Health Sciences

UNIVERSITY OF Southampton

Mentor / Practice Teacher Information

Assessment of Practice Proficiency: On-going Record of Achievement

Specialist Community Public Health Nursing (School nursing)

BSc (Hons) Public Health Practice/
Postgraduate Diploma in Public Health Practice

BSc (Hons) Public Health Practice/ Postgraduate Diploma in Public Health Practice

Name	
University ID number	
Group/intake	
Academic tutor name	
Telephone	
Email	

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On-going record of achievement statement

My Assessment of Practice document is my "ongoing record of 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 are not 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	
Academic tutor signature	
Date	

Confidentiality

Entries made in the portfolio must ensure the service users' right to confidentiality is respected at all times.

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Registrant signature sheet

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

Name of Practice Teacher/Mentor (PLEASE PRINT)	Contact telephone number	Name of practice area	Signature	Initials

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

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Practice Induction

To be completed prior to or during first week of the student's placement.

Topics to be covered (Mentors initials and date when completed)		Practice experience NB: For students based in one practice area this need only be completed once		
		1	2	Consolidated Practice
Personal issues	Discuss any adjustments required regarding health or learning difference or specific needs			
Introduction to staff	Include all staff working within area			
Orientation to area	Include: • Staff toilets • Staff rest rooms • Where to keep personal belongings • Meal breaks • Relevant link areas and who to contact for visits			
Professional conduct and appearance	Include: • Dress code • Professional conduct specific to the area e.g. working guidelines, etiquette in service user's home, use of mobile phones			
ID Badge	Explain policies for ID badges			
Confidentiality	Discuss importance of maintaining confidentiality and data protection			
Fire policy and procedure	Discuss/Explain: • Local policy • Emergency numbers • Location of fire points, exits, extinguishers, blankets • Procedure for evacuation and alarm tones • Awareness of risks associated with area			
Moving and handling	Discuss/ Show: • Local policies and relation to practice area • Location of moving and handling equipment			
Organisational policy store	Students should be aware of the following policies and procedures: • Health and safety • Infection control • Professional behaviour • Human resources • Occupational health • Smoking • Security • Protection of vulnerable adults and children • Managing conflict			

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Topics to be covered (Mentors initials and date when completed)		Practice experience NB: For students based in one practice area this need only be completed once		
		1	2	Consolidated Practice
Accidents and clinical incidents	Explain: • Procedures for reporting accidents/clinical incidents • Procedures for reporting adverse incidents/ near misses • Policy for when unable to gain access to a service user's home			
Resuscitation	Explain: • Procedure in event of suspected cardiac arrest • Emergency contact numbers • Location of emergency equipment			
Duty rota	Discuss: • Location and distance if travelling during work time i.e. visits to service users' homes • Requests • Practice teachers/mentors • Number of students on a shift • Finishing at the end of the day • Shift pattern • Following Faculty of Health Sciences guidance • Sickness and absence reporting • Issues related to parking, travel etc			
Telephone	Discuss: • Contact details for manager on duty and team members • Student contact details • Bleep/pager system if in use			
Equipment	Explain: • Basic function of appropriate equipment and where and how to access • Medical devices policy			
Infection control	The student should be aware of local policies and procedures related to: • Needle stick injury • MRSA and other infections • Universal precautions • Any special precautions			
Danger/ hazards	The student must be aware of any potential hazards particular to the area e.g. cytotoxic medication and waste etc			

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Welcome to your assessment of practice document

This guide has been developed to help students, practice teachers and mentors complete all aspects of the Assessment of Practice document (AOP). The introductory pages have been divided into three sections:

Section 1: Guidance for students

Section 2: Guidance for practice teachers and mentors

Section 3: Additional guidance for students, practice teachers and mentors

The AOP is divided into sections 4 and 5

Section 4: The Outcomes/Competencies Log

Section 5: The Assessment of Proficiency Practice Document

These two parts of the portfolio contain the necessary documentation for assessing and recording evidence to demonstrate the student's achievement of the practice learning outcomes throughout their programme. Explanation of how to complete these is provided on page 15 of this document.

Please read and become familiar with the following pages. We recommend they are read in conjunction with the student handbook as well as the University regulations which can be accessed through SUSSED at www.sussed.soton.ac.uk Questions arising should be discussed with your academic tutor.

Assessment of practice represents 50% of the Specialist Community Public Health Nurse [SCPHN] (school nursing) programme assessment requirements. In keeping with NMC requirements, your AOP document is your on-going record of achievement which is necessary to enter part 3 of the register at the end of training.

The practice teachers/mentor's contribution to the assessment of a student's programme of study is fundamental to maintaining professional standards of specialist community public health nursing (school nursing) practice. Please remind your practice teacher and mentor to read these pages.

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Section 1: Guidance for students

Remember, this is YOUR assessment document and you must accept responsibility to ensure accurate completion:

- prior to the start of the first practice experience, complete the recommended initial activities including a Professional Development Plan
- prior to the start of any practice experience make an initial identification of learning needs
- actively participate in initial, interim and final interviews with your practice teacher and mentor
- identify and affirm learning needs with practice teacher and mentor
- agree an Action Plan with your practice teacher and mentor for every practice experience
- take advantage of every opportunity to work with a practice teacher/mentor/supervising practitioner
- take advantage of all the learning opportunities available
- maintain your AOP document
- provide your practice teacher/mentor with examples from practice to demonstrate how the outcomes/competencies/proficiencies have been achieved
- co-operate with your practice teacher/mentor to ensure the assessment is completed by the date[s] specified
- make the assessment of practice documents available to practice teachers, mentors or academic staff on request
- submit the completed portfolio of learning to the Faculty Office by the date specified
- complete the evaluation of your practice experience

The context of practice

This programme prepares you to enter a practice-based profession beyond your initial registration as a nurse or midwife. This programme is practice-centred, recognising that:

- Evidence should inform practice through the integration of relevant knowledge
- You are actively involved, under supervision, in the delivery of community public health
- The Code of Conduct applies to all practice interventions and encounters
- Skills and knowledge are transferable
- Research underpins practice
- Lifelong learning and continuing professional development are important

The standards of proficiency are achieved under the direction of a registered public health nurse who has undertaken a recognised programme of teaching to act as a practice teacher (NMC 2008).

The standards of proficiency underpin the ten key principles of public health practice in the context of specialist community public health nursing. They are grouped into four domains:

1. Search for health needs
2. Stimulation of awareness of health needs
3. Influence on policies affecting health
4. Facilitation of health enhancing activities

Specialist community public health nursing proficiency – guiding principles

- Preparation: Fitness for practice
- Service: Fitness for purpose
- Recognition: Fitness for award
- Responsibility: 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 specialist community public health nurse (school nurse). The guiding principles relate to professional standards of proficiency and fitness for practice. As practice takes place in the real world of health care delivery, it is inextricably linked to other aspects of fitness: fitness for purpose, professional academic awards and professional standing (NMC 2004).

Practice proficiency

As a student you are deemed to be proficient when you have successfully met the NMC standards for specialist community public health nursing (SCPHN) school nurse education at the end of an NMC approved programme. Practice competence/proficiency may only be signed off by a practice teacher 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.

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Assessment of competence and proficiency

The programme is designed around three sequential levels of outcome/competency/proficiency that have to be achieved at different stages of the programme.

It is assumed that at all times students will:

- Practice in accordance with The Code: Standards of conduct, performance and ethics for nurses and midwives (2008) and University Regulations
- Practice in accordance with relevant legislation
- Be kind and work in a manner that is diversity sensitive and is free from discrimination, harassment and exploitation
- Be either directly or indirectly supervised by an appropriately registered practitioner who remains responsible for all care

The levels and criteria for judging achievement are:

Level 1 Programme stage – Participates

- Has observed the skill and can now assist in its delivery under the direct supervision of a supervising practitioner
- Acts appropriately when assisting supervising practitioners
- Promotes the safety and well being of the client.
- Has an understanding of the 'hands on' (psychomotor), knowledge based and attitudinal elements of the skill or aspect of care delivery
- Recognises situations affecting the safety and well being of the client and informs a supervising practitioner
- Considers the ethical use of resources

Level 2 Programme stage - Initiates

- Is able to make an assessment of client needs and initiate care delivery
- Care delivery is underpinned by sound theoretical knowledge
- Attitude demonstrates empathy and an understanding of the client's emotional/psychological needs
- After instruction and supervised practice can be trusted to practise safely in similar, uncomplicated situations
- Can perform skills and deliver care in unfamiliar or complex situations with guidance and support
- Ensures the safety and well being of the client with support
- Manages and prioritises an appropriate personal workload, seeking help when necessary
- Recognises limitations of own stage of competence and where appropriate, seeks instruction from, or refers to, a supervising practitioner

Level 3 Programme stage - Manages

- Has an understanding of the relevant legislation and has the skills, knowledge and attitudes to practise safely and effectively without the need for direct supervision (NMC 2008)
- Takes responsibility for and can justify own actions
- Performs psychomotor skills with dexterity
- Ensures the safety and well being of the client
- Manages and prioritises personal workloads effectively
- Has an in-depth theoretical knowledge
- Critically integrates knowledge and practice
- Practice is evidence based

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How are you assessed in practice?

The assessment process involves you and your named practice teacher and mentor agreeing an action plan at the initial interview following review of your learning needs and outlining the learning experiences available in the area. The interim interview provides an opportunity for you and your practice teacher and mentor to agree the needs that have been successfully achieved, and to develop an 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. **In principle if you are achieving the outcome/ competency at the required level then you should pass the proficiency in the practice experience.**

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 health professional. Assessment should not merely be done to you; rather, it should be done with you, to guide and enhance your learning. You therefore have a formative assessment during practice; mid way between taught practice. At all other stages you will be given feedback that will enable you to enhance 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 taught practice and your practice teacher and mentor will make the decision whether you have passed taught practice and whether you have met the criteria to progress into consolidated practice. At the end of consolidated practice your practice teacher will make the decision whether or not you are eligible to enter part 3 of the NMC register as a specialist community public health nurse (school nurse).

Interim review: Formative Assessment

As part of the assessment for the practice experience practice teachers and mentors will complete a formative assessment. Results will be discussed with you at the time of the review to ensure timely feedback. This means there are opportunities for you to develop your practice prior to the summative assessment. Where learning needs are identified, feedback should be delivered with sensitivity and in a manner that will enhance learning. Learning needs should be made explicit in the comments section which should be completed 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) 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 that will enhance learning. Comments should be written by student, practice teacher and mentor following the assessment. If a fail is recorded any learning needs must be documented and made explicit in the comments section.

Achieving competence and proficiency

The Assessment of Practice document has two main sections based on the 'NMC Standards of proficiency for specialist community public health nurses' (NMC 2004) and the Healthy Child Programme [HCP] (DH 2009)

The Assessment of Professional Practice document contains proficiencies based upon four domains:

- Search for health needs
- Stimulation of awareness of health needs
- Influence on policies affecting health
- Facilitation of health-enhancing activities

These need to be achieved in every practice experience.

The Competency Log contains:

- The Healthy Child Programme (DH 2009)
- The school nursing resource pack (DfES 2006)
- supplementary learning in practice which will contribute to achievement of the standards

It is vital that students work towards every aspect of their clinical practice assessment during every practice experience.

These elements of the portfolio have been designed to meet the requirements for progression during the programme and ultimately for entry to the part 3 of the register.

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Section 2: Guidance for practice teachers and mentors

Introduction

Students will normally acquire knowledge, initially in discrete areas (**Participates**) then, with guidance, will start to make connections between these areas (**Initiates**) to finally be able to draw on knowledge gained from a variety of sources and apply it to the situation at hand (**Manages**). 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. Senior students may visit families and manage their own cluster of schools once deemed competent, but they will always report back to you. Further practice will facilitate maintenance and enhancement (such as transferability) of that skill. All team members and mentors may be involved in facilitating the student's learning. However it is the practice teacher who is accountable for the final assessment and completion of the assessment documentation. A fundamental requirement of every NMC registrant 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 competence 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 practice teacher and mentor throughout the practice experience. This forms the basis of regular discussion of learning needs and also ensures records of achievement are regularly completed. Each practice experience requires a clinical assessment. The assessment must be carried out by a named practice teacher/mentor who has relevant expertise in assessment. The assessment of performance should involve one assessor (practice teacher/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 practice teacher/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 taught practice, practice teachers and mentors will complete a formative assessment part way through taught practice. Results should be discussed with the student at the time of the review to ensure timely feedback. This means there are opportunities for development prior to the summative assessment. Where learning needs are identified, feedback should be delivered with sensitivity and in a manner that will enhance learning. Learning needs should be made explicit in the comments section which should be completed 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) a summative assessment is completed. 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 that 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.

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Questions that you may want to consider when making an assessment

- Has your student met the performance criteria for achieving a pass?
- Can the student discuss the evidence they have provided for their linked assignment and demonstrate their understanding of this evidence?
- Does their evidence / self assessment accurately reflect their performance when delivering care to clients?

When making your decision regarding the student's level of proficiency you should reflect on the student's performance (including values and attitudes), consider feedback from colleagues and University links and think of any further evidence you have to inform your decision. Refer to the student's self-assessment of their performance and the evidence they are presenting to you. Please refer to the framework for assessment and review the details of the initial and interim reviews and the achievement of any goals / developments in the student's practice already identified. Remember it is important that the student is given feedback at regular intervals and opportunities to discuss progress throughout the practice experience. Failure to achieve the required proficiency level at the summative assessment point must never be an unexpected event for any of the parties involved. **In principle if the student has achieved the outcome/competency at the required level then they should pass the proficiency in the practice experience.**

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

Assessment decision	Criteria
PASS	The student has consistently demonstrated achievement of all the competencies and proficiencies at the required level and has achieved a pass in all elements of the assessment.
FAIL	The student has failed to consistently demonstrate achievement of the competencies and proficiencies at the required level and/or has achieved a fail in any part of the assessment.

Achieving and maintaining competencies and skills

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

- Ensure standards of client care are maintained
- Progress through the programme
- Prepare for the responsibilities of registration
- Enter the register

Outcomes - removing 'achieved status'

Once a 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 practice teacher.

If this happens:

- The skill must be re-achieved before the next summative assessment point and before progression is ratified
- If skills are not re-achieved, the student will be failed in the AOP

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".

Ultimately, supernumerary status means that the service would continue to be delivered without the student's presence. One example of this would be where a learning opportunity has been identified by the student ***and*** their practice teacher/ mentor 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. social service department, community child health clinic, outpatients, or another service intended to support the needs of children and their families.

We recognise that practice experiences vary and that staffing levels may also alter across the sectors, units and even within one team. Students are required to experience the 7 day a week, 24 hours a 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.*

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Section 3: Guidance for students, practice teachers and mentors

Completing the AOP

Outcomes/Competency Log

The skills are assessed by a competency framework comprising of three levels (see page 12). The skills are divided into the following sections:

- Universal work with children and families
- Working with complex and challenging families
- Health inequalities and population health needs assessment
- Professional practice and team working (including prescribing)

Outcomes/Competencies are mapped to reflect the NMC standards of proficiency. The pages are clearly divided into columns for each of the three practice experiences of the programme. These columns are subdivided into the following sections:

- L –indicates the minimum competency level that the students are expected to reach by the end of the practice experience
- I – provides space for an interim assessment of the skill
- S - provides space for the student to self assess
- PT – provides space for the practice teacher and mentor's assessment of the skill
- Practice Teacher/date – the supervising practitioner should sign and date this when the student has achieved the required level of competence

The final column allows for confirmation that, where students have been assessed as competent prior to the end of the programme, the final sign off practice teacher is satisfied that the skill has been maintained. The shading indicates that students are not expected to be participating in that particular skill at that stage of the programme. This does not mean that they *cannot* be assessed, just that they do not have to be. In the unusual event that these skills are not available to a student in practice, they may be assessed via simulation.

Records of clinical experience: to be completed by the student to demonstrate the range of public health experience accessed.

Student's record of reflection: structured pages have been provided, but it is recognised that as reflection is personal, students may record their reflections in whichever way they choose.

The assessment of professional practice document

Documents that are specific to a particular practice experience and are colour coded:

- Taught Practice – yellow
- Consolidated Practice 3 – pink
- **Checklist of responsibilities to be completed by student, practice teacher and mentor:** these are provided as an 'aide memoire' for each practice experience.
- **Professional development: self assessment by student:** students are required to complete a self assessment of professional development prior to starting and at the end of each practice experience.
- **Initial review:** to be completed within two days of the start of the practice experience. This enables identification of relevant prior learning and learning needs for this experience leading to formation of an action plan. Objectives set should be 'SMART' (i.e. **S**pecific, **M**easurable, **A**chievable, **R**ealistic and within an identified **T**ime frame).
- **Interim review of progress:** it is important that this is completed as near as possible to half way through the experience, so that students can identify both progress and areas for development, in time to address any concerns prior to the final review.
- **Final review:** examples of evidence from practice that can be provided by the student, practice teacher and mentor are used to demonstrate competence. The practice teacher indicates whether the student has passed or referred each standard by a tick in the relevant box and signs to verify this. Particular areas to be commended or that are cause for concern can be highlighted at the end of the review. The practice teacher should then confirm that the student is performing skills at an appropriate level of competence/proficiency before finally indicating whether the student has passed or failed the practice experience.
- **Grading in practice:** if the student has passed the grading in practice grid is completed. The grid offers a number of options to reflect the student's overall performance in practice. There is space for both student and practice teacher to make a judgement on the level of the student's performance taking into account the feedback provided in the assessment of practice document. The grid is subdivided in to 3 sections: Communication skills, Clinical skills and Professional standards and management skills. Each section has a heading which displays the numerical bandings with appropriate performance indicators related to that banding. In assessing the student the practice teacher identifies the appropriate performance indicator and awards a numerical grade within the range in the box provided. Once a section is completed, total the figures together and place the outcome in the box at the bottom of each page. On completion of all 3 sections total the three figures together and divide that figure by 12. Place this number in the OUTCOME BOX. This is the final grade awarded to the student.
- If the student has failed any aspects of the skills log or the assessment of professional practice document then this is deemed to be an overall FAIL and a Grading Practice Grid **must not** be completed at this stage.

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In the event of a failed assessment

In the event of a failed assessment a learning contract will be devised between the student, practice teacher and an academic tutor. This will support the student in making up the areas of deficit. Where the second attempt results in a pass the student and practice teacher complete a Grading Practice Grid reflecting the student's actual current performance level. The grade awarded will therefore reflect this. However, the final grade will be capped at 40% by the University of Southampton.

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 link lecturer or academic teacher 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 University link or academic tutor. In the event of such an occurrence, a form S24 should be completed by the student with help from their link lecturer or academic teacher, 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 teacher 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.

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.

Breaches of academic integrity

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 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.

Falsification or incorrect completion of any elements of this document

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 practice teacher or school nurse in charge. If this does not resolve concerns contact the academic tutor (first point of call), Programme lead or Practice Academic Coordinator.

Experience not available

The outcomes /proficiencies 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 proficiencies 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.

Social networking

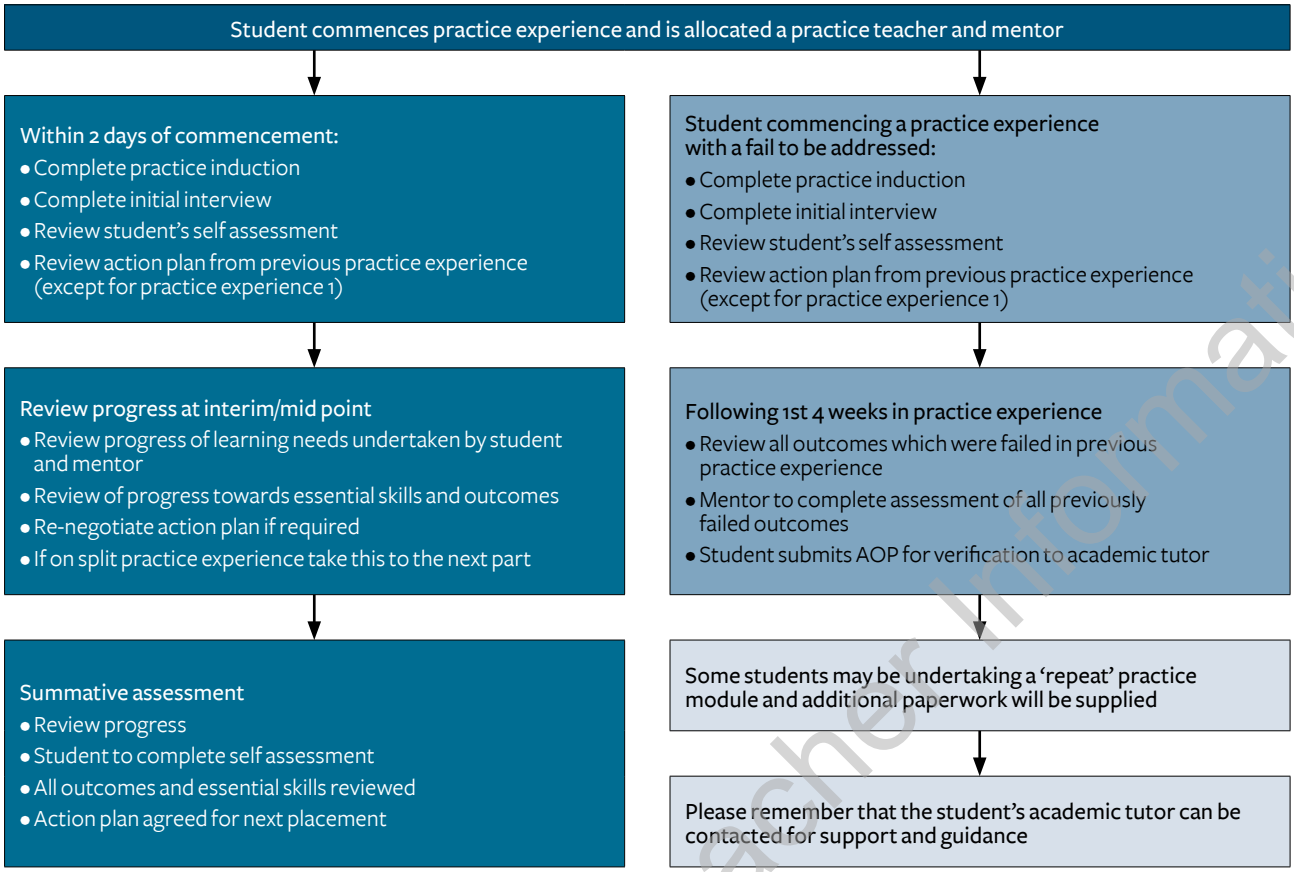
As a student school nurse you must "uphold the reputation of your chosen profession at all times" (NMC 2009). This means that conduct online and conduct in the real world should be judged in the same way, and should be at a similar high standard as a qualified school nurse. As a student school nurse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

- Share confidential information online
- Post inappropriate comments about colleagues/university staff or clients
- Use social networking sites to bully or intimidate colleagues
- Pursue personal relationships with service users or their families
- 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.

Mentor / Practice Teacher Information

Undertaking and completing a practice experience



Mentor / Practice Teacher Information

Section 4: Outcome/competence framework

The programme is designed around three sequential levels of outcome/competency that have to be achieved at different stages of the programme.

It is assumed that at all times students will:

- Practice in accordance with The Code: Standards of conduct, performance and ethics for nurses and midwives (2008) and University Regulations
- Practice in accordance with relevant legislation
- Be kind and work in a manner that is diversity sensitive and is free from discrimination, harassment and exploitation
- Be either directly or indirectly supervised by a registered practitioner who remains responsible for all care

The levels and criteria for judging achievement are:

Level 1 Programme stage – Participates

- Has observed the skill and can now assist in its delivery under the direct supervision of a supervising practitioner
- Acts appropriately when assisting supervising practitioners
- Promotes the safety and well being of the client
- Has an understanding of the 'hands on' (psychomotor), knowledge based and attitudinal elements of the skill or aspect of care delivery
- Recognises situations affecting the safety and well being of the client and informs a supervising practitioner

Level 2 Programme stage - Initiates

- Is able to make an assessment of client needs and initiate care delivery
- Care delivery is underpinned by sound theoretical knowledge
- Attitude demonstrates empathy and an understanding of the client's emotional/psychological needs
- After instruction and supervised practice can be trusted to practise safely in similar, uncomplicated situations
- Can perform skills and deliver care in unfamiliar or complex situations with guidance and support
- Ensures the safety and well being of the client with support
- Manages and prioritises an appropriate personal workload, seeking help when necessary
- Recognises limitations of own stage of competence and where appropriate, seeks instruction from, or refers to a supervising practitioner

Level 3 Programme stage - Manages

- Has an understanding of the relevant legislation and has the skills, knowledge and attitudes to practise safely and effectively without the need for direct supervision (NMC 2008)
- Takes responsibility for and can justify own actions
- Performs psychomotor skills with dexterity
- Ensures the safety and well being of the client
- Manages and prioritises personal workloads effectively
- Has an in-depth theoretical knowledge
- Critically integrates knowledge and practice
- Practice is evidence based

Mentor / Practice Teacher Information

1. Universal work with children and families

To be completed by student with mentor/practice teacher.

	Taught Practice Formative				Taught Practice Summative				Consolidated Practice Summative					
L = Level to be achieved by the end of the practice experience I = Interim review consolidated practice S = Student assessed level PT = Practice teacher/mentor assessed level	L	S	PT	Practice Teacher Signature Date	L	S	PT	Practice Teacher Signature Date	L	I	S	PT	Practice Teacher Signature Date	Skills Maintained
Partnership working with children and families (Domains 1, 2, and 4) *Demonstrates competency to:*														
Apply the principles of partnership working	2				3				3					
Utilise personal health care plans	2				3				3					
Engages in professional relationships	1				2				3					
Encourages self efficacy in children and their families	1				2				3					
Promotes dignity of all	1				1				1					
Recognise diversity and its impact on professional practice	2				3				3					
Undertake universal assessment and surveillance (e.g vision and audiology screening as per service delivery) and document, raising concerns as appropriate	1				2				3					
Accurately plot measurements on appropriate centile chart	2				3				3					
Document appropriately	2				3				3					
Facilitate the involvement of children, young people and parents in service developments	1				2				3					
Demonstrates knowledge of support services and uses this to refer/sign post to families, children and young people as appropriate	1				2				3					
Effectively support the child, young person and parents from primary to secondary education	1				2				3					
Appropriately identify/share and document safeguarding concerns, in accordance with local policy	2				3				3					

Mentor / Practice Teacher Information

L = Level to be achieved by the end of the practice experience I = Interim review consolidated practice S = Student assessed level PT = Practice teacher/mentor assessed level	Taught Practice Formative				Taught Practice Summative				Consolidated Practice Summative					
	L	S	PT	Practice Teacher Signature Date	L	S	PT	Practice Teacher Signature Date	L	I	S	PT	Practice Teacher Signature Date	Skills Maintained
Supporting positive health enhancing behaviour (Domains 1, 2 and 4) *Demonstrates competency to:*														
Provide information to support health and wellbeing, including healthy nutritional choice and sexual practice	2				3				3					
Promote open and effective communication about personal/intimate relationships	1				2				3					
Engage and support children who are involved in risk taking behaviour (substance/alcohol abuse risky sexual behaviour). Sign post to specialist services.	1				2				3					
Develop practices that promote choice and protection	1				2				3					
Develop knowledge and understanding of the evidence-base about childhood immunisations, including contra-indications	2				3				3					
Identify, communicate and document safeguarding concerns following protocol	2				3				3					
Utilise a range of methods to evaluate the effectiveness of health interventions	1				2				3					
Neurological development (Domains 1, 2 and 4) *Demonstrates competency to:*														
Understand and apply to practice learning theories and the relevance to the development of children and young people aged 5-16	1				2				3					
Explain theories regarding 'hard wiring' with parents and carers	1				2				3					
Understand and utilise models of positive parenting. Advise parents on effective behaviour management approaches for children and young people. Refer to community agencies.	1				2				3					

Mentor / Practice Teacher Information

	Taught Practice Formative				Taught Practice Summative				Consolidated Practice Summative					
L = Level to be achieved by the end of the practice experience I = Interim review consolidated practice S = Student assessed level PT = Practice teacher/mentor assessed level	L	S	PT	Practice Teacher Signature Date	L	S	PT	Practice Teacher Signature Date	L	I	S	PT	Practice Teacher Signature Date	Skills Maintained
Safeguarding (Domains 1, 2, and 4) *Demonstrates competency to:*														
Indentify safeguarding policy, practice and protocol	2				3				3					
Identify safeguarding concerns and follow appropriate referral protocol	1				2				3					
Recognise the impact and signs of domestic/ interpersonal abuse (inc bullying)	1				2				3					
Undertake appropriate screening interventions	1				2				3					
Policy (Domain 3) *Demonstrates competency to:*														
Demonstrate familiarity with the local children and young people's plan and its application to practice	2				3				3					
Apply knowledge of relevant policy and legislation underpinning personalisation and choice	1				2				3					

Mentor / Practice Teacher Information

2. Working with Complexity

To be completed by student with mentor/practice teacher.

	Taught Practice Formative				Taught Practice Summative				Consolidated Practice Summative					
L = Level to be achieved by the end of the practice experience I = Interim review consolidated practice S = Student assessed level PT = Practice teacher/mentor assessed level	L	S	PT	Practice Teacher Signature Date	L	S	PT	Practice Teacher Signature Date	L	I	S	PT	Practice Teacher Signature Date	Skills Maintained
Strengths-based approaches to working with children, young people and their families (Domains 2, 3 and 4) *Demonstrates competency to:*														
Work jointly with other agencies to support a child, young person or their family (e.g. Youth Offending Team) to achieve agreed outcomes	2				3				3					
Utilise relevant research and policy to inform practice	1				2				3					
Utilise knowledge of the organisational structure and culture of local children's trust partners	1				2				3					
Apply knowledge and understanding of CAF and its process to undertake a CAF	1				2				3					
Explain and experience undertaking the lead professional role	1				2				3					
Utilise knowledge of information-sharing processes within and across agencies	1				2				3					
Act as an advocate for children and young people's health needs, including those with special educational needs [SEN] and families to improve health and access to services	1				2				3					

Mentor / Practice Teacher Information

	Taught Practice Formative				Taught Practice Summative				Consolidated Practice Summative					
L = Level to be achieved by the end of the practice experience I = Interim review consolidated practice S = Student assessed level PT = Practice teacher/mentor assessed level	L	S	PT	Practice Teacher Signature Date	L	S	PT	Practice Teacher Signature Date	L	I	S	PT	Practice Teacher Signature Date	Skills Maintained
Vulnerable Children, Young People and their Families (Domains 1, 2, 3 and 4) *Demonstrates competency to:*														
Work with those who find it difficult to access services (e.g. those excluded from school/teenage pregnancy)	1				2				3					
Apply knowledge of the additional needs of children and young people who are in the care system	1				2				3					
Promote self-care and efficacy	1				2				3					
Negotiating with others to effectively utilise resources to reduce health inequalities	1				2				3					
Monitor the uptake of services by disadvantaged and/or vulnerable children, young people and their families	1				2				3					
Encourage participation of disadvantaged or vulnerable children, young people and their families in planning and provision of services	1				2				3					
Work in partnership to support transition to adult services	1				2				3					
Long term conditions (Domains 1, 2 and 4) *Demonstrates competency to:*														
Utilise evidence-based research and guidelines to inform practice	1				2				3					
Work collaboratively with agencies to provide nursing care to children and young people with long-term conditions (e.g. diabetes, asthma, cystic fibrosis)	1				2				3					
Recognise provision of care to children and young people with learning difficulties and/or disabilities	1				2				3					
Provide support and learning opportunities to adults caring for children and young people with long-term conditions, including parents, teachers and support staff	1				2				3					

Mentor / Practice Teacher Information

L = Level to be achieved by the end of the practice experience I = Interim review consolidated practice S = Student assessed level PT = Practice teacher/mentor assessed level	Taught Practice Formative				Taught Practice Summative				Consolidated Practice Summative					
	L	S	PT	Practice Teacher Signature Date	L	S	PT	Practice Teacher Signature Date	L	I	S	PT	Practice Teacher Signature Date	Skills Maintained
Mental Health [MH] Needs of children and young people (Domains 1, 2 and 4) *Demonstrates competency to:*														
Utilise evidenced based research and guidelines in managing MH needs	2				2				3					
Recognise signs/symptoms of poor/deteriorating mental health and refer as appropriate	1				2				3					
Recognise the impact of determinants of health on Mental Health, including the impact of previous health history and social history	2				2				3					
Recognise the impact of poor mental health on the child/parent relationship and other family members	1				2				3					
Policy (Domain 3) *Demonstrates competency to:*														
Work towards implementation/evaluation of relevant national and local policies	1				2				3					

Mentor / Practice Teacher Information

3. Assessment of health needs and inequalities

To be completed by student with mentor/practice teacher.

	Taught Practice Formative				Taught Practice Summative				Consolidated Practice Summative					
L = Level to be achieved by the end of the practice experience I = Interim review consolidated practice S = Student assessed level PT = Practice teacher/mentor assessed level	L	S	PT	Practice Teacher Signature Date	L	S	PT	Practice Teacher Signature Date	L	I	S	PT	Practice Teacher Signature Date	Skills Maintained
Assessment of Population Health Needs (Domains 1, 2, 3 and 4) *Demonstrates competency to:*														
Gather data to construct a profile of the local school-aged population	1				2				3					
Critically analyse relevant data including epidemiological data to construct a profile of the local school-aged population	1				2				3					
Develop/utilise questionnaires to gather data regarding health issues	1				2				3					
Initiate and support focus groups with children, young people and their parents	1				2				3					
Recognise relevance and applicability of social capital to children and young people	1				2				3					
Engage with a wide range of stakeholders, including children and young people and children's trust partners to establish local health priorities	1				2				3					
Health Promotion (Domains 2 and 4) *Demonstrates competency to:*														
Plan, deliver and evaluate a range of health promotion programmes to school-aged children and young people	1				2				3					
Be actively involved in peer education programmes for children and young people	1				2				3					
Draw up action plans to deliver services to meet assessed health needs of individual children and young people	1				2				3					

Mentor / Practice Teacher Information

4. Professional Practice and team working skills (Including Prescribing)

To be completed by student with mentor/practice teacher.

	Taught Practice Formative				Taught Practice Summative				Consolidated Practice Summative					
L = Level to be achieved by the end of the practice experience I = Interim review consolidated practice S = Student assessed level PT = Practice teacher/mentor assessed level	L	S	PT	Practice Teacher Signature Date	L	S	PT	Practice Teacher Signature Date	L	I	S	PT	Practice Teacher Signature Date	Skills Maintained
Team working (Domains 2 and 4) *Demonstrates competency in:*														
Working with other agencies including the voluntary sector on programmes and projects to improve health and wellbeing	1				2				3					
Working jointly with education to deliver targeted PSHE programmes to children and young people	1				2				3					
Working with schools to incorporate key health messages into core National Curriculum subjects	2				3				3					
Experience of leading and supervising others	1				2				3					
Ability to delegate work to others	1				2				3					
Accountability, Professional and Ethical Practice (Domains 1, 2, 3, and 4) *Demonstrates competency in:*														
Act in the limits of your authority and competency	3				3				3					
Work with NMC code of Conduct and Local Policy	3				3				3					
Reflect on personal values and principles to underpin best practice	3				3				3					
Nurses Prescribing V100 (Domains 1, 2, 3 and 4)* *Demonstrates competency in:*														

Mentor / Practice Teacher Information

	Taught Practice Formative				Taught Practice Summative				Consolidated Practice Summative					
L = Level to be achieved by the end of the practice experience I = Interim review consolidated practice S = Student assessed level PT = Practice teacher/mentor assessed level	L	S	PT	Practice Teacher Signature Date	L	S	PT	Practice Teacher Signature Date	L	I	S	PT	Practice Teacher Signature Date	Skills Maintained
Undertake a comprehensive medical and pharmacological history	1				2				3					
Assess and consult with patients/clients parents and carers	1				2				3					
Consider non –drug and drug treatment options (including referral and preventative measures)	1				2				3					
Assess the effect of multiple pathologies, existing medication and contraindications to treatment options	1				2				3					
Prescribe safely, appropriately and cost effectively	1				2				3					
Monitor the effectiveness of treatment and potential side effects	1				2				3					
Evaluate and review therapeutic objective/outcome	1				2				3					
Accurately record information and share with GP	3				3				3					
Complete, store and retain records of practice (Domains 3 and 4) *Demonstrates competency in:*														
Keep accurate, legible and contemporaneous records	2				3									
Detail the reasoning behind any acts or omissions	2				3									

Mentor / Practice Teacher Information

Additional studies days/activities attended

Date	Title	Place	Content	Learning Achieved

Mentor / Practice Teacher Information

Supplementary evidence of learning in practice

This section of the portfolio is to enable you to record supplementary evidence of your learning in practice. The purpose of supplementary evidence is to demonstrate to mentors and academic staff that you are accessing a wide range of learning resources and opportunities. This will facilitate your development of the required competencies and essential skills clusters.

This section includes:

- Public Health focussed activities
- Student's records of reflection

Public health focussed activities

During practice experiences you must spend at least three weeks (15 days) gaining experience in settings, and with clients considered either important or that may be a potential area of responsibility even if not central to the defined area of practice. Your experiences should be planned in partnership with your practice teacher/mentor to enable you to understand the context for practice in all community public health settings, which may be achieved through exposure, observation, discussion and simulation, particularly for those settings identified as potentially important but not central to a defined area of practice. This section of the portfolio is to be used to record the learning that has resulted from these activities. These activities should NOT be undertaken in consolidated practice

All practice focussed activities must be agreed with the practice teacher and must be relevant to your learning needs.

The mentor (or supervising practitioner) may decline the request for a student to undertake a practice focused activity if:

- The workload of the recipient practitioner would not allow the student to receive the required supervision and teaching
- The student needs to remain in their own practice setting to gain sufficient experience to demonstrate the required level of competence in relation to the proficiencies relevant to that setting

To be completed by student.

Date	Nature of experience/visit working with specialist practitioner	Name of Supervising Practitioner	What was your involvement in these activities?	What has been learnt by this experience and how does this contribute to competency outcomes?

Mentor / Practice Teacher Information

Date	Nature of experience/visit working with specialist practitioner	Name of Supervising Practitioner	What was your involvement in these activities?	What has been learnt by this experience and how does this contribute to competency outcomes?

Mentor / Practice Teacher Information

Reflection

1. A description of the event

WHAT? Trigger questions:

- Is the purpose of returning to this situation?
- Happened?
- Did I see/do?
- Was my reaction to it?
- Did other people do who were involved in this?

2. An analysis of the event

SO WHAT? Trigger questions:

- How did I feel at the time of the event?
- Were those feelings I had any different from other people who were also involved at the time?
- Are my feelings now, after the event, any different from what I experienced at the time?
- Do I still feel troubled, if so, in what way?
- What were the effects of what I did (or did not do)?
- What positive aspects now emerge for me from the event that happened in practice?
- What have I noticed about my behaviour in practice by taking a more measured look at it?
- What observations does any person helping me to reflect on my practice make of the way I acted at the time?

3. Proposed actions following the event

NOW WHAT? Trigger questions:

- What are the implications for others and me in clinical practice based on what I have described and analysed?
- What difference does it make if I choose to do nothing?
- Where can I get more information to face a similar situation again?
- How can I modify my practice if a similar situation were to happen again?
- What help do I need to help me 'action' the results of my reflections?
- Which aspect should be tackled first?
- How will I notice that I am any different in clinical practice?
- What is the main learning that I take from reflecting on my practice in this way?

Driscoll, J. (2002) **Practising Clinical Supervision - A Reflective Approach, Bailliere Tindall/RCN: Edinburgh**

Student's record of reflection

To reflect on practice means exploring one's own skills, knowledge, beliefs and values as a practitioner by thinking about:

- What was done?
- Why it was done?
- What was one's own involvement in the event?
- What are one's own feelings and understandings of the event?
- What are the implications for the safety and well-being of the client(s) involved?
- Should a similar situation occur again, would you handle events in a different way?

The examples used do not need to be dramatic - they are often 'everyday' situations – but nevertheless, something that made you think about your practice or that of your colleagues. They could also be events that were rewarding, interesting, challenging or disturbing. Whatever subject is selected, reflection helps to identify what has been learned and what still needs to be learned. However, since the memory of events can fade quickly, it is advisable to complete this activity as soon as possible.

There is no 'right' way to reflect. Pages have been provided for you to summarise the key points of the reflection. You are expected to share with your practice teacher/mentor a more comprehensive reflection that integrates evidence and theory to demonstrate how you attempted to 'make sense' of the experience and you may use any form that is meaningful for you. Two of these reflections can form the basis of your formative and summative professional conversations.

It is expected that during the programme, as a minimum you will reflect on each of the following

A time when you:

- Provided care/intervention in a warm, sensitive and compassionate way
- Shared information effectively in challenging circumstances, such as a safeguarding or identification of vulnerability
- Recognised escalation of behaviour issues/problems or peer/teacher/parent interaction
- Explored attitudes to obesity and nutrition including how you took into account cultural traditions and beliefs
- Used evidence to determine when medicinal products either were or were not an appropriate choice for treatment

Mentor / Practice Teacher Information

Student's record of reflection 1		
Date of event		
What happened		
Why it happened		
My involvement in the event		
My feelings during the event		
Implications for those involved (Safety and well-being)		
What would I do next time		
Full written reflection seen by practice teacher/mentor	Practice teacher/mentor signature	Date

Mentor / Practice Teacher Information

Student's record of reflection 2		
Date of event		
What happened		
Why it happened		
My involvement in the event		
My feelings during the event		
Implications for those involved (Safety and well-being)		
What would I do next time		
Full written reflection seen by practice teacher/mentor	Practice teacher/mentor signature	Date

Mentor / Practice Teacher Information

Student's record of reflection 3		
Date of event		
What happened		
Why it happened		
My involvement in the event		
My feelings during the event		
Implications for those involved (Safety and well-being)		
What would I do next time		
Full written reflection seen by practice teacher/mentor	Practice teacher/mentor signature	Date

Mentor / Practice Teacher Information

Student's record of reflection 4		
Date of event		
What happened		
Why it happened		
My involvement in the event		
My feelings during the event		
Implications for those involved (Safety and well-being)		
What would I do next time		
Full written reflection seen by practice teacher/mentor	Practice teacher/mentor signature	Date

Mentor / Practice Teacher Information

Student's record of reflection 5		
Date of event		
What happened		
Why it happened		
My involvement in the event		
My feelings during the event		
Implications for those involved (Safety and well-being)		
What would I do next time		
Full written reflection seen by practice teacher/mentor	Practice teacher/mentor signature	Date

Mentor / Practice Teacher Information

Student's record of reflection 6		
Date of event		
What happened		
Why it happened		
My involvement in the event		
My feelings during the event		
Implications for those involved (Safety and well-being)		
What would I do next time		
Full written reflection seen by practice teacher/mentor	Practice teacher/mentor signature	Date

Mentor / Practice Teacher Information

Student's record of reflection 7		
Date of event		
What happened		
Why it happened		
My involvement in the event		
My feelings during the event		
Implications for those involved (Safety and well-being)		
What would I do next time		
Full written reflection seen by practice teacher/mentor	Practice teacher/mentor signature	Date

Mentor / Practice Teacher Information

Student's record of reflection 8		
Date of event		
What happened		
Why it happened		
My involvement in the event		
My feelings during the event		
Implications for those involved (Safety and well-being)		
What would I do next time		
Full written reflection seen by practice teacher/mentor	Practice teacher/mentor signature	Date

Mentor / Practice Teacher Information

Professional Conversation (Critical Incident Analysis)

This exercise is designed to enable you, the student to focus upon and reflect upon a critical incident and a wider public health event within professional practice in order to aid the development of professional judgement. The critical incident is an event whose significance has been produced by the way we look at it.

Two professional conversations are scheduled within the course:

First Professional Conversation: During taught practice – full time student (Year One part time student).

This will consist of a reflective account of a public health activity from current practice that you have participated in.

Second Professional Conversation: During consolidated practice (full time student. Year Two part time student).

This will consist of a reflective account of a public health activity from your specialist area of practice.

Guidelines and criteria for marking

Upon completion of two professional conversations you will have:

- Explored the process through which reflection takes place;
- Analysed and interpreted an aspect of public health practice and shared this experience with a group of peers;
- Considered the dilemmas posed by the incident and discussed the issues raised;
- Developed a critical understanding of how professional judgement and critical analysis influence and improve standards of practice.

During the placement, meetings will be arranged with yourself, the practice teacher/mentor, and lecturers. At these meetings you are required to engage in a professional conversation with your peers (approximately 20 minutes). This experience is designed to deepen your understanding of issues which emerge from practice, the portfolio and reflective diaries.

Prior to the Professional Conversation, students will:

- Discuss with your practice teacher/mentor which aspects of public health activity you wish to share with your peers;
- How this knowledge may be presented in a stimulating and challenging way.
- A decision must be made as to the level of involvement required by the practice teacher/mentor and lecturers present during the conversation. This may range from no participation, to an agreed level of knowledge seeking or professional verification.

The students' ability to develop and sustain the professional conversation will be assessed as part of the development of proficiency in any of the 4 Domains.

Pass Criteria

SPECIAL NOTE FOR Practice Teachers

This assignment is marked as part of the development of proficiency and can be used as evidence by the student

The following points should be included in the analysis with evidence of critical thought and reflection:

1. **An Introduction**
2. **Main professional conversation about the critical incident should include:**
   - description of the public health activity itself;
   - relationship of the public health activity to yourself as either the participant or observer;
   - the theories which support the concepts you have identified from the public health activity (referenced to recent literature);
   - the ability to relate concepts and theories back to the public health activity and show how these might enhance or alter the incident or activity;
   - how this public health activity relates to the wider organisation, i.e. the family, community or society at large;
   - any ethical or legal implications that can be drawn from the public health activity.
3. **Conclusion**
   - did the student present the public health activity clearly;
   - was their reflection on practice supported with evidence from the literature;
   - was the evidence offered as part of the discussion;
   - were the issues identified in the analysis of the situation;
   - was the conclusion/summary structured?

Mentor / Practice Teacher Information

Professional Conversation One (Formative)

Student Comments:
Please reflect on the exercise, identify strengths and limitations of this work/approach and highlight areas for development.
PT Comments:
Please comment on the ability of the student to integrate theory and practice in this experience, highlighting strengths and areas requiring development.

Practice Teacher Signature:	
Student Signature:	
Date:	

Mentor / Practice Teacher Information

Professional Conversation Two (Summative)

Student Comments:
Please reflect on the exercise, identify strengths and limitations of this work/approach and highlight areas for development.
PT Comments:
Please comment on the ability of the student to integrate theory and practice in this experience, highlighting strengths and areas requiring development.

Practice Teacher Signature:	
Student Signature:	
Date:	

Mentor / Practice Teacher Information

Elective Placement Guidance

Introduction

All students have the equivalent of a one week period of observation in a public health practice setting which is in several respects different from their existing placement. This is regarded by students and academic tutors as a very valuable experience as it provides a different perspective to practice, and allows the students to observe, without pressure and responsibility, the practice of colleagues in other spheres of public health work. They are also able to see the differing priorities and policies in a contrasting environment. The experience contributes to the flexible approach to practice which it is desirable to encourage. **Please ensure the student has a programme for the week.**

Guidelines for the visit

At the end of the elective experience week the student will have an understanding of and be able to:

- Compare and contrast different public health management systems in relation to:
  - The setting of the public health service,
  - The configuration of the multi-agency team
  - Professional support systems, formal and informal;
  - Protocols, audit, governance mechanisms;
  - Priorities of work for the public health team;
  - Resources required and available to the service;
  - Environmental and socio-economic differences
- Compare and contrast differences in health and social policy in relation to:
  - The implementation of significant and current Government Acts/policies/reports;
  - Domestic abuse - child, adult and elderly;
  - Surveillance and risk assessment - health and social; policies
  - Identification of health/social needs
  - Health improvement programme;
  - Health protection policies
  - Service quality
- Be aware of and gain understanding of any innovative developments peculiar to the public health management system:
  - Development of social enterprise/different commissioning arrangements
  - Public health activity with different client groups (partnerships);
  - e.g. Record systems, frameworks for practice
  - Use of epidemiological data, statistical returns in developing public health activity.

Elective Practice Placement

BSc (Hons) and Postgraduate Diploma Public Health Practice

Aim

To disseminate and promote discussion of the elective placement experiences undertaken by students studying on the BSc (Hons)/ Postgraduate Diploma in Specialist Community Public Health Nursing.

Rationale

Previous evaluations with students and Practice teachers have identified the value of the elective placement as a learning opportunity, which improves public health activity for the client. The elective placement is considered an important part of the programme and the opportunity to share experiences provides students with an eclectic range of evidence from the student cohort. The use of a web based electronic notice board facility (in virtual time) as a medium for sharing and discussing experience has been very valuable in this process. Evaluations from students (2002 – 2010) have demonstrated in particular the value to learning of using this medium for discussion.

Key Objectives of the Web discussion

- To provide information on the elective placement experienced and subsequently to enter into a discussion about the experience and the experiences of other public health students
- To promote a wider discussion of elective experiences
- To provide evidence of learning for the student's portfolio
- To demonstrate the value of the elective placement to:
  - Students
  - Practice teachers, mentors, lecturers
  - Student sponsors/secondees
  - Host organisations
  - External examiners
- To develop individual Information technology (IT) skills

Mentor / Practice Teacher Information

Instructions for Students

Dear All

Re: Elective Placements Feedback

Thank you for participating in this electronic learning exercise. I have set out some directions which I hope will help guide you through this activity. If you are not sure about the information you have been asked to share please don't hesitate to contact me on: ww1@soton.ac.uk

If you have any questions about using Web Board or any other aspect of the electronic learning system, Wendy Wigley is happy to help you. She can be contacted by email ww1@soton.ac.uk

Information Required

- Your name, discipline and University 'e' mail address
- **Details of the nature of your Elective Placement** (But not its name)

  For example:

  A Public Health Team, Private Sector Health Provider, Local Authority or a Voluntary Organisation.
- **Details of why you decided to undertake that placement**

  For example:

  It contrasted with my current placement ...

  It provided a public health service that is not currently available to the client group I work with... etc
- The value of the experience

  A brief summary (6-10 lines) about what was of most value to you and potentially to your client group about your Elective experience.

  Other details could include information that could be beneficial to others.

  For example:

  The placement was located in a centre of excellence for addressing the needs of asylum seekers/refugees. A useful web site to find out more is ... The web site has details of current research in the area of...

NB

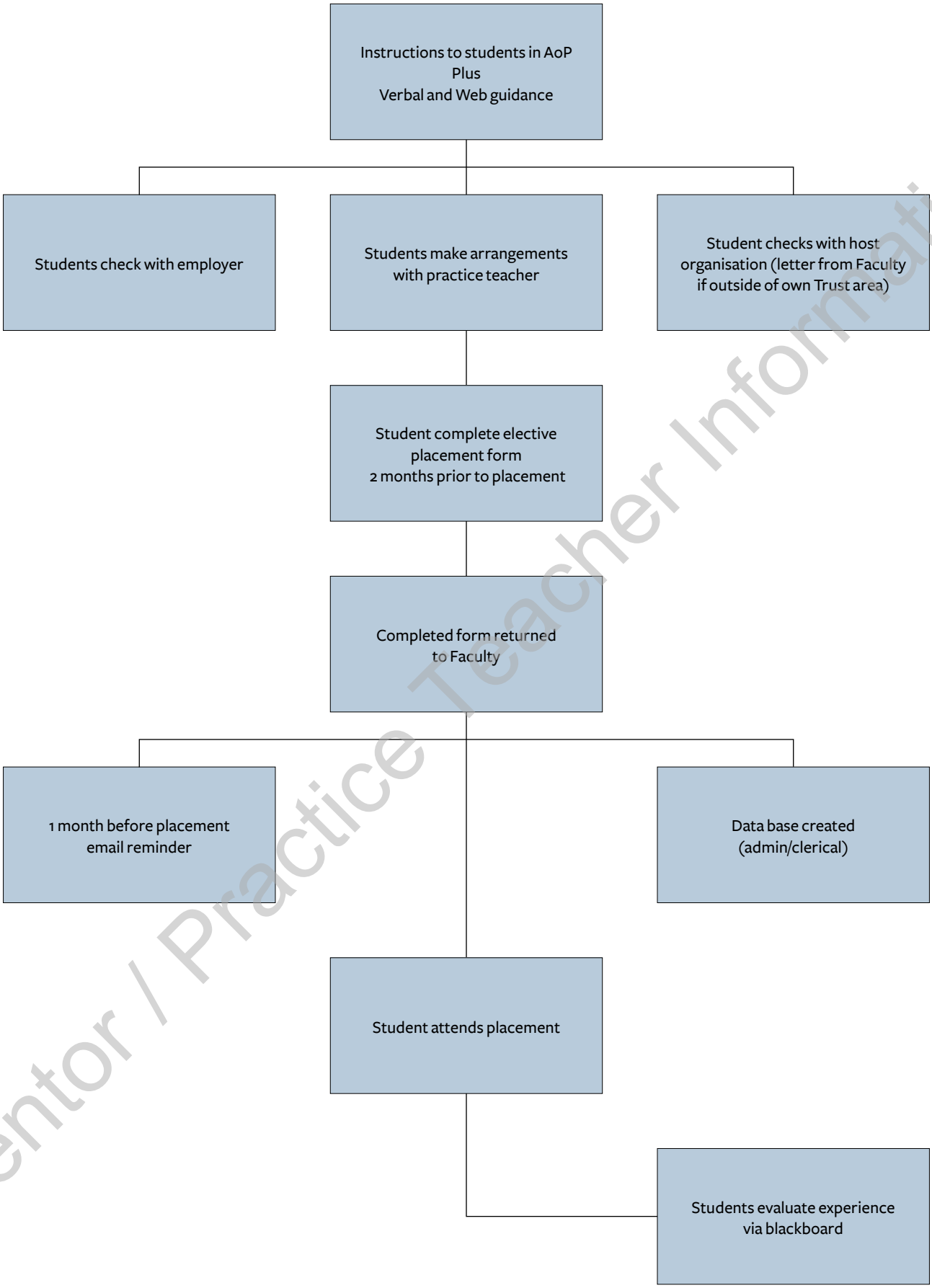
The information about your Elective Placement will be placed on the Community Web link on the School Intranet. The initial forum for discussion will be your specialist practice learning group. The facility to guest in to another group will also be available. Please access as many accounts as you wish

These instructions replace all previous instructions in the Theory to Practice Portfolio.

Please remember that this (and any published) information is subject to NMC regulations and University policy with regards to confidentiality and anonymity. Information published on Web pages is also subject to the Data Protection Act.

Mentor / Practice Teacher Information

Figure 1: Elective Placement Flowchart



Mentor / Practice Teacher Information

Section 5: Assessment of Professional Practice

Taught Practice

Checklist of responsibilities to be completed by student	
It is your responsibility to carry your assessment of practice document with you at all times, ensure that you keep it up to date and present it to the relevant people for signatures	
Complete self assessment prior to start of practice experience	
Ensure that you and your mentor have discussed the student charter	
Initial review – identify learning needs and devise action plan in conjunction with your mentor	
Interim review – complete and sign your review of progress, review your learning needs and action plan	
Client and family involvement in practice assessment	
Complete self assessment prior to your final review	
Final review – sign to confirm that you have not falsified any evidence	
Ensure that the following are up to date: • Competencies/outcomes • Records of clinical experience • Absence record	

Checklist of responsibilities to be completed by practice teacher/mentor	
Sign registrant signature sheet	
Complete and sign initial review	
Complete Practice Induction	
Review Record of Clinical Experience	
Interim review	
Review Competencies/outcomes	
Final review	
Sign Practice Placement Record	
Verify Absence Record if applicable	
Formulate learning agreement in conjunction with student and tutor if student is referred	
Complete review of learning agreement if applicable	

Mentor / Practice Teacher Information

Absence record

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

Record of absences made up

Dates		Number of made up days/hours	Practice teachers/mentor's signature
From	To		

I verify that this is an accurate record of this student's absence
Practice teachers/mentor's signature

Outstanding hours carried forward	Academic tutor's signature

Mentor / Practice Teacher Information

Professional Development: self assessment by student at commencement of practice experience

Self assessment based on previous professional experience (In first experience you may also draw on life experience prior to commencing the programme)	
Strengths	Weaknesses
Concerns	Expectations
Please discuss the key points from this assessment with your practice teacher prior to completing an action plan for this practice experience	

Mentor / Practice Teacher Information

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 practice teacher and mentor, and is based upon the self assessment, previous practice experiences.

Learning needs	Action plan

Student's signature	Date
Practice teachers signature	Date
Proposed date for interim/midpoint review	

Mentor / Practice Teacher Information

Interim assessment

Student's review of progress

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

Student's signature	Date

Practice teachers review of progress

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

Practice teacher's signature	Date

Mentor / Practice Teacher Information

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
Practice teacher's signature	Date
Proposed date for final interview	

Mentor / Practice Teacher Information

Client and family involvement in practice

Consent must be gained from the client or family with the practice teacher/mentor present to participate in this exercise. This exercise can be undertaken as a discussion and the practice teacher/mentor should then record the points raised below.

We would like to hear from you about your views of the way the student school nurse has 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.

<table>
<tr><td colspan="3">Please comment on (student name) 's strengths and weaknesses</td></tr>
<tr><td colspan="3">Please state what you feel they have done well</td></tr>
<tr><td colspan="3">Please state what they could do to improve their school nurse care</td></tr>
<tr><td colspan="3">Please add any other information you think would be helpful</td></tr>
<tr><td>Date</td><td>Practitioner's Signature</td><td>Clinical team</td></tr>
<tr><td></td><td colspan="2">Student's signature</td></tr>
</table>

Mentor / Practice Teacher Information

Professional Development: self assessment by student at final assessment

Self assessment of practice experience	
Key achievements identified during this practice experience	Key areas for development identified as a result of this practice experience
What is to be achieved during next practice experience	What activities and experiences should lead to achievement
Please discuss the key points from this assessment with your mentor prior to your final assessment	

Mentor / Practice Teacher Information

Formative review (Taught Practice)

Please provide information on the student's performance of the following proficiencies (taken from the Standards of proficiency for specialist community public health nurses (NMC 2004).

Domain 1: Search for Health Needs	Examples of evidence to date (consider learning acquired in theory time)	Practice teacher/ mentor signature	Date
1.1 Surveillance and assessment of the population's health and wellbeing 1.1.1 Collects and structures data and information on the health and well being and related needs of a defined population *(Links to outcome/competence 1, 2, and 3)*			
1.1.2. Analyse, interpret and communicate data and information on the health and wellbeing and related needs of a defined population *(Links to outcome/competence 1, 2, 3 and 4)*			
1.1.3. Develops and sustains relationships with individuals and groups with the aim of improving health and social wellbeing *(Links to outcome/competence 1, 2, and 3)*			
1.1.4. Develops and sustains relationships with individuals and groups with the aim of improving health and social wellbeing. E.g. listens to clients and enables them to think through their feelings; enables clients to make informed choices about their health and wellbeing; actively encourages clients to think about their own health and the health of their children and families *(Links to outcome/competence 1, 2, and 3)*			
1.1.5. Identifies individuals, families and groups who are at risk and in need of further support E.g. can recognise indicators for vulnerability and alerts practice teacher/mentor/team to risk factors and issues in care provision *(Links to outcome/competence 2 and 4)*			
1.1.6. Undertakes screening of individuals and populations and responds appropriately to findings E.g. can recognise rationale for assessment and with support offers care within the context of public health policies; can identify groups with particular health and social needs; aware of evidence shown to prevent and reduce morbidity and mortality and improve health and social outcomes. *(Links to outcome/competence 1, 2, 3 and 4)*			
Domain 2: Stimulation of awareness of health needs	**Examples of evidence to date (consider learning acquired in theory time)**	**Practice teacher/ mentor signature**	**Date**
2.1 Collaborative working for health and wellbeing 2.1.1 Raises awareness about health and social wellbeing and related factors, services and resources *(Links to outcome/competence 1, 2, 3 and 4)*			
2.1.2. Develops, sustains and evaluates collaborative work. E.g. is beginning to identify groups and agencies (i.e. Children's Centres) and is making links to such services *(Links to outcome/competence 3 and 4)*			

Member Practice Teacher Information

Domain 2: Stimulation of awareness of health needs	Examples of evidence to date (consider learning acquired in theory time)	Practice teacher/ mentor signature	Date
2. 2 Working with and for communities to health and wellbeing 2.2.1. Communicates with individuals, groups and communities about promoting health and well being *(Links to outcome/competence 1, 2, 3 and 4)*			
2.2.2. Raises awareness about the actions that individuals and groups can take to improve their health and wellbeing *(Links to outcome/competence 1, 2, and 3)*			
2.2.3. Develop capacity and confidence of individuals and groups, including families and communities, to influence and use available services, information and skills, acting as advocate where appropriate *(Links to outcome/competence 1, 2, and 3)*			
2.2.4 Work with others to protect the public's health and well being from specific risks *(Links to outcome/competence 2, 3 and 4)*			
Domain 3: **Influence on policies affecting health**	**Examples of evidence to date** **(consider learning acquired in theory time)**	**Practice teacher/** **mentor signature**	**Date**
3.1 Developing health programmes and services and reducing inequalities 3.1.1. Work with others to plan, implement and evaluate programmes and projects to improve health and wellbeing *(Links to outcome/competence 1, 2, 3 and 4)*			
3.1.2. Identify and evaluate service provision and support networks for individuals, families and groups in the local area or setting *(Links to outcome/competence 2, 3 and 4)*			
3.2. Policy and strategy development and implementation to improve health and wellbeing 3.2.1. Appraises policies and recommends changes to improve health and wellbeing *(Links to outcome/competence 2, 3 and 4)*			
3.2.2. Interpret and apply health and safety legislation and approved codes of practice with regard for the environment, wellbeing and protection of those who work in the wider community E.g. prevents and controls infection; promotes health, safety and security in the working environment *(Links to outcome/competence 3 and 4)*			
3.2.3. Contribute to policy development 3.2.4. Influence policies affecting health *(Links to outcome/competence 3 and 4)*			
3.3 Research and development to improve health and wellbeing 3.3.1. Develop, implement, evaluate and improve practice on the basis of research, evidence and evaluation *(Links to outcome/competence 2, 3 and 4)*			
Domain 4: **Facilitation of health enhancing activities**	**Examples of evidence to date** **(consider learning acquired in theory time)**	**Practice teacher/** **mentor signature**	**Date**

Mentor Practice Teacher Information

4.1 Promoting and protecting the populations health and wellbeing 4.1.1 Works in partnership with others to prevent the occurrence of needs and risks related to health and wellbeing *(Links to outcome/competence 1, 2, 3 and 4)*			
4.1.2. Works in partnership with others to protect the public's health and wellbeing from specific risks *(Links to outcome/competence 2, 3 and 4)*			
4.2 Developing quality and risk management within an evaluative culture 4.2.1. Prevent, identify and minimise risk of interpersonal abuse or violence, safeguarding children and other vulnerable people, initiating the management of cases involving potential abuse or violence where needed *(Links to outcome/competence, 2 and 4)*			
4.3 Strategic leadership for health and wellbeing 4.3.1. Apply leadership skills and manage projects to improve health and wellbeing *(Links to outcome/competence, 3 and 4)*			
4.3.2. Plan, deliver and evaluate programmes to improve the health and wellbeing of individuals and groups *(Links to outcome/competence, 1, 2, 3 and 4)*			
4.4 Ethically manages self, people and resources to improve health and wellbeing 4.4.1. Manages teams, individuals and resources ethically and effectively E.g. Demonstrates a respectful attitude, uses appropriate language with clients and colleagues *(Links to outcome/competence, 3 and 4)*			

Mentor / Practice Teacher Information

Are there any areas of student performance that you would like to commend?

Are there any areas of student performance that concern you?

Practice Teachers signature	Print name	Date

To be completed by mentor participating in assessment		
Supported by: Mentor's signature	Print name	Date
I confirm that there has been no falsification of evidence within this document (Before signing please read academic integrity statement for students in your student handbook)		
Student's signature	Print name	Date

Student's comments	
Student's signature	Date

Mentor / Practice Teacher Information

Learning agreement/action plan

Competency to be achieved	Activities and experiences that should lead to achievement

Date for review			
Student's signature		Date	
Practice teacher's signature		Date	
Academic tutor's signature		Date	

Mentor / Practice Teacher Information

Final review (end of taught practice)

Please provide information on the student's performance of the following proficiencies (taken from the Standards of proficiency for specialist community public health nurses (NMC 2004).

Domain 1: Search for Health Needs

1.1 Surveillance and assessment of the population's health and wellbeing

1.1.1 Collects and structures data and information on the health and well being and related needs of a defined population

(*Links to outcome/competence 1, 2, and 3*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

1.1.2. Analyse, interpret and communicate data and information on the health and wellbeing and related needs of a defined population

(*Links to outcome/competence 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

1.1.3. Develops and sustains relationships with individuals and groups with the aim of improving health and social wellbeing

E.g. listens to clients and enables them to think through their feelings; enables clients to make informed choices about their health and wellbeing; actively encourages clients to think about their own health and the health of their children and families

(*Links to outcome/competence 1, 2, and 3*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

1.1.4 Identifies individuals, families and groups who are at risk and in need of further support

E.g. can recognise indicators for vulnerability and alerts practice teacher/mentor/team to risk factors and issues in care provision

(*Links to outcome/competence 2 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

1.1.5. Undertakes screening of individuals and populations and responds appropriately to findings

E.g. can recognise rationale for assessment and with support offers care within the context of public health policies; can identify groups with particular health and social needs; aware of evidence shown to prevent and reduce morbidity and mortality and improve health and social outcomes

(*Links to outcome/competence 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Domain 2: Stimulation of awareness of health needs

2.1 Collaborative working for health and wellbeing

2.2.1. Raises awareness about health and social wellbeing and related factors, services and resources

(*Links to outcome/competence 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

2.1.2. Develops, sustains and evaluates collaborative work

E.g. is beginning to identify groups and agencies (i.e. Children's Centres) and is making links to such services

(*Links to outcome/competence 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

2.2 Working with and for communities to health and wellbeing

2.2.1. Communicates with individuals, groups and communities about promoting health and well being

(*Links to outcome/competence 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

2.2.2. Raises awareness about the actions that individuals and groups can take to improve their health and wellbeing.

(*Links to outcome/competence 1, 2, and 3*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

2.2.3. Develop capacity and confidence of individuals and groups, including families and communities, to influence and use available services, information and skills, acting as advocate where appropriate

(*Links to outcome/competence 1, 2, and 3*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

2.2.4 Work with others to protect the public's health and well being from specific risks

(*Links to outcome/competence 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Domain 3: Influence on policies affecting health

3.1 Developing health programmes and services and reducing inequalities

3.1.1. Work with others to plan, implement and evaluate programmes and projects to improve health and wellbeing

(*Links to outcome/competence 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

3.1.2. Identify and evaluate service provision and support networks for individuals, families and groups in the local area or setting
(*Links to outcome/competence 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

3.2 Policy and strategy development and implementation to improve health and wellbeing
3.2.1. Appraises policies and recommends changes to improve health and wellbeing
(*Links to outcome/competence 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

3.2.2. Interpret and apply health and safety legislation and approved codes of practice with regard for the environment, wellbeing and protection of those who work in the wider community
E.g. prevents and controls infection; promotes health, safety and security in the working environment

(*Links to outcome/competence 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

3.2.3. Contribute to policy development

3.2.4. Influence policies affecting health

(*Links to outcome/competence 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

3.3 Research and development to improve health and wellbeing

3.3.1. Develop, implement, evaluate and improve practice on the basis of research, evidence and evaluation

(*Links to outcome/competence 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Domain 4: Facilitation of health enhancing activities

4.1 Promoting and protecting the populations health and wellbeing

4.1.1. Works in partnership with others to prevent the occurrence of needs and risks related to health and wellbeing

(*Links to outcome/competence 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

4.1.2. Works in partnership with others to protect the public's health and wellbeing from specific risks

(*Links to outcome/competence 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

4.2 Developing quality and risk management within an evaluative culture

4.2.1. Prevent, identify and minimise risk of interpersonal abuse or violence, safeguarding children and other vulnerable people, initiating the management of cases involving potential abuse or violence where needed

(*Links to outcome/competence, 2 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

4.3 Strategic leadership for health and wellbeing

4.3.1. Apply leadership skills and manage projects to improve health and wellbeing

(*Links to outcome/competence, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

4.3.2. Plan, deliver and evaluate programmes to improve the health and wellbeing of individuals and groups

(*Links to outcome/competence, 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

4.4 Ethically manages self, people and resources to improve health and wellbeing

4.4.1. Manages teams, individuals and resources ethically and effectively
E.g. Demonstrates a respectful attitude, uses appropriate language

(*Links to outcome/competence, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

Are there any areas of student performance that you would like to commend?

Are there any areas of student performance that concern you?

Student performs skills at an appropriate level of competence	Yes	No

I confirm that this student practises at the required level of proficiency to pass this practice assessment and progress into consolidated practice	Yes	No

Practice Teachers signature	Print name	Date

To be completed by mentor participating in assessment		
Supported by: Mentor's signature	Print name	Date
I confirm that there has been no falsification of evidence within this document (Before signing please read academic integrity statement for students in your student handbook)		
Student's signature	Print name	Date

Student's comments	
Student's signature	Date

Mentor / Practice Teacher Information

Grading practice grid – level 6

Communication skills

Exceptional 80+	Excellent (70+)	Very good (60-69)	Good (50-59)	Pass (40-49)
Exemplary communication, lucid & fluent. Initiates innovative strategies for communication towards children & their families. S PT	Communication consistently articulate, well-ordered & fluent. Consistently adopts flexible & imaginative strategies to tailor communication to needs of children & families. S PT	Very good communication, clear & well-organised. Very good, flexible strategies to tailor communication to needs of children & families. S PT	Good, clear communication but may not always be well-organised. Good strategies to tailor communication to needs of children & families. S PT	Communication adequate & safe although sometimes poorly organised. Attempt made to vary strategies according to needs of children & families. S PT
Exemplary listening skills consistently evident including positive non-verbal cues & checking for understanding. S PT	Excellent listening skills consistently evident, including positive non-verbal cues & checking for understanding. S PT	Very good listening skills including positive non-verbal cues evident. S PT	Listening skills evident, including checking for understanding. S PT	Listening skills apparent & safe although woman & family's verbal & non-verbal cues may not always be recognised. S PT
Exemplary written records, comprehensive, detailed, accurate & well-organised, reflecting profound understanding of current evidence base throughout different practice settings. S PT	Written records consistently comprehensive, detailed, accurate, well-organised, reflecting current evidence base throughout different practice settings. S PT	Very good written records: detailed, well- organised & accurate, reflecting current evidence base throughout different practice settings. S PT	Written records sufficiently detailed, organised & accurate, reflecting current evidence base throughout different practice settings. S PT	Written records adequately detailed, accurate & safe, reflecting current evidence base throughout different practice settings. May not always be well-organised. S PT
Innovative & proactive input to planning care within multi-disciplinary team. Competent in handling differences of opinion & challenging appropriately. Acts as innovative & insightful role model for junior colleagues. S PT	Communicates confidently & proactively within multi-disciplinary team in planning care. Confident in handling differences of opinion & challenging appropriately. Acts as insightful role model for junior colleagues. S PT	Communicates confidently & proactively within multi-disciplinary team in planning care. Capable in handling differences of opinion & able to challenge appropriately. Acts as role model for junior colleagues. S PT	Communicates proactively with multi-disciplinary team with evidence of input to care plan. Able to manage differences of opinion & challenge appropriately. Acts as role model for junior colleagues. S PT	Communication with multi-disciplinary team safe & sufficient to inform, with adequate evidence of proactive input to care planning. Can challenge appropriately & seek support to manage differences of opinions. Acts as role model for junior students. S PT

S = Student Self Assessment PT = Practice Teacher Assessment TOTAL =

Mentor / Practice Teacher Information

Clinical skills

Exceptional 80+	Excellent (70+)	Very good (60-69)	Good (50-59)	Pass (40-49)
Exemplary evidence based practice underpinned by & integrated with outstanding knowledge base. Innovative critical thinking in evidence throughout practice settings. S PT	Evidence based practice consistently underpinned by & integrated with comprehensive knowledge base. Excellent critical thinking in evidence throughout practice settings. S PT	Very good evidence based practice underpinned by & integrated with broad knowledge base. Substantial critical thinking in evidence throughout practice settings. S PT	Good practice underpinned by & integrated with relevant knowledge base. Critical thinking evident throughout practice settings. S PT	Safe practice is underpinned by & integrated with adequate knowledge base. Critical thinking evident although this may not be so evident in unfamiliar practice settings. S PT
Exemplary practice to maintain safe environment for self, families & colleagues. Outstanding knowledge of current legislation & guidelines. S PT	Practice is consistently excellent to maintain safe environment for self, families & colleagues. Excellent knowledge of current legislation & guidelines. S PT	Very good practice to maintain safe environment for self, families & colleagues. Very good knowledge of current legislation & guidelines. S PT	Good practice to maintain safe environment for self, families & colleagues. Good knowledge of current legislation & guidelines. S PT	Practises to maintain safe environment for self, families & colleagues. Adequate knowledge of current legislation & guidelines. S PT
Provides exemplary care in proficient, co-ordinated & confident manner. S PT	Consistently provides excellent care in proficient, co-ordinated & confident manner. S PT	Provides very good care in competent, co-ordinated & confident manner. S PT	Provides good care in competent, co-ordinated manner. S PT	Provides safe care; may require some support. S PT
Demonstrates exemplary understanding of scope of practice & recognition of deviation from normal. Refers appropriately. S PT	Consistently demonstrates excellent understanding of scope of practice & recognition of deviation from normal. Refers appropriately S PT	Demonstrates very good understanding of scope of practice & clear recognition of deviation from normal. Refers appropriately. S PT	Demonstrates good understanding of scope of practice & clear recognition of deviation from normal. Refers appropriately. S PT	Practises safely within scope of practice. Recognises deviation from normal but may require support to refer appropriately. S PT

S = Student Self Assessment PT = Practice Teacher Assessment TOTAL =

Mentor / Practice Teacher Information

Professional standards and management skills

Exceptional 80+	Excellent (70+)	Very good (60-69)	Good (50-59)	Pass (40-49)
Exemplary ability to manage & prioritise own workload. Confident in managing competing needs & situations throughout practice settings.	Excellent ability to manage & prioritise own workload. Confident in managing competing needs & situations throughout practice settings.	Very good ability to manage & prioritise own workload. Confident in managing competing needs & situations in majority of practice settings.	Good ability to manage & prioritise own workload. Able to manage competing needs & situations in some practice settings.	Able to safely manage & prioritise own workload.
S PT	S PT	S PT	S PT	S PT
Comprehensively recognises professional accountability & fully able to justify own actions. Reflects insightfully on personal development & practice.	Consistently recognises professional accountability & able to justify own actions. Reflects insightfully on personal development & practice.	Recognises professional accountability & able to justify own actions. Very good evidence of meaningful reflection on personal development & practice.	Recognises professional accountability & able to justify own actions. Good evidence of reflection on personal development & practice.	Safely demonstrates awareness of accountability & able to justify own actions. Reflects on personal development & practice.
S PT	S PT	S PT	S PT	S PT
Exemplary personal values & attitudes consistently evident throughout practice settings.	Excellent personal values & attitudes consistently evident throughout practice settings.	Very good personal values & attitudes evident throughout practice settings.	Sound personal values & attitudes evident throughout practice settings.	Acceptable personal values & attitudes evident throughout practice/no unsafe attitudes.
S PT	S PT	S PT	S PT	S PT
Exemplary behaviour ensuring that personal values do not compromise care. Takes full account of professional, ethical & anti-discriminatory codes in practice.	Excellent behaviour ensuring that personal values do not compromise care provided. Consistently takes full account of professional, ethical & anti-discriminatory codes & practices. Consistently integrates into practice.	Very good behaviour ensuring that personal values do not compromise care. Demonstrates very good awareness of professional, ethical & anti-discriminatory codes & practices. Very good evidence of integration into practice.	Good behaviour ensuring that personal values do not compromise care. Demonstrates good awareness of professional, ethical & anti-discriminatory codes & practices. Good evidence of integration into practice.	Acceptable behaviour ensuring that personal values do not compromise care. Demonstrates reasonable & safe awareness of professional, ethical & anti-discriminatory codes & practices. Evidence of integration into practice.
S PT	S PT	S PT	S PT	S PT

S = Student Self Assessment PT = Practice Teacher Assessment TOTAL =

Mentor / Practice Teacher Information

Communication skills	Total	
Clinical skills	Total	
Professional standards and management skills	Total	
Subtotal		divided
Final Awarded Grade		%

Practice teacher's name		Mentor's name	
Practice teacher's signature		Mentor's signature	
Date		Date	
Moderator's name		Moderator's signature	
Date			

Mentor / Practice Teacher Information

Learning agreement

This should only be completed if the student has referred on any competencies at the final assessment point.

Competency to be achieved	Activities and experiences that should lead to achievement

Date for review			
Student's signature		Date	
Practice teacher's signature		Date	
Academic tutor's signature		Date	

Mentor / Practice Teacher Information

Review of learning agreement

This should only be completed if the student has referred on any competencies at the final assessment point.

Competency	Evidence demonstrating achievement of competency

I confirm that this student now practises at the required level of proficiency to pass this practice assessment	Yes	No

Practice teacher's signature		Date	
Student's signature		Date	
Academic tutor's signature		Date	

Student's comments	
Student's signature	Date

Mentor / Practice Teacher Information

Assessment of Consolidated Practice

Checklist of responsibilities to be completed by student	
It is your responsibility to carry your assessment of practice document with you at all times, ensure that you keep it up to date and present it to the relevant people for signatures	
Complete self assessment prior to start of practice experience	
Ensure that you and your mentor have discussed the student charter	
Initial review – identify learning needs and devise action plan in conjunction with your mentor	
Intermediate review – complete and sign your review of progress, review your learning needs and action plan	
Client and family involvement in practice assessment	
Complete self assessment prior to your final review	
Final review – sign to confirm that you have not falsified any evidence	
Ensure that the following are up to date: • Competencies/outcomes • Records of clinical experience • Absence record	

Checklist of responsibilities to be completed by practice teacher/mentor	
Sign registrant signature sheet	
Complete and sign initial review	
Complete Practice Induction	
Review Record of Clinical Experience	
Intermediate review	
Review Competencies/outcomes	
Final review	
Sign Practice Placement Record	
Verify Absence Record if applicable	
Formulate learning agreement in conjunction with student and tutor if student is referred	
Complete review of learning agreement if applicable	

Mentor / Practice Teacher Information

Absence record

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

Record of absences made up

Dates		Number of made up days/hours	Practice teachers/mentor's signature
From	To		

I verify that this is an accurate record of this student's absence
Practice teachers/mentor's signature

Outstanding hours carried forward	Academic tutor's signature

Mentor / Practice Teacher Information

Professional Development: self assessment by student at commencement of practice experience

Self assessment based on previous professional experience (In first experience you may also draw on life experience prior to commencing the programme)	
Strengths	Weaknesses
Concerns	Expectations
Please discuss the key points from this assessment with your practice teacher prior to completing an action plan for this practice experience	

Mentor / Practice Teacher Information

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 practice teacher and mentor, and is based upon the self assessment, previous practice experiences.

Learning needs	Action plan

Student's signature	Date
Practice teachers signature	Date
Proposed date for interim/midpoint review	

Mentor / Practice Teacher Information

Interim assessment

Student's review of progress

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

Student's signature	Date

Practice teachers review of progress

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

Practice teacher's signature	Date

Mentor / Practice Teacher Information

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
Practice teacher's signature	Date
Proposed date for final interview	

Mentor / Practice Teacher Information

Client and family involvement in practice

Consent must be gained from the client or family with the practice teacher/mentor present to participate in this exercise. This exercise can be undertaken as a discussion and the practice teacher/mentor should then record the points raised below.

We would like to hear from you about your views of the way the student school nurse has 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.

Please comment on (student name) 's strengths and weaknesses		
Please state what you feel they have done well		
Please state what they could do to improve their school nurse care		
Please add any other information you think would be helpful		
Date	Practitioner's Signature	Clinical team
	Student's signature	

Mentor / Practice Teacher Information

Professional Development: self assessment by student at final assessment

Self assessment of practice experience	
Key achievements identified during this practice experience	Key areas for development identified as a result of this practice experience
What is to be achieved during future practice/preceptorship	What activities and experiences should lead to achievement
Please discuss the key points from this assessment with your mentor prior to your final assessment	

Mentor / Practice Teacher Information

Final review for entry to Part 3 of the NMC register

Please provide information on the student's performance of the following proficiencies (taken from the Standards of proficiency for specialist community public health nurses (NMC 2004).

Domain 1: Search for Health Needs

1.1 Surveillance and assessment of the population's health and wellbeing

1.1.1 Collects and structures data and information on the health and well being and related needs of a defined population

(*Links to outcome/competence 1, 2, and 3*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

1.1.2. Analyse, interpret and communicate data and information on the health and wellbeing and related needs of a defined population

(*Links to outcome/competence 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

1.1.3. Develops and sustains relationships with individuals and groups with the aim of improving health and social wellbeing

E.g. listens to clients and enables them to think through their feelings; enables clients to make informed choices about their health and wellbeing; actively encourages clients to think about their own health and the health of their children and families

(*Links to outcome/competence 1, 2, and 3*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

1.1.4 Identifies individuals, families and groups who are at risk and in need of further support

E.g. can recognise indicators for vulnerability and alerts practice teacher/mentor/team to risk factors and issues in care provision

(*Links to outcome/competence 2 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

1.1.5. Undertakes screening of individuals and populations and responds appropriately to findings

E.g. can recognise rationale for assessment and with support offers care within the context of public health policies; can identify groups with particular health and social needs; aware of evidence shown to prevent and reduce morbidity and mortality and improve health and social outcomes

(*Links to outcome/competence 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Domain 2: Stimulation of awareness of health needs

2.1 Collaborative working for health and wellbeing

2.2.1. Raises awareness about health and social wellbeing and related factors, services and resources

(*Links to outcome/competence 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

2.2.2. Develops, sustains and evaluates collaborative work

E.g. is beginning to identify groups and agencies (i.e. Children's Centres) and is making links to such services

(*Links to outcome/competence 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

2.3 Working with and for communities to health and wellbeing

2.3.1. Communicates with individuals, groups and communities about promoting health and well being

(*Links to outcome/competence 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

2.3.2. Raises awareness about the actions that individuals and groups can take to improve their health and wellbeing.

(*Links to outcome/competence 1, 2, and 3*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

2.2.3. Develop capacity and confidence of individuals and groups, including families and communities, to influence and use available services, information and skills, acting as advocate where appropriate

(*Links to outcome/competence 1, 2, and 3*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

2.3.4 Work with others to protect the public's health and well being from specific risks

(*Links to outcome/competence 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Domain 3: Influence on policies affecting health

3.1 Developing health programmes and services and reducing inequalities

3.1.1. Work with others to plan, implement and evaluate programmes and projects to improve health and wellbeing

(*Links to outcome/competence 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

3.1.2. Identify and evaluate service provision and support networks for individuals, families and groups in the local area or setting
(*Links to outcome/competence 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

3.2 Policy and strategy development and implementation to improve health and wellbeing
3.2.1. Appraises policies and recommends changes to improve health and wellbeing
(*Links to outcome/competence 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

3.2.2. Interpret and apply health and safety legislation and approved codes of practice with regard for the environment, wellbeing and protection of those who work in the wider community
E.g. prevents and controls infection; promotes health, safety and security in the working environment

(*Links to outcome/competence 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

3.2.3. Contribute to policy development

3.2.4. Influence policies affecting health

(*Links to outcome/competence 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

3.3 Research and development to improve health and wellbeing

3.3.1. Develop, implement, evaluate and improve practice on the basis of research, evidence and evaluation

(*Links to outcome/competence 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Domain 4: Facilitation of health enhancing activities

4.1 Promoting and protecting the populations health and wellbeing

4.1.1. Works in partnership with others to prevent the occurrence of needs and risks related to health and wellbeing

(*Links to outcome/competence 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

4.1.2. Works in partnership with others to protect the public's health and wellbeing from specific risks

(*Links to outcome/competence 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

4.2 Developing quality and risk management within an evaluative culture

4.2.1. Prevent, identify and minimise risk of interpersonal abuse or violence, safeguarding children and other vulnerable people, initiating the management of cases involving potential abuse or violence where needed.

(*Links to outcome/competence 2 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

4.3 Strategic leadership for health and wellbeing

4.3.1. Apply leadership skills and manage projects to improve health and wellbeing

(*Links to outcome/competence, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

4.3.2. Plan, deliver and evaluate programmes to improve the health and wellbeing of individuals and groups

(*Links to outcome/competence, 1, 2, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

4.4 Ethically manages self, people and resources to improve health and wellbeing

4.4.1. Manages teams, individuals and resources ethically and effectively
E.g. Demonstrates a respectful attitude, uses appropriate language

(*Links to outcome/competence, 3 and 4*)

Please use examples of evidence from practice to support your assessment			
Pass	Fail	Signature	
Pass after initial failure		Signature	Date

Mentor / Practice Teacher Information

Are there any areas of student performance that you would like to commend?

Are there any areas of student performance that concern you?

Student performs skills at an appropriate level of competence	Yes	No

I confirm that this student passed all competencies and therefore practises at the required level of proficiency to enter part 3 of the NMC register	Yes	No

Practice Teachers signature	Print name	Date

To be completed by mentor participating in assessment		
Supported by: Mentor's signature	Print name	Date
I confirm that there has been no falsification of evidence within this document (Before signing please read academic integrity statement for students in your pre-registration student handbook)		
Student's signature	Print name	Date

Student's comments	
Student's signature	Date

Mentor / Practice Teacher Information

Grading practice grid – level 6

Communication skills

Exceptional 80+	Excellent (70+)	Very good (60-69)	Good (50-59)	Pass (40-49)
Exemplary communication, lucid & fluent. Initiates innovative strategies for communication towards children & their families. S PT	Communication consistently articulate, well-ordered & fluent. Consistently adopts flexible & imaginative strategies to tailor communication to needs of children & families. S PT	Very good communication, clear & well-organised. Very good, flexible strategies to tailor communication to needs of children & families. S PT	Good, clear communication but may not always be well-organised. Good strategies to tailor communication to needs of children & families. S PT	Communication adequate & safe although sometimes poorly organised. Attempt made to vary strategies according to needs of children & families. S PT
Exemplary listening skills consistently evident including positive non-verbal cues & checking for understanding. S PT	Excellent listening skills consistently evident, including positive non-verbal cues & checking for understanding. S PT	Very good listening skills including positive non-verbal cues evident. S PT	Listening skills evident, including checking for understanding. S PT	Listening skills apparent & safe although woman & family's verbal & non-verbal cues may not always be recognised. S PT
Exemplary written records, comprehensive, detailed, accurate & well-organised, reflecting profound understanding of current evidence base throughout different practice settings. S PT	Written records consistently comprehensive, detailed, accurate, well-organised, reflecting current evidence base throughout different practice settings. S PT	Very good written records: detailed, well- organised & accurate, reflecting current evidence base throughout different practice settings. S PT	Written records sufficiently detailed, organised & accurate, reflecting current evidence base throughout different practice settings. S PT	Written records adequately detailed, accurate & safe, reflecting current evidence base throughout different practice settings. May not always be well-organised. S PT
Innovative & proactive input to planning care within multi-disciplinary team. Competent in handling differences of opinion & challenging appropriately. Acts as innovative & insightful role model for junior colleagues. S PT	Communicates confidently & proactively within multi-disciplinary team in planning care. Confident in handling differences of opinion & challenging appropriately. Acts as insightful role model for junior colleagues. S PT	Communicates confidently & proactively within multi-disciplinary team in planning care. Capable in handling differences of opinion & able to challenge appropriately. Acts as role model for junior colleagues. S PT	Communicates proactively with multi-disciplinary team with evidence of input to care plan. Able to manage differences of opinion & challenge appropriately. Acts as role model for junior colleagues. S PT	Communication with multi-disciplinary team safe & sufficient to inform, with adequate evidence of proactive input to care planning. Can challenge appropriately & seek support to manage differences of opinions. Acts as role model for junior students. S PT

S = Student Self Assessment PT = Practice Teacher Assessment TOTAL =

Mentor / Practice Teacher Information

Clinical skills

Exceptional 80+	Excellent (70+)	Very good (60-69)	Good (50-59)	Pass (40-49)
Exemplary evidence based practice underpinned by & integrated with outstanding knowledge base. Innovative critical thinking in evidence throughout practice settings. S PT	Evidence based practice consistently underpinned by & integrated with comprehensive knowledge base. Excellent critical thinking in evidence throughout practice settings. S PT	Very good evidence based practice underpinned by & integrated with broad knowledge base. Substantial critical thinking in evidence throughout practice settings. S PT	Good practice underpinned by & integrated with relevant knowledge base. Critical thinking evident throughout practice settings. S PT	Safe practice is underpinned by & integrated with adequate knowledge base. Critical thinking evident although this may not be so evident in unfamiliar practice settings. S PT
Exemplary practice to maintain safe environment for self, families & colleagues. Outstanding knowledge of current legislation & guidelines. S PT	Practice is consistently excellent to maintain safe environment for self, families & colleagues. Excellent knowledge of current legislation & guidelines. S PT	Very good practice to maintain safe environment for self, families & colleagues. Very good knowledge of current legislation & guidelines. S PT	Good practice to maintain safe environment for self, families & colleagues. Good knowledge of current legislation & guidelines. S PT	Practises to maintain safe environment for self, families & colleagues. Adequate knowledge of current legislation & guidelines. S PT
Provides exemplary care in proficient, co-ordinated & confident manner. S PT	Consistently provides excellent care in proficient, co-ordinated & confident manner. S PT	Provides very good care in competent, co-ordinated & confident manner. S PT	Provides good care in competent, co-ordinated manner. S PT	Provides safe care; may require some support. S PT
Demonstrates exemplary understanding of scope of practice & recognition of deviation from normal. Refers appropriately. S PT	Consistently demonstrates excellent understanding of scope of practice & recognition of deviation from normal. Refers appropriately. S PT	Demonstrates very good understanding of scope of practice & clear recognition of deviation from normal. Refers appropriately. S PT	Demonstrates good understanding of scope of practice & clear recognition of deviation from normal. Refers appropriately. S PT	Practises safely within scope of practice. Recognises deviation from normal but may require support to refer appropriately. S PT

S = Student Self Assessment PT = Practice Teacher Assessment TOTAL =

Mentor / Practice Teacher Information

Professional standards and management skills

Exceptional 80+	Excellent (70+)	Very good (60-69)	Good (50-59)	Pass (40-49)
Exemplary ability to manage & prioritise own workload. Confident in managing competing needs & situations throughout practice settings.	Excellent ability to manage & prioritise own workload. Confident in managing competing needs & situations throughout practice settings.	Very good ability to manage & prioritise own workload. Confident in managing competing needs & situations in majority of practice settings.	Good ability to manage & prioritise own workload. Able to manage competing needs & situations in some practice settings.	Able to safely manage & prioritise own workload.
S PT	S PT	S PT	S PT	S PT
Comprehensively recognises professional accountability & fully able to justify own actions. Reflects insightfully on personal development & practice.	Consistently recognises professional accountability & able to justify own actions. Reflects insightfully on personal development & practice.	Recognises professional accountability & able to justify own actions. Very good evidence of meaningful reflection on personal development & practice.	Recognises professional accountability & able to justify own actions. Good evidence of reflection on personal development & practice.	Safely demonstrates awareness of accountability & able to justify own actions. Reflects on personal development & practice.
S PT	S PT	S PT	S PT	S PT
Exemplary personal values & attitudes consistently evident throughout practice settings.	Excellent personal values & attitudes consistently evident throughout practice settings.	Very good personal values & attitudes evident throughout practice settings.	Sound personal values & attitudes evident throughout practice settings.	Acceptable personal values & attitudes evident throughout practice/no unsafe attitudes.
S PT	S PT	S PT	S PT	S PT
Exemplary behaviour ensuring that personal values do not compromise care. Takes full account of professional, ethical & anti-discriminatory codes in practice.	Excellent behaviour ensuring that personal values do not compromise care provided. Consistently takes full account of professional, ethical & anti-discriminatory codes & practices. Consistently integrates into practice.	Very good behaviour ensuring that personal values do not compromise care. Demonstrates very good awareness of professional, ethical & anti-discriminatory codes & practices. Very good evidence of integration into practice.	Good behaviour ensuring that personal values do not compromise care. Demonstrates good awareness of professional, ethical & anti-discriminatory codes & practices. Good evidence of integration into practice.	Acceptable behaviour ensuring that personal values do not compromise care. Demonstrates reasonable & safe awareness of professional, ethical & anti-discriminatory codes & practices. Evidence of integration into practice.
S PT	S PT	S PT	S PT	S PT

S = Student Self Assessment PT = Practice Teacher Assessment TOTAL =

Mentor / Practice Teacher Information

Communication skills	Total	
Clinical skills	Total	
Professional standards and management skills	Total	
Subtotal		divided
Final Awarded Grade		%

Practice teacher's name		Mentor's name	
Practice teacher's signature		Mentor's signature	
Date		Date	
Moderator's name		Moderator's signature	
Date			

Mentor / Practice Teacher Information

Learning agreement

This should only be completed if the student has referred on any competencies at the final assessment point.

Competency to be achieved	Activities and experiences that should lead to achievement

Date for review			
Student's signature		Date	
Practice teacher's signature		Date	
Academic tutor's signature		Date	

Mentor / Practice Teacher Information

Review of learning agreement

This should only be completed if the student has referred on any competencies at the final assessment point.

Competency	Evidence demonstrating achievement of competency

I confirm that this student has now passed all competencies and therefore practises at the required level of proficiency to enter part 3 of the NMC register	Yes	No

Practice teacher's signature		Date	
Student's signature		Date	
Academic tutor's signature		Date	

Mentor / Practice Teacher Information

References

Department of Health [DH] (2009) *Healthy child programme 5– 19*, DH Publications: London

Department for Education and Schools [DfES] (2006) School Nurse: Practice Development Resource Pack; DfES Publications: Nottingham.

Field, F. (2010) *Independent Report on Child Poverty* Cabinet Office: London.
Available online at: http://www.nfm.org.uk/component/jdownloads/finish/74/333

Marmot, M (2011) *Fair Society, Healthy Lives: The Marmot Review.* The marmot review: London.
Available online at: www.ucl.ac.uk/marmotreview

Munro, E (2011) *The Munro Review of Child Protection: Final Report - A child-centred system.* The Stationary Office (TSO): London.
Available online at: https://www.education.gov.uk/publications/eOrderingDownload/Munro-Review.pdf

Nursing and Midwifery Council [NMC] (2004) *Standards of proficiency for specialist community public health nurses.* NMC: London

NMC (2008) *Standards to support learning and assessment in practice.* NMC: London.

NMC (2008) *The Code: Standards of conduct, performance and ethics for nurses and midwives.* NMC: London

Royal College of Nursing [RCN] (2008) An RCN tool kit for school nurses: RCN Publications: London.
Available online at: http://www.rcn.org.uk/__data/assets/pdf_file/0012/201630/003223.pdf

Mentor / Practice Teacher Information

Appendix 1: Record of meetings between practice teacher, student and mentor

Date	Time (from/to)	Persons present	Comments/outcomes/actions

Mentor / Practice Teacher Information

Record of meetings between practice teacher, student and mentor

Date	Time (from/to)	Persons present	Comments/outcomes/actions

Mentor / Practice Teacher Information

Appendix 2: Record of student and academic meetings in practice (e.g. link tutor/academic tutor/practice teacher/mentor)

Date of visit to practice:	Those present:
Name and role of visiting academic (e.g. academic tutor/link tutor)	
Purpose of visit	
In discussion using the Southampton Values Based Model explore how the SCPHN student has enhanced the quality of care, the service user perception of care or service	
Heart: intrinsic motivation (*Evidence that the student cares, wants to make a difference and is committed to learning in and from practice*)	
Nerve: Self-belief and self-efficacy (*Evidence that the student can represent themselves and advocate for clients and/or carers*)	
Brain: Critical and analytical skills (*evidence of the application of appropriate theory/research to SCPHN practice*)	

Student signature	Date
Practice teacher/Mentor signature	Date
Academic tutor signature	Date

Mentor/Practice Teacher Information

Date of visit to practice:	Those present:
Name and role of visiting academic (e.g. academic tutor/link tutor)	
Purpose of visit	
In discussion using the Southampton Values Based Model explore how the SCPHN student has enhanced the quality of care, the service user perception of care or service	
Heart: intrinsic motivation (*Evidence that the student cares, wants to make a difference and is committed to learning in and from practice*)	
Nerve: Self-belief and self-efficacy (*Evidence that the student can represent themselves and advocate for clients and/or carers*)	
Brain: Critical and analytical skills (*evidence of the application of appropriate theory/research to SCPHN practice*)	

Student signature	Date
Practice teacher/Mentor signature	Date
Academic tutor signature	Date

Mentor / Practice Teacher Information

Glossary of terms (NMC 2004)

Collaborative working includes working with:

- others working in health and social care
- those working in social security, benefits, education, housing and the environment
- those working in advice, guidance and counselling services
- employers and employees in a range of different sectors
- voluntary agencies
- community networks
- legal and judicial agencies.

A community is a group of people living or working in a geographically defined area (geographical community) or who have a characteristic, cause, need or experience in common (community of interest). A community is one form of group.

Factors that affect health and social wellbeing are the range of personal, social, economic and environmental factors that determine the health status of individuals or populations. They include:

- an individual's age, sex, family history or ethnic background
- biological factors such as disability, genetics, infections, etc
- behavioural factors such as diet and nutrition, smoking, use of drugs and alcohol, sexual behaviour, exercise, etc
- environmental factors such as housing, air quality, noise, pollution, exposure to contamination, emissions or infestations, potential contact with disease carriers or noxious substances, etc
- positive factors such as the degree of social inclusion, the quality and nature of social support, networks, relationships and education; training and employment; income, availability and accessibility of services, transport, technology, etc
- risk factors such as poverty (relative and absolute); crime (perceived and actual); exposure to abuse, bullying, racism, social exclusion or poor physical environment.

The term **'group'** includes:

- families (one form of social group) – partners, relatives and friends, whether living in the same household or not
- those brought together by a common interest (e.g. work groups, user groups and community action groups); see 'A community'
- those brought together by a common aspect (e.g. disability, age, gender and faith, or by living or working in the same social area); see 'A community'.

Facilitation involves enabling groups and individuals to develop their knowledge, skills, confidence and resources in relation to:

- their own health and social wellbeing
- needs related to health and social wellbeing such as promoting independence, managing diseases, making decisions related to protection and prevention
- addressing factors that affect their health and social wellbeing
- managing the changes and transitions in their lives such as parenthood, ageing, caring, increasing disability, lack of employment, bereavement and de-industrialisation in communities.

Health and wellbeing

Health is a *"state of complete physical, social and mental wellbeing and not merely the absence of disease or infirmity. Within the context of health promotion, health has been considered less as an abstract state and more as a means to an end which can be expressed in functional terms as a resource which permits people to lead an individually, socially and economically productive life. Health is a resource for everyday life, not the object of living. It is a positive concept emphasising social and personal resources as well as physical capabilities."* (WHO 1986).

Individuals

Community public health practice is directed at individuals, families and groups in a population undifferentiated by diagnosis, including babies and children, young people, people of working age and older people.

Interpersonal violence includes:

Family and intimate partner violence, which includes child abuse, domestic violence and abuse of the elderly, usually but not exclusively taking place in the home between individuals known to each other; and community violence, which generally takes place outside the home between individuals who are not related and who may or may not know each other; it includes youth violence, bullying and violence in institutions such as schools, workplaces, prisons and nursing homes.

Needs include those related to:

- social health and wellbeing
- emotional health and wellbeing
- mental health and wellbeing
- physical health and wellbeing
- recognised and hitherto unrecognised needs.

Mentor / Practice Teacher Information

Policies may:

- be directed specifically at health and wellbeing
- be indirect, but have an impact on health and wellbeing, such as employment, housing, transport, education.

Programmes or projects may be:

- designed to increase social inclusion and reduce inequalities such as targeting services to particular groups, community development
- those designed to increase social inclusion and promote health and social wellbeing for individuals such as, breastfeeding support, well-woman/man, smoking cessation, parenting classes, etc
- designed to prevent ill health, such as prescribing, the control of infection, disease prevention and the prevention of communicable disease.

Public health is the science and art of promoting health, preventing disease, and prolonging life through the organised efforts of society. It is a social and political concept aimed at improving health, prolonging life and improving the quality of life among whole populations through health promotion, disease prevention and other forms of health intervention. As in the 'new public health', practitioners in this field draw on a comprehensive understanding of the ways in which lifestyles and living conditions determine health status, and a recognition of the need to mobilise resources and make sound investments in policies, programmes and services which create, maintain and protect health by supporting healthy lifestyles and creating supportive environments for health.

Settings are the place or social context in which people engage in daily activities in which environmental, organisational and personal factors interact to affect health and wellbeing.

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