. Recognises potential signs of infection and reports to relevant senior member of staff. 6. Discusses the benefits of health promotion within the concept of public health in the prevention and control of infection for improving and maintaining the health of the population. 		
22.o People can trust the newly registered graduate nurse to maintain effective standard infection control precautions and apply and adapt these to needs and limitations in all environments.		
<ul style="list-style-type: none"> 2. Applies knowledge of transmission routes in describing, recognising and reporting situations where there is a need for standard infection control precautions 3. Participates in the cleaning of multiuse equipment between each person. 4. Uses multi-use equipment and follows the appropriate procedures. 5. Safely uses and disposes of, or decontaminates, items in accordance with local policy and manufacturers' guidance and instructions. 6. Adheres to requirements for cleaning, disinfecting, decontaminating of 'shared' nursing equipment, including single or multi-use equipment, before and after every use as appropriate, according to recognised risk, in accordance with manufacturers' and organisational policies. 		
23.o People can trust a newly registered graduate nurse to provide effective nursing interventions when someone has an infectious disease including the use of standard isolation techniques.		
<ul style="list-style-type: none"> 1. Safely delivers care under supervision to people who require to be nursed in isolation or in protective isolation settings. 2. Takes appropriate actions in any environment including the home care setting, should exposure to infection occur, for example, chicken pox, diarrhoea and vomiting, needle stick injury. 3. Applies knowledge of an 'exposure prone procedure' and takes appropriate precautions and actions. 4. Takes personal responsibility, when a student knowingly has a blood borne virus, to consult with occupational health before carrying out exposure prone procedures. 		
25.o People can trust a newly registered graduate nurse to safely apply the principles of asepsis when performing invasive procedures and be competent in aseptic technique in a variety of settings.		
<ul style="list-style-type: none"> 1. Demonstrates understanding of the principles of wound management, healing and asepsis, Safely performs basic wound care using clean and aseptic techniques in a variety of settings. 2. Assists in providing accurate information to people and their carers on the management of a device, site or wound to prevent and control infection and to promote healing wherever that person might be, for example, in hospital, in the home care setting, in an unplanned situation. 		
26.o People can trust the newly qualified nurse to act, in a variety of environments including the home care setting, to reduce risk when handling waste, including sharps, contaminated linen and when dealing with spillages of blood and other body fluids.		
<ul style="list-style-type: none"> 1. Adheres to health and safety at work legislation and infection control policies regarding the safe disposal of all waste, soiled linen, blood and other body fluids and disposing of 'sharps' including in the home setting. 2. Ensures dignity is preserved when collecting and disposing of bodily fluids and soiled linen. 3. Acts to address potential risks within a timely manner including in the home setting. 		

Mentor to initial and date outcome of skills achievement at end of P3 skills	Practiced under direct supervision	Not achieved
Learning outcomes Essential skills (NMC 2010): Nutrition		
27.o People can trust the newly registered graduate nurse to assist them to choose a diet that provides an adequate nutritional and fluid intake.		
<ol style="list-style-type: none"> 1. Under supervision helps people to choose healthy food and fluid in keeping with their personal preferences and cultural needs. 2. Accurately monitors dietary and fluid intake and completes relevant documentation. 3. Supports people who need to adhere to specific dietary and fluid regimens and informs them of the reasons. 4. Maintains independence and dignity wherever possible and provides assistance as required. 5. Identifies people who are unable to or have difficulty in eating or drinking and reports this to others to ensure adequate nutrition and fluid intake is provided. 		
28.o People can trust the newly registered graduate nurse to assess and monitor their nutritional status and in partnership, formulate an effective plan of care.		
<ol style="list-style-type: none"> 1. Takes and records accurate measurements of weight, height, length, body mass index and other appropriate measures of nutritional status. 2. Assesses baseline nutritional requirements for healthy people related to factors such as age and mobility. 3. Contributes to formulating a care plan through assessment of dietary preferences, including local availability of foods and cooking facilities. 4. Reports to other members of the team when agreed plan is not achieved. 		
29.o People can trust a newly registered graduate nurse to assess and monitor their fluid status and in partnership with them, formulate an effective plan of care.		
<ol style="list-style-type: none"> 1. Applies knowledge of fluid requirements needed for health and during illness and recovery so that appropriate fluids can be provided. 2. Accurately monitors and records fluid intake and output. 3. Recognises and reports reasons for poor fluid intake and output. 4. Reports to other members of the team when intake and output falls below requirements. 		
30.o People can trust the newly qualified graduate nurse to assist them in creating an environment that is conducive to eating and drinking.		
<ol style="list-style-type: none"> 3. Follows local procedures in relation to mealtimes, for example, protected mealtimes, indicators of people who need additional support. 4. Ensures that people are ready for the meal; that is, in an appropriate location, position, offered opportunity to wash hands, offered appropriate assistance. 		
31.o People can trust the newly qualified graduate nurse to ensure that those unable to take food by mouth receive adequate fluid and nutrition to meet their needs.		
<ol style="list-style-type: none"> 1. Recognises, responds appropriately and reports when people have difficulty eating or swallowing. 2. Adheres to an agreed plan of care that provides for individual difference, for example, cultural considerations, psychosocial aspects and provides adequate nutrition and hydration when eating and swallowing is difficult. 		

Medicines Management

Mentor to initial and date outcome of skills achievement at end of P3 skills	Practiced under direct supervision	Not achieved	Indicative content
34.o People can trust the newly registered graduate nurse to work within legal and ethical frameworks that underpin safe and effective medicines management.			
<ol style="list-style-type: none"> 1. Demonstrates understanding of legal and ethical frameworks relating to safe administration of medicines in practice. 2. Demonstrates an understanding of types of prescribing, types of prescribers and methods of supply. 3. Demonstrates understanding of legal and ethical frameworks for prescribing. 			<p>Law, consent, confidentiality, ethics, accountability.</p> <p>Responsibilities under law, application of medicines legislation to practice, include: use of controlled drugs, exemption orders in relation to patient group direction (PGD).</p> <p>Regulatory requirements: Standards for medicines management (NMC 2007), the code (NMC 2008), Standards of proficiency for nurse and midwife prescribers (NMC 2006).</p> <p>Statutory requirements in relation to mental health, mental capacity, children and young people and medicines, national service frameworks and other country specific guidance.</p>
35.o People can trust the newly registered graduate nurse to work as part of a team to offer holistic care and a range of treatment options of which medicines may form a part.			
<ol style="list-style-type: none"> 1. Demonstrates awareness of a range of commonly recognised approaches to managing symptoms, for example, relaxation, distraction and lifestyle advice. 2. Discusses referral options. 			<p>The principles of holistic care, health promotion, lifestyle advice, over-the-counter medicines, self-administration of medicines and other therapies.</p> <p>Observation and assessment. Effect of medicines and other treatment options, including distraction, positioning, alternative and complementary therapies.</p> <p>Ethical and legal frameworks.</p>
36.o People can trust the newly registered graduate nurse to ensure safe and effective practice in medicines management through comprehensive knowledge of medicines, their actions, risks and benefits.			
<ol style="list-style-type: none"> 1. Uses knowledge of commonly administered medicines in order to act promptly in cases where side effects and adverse reactions occur. 			<p>Related anatomy and physiology. Drug pathways and how medicines act.</p> <p>Impacts of physiological state of patients on drug responses and safety, for example, the older adult, children, pregnant or breast feeding women and significant pathologies such as renal or hepatic impairments.</p> <p>Pharmacodynamics -the effects of drugs and their mechanisms of action in the body.</p> <p>Pharmacotherapeutics – the therapeutic actions of certain medicines. Risks versus benefits of medication.</p> <p>Pharmacokinetics and how doses are determined by dynamics and systems in the body.</p> <p>Role and function of bodies that regulate and ensure the safety and effectiveness of medicines.</p> <p>Knowledge on management of adverse drug events, adverse drug reactions, prescribing and administration errors and the potential repercussions for safety.</p>

Mentor to initial and date outcome of skills achievement at end of P3 skills	Practiced under direct supervision	Not achieved	Indicative content
37.o People can trust the newly registered graduate nurse to safely order, receive, store and dispose of medicines (including controlled drugs) in any setting.			
1. Demonstrates ability to safely store medicines under supervision.			<p>Managing medicines in hospital or primary care settings, for example, schools and the home care setting.</p> <p>Legislation that underpins practice related to a wide range of medicines such as controlled drugs, infusions and oxygen.</p> <p>Suitable conditions for storage, managing out-of-date stock, safe handling medication, managing discrepancies in stock, omissions.</p>
38.o People can trust the newly registered graduate nurse to administer medicines safely and in a timely manner, including controlled drugs.			
<p>1. Uses prescription chart correctly and maintain accurate records.</p> <p>2. Utilises and safely disposes of equipment needed to draw up and administer medication, for example, needles, syringes, gloves.</p> <p>3. Administers and, where necessary, prepares medication safely under direct supervision, including orally and by injection.</p>			<p>Involvement of people receiving treatment, management of fear and anxiety, importance of nonverbal and verbal communication.</p> <p>Use of prescription charts including how to prepare, read and interpret them and record administration and non-administration. Use of personal drug record cards for controlled drugs.</p> <p>Preparing and administering medication in differing environments places, including the home care setting, hygiene, infection control, compliance aids, safe transport and disposal of medicines and equipment.</p> <p>Safety, checking person's identity, last dose, allergies, anaphylaxis, poly-pharmacy, monitoring of effect and record keeping.</p> <p>Where and how to report contra-indications, side effects, adverse reactions.</p> <p>Skills needed to administer safely via various means, for example, oral, topical, by infusion, injection, syringe driver and pumps.</p> <p>Aware of own limitations and when to refer on.</p> <p>Legal requirements, mechanisms for supply, sale and administration of medication, self-administration including controlled drugs.</p>
39.o People can trust a newly registered graduate nurse to keep and maintain accurate records using information technology, where appropriate, within a multi-disciplinary framework as a leader and as part of a team and in a variety of care settings including at home.			
1. Demonstrates awareness of roles and responsibilities within the multi-disciplinary team for medicines management, including how and in what ways information is shared within a variety of settings.			<p>Links to legislation, use of controlled drugs, the code in relation to confidentiality, consent and record keeping.</p> <p>Use of electronic records.</p>
40.o People can trust a newly registered graduate nurse to work in partnership with people receiving medical treatments and their carers.			
1. Under supervision involves people and carers in administration and self-administration of medicines.			<p>Cultural, religious, linguistic and ethical beliefs, issues and sensitivities around medication.</p> <p>Ethical issues relating to compliance and administration of medicine without consent.</p> <p>Self-administration, assessment explanation and monitoring.</p> <p>Concordance.</p> <p>Meeting needs of specific groups including self-administration, for example, people with mental health needs, learning disabilities, children and young people, adolescents and older adults.</p>

Mentor to initial and date outcome of skills achievement at end of P3 skills	Practiced under direct supervision	Not achieved	Indicative content
41.0 People can trust the newly registered graduate nurse to use and evaluate up-to-date information on medicines management and work within national and local policy guidelines.			
1. Accesses commonly used evidence based sources relating to the safe and effective management of medicine.			Evidence based practice, identification of resources, the 'expert' patient and client. Using sources of information, national and local policies, clinical governance, formularies, for example, British National Formulary and the British National Formulary for Children.
42.0 People can trust the newly registered graduate nurse to demonstrate understanding and knowledge to supply and administer via a patient group direction.			
1. Demonstrates knowledge of what a patient group direction is and who can use them.			National prescribing centre competency framework www.npc.co.uk

1 Medicines management is “the clinical cost effective and safe use of medicines to ensure patients get maximum benefit from the medicines they need while at the same time minimising potential harm” (MHRA 2004). As the administration of a medicinal product is only part of the process, these ESCs reflect the process from prescribing, through to dispensing, storage, administration and disposal.

2 A Medicinal product is “Any substance or combination of substances presented for treating or preventing disease in human beings or in animals. Any substance or combination of substances which may be administered to human beings or animals with a view to making a medical diagnosis or to restoring, correcting or modifying physiological functions in human beings or animals is likewise considered a medicinal product” (Council Directive 65/65/EEC).

Formative grading assessment

P3 Single patient care management

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A, B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail	Fail	Grade
Person centred communication					
<p>Exemplary patient led discussion and appropriate consideration of patient/carer preferences when planning care provision.</p>	<p>Good discussion with limited support to identify patient/carer preferences when planning care provision. Patient/carer appropriately included in decision making.</p>	<p>Attempts to involve patient/carer in discussion when planning care provision. Less skilful or confident in approach. Adequate and appropriate recognition of preferences.</p>	<p>Some discussion with patient/carer of preferences when planning care provision but inadequate recognition of, or chooses to ignore reasonable patient/carer preferences.</p>	<p>Inappropriate and ineffective discussion to adequately plan patient’s care provision. Discussion fails to identify patient/carer preferences.</p>	
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Assessment skills: observational skills & ability to choose diagnostic tools/equipment to aid assessment & demonstrates ability to use them					
<p>Exemplary ability to comprehensively and accurately assess: demonstrates excellent skills of observation and expertly uses appropriate diagnostic equipment/tools.</p>	<p>Good ability to accurately assess: demonstrates good observation skills and accurately uses appropriate diagnostic equipment/tools with limited support.</p>	<p>Safe assessment skills. Demonstrates satisfactory skills of observation and accurately uses appropriate diagnostic equipment/tools with some support.</p>	<p>Lacking in confidence when undertaking assessment. Satisfactory observation skills but inaccurate or inappropriate use of diagnostic equipment/tools.</p>	<p>Inadequate & inappropriate assessment therefore unsafe practice. Lacking basic skills of observation and/or inaccurate/inappropriate use of diagnostic equipment/tools.</p>	
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Assessment skills: interpretation of findings and responds to findings, implementing evidenced based care					
<p>Confidently & accurately interprets findings. Skilfully responds/ refers promptly and appropriately. Provides exemplary evidenced based care in a caring, proficient, coordinated manner.</p>	<p>Accurately interprets findings. Responds/ refers appropriately. Provides good evidenced based care with limited support in a caring, competent manner.</p>	<p>Accurately interprets findings. Seeks support/ advice from mentor to respond/refer appropriately. With help satisfactory evidenced based care provided in a caring manner.</p>	<p>Accurately interprets findings but does not respond or refer appropriately. With prompting recognises need for support from mentor to demonstrate safe, evidence based practice.</p>	<p>Not able to accurately interpret findings and does not respond or refer appropriately. Does not seek support/ advice from mentor therefore intervention by mentor required to maintain patient safety.</p>	
<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	
Evaluation of care					
<p>Exceptional ability to evaluate care to improve clinical decision making, quality and outcomes.</p>	<p>Good ability to evaluate care to improve clinical decision making, quality and outcomes.</p>	<p>Satisfactory ability with some prompting to evaluate care to improve clinical decision making, quality and outcomes.</p>	<p>Limited ability to evaluate care to improve clinical decision making, quality and outcomes.</p>	<p>Lacks ability to evaluate care to improve clinical decision making, quality and outcomes.</p>	
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Students are expected to photocopy this page and grade themselves before meeting with their mentor

Formative (interim review) - practice experience 3

Student's review of progress

After discussion with your mentor and formative grading, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Student signature

Date

Mentor's review of progress

After discussion with the student and formative grading, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Mentor signature

Date

Following this review of grading, progress review and learning needs:

	YES	NO
Learning needs have been re-explored		
Action plan has been re-negotiated/developed		
Academic tutor must be contacted if any formative fail grades have been awarded or any concerns are raised at this point		

Learning need	Action plan
Student's signature	Date
Mentor's signature	Date
Proposed date for review	

Service user/carer involvement in practice

Consent must be gained from the service user/carer with the mentor present to participate in this exercise.

This exercise can be undertaken as a discussion and the mentor should then record the points raised below.

We would like to hear from you about your views of the way nursing students have contributed to the care that you have received.

You do not need to disclose your name and the feedback that you give will not affect the care you receive. There is no requirement for you to participate in this exercise (if a carer this relates to the care given to the service user).

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Additional practitioner feedback

Comments on the student's performance during additional practice experiences/spoke experiences

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Additional practitioner feedback

Comments on the student's performance during additional practice experiences/ spoke experiences

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Grading in Practice - Core attribute achievement

Professionalism	PASS	FAIL
Demonstrates under supervision safe, basic person centred care which meets people's essential care needs.		
Promotes a professional image in behaviour and appearance at all times.		
Demonstrates adherence to organisational requirements for hygiene, uniform and dress code in order to limit, prevent and control infection.		
Demonstrates regular, punctual attendance and has knowledge of, or shows application of organisational procedures for reporting absence from practice experience.		
Recognises and works within limitations of knowledge, skills and professional boundaries.		
Demonstrate reflective skills when evaluating own practice.		

Compassion and Communication	PASS	FAIL
Demonstrate the ability to engage with people and build caring professional relationships using effective communication and interpersonal skills, always respecting professional boundaries.		
Demonstrate active listening skills through use of appropriate non-verbal communication skills.		
Demonstrate effective listening by responding in an appropriate way to a range of communication cues.		
Use a variety formats to produce clear, concise and complete records, using appropriate professional language to document care whilst applying the principles of data protection.		
Describe and demonstrate application of the principles of confidentiality in professional practice.		

Students must achieve a pass in all core attributes before they can be graded in single patient care management

Experience 3: grading in practice exercise

– Formative exercise for single patient care management

As a nurse you will have a vital role to play in managing drug therapy for service users with medical conditions. To undertake this safely you will need to use knowledge of the drug (*core drug knowledge*) and knowledge about the service user (*core service user variables*) to maximise the therapeutic and minimise the adverse effects of the drug and to provide patients and family with information. With your mentor select one patient you have been working with and who is informing the grading of *single patient care management*. Now select one drug they are currently prescribed and undertake the following research:

Drug name	
Pharmacotherapeutics: the desired effects of the drug	
Pharmacokinetics: the changes that occur to the drug inside the body	
Pharmacodynamics: the effects of the drug on the body	
Contraindications & precautions: conditions under which the drug should not be used or must be used carefully with monitoring	
Adverse effects: unintended and usually undesired effects that may occur with the use of the drug	
In relation to the above information is there any key information about the key service user that it is important to be aware of	
Now take time to discuss this with your mentor before undertaking your summative assessment and link to the medicines management section of this document	

Adapted from: Aschenbrenner, D.S., Venable, S.J. (2008) Drug therapy in nursing Lippincott Williams & Wilkins

Summative grading assessment

P3 Single patient care management

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A,B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail	Fail	Grade
Person centred communication					
<p>Exemplary patient led discussion and appropriate consideration of patient/carer preferences when planning care provision.</p>	<p>Good discussion with limited support to identify patient/carer preferences when planning care provision. Patient/carer appropriately included in decision making.</p>	<p>Attempts to involve patient/carer in discussion when planning care provision. Less skilful or confident in approach. Adequate and appropriate recognition of preferences.</p>	<p>Some discussion with patient/carer of preferences when planning care provision but inadequate recognition of, or chooses to ignore reasonable patient/carer preferences.</p>	<p>Inappropriate and ineffective discussion to adequately plan patient’s care provision. Discussion fails to identify patient/carer preferences.</p>	
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Assessment skills: observational skills & ability to choose diagnostic tools/equipment to aid assessment & demonstrates ability to use them					
<p>Exemplary ability to comprehensively and accurately assess: demonstrates excellent skills of observation and expertly uses appropriate diagnostic equipment/tools.</p>	<p>Good ability to accurately assess: demonstrates good observation skills and accurately uses appropriate diagnostic equipment/tools with limited support.</p>	<p>Safe assessment skills. Demonstrates satisfactory skills of observation and accurately uses appropriate diagnostic equipment/tools with some support.</p>	<p>Lacking in confidence when undertaking assessment. Satisfactory observation skills but inaccurate or inappropriate use of diagnostic equipment/tools.</p>	<p>Inadequate & inappropriate assessment therefore unsafe practice. Lacking basic skills of observation and/or inaccurate/inappropriate use of diagnostic equipment/tools.</p>	
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Assessment skills: interpretation of findings and responds to findings, implementing evidenced based care					
<p>Confidently & accurately interprets findings. Skilfully responds/ refers promptly and appropriately. Provides exemplary evidenced based care in a caring, proficient, coordinated manner.</p>	<p>Accurately interprets findings. Responds/ refers appropriately. Provides good evidenced based care with limited support in a caring, competent manner.</p>	<p>Accurately interprets findings. Seeks support/ advice from mentor to respond/refer appropriately. With help satisfactory evidenced based care provided in a caring manner.</p>	<p>Accurately interprets findings but does not respond or refer appropriately. With prompting recognises need for support from mentor to demonstrate safe, evidence based practice.</p>	<p>Not able to accurately interpret findings and does not respond or refer appropriately. Does not seek support/ advice from mentor therefore intervention by mentor required to maintain patient safety.</p>	
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Evaluation of care					
<p>Exceptional ability to evaluate care to improve clinical decision making, quality and outcomes.</p>	<p>Good ability to evaluate care to improve clinical decision making, quality and outcomes.</p>	<p>Satisfactory ability with some prompting to evaluate care to improve clinical decision making, quality and outcomes.</p>	<p>Limited ability to evaluate care to improve clinical decision making, quality and outcomes.</p>	<p>Lacks ability to evaluate care to improve clinical decision making, quality and outcomes.</p>	
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Students are expected to photocopy this page and grade themselves before meeting with their mentor

Summative assessment

P3 - Single patient care management

Grading category			Grade awarded	
Person centred communication				
Assessment skills: observational skills & ability to choose diagnostic tools/equipment to aid assessment & demonstrates ability to use them				
Assessment skills: interpretation of findings and responds to findings, implementing evidenced based care				
Evaluation of care				
If the student has achieved a D or E in any of the above a fail must be awarded (please circle)			PASS	FAIL
Competency: if the student has not achieved any of these competencies then a fail must be awarded				
Field competencies	PASS	FAIL: list all not achieved		
Essential skills cluster	PASS	List all to be achieved in Practice placement 4		
Competency achievement: Please circle pass or fail (if the student has not achieved all of the field competencies then a fail must be awarded)			PASS	FAIL
Practitioner signature			Date	
Student signature			Date	
Moderator signature (if used)			Date	

Summative feedback – practice experience 3

Please use the values model on page 18 to give the student feedback on their practice

Identified areas for further development	Suggested activities and experiences that will assist in future development	
<p>Heart: intrinsic motivation <i>(Application of appropriate theory/research to practice)</i></p>		
<p>Nerve: Self-belief and self-efficacy <i>(Developing themselves and advocating for the service user or carer)</i></p>		
<p>Brain: Critical and analytical skills <i>(Application of appropriate theory/research to practice)</i></p>		
Student signature	Date	
Mentor signature	Date	
Academic tutor signature	Date	

Student's review of progress

After discussion with your mentor, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

--

Student signature

Date

Mentor's review of progress

After discussion with the student, please summarise your views about the student's progress, including strengths, areas for development and identification of any issues affecting their performance – please remember that this information will help the next mentor develop appropriate learning experiences for the student

--

Mentor signature

Date

Progression signatures

I confirm that there has been no falsification of evidence within this document (before signing please read the academic integrity statement)		
Student signature	PRINT name	Date
I can confirm that the student has met the required grading for this practice placement.		
Mentor signature	PRINT name	Date
I can confirm that the student does not meet the required grading for this practice placement.		
Mentor signature	PRINT name	Date
I confirm that the documentation and signatures have been checked and verified.		
Academic tutor signature	PRINT name	Date

**This page must be scanned/photocopied and stored in the students file in the Faculty of Health Science,
University of Southampton**

Verification of practice experience 3

Prompt	Yes	No (please state those outstanding)
Progression points met?		
Grading in practice assessment completed and passed?		
Action plan completed?		
Absence record completed and matches portal print out?		
Additional visits completed?		
Additional practitioner feedback completed?		
Service user feedback completed?		
Mentor signature sheet completed?		
All interviews completed and signed?		
Academic tutor signature	PRINT name	Date

This page, must be copied/scanned and stored with the students records with the Faculty of Health Sciences, University of Southampton

These pages are only for the use of those students retrieving a practice experience

Retrieval documentation to be completed at the end of week 4 of the retrieval practice experience

Mentor signature sheet

Retrieval practice experience 3			
Name of placement			
Name of Trust/Practice experience provider			
Name of mentor		Mentor signature	
Name of buddy/associate mentor		Buddy/associate mentor signature	
Phone number of placement			

Initial interview

To be completed within 2 days of the start of the practice experience

This is done by the student in conjunction with the mentor, and is based upon self-assessment, previous failed practice experience and feedback from last mentor.

Learning needs: link to aspects of grading or competency and ESCs not achieved		Action Plan
Student signature		Date
Mentor signature		Date
Proposed date for interim review		

Grading in Practice - Core attribute achievement

Professionalism	PASS	FAIL
Demonstrates under supervision safe, basic person centred care which meets people's essential care needs.		
Promotes a professional image in behaviour and appearance at all times		
Demonstrates adherence to organisational requirements for hygiene, uniform and dress code in order to limit, prevent and control infection.		
Demonstrates regular, punctual attendance and has knowledge of, or shows application of organisational procedures for reporting absence from practice experience.		
Recognises and works within limitations of knowledge, skills and professional boundaries.		
Demonstrate reflective skills when evaluating own practice		

Compassion and Communication	PASS	FAIL
Demonstrate the ability to engage with people and build caring professional relationships using effective communication and interpersonal skills, always respecting professional boundaries		
Demonstrate active listening skills through use of appropriate non-verbal communication skills		
Demonstrate effective listening by responding in an appropriate way to a range of communication cues.		
Use a variety formats to produce clear, concise and complete records, using appropriate professional language to document care whilst applying the principles of data protection.		
Describe and demonstrate application of the principles of confidentiality in professional practice.		

Students must achieve a pass in all core attributes before they can be graded in single patient care management

Summative grading assessment

P3 Single patient care management

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A,B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail	Fail	Grade
Person centred communication					
<p>Exemplary patient led discussion and appropriate consideration of patient/carer preferences when planning care provision.</p>	<p>Good discussion with limited support to identify patient/carer preferences when planning care provision. Patient/carer appropriately included in decision making.</p>	<p>Attempts to involve patient/carer in discussion when planning care provision. Less skilful or confident in approach. Adequate and appropriate recognition of preferences.</p>	<p>Some discussion with patient/carer of preferences when planning care provision but inadequate recognition of, or chooses to ignore reasonable patient/carer preferences.</p>	<p>Inappropriate and ineffective discussion to adequately plan patient’s care provision. Discussion fails to identify patient/carer preferences.</p>	
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Assessment skills: interpretation of findings and responds to findings, implementing evidenced based care					
<p>Confidently & accurately interprets findings. Skilfully responds/ refers promptly and appropriately. Provides exemplary evidenced based care in a caring, proficient, coordinated manner.</p>	<p>Accurately interprets findings. Responds/ refers appropriately. Provides good evidenced based care with limited support in a caring, competent manner.</p>	<p>Accurately interprets findings. Seeks support/ advice from mentor to respond/refer appropriately. With help satisfactory evidenced based care provided in a caring manner.</p>	<p>Accurately interprets findings but does not respond or refer appropriately. With prompting recognises need for support from mentor to demonstrate safe, evidence based practice.</p>	<p>Not able to accurately interpret findings and does not respond or refer appropriately. Does not seek support/ advice from mentor therefore intervention by mentor required to maintain patient safety.</p>	
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Evaluation of care					
<p>Exceptional ability to evaluate care to improve clinical decision making, quality and outcomes.</p>	<p>Good ability to evaluate care to improve clinical decision making, quality and outcomes.</p>	<p>Satisfactory ability with some prompting to evaluate care to improve clinical decision making, quality and outcomes.</p>	<p>Limited ability to evaluate care to improve clinical decision making, quality and outcomes.</p>	<p>Lacks ability to evaluate care to improve clinical decision making, quality and outcomes.</p>	
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Students are expected to photocopy this page and grade themselves before meeting with their mentor

Summative assessment

P3 - Single patient care management

Grading category			Grade awarded	
Person centred communication				
Assessment skills: observational skills & ability to choose diagnostic tools/equipment to aid assessment & demonstrates ability to use them				
Assessment skills: interpretation of findings and responds to findings, implementing evidenced based care				
Evaluation of care				
Please circle if a pass or fail (if the student has achieved a D or E in any of the above a fail must be awarded)			PASS	FAIL
Field competencies	PASS	FAIL: list all not achieved		
Essential skills cluster	PASS	List all to be achieved in P4		
Competency achievement: Please circle pass or fail (if the student has not achieved all of the field competencies then a fail must be awarded)			PASS	FAIL
Practitioner signature			Date	
Student signature			Date	
Moderator signature (if used)			Date	

Summative feedback – practice experience 3

Please use the values model on page 18 to give the student feedback on their practice

Identified areas for further development	Suggested activities and experiences that will assist in future development
Heart: intrinsic motivation	
Nerve: Self-belief and self-efficacy	
Brain: Critical and analytical skills	
Student signature	Date
Mentor signature	Date
Academic tutor signature	Date

Student's review of progress

After discussion with your mentor, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

--	--

Student signature

Date

Mentor's review of progress

After discussion with the student, please summarise your views about the student's progress, including strengths, areas for development and identification of any issues affecting their performance – please remember that this information will help the next mentor develop appropriate learning experiences for the student

--	--

Mentor signature

Date

Progression signatures

I confirm that there has been no falsification of evidence within this document (before signing please read the academic integrity statement)		
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Mentor signature	PRINT name	Date
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Mentor signature	PRINT name	Date
I confirm that the documentation and signatures have been checked and verified.		
Academic tutor signature	PRINT name	Date

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University of Southampton**

Verification of retrieval practice experience 3

Prompt	Yes	No (please state those outstanding)
Progression points met?		
Grading in practice assessment completed and passed?		
Action plan completed?		
Absence record completed and matches portal print out?		
Additional visits completed?		
Additional practitioner feedback completed?		
Service user feedback completed?		
Mentor signature sheet completed?		
All interviews completed and signed?		
Academic tutor signature	PRINT name	Date

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Section 7: Part 2 of the programme

Nursing professional regulations

In order to enter the register, the NMC requires students to demonstrate achievement of specific outcomes by set “progression points” at the end of part 1, part 2, part 3 (entry to register).

Framework for assessment

In order to pass each practice experience and the end of part 2 progression point you must:

- Achieve all of the progression criteria prior to the progression point (if you achieve these in practice experience 3, they must be maintained in practice experience 4).
- Achieve all of the essential skills required at progression point 2.
- Pass the grading in practice tool.

Practice experience 4

Name of placement	
Name of Trust/Practice experience provider	
Name of mentor	
Name of buddy/associate mentor	
Phone number of placement	

Learning outcomes

Learning outcomes	Practice Placement (4) : Care management of a group of patients On completion of this placement the student will consistently:
1.	demonstrate ability to assess people’s care needs, safely prioritize and manage own workload.
2.	articulate reasons for prioritisation of care choices.
3.	provide a personalised approach to care and accurately identifies changing care needs and responds appropriately.
4.	demonstrates safe and effective practice in medicines administration and management.
5.	demonstrate understanding of legal and ethical frameworks relating to safe administration of medicines in practice.
6.	give a verbal report of people’s care needs at handover to demonstrate appropriate and safe professional communication skills in practice.
7.	demonstrate achievement of core attributes.

Competencies		Essential skills clusters
Domain 4 Competency 3 Domain 3 Competency 1 Domain 3 Competency 3 Domain 3 Competency 10	<p>All nurses must be able to identify priorities and manage time and resources effectively to ensure the quality of care is maintained or enhanced.</p> <p>All nurses must use up-to-date knowledge and evidence to assess, plan, deliver and evaluate care, communicate findings, influence change and promote health and best practice. They must make person-centred, evidence-based judgments and decisions, in partnership with others involved in the care process, to ensure high quality care. They must be able to recognise when the complexity of clinical decisions requires specialist knowledge and expertise, and consult or refer accordingly.</p> <p>All nurses must carry out comprehensive, systematic nursing assessments that take account of relevant physical, social, cultural, psychological, spiritual, genetic and environmental factors, in partnership with service users and others through interaction, observation and measurement.</p> <p>All nurses must evaluate their care to improve clinical decision-making, quality and outcomes, using a range of methods, amending the plan of care, where necessary, and communicating changes to others.</p>	<ul style="list-style-type: none"> • Forms appropriate and constructive professional relationships with families and carers [ESC1.6]. • Actively empowers people to be involved in the assessment of care and planning process [ESC2.2]. • Determines peoples preferences to maximise comfort and dignity [ESC2.3]. • Actively supports people in their own care and self-care [ESC2.4]. • Considers with the person and their carers their capability for self-care[ESC2.5]. • Provides personalised care, or makes provisions for those who are unable to maintain their own activities of living maintaining dignity at all times [ESC2.6]. • Assists people with their care [ESC2.7]. • Acts collaboratively with people and their carers enabling and empowering them to take a shared and active role in the delivery and evaluation of nursing interventions [ESC10.1]. • Communicates with colleagues verbally, face-to-face and by telephone, and in writing and electronically in a way that the meaning is clear, and checks that the communication has been fully understood.
Domain 3 Competency 7 Domain 3 Competency 7.1	<p>All nurses must be able to recognise and interpret signs of normal and deteriorating mental and physical health and respond promptly to maintain or improve the health and comfort of the service user, acting to keep them and others safe.</p> <p>Adult nurses must recognise the early signs of illness in people of all ages. They must make accurate assessments and start appropriate and timely management of those who are acutely ill, at risk of clinical deterioration, or require emergency care.</p>	<ul style="list-style-type: none"> • Collects and interprets routine data, under supervision, related to the assessment and planning of care from a variety of sources [ESC9.8]. • Detects, records, reports and responds appropriately to signs of deterioration or improvement [ESC10.5].
Medicines management		<ul style="list-style-type: none"> • Demonstrates understanding of legal and ethical frameworks relating to safe administration of medicines in practice and for prescribing [ESC 34.1,34.3] • Demonstrates ability to safely store medicines under supervision [ESC 37.1] • Uses prescription charts correctly and maintains accurate records [ESC 38.1] • Utilises and safely disposes of equipment needed to draw up and administer medication, for example, needles, syringes, gloves [ESC 38.2] • Administers and, where necessary, prepares medication safely under direct supervision, including orally and by injection [ESC 38.3] • Under supervision involves people and carers in administration and self-administration of medicines [ESC40.1]
Guidance to support achievement of competencies of assessment (P4: Care management of a group of patients)		
<p>Care Quality Commission (2010) <i>Essential standards for quality and safety</i> London: Care Quality Commission Department of Health (2010) <i>Essence of Care</i> London: The Stationary Office Dougherty, L. and Lister, S. (eds) (2008) <i>The Royal Marsden Hospital Manual of Clinical Procedures</i> 7th Ed Oxford: Wiley-Blackwell National Patient Safety Agency (2007) <i>Recognising and responding appropriately to early signs of deterioration in hospital patients</i> London: NPSA NMC (2008) <i>The Code: Standards of conduct performance and ethics for nurses and midwives</i> London: NMC NMC (2008) <i>Standards for medicines management</i> London: NMC NMC (2010) <i>Standards for pre registration nursing education</i> London: NMC</p>		

Absence record

Dates		Number of hours missed	Type of absence (e.g. sickness, compassionate leave, medical/dental appointment, absence without authorisation)	Mentor's signature
From	To			

Record of absences made up

Dates		Number of made up hours	Mentor's signature
From	To		

I verify that this is an accurate record of this student's absence and I have checked accuracy with the portal printout	
Mentor signature	

I verify that this is an accurate account which matches the portal record	
Outstanding hours carried forward	Academic tutor signature

Professional development

Self-assessment by student at commencement of practice experience

Self-assessment based on previous practice experience	
Strengths	Weaknesses
Concerns	Expectations

Please discuss the key points from this assessment with your mentor prior to completing an action plan for this practice experience

Initial interview

To be completed within 2 days of the start of the practice experience

This is done by the student in conjunction with the mentor, and is based upon the self-assessment, previous practice experiences and feedback from other mentors.

Learning need	Action Plan
Student signature	Date
Mentor signature	Date
Proposed date for interim review	

NMC Field specific competencies

Domain 1: Professional values				
Children's nurses must understand their role as an advocate for children, young people and their families, and work in partnership with them. They must deliver child and family-centred care: empower children and young people to express their views and preferences; and maintain and recognise their views and preferences; and maintain and recognise their rights and best interests.				
Competencies	Formative assessment point Can apply the principles		Summative assessment point Can apply the principles	
	Mentor initials	Date	Mentor initials	Date
1. All nurses must practise with confidence according to <i>The Code: Standards of conduct, performance and ethics for nurses and midwives</i> (NMC 2008), and within other recognised ethical and legal frameworks. They must be able to recognise and address ethical challenges relating to people's choices and decision-making about their care, and act within the law to help them and their families and carers find acceptable solutions.				
1.1 Children's nurses must understand the laws relating to child and parental consent, including giving and refusing consent, withdrawal of treatment and legal capacity.				
2. All nurses must practice in a holistic, non-judgmental, caring and sensitive manner that avoids assumptions, supports social inclusion; recognises and respects individual choice; and acknowledges diversity. Where necessary, they must challenge inequality, discrimination and exclusion from access to care.				
2.1 Children's nurses must recognise that all children and young people have the right to be safe, enjoy life and reach their potential. They must practice in a way that recognises, respects and responds to the individuality of every child and young person.				
3. All nurses must support and promote the health, wellbeing, rights and dignity of people and, groups, communities and populations. These include people whose lives are affected by ill health, disability, inability to engage, ageing or death. Nurses must act on their understanding of how these conditions influence public health.				
3.1 Children's nurses must act as advocates for the right of all children and young people to lead full and independent lives.				
4. All nurses must work in partnership with service users, carers, groups, communities and organisations. They must manage risk, and promote health and wellbeing while aiming to empower choices that promote self-care and safety.				
4.1 Children's nurses must work in partnership with children, young people and their families to negotiate, plan and deliver child and family-centred care, education and support. They must recognise the parent's or carer's primary role in achieving and maintaining the child's or young person's health and wellbeing, and offer advice and support on parenting in health and illness.				

Domain 2: Communication and interpersonal skills				
Competencies	Formative assessment point Can apply the principles		Summative assessment point Can apply the principles	
	Mentor initials	Date	Mentor initials	Date
Children's nurses must take account of each child and young person's individuality, including their stage of development, ability to understand, culture, learning or communication difficulties and health status. They must communicate effectively with them and with parents and carers.				
All nurses must build partnerships and therapeutic relationships through safe, effective and non-discriminatory communication. They must take account of individual differences, capabilities and needs.				
1.1 Children's nurses must work with the child, young person and others to ensure that they are actively involved in decision-making, in order to maintain their independence and take account of their on-going intellectual, physical and emotional needs.				
2. All nurses must use a range of communication skills and technologies to support person-centred care and enhance quality and safety. They must ensure people receive all the information they need in a language and manner that allows them to make informed choices and share decision making. They must recognise when language interpretation or other communication support is needed and know how to obtain it.				
2.1. Children's nurses must understand all aspects of development from infancy to young adulthood, and identify each child or young person's developmental stage, in order to communicate effectively with them. They must use play, distraction and communication tools appropriate to the child's or young person's stage of development, including for those with sensory or cognitive impairment.				
3. All nurses must use the full range of communication methods, including verbal, non-verbal and written, to acquire, interpret and record their knowledge and understanding of people's needs. They must be aware of their own values and beliefs and the impact this may have on their communication with others. They must take account of the many different ways in which people communicate and how these may be influenced by ill health, disability and other factors, and be able to recognise and respond effectively when a person finds it hard to communicate.				
3.1 Children's nurses must ensure that, where possible, children and young people understand their healthcare needs and can make or contribute to informed choices about all aspects of their care.				
Domain 3: Nursing practice and decision-making				
Children's nurses must be able to care safely and effectively for children and young people in all settings, and recognise their responsibility for safeguarding them. They must be able to deliver care to meet essential and complex physical and mental health needs informed by deep understanding of biological, psychological and social factors throughout infancy, childhood and adolescence.				
1. All nurses must use up-to-date knowledge and evidence to assess, plan, deliver and evaluate care, communicate findings, influence change and promote health and best practice. They must make person-centred, evidence-based judgments and decisions, in partnership with others involved in the care process, to ensure high quality care. They must be able to recognise when the complexity of clinical decisions requires specialist knowledge and expertise, and consult or refer accordingly.				
1.1 Children's nurses must be able to recognise and respond to the essential needs of all people who come into their care including babies, pregnant and postnatal women, adults, people with mental health problems, people with physical disabilities, people with learning disabilities, and people with long term problems such as cognitive impairment.				
1.2 Children's nurses must use recognised, evidence-based, child-centred frameworks to assess, plan, implement, evaluate and record care, and to underpin clinical judgments and decision-making. Care planning and delivery must be informed by knowledge of pharmacology, anatomy and physiology, pathology, psychology and sociology, from infancy to young adulthood.				

Domain 3: Nursing practice and decision-making					
Children's nurses must be able to care safely and effectively for children and young people in all settings, and recognise their responsibility for safeguarding them. They must be able to deliver care to meet essential and complex physical and mental health needs informed by deep understanding of biological, psychological and social factors throughout infancy, childhood and adolescence.					
Competencies		Formative assessment point Can apply the principles		Summative assessment point Can apply the principles	
		Mentor initials	Date	Mentor initials	Date
3. All nurses must carry out comprehensive, systematic nursing assessments that take account of relevant physical, social, cultural, psychological, spiritual, genetic and environmental factors, in partnership with service users and others through interaction, observation and measurement.					
	3.1 Children's nurses must carry out comprehensive nursing assessments of children and young people, recognising the particular vulnerability of infants and young children to rapid physiological deterioration. develop case formulations and negotiate goals.				
5. All nurses must understand public health principles, priorities and practice in order to recognise and respond to the major causes and social determinants of health, illness and health inequalities. They must use a range of information and data to assess the needs of people, groups, communities and populations, and work to improve health, wellbeing and experiences of healthcare; secure equal access to health screening, health promotion and healthcare; and promote social inclusion.					
	5.1 Children's nurses must include health promotion, and illness and injury prevention, in their nursing practice. They must promote early intervention to address the links between early life adversity and adult ill health, and the risks to the current and future physical, mental, emotional and sexual health of children and young people.				
6. All nurses must practise safely by being aware of the correct use, limitations and hazards of common interventions, including nursing activities, treatments, and the use of medical devices and equipment. The nurse must be able to evaluate their use, report any concerns promptly through appropriate channels and modify care where necessary to maintain safety. They must contribute to the collection of local and national data and formulation of policy on risks, hazards and adverse outcomes.					
	6.1 Children's nurses must have numeracy skills for medicine's management, assessment, measuring, monitoring and recording which recognise the particular vulnerability of infants and young children in relation to accurate medicines calculation.				
8. All nurses must provide educational support, facilitation skills and therapeutic nursing interventions to optimise health and wellbeing. They must promote selfcare and management whenever possible, helping people to make choices about their healthcare needs, involving families and carers where appropriate, to maximise their ability to care for themselves.					
	8.1 Children's nurses must use negotiation skills to ensure the best interests of children and young people in all decisions, including the continuation or withdrawal of care. Negotiation must include the child or young person, their family and members of the multidisciplinary and interagency team where appropriate.				
9. All nurses must be able to recognise when a person is at risk and in need of extra support and protection and take reasonable steps to protect them from abuse.					
	9.1 Children's nurses must understand their central role in preventing maltreatment, and safeguarding children and young people . They must work closely with relevant agencies and professionals, and know when and how to identify and refer those at risk or experiencing harm.				

Domain 4: Leadership, management and team working					
Children's nurses must listen and respond to the wishes of children and young people. They must influence the delivery of health and social care services to optimise the care of children and young people. They must work closely with other agencies and services to ensure seamless and well-supported transition to adult services.					
Competencies		Formative assessment point Can apply the principles		Summative assessment point Can apply the principles	
		Mentor initials	Date	Mentor initials	Date
1. All nurses must act as change agents and provide leadership through quality improvement and service development to enhance people's wellbeing and experiences of healthcare.					
	1.1 Children's nurses must understand health and social care policies relating to the health and wellbeing of children and young people. They must, where possible, empower and enable children, young people, parents and carers to influence the quality of care and develop future policies and strategies management and practice.				
	1.2 Children's nurses must ensure that, wherever possible, care is delivered in the child or young person's home, or in another environment that suits their age, needs and preferences.				
6. All nurses must work independently as well as in teams. They must be able to take the lead in coordinating, delegating and supervising care safely, managing risk and remaining accountable for the care given.					
	6.1 Children's nurses must use effective clinical decision-making skills when managing complex and unpredictable situations, especially where the views of children or young people and their parents and carers differ. They must recognise when to seek extra help or advice to manage the situation safely.				
7. All nurses must work effectively across professional and agency boundaries, actively involving and respecting others' contributions to integrated person-centred care. They must know when and how to communicate with and refer to other professionals and agencies in order to respect the choices of service users and others, promoting shared decision making, to deliver positive outcomes and to coordinate smooth, effective transition within and between services and agencies.					
	7.1 Children's nurses must work effectively with young people who have continuing health needs, their families, the multidisciplinary team and other agencies to manage smooth and effective transition from children's services to adult services, taking account of individual needs and preferences.				

Essential skills clusters

Learning outcome Essential skills (NMC 2010): Care, compassion and communication		
Essential skills The newly qualified graduate nurse should demonstrate the following skills and behaviours. Cluster: Care, compassion and communication		
Mentor to initial and date outcome of skills achievement at end of P4 skills	Practiced under indirect supervision	Not achieved
1.0 As partners in the care process, people can trust a newly registered graduate nurse to provide collaborative care based on the highest standards, knowledge and competence.		
6. Forms appropriate and constructive professional relationships with families and other carers.	This ESC is achieved in the grading grid	
7. Uses professional support structures to learn from experience and make appropriate adjustments.		
2.0 People can trust the newly registered graduate nurse to engage in person centred care empowering people to make choices about how their needs are met when they are unable to meet them for themselves.		
2. Actively empowers people to be involved in the assessment and care planning process. 3. Determines people's preferences to maximise comfort & dignity. 4. Actively supports people in their own care and self-care. 5. Considers with the person and their carers their capability for self-care. 6. Provides personalised care, or makes provisions for those who are unable to maintain their own activities of living maintaining dignity at all times. 7. Assists people with their care.	These ESCs are achieved in the grading grid	
6.0 People can trust the newly registered graduate nurse to engage therapeutically and actively listen to their needs and concerns, responding using skills that are helpful, providing information that is clear, accurate, meaningful and free from jargon.		
6. Uses strategies to enhance communication and remove barriers to effective communication minimising risk to people from lack of or poor communication.		
7.0 People can trust the newly registered graduate nurse to protect and keep as confidential all information relating to them.		
4. Distinguishes between information that is relevant to care planning and information that is not.	This ESC is achieved in the grading grid	
8.0 People can trust the newly registered graduate nurse to gain their consent based on sound understanding and informed choice prior to any intervention and that their rights in decision making and consent will be respected and upheld.		
2. Applies principles of consent in relation to restrictions relating to specific client groups and seeks consent for care. 3. Ensures that the meaning of consent to treatment and care is understood by the people or service users.		
9.0 People can trust the newly registered graduate nurse to treat them as partners and work with them to make a holistic and systematic assessment of their needs; to develop a personalised plan that is based on mutual understanding and respect for their individual situation promoting health and well-being, minimising risk of harm and promoting their safety at all times.		
2. Accurately undertakes and records a baseline assessment of weight, height, temperature, pulse, respiration and blood pressure using manual and electronic devices. 3. Understands the concept of public health and the benefits of healthy lifestyles and the potential risks involved with various lifestyles or behaviours, for example, substance misuse, smoking, obesity. 4. Recognises indicators of unhealthy lifestyles 5. Contributes to care based on an understanding of how the different stages of an illness or disability can impact on people and carers. 6. Measures and documents vital signs under supervision and responds appropriately to findings outside the normal range. 7. Performs routine, diagnostic tests for example urinalysis under supervision as part of assessment process (near client testing). 8. Collects and interprets routine data, under supervision, related to the assessment and planning of care from a variety of sources.		
9. Undertakes the assessment of physical, emotional, psychological, social, cultural and spiritual needs, including risk factors by working with the person and records, shares and responds to clear indicators and signs.	This ESC is achieved in the grading grid	
10. With the person and under supervision, plans safe and effective care by recording and sharing information based on the assessment		
11. Where relevant, applies knowledge of age and condition-related anatomy, physiology and development when interacting with people.		

Mentor to initial and date outcome of skills achievement at end of P4 skills	Practiced under indirect supervision	Not achieved
10.o People can trust the newly registered graduate nurse to deliver nursing interventions and evaluate their effectiveness against the agreed assessment and care plan.		
<ol style="list-style-type: none"> 1. Acts collaboratively with people and their carers enabling and empowering them to take a shared and active role in the delivery and evaluation of nursing interventions. 2. Works within the limitations of own knowledge and skills to question and provide safe and holistic care. 3. Prepares people for clinical interventions as per local policy. 4. Actively seeks to extend knowledge and skills using a variety of methods in order to enhance care delivery. 5. Detects, records, reports and responds appropriately to signs of deterioration or improvement. 	This ESC is achieved in the grading grid	
	This ESC is achieved in the grading grid	
11.o People can trust the newly registered graduate nurse to safeguard children and adults from vulnerable situations and support and protect them from harm.		
4. Documents concerns and information about people who are in vulnerable situations.		
12.o People can trust the newly registered graduate nurse to respond to their feedback and a wide range of other sources to learn, develop and improve services.		
<ol style="list-style-type: none"> 2. Responds appropriately when people want to complain, providing assistance and support. 3. Uses supervision and other forms of reflective learning to make effective use of feedback. 4. Takes feedback from colleagues, managers and other departments seriously and shares the messages and learning with other members of the team. 		
13.o People can trust the newly registered, graduate nurse to promote continuity when their care is to be transferred to another service or person.		
<ol style="list-style-type: none"> 1. Assists in preparing people and carers for transfer and transition through effective dialogue and accurate information. 2. Reports issues and people's concerns regarding transfer and transition. 3. Assists in the preparation of records and reports to facilitate safe and effective transfer. 		
14.o People can trust the newly registered graduate nurse to be an autonomous and confident member of the multi-disciplinary or multi agency team and to inspire confidence in others.		
<ol style="list-style-type: none"> 2. Supports and assists others appropriately. 3. Values others' roles and responsibilities within the team and interacts appropriately. 4. Reflects on own practice and discusses issues with other members of the team to enhance learning. 5. Communicates with colleagues verbally, face-to-face and by telephone, and in writing and electronically in a way that the meaning is clear, and checks that the communication has been fully understood. 		
17.o People can trust the newly registered graduate nurse to work safely under pressure and maintain the safety of service users at all times.		
<ol style="list-style-type: none"> 3. Contributes as a team member. 4. Demonstrates professional commitment by working flexibly to meet service needs to enable quality care to be delivered. 5. Uses supervision as a means of developing strategies for managing own stress and for working safely and effectively. 6. Adheres to safety policies when working in the community and in people's homes, for example, lone worker policy. 		
18.o People can trust a newly registered graduate nurse to enhance the safety of service users and identify and actively manage risk and uncertainty in relation to people, the environment, self and others.		
<ol style="list-style-type: none"> 7. Contributes to promote safety and positive risk taking. 8. Under supervision works safely within the community setting taking account of local policies, for example, lone worker policy. 		

Mentor to initial and date outcome of skills achievement at end of P4 skills	Practiced under indirect supervision	Not achieved
Learning outcomes Essential skills (NMC 2010): Infection prevention and control		
21.o People can trust the newly registered graduate nurse to identify and take effective measures to prevent and control infection in accordance with local and national policy.		
2. Participates in assessing and planning care appropriate to the risk of infection thus promoting the safety of service users. 3. Participates in completing care documentation and evaluation of interventions to prevent and control infection. 4. Aware of the role of the Infection Control Team and Infection Control Nurse Specialist, and local guidelines for referral. 5. Recognises potential signs of infection and reports to relevant senior member of staff. 6. Discusses the benefits of health promotion within the concept of public health in the prevention and control of infection for improving and maintaining the health of the population.		
22.o People can trust the newly registered graduate nurse to maintain effective standard infection control precautions and apply and adapt these to needs and limitations in all environments.		
2. Applies knowledge of transmission routes in describing, recognising and reporting situations where there is a need for standard infection control precautions 3. Participates in the cleaning of multiuse equipment between each person. 4. Uses multi-use equipment and follows the appropriate procedures. 5. Safely uses and disposes of, or decontaminates, items in accordance with local policy and manufacturers' guidance and instructions. 6. Adheres to requirements for cleaning, disinfecting, decontaminating of 'shared' nursing equipment, including single or multi-use equipment, before and after every use as appropriate, according to recognised risk, in accordance with manufacturers' and organisational policies.		
23.o People can trust a newly registered graduate nurse to provide effective nursing interventions when someone has an infectious disease including the use of standard isolation techniques.		
1. Safely delivers care under supervision to people who require to be nursed in isolation or in protective isolation settings. 2. Takes appropriate actions in any environment including the home care setting, should exposure to infection occur, for example, chicken pox, diarrhoea and vomiting, needle stick injury. 3. Applies knowledge of an 'exposure prone procedure' and takes appropriate precautions and actions. 4. Takes personal responsibility, when a student knowingly has a blood borne virus, to consult with occupational health before carrying out exposure prone procedures.		
25.o People can trust a newly registered graduate nurse to safely apply the principles of asepsis when performing invasive procedures and be competent in aseptic technique in a variety of settings.		
1. Demonstrates understanding of the principles of wound management, healing and asepsis, Safely performs basic wound care using clean and aseptic techniques in a variety of settings. 2. Assists in providing accurate information to people and their carers on the management of a device, site or wound to prevent and control infection and to promote healing wherever that person might be, for example, in hospital, in the home care setting, in an unplanned situation.		
26.o People can trust the newly qualified nurse to act, in a variety of environments including the home care setting, to reduce risk when handling waste, including sharps, contaminated linen and when dealing with spillages of blood and other body fluids.		
1. Adheres to health and safety at work legislation and infection control policies regarding the safe disposal of all waste, soiled linen, blood and other body fluids and disposing of 'sharps' including in the home setting. 2. Ensures dignity is preserved when collecting and disposing of bodily fluids and soiled linen. 3. Acts to address potential risks within a timely manner including in the home setting.		

Mentor to initial and date outcome of skills achievement at end of P4 skills	Practiced under indirect supervision	Not achieved
Learning outcomes Essential skills (NMC 2010): Nutrition		
27.o People can trust the newly registered graduate nurse to assist them to choose a diet that provides an adequate nutritional and fluid intake.		
<ol style="list-style-type: none"> 1. Under supervision helps people to choose healthy food and fluid in keeping with their personal preferences and cultural needs. 2. Accurately monitors dietary and fluid intake and completes relevant documentation. 3. Supports people who need to adhere to specific dietary and fluid regimens and informs them of the reasons. 4. Maintains independence and dignity wherever possible and provides assistance as required. 5. Identifies people who are unable to or have difficulty in eating or drinking and reports this to others to ensure adequate nutrition and fluid intake is provided. 		
28.o People can trust the newly registered graduate nurse to assess and monitor their nutritional status and in partnership, formulate an effective plan of care.		
<ol style="list-style-type: none"> 1. Takes and records accurate measurements of weight, height, length, body mass index and other appropriate measures of nutritional status. 2. Assesses baseline nutritional requirements for healthy people related to factors such as age and mobility. 3. Contributes to formulating a care plan through assessment of dietary preferences, including local availability of foods and cooking facilities. 4. Reports to other members of the team when agreed plan is not achieved. 		
29.o People can trust a newly registered graduate nurse to assess and monitor their fluid status and in partnership with them, formulate an effective plan of care.		
<ol style="list-style-type: none"> 1. Applies knowledge of fluid requirements needed for health and during illness and recovery so that appropriate fluids can be provided. 2. Accurately monitors and records fluid intake and output. 3. Recognises and reports reasons for poor fluid intake and output. 4. Reports to other members of the team when intake and output falls below requirements. 		
30.o People can trust the newly qualified graduate nurse to assist them in creating an environment that is conducive to eating and drinking.		
<ol style="list-style-type: none"> 3. Follows local procedures in relation to mealtimes, for example, protected mealtimes, indicators of people who need additional support. 4. Ensures that people are ready for the meal; that is, in an appropriate location, position, offered opportunity to wash hands, offered appropriate assistance. 		
31.o People can trust the newly qualified graduate nurse to ensure that those unable to take food by mouth receive adequate fluid and nutrition to meet their needs.		
<ol style="list-style-type: none"> 1. Recognises, responds appropriately and reports when people have difficulty eating or swallowing. 2. Adheres to an agreed plan of care that provides for individual difference, for example, cultural considerations, psychosocial aspects and provides adequate nutrition and hydration when eating and swallowing is difficult. 		

Medicines Management

Mentor to initial and date outcome of skills achievement at end of P4 skills	Practiced under direct supervision	Not achieved	Indicative content
34.o People can trust the newly registered graduate nurse to work within legal and ethical frameworks that underpin safe and effective medicines management.			
<ol style="list-style-type: none"> 1. Demonstrates understanding of legal and ethical frameworks relating to safe administration of medicines in practice. 2. Demonstrates an understanding of types of prescribing, types of prescribers and methods of supply. 3. Demonstrates understanding of legal and ethical frameworks for prescribing. 	This ESC is achieved in the grading grid		<p>Law, consent, confidentiality, ethics, accountability.</p> <p>Responsibilities under law, application of medicines legislation to practice, include: use of controlled drugs, exemption orders in relation to patient group direction (PGD).</p> <p>Regulatory requirements: Standards for medicines management (NMC 2007), the code (NMC 2008), Standards of proficiency for nurse and midwife prescribers (NMC 2006).</p> <p>Statutory requirements in relation to mental health, mental capacity, children and young people and medicines, national service frameworks and other country specific guidance.</p>
35.o People can trust the newly registered graduate nurse to work as part of a team to offer holistic care and a range of treatment options of which medicines may form a part.			
<ol style="list-style-type: none"> 1. Demonstrates awareness of a range of commonly recognised approaches to managing symptoms, for example, relaxation, distraction and lifestyle advice. 2. Discusses referral options. 			<p>The principles of holistic care, health promotion, lifestyle advice, over-the-counter medicines, self-administration of medicines and other therapies.</p> <p>Observation and assessment. Effect of medicines and other treatment options, including distraction, positioning, alternative and complementary therapies.</p> <p>Ethical and legal frameworks.</p>
36.o People can trust the newly registered graduate nurse to ensure safe and effective practice in medicines management through comprehensive knowledge of medicines, their actions, risks and benefits.			
<ol style="list-style-type: none"> 1. Uses knowledge of commonly administered medicines in order to act promptly in cases where side effects and adverse reactions occur. 			<p>Related anatomy and physiology.</p> <p>Drug pathways and how medicines act.</p> <p>Impacts of physiological state of patients on drug responses and safety, for example, the older adult, children, pregnant or breast feeding women and significant pathologies such as renal or hepatic impairments.</p> <p>Pharmacodynamics -the effects of drugs and their mechanisms of action in the body.</p> <p>Pharmacotherapeutics – the therapeutic actions of certain medicines. Risks versus benefits of medication.</p> <p>Pharmacokinetics and how doses are determined by dynamics and systems in the body.</p> <p>Role and function of bodies that regulate and ensure the safety and effectiveness of medicines.</p> <p>Knowledge on management of adverse drug events, adverse drug reactions, prescribing and administration errors and the potential repercussions for safety.</p>

Mentor to initial and date outcome of skills achievement at end of P4 skills	Practiced under direct supervision	Not achieved	Indicative content
38.o People can trust the newly registered graduate nurse to safely order, receive, store and dispose of medicines (including controlled drugs) in any setting.			
2. Demonstrates ability to safely store medicines under supervision.	This ESC is achieved in the grading grid		<p>Managing medicines in hospital or primary care settings, for example, schools and the home care setting.</p> <p>Legislation that underpins practice related to a wide range of medicines such as controlled drugs, infusions and oxygen.</p> <p>Suitable conditions for storage, managing out-of-date stock, safe handling medication, managing discrepancies in stock, omissions.</p>
38.o People can trust the newly registered graduate nurse to administer medicines safely and in a timely manner, including controlled drugs.			
<p>1. Uses prescription chart correctly and maintain accurate records.</p> <p>2. Utilises and safely disposes of equipment needed to draw up and administer medication, for example, needles, syringes, gloves.</p> <p>3. Administers and, where necessary, prepares medication safely under direct supervision, including orally and by injection.</p>	These ESCs are achieved in the grading grid		<p>Involvement of people receiving treatment, management of fear and anxiety, importance of nonverbal and verbal communication.</p> <p>Use of prescription charts including how to prepare, read and interpret them and record administration and non-administration.</p> <p>Use of personal drug record cards for controlled drugs.</p> <p>Preparing and administering medication in differing environments places, including the home care setting, hygiene, infection control, compliance aids, safe transport and disposal of medicines and equipment.</p> <p>Safety, checking person's identity, last dose, allergies, anaphylaxis, poly-pharmacy, monitoring of effect and record keeping.</p> <p>Where and how to report contra-indications, side effects, adverse reactions.</p> <p>Skills needed to administer safely via various means, for example, oral, topical, by infusion, injection, syringe driver and pumps.</p> <p>Aware of own limitations and when to refer on.</p> <p>Legal requirements, mechanisms for supply, sale and administration of medication, self-administration including controlled drugs.</p>
39.o People can trust a newly registered graduate nurse to keep and maintain accurate records using information technology, where appropriate, within a multi-disciplinary framework as a leader and as part of a team and in a variety of care settings including at home.			
1. Demonstrates awareness of roles and responsibilities within the multi-disciplinary team for medicines management, including how and in what ways information is shared within a variety of settings.			<p>Links to legislation, use of controlled drugs, the code in relation to confidentiality, consent and record keeping.</p> <p>Use of electronic records.</p>
40.o People can trust a newly registered graduate nurse to work in partnership with people receiving medical treatments and their carers.			
1. Under supervision involves people and carers in administration and self-administration of medicines.	This ESC is achieved in the grading grid		<p>Cultural, religious, linguistic and ethical beliefs, issues and sensitivities around medication.</p> <p>Ethical issues relating to compliance and administration of medicine without consent.</p> <p>Self-administration, assessment explanation and monitoring.</p> <p>Concordance.</p> <p>Meeting needs of specific groups including self-administration, for example, people with mental health needs, learning disabilities, children and young people, adolescents and older adults.</p>

Mentor to initial and date outcome of skills achievement at end of P4 skills	Practiced under direct supervision	Not achieved	Indicative content
41.0 People can trust the newly registered graduate nurse to use and evaluate up-to-date information on medicines management and work within national and local policy guidelines.			
1. Accesses commonly used evidence based sources relating to the safe and effective management of medicine.			Evidence based practice, identification of resources, the 'expert' patient and client. Using sources of information, national and local policies, clinical governance, formularies, for example, British National Formulary and the British National Formulary for Children.
42.0 People can trust the newly registered graduate nurse to demonstrate understanding and knowledge to supply and administer via a patient group direction.			
1. Demonstrates knowledge of what a patient group direction is and who can use them.			National prescribing centre competency framework www.npc.co.uk

1. Medicines management is “the clinical cost effective and safe use of medicines to ensure patients get maximum benefit from the medicines they need while at the same time minimising potential harm” (MHRA 2004). As the administration of a medicinal product is only part of the process, these ESCs reflect the process from prescribing, through to dispensing, storage, administration and disposal.

2. A Medicinal product is “Any substance or combination of substances presented for treating or preventing disease in human beings or in animals. Any substance or combination of substances which may be administered to human beings or animals with a view to making a medical diagnosis or to restoring, correcting or modifying physiological functions in human beings or animals is likewise considered a medicinal product” (Council Directive 65/65/EEC).

Formative grading assessment

P4- Care management of a group of patients

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A, B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail	Fail	Grade
Prioritisation and management of care					
<p>Exemplary ability to manage and prioritise own workload. Confident and at ease in managing competing care needs and situations. Fluently and fully able to articulate rationale for prioritisation of care.</p>	<p>Good ability to manage own workload, prioritises reasonably well therefore able to manage competing care needs and situations. Mostly able to articulate rationale for prioritisation of care.</p>	<p>Satisfactory ability to manage own workload and shows reasonable ability to manage competing care needs and situations effectively. Prioritisation could be improved but safe care provided.</p>	<p>Requires frequent direction and support to be able to competently manage own workload. Inconsistent in approach to prioritisation of competing care needs and situations but demonstrates awareness.</p>	<p>Inability to manage own workload with inadequate prioritisation of care. Lacks insight into competing care needs and situations therefore not able to accurately identify and articulate care priorities.</p>	
S M	S M	S M	S M	S M	
Provision of personalised care and response to changing care needs					
<p>Exemplary practice demonstrated. Confidently and systematically meets people’s essential care needs through a personalised care approach. Prompt recognition and response to changing care needs.</p>	<p>Reasonably confident practice demonstrated meeting people’s essential care needs through a personalised care approach. Accurately identifies and appropriately responds to changing care needs. Minimal support required.</p>	<p>Satisfactory practice demonstrated meeting people’s essential care needs through a personalised care approach. With limited help able to identify and appropriately respond to changing care needs.</p>	<p>Lacks confidence in delivery of care. Often requires direction and assistance to meet people’s essential care needs. Frequent prompts required to identify and appropriately respond to changing care needs.</p>	<p>Unskilled. Lacks ability to meet people’s essential care needs. Personalised approach not evident. Unable to identify changing care needs or appropriately respond without significant help.</p>	
S M	S M	S M	S M	S M	
Medicines management					
<p>Exemplary and confident medicines administration and management. Works within legal and ethical frameworks.</p>	<p>Good medicines administration and management. Works within legal and ethical frameworks.</p>	<p>Safe medicines administration and management with some support/prompting. Works within legal and ethical frameworks.</p>	<p>Requires frequent prompting and support to ensure safe medicines administration and management. Works within legal and ethical frameworks.</p>	<p>Lacks knowledge and skills even with prompting to ensure safe medicines administration and management.</p>	
S M	S M	S M	S M	S M	
Verbal Communication skills during handover					
<p>Exemplary professional communication skills. Confident and fluent verbal report at handover. Content is logically structured, concise, accurate and comprehensive.</p>	<p>Good professional communication skills. Good verbal report at handover. Content is reasonably structured, accurate and sufficiently detailed.</p>	<p>Satisfactory professional communication skills. Satisfactory verbal report at handover. Content not always well organised but accurate and sufficiently detailed.</p>	<p>Professional communication skills but lacks confidence. Verbal report at handover accurate but not complete for safe practice.</p>	<p>Inappropriate or unprofessional communication skills. Verbal report at handover lacks accuracy and incomplete for safe practice.</p>	
S M	S M	S M	S M	S M	

Students are expected to photocopy this page and grade themselves before meeting with their mentor

Formative (interim review) - practice experience 4

Student's review of progress

After discussion with your mentor and formative grading, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Student signature

Date

Mentor's review of progress

After discussion with the student and formative grading, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Mentor signature

Date

Following this review of grading, progress review and learning needs:

	YES	NO
Learning needs have been re-explored		
Action plan has been re-negotiated/developed		
Academic tutor must be contacted if any formative fail grades have been awarded or any concerns are raised at this point		

Learning need	Action plan
Student's signature	Date
Mentor's signature	Date
Proposed date for review	

Service user/carer involvement in practice

Consent must be gained from the service user/carer with the mentor present to participate in this exercise.

This exercise can be undertaken as a discussion and the mentor should then record the points raised below.

We would like to hear from you about your views of the way nursing students have contributed to the care that you have received.

You do not need to disclose your name and the feedback that you give will not affect the care you receive. There is no requirement for you to participate in this exercise (if a carer this relates to the care given to the service user).

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Additional practitioner feedback

Comments on the student's performance during additional practice experiences/spoke experiences

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Additional practitioner feedback

Comments on the student's performance during additional practice experiences/ spoke experiences

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Grading in Practice - Core attribute achievement

Professionalism	PASS	FAIL
Demonstrates under supervision safe, basic person centred care which meets people's essential care needs.		
Promotes a professional image in behaviour and appearance at all times.		
Demonstrates adherence to organisational requirements for hygiene, uniform and dress code in order to limit, prevent and control infection.		
Demonstrates regular, punctual attendance and has knowledge of, or shows application of organisational procedures for reporting absence from practice experience.		
Recognises and works within limitations of knowledge, skills and professional boundaries.		
Demonstrate reflective skills when evaluating own practice.		

Compassion and Communication	PASS	FAIL
Demonstrate the ability to engage with people and build caring professional relationships using effective communication and interpersonal skills, always respecting professional boundaries.		
Demonstrate active listening skills through use of appropriate non-verbal communication skills.		
Demonstrate effective listening by responding in an appropriate way to a range of communication cues.		
Use a variety formats to produce clear, concise and complete records, using appropriate professional language to document care whilst applying the principles of data protection.		
Describe and demonstrate application of the principles of confidentiality in professional practice.		

Students must achieve a pass in all core attributes before they can be graded in single patient care management

Experience 4: grading practice exercise – Care management of a group of patients

Think back over the handovers you have received from staff. What sort of elements does a good handover need to contain?

- Now under the direct supervision of your mentor undertake a handover of a group of patients who will be contributing to the summative assessment

How did you decide which information was relevant to include in your documentation and handover?

- Reflect with your mentor on your experience and ask for feedback on your performance

From your reflection and discussion, identify your development needs and discuss these with your mentor.

Summative grading assessment

P4 - Care management of a group of patients

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A,B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail	Fail	Grade
Prioritisation and management of care					
<p>Exemplary ability to manage and prioritise own workload. Confident and at ease in managing competing care needs and situations. Fluently and fully able to articulate rationale for prioritisation of care.</p>	<p>Good ability to manage own workload, prioritises reasonably well therefore able to manage competing care needs and situations. Mostly able to articulate rationale for prioritisation of care.</p>	<p>Satisfactory ability to manage own workload and shows reasonable ability to manage competing care needs and situations effectively. Prioritisation could be improved but safe care provided.</p>	<p>Requires frequent direction and support to be able to competently manage own workload. Inconsistent in approach to prioritisation of competing care needs and situations but demonstrates awareness.</p>	<p>Inability to manage own workload with inadequate prioritisation of care. Lacks insight into competing care needs and situations therefore not able to accurately identify and articulate care priorities.</p>	
<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	
Provision of personalised care and response to changing care needs					
<p>Exemplary practice demonstrated. Confidently and systematically meets people’s essential care needs through a personalised care approach. Prompt recognition and response to changing care needs.</p>	<p>Reasonably confident practice demonstrated meeting people’s essential care needs through a personalised care approach. Accurately identifies and appropriately responds to changing care needs. Minimal support required.</p>	<p>Satisfactory practice demonstrated meeting people’s essential care needs through a personalised care approach. With limited help able to identify and appropriately respond to changing care needs.</p>	<p>Lacks confidence in delivery of care. Often requires direction and assistance to meet people’s essential care needs. Frequent prompts required to identify and appropriately respond to changing care needs.</p>	<p>Unskilled. Lacks ability to meet people’s essential care needs. Personalised approach not evident. Unable to identify changing care needs or appropriately respond without significant help.</p>	
<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	
Medicines management					
<p>Exemplary and confident medicines administration and management. Works within legal and ethical frameworks.</p>	<p>Good medicines administration and management. Works within legal and ethical frameworks.</p>	<p>Safe medicines administration and management with some support/prompting. Works within legal and ethical frameworks.</p>	<p>Requires frequent prompting and support to ensure safe medicines administration and management. Works within legal and ethical frameworks.</p>	<p>Lacks knowledge and skills even with prompting to ensure safe medicines administration and management.</p>	
<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	
Verbal Communication skills during handover					
<p>Exemplary professional communication skills. Confident and fluent verbal report at handover. Content is logically structured, concise, accurate and comprehensive.</p>	<p>Good professional communication skills. Good verbal report at handover. Content is reasonably structured, accurate and sufficiently detailed.</p>	<p>Satisfactory professional communication skills. Satisfactory verbal report at handover. Content not always well organised but accurate and sufficiently detailed.</p>	<p>Professional communication skills but lacks confidence. Verbal report at handover accurate but not complete for safe practice.</p>	<p>Inappropriate or unprofessional communication skills. Verbal report at handover lacks accuracy and incomplete for safe practice.</p>	
<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	<input type="checkbox"/> S <input type="checkbox"/> M	

Students are expected to photocopy this page and grade themselves before meeting with their mentor

Summative assessment

P4 - Care management of a group of patients

Grading category		Grade awarded	
Demonstrates ability to assess people's care needs, safely prioritises and manages own workload			
Articulates reasons for prioritisation of care choices			
Provides a personalised approach to care and accurately identifies changing care needs and responds appropriately			
Demonstrates safe and effective practice in medicines administration and management			
Please circle if a pass or fail (if the student has achieved a D or E in any of the above a fail must be awarded)		PASS	FAIL
Field competencies	PASS	FAIL: list all not achieved	
Essential skills cluster	PASS	FAIL: list all not achieved	
Competency and skills achievement: Please circle either pass or fail (if the student has not achieved all the field competencies and all of essential skills than a fail must be awarded)		PASS	FAIL
Practitioner signature		Date	
Student signature		Date	
Moderator signature (if used)		Date	

Summative Feedback - practice experience 4

Please use the values model on page 18 to give the student feedback on their practice

Identified areas for further development	Suggested activities and experiences that will assist in future development	
<p>Heart: intrinsic motivation <i>(Developing compassionate care)</i></p>		
<p>Nerve: Self-belief and self-efficacy <i>(Developing themselves and advocating for the service user or carer)</i></p>		
<p>Brain: Critical and analytical skills <i>(Application of appropriate theory/research to practice)</i></p>		
Student signature	Date	
Mentor signature	Date	
Academic tutor signature	Date	

Student's review of progress

After discussion with your mentor, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Student signature

Date

Mentor's review of progress

After discussion with the student, please summarise your views about the student's progress, including strengths, areas for development and identification of any issues affecting their performance – please remember that this information will help the next mentor develop appropriate learning experiences for the student

Mentor signature

Date

Progression signatures

I confirm that there has been no falsification of evidence within this document (before signing please read the academic integrity statement).		
Student signature	PRINT name	Date
I can confirm that the student has met the required progression point.		
Sign-off mentor signature*	PRINT name	Date
I can confirm that the student does not meet the required progression point.		
Sign-off mentor signature*	PRINT name	Date
I confirm that the documentation and signatures have been checked and verified.		
Academic tutor signature	PRINT name	Date

*this indicates best practice

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Verification of practice experience 4

Prompt	Yes	No (please state those outstanding)
Progression points met?		
Grading in practice assessment completed and passed?		
Action plan completed?		
Absence record completed and matches portal print out?		
Additional visits completed?		
Additional practitioner feedback completed?		
Service user feedback completed?		
Mentor signature sheet completed?		
All interviews completed and signed?		
Academic tutor signature	PRINT name	Date

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These pages are only for the use of those students retrieving a practice experience

Retrieval documentation to be completed at the end of week 4 of the retrieval practice experience

Mentor signature sheet

Retrieval practice experience 4			
Name of placement			
Name of Trust/Practice experience provider			
Name of mentor		Mentor signature	
Name of buddy/associate mentor		Buddy/associate mentor signature	
Phone number of placement			

Initial interview

To be completed within 2 days of the start of the practice experience

This is done by the student in conjunction with the mentor, and is based upon self-assessment, previous failed practice experience and feedback from last mentor.

Learning needs: link to aspects of grading or competency and ESCs not achieved	Action Plan
Student signature	Date
Mentor signature	Date
Proposed date for interim review	

Grading in Practice - Core attribute achievement

Professionalism	PASS	FAIL
Demonstrates under supervision safe, basic person centred care which meets people's essential care needs.		
Promotes a professional image in behaviour and appearance at all times.		
Demonstrates adherence to organisational requirements for hygiene, uniform and dress code in order to limit, prevent and control infection.		
Demonstrates regular, punctual attendance and has knowledge of, or shows application of organisational procedures for reporting absence from practice experience.		
Recognises and works within limitations of knowledge, skills and professional boundaries.		
Demonstrate reflective skills when evaluating own practice.		

Compassion and Communication	PASS	FAIL
Demonstrate the ability to engage with people and build caring professional relationships using effective communication and interpersonal skills, always respecting professional boundaries.		
Demonstrate active listening skills through use of appropriate non-verbal communication skills.		
Demonstrate effective listening by responding in an appropriate way to a range of communication cues.		
Use a variety formats to produce clear, concise and complete records, using appropriate professional language to document care whilst applying the principles of data protection.		
Describe and demonstrate application of the principles of confidentiality in professional practice.		

Students must achieve a pass in all core attributes before they can be graded in single patient care management

Summative grading assessment

P4- Care management of a group of patients

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A,B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail	Fail	Grade
Prioritisation and management of care					
<p>Exemplary ability to manage and prioritise own workload. Confident and at ease in managing competing care needs & situations. Fluently and fully able to articulate rationale for prioritisation of care.</p>	<p>Good ability to manage own workload, prioritises reasonably well therefore able to manage competing care needs and situations. Mostly able to articulate rationale for prioritisation of care.</p>	<p>Satisfactory ability to manage own workload and shows reasonable ability to manage competing care needs and situations effectively. Prioritisation could be improved but safe care provided.</p>	<p>Requires frequent direction and support to be able to competently manage own workload. Inconsistent in approach to prioritisation of competing care needs and situations but demonstrates awareness.</p>	<p>Inability to manage own workload with inadequate prioritisation of care. Lacks insight into competing care needs and situations therefore not able to accurately identify and articulate care priorities.</p>	
S M	S M	S M	S M	S M	
Provision of personalised care and response to changing care needs					
<p>Exemplary practice demonstrated. Confidently and systematically meets people’s essential care needs through a personalised care approach. Prompt recognition and response to changing care needs.</p>	<p>Reasonably confident practice demonstrated meeting people’s essential care needs through a personalised care approach. Accurately identifies and appropriately responds to changing care needs. Minimal support required.</p>	<p>Satisfactory practice demonstrated meeting people’s essential care needs through a personalised care approach. With limited help able to identify and appropriately respond to changing care needs.</p>	<p>Lacks confidence in delivery of care. Often requires direction & assistance to meet people’s essential care needs. Frequent prompts required to identify and appropriately respond to changing care needs.</p>	<p>Unskilled. Lacks ability to meet people’s essential care needs. Personalised approach not evident. Unable to identify changing care needs or appropriately respond without significant help.</p>	
S M	S M	S M	S M	S M	
Medicines management					
<p>Exemplary and confident medicines administration and management. Works within legal and ethical frameworks.</p>	<p>Good medicines administration and management. Works within legal and ethical frameworks. Minimal support.</p>	<p>Safe medicines administration and management with some support/prompting. Works within legal and ethical frameworks.</p>	<p>Requires frequent prompting and support to ensure safe medicines administration and management. Works within legal and ethical frameworks.</p>	<p>Lacks knowledge and skills even with prompting to ensure safe medicines administration and management.</p>	
S M	S M	S M	S M	S M	
Verbal Communication skills during handover					
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S M	S M	S M	S M	S M	

Students are expected to photocopy this page and grade themselves before meeting with their mentor

Summative assessment

P4 - Care management of a group of patients

Grading category			Grade awarded	
Demonstrate ability to assess people's care needs, safely prioritize and manage own workload				
Articulate reasons for prioritisation of care choices				
Provide a personalised approach to care and accurately identifies changing care needs and responds appropriately				
Demonstrates safe and effective practice in medicines administration and management				
If the student has achieved a D or E in any of the above a fail must be awarded (please circle)			PASS	FAIL
Field competencies	PASS	FAIL: list all not achieved		
Essential skills cluster	PASS	FAIL: list all not achieved		
Competency and skills achievement: Please circle either pass or fail (if the student has not achieved all the field competencies and all of essential skills than a fail must be awarded)			PASS	FAIL
Practitioner signature			Date	
Student signature			Date	
Moderator signature (if used)			Date	

Summative feedback – practice experience 4

Please use the values model on page 18 to give the student feedback on their practice

Identified areas for further development	Suggested activities and experiences that will assist in future development	
Heart: intrinsic motivation <i>(Developing compassionate care)</i>		
Nerve: Self-belief and self-efficacy <i>(Developing themselves and advocating for the service user or carer)</i>		
Brain: Critical and analytical skills <i>(Application of appropriate theory/research to practice)</i>		
Student signature	Date	
Mentor signature	Date	
Academic tutor signature	Date	

Student's review of progress

After discussion with your mentor, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Student signature

Date

Mentor's review of progress

After discussion with the student, please summarise your views about the student's progress, including strengths, areas for development and identification of any issues affecting their performance – please remember that this information will help the next mentor develop appropriate learning experiences for the student

Mentor signature

Date

Progression signatures

I confirm that there has been no falsification of evidence within this document (before signing please read the academic integrity statement).		
Student signature	PRINT name	Date
I can confirm that the student has met the required progression point.		
Sign-off mentor signature*	PRINT name	Date
I can confirm that the student does not meet the required progression point.		
Sign-off mentor signature*	PRINT name	Date
I confirm that the documentation and signatures have been checked and verified.		
Academic tutor signature	PRINT name	Date

*this indicates best practice

This page must be scanned/photocopied and stored in the students file in the Faculty of Health Science, University of Southampton

Verification of retrieval practice experience 4

Prompt	Yes	No (please state those outstanding)
Progression points met?		
Grading in practice assessment completed and passed?		
Action plan completed?		
Absence record completed and matches portal print out?		
Additional visits completed?		
Additional practitioner feedback completed?		
Service user feedback completed?		
Mentor signature sheet completed?		
All interviews completed and signed?		
Academic tutor signature	PRINT name	Date

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Section 8: Part 3 of the programme

Nursing professional regulations

In order to enter the register, the NMC requires students to demonstrate achievement of specific outcomes by set “progression points” at the end of part 1, part 2, part 3 (entry to register).

Framework for assessment

In order to pass each practice experience and the end of part 3 and entry to the register you must:

- Achieve all of the progression criteria prior to the sign-off for entry to the register (if you achieve these in practice experience 5, they must be maintained in practice experience 6).
- Achieve all of the essential skills required at sign-off for entry to the register
- Pass the grading in practice tool

Practice experience 5

Name of placement	
Name of Trust/Practice experience provider	
Name of mentor	
Name of buddy/associate mentor	
Phone number of placement	

Learning outcomes

Learning outcomes	Practice Experience (5) Inter-professional coordination of care. On completion of this placement the student will consistently:
1.	work in partnership with people, their families, carers and other professionals.
2.	work within ethical and legal frameworks , recognises the need for advocacy and competently acts as advocate when required or ensures access to independent advocacy.
3.	understand the roles of others in inter-professional care and able to accurately select and prioritise professionals/services/agencies to support people’s care delivery.
4.	demonstrate correct organisational procedures for referral and the ability to effectively communicate people’s care needs when referring to other health professionals/services/agencies.
5.	reflect and evaluate planned inter-professional service provision & acknowledges any limitations, identifying areas to improve people’s experience and care outcomes.
6.	demonstrate achievement of core attributes.

Competencies		Essential Skills Cluster (ESC)
<p>Domain 1 Competency 1</p> <p>Domain 1 Competency 1.1</p>	<p>All nurses must practise with confidence according to <i>The Code: Standards of conduct, performance and ethics for nurses and midwives</i> (NMC 2008), and within other recognised ethical and legal frameworks. They must be able to recognise and address ethical challenges relating to people's choices and decision-making about their care, and act within the law to help them and their families and carers find acceptable solutions.</p> <p>Adult nurses must understand and apply current legislation to all service users, paying special attention to the protection of vulnerable people, including those with complex needs arising from ageing, cognitive impairment, long-term conditions and those approaching the end of life.</p>	<ul style="list-style-type: none"> • Upholds people's legal rights and speaks out when these are at risk of being compromised [ESC4.4] [14.7]. • Is acceptant of differing cultural traditions, beliefs, UK legal frameworks and professional ethics when planning care with people and their families and carers [ESC4.5]. • Acts autonomously and proactively in promoting care environments that are culturally sensitive and free from discrimination, harassment and exploitation [ESC4.6].
<p>Domain 1 Competency 4</p> <p>Domain 2 Competency 4</p>	<p>All nurses must work in partnership with service users, carers, families, groups, communities and organisations. They must manage risk, and promote health and wellbeing while aiming to empower choices that promote self-care and safety.</p> <p>All nurses must recognise when people are anxious or in distress and respond effectively, using therapeutic principles, to promote their wellbeing, manage personal safety and resolve conflict. They must use effective communication strategies and negotiation techniques to achieve best outcomes, respecting the dignity and human rights of all concerned. They must know when to consult a third party and how to make referrals for advocacy, mediation or arbitration.</p>	<ul style="list-style-type: none"> • Recognises and acts to overcome barriers in developing effective relationships with service users and carers [ESC 1.12] [ESC2.12]. • Is sensitive and empowers people to meet their own needs and make choices and considers with the person and their carer(s) their capability to care [ESC2.8]. • Uses strategies to manage situations where a person's wishes conflict with nursing interventions necessary for the person's safety [ESC2.11]. • Works autonomously, confidently and in partnership with people, their families and carers to ensure that needs are met through care planning and delivery, including strategies for self-care and peer support [ESC2.13]. • Consistently shows ability to communicate safely and effectively with people providing guidance for others [ESC6.7]. • Ensures access to independent advocacy [ESC2.9]. • Recognises situations and acts appropriately when a person's choice may compromise their safety or the safety of others [ESC2.10].
<p>Domain 1 Competency 6</p>	<p>All nurses must understand the roles and responsibilities of other health and social care professionals, and seek to work with them collaboratively for the benefit of all who need care.</p>	<ul style="list-style-type: none"> • Initiates, maintains and closes professional relationships with service users and carers [ESC 1.13]. • Engages with people in the planning and provision of care that recognises personalised needs and provides practical and emotional support [ESC5.9].
<p>Domain 4 Competency 7</p> <p>Domain 4 Competency 2</p>	<p>All nurses must work effectively across professional and agency boundaries, actively involving and respecting others' contributions to integrated person-centred care. They must know when and how to communicate with and refer to other professionals and agencies in order to respect the choices of service users and others, promoting shared decision making, to deliver positive outcomes and to coordinate smooth, effective transition within and between services and agencies.</p> <p>All nurses must systematically evaluate care and ensure that they and others use the findings to help improve people's experience and care outcomes and to shape future services.</p>	<ul style="list-style-type: none"> • Works within the context of a multi-professional team and works collaboratively with other agencies when needed to enhance the care of people, communities and populations [ESC9.15]. • Works inter-professionally and autonomously as a means of achieving optimum outcomes for people [ESC14.10].
<p>Domain 2 Competency 7</p>	<p>All nurses must maintain accurate, clear and complete records, including the use of electronic formats, using appropriate and plain language</p>	<ul style="list-style-type: none"> • Acts appropriately in sharing information to enable and enhance care (carers, MDT and across agency boundaries) [ESC7.7]. • Acts within the law when confidential information has to be shared with others [ESC7.9].
<p>Guidance to support achievement of competencies of assessment (P5: inter-professional coordination of care)</p>		
<p>Care Quality Commission (2010) <i>Essential standards for quality and safety</i> London: Care Quality Commission NMC (2009) <i>Guidance for the care of Older people</i> London: NMC Department of Health (2010) <i>Essence of Care</i> London: The Stationary Office NMC (2008) <i>The Code: Standards of conduct performance and ethics for nurses and midwives</i> London: NMC NMC (2010) <i>Standards for pre registration nursing education</i> London: NMC</p>		

Absence record

Dates		Number of hours missed	Type of absence (e.g. sickness, compassionate leave, medical/dental appointment, absence without authorisation)	Mentor signature
From	To			

Record of absences made up

Dates		Number of made up hours	Mentor signature
From	To		

I verify that this is an accurate record of this student's absence and I have checked accuracy with the portal printout	
Mentor signature	

I verify that this is an accurate account which matches the portal record	
Outstanding hours carried forward	Academic tutor signature

Professional Development

Self-assessment by student at commencement of practice experience

Self-assessment based on previous practice experience	
Strengths	Weaknesses
Concerns	Expectations

Please discuss the key points from this assessment with your mentor prior to completing an action plan for this practice experience

Initial interview

To be completed within 2 days of the start of the practice experience

This is done by the student in conjunction with the mentor, and is based upon the self-assessment, previous practice experiences and feedback from other mentors.

Learning need	Action Plan	
Student signature	Date	
Mentor signature	Date	
Proposed date for interim review		

NMC Field specific competencies

Domain 1: Professional values				
Children's nurses must understand their role as an advocate for children, young people and their families, and work in partnership with them. They must deliver child and family-centred care; empower children and young people to express their views and preferences; and maintain and recognise their rights and best interests.				
Competencies	Formative assessment point Competent		Summative assessment point Competent	
	Mentor initials	Date	Mentor initials	Date
1. All nurses must practise with confidence according to <i>The Code: Standards of conduct, performance and ethics for nurses and midwives</i> (NMC 2008), and within other recognised ethical and legal frameworks. They must be able to recognize and address ethical challenges relating to people's choices and decision-making about their care, and act within the law to help them and their families and carers find acceptable solutions.				
	1.1 Children's nurses must understand the laws relating to child and parental consent, including giving and refusing consent, withdrawal of treatment and legal capacity.			
2. All nurses must practise in a holistic, non-judgmental, caring and sensitive manner that avoids assumptions, supports social inclusion; recognises and respects individual choice; and acknowledges diversity. Where necessary, they must challenge inequality, discrimination and exclusion from access to care.				
	2.1 Children's nurses must recognise that all children and young people have the right to be safe, enjoy life and reach their potential. They must practise in a way that recognises, respects and responds to the individuality of every child and young person.			
3. All nurses must support and promote the health, wellbeing, rights and dignity of people, groups, communities and populations. These include people whose lives are affected by ill health, disability, inability to engage, ageing or death. Nurses must act on their understanding of how these conditions influence public health.				
	3.1 Children's nurses must act as advocates for the right of all children and young people to lead full and independent lives.			
4. All nurses must work in partnership with service users, carers, groups, communities and organisations. They must manage risk, and promote health and wellbeing while aiming to empower choices that promote self-care and safety.				
	4.1 Children's nurses must work in partnership with children, young people and their families to negotiate, plan and deliver child and family-centred care, education and support. They must recognise the parent's or carer's primary role in achieving and maintaining the child's or young person's health and wellbeing, and offer advice and support on parenting in health.			
Domain 2: Communication and interpersonal skills				
Children's nurses must take account of each child and young person's individuality, including their stage of development, ability to understand, culture, learning or communication difficulties and health status. They must communicate effectively with them and with parents and carers.				
Competencies	Formative assessment point Competent		Summative assessment point Competent	
	Mentor initials	Date	Mentor initials	Date
4. 1. All nurses must build partnerships and therapeutic relationships through safe, effective and non-discriminatory communication. They must take account of individual differences, capabilities and needs.				
	1.1 Children's nurses must work with the child, young person and others to ensure that they are actively involved in decision-making, in order to maintain their independence and take account of their on-going intellectual, physical and emotional needs.			

Domain 2: Communication and interpersonal skills				
Competencies	Formative assessment point Competent		Summative assessment point Competent	
	Mentor initials	Date	Mentor initials	Date
5. 2. All nurses must use a range of communication skills and technologies to support person-centred care and enhance quality and safety. They must ensure people receive all the information they need in a language and manner that allows them to make informed choices and share decision making. They must recognise when language interpretation or other communication support is needed and know how to obtain it.				
	2.1 Children's nurses must understand all aspects of development from infancy to young adulthood, and identify each child or young person's developmental stage, in order to communicate effectively with them. They must use play, distraction and communication tools appropriate to the child's or young person's stage of development, including for those with sensory or cognitive impairment.			
6. 3. All nurses must use the full range of communication methods, including verbal, non-verbal and written, to acquire, interpret and record their knowledge and understanding of people's needs. They must be aware of their own values and beliefs and the impact this may have on their communication with others. They must take account of the many different ways in which people communicate and how these may be influenced by ill health, disability and other factors, and be able to recognise and respond effectively when a person finds it hard to communicate.				
	3.1 Children's nurses must ensure that, where possible, children and young people understand their healthcare needs and can make or contribute to informed choices about all aspects of their care.			
Domain 3: Nursing practice and decision-making				
Children's nurses must be able to care safely and effectively for children and young people in all settings, and recognise their responsibility for safeguarding them. They must be able to deliver care to meet essential and complex physical and mental health needs informed by deep understanding of biological, psychological and social factors throughout infancy, childhood and adolescence.				
1. All nurses must use up-to-date knowledge and evidence to assess, plan, deliver and evaluate care, communicate findings, influence change and promote health and best practice. They must make person-centred, evidence-based judgments and decisions, in partnership with others involved in the care process, to ensure high quality care. They must be able to recognise when the complexity of clinical decisions requires specialist knowledge and expertise, and consult or refer accordingly.				
	1.1 Children's nurses must be able to recognise and respond to the essential needs of all people who come into their care including babies, pregnant and postnatal women, adults, people with mental health problems, people with physical disabilities, people with learning disabilities, and people with long term problems such as cognitive impairment.			
	1.2 Children's nurses must use recognised, evidence-based, child-centred frameworks to assess, plan, implement, evaluate and record care, and to underpin clinical judgments and decision-making. Care planning and delivery must be informed by knowledge of pharmacology, anatomy and physiology, pathology, psychology and sociology, from infancy to young adulthood.			
3. All nurses must carry out comprehensive, systematic nursing assessments that take account of relevant physical, social, cultural, psychological, spiritual, genetic and environmental factors, in partnership with service users and others through interaction, observation and measurement.				
	3.1 Children's nurses must carry out comprehensive nursing assessments of children and young people, recognising the particular vulnerability of infants and young children to rapid physiological deterioration.			
5. All nurses must understand public health principles, priorities and practice in order to recognise and respond to the major causes and social determinants of health, illness and health inequalities. They must use a range of information and data to assess the needs of people, groups, communities and populations, and work to improve health, wellbeing and experiences of healthcare; secure equal access to health screening, health promotion and healthcare; and promote social inclusion.				
	5.1 Children's nurses must include health promotion, and illness and injury prevention, in their nursing practice. They must promote early intervention to address the links between early life adversity and adult ill health, and the risks to the current and future physical, mental, emotional and sexual health of children and young people.			

Domain 3: Nursing practice and decision-making				
Children's nurses must be able to care safely and effectively for children and young people in all settings, and recognise their responsibility for safeguarding them. They must be able to deliver care to meet essential and complex physical and mental health needs informed by deep understanding of biological, psychological and social factors throughout infancy, childhood and adolescence.				
Competencies	Formative assessment point Competent		Summative assessment point Competent	
	Mentor initials	Date	Mentor initials	Date
6. All nurses must practise safely by being aware of the correct use, limitations and hazards of common interventions, including nursing activities, treatments, and the use of medical devices and equipment. The nurse must be able to evaluate their use, report any concerns promptly through appropriate channels and modify care where necessary to maintain safety. They must contribute to the collection of local and national data and formulation of policy on risks, hazards and adverse outcomes.				
	6.1 Children's nurses must have numeracy skills for medicines management, assessment, measuring, monitoring and recording which recognise the particular vulnerability of infants and young children in relation accurate medicines calculation.			
8. All nurses must provide educational support, facilitation skills and therapeutic nursing interventions to optimise health and wellbeing. They must promote selfcare and management whenever possible, helping people to make choices about their healthcare needs, involving families and carers where appropriate, to maximise their ability to care for themselves.				
	8.1 Children's nurses must use negotiation skills to ensure the best interests of children and young people in all decisions, including the continuation or withdrawal of care. Negotiation must include the child or young person, their family and members of the multidisciplinary and interagency team where appropriate.			
9. All nurses must be able to recognise when a person is at risk and in need of extra support and protection and take reasonable steps to protect them from abuse.				
	9.1 Children's nurses must understand their central role in preventing maltreatment, and safeguarding children and young people. They must work closely with relevant agencies and professionals, and know when and how to identify and refer those at risk or experiencing harm.			
Domain 4: Leadership, management and team working				
Children's nurses must listen and respond to the wishes of children and young people. They must influence the delivery of health and social care services to optimise the care of children and young people. They must work closely with other agencies and services to ensure seamless and well-supported transition to adult services.				
1. All nurses must act as change agents and provide leadership through quality improvement and service development to enhance people's wellbeing and experiences of healthcare.				
	1.1 Children's nurses must understand health and social care policies relating to the health and wellbeing of children and young people. They must, where possible, empower and enable children, young people, parents and carers to influence the quality of care and develop future policies and strategies.			
	1.2 Children's nurses must ensure that, wherever possible, care is delivered in the child or young person's home, or in another environment that suits their age, needs and preferences.			
6. All nurses must work independently as well as in teams. They must be able to take the lead in coordinating, delegating and supervising care safely, managing risk and remaining accountable for the care given.				
	6.1 Children's nurses must use effective clinical decision-making skills when managing complex and unpredictable situations, especially where the views of children or young people and their parents and carers differ. They must recognise when to seek extra help or advice to manage the situation safely.			
7. All nurses must work effectively across professional and agency boundaries, actively involving and respecting others' contributions to integrated person-centred care. They must know when and how to communicate with and refer to other professionals and agencies in order to respect the choices of service users and others, promoting shared decision making, to deliver positive outcomes and to coordinate smooth, effective transition within and between services and agencies.				
	7.1 Children's nurses must work effectively with young people who have continuing health needs, their families, the multidisciplinary team and other agencies to manage smooth and effective transition from children's services to adult services, taking account of individual needs and preferences.			

Essential skills clusters

Learning outcome Essential skills (NMC 2010): Care, compassion and communication		
Mentor to initial and date outcome of skills achievement at end of P5 skills	Practiced under direct/indirect supervision	Not achieved
1.o As partners in the care process, people can trust a newly registered graduate nurse to provide collaborative care based on the highest standards, knowledge and competence.		
8. Demonstrates clinical confidence through sound knowledge, skills and understanding relevant to field. 9. Is self-aware and self-confident, knows own limitations and is able to take appropriate action. 10. Acts as a role model in promoting a professional image. 11. Acts as a role model in developing trusting relationships, within professional boundaries. 12. Recognises and acts to overcome barriers in developing effective relationships with service users and carers. 13. Initiates, maintains and closes professional relationships with service users and carers. 14. Uses professional support structures to develop self-awareness, challenge own prejudices and enable professional relationships, so that care is delivered without compromise.		
		These ESCs are achieved in the grading grid
2.o People can trust the newly registered graduate nurse to engage in person centred care empowering people to make choices about how their needs are met when they are unable to meet them for themselves.		
8. Is sensitive and empowers people to meet their own needs and make choices and considers with the person and their carer(s) their capability to care. 9. Ensures access to independent advocacy. 10. Recognises situations and acts appropriately when a person's choice may compromise their safety or the safety of others. 11. Uses strategies to manage situation where a person's wishes conflict with nursing interventions necessary for the person's safety. 12. Acts with dignity and respect to ensure that people who are unable to meet their activities of living have choices about how these are met and feel empowered to do as much as possible for themselves. 13. Works autonomously, confidently and in partnership with people, their families and carers to ensure that needs are met through care planning and delivery, including strategies for self-care and peer support. 14. Actively helps people to identify and use their strengths to achieve their goals and aspirations.		
		These ESCs are achieved in the grading grid
3.o People can trust the newly registered graduate nurse to respect them as individuals and strive to help them preserve their dignity at all times.		
1. Acts professionally to ensure that personal judgements, prejudices, values, attitudes and beliefs do not compromise care. 2. Is proactive in promoting and maintaining dignity.		
4.o People can trust in a newly qualified graduate nurse to engage with them and their family or carers within their cultural environments in an acceptant and anti-discriminatory manner, free from harassment and exploitation.		
4. Upholds people's legal rights and speaks out when these are at risk of being compromised. 5. Is acceptant of differing cultural traditions, beliefs, UK legal frameworks and professional ethics when planning care with people and their families and carers. 6. Acts autonomously and proactively in promoting care environments that are culturally sensitive and free from discrimination, harassment and exploitation. 7. Manages and diffuses challenging situations effectively.		
		These ESCs are achieved in the grading grid

Mentor to initial and date outcome of skills achievement at end of P5 skills	Practiced under direct/indirect supervision	Not achieved
5.0 People can trust the newly registered graduate nurse to engage with them in a warm, sensitive and compassionate way.		
<ul style="list-style-type: none"> 6 Anticipates how people might feel in a given situation and responds with kindness and empathy to provide physical and emotional comfort. 7 Makes appropriate use of touch. 8 Listens to, watches for, and responds to verbal and non-verbal cues. 9 Engages with people in the planning and provision of care that recognises personalised needs and provides practical and emotional support. 10 Has insight into own values and how these may impact on interactions with others. 11 Recognises circumstances that trigger personal negative responses and takes action to prevent this compromising care. 12 Recognises and acts autonomously to respond to own emotional discomfort or distress in self and others. 13 Through reflection and evaluation demonstrates commitment to personal and professional development and lifelong learning. 		
This ESC is achieved in the grading grid		
6.0 People can trust the newly registered graduate nurse to engage therapeutically and actively listen to their needs and concerns, responding using skills that are helpful, providing information that is clear, accurate, meaningful and free from jargon.		
<ul style="list-style-type: none"> 7. Consistently shows ability to communicate safely and effectively with people providing guidance for others. 8. Communicates effectively and sensitively in different settings, using a range of methods and skills. 9. Provides accurate and comprehensive written and verbal reports based on best available evidence. 10. Acts autonomously to reduce and challenge barriers to effective communication and understanding. 11. Is proactive and creative in enhancing communication and understanding. 12. Uses the skills of active listening, questioning, paraphrasing and reflection to support a therapeutic intervention. 13. Uses appropriate and relevant communication skills to deal with difficult and challenging circumstances, for example, responding to emergencies, unexpected occurrences, saying “no”, dealing with complaints, resolving disputes, deescalating aggression, conveying ‘unwelcome news’. 	This ESC is achieved in the grading grid	
7.0 People can trust the newly registered graduate nurse to protect and keep as confidential all information relating to them.		
<ul style="list-style-type: none"> 5. Acts professionally and autonomously in situations where there may be limits to confidentiality, for example, public interest and protection from harm. 6. Recognises the significance of information and acts in relation to who does or does not need to know. 7. Acts appropriately in sharing information to enable and enhance care (carers, MDT and across agency boundaries). 8. Works within the legal frameworks for data protection including access to and storage of records. 9. Acts within the law when confidential information has to be shared with others. 		
This ESC is achieved in the grading grid		
This ESC is achieved in the grading grid		
8.0 People can trust the newly registered graduate nurse to gain their consent based on sound understanding and informed choice prior to any intervention and that their rights in decision making and consent will be respected and upheld.		
<ul style="list-style-type: none"> 4. Uses helpful and therapeutic strategies to enable people to understand treatments and other interventions in order to give informed consent. 5. Works within legal frameworks when seeking consent. 6. Assesses and responds to the need and wishes of carers and relatives in relation to information and consent. 7. Demonstrates respect for the autonomy and rights of people to withhold consent in relation to treatment within legal frameworks and in relation to people’s safety. 		

Essential skills Cluster (NMC 2010): Organisational aspects of care		
Mentor to initial and date outcome of skills achievement at end of P5 skills	Practiced under direct/indirect supervision	Not achieved
9.o People can trust the newly registered graduate nurse to treat them as partners and work with them to make a holistic and systematic assessment of their needs; to develop a personalised plan that is based on mutual understanding and respect for their individual situation promoting health and well-being, minimising risk of harm and promoting their safety at all times.		
<p>12. In partnership with the person, their carers and their families, makes a holistic, person centred and systematic assessment of physical, emotional, psychological, social, cultural and spiritual needs, including risk, and together, develops a comprehensive personalised plan of nursing care.</p> <p>13. Acts autonomously and takes responsibility for collaborative assessment and planning of care delivery with the person, their carers and their family.</p> <p>14. Applies research based evidence to practice.</p> <p>15. Works within the context of a multi-professional team and works collaboratively with other agencies when needed to enhance the care of people, communities and populations.</p> <p>16. Promotes health and well-being, self-care and independence by teaching and empowering people and carers to make choices in coping with the effects of treatment and the on-going nature and likely consequences of a condition including death and dying.</p> <p>17. Uses a range of techniques to discuss treatment options with people.</p> <p>18. Discusses sensitive issues in relation to public health and provides appropriate advice and guidance to individuals, communities and populations for example, contraception, substance misuse, smoking, obesity.</p> <p>19. Refers to specialists when required.</p> <p>20. Acts autonomously and appropriately when faced with sudden deterioration in people's physical or psychological condition or emergency situations, abnormal vital signs, collapse, cardiac arrest, self-harm, extremely challenging behaviour, attempted suicide.</p> <p>21. Measures, documents and interprets vital signs and acts autonomously and appropriately on findings.</p> <p>22. Works within a public health framework to assess needs and plan care for individuals, communities and populations.</p>		
This ESC is achieved in the grading grid		
10.o People can trust the newly registered graduate nurse to deliver nursing interventions and evaluate their effectiveness against the agreed assessment and care plan.		
<p>1. Provides safe and effective care in partnership with people and their carers within the context of people's ages, conditions and developmental stages.</p> <p>2. Prioritises the needs of groups of people and individuals in order to provide care effectively and efficiently.</p> <p>3. Detects, records and reports if necessary, deterioration or improvement and takes appropriate action autonomously.</p> <p>4. Evaluates the effect of interventions, taking account of people's and carers' interpretation of physical, emotional, and behavioural changes.</p> <p>5. Involves the person in review and adjustments to their care, communicating changes to colleagues.</p>		
11.o People can trust the newly registered graduate nurse to safeguard children and adults from vulnerable situations and support and protect them from harm.		
<p>5. Recognises and responds when people are in vulnerable situations and at risk, or in need of support and protection.</p> <p>6. Shares information safely with colleagues and across agency boundaries for the protection of individuals and the public.</p> <p>7. Makes effective referrals to safeguard and protect children and adults requiring support and protection.</p> <p>8. Works collaboratively with other agencies to develop, implement and monitor strategies to safeguard and protect individuals and groups who are in vulnerable situations.</p> <p>9. Supports people in asserting their human rights.</p> <p>10. Challenges practices which do not safeguard those in need of support and protection.</p>		

Mentor to initial and date outcome of skills achievement at end of P5 skills	Practiced under direct/indirect supervision	Not achieved
12.o People can trust the newly registered graduate nurse to respond to their feedback and a wide range of other sources to learn, develop and improve services.		
5. Shares complaints, compliments and comments with the team in order to improve care. 6. Actively responds to feedback. 7. Supports people who wish to complain. 8. As an individual team member and team leader, actively seeks and learn from feedback to enhance care and own and others professional development. 9. Works within ethical and legal frameworks and local policies to deal with complaints, compliments and concerns.		
14.o People can trust the newly registered graduate nurse to be an autonomous and confident member of the multi-disciplinary or multi agency team and to inspire confidence in others.		
6. Actively consults and explores solutions and ideas with others to enhance care. 7. Challenges the practice of self and others across the multi-professional team. 8. Takes effective role within the team adopting the leadership role when appropriate. 9. Act as an effective role model in decision making, taking action and supporting others. 10. Works inter-professionally and autonomously as a means of achieving optimum outcomes for people. 11. Safeguards the safety of self and others, and adheres to lone working policies when working in the community setting and in people's homes.		
	This ESC is achieved in the grading grid	
	This ESC is achieved in the grading grid	
15.o People can trust the newly registered graduate nurse to safely delegate to others and to respond appropriately when a task is delegated to them.		
2. Works within the requirements of <i>The Code</i> (NMC 2008) in delegating care and when care is delegated to them. 3. Takes responsibility and accountable for delegating care to others. 4. Prepares, supports and supervises those to whom care has been delegated. 5. Recognises and addresses deficits in knowledge and skill in self and others and takes appropriate action.		
16.o People can trust the newly registered graduate nurse to safely lead, co-ordinate and manage care.		
1. Inspires confidence and provides clear direction to others 2. Takes decisions and is able to answer for these decisions when required. 3. Bases decisions on evidence and uses experience to guide decision-making. 4. Acts as a positive role model for others. 5. Manages time effectively. 6. Negotiates with others in relation to balancing competing and conflicting priorities.		
17.o People can trust the newly registered graduate nurse to work safely under pressure and maintain the safety of service users at all times.		
1. Demonstrates effective time management. 2. Prioritises own workload and manages competing and conflicting priorities. 3. Appropriately reports concerns regarding staffing and skill-mix and acts to resolve issues that may impact on the safety of service users within local policy frameworks. 4. Recognises stress in others and provides appropriate support or guidance ensuring safety to people at all times. 5. Enables others to identify and manage their stress. 6. Works within local policies when working in the community setting including in people's homes and ensures the safety of others.		

Mentor to initial and date outcome of skills achievement at end of P5 skills	Practiced under direct/indirect supervision	Not achieved
18.o People can trust a newly registered graduate nurse to enhance the safety of service users and identify and actively manage risk and uncertainty in relation to people, the environment, self and others.		
<ul style="list-style-type: none"> 9. Reflects on and learns from safety incidents as an autonomous individual and as a team member and contributes to team learning. 10. Participates in clinical audit to improve the safety of service users. 11. Assesses and implements measures to manage, reduce or remove risk that could be detrimental to people, self and others. 12. Assesses, evaluates and interprets risk indicators and balances risks against benefits, taking account of the level of risk people are prepared to take. 13. Works within legal and ethical frameworks to promote safety and positive risk taking. 14. Works within policies to protect self and others in all care settings including in the home care setting. 15. Takes steps not to cross professional boundaries and put self or colleagues at risk. 		
19.o People can trust the newly registered graduate nurse to work to prevent and resolve conflict and maintain a safe environment.		
<ul style="list-style-type: none"> 3. Selects and applies appropriate strategies and techniques for conflict resolution, de-escalation and physical intervention in the management of potential violence and aggression. 		
20.o People can trust the newly registered graduate nurse to select and manage medical devices safely.		
<ul style="list-style-type: none"> 2. Works within legal frameworks and applies evidence based practice in the safe selection and use of medical devices. 3. Safely uses and maintains a range of medical devices appropriate to the area of work, including ensuring regular servicing, maintenance and calibration including reporting adverse incidents relating to medical devices. 4. Keeps appropriate records in relation to the use and maintenance of medical devices and the decontamination processes required as per local and national guidelines. 5. Explains the devices to people and carers and checks understanding. 		
Essential skills cluster: infection prevention and control		
21.o People can trust the newly registered graduate nurse to identify and take effective measures to prevent and control infection in accordance with local and national policy.		
<ul style="list-style-type: none"> 7. Works within <i>The Code</i> (NMC 2008) and in keeping with the Guidance on professional conduct for nursing and midwifery students (NMC 2010) and in collaboration with people and their carers to meet responsibilities for prevention and control of infection. 8. In partnership with people and their carers, plans, delivers and documents care that demonstrates effective risk assessment, infection prevention and control. 9. Identifies, recognises and refers to the appropriate clinical expert. 10. Explains risks to people, relatives, carers and colleagues and educates them in prevention and control of infection. 11. Recognises infection risk and reports and acts in situations where there is need for health promotion and protection and public health strategies. 		
23.o People can trust the newly registered graduate nurse to maintain effective standard infection control precautions and apply and adapt these to needs and limitations in all environments.		
<ul style="list-style-type: none"> 1. Initiates and maintains appropriate measures to prevent and control infection according to route of transmission of micro-organism, in order to protect service users, members of the public and other staff. 2. Applies legislation that relates to the management of specific infection risk at a local and national level. 3. Adheres to infection prevention and control policies and procedures at all times and ensures that colleagues work according to good practice guidelines. 4. Challenges the practice of other care workers who put themselves and others at risk of infection. 5. Manages overall environment to minimise risk. 		

Mentor to initial and date outcome of skills achievement at end of P5 skills	Practiced under direct/indirect supervision	Not achieved
23.o People can trust a newly registered graduate nurse to provide effective nursing interventions when someone has an infectious disease including the use of standard isolation techniques.		
5. Recognises and acts upon the need to refer to specialist advisers as appropriate. 6. Assesses the needs of the infectious person, or people and applies appropriate isolation techniques. 7. Ensures that people including colleagues are aware of and adhere to local policies in relation to isolation and infection control procedures. 8. Identifies suitable alternatives when isolation facilities are unavailable and principles have to be applied in unplanned circumstances.		
24.o People can trust a newly registered graduate nurse to fully comply with hygiene, uniform and dress codes in order to limit, prevent and control infection.		
4. Acts as a role model to others and ensures colleagues work within local policy.		
25.o People can trust a newly registered graduate nurse to safely apply the principles of asepsis when performing invasive procedures and be competent in aseptic technique in a variety of settings.		
3. Applies a range of appropriate measures to prevent infection including application of safe and effective aseptic technique. 4. Safely performs wound care, applying non-touch or aseptic techniques in a variety of settings. 5. Able to communicate potential risks to others and advise people on the management of their device, site or wound to prevent and control infection and to promote healing.		
26.o People can trust the newly qualified nurse to act, in a variety of environments including the home care setting, to reduce risk when handling waste, including sharps, contaminated linen and when dealing with spillages of blood and other body fluids.		
1. Manages hazardous waste and spillages in accordance with local health and safety policies. 2. Instructs others to do the same.		
Essential skills cluster: Nutrition and fluid management		
27.o People can trust the newly registered graduate nurse to assist them to choose a diet that provides an adequate nutritional and fluid intake.		
6. Uses knowledge of dietary, physical, social and psychological factors to inform practice being aware of those that can contribute to poor diet, cause or be caused by ill health. 7. Supports people to make appropriate the choices and changes to eating patterns, taking account of dietary preferences, religious and cultural requirements, treatment requirements and special diets needed for health reasons. 8. Refers to specialist members of the multi-disciplinary team for additional or specialist advice. 9. Discusses in a non-judgemental way how diet can improve health and the risks associated with not eating appropriately. 10. In liaison with a registered midwife provides essential advice and support to mothers who are breast feeding. 11. Provides support and advice to carer when the person they are caring for has specific dietary needs.		
28.o People can trust the newly registered graduate nurse to assess and monitor their nutritional status and in partnership, formulate an effective plan of care.		
5. Makes a comprehensive assessment of people's needs in relation to nutrition identifying, documenting and communicating level of risk. 6. Seeks specialist advice as required in order to formulate an appropriate care plan. 7. Provides information to people and their carers. 8. Monitors and records progress against the plan. 9. Discusses progress and changes in condition with the person, carers and the multi-disciplinary team. 10. Acts autonomously to initiate appropriate action when malnutrition is identified or where a person's nutritional status worsens, and report this as an adverse event.		

Mentor to initial and date outcome of skills achievement at end of P5 skills	Practiced under direct/indirect supervision	Not achieved
29.o People can trust a newly registered graduate nurse to assess and monitor their fluid status and in partnership with them, formulate an effective plan of care.		
1. Uses negotiating and other skills to encourage people who might be reluctant to drink to take adequate fluids. 2. Identifies signs of dehydration and acts to correct these. 3. Works collaboratively with the person their carers and the multi-disciplinary team to ensure an adequate fluid intake and output.		
30.o People can trust the newly qualified graduate nurse to assist them in creating an environment that is conducive to eating and drinking.		
5. Challenges others who do not follow procedures 6. Ensures appropriate assistance and support is available to enable people 7. Ensures provision is made for replacement meals for anyone who is unable to eat at the usual time, or unable to prepare their own meals. 8. Ensures that appropriate food and fluids are available as required.		
31.o People can trust the newly qualified graduate nurse to ensure that those unable to take food by mouth receive adequate fluid and nutrition to meet their needs.		
3. Takes action to ensure that, where there are problems with eating and swallowing, nutritional status is not compromised. 4. Administers enteral feeds safely and maintains equipment in accordance with local policy 5. Safely, maintains and uses nasogastric, PEG and other feeding devices. 6. Works within legal and ethical frameworks taking account of personal choice.		
32.o People can trust the newly registered graduate nurse to safely administer fluids when fluids cannot be taken independently.		
1. Understands and applies knowledge of intravenous fluids and how they are prescribed and administered within local administration of medicines policy. 2. Monitors and assesses people receiving intravenous fluids. 3. Documents progress against prescription and markers of hydration. 4. Monitors infusion site for signs of abnormality, and takes the required action reporting and documenting signs and actions taken.		

Medicines Management

Mentor to initial and date outcome of skills achievement at end of P5 skills	Practiced under direct supervision	Not achieved	Indicative content
33.o People can trust the newly registered graduate nurse to correctly and safely undertake medicines calculations.			
1. Is competent in the process of medication-related calculation in nursing field involving: <ul style="list-style-type: none"> ● tablets and capsules ● liquid medicines ● injections ● IV infusions including: <ol style="list-style-type: none"> i. unit dose ii. sub and multiple unit dose iii. complex calculations iv. SI unit conversion 			Numeracy skills, drug calculations required to administer medicines safely via appropriate routes including specific requirements for children and other groups.

Mentor to initial and date outcome of skills achievement at end of P5 skills	Practiced under direct supervision	Not achieved	Indicative content
34.o People can trust the newly registered graduate nurse to work within legal and ethical frameworks that underpin safe and effective medicines management.			
<ol style="list-style-type: none"> 1. Applies legislation to practice to safe and effective ordering, receiving, storing administering and disposal of medicines and drugs, including controlled drugs in both primary and secondary care settings and ensures others do the same. 2. Fully understands all methods of supplying medicines, for example, Medicines Act exemptions, patient group directions (PGDs), clinical management plans and other forms of prescribing. 3. Fully understands the different types of prescribing including supplementary prescribing, community practitioner nurse prescribing and independent nurse prescribing. 			<p>Law, consent, confidentiality, ethics, accountability.</p> <p>Responsibilities under law, application of medicines legislation to practice, include: use of controlled drugs, exemption orders in relation to patient group direction (PGD).⁴</p> <p>Regulatory requirements: Standards for medicines management (NMC 2007), <i>The Code</i> (NMC 2008), Standards of proficiency for nurse and midwife prescribers (NMC 2006).</p> <p>Statutory requirements in relation to mental health, mental capacity, children and young people and medicines, national service frameworks and other country specific guidance.</p>
35.o People can trust the newly registered graduate nurse to work as part of a team to offer holistic care and a range of treatment options of which medicines may form a part.			
<ol style="list-style-type: none"> 1. Works confidently as part of the team and, where relevant, as leader of the team to develop treatment options and choices with the person receiving care and their carers. 2. Questions, critically appraises, takes into account ethical considerations and the preferences of the person receiving care and uses evidence to support an argument in determining when medicines may or may not be an appropriate choice of treatment. 			<p>The principles of holistic care, health promotion, lifestyle advice, over-the-counter medicines, self-administration of medicines and other therapies.</p> <p>Observation and assessment. Effect of medicines and other treatment options, including distraction, positioning, alternative and complementary therapies.</p> <p>Ethical and legal frameworks.</p>
36.o People can trust the newly registered graduate nurse to ensure safe and effective practice in medicines management through comprehensive knowledge of medicines, their actions, risks and benefits.			
<ol style="list-style-type: none"> 1. Applies knowledge of basic pharmacology, how medicines act and interact in the systems of the body, and their therapeutic action. 2. Understands common routes and techniques of medicine administration including absorption, metabolism, adverse reactions and interactions. 3. Safely manages drug administration and monitors effects. 4. Reports adverse incidents and near misses. 5. Safely manages anaphylaxis. 			<p>Related anatomy and physiology.</p> <p>Drug pathways and how medicines act.</p> <p>Impacts of physiological state of patients on drug responses and safety, for example, the older adult, children, pregnant or breast feeding women and significant pathologies such as renal or hepatic impairments.</p> <p>Pharmaco-dynamics -the effects of drugs and their mechanisms of action in the body.</p> <p>Pharmaco-therapeutics – the therapeutic actions of certain medicines. Risks versus benefits of medication.</p> <p>Pharmaco-kinetics and how doses are determined by dynamics and systems in the body.</p> <p>Role and function of bodies that regulate and ensure the safety and effectiveness of medicines.</p> <p>Knowledge on management of adverse drug events, adverse drug reactions, prescribing and administration errors and the potential repercussions for safety.</p>
37.o People can trust the newly registered graduate nurse to safely order, receive, store and dispose of medicines (including controlled drugs) in any setting.			
<ol style="list-style-type: none"> 2. Orders, receives, stores and disposes of medicines safely (including controlled drugs). 			<p>Managing medicines in hospital or primary care settings, for example, schools and the home care setting.</p> <p>Legislation that underpins practice related to a wide range of medicines such as controlled drugs, infusions and oxygen.</p> <p>Suitable conditions for storage, managing out-of-date stock, safe handling medication, managing discrepancies in stock, omissions.</p>

Mentor to initial and date outcome of skills achievement at end of P5 skills	Practiced under direct supervision	Not achieved	Indicative content
38.o People can trust the newly registered graduate nurse to administer medicines safely and in a timely manner, including controlled drugs.			
<ol style="list-style-type: none"> Under direct supervision safely and effectively administers and, where necessary, prepares medicines via routes and methods commonly used and maintains accurate records. Supervises and teaches others to do the same. Understands the legal requirements. 			<p>Involvement of people receiving treatment, management of fear and anxiety, importance of nonverbal and verbal communication.</p> <p>Use of prescription charts including how to prepare, read and interpret them and record administration and non-administration.</p> <p>Use of personal drug record cards for controlled drugs.</p> <p>Preparing and administering medication in differing environments places, including the home care setting, hygiene, infection control, compliance aids, safe transport and disposal of medicines and equipment.</p> <p>Safety, checking person's identity, last dose, allergies, anaphylaxis, polypharmacy, monitoring of effect and record keeping.</p> <p>Where and how to report contra-indications, side effects, adverse reactions.</p> <p>Skills needed to administer safely via various means, for example, oral, topical, by infusion, injection, syringe driver and pumps.</p> <p>Aware of own limitations and when to refer on.</p> <p>Legal requirements, mechanisms for supply, sale and administration of medication, self-administration including controlled drugs.</p>
39.o People can trust a newly registered graduate nurse to keep and maintain accurate records using information technology, where appropriate, within a multi-disciplinary framework as a leader and as part of a team and in a variety of care settings including at home.			
<ol style="list-style-type: none"> Effectively keep records of medication administered and omitted, in a variety of care settings, including controlled drugs and ensures others do the same. 			<p>Links to legislation, use of controlled drugs, the code in relation to confidentiality, consent and record keeping.</p> <p>Use of electronic records.</p>
40.o People can trust a newly registered graduate nurse to work in partnership with people receiving medical treatments and their carers.			
<ol style="list-style-type: none"> Works with people and carers to provide clear and accurate information. Gives clear instruction and explanation and checks that the person understands the use of medicines and treatment options. Assesses the person's ability to safely self-administer their medicines. Assists people to make safe and informed choices about their medicines. 			<p>Cultural, religious, linguistic and ethical beliefs, issues and sensitivities around medication.</p> <p>Ethical issues relating to compliance and administration of medicine without consent.</p> <p>Self-administration, assessment explanation and monitoring.</p> <p>Concordance.</p> <p>Meeting needs of specific groups including self-administration, for example, people with mental health needs, learning disabilities, children and young people, adolescents and older adults.</p>
41.o People can trust the newly registered graduate nurse to use and evaluate up-to-date information on medicines management and work within national and local policy guidelines.			
<ol style="list-style-type: none"> Works within national and local policies and ensures others do the same. 			<p>Evidence based practice, identification of resources, the 'expert' patient and client.</p> <p>Using sources of information, national and local policies, clinical governance, formularies, for example, British National Formulary and the British National Formulary for Children.</p>
42.o People can trust the newly registered graduate nurse to demonstrate understanding and knowledge to supply and administer via a patient group direction.			
<ol style="list-style-type: none"> Through simulation and course work demonstrates knowledge and application of the principles required for safe and effective supply and administration via a patient group direction including an understanding of role and accountability. Through simulation and course work demonstrates how to supply and administer via a patient group direction. 			<p>National prescribing centre competency framework www.npc.co.uk</p>

Formative grading assessment

Inter-professional coordination of care

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A, B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail	Fail	Grade
Partnership working and advocacy					
<p>Exceptional ability to work in partnership with people, their families, carers and other professionals. Competently & confidently acts as advocate when required.</p>	<p>Good ability to work in partnership with people, their families, carers and other professionals. Competently acts as advocate when required with minimal support.</p>	<p>Satisfactory ability to work in partnership with people, their families, carers and other professionals. Recognises need for advocacy but requires some support.</p>	<p>Some partnership working with people, their families, carers and other professionals. Recognises need for advocacy but lacks confidence and therefore unable to act as advocate even with support.</p>	<p>Inadequate partnership working with people, their families, carers or other professionals. Does not recognise when advocacy is required to meet people’s needs.</p>	
S M	S M	S M	S M	S M	
Inter-professional team roles					
<p>Exceptional understanding of the roles involved in inter-professional care. Confidently able to select and prioritise professionals/services/agencies to support people’s care delivery.</p>	<p>Good understanding of the roles involved in inter-professional care. Recognises appropriate professionals/services/agencies to support people’s care delivery.</p>	<p>Satisfactory understanding of the roles involved in inter-professional care. With limited help recognises appropriate professionals/services/agencies to support people’s care delivery.</p>	<p>Limited understanding of the roles involved in inter-professional care. Inaccurately identifies appropriate professionals/services/agencies to support people’s care delivery.</p>	<p>No understanding of the roles involved in inter-professional care and inability to recognise appropriate professionals/services/agencies to support people’s care delivery.</p>	
S M	S M	S M	S M	S M	
Communication skills & patient referral					
<p>Expertly follows organisational procedures for patient referral. Demonstrates exemplary professional communication of people’s care needs to other health professionals/services/agencies.</p>	<p>Good understanding of organisational procedures for patient referral. Good communication of people’s care needs to other health professionals/services/agencies.</p>	<p>Satisfactory understanding of organisational procedures for patient referral. Satisfactory communication of people’s care needs to other health professionals/services/agencies.</p>	<p>Limited understanding of organisational procedures for patient referral. Inadequate communication of people’s care needs to other health professionals/services/agencies.</p>	<p>No understanding of organisational procedures for patient referral. Poor communication of people’s care needs to other health professionals/services/agencies.</p>	
S M	S M	S M	S M	S M	
Evaluation and reflection of inter-professional service provision					
<p>Exceptional ability to evaluate planned inter-professional service provision and acknowledges any limitations. Excellent reflective insight when evaluating people’s care needs.</p>	<p>Confidently evaluates planned inter-professional service provision and acknowledges any limitations. Good reflective insight when evaluating people’s care needs.</p>	<p>Satisfactory ability to evaluate planned inter-professional service provision and some awareness of any limitations. Some reflective insight when evaluating people’s care needs.</p>	<p>Limited ability to evaluate planned inter-professional service provision and inadequate acknowledgement of any limitations. Minimal reflective insight when evaluating people’s care needs.</p>	<p>Fails to evaluate planned inter-professional service provision and no acknowledgement of any limitations. No reflective insight when evaluating people’s care needs.</p>	
S M	S M	S M	S M	S M	

Students are expected to photocopy this page and grade themselves before meeting with their mentor

Formative (interim review) - practice experience 5

Student's review of progress

After discussion with your mentor and formative grading, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Student signature

Date

Mentor's review of progress

After discussion with the student and formative grading, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Mentor signature

Date

Following this review of grading, progress review and learning needs:

	YES	NO
Learning needs have been re-explored		
Action plan has been re-negotiated/developed		
Academic tutor must be contacted if any formative fail grades have been awarded or any concerns are raised at this point		

Learning need	Action plan
Student's signature	Date
Mentor's signature	Date
Proposed date for review	

Service user/carer involvement in practice

Consent must be gained from the service user/carer with the mentor present to participate in this exercise. This exercise can be undertaken as a discussion and the mentor should then record the points raised below.

We would like to hear from your views about the way nursing students have contributed to the care that you have received. You do not need to disclose your name and the feedback that you give will not affect the care you receive. There is no requirement for you to participate in this exercise (if a carer this relates to the care given to the service user).

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Additional practitioner feedback

Comments on the student's performance during additional practice experiences/spoke experiences

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Additional practitioner feedback

Comments on the student's performance during additional practice experiences/spoke experiences

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Grading in Practice - Core attribute achievement

Professionalism	PASS	FAIL
Demonstrates under supervision safe, basic person centred care which meets people's essential care needs.		
Promotes a professional image in behaviour and appearance at all times.		
Demonstrates adherence to organisational requirements for hygiene, uniform and dress code in order to limit, prevent and control infection.		
Demonstrates regular, punctual attendance and has knowledge of, or shows application of organisational procedures for reporting absence from practice experience.		
Recognises and works within limitations of knowledge, skills and professional boundaries.		
Demonstrate reflective skills when evaluating own practice.		

Compassion and Communication	PASS	FAIL
Demonstrate the ability to engage with people and build caring professional relationships using effective communication and interpersonal skills, always respecting professional boundaries.		
Demonstrate active listening skills through use of appropriate non-verbal communication skills.		
Demonstrate effective listening by responding in an appropriate way to a range of communication cues.		
Use a variety formats to produce clear, concise and complete records, using appropriate professional language to document care whilst applying the principles of data protection.		
Describe and demonstrate application of the principles of confidentiality in professional practice.		

Students must achieve a pass in all core attributes before they can be graded in single patient care management

Experience 5: grading practice exercise – Formative exercise for Inter-professional co-ordination of care

Reflect on working in an inter-professional team and then ask yourself the following questions: what can hinder your contribution to the following?

- The nursing team?
- The inter-professional team

Use the table below to complete the exercise

Nursing Team	Inter-professional team
<p>Using an example from your current experience of how each health care professional's role complement other's roles within the team</p>	
<p>What might potentially happen if team members did not work together?</p>	

Summative grading assessment

P5: Leadership, management and team working (Inter-professional coordination of care)

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A,B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail	Fail	Grade
Partnership working and advocacy					
<p>Exceptional ability to work in partnership with people, their families, carers and other professionals. Competently & confidently acts as advocate when required.</p>	<p>Good ability to work in partnership with people, their families, carers and other professionals. Competently acts as advocate when required with minimal support.</p>	<p>Satisfactory ability to work in partnership with people, their families, carers and other professionals. Recognises need for advocacy but requires some support.</p>	<p>Some partnership working with people, their families, carers and other professionals. Recognises need for advocacy but lacks confidence and therefore unable to act as advocate even with support.</p>	<p>Inadequate partnership working with people, their families, carers or other professionals. Does not recognise when advocacy is required to meet people’s needs.</p>	
S M	S M	S M	S M	S M	
Inter-professional team roles					
<p>Exceptional understanding of the roles involved in inter-professional care. Confidently able to select and prioritise professionals/services/agencies to support people’s care delivery.</p>	<p>Good understanding of the roles involved in inter-professional care. Recognises appropriate professionals/services/agencies to support people’s care delivery.</p>	<p>Satisfactory understanding of the roles involved in inter-professional care. With limited help recognises appropriate professionals/services/agencies to support people’s care delivery.</p>	<p>Limited understanding of the roles involved in inter-professional care. Inaccurately identifies appropriate professionals/services/agencies to support people’s care delivery.</p>	<p>No understanding of the roles involved in inter-professional care and inability to recognise appropriate professionals/services/agencies to support people’s care delivery.</p>	
S M	S M	S M	S M	S M	
Communication skills & patient referral					
<p>Expertly follows organisational procedures for patient referral. Demonstrates exemplary professional communication of people’s care needs to other health professionals/services/agencies.</p>	<p>Good understanding of organisational procedures for patient referral. Good communication of people’s care needs to other health professionals/services/agencies.</p>	<p>Satisfactory understanding of organisational procedures for patient referral. Satisfactory communication of people’s care needs to other health professionals/services/agencies.</p>	<p>Limited understanding of organisational procedures for patient referral. Inadequate communication of people’s care needs to other health professionals/services/agencies.</p>	<p>No understanding of organisational procedures for patient referral. Poor communication of people’s care needs to other health professionals/services/agencies.</p>	
S M	S M	S M	S M	S M	
Evaluation and reflection of inter-professional service provision					
<p>Exceptional ability to evaluate planned inter-professional service provision and acknowledges any limitations. Excellent reflective insight when evaluating people’s care needs.</p>	<p>Confidently evaluates planned inter-professional service provision and acknowledges any limitations. Good reflective insight when evaluating people’s care needs.</p>	<p>Satisfactory ability to evaluate planned inter-professional service provision and some awareness of any limitations. Some reflective insight when evaluating people’s care needs.</p>	<p>Limited ability to evaluate planned inter-professional service provision and inadequate acknowledgement of any limitations. Minimal reflective insight when evaluating people’s care needs.</p>	<p>Fails to evaluate planned inter-professional service provision and no acknowledgement of any limitations. No reflective insight when evaluating people’s care needs.</p>	
S M	S M	S M	S M	S M	

Students are expected to photocopy this page and grade themselves before meeting with their mentor

Summative assessment

P5 - Leadership, management and team working (Inter-professional coordination of care)

Grading category			Grade awarded	
Partnership working and advocacy				
Inter-professional team roles				
Communication skills & patient referral				
Evaluation and reflection of inter-professional service provision				
Please circle if a pass or fail (if the student has achieved a D or E in any of the above a fail must be awarded)			PASS	FAIL
Field competencies	PASS	FAIL: list all not achieved		
Essential skills cluster	PASS	List all to be achieved in P6		
Competency achievement. Please circle either pass or fail (if the student has not achieved all of the field competencies then a fail must be awarded)			PASS	FAIL
Practitioner signature			Date	
Student signature			Date	
Moderator signature (if used)			Date	

Summative Feedback - practice experience 5

Please use the values model on page 18 to give the student feedback on their practice

Identified areas for further development	Suggested activities and experiences that will assist in future development	
Heart: intrinsic motivation <i>(Developing compassionate care)</i>		
Nerve: Self-belief and self-efficacy <i>(Developing themselves and advocating for the service user or carer)</i>		
Brain: Critical and analytical skills <i>(Application of appropriate theory/research to practice)</i>		
Student signature	Date	
Mentor signature	Date	
Academic tutor signature	Date	

Student's review of progress

After discussion with your mentor, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Student signature

Date

Mentor's review of progress

After discussion with the student, please summarise your views about the student's progress, including strengths, areas for development and identification of any issues affecting their performance – please remember that this information will help the next mentor develop appropriate learning experiences for the student

Mentor signature

Date

Progression signatures

I confirm that there has been no falsification of evidence within this document (before signing please read the academic integrity statement)		
Student signature	PRINT name	Date
I can confirm that the student has met the required grading for this practice placement.		
Mentor signature	PRINT name	Date
I can confirm that the student does not meet the required grading for this practice placement.		
Mentor signature	PRINT name	Date
I confirm that the documentation and signatures have been checked and verified		
Academic tutor signature	PRINT name	Date

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University of Southampton**

Verification of practice experience 5

Prompt	Yes	No (please state those outstanding)
Progression points met?		
Grading in practice assessment completed and passed?		
Action plan completed?		
Absence record completed and matches portal print out?		
Additional visits completed?		
Additional practitioner feedback completed?		
Service user feedback completed?		
Mentor signature sheet completed?		
All interviews completed and signed?		
Academic tutor signature	PRINT name	Date

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These pages are only for the use of those students retrieving a practice experience

Retrieval documentation to be completed at the end of week 4 of the retrieval practice experience

Mentor signature sheet

Retrieval practice experience 5			
Name of placement			
Name of Trust/Practice experience provider			
Name of mentor		Mentor signature	
Name of buddy/associate mentor		Buddy/associate mentor signature	
Phone number of placement			

Initial interview

To be completed within 2 days of the start of the practice experience

This is done by the student in conjunction with the mentor, and is based upon self-assessment, previous failed practice experience and feedback from last mentor.

Learning needs: link to aspects of grading or competency and ESCs not achieved	Action Plan
Student signature	Date
Mentor signature	Date
Proposed date for interim review	

Grading in Practice - Core attribute achievement

Professionalism	PASS	FAIL
Demonstrates under supervision safe, basic person centred care which meets people's essential care needs.		
Promotes a professional image in behaviour and appearance at all times.		
Demonstrates adherence to organisational requirements for hygiene, uniform and dress code in order to limit, prevent and control infection.		
Demonstrates regular, punctual attendance and has knowledge of, or shows application of organisational procedures for reporting absence from practice experience.		
Recognises and works within limitations of knowledge, skills and professional boundaries.		
Demonstrate reflective skills when evaluating own practice.		

Compassion and Communication	PASS	FAIL
Demonstrate the ability to engage with people and build caring professional relationships using effective communication and interpersonal skills, always respecting professional boundaries.		
Demonstrate active listening skills through use of appropriate non-verbal communication skills.		
Demonstrate effective listening by responding in an appropriate way to a range of communication cues.		
Use a variety formats to produce clear, concise and complete records, using appropriate professional language to document care whilst applying the principles of data protection.		
Describe and demonstrate application of the principles of confidentiality in professional practice.		

Students must achieve a pass in all core attributes before they can be graded in single patient care management

Summative grading assessment

P5: Leadership, management and team working (Inter-professional coordination of care)

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A,B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail	Fail	Grade
Partnership working and advocacy					
<p>Exceptional ability to work in partnership with people, their families, carers and other professionals. Competently & confidently acts as advocate when required.</p>	<p>Good ability to work in partnership with people, their families, carers and other professionals. Competently acts as advocate when required with minimal support.</p>	<p>Satisfactory ability to work in partnership with people, their families, carers and other professionals. Recognises need for advocacy but requires some support.</p>	<p>Some partnership working with people, their families, carers and other professionals. Recognises need for advocacy but lacks confidence and therefore unable to act as advocate even with support.</p>	<p>Inadequate partnership working with people, their families, carers or other professionals. Does not recognise when advocacy is required to meet people’s needs.</p>	
S M	S M	S M	S M	S M	
Inter-professional team roles					
<p>Exceptional understanding of the roles involved in inter-professional care. Confidently able to select and prioritise professionals/services/agencies to support people’s care delivery.</p>	<p>Good understanding of the roles involved in inter-professional care. Recognises appropriate professionals/services/agencies to support people’s care delivery.</p>	<p>Satisfactory understanding of the roles involved in inter-professional care. With limited help recognises appropriate professionals/services/agencies to support people’s care delivery.</p>	<p>Limited understanding of the roles involved in inter-professional care. Inaccurately identifies appropriate professionals/services/agencies to support people’s care delivery.</p>	<p>No understanding of the roles involved in inter-professional care and inability to recognise appropriate professionals/services/agencies to support people’s care delivery.</p>	
S M	S M	S M	S M	S M	
Communication skills & patient referral					
<p>Expertly follows organisational procedures for patient referral. Demonstrates exemplary professional communication of people’s care needs to other health professionals/services/agencies.</p>	<p>Good understanding of organisational procedures for patient referral. Good communication of people’s care needs to other health professionals/services/agencies.</p>	<p>Satisfactory understanding of organisational procedures for patient referral. Satisfactory communication of people’s care needs to other health professionals/services/agencies.</p>	<p>Limited understanding of organisational procedures for patient referral. Inadequate communication of people’s care needs to other health professionals/services/agencies.</p>	<p>No understanding of organisational procedures for patient referral. Poor communication of people’s care needs to other health professionals/services/agencies.</p>	
S M	S M	S M	S M	S M	
Evaluation and reflection of inter-professional service provision					
<p>Exceptional ability to evaluate planned inter-professional service provision and acknowledges any limitations. Excellent reflective insight when evaluating people’s care needs.</p>	<p>Confidently evaluates planned inter-professional service provision and acknowledges any limitations. Good reflective insight when evaluating people’s care needs.</p>	<p>Satisfactory ability to evaluate planned inter-professional service provision and some awareness of any limitations. Some reflective insight when evaluating people’s care needs.</p>	<p>Limited ability to evaluate planned inter-professional service provision and inadequate acknowledgement of any limitations. Minimal reflective insight when evaluating people’s care needs.</p>	<p>Fails to evaluate planned inter-professional service provision and no acknowledgement of any limitations. No reflective insight when evaluating people’s care needs.</p>	
S M	S M	S M	S M	S M	

Students are expected to photocopy this page and grade themselves before meeting with their mentor

Summative assessment

P5 - Leadership, management and team working (Inter-professional coordination of care)

Grading category		Grade awarded	
Partnership working and advocacy			
Inter-professional team roles			
Communication skills & patient referral			
Evaluation and reflection of inter-professional service provision			
Please circle if a pass or fail (if the student has achieved a D or E in any of the above a fail must be awarded)		PASS	FAIL
Field competencies	PASS	FAIL: list all not achieved	
Essential skills cluster	PASS	List all to be achieved in P6	
Competency achievement. Please circle either pass or fail (if the student has not achieved all of the field competencies then a fail must be awarded)		PASS	FAIL
Practitioner signature		Date	
Student signature		Date	
Moderator signature (if used)		Date	

Summative Feedback – retrieval practice experience 5

Please use the values model on page 18 to give the student feedback on their practice

Identified areas for further development	Suggested activities and experiences that will assist in future development
<p>Heart: intrinsic motivation <i>(Developing compassionate care)</i></p>	
<p>Nerve: Self-belief and self-efficacy <i>(Developing themselves and advocating for the service user or carer)</i></p>	
<p>Brain: Critical and analytical skills <i>(Application of appropriate theory/research to practice)</i></p>	
Student signature	Date
Mentor signature	Date
Academic tutor signature	Date

Student's review of progress

After discussion with your mentor, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance.

Student signature

Date

Mentor's review of progress

After discussion with the student, please summarise your views about the student's progress, including strengths, areas for development and identification of any issues affecting their performance – please remember that this information will help the next mentor develop appropriate learning experiences for the student.

Mentor signature

Date

Progression signatures

I confirm that there has been no falsification of evidence within this document (before signing please read the academic integrity statement).		
Student signature	PRINT name	Date
I can confirm that the student has met the required grading for this practice placement.		
Mentor signature	PRINT name	Date
I can confirm that the student does not meet the required grading for this practice placement.		
Mentor signature	PRINT name	Date
I confirm that the documentation and signatures have been checked and verified.		
Academic tutor signature	PRINT name	Date

This page must be scanned/photocopied and stored in the students file within the Faculty of Health Science, University of Southampton

Verification of practice experience 5

Prompt	Yes	No (please state those outstanding)
Progression points met?		
Grading in practice assessment completed and passed?		
Action plan completed?		
Absence record completed and matches portal print out?		
Additional visits completed?		
Additional practitioner feedback completed?		
Service user feedback completed?		
Mentor signature sheet completed?		
All interviews completed and signed?		
Academic tutor signature	PRINT name	Date

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Section 8: Part 3 of the programme

Nursing professional regulations

In order to enter the register, the NMC requires students to demonstrate achievement of specific outcomes by set “progression points” at the end of part 1, part 2, part 3 (entry to register).

Framework for assessment

In order to enter the register you must:

- Achieve all of the progression criteria prior to the sign-off for entry to the register (if you achieved these in practice experience 5, they must be maintained in practice experience 6).
- Achieve all of the essential skills required at sign-off for entry to the register.
- Pass the grading in practice tool.

Practice experience 6

Name of placement	
Name of Trust/Practice experience provider	
Name of mentor	
Name of buddy/ associate mentor	
Phone number of placement	

Learning outcomes

Learning outcomes	Practice Placement (6): Leading a team in service delivery On completion of this placement the student will consistently:
1.	working within requirements of NMC code (NMC, 2008) demonstrate leadership skills in co-ordinating, delegating and supervising care
2.	prioritise and manage time and resources effectively to ensure quality of care is maintained or enhanced
3.	demonstrate awareness of managing risk and promotion of patient safety
4.	accurately report concerns through appropriate organisational channels
5.	facilitate development of nursing students and others to develop their competence, using a range of professional and personal development skills
6.	reflect and evaluate own organisational skills, acknowledging any limitations.

Competencies		Essential Skills Cluster (ESC)
Domain 4 Competency 6 Domain 1 Competency 8	All nurses must work independently as well as in teams. They must be able to take the lead in coordinating, delegating and supervising care safely, managing risk and remaining accountable for the care given. All nurses must practise independently, recognising the limits of their competence and knowledge. They must reflect on these limits and seek advice from, or refer to, other professionals where necessary.	<ul style="list-style-type: none"> • Demonstrates clinical confidence through sound knowledge, skills and understanding relevant to field [ESC1.8]. • Acts as a role model in developing trusting relationships, within professional boundaries [ESC1.11]. • Takes effective role within the team adopting the leadership role when appropriate [ESC14.8]. • Works within the requirements of the code (NMC 2008) in delegating care and when care is delegated to them [ESC15.2]. • Takes responsibility and accountable for delegating care to others [ESC15.3]. • Inspires confidence and provides clear direction to others [ESC16.1]. • Takes decisions and is able to answer for these decisions when required [ESC16.2]. • Bases decisions on evidence and uses experience to guide decision-making [ESC16.3]. • Acts as a positive role model for others [ESC16.4]. • Manages time effectively [ESC16.5, ESC17.7]. • Negotiates with others in relation to balancing competing and conflicting priorities [ESC16.6]. • Prioritises own workload and manages competing and conflicting priorities.
Domain 4 Competency 3	All nurses must be able to identify priorities and manage time and resources effectively to ensure the quality of care is maintained or enhanced.	<ul style="list-style-type: none"> • Actively consults and explores solutions and ideas with others to enhance care [ESC14.6]. • Appropriately reports concerns regarding staffing and skill-mix and acts to resolve issues that may impact on the safety of service users within local policy frameworks [ESC17.9].
Domain 2 Competency 7	All nurses must maintain accurate, clear and complete records, including the use of electronic formats, using appropriate and plain language.	<ul style="list-style-type: none"> • Inspires confidence and provides clear direction to others.
Domain 4 Competency 5	All nurses must facilitate nursing students and others to develop their competence, using a range of professional and personal development skills.	<ul style="list-style-type: none"> • Act as an effective role model in decision making, taking action and supporting others [ESC14.9]. • Prepares, supports and supervises those to whom care has been delegated [ESC15.4]. • Recognises and addresses deficits in knowledge and skill in self and others and takes appropriate action [ESC15.5].
Domain 4 Competency 2	All nurses must systematically evaluate care and ensure that they and others use the findings to help improve people's experience and care outcomes and to shape future services.	<ul style="list-style-type: none"> • Through reflection and evaluation demonstrates commitment to personal and professional development and life-long learning [ESC5.13]. • As an individual team member and team leader, actively seeks and learns from feedback to enhance care and own and others professional development [ESC12.8].

Absence record

Dates		Number of hours missed	Type of absence (e.g. sickness, compassionate leave, medical/dental appointment, absence without authorisation)	Mentor's signature
From	To			

Record of absences made up

Dates		Number of made up hours	Mentor's signature
From	To		

I verify that this is an accurate record of this student's absence and I have checked accuracy with the portal printout	
Mentor signature	

I verify that this is an accurate account which matches the portal record	
Outstanding hours carried forward	Academic tutor signature

Professional Development

Self-assessment by student at commencement of practice experience

Self-assessment based on previous practice experience	
Strengths	Weaknesses
Concerns	Expectations

Please discuss the key points from this assessment with your mentor prior to completing an action plan for this practice experience

Initial interview

To be completed within 2 days of the start of the practice experience

This is done by the student in conjunction with the mentor, and is based upon the self-assessment, previous practice experiences and feedback from other mentors.

Learning need	Action Plan	
Student signature	Date	
Mentor signature	Date	
Proposed date for interim review	Date	

NMC Field specific competencies

Domain 1: Professional values				
Children's nurses must understand their role as an advocate for children, young people and their families, and work in partnership with them. They must deliver child and family-centred care; empower children and young people to express their views and preferences; and maintain and recognise their rights and best interests.				
Competencies	Formative assessment point Competent		Summative assessment point Competent	
	Mentor initials	Date	Mentor initials	Date
2. 1. All nurses must practise with confidence according to <i>The code: Standards of conduct, performance and ethics for nurses and midwives</i> (NMC 2008), and within other recognised ethical and legal frameworks. They must be able to recognize and address ethical challenges relating to people's choices and decision-making about their care, and act within the law to help them and their families and carers find acceptable solutions.				
	1.1 Children's nurses must understand the laws relating to child and parental consent, including giving and refusing consent, withdrawal of treatment and legal capacity.			
2. All nurses must practise in a holistic, non-judgmental, caring and sensitive manner that avoids assumptions, supports social inclusion; recognises and respects individual choice; and acknowledges diversity. Where necessary, they must challenge inequality, discrimination and exclusion from access to care.				
	2.1 Children's nurses must recognise that all children and young people have the right to be safe, enjoy life and reach their potential. They must practise in a way that recognises, respects and responds to the individuality of every child and young person.			
3. All nurses must support and promote the health, wellbeing, rights and dignity of people, groups, communities and populations. These include people whose lives are affected by ill health, disability, inability to engage, ageing or death. Nurses must act on their understanding of how these conditions influence public health.				
	3.1 Children's nurses must act as advocates for the right of all children and young people to lead full and independent lives.			
4. All nurses must work in partnership with service users, carers, groups, communities and organisations. They must manage risk, and promote health and wellbeing while aiming to empower choices that promote self-care and safety.				
	4.1 Children's nurses must work in partnership with children, young people and their families to negotiate, plan and deliver child and family-centred care, education and support. They must recognise the parent's or carer's primary role in achieving and maintaining the child's or young person's health and wellbeing, and offer advice and support on parenting in health.			
Domain 2: Communication and interpersonal skills				
Children's nurses must take account of each child and young person's individuality, including their stage of development, ability to understand, culture, learning or communication difficulties and health status. They must communicate effectively with them and with parents and carers.				
Competencies	Formative assessment point Competent		Summative assessment point Competent	
	Mentor initials	Date	Mentor initials	Date
7. 1. All nurses must build partnerships and therapeutic relationships through safe, effective and non-discriminatory communication. They must take account of individual differences, capabilities and needs.				
	1.1 Children's nurses must work with the child, young person and others to ensure that they are actively involved in decision-making, in order to maintain their independence and take account of their ongoing intellectual, physical and emotional needs.			

Domain 2: Communication and interpersonal skills				
Children's nurses must take account of each child and young person's individuality, including their stage of development, ability to understand, culture, learning or communication difficulties and health status. They must communicate effectively with them and with parents and carers.				
Competencies	Formative assessment point Competent		Summative assessment point Competent	
	Mentor initials	Date	Mentor initials	Date
8. 2. All nurses must use a range of communication skills and technologies to support person-centred care and enhance quality and safety. They must ensure people receive all the information they need in a language and manner that allows them to make informed choices and share decision making. They must recognise when language interpretation or other communication support is needed and know how to obtain it.				
	2.1 Children's nurses must understand all aspects of development from infancy to young adulthood, and identify each child or young person's developmental stage, in order to communicate effectively with them. They must use play, distraction and communication tools appropriate to the child's or young person's stage of development, including for those with sensory or cognitive impairment.			
9. 3. All nurses must use the full range of communication methods, including verbal, non-verbal and written, to acquire, interpret and record their knowledge and understanding of people's needs. They must be aware of their own values and beliefs and the impact this may have on their communication with others. They must take account of the many different ways in which people communicate and how these may be influenced by ill health, disability and other factors, and be able to recognise and respond effectively when a person finds it hard to communicate.				
	3.1 Children's nurses must ensure that, where possible, children and young people understand their healthcare needs and can make or contribute to informed choices about all aspects of their care.			
Domain 3: Nursing practice and decision-making				
Children's nurses must be able to care safely and effectively for children and young people in all settings, and recognise their responsibility for safeguarding them. They must be able to deliver care to meet essential and complex physical and mental health needs informed by deep understanding of biological, psychological and social factors throughout infancy, childhood and adolescence.				
1. All nurses must use up-to-date knowledge and evidence to assess, plan, deliver and evaluate care, communicate findings, influence change and promote health and best practice. They must make person-centred, evidence-based judgments and decisions, in partnership with others involved in the care process, to ensure high quality care. They must be able to recognise when the complexity of clinical decisions requires specialist knowledge and expertise, and consult or refer accordingly.				
	1.1 Children's nurses must be able to recognise and respond to the essential needs of all people who come into their care including babies, pregnant and postnatal women, adults, people with mental health problems, people with physical disabilities, people with learning disabilities, and people with long term problems such as cognitive impairment.			
	1.2 Children's nurses must use recognised, evidence-based, child-centred frameworks to assess, plan, implement, evaluate and record care, and to underpin clinical judgments and decision-making. Care planning and delivery must be informed by knowledge of pharmacology, anatomy and physiology, pathology, psychology and sociology, from infancy to young adulthood.			
3. All nurses must carry out comprehensive, systematic nursing assessments that take account of relevant physical, social, cultural, psychological, spiritual, genetic and environmental factors, in partnership with service users and others through interaction, observation and measurement.				
	3.1 Children's nurses must carry out comprehensive nursing assessments of children and young people, recognising the particular vulnerability of infants and young children to rapid physiological deterioration.			

Domain 3: Nursing practice and decision-making					
Children's nurses must be able to care safely and effectively for children and young people in all settings, and recognise their responsibility for safeguarding them. They must be able to deliver care to meet essential and complex physical and mental health needs informed by deep understanding of biological, psychological and social factors throughout infancy, childhood and adolescence.					
5. All nurses must understand public health principles, priorities and practice in order to recognise and respond to the major causes and social determinants of health, illness and health inequalities. They must use a range of information and data to assess the needs of people, groups, communities and populations, and work to improve health, wellbeing and experiences of healthcare; secure equal access to health screening, health promotion and healthcare; and promote social inclusion.					
	5.1 Children's nurses must include health promotion, and illness and injury prevention, in their nursing practice. They must promote early intervention to address the links between early life adversity and adult ill health, and the risks to the current and future physical, mental, emotional and sexual health of children and young people.				
Competencies		Formative assessment point Competent		Summative assessment point Competent	
		Mentor initials	Date	Mentor initials	Date
6. All nurses must practise safely by being aware of the correct use, limitations and hazards of common interventions, including nursing activities, treatments, and the use of medical devices and equipment. The nurse must be able to evaluate their use, report any concerns promptly through appropriate channels and modify care where necessary to maintain safety. They must contribute to the collection of local and national data and formulation of policy on risks, hazards and adverse outcomes.					
	6.1 Children's nurses must have numeracy skills for medicines management, assessment, measuring, monitoring and recording which recognise the particular vulnerability of infants and young children in relation accurate medicines calculation.				
8. All nurses must provide educational support, facilitation skills and therapeutic nursing interventions to optimise health and wellbeing. They must promote selfcare and management whenever possible, helping people to make choices about their healthcare needs, involving families and carers where appropriate, to maximise their ability to care for themselves.					
	8.1 Children's nurses must use negotiation skills to ensure the best interests of children and young people in all decisions, including the continuation or withdrawal of care. Negotiation must include the child or young person, their family and members of the multidisciplinary and interagency team where appropriate.				
9. All nurses must be able to recognise when a person is at risk and in need of extra support and protection and take reasonable steps to protect them from abuse.					
	9.1 Children's nurses must understand their central role in preventing maltreatment, and safeguarding children and young people. They must work closely with relevant agencies and professionals, and know when and how to identify and refer those at risk or experiencing harm.				

Domain 4: Leadership, management and team working

Children’s nurses must listen and respond to the wishes of children and young people. They must influence the delivery of health and social care services to optimise the care of children and young people. They must work closely with other agencies and services to ensure seamless and well-supported transition to adult services.

1. All nurses must act as change agents and provide leadership through quality improvement and service development to enhance people’s wellbeing and experiences of healthcare.

	1.1 Children’s nurses must understand health and social care policies relating to the health and wellbeing of children and young people. They must, where possible, empower and enable children, young people, parents and carers to influence the quality of care and develop future policies and strategies.				
	1.2 Children’s nurses must ensure that, wherever possible, care is delivered in the child or young person’s home, or in another environment that suits their age, needs and preferences.				

6. All nurses must work independently as well as in teams. They must be able to take the lead in coordinating, delegating and supervising care safely, managing risk and remaining accountable for the care given.

	6.1 Children’s nurses must use effective clinical decision-making skills when managing complex and unpredictable situations, especially where the views of children or young people and their parents and carers differ. They must recognise when to seek extra help or advice to manage the situation safely.				
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7. All nurses must work effectively across professional and agency boundaries, actively involving and respecting others’ contributions to integrated person-centred care. They must know when and how to communicate with and refer to other professionals and agencies in order to respect the choices of service users and others, promoting shared decision making, to deliver positive outcomes and to coordinate smooth, effective transition within and between services and agencies.

	7.1 Children’s nurses must work effectively with young people who have continuing health needs, their families, the multidisciplinary team and other agencies to manage smooth and effective transition from children’s services to adult services, taking account of individual needs and preferences.				
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Essential skills clusters

Learning outcome Essential skills (NMC 2010): Care, compassion and communication		
Mentor to initial and date outcome of skills achievement at end of P6 skills	Practiced under indirect supervision	Not achieved
1.0 As partners in the care process, people can trust a newly registered graduate nurse to provide collaborative care based on the highest standards, knowledge and competence.		
8. Demonstrates clinical confidence through sound knowledge, skills and understanding relevant to field. 9. Is self-aware and self-confident, knows own limitations and is able to take appropriate action 10. Acts as a role model in promoting a professional image 11. Acts as a role model in developing trusting relationships, within professional boundaries. 12. Recognises and acts to overcome barriers in developing effective relationships with service users and carers. 13. Initiates, maintains and closes professional relationships with service users and carers. 14. Uses professional support structures to develop self-awareness, challenge own prejudices and enable professional relationships, so that care is delivered without compromise.	This ESC is achieved in the grading grid	
	This ESC is achieved in the grading grid	
2.0 People can trust the newly registered graduate nurse to engage in person centred care empowering people to make choices about how their needs are met when they are unable to meet them for themselves.		
8. Is sensitive and empowers people to meet their own needs and make choices and considers with the person and their carer(s) their capability to care. 9. Ensures access to independent advocacy. 10. Recognises situations and acts appropriately when a person's choice may compromise their safety or the safety of others. 11. Uses strategies to manage situation where a person's wishes conflict with nursing interventions necessary for the person's safety. 12. Acts with dignity and respect to ensure that people who are unable to meet their activities of living have choices about how these are met and feel empowered to do as much as possible for themselves. 13. Works autonomously, confidently and in partnership with people, their families and carers to ensure that needs are met through care planning and delivery, including strategies for self-care and peer support. 14. Actively helps people to identify and use their strengths to achieve their goals and aspirations.		
	These ESCs are achieved in the grading grid	
3.0 People can trust the newly registered graduate nurse to respect them as individuals and strive to help them preserve their dignity at all times.		
4. Acts professionally to ensure that personal judgements, prejudices, values, attitudes and beliefs do not compromise care. 5. Is proactive in promoting and maintaining dignity.		
4.0 People can trust in a newly qualified graduate nurse to engage with them and their family or carers within their cultural environments in an acceptant and anti-discriminatory manner, free from harassment and exploitation.		
4. Upholds people's legal rights and speaks out when these are at risk of being compromised. 5. Is acceptant of differing cultural traditions, beliefs, UK legal frameworks and professional ethics when planning care with people and their families and carers. 6. Acts autonomously and proactively in promoting care environments that are culturally sensitive and free from discrimination, harassment and exploitation. 7. Manages and diffuses challenging situations effectively.	These ESCs are achieved in the grading grid	

Mentor to initial and date outcome of skills achievement at end of P6 skills	Practiced under indirect supervision	Not achieved
5.0 People can trust the newly registered graduate nurse to engage with them in a warm, sensitive and compassionate way.		
<ul style="list-style-type: none"> 6 Anticipates how people might feel in a given situation and responds with kindness and empathy to provide physical and emotional comfort. 7 Makes appropriate use of touch. 8 Listens to, watches for, and responds to verbal and non-verbal cues. 9 Engages with people in the planning and provision of care that recognises personalised needs and provides practical and emotional support. 10 Has insight into own values and how these may impact on interactions with others. 11 Recognises circumstances that trigger personal negative responses and takes action to prevent this compromising care. 12 Recognises and acts autonomously to respond to own emotional discomfort or distress in self and others. 13 Through reflection and evaluation demonstrates commitment to personal and professional development and lifelong learning. 		
This ESC is achieved in the grading grid		
6.0 People can trust the newly registered graduate nurse to engage therapeutically and actively listen to their needs and concerns, responding using skills that are helpful, providing information that is clear, accurate, meaningful and free from jargon.		
<ul style="list-style-type: none"> 7. Consistently shows ability to communicate safely and effectively with people providing guidance for others. 8. Communicates effectively and sensitively in different settings, using a range of methods and skills. 9. Provides accurate and comprehensive written and verbal reports based on best available evidence. 10. Acts autonomously to reduce and challenge barriers to effective communication and understanding. 11. Is proactive and creative in enhancing communication and understanding. 12. Uses the skills of active listening, questioning, paraphrasing and reflection to support a therapeutic intervention. 13. Uses appropriate and relevant communication skills to deal with difficult and challenging circumstances, for example, responding to emergencies, unexpected occurrences, saying “no”, dealing with complaints, resolving disputes, deescalating aggression, conveying ‘unwelcome news’. 	This ESC is achieved in the grading grid	
7.0 People can trust the newly registered graduate nurse to protect and keep as confidential all information relating to them.		
<ul style="list-style-type: none"> 5. Acts professionally and autonomously in situations where there may be limits to confidentiality, for example, public interest and protection from harm. 10. Recognises the significance of information and acts in relation to who does or does not need to know. 11. Acts appropriately in sharing information to enable and enhance care (carers, MDT and across agency boundaries). 12. Works within the legal frameworks for data protection including access to and storage of records. 13. Acts within the law when confidential information has to be shared with others. 		
8.0 People can trust the newly registered graduate nurse to gain their consent based on sound understanding and informed choice prior to any intervention and that their rights in decision making and consent will be respected and upheld.		
<ul style="list-style-type: none"> 4. Uses helpful and therapeutic strategies to enable people to understand treatments and other interventions in order to give informed consent. 8. Works within legal frameworks when seeking consent. 9. Assesses and responds to the need and wishes of carers and relatives in relation to information and consent. 10. Demonstrates respect for the autonomy and rights of people to withhold consent in relation to treatment within legal frameworks and in relation to people’s safety. 		

Essential skills Cluster (NMC 2010): Organisational aspects of care		
Mentor to initial and date outcome of skills achievement at end of P6 skills	Practiced under indirect supervision	Not achieved
9.o People can trust the newly registered graduate nurse to treat them as partners and work with them to make a holistic and systematic assessment of their needs; to develop a personalised plan that is based on mutual understanding and respect for their individual situation promoting health and well-being, minimising risk of harm and promoting their safety at all times.		
<p>12. In partnership with the person, their carers and their families, makes a holistic, person centred and systematic assessment of physical, emotional, psychological, social, cultural and spiritual needs, including risk, and together, develops a comprehensive personalised plan of nursing care.</p> <p>13. Acts autonomously and takes responsibility for collaborative assessment and planning of care delivery with the person, their carers and their family.</p> <p>14. Applies research based evidence to practice.</p> <p>15. Works within the context of a multi-professional team and works collaboratively with other agencies when needed to enhance the care of people, communities and populations.</p> <p>16. Promotes health and well-being, self-care and independence by teaching and empowering people and carers to make choices in coping with the effects of treatment and the ongoing nature and likely consequences of a condition including death and dying.</p> <p>17. Uses a range of techniques to discuss treatment options with people.</p> <p>18. Discusses sensitive issues in relation to public health and provides appropriate advice and guidance to individuals, communities and populations for example, contraception, substance misuse, smoking, obesity.</p> <p>19. Refers to specialists when required.</p> <p>20. Acts autonomously and appropriately when faced with sudden deterioration in people's physical or psychological condition or emergency situations, abnormal vital signs, collapse, cardiac arrest, self-harm, extremely challenging behaviour, attempted suicide.</p> <p>21. Measures, documents and interprets vital signs and acts autonomously and appropriately on findings.</p> <p>22. Works within a public health framework to assess needs and plan care for individuals, communities and populations.</p>		
10.o People can trust the newly registered graduate nurse to deliver nursing interventions and evaluate their effectiveness against the agreed assessment and care plan.		
<p>6. Provides safe and effective care in partnership with people and their carers within the context of people's ages, conditions and developmental stages.</p> <p>7. Prioritises the needs of groups of people and individuals in order to provide care effectively and efficiently.</p> <p>8. Detects, records and reports if necessary, deterioration or improvement and takes appropriate action autonomously.</p> <p>9. Evaluates the effect of interventions, taking account of people's and carers' interpretation of physical, emotional, and behavioural changes.</p> <p>10. Involves the person in review and adjustments to their care, communicating changes to colleagues.</p>		
11.o People can trust the newly registered graduate nurse to safeguard children and adults from vulnerable situations and support and protect them from harm.		
<p>5. Recognises and responds when people are in vulnerable situations and at risk, or in need of support and protection.</p> <p>6. Shares information safely with colleagues and across agency boundaries for the protection of individuals and the public.</p> <p>7. Makes effective referrals to safeguard and protect children and adults requiring support and protection.</p> <p>8. Works collaboratively with other agencies to develop, implement and monitor strategies to safeguard and protect individuals and groups who are in vulnerable situations.</p> <p>9. Supports people in asserting their human rights.</p> <p>10. Challenges practices which do not safeguard those in need of support and protection.</p>		

Mentor to initial and date outcome of skills achievement at end of P6 skills	Practiced under indirect supervision	Not achieved
12.o People can trust the newly registered graduate nurse to respond to their feedback and a wide range of other sources to learn, develop and improve services.		
5. Shares complaints, compliments and comments with the team in order to improve care. 10. Actively responds to feedback. 11. Supports people who wish to complain. 12. As an individual team member and team leader, actively seeks and learn from feedback to enhance care and own and others professional development. 13. Works within ethical and legal frameworks and local policies to deal with complaints, compliments and concerns.		
This ESC is achieved in the grading grid		
14.o People can trust the newly registered graduate nurse to be an autonomous and confident member of the multi-disciplinary or multi agency team and to inspire confidence in others.		
6. Actively consults and explores solutions and ideas with others to enhance care. 7. Challenges the practice of self and others across the multi-professional team. 8. Takes effective role within the team adopting the leadership role when appropriate. 9. Act as an effective role model in decision making, taking action and supporting others. 10. Works inter-professionally and autonomously as a means of achieving optimum outcomes for people. 11. Safeguards the safety of self and others, and adheres to lone working policies when working in the community setting and in people's homes.	This ESC is achieved in the grading grid	
This ESC is achieved in the grading grid		
15.o People can trust the newly registered graduate nurse to safely delegate to others and to respond appropriately when a task is delegated to them.		
2. Works within the requirements of the code (NMC 2008) in delegating care and when care is delegated to them. 3. Takes responsibility and accountable for delegating care to others. 4. Prepares, supports and supervises those to whom care has been delegated. 5. Recognises and addresses deficits in knowledge and skill in self and others and takes appropriate action.	These ESCs are achieved in the grading grid	
16.o People can trust the newly registered graduate nurse to safely lead, co-ordinate and manage care.		
1. Inspires confidence and provides clear direction to others 2. Takes decisions and is able to answer for these decisions when required. 3. Bases decisions on evidence and uses experience to guide decision-making. 4. Acts as a positive role model for others. 5. Manages time effectively. 6. Negotiates with others in relation to balancing competing and conflicting priorities.	These ESCs are achieved in the grading grid	
17.o People can trust the newly registered graduate nurse to work safely under pressure and maintain the safety of service users at all times.		
7. Demonstrates effective time management. 8. Prioritises own workload and manages competing and conflicting priorities. 9. Appropriately reports concerns regarding staffing and skill-mix and acts to resolve issues that may impact on the safety of service users within local policy frameworks. 10. Recognises stress in others and provides appropriate support or guidance ensuring safety to people at all times. 11. Enables others to identify and manage their stress. 12. Works within local policies when working in the community setting including in people's homes and ensures the safety of others.	These ESCs are achieved in the grading grid	

Mentor to initial and date outcome of skills achievement at end of P6 skills	Practiced under indirect supervision	Not achieved
18.o People can trust a newly registered graduate nurse to enhance the safety of service users and identify and actively manage risk and uncertainty in relation to people, the environment, self and others.		
9. Reflects on and learns from safety incidents as an autonomous individual and as a team member and contributes to team learning. 10. Participates in clinical audit to improve the safety of service users. 11. Assesses and implements measures to manage, reduce or remove risk that could be detrimental to people, self and others. 12. Assesses, evaluates and interprets risk indicators and balances risks against benefits, taking account of the level of risk people are prepared to take. 13. Works within legal and ethical frameworks to promote safety and positive risk taking. 14. Works within policies to protect self and others in all care settings including in the home care setting. 15. Takes steps not to cross professional boundaries and put self or colleagues at risk.		
19.o People can trust the newly registered graduate nurse to work to prevent and resolve conflict and maintain a safe environment.		
3. Selects and applies appropriate strategies and techniques for conflict resolution, de-escalation and physical intervention in the management of potential violence and aggression.		
20.o People can trust the newly registered graduate nurse to select and manage medical devices safely.		
2. Works within legal frameworks and applies evidence based practice in the safe selection and use of medical devices. 3. Safely uses and maintains a range of medical devices appropriate to the area of work, including ensuring regular servicing, maintenance and calibration including reporting adverse incidents relating to medical devices. 4. Keeps appropriate records in relation to the use and maintenance of medical devices and the decontamination processes required as per local and national guidelines. 5. Explains the devices to people and carers and checks understanding.		
Essential skills cluster: infection prevention and control		
21.o People can trust the newly registered graduate nurse to identify and take effective measures to prevent and control infection in accordance with local and national policy.		
7. Works within <i>The Code</i> (NMC 2008) and in keeping with the Guidance on professional conduct for nursing and midwifery students (NMC 2010) and in collaboration with people and their carers to meet responsibilities for prevention and control of infection. 8. In partnership with people and their carers, plans, delivers and documents care that demonstrates effective risk assessment, infection prevention and control. 9. Identifies, recognises and refers to the appropriate clinical expert. 10. Explains risks to people, relatives, carers and colleagues and educates them in prevention and control of infection. 11. Recognises infection risk and reports and acts in situations where there is need for health promotion and protection and public health strategies.		
22.o People can trust the newly registered graduate nurse to maintain effective standard infection control precautions and apply and adapt these to needs and limitations in all environments.		
7. Initiates and maintains appropriate measures to prevent and control infection according to route of transmission of micro-organism, in order to protect service users, members of the public and other staff. 8. Applies legislation that relates to the management of specific infection risk at a local and national level. 9. Adheres to infection prevention and control policies and procedures at all times and ensures that colleagues work according to good practice guidelines. 10. Challenges the practice of other care workers who put themselves and others at risk of infection. 11. Manages overall environment to minimise risk.		

Mentor to initial and date outcome of skills achievement at end of P6 skills	Practiced under indirect supervision	Not achieved
23.o People can trust a newly registered graduate nurse to provide effective nursing interventions when someone has an infectious disease including the use of standard isolation techniques.		
5. Recognises and acts upon the need to refer to specialist advisers as appropriate. 6. Assesses the needs of the infectious person, or people and applies appropriate isolation techniques. 7. Ensures that people including colleagues are aware of and adhere to local policies in relation to isolation and infection control procedures. 8. Identifies suitable alternatives when isolation facilities are unavailable and principles have to be applied in unplanned circumstances.		
24.o People can trust a newly registered graduate nurse to fully comply with hygiene, uniform and dress codes in order to limit, prevent and control infection.		
4. Acts as a role model to others and ensures colleagues work within local policy.		
25.o People can trust a newly registered graduate nurse to safely apply the principles of asepsis when performing invasive procedures and be competent in aseptic technique in a variety of settings.		
3. Applies a range of appropriate measures to prevent infection including application of safe and effective aseptic technique. 4. Safely performs wound care, applying non-touch or aseptic techniques in a variety of settings. 5. Able to communicate potential risks to others and advise people on the management of their device, site or wound to prevent and control infection and to promote healing.		
26.o People can trust the newly qualified nurse to act, in a variety of environments including the home care setting, to reduce risk when handling waste, including sharps, contaminated linen and when dealing with spillages of blood and other body fluids.		
4. Manages hazardous waste and spillages in accordance with local health and safety policies. 5. Instructs others to do the same.		
Essential skills cluster: Nutrition and fluid management		
27.o People can trust the newly registered graduate nurse to assist them to choose a diet that provides an adequate nutritional and fluid intake.		
6. Uses knowledge of dietary, physical, social and psychological factors to inform practice being aware of those that can contribute to poor diet, cause or be caused by ill health. 7. Supports people to make appropriate the choices and changes to eating patterns, taking account of dietary preferences, religious and cultural requirements, treatment requirements and special diets needed for health reasons. 8. Refers to specialist members of the multi-disciplinary team for additional or specialist advice. 9. Discusses in a non-judgemental way how diet can improve health and the risks associated with not eating appropriately. 10. In liaison with a registered midwife provides essential advice and support to mothers who are breast feeding. 11. Provides support and advice to carer when the person they are caring for has specific dietary needs.		
28.o People can trust the newly registered graduate nurse to assess and monitor their nutritional status and in partnership, formulate an effective plan of care.		
5. Makes a comprehensive assessment of people's needs in relation to nutrition identifying, documenting and communicating level of risk. 6. Seeks specialist advice as required in order to formulate an appropriate care plan. 7. Provides information to people and their carers. 8. Monitors and records progress against the plan. 9. Discusses progress and changes in condition with the person, carers and the multi-disciplinary team. 10. Acts autonomously to initiate appropriate action when malnutrition is identified or where a person's nutritional status worsens, and report this as an adverse event.		

Mentor to initial and date outcome of skills achievement at end of P6 skills	Practiced under indirect supervision	Not achieved
29.o People can trust a newly registered graduate nurse to assess and monitor their fluid status and in partnership with them, formulate an effective plan of care.		
5. Uses negotiating and other skills to encourage people who might be reluctant to drink to take adequate fluids. 6. Identifies signs of dehydration and acts to correct these. 7. Works collaboratively with the person their carers and the multi-disciplinary team to ensure an adequate fluid intake and output.		
30.o People can trust the newly qualified graduate nurse to assist them in creating an environment that is conducive to eating and drinking.		
5. Challenges others who do not follow procedures 6. Ensures appropriate assistance and support is available to enable people 7. Ensures provision is made for replacement meals for anyone who is unable to eat at the usual time, or unable to prepare their own meals. 8. Ensures that appropriate food and fluids are available as required.		
31.o People can trust the newly qualified graduate nurse to ensure that those unable to take food by mouth receive adequate fluid and nutrition to meet their needs.		
3. Takes action to ensure that, where there are problems with eating and swallowing, nutritional status is not compromised. 4. Administers enteral feeds safely and maintains equipment in accordance with local policy 5. Safely, maintains and uses nasogastric, PEG and other feeding devices. 6. Works within legal and ethical frameworks taking account of personal choice.		
32.o People can trust the newly registered graduate nurse to safely administer fluids when fluids cannot be taken independently.		
1. Understands and applies knowledge of intravenous fluids and how they are prescribed and administered within local administration of medicines policy. 2. Monitors and assesses people receiving intravenous fluids. 3. Documents progress against prescription and markers of hydration. 4. Monitors infusion site for signs of abnormality, and takes the required action reporting and documenting signs and actions taken.		

Medicines Management

Mentor to initial and date outcome of skills achievement at end of P6 skills	Practiced under direct supervision	Not achieved	Indicative content
33.o People can trust the newly registered graduate nurse to correctly and safely undertake medicines calculations.			
1. Is competent in the process of medication-related calculation in nursing field involving: <ul style="list-style-type: none"> ● tablets and capsules ● liquid medicines ● injections ● IV infusions including: <ol style="list-style-type: none"> i. unit dose ii. sub and multiple unit dose iii. complex calculations iv. SI unit conversion 			Numeracy skills, drug calculations required to administer medicines safely via appropriate routes including specific requirements for children and other groups.

Mentor to initial and date outcome of skills achievement at end of P6 skills	Practiced under direct supervision	Not achieved	Indicative content
34.o People can trust the newly registered graduate nurse to work within legal and ethical frameworks that underpin safe and effective medicines management.			
<p>4. Applies legislation to practice to safe and effective ordering, receiving, storing administering and disposal of medicines and drugs, including controlled drugs in both primary and secondary care settings and ensures others do the same.</p> <p>5. Fully understands all methods of supplying medicines, for example, Medicines Act exemptions, patient group directions (PGDs), clinical management plans and other forms of prescribing.</p> <p>6. Fully understands the different types of prescribing including supplementary prescribing, community practitioner nurse prescribing and independent nurse prescribing.</p>			<p>Law, consent, confidentiality, ethics, accountability.</p> <p>Responsibilities under law, application of medicines legislation to practice, include: use of controlled drugs, exemption orders in relation to patient group direction (PGD).4</p> <p>Regulatory requirements: Standards for medicines management (NMC 2007), the code (NMC 2008), Standards of proficiency for nurse and midwife prescribers (NMC 2006).</p> <p>Statutory requirements in relation to mental health, mental capacity, children and young people and medicines, national service frameworks and other country specific guidance</p>
35.o People can trust the newly registered graduate nurse to work as part of a team to offer holistic care and a range of treatment options of which medicines may form a part.			
<p>3. Works confidently as part of the team and, where relevant, as leader of the team to develop treatment options and choices with the person receiving care and their carers.</p> <p>4. Questions, critically appraises, takes into account ethical considerations and the preferences of the person receiving care and uses evidence to support an argument in determining when medicines may or may not be an appropriate choice of treatment.</p>			<p>The principles of holistic care, health promotion, lifestyle advice, over-the-counter medicines, self-administration of medicines and other therapies.</p> <p>Observation and assessment. Effect of medicines and other treatment options, including distraction, positioning, alternative and complementary therapies.</p> <p>Ethical and legal frameworks.</p>
36.o People can trust the newly registered graduate nurse to ensure safe and effective practice in medicines management through comprehensive knowledge of medicines, their actions, risks and benefits.			
<p>2. Applies knowledge of basic pharmacology, how medicines act and interact in the systems of the body, and their therapeutic action.</p> <p>3. Understands common routes and techniques of medicine administration including absorption, metabolism, adverse reactions and interactions.</p> <p>4. Safely manages drug administration and monitors effects.</p> <p>5. Reports adverse incidents and near misses.</p> <p>6. Safely manages anaphylaxis.</p>			<p>Related anatomy and physiology.</p> <p>Drug pathways and how medicines act.</p> <p>Impacts of physiological state of patients on drug responses and safety, for example, the older adult, children, pregnant or breast feeding women and significant pathologies such as renal or hepatic impairments.</p> <p>Pharmaco-dynamics -the effects of drugs and their mechanisms of action in the body.</p> <p>Pharmaco-therapeutics – the therapeutic actions of certain medicines. Risks versus benefits of medication.</p> <p>Pharmaco-kinetics and how doses are determined by dynamics and systems in the body.</p> <p>Role and function of bodies that regulate and ensure the safety and effectiveness of medicines.</p> <p>Knowledge on management of adverse drug events, adverse drug reactions, prescribing and administration errors and the potential repercussions for safety.</p>
40.o People can trust the newly registered graduate nurse to safely order, receive, store and dispose of medicines (including controlled drugs) in any setting.			
<p>2. Orders, receives, stores and disposes of medicines safely (including controlled drugs).</p>			<p>Managing medicines in hospital or primary care settings, for example, schools and the home care setting.</p> <p>Legislation that underpins practice related to a wide range of medicines such as controlled drugs, infusions and oxygen.</p> <p>Suitable conditions for storage, managing out-of-date stock, safe handling medication, managing discrepancies in stock, omissions.</p>

Mentor to initial and date outcome of skills achievement at end of P6 skills	Practiced under direct supervision	Not achieved	Indicative content
38.o People can trust the newly registered graduate nurse to administer medicines safely and in a timely manner, including controlled drugs.			
4. Under direct supervision safely and effectively administers and, where necessary, prepares medicines via routes and methods commonly used and maintains accurate records. 5. Supervises and teaches others to do the same. 6. Understands the legal requirements.			Involvement of people receiving treatment, management of fear and anxiety, importance of nonverbal and verbal communication. Use of prescription charts including how to prepare, read and interpret them and record administration and non-administration. Use of personal drug record cards for controlled drugs. Preparing and administering medication in differing environments places, including the home care setting, hygiene, infection control, compliance aids, safe transport and disposal of medicines and equipment. Safety, checking person's identity, last dose, allergies, anaphylaxis, polypharmacy, monitoring of effect and record keeping. Where and how to report contra-indications, side effects, adverse reactions. Skills needed to administer safely via various means, for example, oral, topical, by infusion, injection, syringe driver and pumps. Aware of own limitations and when to refer on. Legal requirements, mechanisms for supply, sale and administration of medication, self-administration including controlled drugs.
39.o People can trust a newly registered graduate nurse to keep and maintain accurate records using information technology, where appropriate, within a multi-disciplinary framework as a leader and as part of a team and in a variety of care settings including at home.			
2. Effectively keep records of medication administered and omitted, in a variety of care settings, including controlled drugs and ensures others do the same.			Links to legislation, use of controlled drugs, the code in relation to confidentiality, consent and record keeping. Use of electronic records.
40.o People can trust a newly registered graduate nurse to work in partnership with people receiving medical treatments and their carers.			
2. Works with people and carers to provide clear and accurate information. 3. Gives clear instruction and explanation and checks that the person understands the use of medicines and treatment options. 4. Assesses the person's ability to safely self-administer their medicines. 5. Assists people to make safe and informed choices about their medicines.			Cultural, religious, linguistic and ethical beliefs, issues and sensitivities around medication. Ethical issues relating to compliance and administration of medicine without consent. Self-administration, assessment explanation and monitoring. Concordance. Meeting needs of specific groups including self-administration, for example, people with mental health needs, learning disabilities, children and young people, adolescents and older adults.
41.o People can trust the newly registered graduate nurse to use and evaluate up-to-date information on medicines management and work within national and local policy guidelines.			
2. Works within national and local policies and ensures others do the same.			Evidence based practice, identification of resources, the 'expert' patient and client. Using sources of information, national and local policies, clinical governance, formularies, for example, British National Formulary and the British National Formulary for Children.
42.o People can trust the newly registered graduate nurse to demonstrate understanding and knowledge to supply and administer via a patient group direction.			
1. Through simulation and course work demonstrates knowledge and application of the principles required for safe and effective supply and administration via a patient group direction including an understanding of role and accountability. 2. Through simulation and course work demonstrates how to supply and administer via a patient group direction.			National prescribing centre competency framework www.npc.co.uk

Formative grading assessment

Leadership, management and team working (leading a team in service delivery)

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A, B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail D	Fail E	Grade
Working within requirements of NMC Code demonstrate leadership skills in co-ordinating, delegating, prioritising and supervising care					
<p>Exhibits exceptional leadership skills in coordinating, delegating and supervising care. Fully able to prioritise and manage time and resources effectively.</p> <p>S M</p>	<p>Good leadership skills in coordinating, delegating and supervising care. Generally able to manage time and resources effectively.</p> <p>S M</p>	<p>Satisfactory leadership skills in coordinating, delegating and supervising care. Able to manage time and resources effectively with limited support.</p> <p>S M</p>	<p>Lacks confidence in coordinating, delegating and supervising care. Requires support to manage time and resources effectively.</p> <p>S M</p>	<p>Poor leadership skills and lacks ability to coordinate, delegate and supervise care safely. Ineffective management of time. Inability to use resources effectively.</p> <p>S M</p>	
Management of risk and promotion of patient safety. Accurately reports concerns through appropriate organisational channels					
<p>Management decisions demonstrate exceptional awareness of managing risk and promoting patient safety. Quickly and confidently reports any concerns through appropriate channels.</p> <p>S M</p>	<p>Management decisions demonstrate good awareness of managing risk and promoting patient safety. Reports any concerns through appropriate channels</p> <p>S M</p>	<p>Management decisions demonstrate satisfactory awareness of managing risk and promoting patient safety. Reports any concerns through appropriate channels with limited support.</p> <p>S M</p>	<p>Management decisions demonstrate limited awareness of managing risk and promoting patient safety. Needs prompting to report concerns through appropriate channels.</p> <p>S M</p>	<p>Management decisions demonstrate no understanding of managing risk and promoting patient safety. Intervention required to ensure patient safety maintained.</p> <p>S M</p>	
Facilitates development of nursing students and others to develop competence, using a range of professional and personal development skills					
<p>Demonstrates exemplary professional practice when facilitating others to develop their competence. Confidently provides appropriate support and encouragement.</p> <p>S M</p>	<p>Demonstrates good professional practice when facilitating others to develop their competence. Provides appropriate support and encouragement.</p> <p>S M</p>	<p>Demonstrates satisfactory professional practice when facilitating others to develop their competence. Provides adequate support and encouragement.</p> <p>S M</p>	<p>Some ability demonstrated when facilitating others to develop their competence but lacks confidence or inadequate support given.</p> <p>S M</p>	<p>Unable to facilitate others to develop their competence. Inappropriate support or no support given.</p> <p>S M</p>	
Reflective skills: reflects and evaluates own organisational skills, acknowledging any limitations					
<p>Excellent reflective insight when evaluating own organisational skills and acknowledging limitations.</p> <p>S M</p>	<p>Very good reflective insight when evaluating own organisational skills and acknowledges any limitations.</p> <p>S M</p>	<p>Some reflective insight when evaluating own organisational skills and some awareness of any limitations.</p> <p>S M</p>	<p>Minimal reflective insight when evaluating own organisational skills and inadequate acknowledgement of any limitations.</p> <p>S M</p>	<p>No reflective insight when evaluating own organisational skills. No acknowledgement of any limitations.</p> <p>S M</p>	

Students are expected to photocopy this page and grade themselves before meeting with their mentor

Formative (interim review) - practice experience 6

Student's review of progress

After discussion with your mentor and formative grading, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Student signature

Date

Mentor's review of progress

After discussion with the student and formative grading, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Mentor signature

Date

Following this review of grading, progress review and learning needs:

	YES	NO
Learning needs have been re-explored		
Action plan has been re-negotiated/developed		
Academic tutor must be contacted if any formative fail grades have been awarded or any concerns are raised at this point		

Learning need	Action plan
Student's signature	Date
Mentor's signature	Date
Proposed date for review	

Service user/carer involvement in practice

Consent must be gained from the service user/carer with the mentor present to participate in this exercise. This exercise can be undertaken as a discussion and the mentor should then record the points raised below.

We would like to hear from you about your views of the way nursing students have contributed to the care that you have received. You do not need to disclose your name and the feedback that you give will not affect the care you receive. There is no requirement for you to participate in this exercise (if a carer this relates to the care given to the service user).

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Additional practitioner feedback

Comments on the student's performance during additional practice experiences/spoke experiences

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Additional practitioner feedback

Comments on the student's performance during additional practice experiences/spoke experiences

Please comment on student's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to enhance their nursing care		
Please add any other information you think would be helpful		
Practitioner signature	Date	Professional qualifications
Practice area	Student signature	Date

Grading in Practice - Core attribute achievement

Professionalism	PASS	FAIL
Demonstrates under supervision safe, basic person centred care which meets people's essential care needs.		
Promotes a professional image in behaviour and appearance at all times.		
Demonstrates adherence to organisational requirements for hygiene, uniform and dress code in order to limit, prevent and control infection.		
Demonstrates regular, punctual attendance and has knowledge of, or shows application of organisational procedures for reporting absence from practice experience.		
Recognises and works within limitations of knowledge, skills and professional boundaries.		
Demonstrate reflective skills when evaluating own practice.		

Compassion and Communication	PASS	FAIL
Demonstrate the ability to engage with people and build caring professional relationships using effective communication and interpersonal skills, always respecting professional boundaries.		
Demonstrate active listening skills through use of appropriate non-verbal communication skills.		
Demonstrate effective listening by responding in an appropriate way to a range of communication cues.		
Use a variety formats to produce clear, concise and complete records, using appropriate professional language to document care whilst applying the principles of data protection.		
Describe and demonstrate application of the principles of confidentiality in professional practice.		

Students must achieve a pass in all core attributes before they can be graded in single patient care management

P6: Grading in practice exercise – Formative exercise for Leadership, management and team working (leading a team in service delivery)

Delegation is key leadership role that requires you to delegate tasks and responsibilities, use skills of time management and make clinical decisions. The NMC (2008) sets out key principles to guide practitioners when delegating, stating:

- You must establish that anyone you delegate to is able to carry out your instructions.
- You must confirm the outcome of any delegated task meets required standards.
- You must make sure that everyone you are responsible for is supervised and supported.

Under the direct and indirect supervision of your mentor undertake the management of a small team over a part or all of a shift

(You will need to liaise with your mentor during this period as he/she has ultimate professional responsibility/accountability)

Reflect on the experience and discuss the experience with your mentor then list here key areas for future professional development

Summative grading assessment

Leadership, management and team working (leading a team in service delivery)

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A, B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail D	Fail E	Grade
Working within requirements of NMC Code demonstrate leadership skills in co-ordinating, delegating, prioritising and supervising care					
<p>Exhibits exceptional leadership skills in coordinating, delegating and supervising care. Fully able to prioritise and manage time and resources effectively.</p> <p>S M</p>	<p>Good leadership skills in coordinating, delegating and supervising care. Generally able to manage time and resources effectively.</p> <p>S M</p>	<p>Satisfactory leadership skills in coordinating, delegating and supervising care. Able to manage time and resources effectively with limited support.</p> <p>S M</p>	<p>Lacks confidence in coordinating, delegating and supervising care. Requires support to manage time and resources effectively.</p> <p>S M</p>	<p>Poor leadership skills and lacks ability to coordinate, delegate and supervise care safely. Ineffective management of time. Inability to use resources effectively.</p> <p>S M</p>	
Management of risk and promotion of patient safety. Accurately reports concerns through appropriate organisational channels					
<p>Management decisions demonstrate exceptional awareness of managing risk and promoting patient safety. Quickly and confidently reports any concerns through appropriate channels.</p> <p>S M</p>	<p>Management decisions demonstrate good awareness of managing risk and promoting patient safety. Reports any concerns through appropriate channels</p> <p>S M</p>	<p>Management decisions demonstrate satisfactory awareness of managing risk and promoting patient safety. Reports any concerns through appropriate channels with limited support.</p> <p>S M</p>	<p>Management decisions demonstrate limited awareness of managing risk and promoting patient safety. Needs prompting to report concerns through appropriate channels.</p> <p>S M</p>	<p>Management decisions demonstrate no understanding of managing risk and promoting patient safety. Intervention required to ensure patient safety maintained.</p> <p>S M</p>	
Facilitates development of nursing students and others to develop competence, using a range of professional and personal development skills					
<p>Demonstrates exemplary professional practice when facilitating others to develop their competence. Confidently provides appropriate support and encouragement.</p> <p>S M</p>	<p>Demonstrates good professional practice when facilitating others to develop their competence. Provides appropriate support and encouragement.</p> <p>S M</p>	<p>Demonstrates satisfactory professional practice when facilitating others to develop their competence. Provides adequate support and encouragement.</p> <p>S M</p>	<p>Some ability demonstrated when facilitating others to develop their competence but lacks confidence or inadequate support given.</p> <p>S M</p>	<p>Unable to facilitate others to develop their competence. Inappropriate support or no support given.</p> <p>S M</p>	
Reflective skills: reflects and evaluates own organisational skills, acknowledging any limitations					
<p>Excellent reflective insight when evaluating own organisational skills and acknowledging limitations.</p> <p>S M</p>	<p>Very good reflective insight when evaluating own organisational skills and acknowledges any limitations.</p> <p>S M</p>	<p>Some reflective insight when evaluating own organisational skills and some awareness of any limitations.</p> <p>S M</p>	<p>Minimal reflective insight when evaluating own organisational skills and inadequate acknowledgement of any limitations.</p> <p>S M</p>	<p>No reflective insight when evaluating own organisational skills. No acknowledgement of any limitations.</p> <p>S M</p>	

Students are expected to photocopy this page and grade themselves before meeting with their mentor

Summative assessment

P6 - Leadership, management and team working (leading a team in service delivery)

Grading category		Grade awarded	
Working within requirements of NMC Code demonstrates leadership skills in co-ordinating, delegating, prioritising and supervising care			
Management of risk and promotion of patient safety. Accurately reports concerns through appropriate organisational channels			
Facilitates development of nursing students and others to develop competence, using a range of professional and personal development skills			
Reflective skills: reflects and evaluates own organisational skills, acknowledging any limitations			
Please circle either a pass or fail. (If the student has achieved a D or E in any of the above a fail must be awarded)		PASS	FAIL
Field competencies	PASS	FAIL: list all not achieved	
Essential skills cluster	PASS	FAIL: list all not achieved	
Competency and skills achievement: Please circle either pass or fail (if the student has not achieved all the field competencies and all of the essential skills then a fail must be awarded)		PASS	FAIL
Practitioner signature		Date	
Student signature		Date	
Moderator signature (if used)		Date	

Summative Feedback - practice experience 6

Please use the values model on page 18 to give the student feedback on their practice

Identified areas for further development	Suggested activities and experiences that will assist in future development
<p>Heart: intrinsic motivation <i>(Developing compassionate care)</i></p>	
<p>Nerve: Self-belief and self-efficacy <i>(Developing themselves and advocating for the service user or carer)</i></p>	
<p>Brain: Critical and analytical skills <i>(Application of appropriate theory/research to practice)</i></p>	
Student signature	Date
Mentor signature	Date
Academic tutor signature	Date

Student's review of progress

After discussion with your mentor, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

Student signature

Date

Mentor's review of progress

After discussion with the student, please summarise your views about the student's progress, including strengths, areas for development and identification of any issues affecting their performance – please remember that this information will help the next mentor develop appropriate learning experiences for the student

Mentor signature

Date

Progression signatures

I confirm that there has been no falsification of evidence within this document (before signing please read the academic integrity statement).		
Student signature	PRINT name	Date
I can confirm that the student has met the required progression point.		
Mentor signature	PRINT name	Date
I can confirm that the student does not meet the required progression point.		
Mentor signature	PRINT name	Date
I confirm that the documentation and signatures have been checked and verified.		
Academic tutor signature	PRINT name	Date

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Verification of practice experience 6

Prompt	Yes	No (please state those outstanding)
Progression points met?		
Grading in practice assessment completed and passed?		
Action plan completed?		
Absence record completed and matches portal print out?		
Additional visits completed?		
Additional practitioner feedback completed?		
Service user feedback completed?		
Mentor signature sheet completed?		
All interviews completed and signed?		
Academic tutor signature	PRINT name	Date

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These pages are only for the use of those students retrieving a practice experience

Retrieval documentation to be completed at the end of week 4 of the retrieval practice experience

Mentor signature sheet

Retrieval practice experience 6			
Name of placement			
Name of Trust/Practice experience provider			
Name of mentor		Mentor signature	
Name of buddy/associate mentor		Buddy/associate mentor signature	
Phone number of placement			

Initial interview

To be completed within 2 days of the start of the practice experience

This is done by the student in conjunction with the mentor, and is based upon self-assessment, previous failed practice experience and feedback from last mentor.

Learning needs: link to aspects of grading or competency and ESCs not achieved	Action Plan	
Student signature	Date	
Mentor signature	Date	
Proposed date for interim review		

Grading in Practice - Core attribute achievement

Professionalism	PASS	FAIL
Demonstrates under supervision safe, basic person-centred care which meets people's essential care needs.		
Promotes a professional image in behaviour and appearance at all times.		
Demonstrates adherence to organisational requirements for hygiene, uniform and dress code in order to limit, prevent and control infection.		
Demonstrates regular, punctual attendance and has knowledge of, or shows application of organisational procedures for reporting absence from practice experience.		
Recognises and works within limitations of knowledge, skills and professional boundaries.		
Demonstrate reflective skills when evaluating own practice.		

Compassion and Communication	PASS	FAIL
Demonstrate the ability to engage with people and build caring professional relationships using effective communication and interpersonal skills, always respecting professional boundaries.		
Demonstrate active listening skills through use of appropriate non-verbal communication skills.		
Demonstrate effective listening by responding in an appropriate way to a range of communication cues.		
Use a variety formats to produce clear, concise and complete records, using appropriate professional language to document care whilst applying the principles of data protection.		
Describe and demonstrate application of the principles of confidentiality in professional practice.		

Students must achieve a pass in all core attributes before they can be graded in single patient care management

Summative grading assessment

Leadership, management and team working (leading a team in service delivery)

Students can awarded a “+” grade if it is felt that they are achieving to the higher end of the grade A, B and C.

Exceptional A+ or A	Good B+ or B	Pass C+ or C	Borderline fail D	Fail E	Grade
Working within requirements of NMC Code demonstrate leadership skills in co-ordinating, delegating, prioritising and supervising care					
<p>Exhibits exceptional leadership skills in coordinating, delegating and supervising care. Fully able to prioritise and manage time and resources effectively.</p> <p>S M</p>	<p>Good leadership skills in coordinating, delegating and supervising care. Generally able to manage time and resources effectively.</p> <p>S M</p>	<p>Satisfactory leadership skills in coordinating, delegating and supervising care. Able to manage time and resources effectively with limited support.</p> <p>S M</p>	<p>Lacks confidence in coordinating, delegating and supervising care. Requires support to manage time and resources effectively.</p> <p>S M</p>	<p>Poor leadership skills and lacks ability to coordinate, delegate and supervise care safely. Ineffective management of time. Inability to use resources effectively.</p> <p>S M</p>	
Management of risk and promotion of patient safety. Accurately reports concerns through appropriate organisational channels					
<p>Management decisions demonstrate exceptional awareness of managing risk and promoting patient safety. Quickly and confidently reports any concerns through appropriate channels.</p> <p>S M</p>	<p>Management decisions demonstrate good awareness of managing risk and promoting patient safety. Reports any concerns through appropriate channels</p> <p>S M</p>	<p>Management decisions demonstrate satisfactory awareness of managing risk and promoting patient safety. Reports any concerns through appropriate channels with limited support.</p> <p>S M</p>	<p>Management decisions demonstrate limited awareness of managing risk and promoting patient safety. Needs prompting to report concerns through appropriate channels.</p> <p>S M</p>	<p>Management decisions demonstrate no understanding of managing risk and promoting patient safety. Intervention required to ensure patient safety maintained.</p> <p>S M</p>	
Facilitates development of nursing students and others to develop competence, using a range of professional and personal development skills					
<p>Demonstrates exemplary professional practice when facilitating others to develop their competence. Confidently provides appropriate support and encouragement.</p> <p>S M</p>	<p>Demonstrates good professional practice when facilitating others to develop their competence. Provides appropriate support and encouragement.</p> <p>S M</p>	<p>Demonstrates satisfactory professional practice when facilitating others to develop their competence. Provides adequate support and encouragement.</p> <p>S M</p>	<p>Some ability demonstrated when facilitating others to develop their competence but lacks confidence or inadequate support given.</p> <p>S M</p>	<p>Unable to facilitate others to develop their competence. Inappropriate support or no support given.</p> <p>S M</p>	
Reflective skills: reflects and evaluates own organisational skills, acknowledging any limitations					
<p>Excellent reflective insight when evaluating own organisational skills and acknowledging limitations.</p> <p>S M</p>	<p>Very good reflective insight when evaluating own organisational skills and acknowledges any limitations.</p> <p>S M</p>	<p>Some reflective insight when evaluating own organisational skills and some awareness of any limitations.</p> <p>S M</p>	<p>Minimal reflective insight when evaluating own organisational skills and inadequate acknowledgement of any limitations.</p> <p>S M</p>	<p>No reflective insight when evaluating own organisational skills. No acknowledgement of any limitations.</p> <p>S M</p>	

Students are expected to photocopy this page and grade themselves before meeting with their mentor

Summative assessment

P6 - Leadership, management and team working (leading a team in service delivery)

Grading category		Grade awarded	
Working within requirements of NMC Code demonstrates leadership skills in co-ordinating, delegating, prioritising and supervising care			
Management of risk and promotion of patient safety. Accurately reports concerns through appropriate organisational channels			
Facilitates development of nursing students and others to develop competence, using a range of professional and personal development skills			
Reflective skills: reflects and evaluates own organisational skills, acknowledging any limitations			
Please circle if a pass or fail. (If the student has achieved a D or E in any of the above a fail must be awarded)		PASS	FAIL
Field competencies	PASS	FAIL: list all not achieved	
Essential skills cluster	PASS	FAIL: list all not achieved	
Competency and skills achievement: Please circle either a pass or fail: (If the student has not achieved all the field competencies and all of the essential skills then a fail must be awarded)		PASS	FAIL
Practitioner signature		Date	
Student signature		Date	
Moderator signature (if used)		Date	

Summative Feedback – retrieval practice experience 6

Please use the values model on page 18 to give the student feedback on their practice

Identified areas for further development	Suggested activities and experiences that will assist in future development
<p>Heart: intrinsic motivation (<i>Developing compassionate care</i>)</p>	
<p>Nerve: Self-belief and self-efficacy (<i>Developing themselves and advocating for the service user or carer</i>)</p>	
<p>Brain: Critical and analytical skills (<i>Application of appropriate theory/research to practice</i>)</p>	
Student signature	Date
Mentor signature	Date
Academic tutor signature	Date

Student's review of progress

After discussion with your mentor, please summarise your views about your progress, including strengths, areas for development and identification of any issues affecting your performance

--	--

Student signature

Date

Mentor's review of progress

After discussion with the student, please summarise your views about the student's progress, including strengths, areas for development and identification of any issues affecting their performance – please remember that this information will help the next mentor develop appropriate learning experiences for the student

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Mentor signature

Date

Progression signatures

I confirm that there has been no falsification of evidence within this document (before signing please read the academic integrity statement).		
Student signature	PRINT name	Date
I can confirm that the student has met the required progression point.		
Sign-off mentor signature	PRINT name	Date
I can confirm that the student does not meet the required progression point.		
Sign-off mentor signature	PRINT name	Date
I confirm that the documentation and signatures have been checked and verified.		
Academic tutor signature	PRINT name	Date

This page must be scanned/photocopied and stored in the students file within the Faculty of Health Science, University of Southampton

Verification of practice experience 6

Prompt	Yes	No (please state those outstanding)
Progression points met?		
Grading in practice assessment completed and passed?		
Action plan completed?		
Absence record completed and matches portal print out?		
Additional visits completed?		
Additional practitioner feedback completed?		
Service user feedback completed?		
Mentor signature sheet completed?		
All interviews completed and signed?		
Academic tutor signature	PRINT name	Date

This page is for university use and must be copied/scanned and stored with the students records with the Faculty of Health Sciences, University of Southampton

Managing student issues that arise whilst undertaking practice experience

Mentor has a general enquiry relating to an aspect of student learning/personal development

Contact either the academic tutor, learning environment lead (LEL) or the University Link using the number below

There is an urgent concern relating to an aspect of student performance or conduct that has been brought to the attention of the mentor

Mentor informs senior practitioner, who calls the University Link to discuss*

University Link will:

- assess situation, liaising with senior practitioner regarding student support
- inform academic tutor
- discuss with programme lead or senior member of education management team re: management of student

Student reports a concern to a member of staff (clinical/academic) regarding aspect of observed care/conduct whilst in placement or student is involved in or a witness to an incident

Member of staff informs mentor or senior practitioner

1. Senior practitioner activates Trust procedures
2. Staff member calls the academic tutor or practice academic coordinator to discuss

Student does not attend placement

Nursing & Midwifery

Mentor

Academic Tutor

Clinical Lecturer

Practice Academic Coordinator

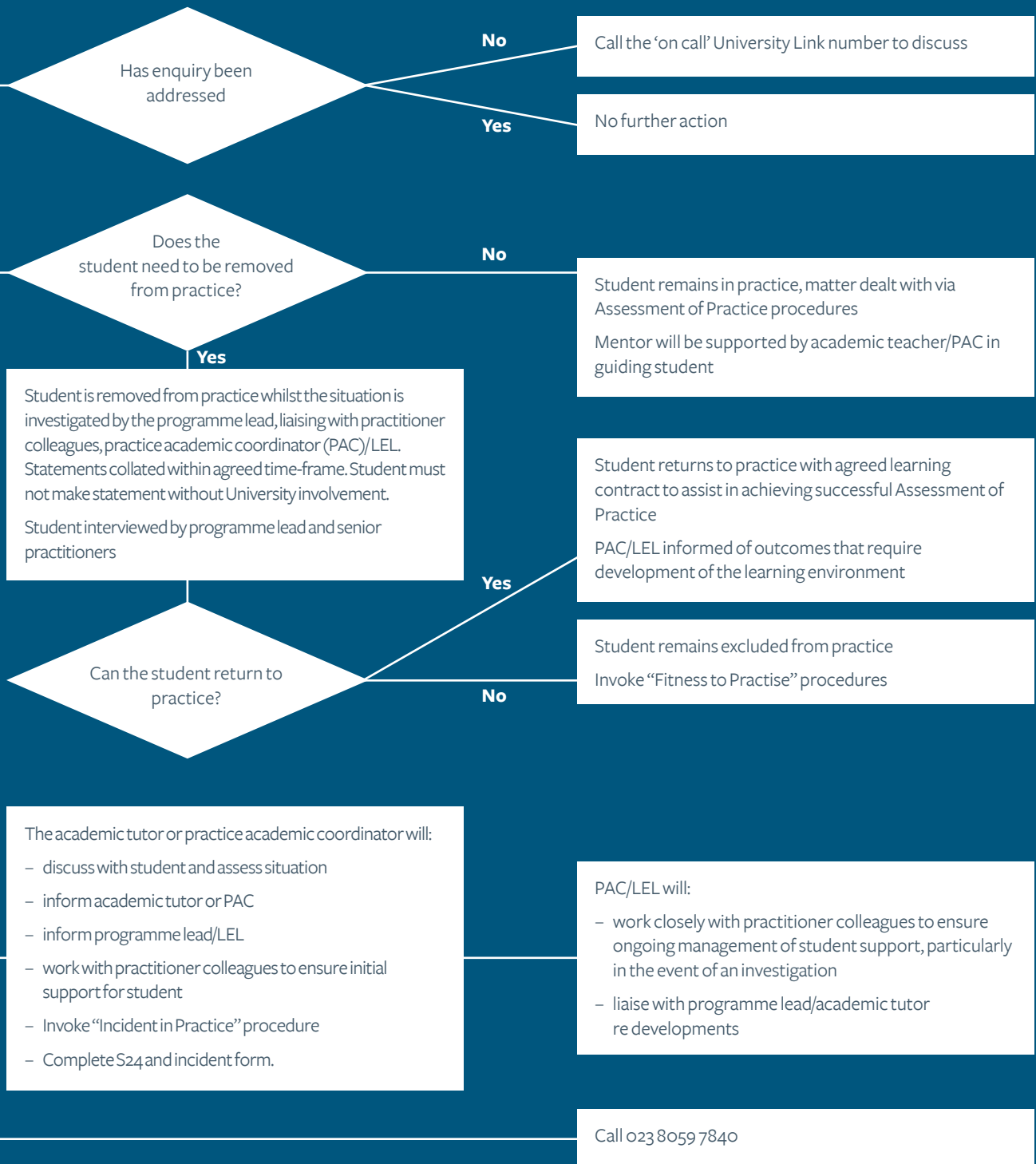
AHPs

= Practice Supervisor/Clinical Educator

= Personal Tutor

= Locality Visitor

= Practice Academic Lead (under review for AHPs)



Incidents in Practice: www.soton.ac.uk/alps

This protocol has been developed jointly by practitioners and academic staff. There should be a copy displayed in every practise area with the relevant contact numbers included.

University Link numbers

Basingstoke	07768 427 413	Portsmouth	07768 671 563
Hampshire PFT	07798 651 695	Southampton	07771 838 223
Isle of Wight	07767 675 658	Winchester	07879 486 279

*No longer than 24 hours should elapse between mentor becoming aware of concern and 'on call' number activated

Section 9: Record of desirable skills achievement

Desirable skills are those agreed between the University and an individual organisation as being attainable in that organisation/ experience under normal circumstances. These may vary from organisation to organisation according to their needs, wants and governance arrangements.

In addition to their achievement of required skills, students can engage with any skill providing that they:

- have been appropriately prepared and supervised by their mentor or suitably prepared designee;
- are undertaking a skill that is not a function limited for students by legislation, university guidance or the placement provider's organisation;
- judge that they are sufficiently prepared for, and ready to undertake the skill;
- are taught and assessed according to the standards expected of the placement provider's organisation by a person authorised and competent to do so.

Skill	
Trust/Organisation	
Supervisory practitioner signature	Date

Skill	
Trust/Organisation	
Supervisory practitioner signature	Date

Skill	
Trust/Organisation	
Supervisory practitioner signature	Date

Skill	
Trust/Organisation	
Supervisory practitioner signature	Date

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Supervisory practitioner signature	Date

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Supervisory practitioner signature	Date

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Supervisory practitioner signature	Date

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Supervisory practitioner signature	Date

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Trust/Organisation	
Supervisory practitioner signature	Date

Skill	
Trust/Organisation	
Supervisory practitioner signature	Date

Section 10:

Meeting the EU directive 2005/36/EC

In order to meet the EU directive you will need to have experience of nursing in the other fields. To help you achieve this, your mentor in practice and your academic tutor will support you in identifying suitable opportunities. You can then reflect on these in the logs which follow.

The requirements are outcome based. These outcomes and the way in which they are met should enable you to integrate the insights from differing fields of practice and specialities into the care of people. This should reduce the 'labelling' of people's needs according to specialisation or via a particular field of practice/health provider focus. It is intended to promote a more flexible and integrative approach to the achievement of this aspect of the programme and to enable you to develop skills in nursing people.

For students undertaking the adult programme there is a requirement to demonstrate that you have had experience related to specific aspects of care. Some of these link to the need to develop an awareness of other fields of practice. However, there are also other specific aspects that you need to address and will be met through a range of practice experiences. Evidence to support the achievement of these can be collected throughout the entire programme.

- General and Specialist Medicine
- General and Specialist Surgery
- Child Care and Paediatrics
- Maternity Care
- Mental Health
- Care of Older People
- Home Nursing

Evidence of achievement of all EC Directives need to be recorded by the end of the branch programme.

For more information please see the ALPS website www.southampton.ac.uk/alps

Evidence to meet the EU directive 2005/36/EC – nursing in relation to: maternity care

<p>You should provide evidence of practice experiences in which, as part of a team you have achieved the following in direct contact with an individual and/or community:</p> <ul style="list-style-type: none"> • Participated in meeting the essential needs of pregnant or postnatal women • Taken account of the normal physical and psychological effects of pregnancy and childbirth in the pre or post-natal period. • Worked in partnership with other professionals in meeting maternal health needs. 		
<p>Please use examples to support your achievement</p>		
<p>Name and contact details of experience where this was completed</p>		
Student signature	Mentor signature	Date

Evidence to meet the EU directive 2005/36/EC – nursing in relation to: Mental Health

<p>You should provide evidence of practice experiences in which, as part of a team you have achieved the following in direct contact with an individual and / or community:</p> <ul style="list-style-type: none"> • Participated in care using basic mental health skills to reduce the distress associated with mental health problems or to address other essential mental health needs. • Taken account of the impact of mental health problems and distress on a person's cognition, communication, behaviour, lifestyle and relationships. • Worked with others to maintain continuity in meeting mental health care needs. 		
<p>Please use examples to support your achievement</p>		
<p>Name and contact details of experience where this was completed</p>		
Student signature	Mentor signature	Date

Developing your knowledge and understanding of the care needs of a person with a learning disability:

People with learning disabilities have poorer health than their non-disabled peers, often experiencing differences in health status that are, to an extent, avoidable. The health inequalities faced by people with learning disabilities in the UK start early in life and result, to an extent, from barriers they face in accessing timely, appropriate and effective health care. (**Health Inequalities & People with Learning Disabilities in the UK: 2010**).

You should provide evidence of practice experiences in which, as part of a team you have achieved the following in direct contact with an individual and/or community:

- Participated in meeting the essential care needs of a person with a learning disability
- Demonstrated effective communication in order to actively involve people with learning disabilities in decision making and promote autonomy
- Worked with families, carers, support networks, and where necessary, specialist advocates to address the needs of people with learning disability

Please use examples to support your achievement

Name and contact details of experience where this was completed

Student signature	Mentor signature	Date
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Section 11: Medicines management and administration

Supplementary record of knowledge and practice

This section identifies the specific medicines management competencies expected of a newly registered nurse in any care environment and is based upon the NMC Standards for Medicine management (2004).

Guidance for mentors

The completion of this document is the responsibility of the student.

It is the responsibility of the mentor to offer the student opportunity to practice the administration of medicines before making an assessment.

It is the responsibility of the mentor to give students feedback to improve their skill and proficiency.

Mentors must be confident that the student is safe to calculate drug doses without error. Please use this document to record drug calculations that the student has done which have convinced you of their ability to do this skill.

It is acceptable to develop practice scenarios to test this skill and /or request that the student undertakes a case presentation rather than formal drug round which are inappropriate in many settings.

Please identify students who are not achieving this competency early and involve their Academic Tutor as soon as possible.

The activity:

- Students are required to demonstrate knowledge and understanding about the 6 'rights' of medicine administration (right patient, right drug, right dose, right time, right route, and right documentation) and the action, side effects and contraindications of medication.
- Documentation for 4 patients is provided and expected to be completed in the assessment of 3rd year student nurses. It is at the mentor's discretion to omit a medication from the assessment of competence.
- This includes the ability to calculate the correct dose for administration and show the workings of that calculation to verify ability.
- If no calculation is required to deliver the prescribed dose, then confirmation by calculation that the patient dose prescribed is correct according to the dose/weight guidance could be requested by the mentor.
- The mentor should advise the student about patient selection for the activity.
- The student should prepare for the activity, but should not complete the record without the mentor present.
- The student is expected to complete the record during (or shortly after) a time where their competence has been assessed (for example, a drug round or discharge conversation with patient/family). If necessary the assessment could be supplemented by case presentation/ exploration of scenarios.
- It is suggested that the student is assessed on the medication of one patient per assessment and that it is recorded on one of the summary sheets in the following pages.

Guidance for students

You are expected to record the knowledge about a patient's drugs during or after the assessment of your competence.

You may not complete it in advance of the assessment.

Resources

University Guidance Document: Guidelines for student nurses and midwives on the management of medicines found on the Assessment of Learning in Practice website at www.soton.ac.uk/alps in the Policies Tab

NMC Standards for Medicines Management found at www.nmc-uk.org

Medicines and Healthcare products Regulatory Agency found at www.mhra.gov.uk

Authentic World Medication Dosage Calculation Skills and Authentic Diagnostic Assessment found at www.authenticworld.co.uk/portal

National Prescribing Centre found at www.npc.co.uk

Patient assessment 1: Patient Condition & Right Patient					
Patient is correctly identified following local policy Disease, symptoms, condition, related problems					
Right: Drug, dose, route, times, documentation (e.g. omissions)	Mechanism of action	Contraindications	Side effects	Care related to drug Administration e.g. INR, BM, dietary advice	Show working of calculation of dose
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
		Mentor signature:			Date:

Patient assessment 1: Patient Condition & Right Patient

Patient is correctly identified following local policy
 Disease, symptoms, condition, related problems

Right: Drug, dose, route, times, documentation (e.g. omissions)	Mechanism of action	Contraindications	Side effects	Care related to drug Administration e.g. INR, BM, dietary advice	Show working of calculation of dose
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
		Mentor signature:			Date:

Patient assessment 1: Patient Condition & Right Patient					
Patient is correctly identified following local policy Disease, symptoms, condition, related problems					
Right: Drug, dose, route, times, documentation (e.g. omissions)	Mechanism of action	Contraindications	Side effects	Care related to drug Administration e.g. INR, BM, dietary advice	Show working of calculation of dose
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
		Mentor signature:			Date:

Patient assessment 1: Patient Condition & Right Patient

Patient is correctly identified following local policy
Disease, symptoms, condition, related problems

Right: Drug, dose, route, times, documentation (e.g. omissions)	Mechanism of action	Contraindications	Side effects	Care related to drug Administration e.g. INR, BM, dietary advice	Show working of calculation of dose
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
		Mentor signature:			Date:

Patient assessment 1: Patient Condition & Right Patient					
Patient is correctly identified following local policy Disease, symptoms, condition, related problems					
Right: Drug, dose, route, times, documentation (e.g. omissions)	Mechanism of action	Contraindications	Side effects	Care related to drug Administration e.g. INR, BM, dietary advice	Show working of calculation of dose
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
		Mentor signature:			Date:

Patient assessment 1: Patient Condition & Right Patient

Patient is correctly identified following local policy
 Disease, symptoms, condition, related problems

Right: Drug, dose, route, times, documentation (e.g. omissions)	Mechanism of action	Contraindications	Side effects	Care related to drug Administration e.g. INR, BM, dietary advice	Show working of calculation of dose
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
		Mentor signature:			Date:

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Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
		Mentor signature:			Date:

Patient assessment 1: Patient Condition & Right Patient

Patient is correctly identified following local policy
 Disease, symptoms, condition, related problems

Right: Drug, dose, route, times, documentation (e.g. omissions)	Mechanism of action	Contraindications	Side effects	Care related to drug Administration e.g. INR, BM, dietary advice	Show working of calculation of dose
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
		Mentor signature:			Date:

Patient assessment 1: Patient Condition & Right Patient					
Patient is correctly identified following local policy Disease, symptoms, condition, related problems					
Right: Drug, dose, route, times, documentation (e.g. omissions)	Mechanism of action	Contraindications	Side effects	Care related to drug Administration e.g. INR, BM, dietary advice	Show working of calculation of dose
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
Drug Dose Route Time Documentation					
		Mentor signature:			Date:

Section 12: Record of student and academic meetings in practice

(e.g. link tutor/academic tutor) - Please give brief details of all discussion sessions attended whilst the student has been on practice experience

Date of practice visit	Name of Practice area
Name and role of visiting academic (e.g. academic tutor/link tutor)	
Purpose of visit	
<i>In discussion using the Southampton Values Based Model explore how the student has enhanced the quality of care, the service user perception of care or service user safety during this practice experience</i>	
Heart: intrinsic motivation (Evidence that the student cares)	
Nerve: Self-belief and self-efficacy (Evidence that the student can represent themselves and advocate for the service user or carer)	
Brain: Critical and analytical skills (evidence of the application of appropriate theory/research to practice)	
Student signature	Date
Mentor signature	Date
Academic tutor signature	Date