Name
Number
Cohort
Field
Personal Tutor

PRACTICE ASSESSMENT DOCUMENT 2.0

NURSING

PART 1

BSc Nursing with Registration as an Adult, Children's or Mental Health Nurse

PLPAD 2.0, Future Nurse: Standards of proficiency for registered nurses, (NMC 2018)































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



This Practice Assessment Document has been developed by the Pan London Practice Learning Group in collaboration with practice partners, mentors, academic staff, students and service users across the London Region. This work has been led by Jane Fish as Project Manager.

Membership of the Pan London Practice Learning Group (PLPLG)

- Kathy Wilson, Associate Professor, Head of Practice Based Learning, Middlesex University (Chair)
- Nicki Fowler, Programme Leader/Professional Lead, Learning Disabilities, University of Greenwich (Vice Chair)
- Lynn Quinlivan, Practice Programme Co-Ordinator for Pre-Registration Nursing, University of Hertfordshire
- Sue Woodward, Senior Lecturer, King's College London
- Julie Bliss, Head of Practice Learning, King's College London
- Karen Chandler, Associate Professor, Director of Practice Learning, Kingston University and St George's, University of London
- Alex Levine, Faculty Director Practice Learning, Canterbury Christ Church University
- Julie MacLaren, Deputy Divisional Lead Practice Education, City, University of London
- Michelle Ellis, Senior Lecturer, Child Health, City, University of London
- Yvonne Halpin, Associate Professor (Practice Learning), London South Bank University
- Nigel Davies, Head of Pre-Registration Nursing, University of East London
- Barbara Hoyle, Head of Practice Education University of West London
- Jo Rixon, Principal Lecturer for Practice Learning, Buckinghamshire New University
- Rachel Bacon, Associate Teacher Practice Learning, The University of Nottingham (MEPLG representative)
- David Marston, Senior Strategic Programmes, Planning and Performance Manager, Quality Patient Safety and Commissioning Team (London), Health Education England
- Jane Fish, PLPAD Project Manager
- Ian Grant-Rowan, (PLPAD Document Design) Systems Support/Projects, Middlesex University
- Clara Longley, Gregory Brinsdon, Project Administrator, Middlesex University

The development of this document was funded by Health Education England (London)

© PLPLG 2018 All rights reserved. No part of this work may be photocopied, recorded or otherwise reproduced without the prior permission of the Pan London Practice Learning Group.





























Contents	Page
Welcome to the Practice Assessment Document (PAD)	3
Guidance for Using the PAD	5
University Specific Guidelines	6
Criteria for Assessment in Practice	7
List of Practice Supervisors	8
List of Practice Assessors	9
Placement 1	10
Placement 2	28
Placement 3	46
Assessment of Proficiencies	64
Part 1 Episode of Care Formative	71
Part 1 Episode of Care Summative	74
Part 1 Medicines Management	77
Action Plan	80
Record of Practice Hours	82

Statement regarding the use of the term "Parts"

There are three Practice Assessment Documents in total, which incorporate the range of Future Nurse Standards of proficiency (NMC 2018). "Parts" in this context is used to represent the range of outcomes to be achieved by students at different levels. These parts may differ from the parts of the education programme that will be defined locally by each university provider.

Welcome to the Practice Assessment Document (PAD)

Student responsibilities

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

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

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

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

The Ongoing Achievement Record (OAR) is a separate document that summarises your achievements in each placement and with the main document provides a comprehensive record of your professional development and performance in practice.

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

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

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

Practice Supervisor responsibilities (Registered nurse/midwife or other registered health/social care professional)

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

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

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

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

However, these staff members are encouraged to support learning and can provide valuable student feedback within the PAD on the *Record of communication/additional feedback pages*.

Practice Assessor responsibilities (Registered Nurse)

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

Practice Assessors must have appropriate equivalent experience in the student's field of practice.

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

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

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

Academic Assessor responsibilities

Academic Assessors are Registered Nurses and are nominated for each part of the educational programme. The same Academic Assessor cannot contribute to the student assessment in consecutive parts. The Academic Assessor will work in partnership with the Practice Assessor to evaluate and recommend the student for progression for each part of the educational programme. The Academic Assessor will enable scheduled communication and collaboration with the Practice Assessor and this communication can take a variety of forms.

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

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

Assessment criteria in the PAD are based on the NMC Future nurse: Standards of proficiency for registered nurses and Standards for education and training (NMC 2018). The outcome statements have been designed by the NMC to apply across all four fields of nursing practice and all care settings (NMC 2018). Students must be able to demonstrate a greater depth of knowledge and the additional more advanced skills required to meet the specific care needs of people in their chosen fields of nursing practice (NMC, 2018, p6). This Practice Assessment Document can be used in any field of practice.

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

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

Proficiencies: These reflect aspects of the 7 Platforms, communication and relationship management skills and nursing procedures (NMC 2018). These can be assessed in a range of placements, but must be achieved at least once *by the end of the Part*.

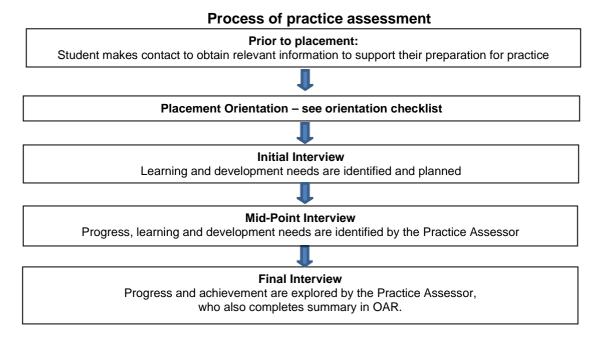
Episode of Care: This holistic assessment(s) facilitates and demonstrates the student's progress and must be achieved *by the end of the Part.*

Medicines Management: There is one assessment included in each part and each must be achieved by the end of the Part.

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

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

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



Further information / guidance is included in the university specific pages (overleaf) and in the Practice Assessment Document Guide



King's College London – Pan London Practice Assessment Document Guidelines

Preparation in university prior to student placement

Initial Interview

Meeting between student and Practice Supervisor – held within the first week of the placement (all students). Initial learning and development needs and agreement of a learning plan. Date for mid-point interview agreed.

Mid-Point Interview

This involves a review of the professional values as well as the student's overall progression and achievement to date. Feedback can be recorded by the Practice Supervisor but requires agreement/input form the Practice Assessor and student. If there are any concerns about student learning and progress, contact must be made with the nominated Academic Assessor and the link lecturer. If an Action Plan is required, the Academic Assessor must be consulted. Support can also be accessed via cohort leader or personal tutor.

Final Interview

Overall performance is reviewed and feedback from all staff in practice as well as the Academic assessor is considered. The Academic Assessor may be present or may communicate via phone/email as appropriate. All sections in PAD and OAR completed and signed as appropriate. Guidance on the requirements for each placement and part can be found on the 'Guidance for using the PAD to facilitate learning and assessment in practice' page, above.

You are permitted two attempts at a placement, in the same way that two attempts are permitted in academic work. Therefore, if you fail a placement, a second attempt will be arranged for you through a retrieval placement.

The Academic Assessor reviews documentation and action, as necessary. The Module Leader or designate will undertake moderation of submitted PADs

Assessment Board

External Examiner reviews a % of PADs

Criteria for Assessment in Practice

Overall Framework Parts 1 – 3 to be achieved by the end of the part

Guided participation in care and performing with increasing confidence and competence

Part 1

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

Part 2

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

Part 3

The decision on the level of supervision provided for students should be based on the needs of the individual student. The level of supervision can decrease with the student's increasing proficiency and confidence. (NMC, 2018, p 5)

Part 1: Guided participation in Care

'Achieved' must be obtained in all three criteria by the student

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

List of Practice SupervisorsA sample signature must be obtained for all entries within this document

Name (please print)	Job Title	Signature	Initials	Placement
(piedos pinit)				

List of Practice Assessors

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

Name	Job Title	Signature	Initials	Placement
(please print)		3		
(1)				
	l int	of Academic Academ		
		of Academic Assesso		
		of Academic Assessonust be obtained for all entries wi		
Name	A sample signature m	nust be obtained for all entries wi		Placement
			ithin this document	Placement
Name (please print)	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement
	A sample signature m	nust be obtained for all entries wi	ithin this document	Placement

Placement 1

Placement Provider: (e.g. Trust/Organisation)	
Name of Placement Area:	
Type of Experience: (e.g. Community/Ward based)	
Placement Telephone Number:	
Placement Contact Email:	
Start Date End Date	No. of Hours
Nominated person to support student and addr	ress concerns
Name:	Designation:
Contact email address:	
Practice Assessor Details:	
Name:	Designation:
Contact email address:	
Academic Assessor Details (for part):	
Name:	Designation:
Contact email address:	

Placement 1: Orientation

Flacement	1: Orientatio	ent Area 1	Placement Ar	aa 2 (if ann)
Name of Placement Area:	Placelli	ciit Aica i	i laceillelli Al	ea z (ii app.)
Name of Staff Member:				
This should be undertaken by a member of staff in the Placement Area	Initial/Date (Student)	Initial/Date (Staff signature)	Initial/Date (Student)	Initial/Date (Staff signature)
The following criteria need to be met within the first	day in placen	nent		
A general orientation to the health and social care placement setting has been undertaken				
The local fire procedures have been explained Tel				
The student has been shown the:				
Resuscitation policy and procedures have been explained Tel:				
Resuscitation equipment has been shown and explained				
The student knows how to summon help in the event of an emergency				
The student is aware of where to find local policies				
The student has been made aware of information governance requirements				
The shift times, meal times and reporting sick policies have been explained				
The student is aware of his/her professional role in practice.				
Policy regarding safeguarding has been explained				
The student is aware of the policy and process of raising concerns				
Lone working policy has been explained (if applicable)				
Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed)				
The following criteria need to be met prior to use				
The student has been shown and given a demonstration of the moving and handling equipment used in the placement area The student has been shown and given a				
demonstration of the medical devices used in the placement area				

Placement 1: Initial Interview

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

Р	lacer	nent	Area	Nan	ne:
---	-------	------	------	-----	-----

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

Professional Values in Practice (Part 1)

Students are required to demonstrate high standards of professional conduct at all times during their placements. Students should work within ethical and legal frameworks, and be able to articulate the underpinning values of The Code (NMC, 2018). Professional Values reflect a number of proficiency statements and are captured under the 4 sections of The Code.

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

Yes = Achieved, No = Not Achieved (Refer			nent in Practic	
	Achieved Mid-Point Yes/No	Initial/ Date	Achieved Final Yes/No	Initial/ Date (Final)
Prioritise people				
1. The student maintains confidentiality in accordance with the NMC code.				
2. The student is non-judgemental, respectful and courteous at all times when interacting with patients/service users/carers and all colleagues.				
3. The student maintains the person's privacy and dignity, seeks consent prior to care and advocates on their behalf.				
4. The student is caring, compassionate and sensitive to the needs of others.				
5. The student understands their professional responsibility in adopting and promoting a healthy lifestyle for the well-being of themselves and others.				
Practise effectively				
6. The student maintains consistent, safe and personcentred practice.				
7. The student is able to work effectively within the inter- disciplinary team with the intent of building professional relationships.				
8. The student makes a consistent effort to engage in the requisite standards of care and learning based on best available evidence.				
Preserve safety				
9. The student demonstrates openness (candour), trustworthiness and integrity.				
10. The student reports any concerns to the appropriate professional member of staff when appropriate e.g. safeguarding.				
11. The student demonstrates the ability to listen, seek clarification and carry out instructions safely.				
12. The student is able to recognise and work within the limitations of own knowledge, skills and professional boundaries and understand that they are responsible for their own actions.				

	Achieved Mid-Point Yes/No	Initial/ Date	Achieved Final Yes/No	Initial/ Date (Final)
Promote professionalism and trust				
13. The student's personal presentation and dress code in accordance with the local policy.	s			
14. The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement.				
15. The student demonstrates that they are self-aware and can recognise their own emotions and those of other in different situations.	S			
Mid-point assessment Practice Supervisor Name: Sig	nature:		Da	ate:
Reviewed and agreed by Practice Assessor Practice Assessor Name: Sig	nature:		Da	ite:
End point: Student reflection on meeting Profes				
Choose one example from your practice on this place NMC Code (ensure confidentiality is maintained). For ear Code to reflect on.				
Student Name: Sig	nature:		Da	te:
Final assessment - please add comments on Final In	erview Page			
Practice Assessor Name: Sig	nature:		Da	ite:

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

Placement 1: Mid-Point Interview

This discussion must take place half way through the placement

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

Placement 1: Mid-Point Review Ongoing learning and development needs

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

Following the Mid-Point interview the student is to identify their learning and development needs for the remainder of the placement and negotiate with their Practice Assessor how these will be achieved.

Learning and development needs

How will these be achieved?

Student's Name:	Signature:	Date:
Practice Assessor's Name:	Signature:	Date:
Any outstanding learning and development needs are to	be discussed and documented	at the final interview.

Placement 1: Final Interview

This should take place towards the end of the placement

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

Please record any further comments on the next page

Learning and Development Needs
To be agreed between the Practice Assessor and Student

Practice Assessor to identify specific areas to take forward to the next placement			
Was an Action Plan required to support the student?	'ES / NO		
If Yes, was the Academic Assessor informed?	ES / NO)	
, and the second			
			T -
Checklist for assessed documents	Tick	Practice Assessor	Student
	Tick		Student Initial
The professional value statements have been signed at both Mid-Point and Final	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document.	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR)		Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document.	Tick	Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR)		Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR)		Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR) Student's Name: Signature:	Date	Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR) Student's Name: Signature: Practice Assessor's Name: Signature:	Date	Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR) Student's Name: Signature:	Date	Assessor Initial	

Patient/Service User/Carer Feedback Form

Practice Supervisors/Practice Assessors should obtain consent from patients/service users/carers who should feel able to decline to participate.

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

Carer/Relative

The Patient/Service User

How happy were	Very Happy	Нарру	I'm not sure	Unhappy	Very
you with the way the student		•••	\$ 2°0	9	unhappy
nurse					
cared for you?	0	\circ	0	0	\circ
listened to you?	0	0	0	0	0
understood the way you felt?	0	0	0	0	0
talked to you?	0	0	0	0	\circ
showed you respect?	0	0	0	0	0
What did the student nurse do well?					
What could the student nurse have done differently?					
Practice Supervisor/Practice Assessor:					
Name:	Signature):		Date:	
Student Name:	Signature):		Date:	
This form has been co-produced by Pan London Service Users across 4 fields of practice, 2013.					

Tick if you are:

Student Reflection: Reflect on your learning in outreach multi-disciplinary team who are supervising your learning		th members of the
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:
Ctudent Deflection, Deflect on your learning in autoral		
Student Reflection: Reflect on your learning in outreach		th members of the
multi-disciplinary team who are supervising your learning		h members of the
		th members of the
		th members of the
		Date:
multi-disciplinary team who are supervising your learning	g and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	g and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	g and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	g and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	g and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	g and summarise below:	

Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below:		
multi-disciplinary team who are supervising your learning	and summarise below:	
Student Name:	Cianatura	Data
Student Name:	Signature:	Date:
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:
Ctudent Deflection, Deflect on your learning in outroock	/abart placements or wit	h mambara of the
Student Reflection: Reflect on your learning in outreach multi-disciplinary team who are supervising your learning		h members of the
Student Reflection: Reflect on your learning in outreach multi-disciplinary team who are supervising your learning		h members of the
		h members of the
multi-disciplinary team who are supervising your learning	and summarise below:	
		h members of the Date:
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
Student Name: Practice Supervisor's Comments:	signature:	Date:
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	

Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below:		
multi-disciplinary team who are supervising your learning	and summarise below:	
Student Name:	Cianatura	Data
Student Name:	Signature:	Date:
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:
Ctudent Deflection, Deflect on your learning in outroock	/abart placements or wit	h mambara of the
Student Reflection: Reflect on your learning in outreach multi-disciplinary team who are supervising your learning		h members of the
Student Reflection: Reflect on your learning in outreach multi-disciplinary team who are supervising your learning		h members of the
		h members of the
multi-disciplinary team who are supervising your learning	and summarise below:	
		h members of the Date:
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
Student Name: Practice Supervisor's Comments:	signature:	Date:
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	

Student Reflection: Reflect on your learning in outreach/short placements or with members of the multi-disciplinary team who are supervising your learning and summarise below:		
multi-disciplinary team who are supervising your learning	and summarise below:	
Student Name:	Cianatura	Data
Student Name:	Signature:	Date:
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:
Ctudent Deflection, Deflect on your learning in outroock	/abart placements or wit	h mambara of the
Student Reflection: Reflect on your learning in outreach multi-disciplinary team who are supervising your learning		h members of the
Student Reflection: Reflect on your learning in outreach multi-disciplinary team who are supervising your learning		h members of the
		h members of the
multi-disciplinary team who are supervising your learning	and summarise below:	
		h members of the Date:
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
Student Name: Practice Supervisor's Comments:	signature:	Date:
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	

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

Communication/additional feedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Communication/auditional reeuback	
Nama	Designation
Name:	Designation:
Signature:	Date:
oignature.	Date.
Communication/additional feedback	
Name:	Designation:
Signature:	Date:

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

Communication/additional feedback	
Name:	Designation:
ranic.	Designation.
Signature:	Date:
Signature.	Date.
Communication/additional feedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Name:	Designation:
Tullio.	500:griation.
Signature:	Date:
	

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

Communication/additional feedback	
Name:	Designation:
ranic.	Designation.
Signature:	Date:
Signature.	Date.
Communication/additional feedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Name:	Designation:
Tullio.	500:griation.
Signature:	Date:
	

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

Communication/additional feedback	
Name:	Designation:
ranic.	Designation.
Signature:	Date:
Signature.	Date.
Communication/additional feedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Name:	Designation:
Tullio.	500:griation.
Signature:	Date:
	

Placement 2

Placement Provider: (e.g. Trust/Organisation)	
Name of Placement Area:	
Type of Experience: (e.g. Community/Ward based)	
Placement Telephone Number:	
Placement Contact Email:	
Start Date End Date	No. of Hours
Nominated person to support student and add	ress concerns
Name:	Designation:
Contact email address:	
Practice Assessor Details:	
Name:	Designation:
Contact email address:	
Academic Assessor Details (for part):	
Name:	Designation:
Contact email address:	

Placement 2: Orientation

- I I I I I I I I I I I I I I I I I I I	Placeme	ent Area 1	Placement A	roa 2 (if ann)
Name of Placement Area:	Flacellic	eni Area i	Flacement A	ea z (ii app.)
Name of Staff Member:				
	Initial/Data	Initial/Data	Initial/Data	Initial/Data
This should be undertaken by a member of staff in the Placement Area	Initial/Date (Student)	Initial/Date (Staff	Initial/Date (Student)	Initial/Date (Staff
The following evitoric pood to be met within the first	day in placem	signature)		signature)
The following criteria need to be met within the first	day in placen	ient		
A general orientation to the health and social care placement setting has been undertaken				
The local fire procedures have been explained Tel				
The student has been shown the:				
Resuscitation policy and procedures have been explained Tel:				
Resuscitation equipment has been shown and explained				
The student knows how to summon help in the event of an emergency				
The student is aware of where to find local policies				
The student has been made aware of information governance requirements				
The shift times, meal times and reporting sick policies have been explained				
The student is aware of his/her professional role in practice.				
Policy regarding safeguarding has been explained				
The student is aware of the policy and process of raising concerns				
Lone working policy has been explained (if applicable)				
Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed)				
The following criteria need to be met prior to use				
The student has been shown and given a demonstration of the moving and handling equipment used in the placement area				
The student has been shown and given a demonstration of the medical devices used in the placement area				

Placement 2: Initial Interview

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

Placement Area Name:		
Student to identify learning and development needs	(with guidance from the Practice Supervis	sor)
Taking available learning opportunities into conside	eration, the student and Practice Superv	visor/Practice
Assessor to negotiate and agree a learning plan.	•	
Outline of learning plan	How will this be achieved?	
Learning plan for placement agreed by Practice As	ssessor (where applicable) YES/NO	
Student's Name:	Signature: Date:	
Practice Supervisor/Assessor's Name:		
Signature:	Date:	

Professional Values in Practice (Part 1)

Students are required to demonstrate high standards of professional conduct at all times during their placements. Students should work within ethical and legal frameworks, and be able to articulate the underpinning values of The Code (NMC, 2018). Professional Values reflect a number of proficiency statements and are captured under the 4 sections of The Code.

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

Yes = Achieved, No = Not Achieved (Refer	Achieved	Initial/	nent in Practic	Initial/
	Mid-Point Yes/No	Date	Final Yes/No	Date (Final)
Prioritise people				, ,
1. The student maintains confidentiality in accordance with				
the NMC code.				
2. The student is non-judgemental, respectful and				
courteous at all times when interacting with				
patients/service users/carers and all colleagues.				
3. The student maintains the person's privacy and dignity,				
seeks consent prior to care and advocates on their behalf.				
4. The student is caring, compassionate and sensitive to				
the needs of others.				
5. The student understands their professional				
responsibility in adopting and promoting a healthy lifestyle				
for the well-being of themselves and others.				
Practise effectively			•	
6. The student maintains consistent, safe and person-				
centred practice.				
7. The student is able to work effectively within the inter-				
disciplinary team with the intent of building professional				
relationships.				
8. The student makes a consistent effort to engage in the				
requisite standards of care and learning based on best				
available evidence.				
Preserve safety				
9. The student demonstrates openness (candour),				
trustworthiness and integrity.				
10. The student reports any concerns to the appropriate				
professional member of staff when appropriate e.g.				
safeguarding.				
11. The student demonstrates the ability to listen, seek				
clarification and carry out instructions safely.				
12. The student is able to recognise and work within the				
limitations of own knowledge, skills and professional				
boundaries and understand that they are responsible for				
their own actions.				

	Achieved Mid-Point Yes/No	Initial/ Date	Achieved Final Yes/No	Initial/ Date (Final)
Promote professionalism and trust	100/110		100/110	
13. The student's personal presentation and dress code is in accordance with the local policy.				
14. The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement.				
15. The student demonstrates that they are self-aware and can recognise their own emotions and those of others in different situations.				
Mid-point assessment				
Practice Supervisor Name: Sign	ature:		Da	ate:
Davisused and annead by Deserting Assesses				
Reviewed and agreed by Practice Assessor Practice Assessor Name: Sign	ature:		Da	ite:
End point: Student reflection on meeting Professi	onal Values	,		
Choose one example from your practice on this placer NMC Code (ensure confidentiality is maintained). For each Code to reflect on.				
Student Name: Signa	ature:		Da	te:
Final assessment - please add comments on Final Inte	rview Page			
Practice Assessor Name: Sign	ature:		Da	ite:

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

Placement 2: Mid-Point Interview

This discussion must take place half way through the placement

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

Placement 2: Mid-Point Review Ongoing learning and development needs

To be agreed between Practice Assessor and Student – sign and date all entries below Following the Mid-Point interview the student is to identify their learning and development needs for the remainder of the placement and negotiate with their Practice Assessor how these will be achieved. How will these be achieved? Learning and development needs

Student's Name:	Signature:	Date:
Practice Assessor's Name:	Signature:	Date:
Any outstanding learning and development needs are to	be discussed and documented a	at the final interview.

Placement 2: Final Interview

This should take place towards the end of the placement

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

Please record any further comments on the next page

Learning and Development Needs
To be agreed between the Practice Assessor and Student

Practice Assessor to identify specific areas to take forward to the next placem	EIIL		
Was an Action Plan required to support the student?	YES / NO		
· ··			
If Yes, was the Academic Assessor informed?	YES / NO)	
Checklist for assessed documents	Tick	Practice	Student
Checklist for assessed documents	Tick	Practice Assessor Initial	Student Initial
Checklist for assessed documents The professional value statements have been signed at both Mid-Point and Final Interview	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview	Tick	Assessor	Student Initial
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR)		Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document.	Tick	Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR) Student's Name: Signature:	Date	Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR)		Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR) Student's Name: Signature: Practice Assessor's Name: Signature:	Date	Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR) Student's Name: Signature:	Date	Assessor Initial	

Patient/Service User/Carer Feedback Form

Practice Supervisors/Practice Assessors should obtain consent from patients/service users/carers who should feel able to decline to participate.

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

Tick if you are: The Patient/Service User Carer/Relative						
How happy were	Very Happy	Нарру	I'm not sure	Unhappy	Very unhappy	
you with the way the student	وَقَ	00		9	or and property	
nurse						
cared for you?	0	0	0	0	0	
listened to you?	\bigcirc	0	0	0	0	
understood the way you felt?	0	0	0	0	0	
talked to you?	0	0	0	0	0	
showed you respect?	0	0	0	0	0	
What did the stude	nt nurse c	do well?				
What could the student nurse have done differently?						
-	Practice Supervisor/Practice Assessor:					
Name:	Signature			Date:		
Student Name:	Signature	9 :		Date:		
This form has been co-prod	uced by Pan Lo	ondon Servic	e Users across	4 fields of pra	ctice, 2013.	

Student Reflection: Reflect on your learning in outreach multi-disciplinary team who are supervising your learning		n members of the
multi-disciplinary team who are supervising your learning	and summanse below.	
Dractice Supervisor's Comments.		
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:
0. .		
Student Reflection: Reflect on your learning in outreach		h members of the
Student Reflection: Reflect on your learning in outreach multi-disciplinary team who are supervising your learning		h members of the
		h members of the Date:
multi-disciplinary team who are supervising your learning	and summarise below:	
multi-disciplinary team who are supervising your learning	and summarise below:	
multi-disciplinary team who are supervising your learning	and summarise below:	
multi-disciplinary team who are supervising your learning	and summarise below:	
multi-disciplinary team who are supervising your learning	and summarise below:	
multi-disciplinary team who are supervising your learning	and summarise below:	
multi-disciplinary team who are supervising your learning	and summarise below:	
multi-disciplinary team who are supervising your learning	and summarise below:	
Student Name: Practice Supervisor's Comments:	and summarise below: Signature:	Date:
multi-disciplinary team who are supervising your learning	and summarise below:	

Student Reflection: Reflect on your learning in outreach/short placements or with members of the				
multi-disciplinary team who are supervising your learning	and summarise below:			
Ctudent Neme	Ciamatura	Deter		
Student Name:	Signature:	Date:		
Practice Supervisor's Comments:				
Practice Supervisor's Comments.				
Desire On the News	0'	D . ()		
Practice Supervisor Name:	Signature:	Date:		
Ctudent Deflection Deflect on very learning in autocale				
	. / -	la a la a a £ £la a		
Student Reflection: Reflect on your learning in outreach		h members of the		
		h members of the		
multi-disciplinary team who are supervising your learning		h members of the		
		h members of the		
		h members of the		
		h members of the		
		h members of the		
		h members of the		
		h members of the		
		h members of the		
multi-disciplinary team who are supervising your learning	and summarise below:			
		h members of the Date:		
multi-disciplinary team who are supervising your learning	and summarise below:			
multi-disciplinary team who are supervising your learning	and summarise below:			
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:			
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:			
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:			
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:			
multi-disciplinary team who are supervising your learning	and summarise below:			
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:			
Student Name: Practice Supervisor's Comments:	and summarise below: Signature:	Date:		
multi-disciplinary team who are supervising your learning	and summarise below:			

Student Reflection: Reflect on your learning in outreact multi-disciplinary team who are supervising your learning		tn members of the
1 0		
		_
Student Name:	Signature:	Date:
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:
Ctudent Deflection, Deflect on vour learning in outreed	h/ahart alaaaraarta ar wii	the was also have of the
Student Reflection: Reflect on your learning in outreach multi-disciplinary team who are supervising your learning		th members of the
Student Reflection: Reflect on your learning in outreact multi-disciplinary team who are supervising your learning		th members of the
		th members of the
multi-disciplinary team who are supervising your learning	g and summarise below:	
		th members of the Date:
multi-disciplinary team who are supervising your learning	g and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	g and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	g and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	g and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	g and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	g and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	g and summarise below:	

Student Reflection: Reflect on your learning in outreac		
multi-disciplinary team who are supervising your learning	g and summarise below:	
Student Name:	Signature:	Date:
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:
<u>-</u>	J	
-	_	
Student Reflection: Reflect on your learning in outreac	h/short placements or wi	
-	h/short placements or wi	
Student Reflection: Reflect on your learning in outreac	h/short placements or wi	
Student Reflection: Reflect on your learning in outreac	h/short placements or wi	
Student Reflection: Reflect on your learning in outreac	h/short placements or wi	
Student Reflection: Reflect on your learning in outreac	h/short placements or wi	
Student Reflection: Reflect on your learning in outreac	h/short placements or wi	
Student Reflection: Reflect on your learning in outreac	h/short placements or wi	
Student Reflection: Reflect on your learning in outreac	h/short placements or wi	
Student Reflection: Reflect on your learning in outreac	h/short placements or wi	
Student Reflection: Reflect on your learning in outreac	h/short placements or wi	
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning	h/short placements or wig and summarise below:	th members of the
Student Reflection: Reflect on your learning in outreac	h/short placements or wi	
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning. Student Name:	h/short placements or wig and summarise below:	th members of the
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning	h/short placements or wig and summarise below:	th members of the
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning. Student Name:	h/short placements or wig and summarise below:	th members of the
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning. Student Name:	h/short placements or wig and summarise below:	th members of the
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning. Student Name:	h/short placements or wig and summarise below:	th members of the
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning. Student Name:	h/short placements or wig and summarise below:	th members of the
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning. Student Name:	h/short placements or wig and summarise below:	th members of the
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning. Student Name:	h/short placements or wig and summarise below:	th members of the
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning. Student Name:	h/short placements or wig and summarise below:	th members of the
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning. Student Name:	h/short placements or wig and summarise below:	th members of the
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning Student Name: Practice Supervisor's Comments:	h/short placements or wig and summarise below: Signature:	th members of the
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning Student Name:	h/short placements or wig and summarise below:	Date:

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

Communication/additional feedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Nama	Decignation
Name:	Designation:
Signature:	Date:
Signature.	Date.
Communication/additional feedback	
Name:	Designation:
Signature:	Date:

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

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

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

Communication/additional feedback	
Name:	Designation:
Name.	Designation.
Cianatura	Date
Signature:	Date:
Communication/additional feedback	
Communication/additional reedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Name:	Designation:
Signature:	Date:

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

Communication/additional feedback	
Name:	Designation:
Name.	Designation.
Cianatura	Date
Signature:	Date:
Communication/additional feedback	
Communication/additional reedback	
Name:	Designation:
Signature:	Date:
Communication/additional feedback	
Name:	Designation:
Signature:	Date:

Placement 3

Placement Provider: (e.g. Trust/Organisation)	
Name of Placement Area:	
Type of Experience: (e.g. Community/Ward based)	
Placement Telephone Number:	
Placement Contact Email:	
Start Date End Date	No. of Hours
Nominated person to support student and add	ress concerns
Name:	Designation:
Contact email address:	
Practice Assessor Details:	
Name:	Designation:
Contact email address:	
Academic Assessor Details (for part):	
Name:	Designation:
Contact email address:	

Placement 3: Orientation

	3. Orientatio	ent Area 1	Discoment Au	roa 2 (if ann)
Name of Dissement Areas	Placellie	CIIL AIGA I	Placement A	ea z (ii app.)
Name of Placement Area:				
Name of Staff Member:				
This should be undertaken by a member of staff in the Placement Area	Initial/Date (Student)	Initial/Date (Staff	Initial/Date (Student)	Initial/Date (Staff
		signature)		signature)
The following criteria need to be met within the first	day in placem	nent		
A general orientation to the health and social care placement setting has been undertaken				
The local fire procedures have been explained Tel				
The student has been shown the:				
Resuscitation policy and procedures have been explained Tel:				
Resuscitation equipment has been shown and explained				
The student knows how to summon help in the event of an emergency				
The student is aware of where to find local policies				
The student has been made aware of information governance requirements				
The shift times, meal times and reporting sick policies have been explained				
The student is aware of his/her professional role in practice.				
Policy regarding safeguarding has been explained				
The student is aware of the policy and process of raising concerns				
Lone working policy has been explained (if applicable)				
Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed)				
The following criteria need to be met prior to use				
The student has been shown and given a demonstration of the moving and handling equipment used in the placement area The student has been shown and given a				
demonstration of the medical devices used in the placement area				

Placement 3: Initial Interview

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

Placement Area Name:	
Student to identify learning and development needs	(with guidance from the Practice Supervisor)
Taking available learning opportunities into conside	ration, the student and Practice Supervisor/Practice
Assessor to negotiate and agree a learning plan.	
Outline of learning plan	How will this be achieved?
Learning plan for placement agreed by Practice As	sessor (where applicable) YES/NO
Otasian da Nama	O'martana
Student's Name:	Signature: Date:
Practice Supervisor/Assessor's Name:	
Signature:	Date:

Professional Values in Practice (Part 1)

Students are required to demonstrate high standards of professional conduct at all times during their placements. Students should work within ethical and legal frameworks, and be able to articulate the underpinning values of The Code (NMC, 2018). Professional Values reflect a number of proficiency statements and are captured under the 4 sections of The Code.

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

Yes = Achieved, No = Not Achieved (Refer			ment in Praction	
	Achieved Mid-Point Yes/No	Initial/ Date	Achieved Final Yes/No	Initial/ Date (Final)
Prioritise people				
1. The student maintains confidentiality in accordance with				
the NMC code.				
2. The student is non-judgemental, respectful and courteous at all times when interacting with patients/service users/carers and all colleagues.				
3. The student maintains the person's privacy and dignity, seeks consent prior to care and advocates on their behalf.				
4. The student is caring, compassionate and sensitive to the needs of others.				
5. The student understands their professional responsibility in adopting and promoting a healthy lifestyle for the well-being of themselves and others.				
Practise effectively				
6. The student maintains consistent, safe and person- centred practice.				
7. The student is able to work effectively within the inter- disciplinary team with the intent of building professional relationships.				
8. The student makes a consistent effort to engage in the requisite standards of care and learning based on best available evidence.				
Preserve safety				
9. The student demonstrates openness (candour), trustworthiness and integrity.				
10. The student reports any concerns to the appropriate professional member of staff when appropriate e.g. safeguarding.				
11. The student demonstrates the ability to listen, seek clarification and carry out instructions safely.				
12. The student is able to recognise and work within the limitations of own knowledge, skills and professional boundaries and understand that they are responsible for their own actions.				

	Achieved Mid-Point Yes/No	Initial/ Date	Achieved Final Yes/No	Initial/ Date (Final)
Promote professionalism and trust	100/110		100/110	
13. The student's personal presentation and dress code is in accordance with the local policy.				
14. The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement.				
15. The student demonstrates that they are self-aware and can recognise their own emotions and those of others in different situations.				
Mid-point assessment	1		L	
Practice Supervisor Name: Sign	ature:		Da	ate:
Business Land Language Han Business Assessment				
Reviewed and agreed by Practice Assessor Practice Assessor Name: Sign	ature:		Da	ite:
End point: Student reflection on meeting Profess	onal Values			
Choose one example from your practice on this place NMC Code (ensure confidentiality is maintained). For eac Code to reflect on.				
Student Name: Signa	ature:		Da	te:
Final assessment - please add comments on Final Inte	rview Page			
Practice Assessor Name: Sign	ature:		Da	ite:

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

Placement 3: Mid-Point Interview

This discussion must take place half way through the placement

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

Placement 3: Mid-Point Review Ongoing learning and development needs

Ongoing learning and development needs

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

Following the Mid-Point interview the student is to identify their learning and development needs for the remainder of the placement and negotiate with their Practice Assessor how these will be achieved.

Learning and development needs

How will these be achieved?

Student's Name:	Signature:	Date:
Practice Assessor's Name:	Signature:	Date:
Any outstanding learning and development needs are to	be discussed and documented a	at the final interview.

52

Placement 3: Final Interview

This should take place towards the end of the placement

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

Please record any further comments on the next page

Learning and Development Needs
To be agreed between the Practice Assessor and Student

Practice Assessor to identify specific areas to take forward to the next placem	EIIL		
Was an Action Plan required to support the student?	YES / NO		
· ··			
If Yes, was the Academic Assessor informed?	YES / NO)	
Checklist for assessed documents	Tick	Practice	Student
Checklist for assessed documents	Tick	Practice Assessor Initial	Student Initial
Checklist for assessed documents The professional value statements have been signed at both Mid-Point and Final Interview	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview	Tick	Assessor	Student Initial
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their	Tick	Assessor	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR)		Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document.	Tick	Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR) Student's Name: Signature:	Date	Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR)		Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR) Student's Name: Signature: Practice Assessor's Name: Signature:	Date	Assessor Initial	
The professional value statements have been signed at both Mid-Point and Final Interview The relevant proficiencies/skills that the student has achieved in this area (where applicable) have been signed The practice placement hours have been checked and signed All the interview records and development plans have been completed and signed as appropriate The Practice Supervisors and Practice Assessor have printed and signed their name on the appropriate list at the beginning of the document. The Practice Assessor has completed the Ongoing Achievement Record (OAR) Student's Name: Signature:	Date	Assessor Initial	

Patient/Service User/Carer Feedback Form

Practice Supervisors/Practice Assessors should obtain consent from patients/service users/carers who should feel able to decline to participate.

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

Carer/Relative

Tick if you are: The Patient/Service User

•					
How happy were	Very Happy	Нарру	I'm not sure	Unhappy	Very unhappy
you with the way the student	ا ا	•••		9 9	92
nurse					
cared for you?	0	0	0	0	0
listened to you?	\bigcirc	0	0	0	\circ
understood the way you felt?	0	0	0	0	0
talked to you?	0	0	0	0	0
showed you respect?	0	0	0	0	0
What did the stude	nt nurse c	do well?			
What could the stud		e have d	one differ	ently?	
Practice Supervisor/Practice A					
Name:	Signature			Date:	
Student Name:	Signature	e:		Date:	
This form has been co-prod	luced by Pan Lo	ondon Servic	e Users across	4 fields of pra	ctice, 2013.

Student Reflection: Reflect on your learning in outreach		h members of the
multi-disciplinary team who are supervising your learning	and summarise below:	
Practice Supervisor's Comments:		
Tractice capervices a commenter		
Practice Supervisor Name:	Signature:	Date:
	_	
Student Reflection: Reflect on your learning in outreach	/short placements or wit	h members of the
Student Reflection: Reflect on your learning in outreach multi-disciplinary team who are supervising your learning		h members of the
Student Reflection: Reflect on your learning in outreach multi-disciplinary team who are supervising your learning		h members of the
		h members of the
multi-disciplinary team who are supervising your learning	and summarise below:	h members of the
		h members of the Date:
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
Student Name: Practice Supervisor's Comments:	and summarise below: Signature:	Date:
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	

Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning	h/short placements or wi g and summarise below:	th members of the
Student Name:	Signature:	Date:
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:
-		
	la / a la la la Cara la la la la la la la Cara	(
Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning		th members of the
		th members of the Date:
multi-disciplinary team who are supervising your learning	g and summarise below:	
multi-disciplinary team who are supervising your learning	g and summarise below:	
multi-disciplinary team who are supervising your learning	g and summarise below:	
multi-disciplinary team who are supervising your learning	g and summarise below:	
multi-disciplinary team who are supervising your learning	g and summarise below:	
multi-disciplinary team who are supervising your learning	g and summarise below:	

Student Reflection: Reflect on your learning in outreac multi-disciplinary team who are supervising your learning.		
Student Name:	Signature:	Date:
Practice Supervisor's Comments:		
Practice Supervisor Name:	Signature:	Date:
Student Reflection: Reflect on your learning in outreac		
Student Renection. Renection your learning in outlead	h/short placements or wi	th members of the
multi-disciplinary team who are supervising your learning		
multi-disciplinary team who are supervising your learning	g and summarise below:	
multi-disciplinary team who are supervising your learning	g and summarise below:	
multi-disciplinary team who are supervising your learning	g and summarise below:	
multi-disciplinary team who are supervising your learning	g and summarise below:	
multi-disciplinary team who are supervising your learning	g and summarise below:	
multi-disciplinary team who are supervising your learning	g and summarise below:	
multi-disciplinary team who are supervising your learning	g and summarise below:	

Student Reflection: Reflect on your learning in outreach		h members of the
multi-disciplinary team who are supervising your learning	and summarise below:	
Student Name:	Signature:	Date:
Practice Supervisor's Comments:		
•		
Practice Supervisor Name	Signatura	Date:
Practice Supervisor Name:	Signature:	Date:
Student Reflection: Reflect on your learning in outreach		h members of the
Student Reflection: Reflect on your learning in outreach multi-disciplinary team who are supervising your learning		h members of the
		h members of the
multi-disciplinary team who are supervising your learning	and summarise below:	
		h members of the Date:
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
multi-disciplinary team who are supervising your learning Student Name:	and summarise below:	
Student Name: Practice Supervisor's Comments:	signature:	Date:

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

Communication/additional feedback	
Name:	Designation:
Signature:	Date:
3	
Communication/additional feedback	
Name:	Designation:
	3
Signature:	Date:
oignaturo.	Dato.
Communication/additional feedback	
Name:	Designation:
HAING.	Designation.
Signatura	Date:
Signature:	Date:

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

Communication/additional feedback	
Name:	Designation:
Signature:	Date:
3	
Communication/additional feedback	
Name:	Designation:
	3
Signature:	Date:
oignaturo.	Dato.
Communication/additional feedback	
Name:	Designation:
HAING.	Designation.
Signatura	Date:
Signature:	Date:

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

Communication/additional feedback	
Name:	Designation:
Signature:	Date:
3	
Communication/additional feedback	
Name:	Designation:
	3
Signature:	Date:
oignaturo.	Dato.
Communication/additional feedback	
Name:	Designation:
HAING.	Designation.
Signatura	Date:
Signature:	Date:

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

Communication/additional feedback	
Name:	Designation:
Signature:	Date:
3	
Communication/additional feedback	
Name:	Designation:
	3
Signature:	Date:
oignaturo.	Dato.
Communication/additional feedback	
Name:	Designation:
HAING.	Designation.
Signatura	Date:
Signature:	Date:

Assessment of Proficiencies

Incorporating Platforms 1 – 7
Annexe A: Communication and relationship management skills
Annexe B: Nursing procedures

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

Assessment of Proficiencies are undertaken across the Part. These can be assessed in a range of placements but need to be assessed as Achieved (YES) at least once by the end of the Part. If a proficiency is assessed as Achieved (YES) early in the Part it is expected that the student maintains that level of competence and can be re-assessed in subsequent placements at the Practice Assessor's discretion.

The Grade Descriptors are 'Yes' (this proficiency has been achieved), 'No' (this proficiency has not been achieved). Refer to Criteria for Assessment in Practice for further details.

Proficiencies marked with an * can be met in either Part 1 or Part 2

Some of the proficiencies may be met within simulated learning as per the individual university's policy.

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

			`	YES = Achieved	I, NO = Not A	chieved			
	Assessment 1		Ass	Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	
Demonstrate and apply									
knowledge of commonly									
encountered presentations to									
inform a holistic nursing									
assessment including physical,									
psychological and socio-cultural									
needs.									
2. Demonstrates understanding									
of a person's age and									
development in undertaking an									
accurate nursing assessment.									
Accurately processes all									
information gathered during the									
assessment process to identify									
needs for fundamental nursing									
care and develop and document									
person-centred care plans.									
	<u> I</u>								
Participates in providing and ev	aluating pe	erson-centred (care						
4. Work in partnership with									
people, families and carers to									
encourage shared decision-									
making to manage their own care									
when appropriate.									

	YES = Achieved, NO = Not Achieved								
	Assessment 1		Assessment 2		Assessment 3		Assessment 4		
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	
5. Demonstrates an understanding of the importance of therapeutic relationships in providing an appropriate level of care to support people with mental health, behavioural, cognitive and learning challenges.									
6. Provides person centred care to people experiencing symptoms such as anxiety, confusion, pain and breathlessness using verbal and non-verbal communication and appropriate use of open and closed questioning.									
7. Takes appropriate action in responding promptly to signs of deterioration or distress considering mental, physical, cognitive and behavioural health.									
8. Assesses comfort levels, rest and sleep patterns demonstrating understanding of the specific needs of the person being cared for.									

-		YES = Achieved, NO = Not Achieved								
		essment 1	Assessment 2		Assessment 3		Assessment 4			
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date		
9. Maintains privacy and dignity in implementing care to promote rest, sleep and comfort and encourages independence where appropriate.										
10. Assesses skin and hygiene status and determines the need for intervention, making sure that the individual remains as ndependent as possible.										
11. Assists with washing, bathing, shaving and dressing and uses appropriate bed making echniques.										
12. Supports people with their diet and nutritional needs, taking cultural practices into account and uses appropriate aids to assist when needed.										
13. Can explain the signs and symptoms of dehydration or fluid retention and accurately records fluid intake and output.										
*14. Assists with toileting, maintaining dignity and privacy and managing the use of appropriate aids including pa bottles and commodes.										

Participates in providing and eva	aluating i	person-centred	care							
. ,		YES = Achieved, NO = Not Achieved								
	Assessment 1		Ass	Assessment 2		Assessment 3		sessment 4		
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date		
*15. Selects and uses continence and feminine hygiene products, for example, pads, sheaths and appliances as appropriate.										
16. Assesses the need for support in caring for people with reduced mobility and demonstrates understanding of the level of intervention needed to maintain safety and promote independence.										
Participates in procedures for th	e plannir	ng, provision an	d manager	ment of person-	-centred c	are				
17. Uses a range of appropriate moving and handling techniques and equipment to support people with impaired mobility.										
18. Consistently utilises evidence based hand washing techniques.										
19. Identifies potential infection risks and responds appropriately using best practice guidelines and utilises personal protection equipment appropriately.										
20. Demonstrates understanding of safe decontamination and safe disposal of waste, laundry and sharps.										

		YES = Achieved, NO = Not Achieved								
	Assessment 1		Assessment 2		Assessment 3		Assessment 4			
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date		
21. Effectively uses manual										
techniques and electronic										
devices to take, record and										
interpret vital signs, and										
escalate as appropriate.										
22. Accurately measure weight										
and height, calculate body mass										
index and recognise healthy										
ranges and clinical significance										
of low/high readings.										
•										
*23. Collect and observe										
sputum, urine and stool										
specimens, undertaking routine										
analysis and interpreting										
findings. Participates in improving safety	, and guali	ty of parcan ac	ntrod coro		<u> </u>					
24. Accurately undertakes	anu quan	ty or person-ce			T I					
person centred risk										
assessments proactively using										
a range of evidence based										
assessment and improvement										
tools.										
25. Applies the principles of										
health and safety regulations to										
maintain safe work and care										
environments and proactively										
responds to potential hazards.										

	YES = Achieved, NO = Not Achieved								
	Assessment 1		Assessment 2		Assessment 3		Assessment 4		
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	
26. Demonstrate an understanding									
of the principles of partnership,									
collaboration and multi-agency									
working across all sectors of health									
and social care.									
27. Demonstrate an understanding									
of the challenges of providing safe									
nursing care for people with co-									
morbidities including physical,									
psychological and socio-cultural									
needs.									
28. Understand the principles and									
processes involved in supporting									
people and families so that they									
can maintain their independence									
as much as possible.									
29. Provides accurate, clear,									
verbal, digital or written information									
when handing over care									
responsibilities to others.									
*Part 2 No.12 (May be met in Part 1,									
see OAR.)									
Utilises aseptic techniques when									
undertaking wound care and in									
managing wound and drainage									
processes (including management of									
sutures and vacuum removal where									
appropriate)									

Part 1 Episode of Care - Formative (to support development & gain feedback)

This assessment must be completed by the end of Part 1.

The Part 1 summative episode of care (final) assessment will be undertaken by the Practice Assessor.

Guidelines

The practice supervisor/assessor and student will identify an appropriate episode of direct care involving meeting the needs of a person/family receiving care. Professionalism underpins all aspects of the student's performance.

The aim of this assessment is to demonstrate the student's progression in the following 5 platforms within the *Future Nurse: Standards of proficiency (including skills from annexe A and B)* (NMC 2018) **in the context of their intended field(s) of practice:**

- Promoting health and preventing ill health
- · Assessing needs and planning care
- · Providing and evaluating care
- Improving safety and quality of care
- Coordinating care

Effective communication and relationship management skills underpin all aspects of care. (Annexe A)

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

Learning outcomes

The student is able to:

- 1. Work in partnership with the person receiving care, their families and carers (where appropriate), can undertake an accurate assessment and provide evidence based, compassionate and safe nursing care.
- 2. Demonstrate understanding and can apply the relevant knowledge and skills to meet the individual's needs relating to dignity, comfort, hygiene and mobility.
- 3. Communicate effectively utilising appropriate verbal and non-verbal skills in the delivery of person centred care decisions, taking into consideration the use of personal communication aids as appropriate.
- 4. Identify the impact of lifestyle choices on the individual's mental and physical health and wellbeing and demonstrates the principles of health promotion and preventing ill health.
- 5. Demonstrate that they have maintained professional values and demonstrates knowledge of safety and safeguarding for the person receiving care and the carers and/or family.

Student reflection on an episode of care	
Within your reflection, describe the episode of care and how you assessed, delivered and evaluated care.	What did you do well?
	What would you have done differently?

Practice Assessor feedback						
		ne episode of care, please assess and comment on the following:				
Yes = Achieved, N	No = Not Achieved	•				
Standard of proficiency	Yes/No	Comments				
Assessing needs and planning care Takes an accurate history and undertakes a person centred assessment in order to plan effective care.						
Providing and evaluating care Provides person-centred evidence based care in managing dignity, comfort, hygiene and mobility needs of the individual.						
Promoting health and preventing ill health Applies the principles of health promotion and improvement as appropriate when caring for the individual and their families.						
Improving safety and quality of care Undertakes relevant risk assessments (e.g. falls, skin integrity, mental capacity) that may be required and demonstrates an understanding of the difference between risk aversion and risk management.						
Coordinating Care Utilises a range of communication skills to effectively engage with the person receiving care, their family/carers and members of the multidisciplinary team in the provision and evaluation of care.						
Student's Name:	Sig	nature: Date:				
Practice Supervisor/Practice Assessor's Na	me:					
Signature:	Date:					

Part 1 Episode of Care - Summative

This assessment must be completed by the end of Part 1 by the student's practice assessor during a specific episode of care.

Guidelines

The practice assessor and student will identify an appropriate episode of direct care involving meeting the needs of a person/family receiving care. Professionalism underpins all aspects of the student's performance.

The aim of this assessment is to demonstrate the student's progression in the following 5 platforms within the *Future Nurse: Standards of proficiency (including skills from annexe A and B)* (NMC 2018) **in the context of their intended field(s) of practice:**

- Promoting health and preventing ill health
- Assessing needs and planning care
- · Providing and evaluating care
- · Improving safety and quality of care
- Coordinating care

Effective communication and relationship management skills underpin all aspects of care. (Annexe A)
Students are required to use appropriate approaches and techniques considering the person's motivation, capacity and need for reasonable adjustment applying understanding of mental capacity and health legislation as appropriate.

Learning outcomes

The student is able to:

- 1. Work in partnership with the person receiving care, their families and carers (where appropriate), can undertake an accurate assessment and provide evidence based, compassionate and safe nursing care.
- 2. Demonstrate understanding and can apply the relevant knowledge and skills to meet the individual's needs relating to dignity, comfort, hygiene and mobility.
- 3. Communicate effectively utilising appropriate verbal and non-verbal skills in the delivery of person centred care decisions, taking into consideration the use of personal communication aids as appropriate.
- 4. Identify the impact of lifestyle choices on the individual's mental and physical health and wellbeing and demonstrates the principles of health promotion and preventing ill health.
- 5. Demonstrate that they have maintained professional values and demonstrates knowledge of safety and safeguarding for the person receiving care and the carers and/or family.

Student reflection on an episode of care	
Within your reflection, describe the episode of care and how you assessed, delivered and evaluated care.	What did you do well?
	What would you have done differently?

Practice Assessor feedback			
Based on the student's reflection, your observation a Yes = Achieved, N		e episode of care, please assess and comme (Refer to Criteria for Assessment in P	
Standard of proficiency	Yes/No	Commen	,
Assessing needs and planning care Takes an accurate history and undertakes a person centred assessment in order to plan effective care.			
Providing and evaluating care Provides person-centred evidence based care in managing dignity, comfort, hygiene and mobility needs of the individual.			
Promoting health and preventing ill health Applies the principles of health promotion and improvement as appropriate when caring for the individual and their families.			
Improving safety and quality of care Undertakes relevant risk assessments (e.g. falls, skin integrity, mental capacity) that may be required and demonstrates an understanding of the difference between risk aversion and risk management.			
Coordinating Care Utilises a range of communication skills to effectively engage with the person receiving care, their family/carers and members of the multidisciplinary team in the provision and evaluation of care.			
If any of the Standards are 'Not Achiev	ved' this will requ	uire a re-assessment and the Academic	Assessor must be informed
Student's Name:	Sigr	nature:	Date:
Practice Assessor's Name:	Sigr	nature:	Date:

Part 1 Medicines Management

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

During Part 1 the student should be developing their knowledge and skills in relation to the safe administration of medicines. This assessment should normally be undertaken with one or more patients/service users. **Professionalism underpins all aspects of the student's performance.**

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

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

Regulatory requirements: Future Nurse: Standards of Proficiency for Registered Nurses (NMC 2018), The Code (NMC 2018), A Competency Framework for all Prescribers (The Royal Pharmaceutical Society 2016)

The aim of this assessment is to ensure students can perform safe administration of medicines under direct supervision.

Learning outcomes

The student is able to:

- 1. Apply knowledge of pharmacology, how medicines act and interact in the systems of the body, and their therapeutic action.
- 2. Prepare routine medications where necessary, safely and effectively administer these via common routes and maintains accurate records.
- 3. Safely and accurately perform medicines calculations.
- 4. Demonstrate that they have maintained appropriate professional values, expected attitudes and behaviours during the administration of medicines.
- 5. Maintain safety and safeguard the patient from harm, demonstrating understanding of the Mental Capacity Act (DH 2005) and The Mental Health Act (DH 1983, amended 2007), where appropriate.

	YES = Achieved No = Not Achieved						
	Competency	Yes/No		Competency	Yes/No		
1.	Is aware of the patient/service user's plan of care and the reason for medication demonstrating knowledge of pharmacology for commonly prescribed medicines		7.	Prepares medication safely. Checks expiry date. Notes any special instructions/contraindications			
2.	Communicates appropriately with the patient/service user. Provides clear and accurate information and checks understanding		8.	Calculates doses accurately and safely Demonstrates to assessor the component parts of the calculation Minimum of 3 calculations undertaken			
3.	Understands safe storage of medications in the care environment.		9.	Checks and confirms the patient/service user's identity and establishes consent. (ID band or other confirmation if in own home)			
4.	Maintains effective hygiene/infection control throughout		10.	Administers or supervises self-administration safely under direct supervision. Verifies that oral medication has been swallowed			
5.	Checks prescription thoroughly. Right patient/service user Right medication		11.	Describes/demonstrates the procedure in the event of non-adherence.			
	 Right time/Date/Valid period Right dose/last dose 		12.	Safely utilises and disposes of equipment			
	 Right dose/last dose Right route/method Special instructions 		13.	Maintains accurate records. Records, signs and dates when safely administered			
			14.	Monitors and reports effects and is aware of common side effects and how these are managed			
6.	Checks for allergies demonstrating an understanding of the risks and management of these as appropriate • Asks patient/service user		15.	Uses appropriate sources of information e.g. British National Formulary			
	Checks prescription chart or identification band		16.	Offers patient /service user further support/advice/education, including discharge/safe transfer where appropriate			

Practice Assessor Feedback		
Student reflection on learning and development		
Student's Name:	Signature:	Date:
Practice Assessor's Name:	Signature:	Date:
Fractice Assessor's Indille.	Signature.	Date.

Simulated Practice Learning

This page is to record the practice learning hours associated with simulated practice learning only. You are responsible for having your hours signed at the end of each simulation session.

Please ensure that all details are printed clearly

Date	Title of session	Number of Practice Learning hours	Staff signature (please ensure you also sign the signatory list)

Total hours of completed sime	ulated practice on this	s page	Figures	Words	
Staff member: I have checke signatory list.	d the hours of experien	nce recorded	by the stude	nt, and signed the simulate	ed practice
Signed:	(Staff member)				
Declaration by Student: I co simulated practice learning hou		corded on this	s sheet are a	true and accurate record of	of the
Signed: :	(Student)	Date:			

Simulated Practice Learning Signatory list

Name	Job title	Organisation	Signature	Initials

Action Plan

An action plan is required when a student's performance causes concern
The Practice Assessor must liaise with the Academic Assessor and senior practice representative The **SMART** principles should be used to construct the Action Plan.

Placement Name	Date action plan initiated:			
Nature of concern Refer to Professional Value(s), Proficiency and/or Episode of Care (Specific)	What does the student need to demonstrate; objectives and measure of success (Measurable, Achievable and Realistic)	Support available and who is responsible	Date for review (Timed)	Review/feedback
				Date: Comments:
Student's Name:	Signature:	Date:	<u> </u>	Practice Assessor Name:
Practice Assessor's Name: Academic Assessor's Name:	Signature: Signature:	Date:		Signature:

Action Plan

An action plan is required when a student's performance causes concern
The Practice Assessor must liaise with the Academic Assessor and senior practice representative The **SMART** principles should be used to construct the Action Plan.

Placement Name	Date action plan initiated:			
Nature of concern Refer to Professional Value(s), Proficiency and/or Episode of Care (Specific)	What does the student need to demonstrate; objectives and measure of success (Measurable, Achievable and Realistic)	Support available and who is responsible	Date for review (Timed)	Review/feedback Date:
				Comments:
Student's Name:	Signature:	Date:		Practice Assessor
Practice Assessor's Name:	Signature:	Date:		Name:
Academic Assessor's Name:	Signature:	Date:		Signature:

Please start a new page per placement

To be completed as per your local University Requirements
Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by a member of staff

	Date	Placement	Total Hrs	Staff Initials	Shift Type		Date	Placement	Total Hrs	Staff Initials	Shift Type
		Exa	ample of h	ours confirmation	on	Sun	1/7/19	Pixie Ward	7.5	FF	Е
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			

Total hours of completed	practice on this page	Figures	Words	
Total hours of Sickness/	Absence on this page	Figures	Words	
Staff member: I have ch	ecked the hours of exper	ience recorded	by the student,	
Signed:	(Staff member)	Name (print):	:	
Placement Area:		Date: ——		
Declaration by Student: 1 co	onfirm that the hours recorded	I on this sheet are	e a true and accurate account of the shifts I have worked.	
Signed: :	(Student)	Date:		

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

Please start a new page per placement

To be completed as per your local University Requirements
Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by a member of staff

	Date	Placement	Total Hrs	Staff Initials	Shift Type		Date	Placement	Total Hrs	Staff Initials	Shift Type
		Exa	ample of h	ours confirmation	on	Sun	1/7/19	Pixie Ward	7.5	FF	Е
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			

Total hours of completed	practice on this page	Figures	Words	
Total hours of Sickness/	Absence on this page	Figures	Words	
Staff member: I have ch	ecked the hours of exper	ience recorded	by the student,	
Signed:	(Staff member)	Name (print):	:	
Placement Area:		Date: ——		
Declaration by Student: 1 co	onfirm that the hours recorded	I on this sheet are	e a true and accurate account of the shifts I have worked.	
Signed: :	(Student)	Date:		

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

Please start a new page per placement

To be completed as per your local University Requirements
Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by a member of staff

	Date	Placement	Total Hrs	Staff Initials	Shift Type		Date	Placement	Total Hrs	Staff Initials	Shift Type
		Ev		ours confirmation		Com	1/7/19	Distin Mand			E
	_	Ex	ample of fi	ours comminau) 	Sun	1///19	Pixie Ward	7.5	FF	E
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		=						=			
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			

Total hours of completed	practice on this page	Figures	Words	
Total hours of Sickness/A	bsence on this page	Figures	Words	
Staff member: I have che	ecked the hours of exper	ience recorded	by the student,	
Signed:	(Staff member)	Name (print):	:	
Placement Area:		Date: ——		
Declaration by Student: I con	nfirm that the hours recorded	on this sheet are	e a true and accurate account of the shifts I have worked	
Signed: :	(Student)	Date:		

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

Please start a new page per placement

To be completed as per your local University Requirements
Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by a member of staff

	Date	Placement	Total Hrs	Staff Initials	Shift Type		Date	Placement	Total Hrs	Staff Initials	Shift Type
		Ev		ours confirmation		Com	1/7/19	Distin Mand			E
	_	Ex	ample of fi	ours comminau) 	Sun	1///19	Pixie Ward	7.5	FF	E
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		=						=			
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			

Total hours of completed	practice on this page	Figures	Words	
Total hours of Sickness/A	bsence on this page	Figures	Words	
Staff member: I have che	ecked the hours of exper	ience recorded	by the student,	
Signed:	(Staff member)	Name (print):	:	
Placement Area:		Date: ——		
Declaration by Student: I con	nfirm that the hours recorded	on this sheet are	e a true and accurate account of the shifts I have worked	
Signed: :	(Student)	Date:		

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

Please start a new page per placement

To be completed as per your local University Requirements
Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by a member of staff

	totals should be initialled by a member of staff										
	Date	Placement	Total Hrs	Staff Initials	Shift Type		Date	Placement	Total Hrs	Staff Initials	Shift Type
		Ex	ample of h	ours confirmation	on	Sun	1/7/19	Pixie Ward	7.5	FF	Е
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			

Total hours of completed	practice on this page	Figures	Words	
Total hours of Sickness/A	bsence on this page	Figures	Words	
Staff member: I have che	ecked the hours of exper	ience recorded	by the student,	
Signed:	(Staff member)	Name (print):	:	
Placement Area:		Date: ——		
Declaration by Student: I con	nfirm that the hours recorded	on this sheet are	e a true and accurate account of the shifts I have worked	
Signed: :	(Student)	Date:		

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

Please start a new page per placement

To be completed as per your local University Requirements
Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by a member of staff

	Date	Placement	Total Hrs	Staff Initials	Shift Type		Date	Placement	Total Hrs	Staff Initials	Shift Type
		Exa	ample of h	ours confirmation	on	Sun	1/7/19	Pixie Ward	7.5	FF	Е
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			

Total hours of completed	practice on this page	Figures	Words	
Total hours of Sickness/	Absence on this page	Figures	Words	
Staff member: I have ch	ecked the hours of exper	ience recorded	by the student,	
Signed:	(Staff member)	Name (print):	:	
Placement Area:		Date: ——		
Declaration by Student: 1 co	onfirm that the hours recorded	I on this sheet are	e a true and accurate account of the shifts I have worked.	
Signed: :	(Student)	Date:		

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

Please start a new page per placement

To be completed as per your local University Requirements
Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by a member of staff

	Date	Placement	Total Hrs	Staff	Shift Type		Date	Placement	Total Hrs	Staff	Shift Type
			піз	Initials	Type				піз	Initials	
		Ex	ample of h	ours confirmation	on	Sun	1/7/19	Pixie Ward	7.5	FF	Ε
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		=						=			
		Weekly Total =						Weekly Total =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			

Total hours of completed	practice on this page	Figures	Words	
otal hours of Sickness/Absence on this page		Figures	Words	
Staff member: I have che	ecked the hours of exper	ience recorded	by the student,	
Signed:	(Staff member)	Name (print):	:	
Placement Area:		Date:		
Declaration by Student: I co	nfirm that the hours recorded	on this sheet are	a true and accurate account of the shifts I have worked.	
Signed: :	(Student)	Date:		

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

Please start a new page per placement

To be completed as per your local University Requirements
Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by a member of staff

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

Total hours of completed practice on this page		Figures	Words		
otal hours of Sickness/Absence on this page		Figures	Words		
Staff member: I have che	ecked the hours of exper	rience recorded	by the student,		
Signed:	(Staff member)	Name (print):			
Placement Area:		Date: ——			
Declaration by Student: I con	nfirm that the hours recorded	on this sheet are	a true and accurate account of the shifts I have	ve worked.	
Signed: :	(Student)	Date:			

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