Nursing & Midwifery Practice Learning Handbook
2020-21
Welcome from Julie Bliss

Dear Student,

I am delighted to welcome you to the Florence Nightingale Faculty of Nursing, Midwifery and Palliative Care. As the Associate Dean (Practice Learning), I work in close collaboration with colleagues across the Faculty, university and practice learning partners with a focus on providing high quality practice learning opportunities that reflect the changing face of healthcare delivery. This is vital as all nursing and midwifery programmes comprise 50% theoretical and 50% practice learning, which are inextricably linked.

The practice learning handbook provides you with important information and guidance that is designed to enable you to maximise the learning opportunities in practice and, more importantly, enjoy your time learning in practice. The practice learning handbook is also available on the practice learning zone webpage.

Have fun and learn lots!

With best wishes,

Julie Bliss, BSc, PGCE, MSc, RN, DN, Queen’s Nurse, Principal Fellow HEA
Associate Dean (Practice Learning)
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Introduction to Practice Learning

Throughout the programme you will have an opportunity to undertake placements in a range of areas, this Rounded Experience is to ensure that you have an opportunity to meet all the proficiencies set out in the programme based on the relevant NMC standards and are well equipped for work beyond the programme. The practice learning component of your programme will be assessed using a practice assessment document. The practice assessment document for the various programmes are as follows:

Nursing: a Practice Assessment Document (PAD) and Ongoing Achievement Record (OAR).

Midwifery 2018, 2019: a Midwifery Practice Assessment Document (MPAD) and OAR.

Midwifery 2020: the Midwifery Ongoing Achievement Record (MORA).

Rounded Experience

For nursing students, the placement pattern that each nursing student undertakes is designed to ensure that you achieve a Rounded Experience which encompasses the range of healthcare delivery. The Rounded Experience reflects healthcare service delivery and as such includes a range of inpatient and community settings.

For midwifery students, the placement pattern that each midwifery student undertakes is designed to ensure that you achieve a Rounded Experience which encompasses the range of healthcare delivery in maternity, including antenatal, postnatal, labour, and community.

In the appendix, we explain in detail how Rounded Experience works within each pathway.
Practice partners

The Placements Team arrange roughly 12,000 placements each year with our practice learning partners. The team work hard to ensure that all students are meeting the Rounded Experience guidelines for their programme whilst also dealing with the complexities of changing capacity in the NHS Trusts we partner with. Most of your placements will take place within your Host Trust, which is allocated to you at the start of the course. You could be allocated to any of our practice partners as your Host Trust and you may not be allocated at the trust nearest to you geographically. During your programme you may also have an opportunity to have a placement outside the NHS, for example with an independent or third sector provider.

You can expect to receive your placement allocations via InPlace (our placement management system) four working weeks prior to your placement commencing (except your very first placement, for which you’ll receive your allocation up to one week beforehand). Following this, it is your responsibility to contact your placement area two weeks before your start date. This is out of courtesy to the clinical area and will also enable you to get your rota and any other details that you need.

The Faculty is part of King’s Health Partners, which includes:

- King’s College Hospital NHS Foundation Trust
- Guy’s and St Thomas’ NHS Foundation Trust
- South London and Maudsley NHS Foundation Trust

We also work in partnership with the following NHS trusts who host nursing and midwifery students:

- Central and North West London NHS Foundation Trust
- Central London Community Healthcare NHS Trust
- Chelsea and Westminster NHS Foundation Trust
- Great Ormond Street Hospital for Children Foundation Trust
- Imperial College Healthcare NHS Trust
- Lewisham and Greenwich NHS Trust
- Royal Brompton & Harefield NHS Foundation Trust
- Royal Marsden NHS Foundation Trust
- South West London and St George’s Mental Health NHS Trust
- St George’s University Hospitals NHS Foundation Trust
- University College London Hospitals NHS Foundation Trust

Find out more information about all our partners

Elective placements

Our BSc Nursing and Midwifery programmes include a timetabled Elective period. This provides students with the option and opportunity to gain Practice hours in a completely different context either within the UK, overseas, or working alongside one of our academic researchers. The Faculty also has reciprocal arrangements for exchanges with several partner Institutions. Currently these are with Jikei Nursing Faculty (Tokyo) and Susan Wakhil School of Nursing and Midwifery (Sydney). Scholarships for all international opportunities (electives and exchanges) are awarded via a competitive process.

A key component of what we have previously offered relies on physical mobility. Your safety is paramount, and we are also subject to restrictions from various external bodies, governments and of course placement partners. At the time of writing therefore all electives and exchange opportunities are on pause due the Coronavirus Pandemic.

We will continue to offer what we can, when we can and to explore potential alternatives as the evolving situation requires.
Professional values and behaviours

Throughout your degree you will be working in clinical practice where professional values and behaviour are held in high regards. You are expected to prioritise people, practice effectively, always preserve safety and promote professionalism and trust. The NMC (2018) Code is reflected in the professional values section of your practice assessment document. Healthcare providers also have their own statement of values and expected behaviours which you must abide by.

View the full code

Professional and responsible behaviour is expected not only within your placement but also outside of work, including on social media and social media networking sites. The social media guidance booklet by the NMC sets out the main principles you must follow at work and in your personal life in order to ensure public protection is maintained. This includes the use of mobile phones in clinical practice. Mobile phones are not permitted in some settings. Please take time to review the NMC guidance, unprofessional use of social media is a common reason that students are referred to the Fitness for Practise Panel.

View the guidance

Student/client/staff relationships

While you may be friendly, you must ensure that your working relationships with patients or service users and their family and friends as well as practice staff remain professional and end when you finish the placement.

× Never arrange to meet or contact patients, clients and staff socially, either while on placement, or after you have finished your placement.

✓ Always think carefully about how you conduct yourself in the workplace and in your life outside work. For example, be clear that friendships with patients and clients are not possible and it is not possible to accept gifts from patients and clients.

Supernumerary status

While you will be working in a trust with patients, service users or women clients it is important to remember that you are part of the team but will not be included in the workforce numbers. You will apply your learning in clinical practice with supervision from Practice Supervisors and Practice Assessors. This means that your breaks and shifts need to be coordinated with your Practice Supervisor, which will be discussed in more depth in the Hours and Attendance section of this handbook.
In 2018, the NMC introduced the Standards for Student Supervision and Assessment (SSSA, NMC 2018).

The SSSA describe the three roles who support students in practice learning:

You'll find more information about these roles in the section on 'Key Roles to Support you in Practice'.

More information about the NMC Standards is available online.

Read the NMC Standards
Key roles to support you in practice

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<th>Practice Supervisor</th>
<th>Practice Assessor</th>
<th>Academic Assessor</th>
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<td>Practice Supervisors (PS) are Registered Nurses or Midwives or Registered health or social care professionals. They have current knowledge and experience and are appropriately prepared for the role; • Ensures learning opportunities are facilitated • Contributes to assessment and records regular feedback • Seeks feedback from other supervisors.</td>
<td>The registered nurse or midwife in the practice environment responsible for assessing and confirming student proficiency in practice, and for facilitating learning opportunities. The Practice Assessor will periodically observe you and make and record objective decisions in the PAD and OAR, drawing on records, observations, student reflections and other resources. They will gather and coordinate feedback from Practice Supervisors and other relevant people and communicate with the Academic Assessor at relevant points in the programme.</td>
<td>The registered nurse or midwife in the academic environment responsible for evaluating and recommending you for progression for each part of the programme. The Academic Assessor will have an understanding of your learning and achievement in practice, through communication with the Practice Assessor and Practice Supervisor at relevant points in the programme.</td>
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For nursing students Practice Supervisors have an important role in contributing to assessment and giving regular feedback and the following can be undertaken by the Practice Supervisor to contribute to the student’s assessment; • Initial interview on placement • Professional Values at midpoint interview • Proficiencies/essential skill as appropriate and relevant to your scope of practice and professional role.

For midwifery students the Practice Supervisor will support your learning and undertake your orientation to the clinical area. Your practice supervisors will also assess the essential skill clusters.

For nursing students – you will have a Practice Assessor allocated for placement.

For midwifery students - you will have one Practice Assessor allocated for each placement cluster. Your practice assessor will undertake your initial, midpoint and final interviews.

The Placements Team | Link Lecturer | Clinical Teachers |
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<td>The Placements Team are based in the Nightingale Student Hub and provide administrative support. You can contact the Placements Team by email on <a href="mailto:nightingaleplacements@kcl.ac.uk">nightingaleplacements@kcl.ac.uk</a>. You’ll hear from them each time you’re allocated a placement.</td>
<td>Each placement area has a Link Lecturer from within the Faculty of Nursing, Midwifery &amp; Palliative Care. They are responsible for providing a link with the practice staff in the placement area, to ensure that practice colleagues have information and resources to</td>
<td>Clinical teachers contribute to the practice learning experience of all students utilising a variety of teaching, learning and assessment strategies across different placement settings. They will complement existing roles such as practice.</td>
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<td>Key Account Manager</td>
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<td>Account managers are the main links between the Faculty and healthcare organisations that provide student placements. The role is pivotal to partnership working to ensure a high-quality learning environment for pre-registration students, ensuring compliance to regulatory frameworks and support post-registration education. The account manager leads the link lecturer team for the healthcare organisation.</td>
<td>support student learning, assessment and fitness for practice. They review the quality of the practice learning environment on a regular basis, and can provide guidance and support to students, Practice Supervisors and Practice Assessors in practice. The Link Lecturer is the person to contact if you have any questions regarding your experience on the placement that you Practice Supervisor and Practice Assessor have not been able to help with.</td>
<td>supervisors/practice assessors, trust education teams, the link lecturer team and teaching staff in the Faculty</td>
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## Health & Safety

Please take some time to familiarise yourself with our health and safety policies and advice. Information about what to do in the case of an incident, body fluid exposure or a needlestick injury are applicable to all Health Sciences courses at King’s and can be found on the Practice Learning KEATS. You’ll also find a link to our lone working policy and forms to complete if you are pregnant or a new mother.

All injuries are investigated by the Faculty with the help of the placement organisation and followed up by the Occupational Health Department.

**Remember** – your report should not include any information that could identify a patient.

As well as reporting any incidents to your placement area, you must complete the online KCL accident and incident reporting form:

*Complete the KCL accident and incident reporting form*

## Health Risk Assessment

Alongside the ongoing constraints associated with COVID-19, we are taking all necessary steps to promote your safety and the continued high standards associated with your programme. To help with this, all students undertaking placements in academic year 2020/21 will be required to complete a self-reported Health Risk Assessment (HRA) questionnaire. You will receive information about this from the Placements Team, who will also ensure that you receive the necessary support if you are deemed to be at risk from COVID-19.

More information about the Health Risk Assessment can be found on [KEATS](https://keats.kcl.ac.uk).
Communication

We aim to provide students with key information ahead of their placements, but should you require more information there are several places to look.

Practice Learning KEATS

Our KEATS space hosts general information about placements plus a variety of useful resources, including videos with advice from our previous students, useful pre-reading and reports showing student responses to placement evaluation across the entire Faculty. Important messages regarding placements will also be sent to you from KEATS.

InPlace

InPlace is web-based software that you will use to view your upcoming placements. InPlace is specific and personalised to you, similar to Student Records. You will be sent login details at the start of your programme. How to guides are also available on KEATS*.

*Should you have further questions or require assistance with InPlace, the Placements Team can be contacted at nightingaleplacements@kcl.ac.uk
From the start of the course to placement allocation

Below is a timeline of steps that you’ll complete before you start your first placement on the programme. The Programmes Team will advise you throughout this process.

### Occupational Health
- Complete your pre-commencement health questionnaire.
- Complete a self-reported Health Risk Assessment (HRA) questionnaire.
- Attend a new starter check with Occupational Health*

### DBS
- Receive clearance from the Disclosure and Barring Service (your DBS certificate). Each year of your programme, you’ll be asked to declare any changes to your DBS clearance.

### Uniform and PAD
- Complete a uniform order using the portal Welcome Week
- Collect your uniform
- Collect your PAD
- Collect your ward badge

### Mandatory and technical skills training
- Complete all required mandatory training e-learning.
- Attend all required mandatory training practical sessions. Guidance on footwear can be found on page 14. Trainers must not be worn for mandatory training.
- Complete core technical skills training, e.g. infection control.

### Host Trust allocation
- You’ll find out your Host Trust allocation within two weeks of enrolment.

### Pre-placement certificate
- Once you have completed all these stages, you’ll be ready to start placement. We’ll issue you with a certificate via email to confirm.
From placement allocation to the start of your placement

- Allocations are usually published approximately four weeks prior to the start of each placement (this will be later for your very first placement). You'll receive an email from the Placements Team asking you to log in to InPlace to check the details (including contact details). Services have undergone and continue to undergo reconfiguration during the COVID-19 pandemic and this may result in some delays in publishing some placement details, or changes to placements allocations.

- As soon as your allocation is published, contact your placement area. Your placement area is responsible for your shift pattern, so they'll be the ones to issue your off-duty rota.
- We recommend both emailing and phoning to ask to speak with the person responsible for student rotas. The reason for phoning as well is that sometimes ward staff will not have time to check their emails during busy periods.

- You must attend your trust induction before you start your first placement.

*Occupational Health

Occupational Health can talk to the Faculty about your health. If appropriate, the Faculty will discuss recommendations from Occupational Health for adjustments with the education team at your Host Trust.

The Nightingale Hub will also check in with you about your health:

- At the start of each academic year – confirm your health hasn’t changed and you’re still fit for the programme and complete a self-reported Health Risk Assessment (HRA) Questionnaire.
- When returning after interruption or sickness – get clearance from Occupational Health.
- If you have a health problem – seek advice from Occupational Health if it might affect your ability to work in practice.
Dress and appearance

Your dress and appearance are considered an aspect of professional conduct. You might not wear uniform in community or mental health placements or nurseries, so you should ensure you check with the individual placement area before starting (for example, some Mental Health Trusts may expect you to wear a uniform for infection control reasons). In all cases, you should adhere to the practice area’s uniform policy and dress code.

Here are some general expectations.

Wearing your ID
While on placement, you’re expected to wear visible ID with your name and student status, so patients/clients know who is taking care of them. What other ID you wear will depend on where you work. For example, students at Guy’s and St Thomas’ NHS Foundation Trust wear a yellow, magnetic badge.

Clothing
While on placement, you shouldn’t wear tight, restrictive or revealing clothes. What you wear shouldn’t interfere with the safety of you or the patient/client. There are some exceptions where you may not need to wear uniform, for example in community placements, mental health centres, and nurseries but you should check with your placement area beforehand.

Religious and cultural values of patients should be respected, especially when visiting their homes.

It’s also important that you:

✓ Wear sleeves above the elbow so you can carry out correct handwashing (for mental health settings you must wear clothing that enables you to be bare below the elbow for hand washing)
✓ When in uniform only wear cardigans at break times
✓ Make sure vests or t-shirts under your uniform aren’t visible
✓ Remove facial coverings worn for religious reasons
✓ Move head coverings away from your face – they shouldn’t be longer than shoulder length

Religious dress
Headwear, for example, turbans and kippot, veils (Christian or niqab) and headscarves are permitted on religious grounds, provided that patient care, health and safety, infection control and security and safety of patients or staff is not compromised (NHSE 2020). Please check your host trust uniform and dress code for further details regarding religious dress.
You must never wear your uniform:
- × When you travel
- × In shops, pubs, clubs or bars
- × Outside hospital (unless you’re following a trust uniform policy)

This is an important aspect of infection control policy.

Care of uniforms and workwear
- ✓ Change your uniform or work clothes daily.
- ✓ Make sure your uniform isn’t crumpled.
- ✓ Uniforms and workwear should be transported home in a disposable plastic bag (not alginate as this may damage domestic machines).
- ✓ They should be emptied out of the bag directly into the drum: no other household items should be included in the wash.
- ✓ The plastic bag must be thrown away in the normal household waste and not reused.
- ✓ Personal laundry bags, which can be directly placed in the home washing machine without removing the scrubs, may also be used for this purpose.
- ✓ The seal and door of the machine are to be wiped before closing.
- ✓ All elements of the washing process contribute to the removal of micro-organisms on fabric. Detergents (washing powder or liquid) and agitation release any soiling from the clothes, which is then removed by sheer volume of water during rinsing.
- ✓ Wash clothes at 60 degrees to reduce the risk of cross-infection.
- ✓ A weekly mild solution of bleach on a high temperature can be used in the machine to decontaminate it. Uniforms and workwear should be laundered separately from other household items, in a load not more than half the machine capacity.

Shoes
Your shoes must be:
- ✓ Plain and black
- ✓ Clean and in good condition
- ✓ Low heeled (no more than 2 cm) with a noiseless sole
- ✓ Supportive
- ✓ Provide protection with a closed toe with a covered upper arch and heel
- ✓ Wipeable clean

Don’t wear:
- × Trainers unless this is approved in the trust uniform and dress code policy
- × Open sandals
- × Backless slipper type shoes, these do not offer support
- × Mary Jane shoes, these do not offer support
- × Ballet pumps, these do not offer support

Personal hygiene
As a nurse or midwife, it is essential that you pay attention to your personal hygiene.

While wearing your uniform, you must not:
- × Chew gum
- × Smoke
If you wear perfume and aftershave it must be discreet as patients can find strong smells nauseating.

Hair

There’s a possibility of hair carrying staphylococcus aureus (staph). By keeping your hair clean and tidy, and styled so it doesn’t touch the patient, you’ll minimise any risk. You shouldn’t wear ribbons, scarves or hats as they are a source of infection.

You must:

✓ Keep hair clean and well groomed
✓ Tie it up if it falls below the collar line
✓ Treat scalp lesions
✓ Ideally be clean shaven
✓ Keep beard or moustaches groomed
✓ Wear discreet fastenings

Nails

✓ Keep fingernails clean and short to avoid the growth of micro-organisms and the risk of scratching patients
✗ Do not wear nail varnish as varnish chips can enter wounds and cause infections
✗ Do not wear artificial nails
✗ Do not wear false eyelashes

Jewellery

Jewellery, even wedding rings, has been found to attract micro-organisms. You should also remember:

• Studs or rings through the skin can cause infection
• Rings with stones can scratch or stones may become dislodged
• Hanging jewellery could be dangerous when treating confused or violent patients and children
• You must be bare below the elbow, bracelets are not permitted

You must:

✓ Only wear your wedding ring
✓ Only wear one pair of earrings – plain gold or silver coloured stud
✓ Cover other piercings to comply with your placement organisation’s policy
✓ Have no visible piercings (other than one pair of stud earrings)

Watches

Wrist watches must not be worn while carrying out duties in Adult, Child or Midwifery settings. Mental Health students should remove watches whilst providing personal care to patients. You should be completely bare below the elbow, as is trust policy, to facilitate infection control. Fob Watches are standard for nurses.
Change of placement/trust

In exceptional circumstances, it is possible to request a change of trust. Requests are reviewed by a panel and will be considered on a case by case basis.

It is also possible to request a change of placement. Placements are allocated in advance, so a change of placement request can only be considered if you can provide evidence of exceptional circumstances.

Please see our policies, which are hosted on the Practice Learning KEATS, for full detail of these processes.

Remember – your course is full time so you should plan any part time work and commitments around your placement timetable.

Please note that students are not allowed to swap placements with each other; all changes must be dealt with by our Placements Team to ensure that you obtain a Rounded Experience and the interests of all students are protected.
During Placement

Hours and attendance

Rota and shift patterns

Placement experience will usually be 37.5 hours per week within the normal shift patterns of the area. Four weeks of placement experience will be the equivalent of 150 hours. This may include early, late, night shifts or long days. In accordance with EU directives regarding the length of a working week, if you are scheduled to work long days, you must not normally work more than 48 hours in a week (Monday-Sunday). You will be expected to work the shift pattern of the placement area.

Students are expected to experience the 24 hours 7 days a week that care is delivered whilst training, this could include bank holidays. Whilst the NMC do not specify a minimum or maximum requirement, the Faculty does expect students to experience night shifts during their programme. Midwifery students may work night shifts throughout the programme, night shifts during year one for nursing students should be reserved primarily for the last placement of the year (term three) unless a clear learning need can be demonstrated. In some placements it may not be possible to work night duty.

Weekly working hours need to be signed and monitored using the attendance pages in the Practice Assessment Document by your Practice Supervisor. You are expected to arrive before the start time of the allocated shift in order to get ready and start working promptly; poor timekeeping may be recorded in your PAD as this is linked to professional values and noted in your final reference. You are expected to attend shift times as stipulated by the manager of the practice area and not swap shifts once the rota has been completed. Students on part three of the programme who attend interviews during a placement may have up to 7.5 hours of practice learning signed off.

If you work in placement areas where shifts are longer than 12.5 hours you may attend for the extended time but do not have to. If you request not to work for longer than 12.5 hour shifts it is your responsibility to negotiate with your Practice Supervisor the most appropriate time to arrive or leave or speak with the Link Lecturer about your hours of work. You must not work four long days every week in order to finish your placement early.

Requests for altering rota patterns to help reflect religious observance will need to be discussed with the placement area. The ability to accommodate requests will be influenced by the size and capacity of the practice learning placement. Requests will be considered on a case by case basis.

Holidays and weekends

If you are placed in a clinic or placement area which only opens 5 days a week and it is not possible to work or make up bank holiday hours, please discuss the need to make up practice hours with your Practice Supervisor. Students are not permitted to be in practice during the university closure period over Christmas/New Year. Term dates can be found on KEATS. Students are not permitted to undertake practice hours when scheduled to be at university.

View term dates
In areas where care is provided seven days a week, you are expected to work some weekends with your Practice Supervisor. You may work weekend shifts throughout the programme. If you believe you are being expected to work too many weekends, this should be discussed with your Practice Supervisor in the first instance, and then your Link Lecturer if the matter remains unresolved.

When allocated to community healthcare settings, you will be expected to work the same hours as your Practice Supervisor, which may include weekends and twilight hours. From year 2 onwards of the Midwifery programmes there is an expectation that students will case-load a minimum of two women for the duration of their pregnancy and as such there will be an on-call commitment.

**Negotiated practice learning**

Attendance at conferences and other external events may offer a legitimate source of practice learning across the programme. This must be agreed in line with the Faculty policy. Students can attend conferences and claim up to 5 days (37.5 hours) of practice learning hours. However, they must write a reflection of their learning for each day and submit it to their Personal Tutor/Cohort Lead as proof of attendance for them to sign 7.5 hours for each day in PAD. In addition, some Faculty funds are available to support students attending conferences whether in placement or personal time.

[View information about conference funding](#)

**Absence**

If you are unwell and unable to attend your placement it is important that you notify the placement area before the start of the shift. Check that you know the reporting process when you start the placement. In addition, you must also notify the university using the following link.

[Report your absence here](#)

If you are off sick for more than 7 consecutive days, you must produce a medical certificate to cover the full period of sickness and submit this to the Programmes Team ([Nightingale@kcl.ac.uk](mailto:Nightingale@kcl.ac.uk)).

If you are absent for a total of more than 10 days in any one-year period, or more than 4 weeks in a single episode of absence, you will be required to obtain occupational health clearance before you will be permitted to undertake any further practice placement.

**Special circumstances and authorised absence**

If you have special circumstance or an unexpected change in your personal circumstances, you should discuss these with your Practice Supervisor or clinical manager in the first instance and may obtain a letter from your Personal Tutor or Cohort Lead in support of your case. Some flexibility with shift patterns may be accommodated in the short term at the discretion of the clinical manager and once an agreement is reached, you must adhere to this and inform your Link Lecturer of your shift patterns.

If you have children and/or dependents you must ensure that safe care and provision is in place whilst you are on placement and attending university. You must ensure you can be contacted as soon as possible in case of an emergency.
Applications for authorised leave, especially in the case of family bereavement, will be sympathetically dealt with. You should approach your Personal Tutor or Cohort Lead to complete the necessary documentation, negotiate time away from your placement and discuss how learning will be covered/made up. You should also inform your placement confirming your return date.

You should adhere to the placement organisation’s policy in relation to religious observances. The practice hours for the programme are set by the NMC. If any practice hours are lost, these will be required to be made up.

Part time job/Bank shifts

Please note that you are a full-time student, so you should not expect your duty rota to be arranged around paid work commitments. If you are working with an organisation as a Bank Healthcare Assistant (HCA) you must inform the Bank that you are a full-time nursing or midwifery student. Under no circumstances should you cancel an allocated placement shift as a student to work a bank shift. You are not permitted to work bank shifts on a current practice placement to avoid confusion about your student status but may work there once you have completed that placement as a student. The Bank and the placement organisation may wish to monitor the number of shifts you work in a given period.

Lost hours and additional hours

We appreciate that many continuing students have a shortfall of hours going into the new academic year 2020/21. The requirement to complete the hours to progress to the next part has been removed and you have until the end of your programme to complete the required hours. Programme and cohort leaders have identified opportunities for the shortfall in hours to be addressed during the remainder of your programme. Cohort specific information will be available on your cohort KEATS page.

For all new students in 2020/21, your programme has a specific number of practice learning hours you are expected to achieve by the end of each placement. These contribute to the total number of practice learning hours you need to have achieved to complete the programme. It is therefore very important that you pay close attention to the hours that you need to complete and ensure that your Practice Supervisor is also aware of this.

If you miss a shift or two and are able to make up your hours in your current placement, please arrange to discuss this with your Practice Supervisor and/or Clinical Manager.

Midwifery students who have lost hours from a previous or current placement that exceeds a single shift’s worth (i.e. 7.5 hours) and are unable to make up in their current placement should contact their Link Lecturer or Academic Assessor to discuss making up hours. Nursing students must inform their Cohort Lead and fill out a Placement Extension request form, found on KEATS in the Practice Learning page under the “Placement Extension Requests” section. Your request will be reviewed by your cohort lead and passed to the Placements Team to organise with the Trust. You may be required to work additional shifts during a subsequent placement or undertake an additional placement.
A Placement Extension request does not entitle you to submit your PAD late - you are still required to submit your PAD on time. If you cannot submit your PAD on time, you may need to submit documentation for mitigating circumstances to the Assessments Team.

Studying with a disability

Any information you provide to us about a disability will be processed sensitively and confidentially. If you have a problem or health condition which compromises your fitness to practise, it’s your responsibility to protect yourself and patients/clients.

Before the placement starts or during your initial placement interview, you need to discuss any special needs and any student support agreement you may have with your Practice Supervisor and Practice Assessor. We can also arrange a meeting to see what adjustments can be put in place – this might cover issues such as shift patterns or access to specific equipment.

For further advice, please speak to your Cohort Lead or the Faculty’s Disability Advisor, Dr Jennifer Oates (jennifer.oates@kcl.ac.uk).

Sole responsibility for patients/clients

You must follow Faculty and placement organisation’s lone worker policies. The Faculty’s policy can be found on the Practice Learning KEATS space.

Depending on your Practice Supervisor’s shift pattern you may be allocated two Practice Supervisors. You are not to be left alone with patients/clients in a placement area unless you have been deemed competent to do so by your Practice Supervisor, are following the Faculty and placement organisation’s lone working policies and a risk assessment has been completed (discussed further below).

You should never be asked to do “door duty” or special observations, i.e. to sit with a patient, or in a bay with a group of patients who may be at risk of falling, wandering etc. This is not appropriate in terms of risk to both staff and patients, accountability and student learning.

You should not accompany or escort patients/clients to or from the placement, operating theatre nor pick up patients from recovery. You should also not sign patients out under a section 17 leave (Mental Health Act 1983 as amended). The exceptions to this are:

- Where there is a qualified member of staff present and you are accompanying the staff/client/patient as a learning experience
- The place being visited by the patient/client would be of value to you as a learning experience but only when the patient would normally be travelling without an escort and you have no responsibility for the patient/client
- Where you are on a final placement and have been assessed as competent through a risk assessment process to escort the patient to theatre
Day trips and outings do occur in some areas. You may join these if you feel the experience would be helpful to your learning. However, you should be considered in addition to the qualified staff and should at no time be left in a position of responsibility for these patients/clients.

If your final placement is outside of hospital healthcare settings (community) you may need to visit clients/patients on your own but must not carry medication for patients/clients whilst on visits. A risk assessment should be completed with your Practice Supervisor prior to any visits, this can be found in your practice assessment document (PAD).

**Fitness to practise**

What does ‘Fitness to Practise’ mean?

The NMC has ‘fitness to practise’ criteria to make sure nurses and midwives work without risk to themselves or patients. We’ve created a set of guidelines to explain Fitness to Practise to our staff, practice learning partners and students.

You must be able to achieve all elements of your course and remain fit to practise throughout. We have a duty to make sure only students who are fit to practise are added to the NMC register.

**Faculty Fitness to Practise Committee**

Students referred to the Committee will be considered under the NMC Code and actions will be carried out depending on the severity of the situation. In extreme cases you may be removed from the course.

A referral to this Committee may be due to professional conduct:

- At University
- On placement
- Outside University (social and recreational activities)

Some examples of Fitness to Practise cases would be:

- Falsification of signatures, hours or any assessment recording in practice assessment documentation
- Administering medication without supervision
- Disconnecting or tampering with intravenous lines
- Administering I/V medication with supervision is not permitted
- Management of naso-gastric tubes without supervision
- Inappropriate use of social media

You can read real life cases and results on the NMC website
Use of medical equipment and placement organisation policies

You must adhere to local placement organisation’s policies and procedures in relation to any skills you are asked to perform. You must receive training and supervision to use clinical devices and equipment in the placement area. You may be required to attend training sessions (e.g. blood glucose monitoring) in your Host Trust which will count towards hours worked.

You must never check or administer medications on your own and must have direct supervision from a qualified member of nursing or midwifery staff. Students must never administer intravenous drugs/intravenous infusions. Students must never end or alter rates of intravenous infusions. To do so would result in a referral to the Fitness to Practise Committee.

Using documentation from the practice area

Documentation within the practice area is sometimes used by students for theory assignments, for example care plans, policies and procedures. The NMC Code states that you must always gain permission from the clinical manager about using any documentation and in the case of patient/client care plans, permission must always be gained from the patient/client themselves.

Documentation must never be removed from the practice area or photocopied. Patients/clients must not be identified in any assignments and any documentation used must be anonymised.

Placement concerns

Raising concerns is core to the NMC Code, Preserving Safety. Should you have any concerns with your placement, get into contact and discuss your worries with your Practice Supervisor first. If your concern remains unsolved get in touch with the trust education team (following the local policy) and your link lecturer to discuss your concerns. Do not discuss your urgent concerns in the placement evaluation survey as they won’t be dealt with in time.
After Placement

Assessment of practice learning

Assessment of practice is an integral component of both nursing and midwifery programmes. The completion of your practice assessment document is essential for successful completion of each subsequent part of your programme. If you have concerns regarding achieving practice competencies, it is imperative to discuss this at the earliest opportunity with your Academic Assessor.

If you have any late submissions you must fill out a mitigating circumstance form.

A link to download additional pages for your PAD can be found on the Practice Learning KEATS space. Please contact nightingaleassessments@kcl.ac.uk if you require any assistance with additional pages.

Evaluation

We want to hear about your experiences on placement so that we can identify what is going well and what we can do to improve your experience. Providing feedback is also part of your professional practice, and we encourage you to engage with this throughout your programme. You can submit your feedback through our placement evaluation survey.

For nursing students, you will be invited to complete an evaluation for your specific placement area towards the end of each placement. For midwifery students, you will be invited to complete evaluations for each specific placement area once a term, using a new form to cover each placement you have undertaken during that period.

Sharing our findings

On a termly basis, we publish a report on KEATS so that you can see how students across the Faculty have responded. We also share trust-specific versions with our practice partners, to make them aware of areas where they can improve our students’ experiences and celebrate best practice.
We asked the Nightingale Student Council (NSC), our committee of elected student representatives, which terms they wish they had known in their first weeks on placement. This list is below – we hope you find it useful.

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>A&amp;E</td>
<td>Accident &amp; Emergency</td>
</tr>
<tr>
<td>AAU</td>
<td>Acute Assessment Unit</td>
</tr>
<tr>
<td>ACS</td>
<td>Acute Coronary Syndrome</td>
</tr>
<tr>
<td>Annual leave</td>
<td>Holiday days</td>
</tr>
<tr>
<td>ANTT</td>
<td>Aseptic Non-Touch Technique</td>
</tr>
<tr>
<td>ANW</td>
<td>Antenatal Ward</td>
</tr>
<tr>
<td>Band 5</td>
<td>Staff nurse or midwife (bedside)</td>
</tr>
<tr>
<td>Band 6</td>
<td>Senior staff nurse or midwife (experienced or expert)</td>
</tr>
<tr>
<td>Band 7</td>
<td>Lead nurse or ward manager</td>
</tr>
<tr>
<td>Bedpan</td>
<td>Cardboard receptacle slid under a patient in bed to allow them to pass urine or faeces</td>
</tr>
<tr>
<td>BGM</td>
<td>Blood Glucose Measurement</td>
</tr>
<tr>
<td>BM</td>
<td>Bowel Movement or sometimes Blood Glucose Measurement (also known as BGM)</td>
</tr>
<tr>
<td>CAMHS</td>
<td>Child and Adolescent Mental Health Services</td>
</tr>
<tr>
<td>Cannula</td>
<td>A small plastic tube in the arm inserted by a needle to attach a drip with drugs or fluids</td>
</tr>
<tr>
<td>CCG</td>
<td>Clinical Commissioning Groups - clinically-led statutory NHS bodies responsible for the planning and commissioning of health care services for their local area</td>
</tr>
<tr>
<td>CCOT</td>
<td>Critical Care Outreach Team</td>
</tr>
<tr>
<td>CCU</td>
<td>Critical Care Unit (same as ICU and ITU)</td>
</tr>
<tr>
<td>CNS</td>
<td>Clinical Nurse Specialist</td>
</tr>
<tr>
<td>Commode</td>
<td>A toilet on wheels that can be taken to a patient’s bedside</td>
</tr>
<tr>
<td>Community</td>
<td>Delivering care in the community</td>
</tr>
<tr>
<td>COPD</td>
<td>Chronic Obstructive Pulmonary Disease</td>
</tr>
<tr>
<td>CQC</td>
<td>Care and Quality Commission</td>
</tr>
</tbody>
</table>
CRP  C-Reactive Protein
CSU  Catheter Stream Urine
CT  Computer Tomography
Dynomap  A machine that has all the equipment to take a full set of observation (a thermometer, 02 stats (%) probe, sphygmomanometer, a heart rate monitor)
ECG  Electrocardiogram
ECHO  Echocardiogram
EEG  Electroencephalogram
EIS  Early Intervention Service
ELCS  Elective C-Section
EMCS  Emergency C-Section
ENP  Emergency Nurse Practitioner
Forensic / Offender Health  A locked ward of high/medium/low security for those with an active or historic criminal record. This can include court diversion and working with the police in the community
Fx  Forceps delivery
HDU  High Dependency Unit
Hoist  A device to lift
HTT  Home Treatment Team/Crisis Resolution Team
ICU  Intensive Care Unit (same as ITU and CCU)
IM  Intramuscular medication
Inpatient  Patient in a ward
ITU  Intensive Therapy Unit (same as CCU and ICU)
Lone working  When a nurse or midwife works alone e.g. in the community in a patient's home
Macerator  A machine in the sluice that shreds dirty bedpans
MCA  Mental Capacity Act
MHA  Mental Health Act
MPAD  Midwifery Practice Assessment Document
MRI  Machine Resonance Imaging
MSU  Mid-Stream Urine Sample
Obs  Physical observation
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational health</td>
<td>A service that ensures you are fit and well to complete placements</td>
</tr>
<tr>
<td>Off duty</td>
<td>The shift pattern (rota) a person is working</td>
</tr>
<tr>
<td>PAD</td>
<td>Practice Assessment Document</td>
</tr>
<tr>
<td>PDM</td>
<td>Practice Development Midwife</td>
</tr>
<tr>
<td>PDN</td>
<td>Practice Development Nurse</td>
</tr>
<tr>
<td>PICU</td>
<td>Psychiatric Intensive Care Unit (mental health nursing) or Paediatric</td>
</tr>
<tr>
<td></td>
<td>Intensive Care Unit (children’s nursing)</td>
</tr>
<tr>
<td>PLN</td>
<td>Psychiatric Liaison Nurse - mental health nurse in A&amp;E/general departments</td>
</tr>
<tr>
<td>PNW</td>
<td>Postnatal Ward</td>
</tr>
<tr>
<td>SC</td>
<td>Subcutaneous Injection</td>
</tr>
<tr>
<td>Sluice</td>
<td>A room where dirty waste is taken to be disposed of or tested</td>
</tr>
<tr>
<td>SNP</td>
<td>Site Nurse Practitioner</td>
</tr>
<tr>
<td>Sphygmanometer</td>
<td>Manual blood pressure measuring device</td>
</tr>
<tr>
<td>Teaching</td>
<td>Teaching sessions held within your trust by trust staff that you can</td>
</tr>
<tr>
<td></td>
<td>attend during the day while you are on placement</td>
</tr>
<tr>
<td>Tx</td>
<td>Treatment</td>
</tr>
<tr>
<td>Urinary catheter</td>
<td>A thin tube inserted to empty the bladder</td>
</tr>
<tr>
<td>Venflon</td>
<td>A cannula in the vein to give drugs or fluids</td>
</tr>
</tbody>
</table>
Appendix: Rounded Experience

Rounded Experience for Adult Nursing Programmes

Your Rounded Experience will be made up of placements from the categories outlined below:

<table>
<thead>
<tr>
<th>Category</th>
<th>Group 1</th>
<th>Group 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical</td>
<td>general and specialist</td>
<td>elderly care</td>
</tr>
<tr>
<td>Surgical</td>
<td>General and specialist, including day surgery</td>
<td></td>
</tr>
<tr>
<td>Short Stay</td>
<td>Other short stay areas e.g. endoscopy, radiology and catheter labs</td>
<td></td>
</tr>
<tr>
<td>Critical Care</td>
<td>Level 2 care e.g. A&amp;E, high dependency units, coronary care units, theatre</td>
<td></td>
</tr>
<tr>
<td>Community</td>
<td>district nursing, intermediate care, community rehabilitation units and nursing homes, hospice care, specialist community teams e.g. tuberculosis, sexual health etc.</td>
<td>outpatient departments and ambulatory clinics</td>
</tr>
<tr>
<td>Optional Elective</td>
<td>International, national or research</td>
<td></td>
</tr>
</tbody>
</table>

Specialisms

Specialisms vary between placement provider organisations and not all have placements available in all specialisms. Specialisms may include the following:

- Admissions (includes A&E and Clinical Decision Units)
- Bariatrics
- Burns
- Cardiac
- Dentistry
- Dermatology
- Diabetes
- District Nursing
- Elderly Care
- Endocrine
- Endoscopy
- ENT
- Gastro
- Gynaecology
- Haematology
- Head and Neck
- HIV
- Imaging
- Infectious Diseases
- Intensive Care
- Liver
- Neuro
- Ophthalmology
- Oncology
- Orthopaedics
- Palliative Care
- Plastics
- Prison Services
- Renal
- Respiratory
- Sexual Health
- Sickle Cell
- Stroke
- Theatres
- Thoracic
- Vascular

- Over the course of the programme, you’ll be allocated at least one placement from Medical Group 1 and one from the Surgical Group, although you are likely to have multiple and consecutive instances of the same type. Some placements may fall into both categories, but we’ll try to only give you one mixed area, subject to the availability of alternate placements.

- If you’re an undergraduate student, we’ll try to give you one placement from Medical Group 2, subject to availability.

- We’ll try to give you at least one community placement – where possible, this will be from Group 1.

- You should be aware that elderly clients make up a significant portion of patients, so considerable contact with elderly patients is to be expected, regardless of your placement area.

During progression point 2 or 3:

- You’ll have one placement from the Critical Care category during progression point 2 or 3.

- All students should undertake one community placement.
Rounded Experience for the Adult Nursing Community Circuit

Your Rounded Experience will be made up of placements from the categories outlined below:

| Community Nursing | Group 1: District nursing / Neighbourhood nursing  
<table>
<thead>
<tr>
<th></th>
<th>Group 2: General practice nursing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Specialist Services</td>
<td>E.g. @Home team, Diabetes, Heart failure, Rapid response team, Respiratory, Sexual health, Tissue viability</td>
</tr>
<tr>
<td>Community Bedded Unit</td>
<td>Intermediate care, rehabilitation, community hospital, nursing home</td>
</tr>
</tbody>
</table>
| Critical Care | Level 3 care e.g. Intensive Care Units  
|               | Level 2 care e.g. A&E, High Dependency Units, Coronary Care Units, Theatres |
| Hospital | Group 1: Medical generalist or specialist  
|          | Group 2: Surgical generalist or specialist |
| Optional Elective | International, National or Research |

- Over the course of the programme, you will be allocated at least one placement from Community Nursing Group 1 and one from the Community Specialist Services Group.
- All students are expected to work some weekends and night duty.

During progression point 2 or 3:
- You’ll have one placement from the Critical Care category during progression point 2 or 3.
Rounded Experience for Child Nursing Programmes

Your Rounded Experience will be made up of placements from the categories outlined below:

<table>
<thead>
<tr>
<th>Category</th>
<th>Group 1</th>
<th>Group 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical</td>
<td><em>general</em></td>
<td><em>specialist</em></td>
</tr>
<tr>
<td>Surgical</td>
<td><em>general</em></td>
<td><em>specialist</em></td>
</tr>
<tr>
<td>Community/Ambulatory</td>
<td><em>health visitor,</em></td>
<td><em>outpatient departments and ambulatory clinics</em></td>
</tr>
<tr>
<td></td>
<td>school nurse,*</td>
<td></td>
</tr>
<tr>
<td></td>
<td>community nursing teams and special needs schools*</td>
<td></td>
</tr>
<tr>
<td>Critical Care</td>
<td><em>paediatric intensive care</em></td>
<td><em>Neonatal intensive care,</em></td>
</tr>
<tr>
<td></td>
<td></td>
<td><em>A&amp;E</em></td>
</tr>
<tr>
<td>Optional Elective</td>
<td>International, national or research</td>
<td></td>
</tr>
</tbody>
</table>

- Over the course of the programme, you’ll be allocated at least one placement from the Medical category and one from the Surgical category, although you are likely to have multiple and consecutive instances of the same type.
- If you’re an undergraduate student, we’ll try to give you two different Critical Care placements, subject to availability. For postgraduates, we’ll give you at least one, but you might be able to do two, depending on how these fit with your other placements.

During progression point 2 or 3:

- You’ll have one placement from the Community Group 1 category during progression point 2 or 3. If this isn’t possible, we’ll give you a placement from Community Group 2.

Specialisms

Specialisms vary between placement provider organisations and not all have placements available in all specialisms. Specialisms may include the following:

- Allergy
- Burns
- Cardiac
- Health Visiting
- Infectious Diseases
- Liver
- Neonatal
- Neuro
- Oncology
- Orthopaedics
- Palliative care
- Renal
- School Nursing
Rounded Experience for Mental Health Nursing Programmes

Your Rounded Experience will be made up of placements from the categories outlined below:

| Adult Inpatient | Group 1: PICU  
Group 2: Other non-specialist inpatient areas, including rehabilitation  
Group 3: older adult |
|-----------------|---------------------------------------------------------------|
| Community       | Group 1: CMHT: assessment or recovery  
Group 2: other acute areas, e.g. home treatment, assertive outreach, psychiatric liaison, early intervention  
Group 3: other non-specialist areas, including older adult |
| Specialist      | Group 1: addictions  
Group 2: behavioural, including learning disabilities, forensics  
Group 3: CAMHS  
Group 4: other specialist areas e.g. eating disorders, HIV, perinatal |
| Optional Elective | International, national or research |

- Over the course of the programme, you’ll be allocated at least one placement from each of the three main categories: Adult Inpatient, Community and Specialist.
- Each year you’ll undertake at least one inpatient placement and one community placement, and these could be in specialist areas.
- At least one of your placements during the programme will be from Adult Inpatient Group 1.
- You’ll complete one Older Adult placement during the programme, which could either be in an Inpatient or Community setting.

Specialisms

Specialisms vary between placement provider organisations and not all have placements available in all specialisms. Specialisms may include the following:

- A&E Psychiatric Liaison
- Addictions
- Assertive Outreach
- Behavioural Disorders
- Child & Adolescent (CAMHS)
- Community Mental Health Teams
- Deaf services
- Early Intervention
- Early Onset
- Eating Disorders
- Forensics
- HIV
- Home Treatment
- Intensive Care
- Learning Disabilities
- Neuro-development
- OCD
- Older Adult
- Perinatal
- Physical Care
- Prison services
- Sexual Health
Rounded Experience for BSc Midwifery Practice with Registration as a Midwife

Your Rounded Experience will be made up of placements from the categories outlined below:

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antenatal</td>
<td>Ward-based or community clinics, day assessment unit, early pregnancy or ultrasound clinics</td>
</tr>
<tr>
<td>Intrapartum (labour and birth)</td>
<td>Obstetric units or births centres/midwifery-led units. Triage. Community placements may offer the opportunity to attend homebirths</td>
</tr>
<tr>
<td>Postnatal</td>
<td>Ward-based or community</td>
</tr>
<tr>
<td>Gynaecology</td>
<td>Ward-based placements in second year</td>
</tr>
<tr>
<td>Theatres</td>
<td>Obstetric or general theatres in second year</td>
</tr>
<tr>
<td>Neonatal</td>
<td>Neonatal unit placement in third year</td>
</tr>
<tr>
<td>Caseloading</td>
<td>In the second and third year, you will be able to book a minimum of two clients and offer continuity of care throughout the antenatal, intrapartum and postnatal periods</td>
</tr>
<tr>
<td>Community</td>
<td>With a team based in the community, offering antenatal and postnatal care; some teams may also offer intrapartum care</td>
</tr>
<tr>
<td>Optional elective</td>
<td>At the end of your third year you may participate in an international, national or research elective placement</td>
</tr>
</tbody>
</table>

- Over the course of the programme you will rotate through antenatal, intrapartum, postnatal and community placements every year.
- All students are expected to work some weekends, night duty and undertake some on-call commitment during the course of the programme.

Specialisms

Specialisms vary between placement provider organisations and not all have placements available in all specialisms. Specialisms may include the following:

- Caseloading community teams
- Perinatal mental health
- Gestational diabetes clinic
- HIV specialist midwives
- Infant feeding specialist midwives
- Fetal medicine unit
- Women’s health physiotherapy
- Sexual health clinic
- Smoking cessation services
- Young parents’ teams
- Sickle cell and haemoglobinopathy specialist midwives
- Safeguarding specialist midwives
- Health visitors
- Social workers
- Antenatal and newborn screening specialist midwives
- Audit specialist midwives
- Risk management specialist midwives
- A&E
- High-dependency care