

University of  
Hertfordshire **UH**

Name.....

Number.....

Cohort.....

Personal Tutor.....

# PRACTICE ASSESSMENT DOCUMENT

## LEARNING DISABILITIES NURSING PART 3 BSc



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

<b>Contents</b>	<b>Page</b>
Welcome to your Practice Assessment Document (PAD)	3
Guidance for using the PAD	4
University Specific Guidelines	5
Descriptors for Assessing Students in Practice	7
List of Mentors/Supervisors	8
Placement 1	10
Placement 2	24
Placement 3	38
Placement 4	52
Essential Skills Cluster	66
Part 3 Episode of Care	84
Part 3 Medicines Management	87
Action Plan	89
Sign-Off Mentor Record	95
Record of Practice Clinical Experience Hours	97
Extra Placement Information Forms	103
Extra Record of Meeting Pages	106

## **Welcome to your Practice Assessment Document (PAD)**

### **Student responsibilities**

This Practice Assessment Document is designed to support and guide you towards successfully achieving the criteria set out in the Standards for Pre-Registration Nursing Education (NMC 2010).

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.

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 the 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 mentor/supervisor 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/carers identifiable information. Contents must not be disclosed to any unauthorised person or removed, photocopied or used outside the placement or university.

### **Mentor/Supervisor responsibilities**

As a Mentor/Supervisor you have an important role in supporting and guiding the student through their learning experience. This includes facilitating any reasonable adjustments the student may need to get maximum benefit from the placement.

As well as undertaking the required assessments, your role also includes identifying relevant learning opportunities and creating learning and development plans with the student. Duty rotas should support the development of the student/mentor relationship and allow the facilitation of learning. To enable this, 40% of the student's time spent in practice must be under your direct or indirect supervision.

When assessing the student, 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 with a specified timeframe. In the event of this, seek guidance from the university representative and/or senior practice representative.

### **Sign-Off Mentor responsibilities (Part 3 only)**

Sign-off Mentors must allocate time with the student to reflect, give feedback and keep a record of the student's progress in their final period of practice learning. In accordance with 'Due Regard', the assessor must be registered on the same part of the NMC register.

## Guidance for using the PAD to Facilitate and Guide Practice Learning

Assessment criteria in the PAD are based on the NMC Essential skills clusters, progression criteria and standards for competence (NMC 2010). All mentors/supervisors/other professionals who comment in this document should sign and give their details on the record page which can be found in the first section of this document.

### Components of Assessment (see individual university guidance/regulations)

**Professional Values:** These are assessed and must be achieved *by the end of each placement*.

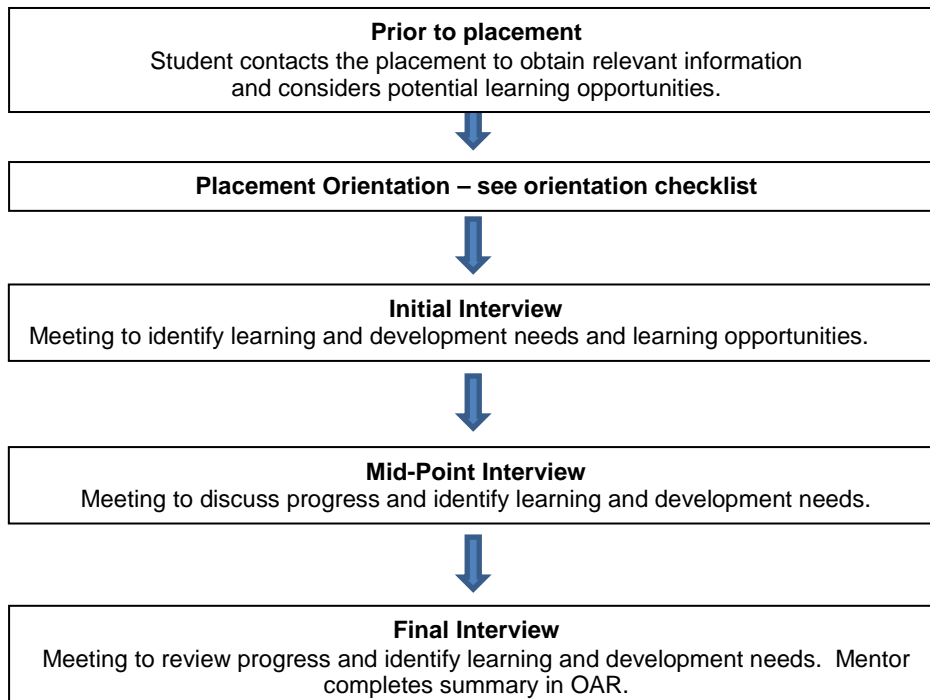
**Essential Skills:** These can be assessed in a range of placements but need to be assessed as achieved at least once *by the end of the Part*.

**Assessment of an Episode of Care:** This assesses the student's progress towards competency and must be achieved *by the end of the Part*. Examples are included in the 'Student and mentor Guide' An additional assessment of 'medicines management' is included in Part 2 and Part 3. Please refer to the 'student and mentor guide' regarding specific guidance on drug calculations in Part 3.

**Patient/Service User/Carer Feedback Form:** The mentor/supervisor must give permission before the person receiving care is approached for feedback on the student's performance. This is not formally assessed but may contribute to the mentor/supervisor's overall feedback.

**Recording Additional Experiences and Feedback:** There are two additional forms (included in each placement section, the first of these relates to working with other healthcare professionals/inter-professional working and the second can be completed by any staff member (inc. academic representatives/link lecturer) who wish to record student progress.

### Process of practice assessment



Further information / guidance is included in the university specific pages (overleaf) and in the *Student and Mentor Guide to Practice Learning*



## Guidelines for Assessment and Progression

This document has been designed for use across nine Universities. This section outlines the process for the assessment and progression of students on the Pre-Registration Nursing programmes at the University of Hertfordshire.

### Placement

A placement is the total period of practice learning within a semester which is related to the relevant stage of the programme of study.

There will be opportunities in a range of practice placement experiences to be assessed in the essential skills, an Episode of Care (parts 1,2 and 3) Medicines Management (in part 3) and the Professional Values in Practice across each part/year (1, 2 and 3) of the programme. This will enable the achievement of the appropriate progression points (1, 2 and 3) and completion of practice learning as determined by the NMC.

### Assessment of Essential Skills

The assessment of essential skills should be undertaken across the part/year.

The student **ONLY** needs to achieve each essential skill **ONCE** across the part/year (1, 2 or 3) and **NOT** in every practice placement period or practice learning experience. If an essential skill is assessed as achieved early in a part /year (1, 2, and 3), it is expected that the student will maintain that level of competence. **When this does not occur a student will not achieve statement 7 of the Professional Values in Practice component** (*the student makes consistent effort to engage in the requisite standards of care and learning*) and will require an action plan to address this.

### Assessment of Professional Values in Practice

Assessment of the Professional Values in Practice will be completed in each placement at mid-point and end-point.

### Assessment of an Episode of Care and Medicines Management (in part 3)

The assessment of these should be undertaken in one placement in the part/year.

### Submission and Progression

At the **END OF EACH PLACEMENT**, the student will submit the PAD, using University procedures. The Professional Values in Practice statements must be achieved in each area. If this is not achieved then an action plan will be formulated for the next placement. If this is not achieved in the final placement of the part/year or at subsequent retrieval the student will normally be withdrawn from the programme.

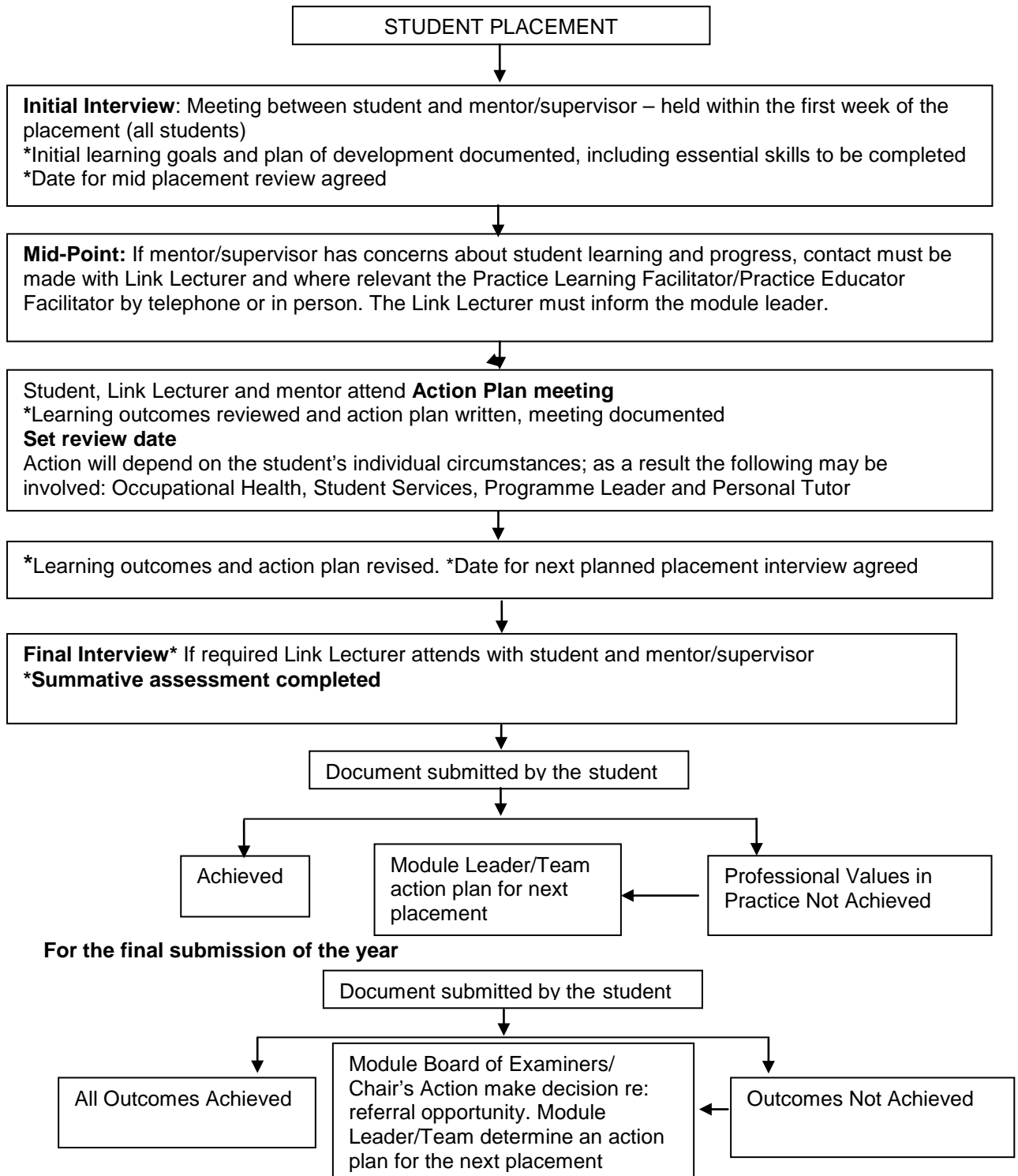
At the **END OF THE PART/YEAR** (1, 2 or 3), the student will submit the PAD, using University procedures. For progression from one part/year to the next, all the essential skills must be achieved alongside the Professional Values in Practice statements and the Episode of Care. In part 3 the Medicines Management assessment must also be achieved.

If the essential skills, the Professional Values in Practice or the Episode of Care/Medicines Management (part 3) have **NOT BEEN ACHIEVED** then the student will have failed practice and will normally be offered a retrieval opportunity.

### Practice Hours

All practice hours must be properly accounted for including sickness and absence and following the Programme policy. At the University of Hertfordshire any practice hours lost are not normally made up while still in the placement area. Any need to make up hours will be put in place by the Programme/Filed Tutors and the placement office

## Guidelines for Assessment and Progression



\* Points at which written evidence is required e.g. all meeting notes

Action plan must include:

- Issues of concern
- Management of issues of concern, including support to be given etc.
- Identification of realistic time frame by which student will have achieved the learning outcomes or overcome issues of concern
- Consequences of failure to achieve learning outcomes or overcome issues of concern

### Descriptors for Assessing Students in Practice

The NMC has identified skills and professional behaviours that a student must demonstrate by the first progression point:

These criteria cover:

- Works independently, with minimal direct supervision, in a safe and confident manner.
- Demonstrates the ability to work as an autonomous practitioner by the point of registration.

Mentors are required to assess students at the level they are expected to achieve for their progression point. These descriptors should be used when assessing Professional Values, Essential Skills and the Episode of Care.

**By the end of Part 3 the student needs to achieve all the Essential Skills, Professional Values, the Episode of Care Assessment and the Medicines Management Assessment.**

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

Achieved	Knowledge and understanding	Professional attitude	Participation in care and practical skill
<b>YES</b>	Has a good knowledge-base and understanding is evident to support safe and effective practice. Can provide explanations to others, justifying decisions & actions using a sound evidence-base.	Is able to demonstrate positive engagement with learning and is able to respond proactively and flexibly to situations.	Is able to safely, confidently and competently focus on the patient in both predictable and less well recognised situations of care.
<b>NO</b>	Is only able to identify the essential knowledge-base and needs to develop further understanding and/or has an inadequate knowledge base or demonstrates unsafe practice.	Is disengaged from the learning process and/or responds inappropriately to patients/service users and/or colleagues.	With minimal supervision is not able to demonstrate safe practice and is unable to perform the activity independently.

### List of Mentors/Supervisors

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

**(All mentors must have attended an annual update in line with NMC requirements)**

[illegible]



### List of Mentors/Supervisors

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

**(All mentors must have attended an annual update in line with NMC requirements)**

[illegible]

**NB: For some students a placement may be split across two areas**

**Placement 1**

**Placement Provider:**

(e.g. Trust)

**Name of Practice Area:**

**Type of Experience:**

(e.g. Community/Ward based)

**Practice Placement Telephone:**

**Placement Contact Email:**

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

**Mentor/Co-Mentor/Supervisor Details:**

**Name:**

**Designation:**

**Name:**

**Designation:**

**Other Practice Staff/Key Contacts:**

**Name:**

**Designation:**

**Academic Contact Details:**

(e.g. Link Lecturer)

**Name:**

**Designation:**

**Name:**

**Designation:**

**I have seen and discussed the purpose of the student's Ongoing Achievement Record**

**Mentor's signature:**

**Date:**

**Placement 1: Orientation**

Name of Placement Area		Name of Area 1		Name of Area 2 (if app.)	
		Initial/Date (Student)	Initial/Date (Mentor)	Initial/Date (Student)	Initial/Date (Mentor)
<b>The following criteria need to be met within the first day in placement</b>					
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: <ul style="list-style-type: none"> <li>• fire alarms</li> <li>• fire exits</li> <li>• fire extinguishers</li> </ul>					
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 <ul style="list-style-type: none"> <li>• health and safety</li> <li>• incident reporting procedures</li> <li>• infection control</li> <li>• handling of messages and enquiries</li> <li>• other policies</li> </ul>					
The student has been made aware of information governance requirements					
The shift times, meal times and reporting sick policies have been explained.					
Policy regarding safeguarding has been explained					
Lone working policy has been explained (if applicable)					
Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed)					
<b>The following criteria need to be met prior to use</b>					
The student has been shown and given a demonstration of the moving and handling equipment used in the clinical area					
The student has been shown and given a demonstration of the medical devices used in the clinical area					
Placement Provider induction/update complete, if applicable					

**Placement 1: Initial Interview**

**Area Name:**

This interview takes place within the first week of the placement

**Student to identify learning and development needs** (with guidance from the mentor)

**Mentor to identify learning opportunities to enable the student to meet their learning and development needs and assessments**

**Mentor and student to negotiate and agree a learning plan -**

**Student's signature:**

**Date:**

**Mentor's signature:**

**Date:**

**Additional Signature (If Applicable):**

**Date:**

### Professional Values in Practice

Students are required to demonstrate high standards of professional conduct at all times during their placements. Students should work within legal frameworks, and be able to articulate the underpinning values of The Code (2015). Professional values expectations are reflected in the statements below.

**Yes = Achieved, No = Not Achieved (Refer to Grade Descriptors on Page 7)**

<b>Professional attitude, behaviour and responsibility</b>					
	<b>Student Evidence / Comments</b>	<b>Achieved Mid-Point Yes/No</b>	<b>Initial/ Date</b>	<b>Achieved Final Yes/No</b>	<b>Initial/ Date (Final)</b>
1. The student maintains confidentiality in accordance with the NMC code and recognises limits to confidentiality, for example public interest and protection from harm.					
2. The student is non-judgemental, respectful and courteous at all times when interacting with patients/service users and all colleagues.					
3. The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement.					
4. The student's personal presentation and dress code is in accordance with the organisation's uniform policy.					
5. The student acts as a role model in promoting a professional image.					
6. The student is proactive in promoting and maintaining the person's privacy and dignity. Exercises professional advocacy to safeguard human rights.					
7. The student demonstrates openness, trustworthiness and integrity					

	Student Evidence / Comments	Achieved Mid-Point Yes/No	Initial/ Date	Achieved Final Yes/No	Initial/ Date (Final)
8. The student makes consistent effort to engage in and reflect on the requisite standards of evidence based care and learning to enhance care and their own professional development.					
<b>Safe and compassionate care</b>					
9. The student is attentive, kind, compassionate and sensitive to the needs of others. Recognises that people with learning disabilities are full and equal citizens, focusing on and developing their strengths and abilities.					
10. The student maintains consistent person-centred practice and always promotes the autonomy, rights and choices of people with learning disabilities.					
11. The student reports any concerns to a professional member of staff safeguarding vulnerable people, including those with complex needs arising from ageing, cognitive impairment, long term conditions and at the end of life.					
12. The student demonstrates the potential to lead and work autonomously and to listen and seek clarity where appropriate.					
13. The student is self-aware and self-confident and is able to work within the limitations of own knowledge, skills and professional boundaries and take appropriate action.					
14. The student manages appropriate and constructive relationships with the multidisciplinary team, service users, families and other carers, with the intent of building professional, caring relationships ensuring that decisions about care are shared.					

**Students can complete their evidence at any stage prior to the final interview. If there are any issues/areas for concern, these must be recorded in the Mid-Point or Final Interview as appropriate. 'Not Achieved' must trigger an Action Plan at the time of assessment and must be documented. The Action Plan template can be found on page 89**

**Placement 1: Mid-Point Interview**

This interview takes place half way through the placement

**Mentor and Student to sign on the next page**

<b>Student's self-assessment/reflection on progress</b> Reflect on your overall progression referring to your personal learning needs, professional values and essential skills. Identify your strengths and document areas for development.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>
<b>Mentor's comments</b> Discuss with the student their self-assessment and comment on their progress using the assessment descriptors below, detailing evidence used to come to your decision.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>

**Placement 1: Mid-Point Interview**  
**Ongoing learning and development needs**

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

<b>Identify learning and development needs</b> Refer to progress in achieving personal learning needs, professional values and essential skills.	<b>Identify the learning opportunities/support to enable the student to meet their needs</b>								
<table style="width: 100%;"><tr><td style="width: 50%;"><b>Review Date:</b></td><td style="width: 50%;"><b>Sign when reviewed:</b></td></tr><tr><td><b>Student's signature:</b></td><td><b>Date:</b></td></tr><tr><td><b>Mentor's signature:</b></td><td><b>Date:</b></td></tr><tr><td><b>Additional Signature (If Applicable):</b></td><td><b>Date:</b></td></tr></table> <p><i>Any outstanding learning and development needs are to be discussed and documented at the final interview.</i></p>		<b>Review Date:</b>	<b>Sign when reviewed:</b>	<b>Student's signature:</b>	<b>Date:</b>	<b>Mentor's signature:</b>	<b>Date:</b>	<b>Additional Signature (If Applicable):</b>	<b>Date:</b>
<b>Review Date:</b>	<b>Sign when reviewed:</b>								
<b>Student's signature:</b>	<b>Date:</b>								
<b>Mentor's signature:</b>	<b>Date:</b>								
<b>Additional Signature (If Applicable):</b>	<b>Date:</b>								

**If specific concerns have been raised about the student's performance this should trigger an Action Plan at the time of assessment and should be documented. The action plan template can be found on page 89**



**Placement 1: Final Interview**

This should take place towards the end of the placement

<b>Student's self-assessment/reflection on progress</b> Reflect on your overall progression referring to your personal learning needs, professional values and essential skills. Identify your strengths and document areas for development.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>
<b>Mentor's comments</b> Discuss with the student their self-assessment and comment on their progress using the assessment descriptors below, detailing evidence used to come to your decision.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>

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

**Learning and Development Needs**

To be agreed between the Mentor and Student

**Review learning and development needs identified at the Mid-Point Interview and those to take forward to the next placement****Was an Action Plan required to support the student?****YES / NO****If Yes, was the Academic Representative informed?****YES / NO****The Action Plan can be found on page 89**

<b>Checklist for assessed documents</b>	<b>Tick</b>	<b>Mentor Initial</b>	<b>Student Initial</b>
The Mentor has signed the professional value statements at both Mid-Point and Final Interview			
The Mentor has signed the relevant skills the student has achieved in this area (where applicable)			
The Mentor has completed and signed the grading of practice document (depending on university requirements)			
The student and Mentor has checked and signed the practice placement hours			
The Mentor and Student have completed all the interview records and development plans, as appropriate			
The Mentor has printed and signed their name on the List of Mentors/Supervisors Record			
The Mentor has completed the Ongoing Achievement Record (OAR)			






**Student's signature:****Date:****Mentor's signature:****Date:****Additional Signature (If Applicable):****Date:**

**Patient/Service User Feedback Form**

**Mentors should obtain consent from patients/service users who should feel able to decline to participate.**

We would like to hear your views about the way the student nurse has looked after you.

- Your feedback will help the student nurse's learning
- The feedback you give will not change the way you are looked after

Tick if you are:	The Patient/Service User <input type="checkbox"/>	Carer/Relative <input type="checkbox"/>			
<b>How happy were you with the way the student nurse...</b>	Very Happy 	Happy 	I'm not sure 	Unhappy 	Very unhappy 
...cared for you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...listened to your needs?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...understood the way you felt?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...talked to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...showed you respect?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**What did the student nurse do well?**

**What could the student nurse have done differently?**

**Mentor Signature:**

**Date:**

**Student Signature:**

**Date:**

Thank you for your help  
*This form has been designed by Service Users*

**Record of working with other health care professionals/inter-professional working**

Record reflections on your learning in outreach/short practice placements  
or with members of the multi-disciplinary team.

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

More pages can be downloaded as per University guidelines

**Record of working with other health care professionals/inter-professional working**

Record reflections on your learning in outreach/short practice placements  
or with members of the multi-disciplinary team.

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

More pages can be downloaded as per University guidelines

### Ongoing Feedback from Staff in Practice

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments

### Ongoing Feedback from Staff in Practice

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments

**NB: For some students a placement may be split across two areas**

**Placement 2**

**Placement Provider:**

(e.g. Trust)

**Name of Practice Area:**

**Type of Experience:**

(e.g. Community/Ward based)

**Practice Placement Telephone:**

**Placement Contact Email:**

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

**Mentor/Co-Mentor/Supervisor Details:**

**Name:**

**Designation:**

**Name:**

**Designation:**

**Other Practice Staff/Key Contacts:**

**Name:**

**Designation:**

**Academic Contact Details:**

(e.g. Link Lecturer)

**Name:**

**Designation:**

**Name:**

**Designation:**

**I have seen and discussed the purpose of the student's Ongoing Achievement Record**

**Mentor's signature:**

**Date:**



**Placement 2: Orientation**

Name of Placement Area		Name of Area 1		Name of Area 2 (if app.)	
		Initial/Date (Student)	Initial/Date (Mentor)	Initial/Date (Student)	Initial/Date (Mentor)
<b>The following criteria need to be met within the first day in placement</b>					
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: <ul style="list-style-type: none"> <li>• fire alarms</li> <li>• fire exits</li> <li>• fire extinguishers</li> </ul>					
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 <ul style="list-style-type: none"> <li>• health and safety</li> <li>• incident reporting procedures</li> <li>• infection control</li> <li>• handling of messages and enquiries</li> <li>• other policies</li> </ul>					
The student has been made aware of information governance requirements					
The shift times, meal times and reporting sick policies have been explained.					
Policy regarding safeguarding has been explained					
Lone working policy has been explained (if applicable)					
Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed)					
<b>The following criteria need to be met prior to use</b>					
The student has been shown and given a demonstration of the moving and handling equipment used in the clinical area					
The student has been shown and given a demonstration of the medical devices used in the clinical area					
Placement Provider induction/update complete, if applicable					

**Placement 2: Initial Interview**

**Area Name:**

This interview takes place within the first week of the placement

**Student to identify learning and development needs** (with guidance from the mentor)

**Mentor to identify learning opportunities to enable the student to meet their learning and development needs and assessments**

**Mentor and student to negotiate and agree a learning plan -**

**Student's signature:**

**Date:**

**Mentor's signature:**

**Date:**

**Additional Signature (If Applicable):**

**Date:**

### Professional Values in Practice

Students are required to demonstrate high standards of professional conduct at all times during their placements. Students should work within legal frameworks, and be able to articulate the underpinning values of The Code (2015). Professional values expectations are reflected in the statements below.

**Yes = Achieved, No = Not Achieved (Refer to Grade Descriptors on Page 7)**

<b>Professional attitude, behaviour and responsibility</b>					
	<b>Student Evidence / Comments</b>	<b>Achieved Mid-Point Yes/No</b>	<b>Initial/ Date</b>	<b>Achieved Final Yes/No</b>	<b>Initial/ Date (Final)</b>
1. The student maintains confidentiality in accordance with the NMC code and recognises limits to confidentiality, for example public interest and protection from harm.					
2. The student is non-judgemental, respectful and courteous at all times when interacting with patients/service users and all colleagues.					
3. The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement.					
4. The student's personal presentation and dress code is in accordance with the organisation's uniform policy.					
5. The student acts as a role model in promoting a professional image.					
6. The student is proactive in promoting and maintaining the person's privacy and dignity. Exercises professional advocacy to safeguard human rights.					
7. The student demonstrates openness, trustworthiness and integrity					

	Student Evidence / Comments	Achieved Mid-Point Yes/No	Initial/ Date	Achieved Final Yes/No	Initial/ Date (Final)
8. The student makes consistent effort to engage in and reflect on the requisite standards of evidence based care and learning to enhance care and their own professional development.					
<b>Safe and compassionate care</b>					
9. The student is attentive, kind, compassionate and sensitive to the needs of others. Recognises that people with learning disabilities are full and equal citizens, focusing on and developing their strengths and abilities.					
10. The student maintains consistent person-centred practice and always promotes the autonomy, rights and choices of people with learning disabilities.					
11. The student reports any concerns to a professional member of staff safeguarding vulnerable people, including those with complex needs arising from ageing, cognitive impairment, long term conditions and at the end of life.					
12. The student demonstrates the potential to lead and work autonomously and to listen and seek clarity where appropriate.					
13. The student is self-aware and self-confident and is able to work within the limitations of own knowledge, skills and professional boundaries and take appropriate action.					
14. The student manages appropriate and constructive relationships with the multidisciplinary team, service users, families and other carers, with the intent of building professional, caring relationships ensuring that decisions about care are shared.					

**Students can complete their evidence at any stage prior to the final interview. If there are any issues/areas for concern, these must be recorded in the Mid-Point or Final Interview as appropriate. 'Not Achieved' must trigger an Action Plan at the time of assessment and must be documented. The Action Plan template can be found on page 89**

**Placement 2: Mid-Point Interview**

This interview takes place half way through the placement

**Mentor and Student to sign on the next page**

<b>Student's self-assessment/reflection on progress</b> Reflect on your overall progression referring to your personal learning needs, professional values and essential skills. Identify your strengths and document areas for development.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>
<b>Mentor's comments</b> Discuss with the student their self-assessment and comment on their progress using the assessment descriptors below, detailing evidence used to come to your decision.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>

**Placement 2: Mid-Point Interview**  
**Ongoing learning and development needs**

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

<b>Identify learning and development needs</b> Refer to progress in achieving personal learning needs, professional values and essential skills.	<b>Identify the learning opportunities/support to enable the student to meet their needs</b>
<b>Review Date:</b>	
<b>Sign when reviewed:</b>	
<b>Student's signature:</b>	<b>Date:</b>
<b>Mentor's signature:</b>	<b>Date:</b>
<b>Additional Signature (If Applicable):</b>	<b>Date:</b>
<i>Any outstanding learning and development needs are to be discussed and documented at the final interview.</i>	

**If specific concerns have been raised about the student's performance this should trigger an Action Plan at the time of assessment and should be documented. The action plan template can be found on page 89**

**Placement 2: Final Interview**

This should take place towards the end of the placement

<b>Student's self-assessment/reflection on progress</b> Reflect on your overall progression referring to your personal learning needs, professional values and essential skills. Identify your strengths and document areas for development.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>
<b>Mentor's comments</b> Discuss with the student their self-assessment and comment on their progress using the assessment descriptors below, detailing evidence used to come to your decision.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>

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

**Learning and Development Needs**

To be agreed between the Mentor and Student

**Review learning and development needs identified at the Mid-Point Interview and those to take forward to the next placement****Was an Action Plan required to support the student?****YES / NO****If Yes, was the Academic Representative informed?****YES / NO****The Action Plan can be found on page 89**

<b>Checklist for assessed documents</b>	<b>Tick</b>	<b>Mentor Initial</b>	<b>Student Initial</b>
The Mentor has signed the professional value statements at both Mid-Point and Final Interview			
The Mentor has signed the relevant skills the student has achieved in this area (where applicable)			
The Mentor has completed and signed the grading of practice document (depending on university requirements)			
The student and Mentor has checked and signed the practice placement hours			
The Mentor and Student have completed all the interview records and development plans, as appropriate			
The Mentor has printed and signed their name on the List of Mentors/Supervisors Record			
The Mentor has completed the Ongoing Achievement Record (OAR)			

**Student's signature:****Date:****Mentor's signature:****Date:****Additional Signature (If Applicable):****Date:**








**Patient/Service User Feedback Form**

**Mentors should obtain consent from patients/service users who should feel able to decline to participate.**

We would like to hear your views about the way the student nurse has looked after you.

- Your feedback will help the student nurse's learning
- The feedback you give will not change the way you are looked after

Tick if you are:	The Patient/Service User <input type="checkbox"/>	Carer/Relative <input type="checkbox"/>
<b>How happy were you with the way the student nurse...</b>	Very Happy 	Happy 
<b>...cared for you?</b>		Unhappy 
<b>...listened to your needs?</b>		
<b>...understood the way you felt?</b>		
<b>...talked to you?</b>		
<b>...showed you respect?</b>		

**What did the student nurse do well?**

**What could the student nurse have done differently?**

**Mentor Signature:**

**Date:**

**Student Signature:**

**Date:**

Thank you for your help  
*This form has been designed by Service Users*

**Record of working with other health care professionals/inter-professional working**

Record reflections on your learning in outreach/short practice placements  
or with members of the multi-disciplinary team.

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

More pages can be downloaded as per University guidelines

**Record of working with other health care professionals/inter-professional working**

Record reflections on your learning in outreach/short practice placements  
or with members of the multi-disciplinary team.

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

More pages can be downloaded as per University guidelines

### Ongoing Feedback from Staff in Practice

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments

### Ongoing Feedback from Staff in Practice

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments

**NB: For some students a placement may be split across two areas**

**Placement 3**

**Placement Provider:**

(e.g. Trust)

**Name of Practice Area:**

**Type of Experience:**

(e.g. Community/Ward based)

**Practice Placement Telephone:**

**Placement Contact Email:**

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

**Mentor/Co-Mentor/Supervisor Details:**

**Name:**

**Designation:**

**Name:**

**Designation:**

**Other Practice Staff/Key Contacts:**

**Name:**

**Designation:**

**Academic Contact Details:**

(e.g. Link Lecturer)

**Name:**

**Designation:**

**Name:**

**Designation:**

**I have seen and discussed the purpose of the student's Ongoing Achievement Record**

**Mentor's signature:**

**Date:**

**Placement 3: Orientation**

Name of Placement Area		Name of Area 1		Name of Area 2 (if app.)	
		Initial/Date (Student)	Initial/Date (Mentor)	Initial/Date (Student)	Initial/Date (Mentor)
<b>The following criteria need to be met within the first day in placement</b>					
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: <ul style="list-style-type: none"> <li>• fire alarms</li> <li>• fire exits</li> <li>• fire extinguishers</li> </ul>					
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 <ul style="list-style-type: none"> <li>• health and safety</li> <li>• incident reporting procedures</li> <li>• infection control</li> <li>• handling of messages and enquiries</li> <li>• other policies</li> </ul>					
The student has been made aware of information governance requirements					
The shift times, meal times and reporting sick policies have been explained.					
Policy regarding safeguarding has been explained					
Lone working policy has been explained (if applicable)					
Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed)					
<b>The following criteria need to be met prior to use</b>					
The student has been shown and given a demonstration of the moving and handling equipment used in the clinical area					
The student has been shown and given a demonstration of the medical devices used in the clinical area					
Placement Provider induction/update complete, if applicable					

**Placement 3: Initial Interview**

**Area Name:**

This interview takes place within the first week of the placement

**Student to identify learning and development needs** (with guidance from the mentor)

**Mentor to identify learning opportunities to enable the student to meet their learning and development needs and assessments**

**Mentor and student to negotiate and agree a learning plan -**

**Student's signature:**

**Date:**

**Mentor's signature:**

**Date:**

**Additional Signature (If Applicable):**

**Date:**



### Professional Values in Practice

Students are required to demonstrate high standards of professional conduct at all times during their placements. Students should work within legal frameworks, and be able to articulate the underpinning values of The Code (2015). Professional values expectations are reflected in the statements below.

**Yes = Achieved, No = Not Achieved (Refer to Grade Descriptors on Page 7)**

<b>Professional attitude, behaviour and responsibility</b>					
	<b>Student Evidence / Comments</b>	<b>Achieved Mid-Point Yes/No</b>	<b>Initial/ Date</b>	<b>Achieved Final Yes/No</b>	<b>Initial/ Date (Final)</b>
1. The student maintains confidentiality in accordance with the NMC code and recognises limits to confidentiality, for example public interest and protection from harm.					
2. The student is non-judgemental, respectful and courteous at all times when interacting with patients/service users and all colleagues.					
3. The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement.					
4. The student's personal presentation and dress code is in accordance with the organisation's uniform policy.					
5. The student acts as a role model in promoting a professional image.					
6. The student is proactive in promoting and maintaining the person's privacy and dignity. Exercises professional advocacy to safeguard human rights.					
7. The student demonstrates openness, trustworthiness and integrity					

	Student Evidence / Comments	Achieved Mid-Point Yes/No	Initial/ Date	Achieved Final Yes/No	Initial/ Date (Final)
8. The student makes consistent effort to engage in and reflect on the requisite standards of evidence based care and learning to enhance care and their own professional development.					
<b>Safe and compassionate care</b>					
9. The student is attentive, kind, compassionate and sensitive to the needs of others. Recognises that people with learning disabilities are full and equal citizens, focusing on and developing their strengths and abilities.					
10. The student maintains consistent person-centred practice and always promotes the autonomy, rights and choices of people with learning disabilities.					
11. The student reports any concerns to a professional member of staff safeguarding vulnerable people, including those with complex needs arising from ageing, cognitive impairment, long term conditions and at the end of life.					
12. The student demonstrates the potential to lead and work autonomously and to listen and seek clarity where appropriate.					
13. The student is self-aware and self-confident and is able to work within the limitations of own knowledge, skills and professional boundaries and take appropriate action.					
14. The student manages appropriate and constructive relationships with the multidisciplinary team, service users, families and other carers, with the intent of building professional, caring relationships ensuring that decisions about care are shared.					

**Students can complete their evidence at any stage prior to the final interview. If there are any issues/areas for concern, these must be recorded in the Mid-Point or Final Interview as appropriate. 'Not Achieved' must trigger an Action Plan at the time of assessment and must be documented. The Action Plan template can be found on page 89**

### Placement 3: Mid-Point Interview

This interview takes place half way through the placement

**Mentor and Student to sign on the next page**

<b>Student's self-assessment/reflection on progress</b> Reflect on your overall progression referring to your personal learning needs, professional values and essential skills. Identify your strengths and document areas for development.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>
<b>Mentor's comments</b> Discuss with the student their self-assessment and comment on their progress using the assessment descriptors below, detailing evidence used to come to your decision.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>

### Placement 3: Mid-Point Interview

#### Ongoing learning and development needs

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

<b>Identify learning and development needs</b> Refer to progress in achieving personal learning needs, professional values and essential skills.		<b>Identify the learning opportunities/support to enable the student to meet their needs</b>	
<b>Review Date:</b>		<b>Sign when reviewed:</b>	
<b>Student's signature:</b>		<b>Date:</b>	
<b>Mentor's signature:</b>		<b>Date:</b>	
<b>Additional Signature (If Applicable):</b>		<b>Date:</b>	
<i>Any outstanding learning and development needs are to be discussed and documented at the final interview.</i>			

**If specific concerns have been raised about the student's performance this should trigger an Action Plan at the time of assessment and should be documented. The action plan template can be found on page 89**

**Placement 3: Final Interview**

This should take place towards the end of the placement

<b>Student's self-assessment/reflection on progress</b> Reflect on your overall progression referring to your personal learning needs, professional values and essential skills. Identify your strengths and document areas for development.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>
<b>Mentor's comments</b> Discuss with the student their self-assessment and comment on their progress using the assessment descriptors below, detailing evidence used to come to your decision.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>

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

**Learning and Development Needs**

To be agreed between the Mentor and Student

**Review learning and development needs identified at the Mid-Point Interview and those to take forward to the next placement****Was an Action Plan required to support the student?****YES / NO****If Yes, was the Academic Representative informed?****YES / NO****The Action Plan can be found on page 89**

<b>Checklist for assessed documents</b>	<b>Tick</b>	<b>Mentor Initial</b>	<b>Student Initial</b>
The Mentor has signed the professional value statements at both Mid-Point and Final Interview			
The Mentor has signed the relevant skills the student has achieved in this area (where applicable)			
The Mentor has completed and signed the grading of practice document (depending on university requirements)			
The student and Mentor has checked and signed the practice placement hours			
The Mentor and Student have completed all the interview records and development plans, as appropriate			
The Mentor has printed and signed their name on the List of Mentors/Supervisors Record			
The Mentor has completed the Ongoing Achievement Record (OAR)			






**Student's signature:****Date:****Mentor's signature:****Date:****Additional Signature (If Applicable):****Date:**

**Patient/Service User Feedback Form**

**Mentors should obtain consent from patients/service users who should feel able to decline to participate.**

We would like to hear your views about the way the student nurse has looked after you.

- Your feedback will help the student nurse's learning
- The feedback you give will not change the way you are looked after

Tick if you are:	The Patient/Service User <input type="checkbox"/>	Carer/Relative <input type="checkbox"/>			
<b>How happy were you with the way the student nurse...</b>	Very Happy 	Happy 	I'm not sure 	Unhappy 	Very unhappy 
...cared for you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...listened to your needs?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...understood the way you felt?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...talked to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...showed you respect?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**What did the student nurse do well?**

**What could the student nurse have done differently?**

**Mentor Signature:**

**Date:**

**Student Signature:**

**Date:**

Thank you for your help  
*This form has been designed by Service Users*

**Record of working with other health care professionals/inter-professional working**

Record reflections on your learning in outreach/short practice placements  
or with members of the multi-disciplinary team.

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

More pages can be downloaded as per University guidelines



**Record of working with other health care professionals/inter-professional working**

Record reflections on your learning in outreach/short practice placements  
or with members of the multi-disciplinary team.

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

More pages can be downloaded as per University guidelines

### Ongoing Feedback from Staff in Practice

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments

### Ongoing Feedback from Staff in Practice

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments

**NB: For some students a placement may be split across two areas**

**Placement 4**

**Placement Provider:**

(e.g. Trust)

**Name of Practice Area:**

**Type of Experience:**

(e.g. Community/Ward based)

**Practice Placement Telephone:**

**Placement Contact Email:**

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

**Mentor/Co-Mentor/Supervisor Details:**

**Name:**

**Designation:**

**Name:**

**Designation:**

**Other Practice Staff/Key Contacts:**

**Name:**

**Designation:**

**Academic Contact Details:**

(e.g. Link Lecturer)

**Name:**

**Designation:**

**Name:**

**Designation:**

**I have seen and discussed the purpose of the student's Ongoing Achievement Record**

**Mentor's signature:**

**Date:**

**Placement 4: Orientation**

Name of Placement Area		Name of Area 1		Name of Area 2 (if app.)	
		Initial/Date (Student)	Initial/Date (Mentor)	Initial/Date (Student)	Initial/Date (Mentor)
<b>The following criteria need to be met within the first day in placement</b>					
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: <ul style="list-style-type: none"> <li>• fire alarms</li> <li>• fire exits</li> <li>• fire extinguishers</li> </ul>					
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 <ul style="list-style-type: none"> <li>• health and safety</li> <li>• incident reporting procedures</li> <li>• infection control</li> <li>• handling of messages and enquiries</li> <li>• other policies</li> </ul>					
The student has been made aware of information governance requirements					
The shift times, meal times and reporting sick policies have been explained.					
Policy regarding safeguarding has been explained					
Lone working policy has been explained (if applicable)					
Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed)					
<b>The following criteria need to be met prior to use</b>					
The student has been shown and given a demonstration of the moving and handling equipment used in the clinical area					
The student has been shown and given a demonstration of the medical devices used in the clinical area					
Placement Provider induction/update complete, if applicable					

**Placement 4: Initial Interview**

**Area Name:**

This interview takes place within the first week of the placement

**Student to identify learning and development needs** (with guidance from the mentor)

**Mentor to identify learning opportunities to enable the student to meet their learning and development needs and assessments**

**Mentor and student to negotiate and agree a learning plan -**

**Student's signature:**

**Date:**

**Mentor's signature:**

**Date:**

**Additional Signature (If Applicable):**

**Date:**

### Professional Values in Practice

Students are required to demonstrate high standards of professional conduct at all times during their placements. Students should work within legal frameworks, and be able to articulate the underpinning values of The Code (2015). Professional values expectations are reflected in the statements below.

**Yes = Achieved, No = Not Achieved (Refer to Grade Descriptors on Page 7)**

<b>Professional attitude, behaviour and responsibility</b>					
	<b>Student Evidence / Comments</b>	<b>Achieved Mid-Point Yes/No</b>	<b>Initial/ Date</b>	<b>Achieved Final Yes/No</b>	<b>Initial/ Date (Final)</b>
1. The student maintains confidentiality in accordance with the NMC code and recognises limits to confidentiality, for example public interest and protection from harm.					
2. The student is non-judgemental, respectful and courteous at all times when interacting with patients/service users and all colleagues.					
3. The student maintains an appropriate professional attitude regarding punctuality and communicates appropriately if unable to attend placement.					
4. The student's personal presentation and dress code is in accordance with the organisation's uniform policy.					
5. The student acts as a role model in promoting a professional image.					
6. The student is proactive in promoting and maintaining the person's privacy and dignity. Exercises professional advocacy to safeguard human rights.					
7. The student demonstrates openness, trustworthiness and integrity					

	Student Evidence / Comments	Achieved Mid-Point Yes/No	Initial/ Date	Achieved Final Yes/No	Initial/ Date (Final)
8. The student makes consistent effort to engage in and reflect on the requisite standards of evidence based care and learning to enhance care and their own professional development.					
<b>Safe and compassionate care</b>					
9. The student is attentive, kind, compassionate and sensitive to the needs of others. Recognises that people with learning disabilities are full and equal citizens, focusing on and developing their strengths and abilities.					
10. The student maintains consistent person-centred practice and always promotes the autonomy, rights and choices of people with learning disabilities.					
11. The student reports any concerns to a professional member of staff safeguarding vulnerable people, including those with complex needs arising from ageing, cognitive impairment, long term conditions and at the end of life.					
12. The student demonstrates the potential to lead and work autonomously and to listen and seek clarity where appropriate.					
13. The student is self-aware and self-confident and is able to work within the limitations of own knowledge, skills and professional boundaries and take appropriate action.					
14. The student manages appropriate and constructive relationships with the multidisciplinary team, service users, families and other carers, with the intent of building professional, caring relationships ensuring that decisions about care are shared.					

**Students can complete their evidence at any stage prior to the final interview. If there are any issues/areas for concern, these must be recorded in the Mid-Point or Final Interview as appropriate. 'Not Achieved' must trigger an Action Plan at the time of assessment and must be documented. The Action Plan template can be found on page 89**



**Placement 4: Mid-Point Interview**

This interview takes place half way through the placement

**Mentor and Student to sign on the next page**

<b>Student's self-assessment/reflection on progress</b> Reflect on your overall progression referring to your personal learning needs, professional values and essential skills. Identify your strengths and document areas for development.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>
<b>Mentor's comments</b> Discuss with the student their self-assessment and comment on their progress using the assessment descriptors below, detailing evidence used to come to your decision.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>

**Placement 4: Mid-Point Interview**  
**Ongoing learning and development needs**

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

<b>Identify learning and development needs</b> Refer to progress in achieving personal learning needs, professional values and essential skills.	<b>Identify the learning opportunities/support to enable the student to meet their needs</b>
<b>Review Date:</b>	
<b>Sign when reviewed:</b>	
<b>Student's signature:</b>	<b>Date:</b>
<b>Mentor's signature:</b>	<b>Date:</b>
<b>Additional Signature (If Applicable):</b>	<b>Date:</b>
<i>Any outstanding learning and development needs are to be discussed and documented at the final interview.</i>	

**If specific concerns have been raised about the student's performance this should trigger an Action Plan at the time of assessment and should be documented. The action plan template can be found on page 89**

**Placement 4: Final Interview**

This should take place towards the end of the placement

<b>Student's self-assessment/reflection on progress</b> Reflect on your overall progression referring to your personal learning needs, professional values and essential skills. Identify your strengths and document areas for development.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>
<b>Mentor's comments</b> Discuss with the student their self-assessment and comment on their progress using the assessment descriptors below, detailing evidence used to come to your decision.
<b>Knowledge and Understanding:</b>
<b>Professional Attitude:</b>
<b>Participation in Care and Practical Skill:</b>

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

**Learning and Development Needs**

To be agreed between the Mentor and Student

**Review learning and development needs identified at the Mid-Point Interview and those to take forward to the next placement****Was an Action Plan required to support the student?****YES / NO****If Yes, was the Academic Representative informed?****YES / NO****The Action Plan can be found on page 89**

<b>Checklist for assessed documents</b>	<b>Tick</b>	<b>Mentor Initial</b>	<b>Student Initial</b>
The Mentor has signed the professional value statements at both Mid-Point and Final Interview			
The Mentor has signed the relevant skills the student has achieved in this area (where applicable)			
The Mentor has completed and signed the grading of practice document (depending on university requirements)			
The student and Mentor has checked and signed the practice placement hours			
The Mentor and Student have completed all the interview records and development plans, as appropriate			
The Mentor has printed and signed their name on the List of Mentors/Supervisors Record			
The Mentor has completed the Ongoing Achievement Record (OAR)			






**Student's signature:****Date:****Mentor's signature:****Date:****Additional Signature (If Applicable):****Date:**

### Patient/Service User Feedback Form

**Mentors should obtain consent from patients/service users who should feel able to decline to participate.**

We would like to hear your views about the way the student nurse has looked after you.

- Your feedback will help the student nurse's learning
- The feedback you give will not change the way you are looked after

Tick if you are:	The Patient/Service User <input type="checkbox"/>	Carer/Relative <input type="checkbox"/>			
<b>How happy were you with the way the student nurse...</b>	Very Happy 	Happy 	I'm not sure 	Unhappy 	Very unhappy 
...cared for you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...listened to your needs?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...understood the way you felt?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...talked to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...showed you respect?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**What did the student nurse do well?**

**What could the student nurse have done differently?**

**Mentor Signature:**

**Date:**

**Student Signature:**

**Date:**

Thank you for your help  
*This form has been designed by Service Users*

**Record of working with other health care professionals/inter-professional working**

Record reflections on your learning in outreach/short practice placements  
or with members of the multi-disciplinary team.

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

More pages can be downloaded as per University guidelines

**Record of working with other health care professionals/inter-professional working**

Record reflections on your learning in outreach/short practice placements  
or with members of the multi-disciplinary team.

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

Date	Time spent	Reflections on your learning
Details of your experience		
Supervisor's comments and Signature		

More pages can be downloaded as per University guidelines

### Ongoing Feedback from Staff in Practice

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments



### Ongoing Feedback from Staff in Practice

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments

## **Assessment of Essential Skills**

Assessment of Essential Skills is 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 an Essential Skill 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 mentor's discretion.

The Grade Descriptors are 'Yes' – (This skill has been achieved), 'No' (this skill has not been achieved). Refer to Grade Descriptors on page 7 for further details.

### Assessment of Essential Skills

**Skills Cluster I: Care, Compassion and Communication:**

**People can trust the learning disabilities nurse to provide collaborative care based on the highest standards, knowledge and competence.**

	Yes = Achieved, No = Not Achieved							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date	Yes/No	Sign/Date
1. Demonstrates clinical confidence through sound knowledge, skills and understanding relevant to field.								
2. Is self-aware and self-confident, knows own limitations and is able to take appropriate action.								
3. Recognises and acts to overcome barriers in developing effective professional relationships with service users and carers.								
4. Uses professional support structures to develop self-awareness, challenge own prejudices and enable professional relationships, so that care is delivered without compromise.								
<b>People can trust the learning disabilities nurse to engage in person-centred care empowering people to make choices about how their needs are met when they are unable to meet them for themselves.</b>								
5. Recognises situations and acts appropriately when a person's choice may compromise their safety or the safety of others.								
6. Uses strategies to manage situations where a person's wishes conflict with the nursing interventions necessary for the person's safety. Facilitates access to independent advocacy.								

Practice Assessment Document

	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
7. Acts with dignity and respect to ensure that people who are unable to meet their activities of living have choices about how these are met and feel empowered to do as much as possible for themselves.								
8. Works autonomously, confidently and in partnership with people, their families and carers to ensure that needs are met through care planning and delivery including strategies for self-care and support.								
9. Actively helps people to identify and use their strengths to achieve their goals and aspirations.								
<b>People can trust the learning disabilities nurse to respect them as individuals and strive to help them to preserve their dignity at all times.</b>								
10. Acts autonomously to challenge situations or others when someone's dignity may be compromised empowering and supporting choice.								
<b>People can trust the learning disabilities nurse to engage collaboratively with them and their family or carers to manage, delegate and supervise therapeutic environments for people with learning disabilities within their cultural environments in an accepting and anti-discriminatory manner free from harassment and exploitation.</b>								
11. Is acceptant of differing cultural traditions, beliefs, UK legal frameworks and professional ethics when planning care with people and their families and carers.								

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

Practice Assessment Document

	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
12. Manages and diffuses challenging situations effectively and uses leadership, and decision-making skills to engage effectively with a range of professionals, agencies and stakeholders.								
13. Can represent and protect the rights of people with learning disabilities challenging negative stereotypes, and discrimination.								
<b>People can trust the learning disabilities nurse to engage with them in a warm, sensitive and compassionate way.</b>								
14. Recognises and acts autonomously to respond to own emotional discomfort and distress in self and others.								
15. Through reflection and evaluation demonstrates commitment to personal and professional development in lifelong learning.								
<b>People can trust the learning disabilities nurse to engage therapeutically and actively listen to their needs and concerns, responding using complex communication and interpersonal skills and strategies to work with people of all ages who have learning disabilities and help them to express themselves, provide information that is clear, accurate, meaningful and free from jargon.</b>								
16. Communicates effectively and sensitively in different settings, using a full range of person-centred alternative and augmentative communication strategies and skills, to build partnerships and therapeutic relationships, to reduce barriers to communication.								

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

Practice Assessment Document

	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
17. Makes all relevant information accessible to and understandable by people with learning disabilities, including adaptation of format, presentation and delivery and provides accurate and comprehensive written and verbal reports based on best available evidence.								
18. Uses structured approaches to assess, communicate with, interpret and respond therapeutically to people with learning disabilities who have complex physical and psychological health needs or those in behavioural distress.								
19. Uses appropriate and relevant communication skills to deal with difficult and challenging circumstances, for example, recognising and responding therapeutically to the complex behaviour that people with learning disabilities may use as a means of communication, dealing with complaints, resolving disputes or conveying 'unwelcome news'.								
<b>People can trust the learning disabilities nurse to protect and keep as confidential all information relating to them.</b>								
20. Acts appropriately and within the law in sharing information to enable and enhance care (carers, MDT and cross agency boundaries).								
21. Works within the legal frameworks for data protection including access to and storage of records.								

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

<b>People can trust the learning disabilities nurse to gain their consent based on sound understanding in order to allow an informed choice prior to any intervention and that their rights in decision-making and consent will be respected and upheld.</b>								
	<b>Yes = Achieved, No = Not Achieved</b>							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/ No	Sign/Date	Yes/ No	Sign/Date	Yes/ No	Sign/Date	Yes/ No	Sign/Date
22. Works within legal frameworks and assesses and responds to the needs and wishes of carers and relatives in relation to information and consent.								
<b>Skills Cluster II: Organisational Aspects of Care</b>								
<b>People can trust the learning disabilities nurse to treat them as partners and work with them to make a holistic and systematic assessment of their needs: to develop a personalised plan that is based on mutual understanding and respect for their individual situation promoting health and well-being, minimising risk of harm and promoting their safety at all times.</b>								
23. In partnership with the person, their carers and families, makes an holistic, person-centred and systematic assessment of physical, emotional, psychological, social, cultural and spiritual needs, including risk, and together, develops a comprehensive personalised plan of evidence-based nursing care.								
24. Promotes health and well-being, self-care and independence by teaching and empowering people and carers to make choices in coping with the effects of treatment and the ongoing nature and likely consequences of a condition, including chronic pain and death and dying.								

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

Practice Assessment Document

	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
25. Discusses sensitive issues in relation to public health, assesses needs and plans care and provides appropriate advice and guidance to people with learning disabilities across the age spectrum for example, contraception, substance misuse, smoking and obesity.								
26. Measures, documents and interprets vital signs and acts autonomously and appropriately on findings.								
<b>People can trust the learning disabilities nurse to have an enhanced knowledge of the health and developmental needs of all people with learning disabilities, and to deliver nursing interventions and evaluate their effectiveness against the agreed assessment and care plan.</b>								
27. Prioritises needs within the context of learning disabilities and complex health care needs. Works in partnership with service users, carers and other professionals, services and agencies to agree and implement individual care plans and ensure continuous effective and efficient care.								
28. Leads the development, implementation and review of individual plans for all people with learning disabilities, detecting, recording and reporting deterioration or improvement and takes appropriate action. Evaluates care autonomously facilitating equal access to health, social care and specialist services.								

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



<b>People can trust the learning disabilities nurse to safeguard children and adults from vulnerable situations and support and protect them from harm.</b>								
	<b>Yes = Achieved, No = Not Achieved</b>							
	<b>Assessment 1</b>		<b>Assessment 2</b>		<b>Assessment 3</b>		<b>Assessment 4</b>	
	<b>Yes/ No</b>	<b>Sign/Date</b>	<b>Yes/ No</b>	<b>Sign/Date</b>	<b>Yes/ No</b>	<b>Sign/Date</b>	<b>Yes/ No</b>	<b>Sign/Date</b>
29. Supports people in asserting their human rights and challenges practices which do not safeguard vulnerable people in need of support and protection.								
30. Shares information across agency boundaries and makes effective referrals to safeguard and protect children and adults requiring support and protection.								
<b>People can trust the learning disabilities nurse to respond to their feedback and a wide range of other sources to learn, develop and improve services.</b>								
31. Working within legal frameworks, actively responds to feedback, supporting people who wish to complain in order to improve care.								
32. As an individual team member and team leader, actively seeks and learns from feedback to enhance care and own and others' professional development.								
<b>People can trust the learning disabilities nurse to be an autonomous and confident member of the multidisciplinary or multiagency team and to inspire confidence in others.</b>								
33. Takes an effective role within the team, adopting the leadership role when appropriate. Facilitating choice and maximise self-care and self-management and co-ordinating the transition between different services and agencies.								

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

Practice Assessment Document

	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
34. Takes the lead in ensuring that people with learning disabilities receive support that creatively addresses their physical, social, economic, psychological, spiritual and other needs, acting as an effective role model in decision-making, taking action and supporting others.								
<b>People can trust the learning disabilities nurse to safely delegate to others and to respond appropriately when a task is delegated to them.</b>								
35. Works within the requirements of the code when care is delegated and takes responsibility and accountability for delegating care, (NMC, 2015).								
36. Prepares, supports and supervises those to whom care has been delegated and recognises and addresses any deficits in knowledge and skill.								
<b>People can trust the learning disabilities nurse to work safely lead, co-ordinate and manage care.</b>								
37. Inspires confidence, provides direction through leadership and education to others to ensure that their unique contribution is recognised in service design and provision and acts as a positive role model.								
38. Uses data and research findings to take decisions based on evidence and experience and is able to answer for these decisions when required, to help improve people's experiences and care outcomes, and shape future services.								

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

Practice Assessment Document

	<b>Yes = Achieved, No = Not Achieved</b>							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/ No	Sign/Date	Yes/ No	Sign/Date	Yes/ No	Sign/Date	Yes/ No	Sign/Date
39. Negotiates with others in relation to balancing competing and conflicting priorities.								
<b>People can trust the learning disabilities nurse to work safely under pressure and maintain patient safety at all times</b>								
40. Prioritises own workload and manages competing and conflicting priorities demonstrating effective time management.								
41. Appropriately reports concerns regarding staffing and skill-mix and acts to resolve issues that may impact on the safety of service users within local policy frameworks.								
42. Recognises stress in others and provides appropriate support or guidance ensuring safety to people at all times.								
<b>People can trust the learning disabilities nurse to enhance the safety of service users and identify and actively manage risk and uncertainty in relation to people, the environment, self and others.</b>								
43. Reflects on and learns from safety incidents as an autonomous individual and as a team member and contributes to team learning in relation to assessing and managing risk.								
44. Participates in clinical audit to improve the safety of service users.								
45. Works within legal and ethical frameworks to promote safety and positive risk-taking.								

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

Practice Assessment Document

	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
46. Works within policies to protect self and others in all care settings including in the home care setting.								
<b>People can trust the learning disabilities nurse to work to prevent and resolve conflict and maintain a safe environment.</b>								
47. Selects and applies appropriate strategies and techniques for conflict resolution, de-escalation and physical intervention in the management of potential violence and aggression.								
<b>People can trust the learning disabilities nurse to select and manage medical devices safely.</b>								
48. Works within legal frameworks and safely selects, uses and maintains a range of medical devices appropriate to the area of work, including ensuring regular servicing, maintenance and calibration including reporting adverse incidents relating to medical devices.								
49. Where appropriate, maintains records in relation to use and maintenance of medical devices and the decontamination processes required as per local and national guidelines.								
50. Explains the devices to people and carers and checks understanding.								

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

<b>Skills Cluster III: Infection Prevention and Control</b>								
<b>People can trust the learning disabilities nurse to identify and take effective measures to prevent and control infection in accordance with local and national policy.</b>								
	<b>Yes = Achieved, No = Not Achieved</b>							
	<b>Assessment 1</b>		<b>Assessment 2</b>		<b>Assessment 3</b>		<b>Assessment 4</b>	
	<b>Yes/ No</b>	<b>Sign/Date</b>	<b>Yes/ No</b>	<b>Sign/Date</b>	<b>Yes/ No</b>	<b>Sign/Date</b>	<b>Yes/ No</b>	<b>Sign/Date</b>
51. Works within the code, (NMC, 2015) and in collaboration with people and their carers to meet responsibilities for prevention and control of infection.								
52. In partnership with people and their carers, plans, delivers and documents care that demonstrates effective risk-assessment, infection-prevention and control.								
53. Identifies, recognises and refers to the appropriate clinical expert.								
54. Recognises infection risk and reports and acts in situations where there is need for health promotion and protection and public health strategies.								
<b>People can trust the learning disabilities nurse to maintain effective standard infection control precautions and apply and adapt these to needs and limitations in all environments.</b>								
55. Initiates and maintains appropriate measures to prevent and control infection according to the route of transmission of micro-organisms, in order to protect service users, members of the public and other staff.								

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

Practice Assessment Document

	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
56. Manages the overall environment to minimise risk and challenges the practice of other care workers who put themselves and others at risk of infection, within legal frameworks and local policies.								
<b>People can trust the learning disabilities nurse to provide effective care for someone who has an infectious disease including, where required, the use of standard isolation techniques fully complying with hygiene, uniform and dress codes.</b>								
57. Adheres to local policies, assesses the needs of the infectious person, or people and applies appropriate isolation techniques wearing the appropriate clothing. Consults with specialist advisers as appropriate.								
<b>People can trust the learning disabilities nurse to safely apply the principles of asepsis when performing invasive procedures and be competent in aseptic technique in a variety of settings.</b>								
58. Applies a range of appropriate measures to prevent infection including application of safe and effective aseptic techniques.								
59. Safely performs non-touch or aseptic techniques in a variety of settings.								
60. Is able to communicate potential risks to others and advise people on the management of their device, site or wound to prevent and control infection and to promote healing.								
<b>People can trust the learning disabilities nurse to act in a variety of environments including the care setting, to reduce risk when handling waste, including sharps, contaminated linen and when dealing with spillages of blood and other body fluids.</b>								
61. Manages hazardous waste and spillages in accordance with local health and safety policies and instructs others to do the same.								

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

<b>Skills Cluster IV: Nutrition and Fluid Management</b>								
<b>People can trust the learning disabilities nurse to assist them to choose a diet that provides adequate nutritional and fluid intake.</b>								
	<b>Yes = Achieved, No = Not Achieved</b>							
	<b>Assessment 1</b>		<b>Assessment 2</b>		<b>Assessment 3</b>		<b>Assessment 4</b>	
	<b>Yes/ No</b>	<b>Sign/Date</b>	<b>Yes/ No</b>	<b>Sign/Date</b>	<b>Yes/ No</b>	<b>Sign/Date</b>	<b>Yes/ No</b>	<b>Sign/Date</b>
62. Supports people and carers to make appropriate choices and changes to eating patterns, taking account of dietary preferences, religious and cultural requirements, treatment requirements and special diets needed for health reasons.								
63. Refers to specialist members of the multidisciplinary team for additional or specialist advice.								
<b>People can trust the learning disabilities nurse to assess and monitor their nutritional status and in partnership formulate an effective plan of care.</b>								
64. Makes a comprehensive assessment of people's needs in relation to nutrition identifying, documenting and communicating level of risk.								
65. Formulates an appropriate care plan, seeking specialist advice where required and monitors and records progress against the plan.								
66. Acts autonomously to initiate appropriate action when malnutrition is identified or where a person's nutritional status worsens, and reports this as an adverse event, informing carers and multidisciplinary team as appropriate.								

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

<b>People can trust the learning disabilities nurse to assess and monitor fluid status and in partnership with them formulate an effective plan of care.</b>								
	<b>Yes = Achieved, No = Not Achieved</b>							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/ No	Sign/Date	Yes/ No	Sign/Date	Yes/ No	Sign/Date	Yes/ No	Sign/Date
67. Identifies signs of dehydration and uses negotiating and other skills to encourage people who might be reluctant to drink to take adequate fluids.								
68. Works collaboratively with the person their carers and the multidisciplinary team to ensure an adequate fluid intake and output.								
<b>People can trust the learning disabilities nurse to assist them in creating an environment that is conducive to eating and drinking.</b>								
69. Ensures appropriate assistance and support is available to enable people drink to eat.								
70. Ensures that appropriate food and fluid are available and provision is made for replacement meals for anyone who is unable to eat at the usual time, or unable to prepare their own meals.								
<b>People can trust the learning disabilities nurse to ensure that those unable to take food by mouth receive adequate fluid and nutrition to meet their needs.</b>								
71. Takes action to ensure that, where there are problems with eating and swallowing, nutritional status is not compromised and an understanding of alternative routes is demonstrated								

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



Practice Assessment Document

	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
<b>People can trust the learning disabilities nurse to administer fluids when fluids cannot be taken independently.</b>								
72. Through simulation, practice or discussion understands, applies knowledge of and monitors prescription, administration and documentation of intravenous fluids including markers of hydration and dehydration in accordance with local policy .								
<b>Skills Cluster V: Medicines Management</b>								
<b>People can trust the learning disabilities nurse to correctly and safely undertake medicines calculations.</b>								
73 . Is competent in undertaking a range of medication related calculations.								
<b>People can trust the learning disabilities nurse to work within the legal and ethical frameworks that underpin safe and effective medicines management and work within national and local policies.</b>								
74. Applies legislation practice to safe and effective ordering, receiving, storing, administering and disposal of medicines and drugs in both primary and secondary care settings and ensures others do the same.								
75. Fully understands all methods of supplying medicines, for example, Medicines Act exemptions, Patient Group Directions. (PGD's), clinical management plans and other forms of prescribing e.g. nurse prescribing.								

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

<b>People can trust the learning disabilities nurse to work as part of a team to offer holistic care and a range of treatment options of which medicines may form a part.</b>								
	<b>Yes = Achieved, No = Not Achieved</b>							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/ No	Sign/Date	Yes/ No	Sign/Date	Yes/ No	Sign/Date	Yes/ No	Sign/Date
76. Questions, critically appraises, takes into account ethical considerations and the preferences of the person receiving care and uses evidence to support an argument in determining when medicines may or may not be an appropriate choice of treatment.								
<b>People can trust the learning disabilities nurse to ensure safe and effective practice in medicines management through comprehensive knowledge of medicines, their actions, risks and benefits.</b>								
77. Applies knowledge of basic pharmacology, how medicines act and interact in the systems of the body, and their therapeutic action.								
78. Understands common routes and techniques of medicine administration including absorption, metabolism, adverse reactions and interactions.								
79. Safely manages drug administration and monitors effects including anaphylaxis.								
80. Reports adverse incidents and near misses.								
<b>People can trust the learning disabilities nurse to safely order, receive, store and dispose of medicines. (including controlled drugs) in any setting.</b>								
81. Orders, receives, stores and disposes of medicines safely, (including controlled drugs).								

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

<b>People can trust the learning disabilities nurse to administer medicines safely in a timely manner, including controlled drugs.</b>								
	<b>Yes = Achieved, No = Not Achieved</b>							
	Assessment 1		Assessment 2		Assessment 3		Assessment 4	
	Yes/ No	Sign/Date	Yes/ No	Sign/Date	Yes/ No	Sign/Date	Yes/ No	Sign/Date
82. Safely and effectively administers and, where necessary, prepares medicines via routes and methods commonly used and maintains accurate records. Supervises and teaches others to do the same.								
<b>People can trust the learning disabilities nurse to keep and maintain accurate records using information technology.</b>								
83. Effectively keep records of medication administered and omitted, in a variety of care settings, including controlled drugs and ensures others do the same.								
<b>People can trust the learning disabilities nurse to work in partnership with people receiving medical treatments and their carers.</b>								
84. Works with people and carers to provide clear and accurate information about their medicines to assist them to make informed choices about their medicines.								
85. Assesses the person's ability to safely self-administer their medicines.								
<b>People can trust the learning disabilities nurse to demonstrate understanding and knowledge to supply and administer via a Patient Group Direction (PGD).</b>								
86 Through simulation and course work (or through discussion in practice) demonstrates knowledge and application of the principles required for safe and effective supply and administration via a Patient Group Direction including an understanding of the role and accountability								

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

### Part 3 Episode of Care

This assessment must be completed by the end of Part 3 during a specific episode of care, managing care for a group of patients/service users or a complex patient. This should be for a minimum of 6 hours including a handover of care.

#### Guidelines

In discussion with the student, the mentor will identify an appropriate episode of care involving organising and managing the care for a group of patients/service users or a complex patient scenario.

The aim of this assessment is to demonstrate the student's progression in the following four competency domains in the context of the relevant field of nursing:

- Professional values
- Communication and interpersonal skills
- Nursing practice and decision-making
- Leadership, management and team working

#### Learning outcomes

1. The student plans, organises and manages patient-centred care within an appropriate timeframe with minimal supervision from the mentor.
2. The student uses effective management skills to organise work efficiently. Prioritises and organises workload and appropriately delegates to others.
3. The student is able to handover information delivering accurate verbal and written reports in relation to person-centred care.
4. The student has maintained appropriate professional values, expected attitudes and behaviours during the episode of care.
5. The student must demonstrate that they have maintained safety and safeguarding for the patient and carers or family.

***Please ensure that you reference the above 5 learning outcomes in your reflection on the next page***

Student reflection on the Episode of Care	
<p>Briefly outline how you have delivered high quality, complex care and give the rationale for the decisions you made.</p>	<p>Reflect on how you have worked in partnership with health and social care professionals, service users, carer and families ensuring that decision-making about care is shared.</p>
	<p>What did you do well?</p>
	<p>What would you have done differently?</p>
<p>Reflect on how you used leadership skills to supervise and manage others.</p>	<p>What learning from this episode of care could be transferred to other areas of practice?</p>

# Practice Assessment Document

<b>Mentor feedback</b> Based on the student's reflection, your observation and discussion of the episode of care, please assess and comment on the following: <b>YES = Achieved No = Not Achieved (Refer to Grade Descriptors on Page 7)</b>		
Domain	Level	Comments
<b>Professional values</b> Acts in a manner that is attentive, kind, sensitive, compassionate and non-discriminatory, that values diversity and acts within professional boundaries. The student acts as a role model in promoting a professional image.		
<b>Communication and interpersonal skills</b> Demonstrates effective communication and interpersonal skills with patients/service users/carers. Communicates with the multi-disciplinary team and staff when delegating care, giving clear instructions and providing accurate and comprehensive written and verbal reports.		
<b>Nursing practice and decision-making</b> Delivers care which is person-centred and meets essential and complex physical and psychological needs, within an appropriate timeframe. Practice is based on the use of up-to-date knowledge and evidence when assessing, planning, delivering and evaluating care		
<b>Leadership, management, team working</b> Acts in a way that values the roles and responsibilities in the team and interacts appropriately. Uses effective management skills to organise work efficiently. Prioritises and manages work load effectively.		
<b>If any of the Domains are 'Not Achieved' this will require a re-assessment and the academic representative must be informed</b>		
<b>Student's signature:</b>		<b>Date:</b>
<b>Mentor's signature:</b>		<b>Date:</b>

### Part 3 Medicines Management

This assessment must be completed by the end of Part 3 where the student safely administers medicines to a group of patients/service users or a caseload of patients/service users in community settings under the supervision of the mentor.

During Part 3 the student should be consolidating their knowledge, skills and competencies in relation to the safe administration of medicines. This assessment should normally be undertaken with a small group of patients/service users or caseload.

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

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

**Regulatory requirements:** Standards for medicines management (NMC, 2007).the code (NMC, 2015)

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

#### Learning outcomes

1. The student is able to apply knowledge of pharmacology, how medicines act and interact in the systems of the body, and their therapeutic action.
2. The student is able to prepare medications where necessary, safely and effectively administer these via common routes and maintains accurate records
3. The student is able to safely and accurately perform medicines calculations.
4. The student is able to demonstrate that they have maintained appropriate professional values, expected attitudes and behaviours during the administration of medicines.
5. The student is able to maintain safety and safeguard the patient from harm.

Practice Assessment Document

YES = Achieved No = Not Achieved			
Competency	Level	Competency	Level
1. Is aware of the patient/service user's plan of care and the reason for medication. Explains to the assessor.		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. <ul style="list-style-type: none"> <li>• Demonstrates to assessor the component parts of the calculation.</li> <li>• Minimum of 3 calculations undertaken.</li> </ul>	
3. Understands safe storage of medications in the care environment.		9. Checks and confirms the patient/service user's identity. (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. <ul style="list-style-type: none"> <li>• Right patient/service user</li> <li>• Right medication</li> <li>• Right time/Date/Valid period</li> <li>• Right dose/last dose</li> <li>• Right route/method</li> <li>• Special instructions</li> </ul>		11. Describes/demonstrates the procedure in the event of non-compliance.	
		12. Safely utilises and disposes of equipment.	
		13. Maintains accurate records. <ul style="list-style-type: none"> <li>• Records, signs and dates when safely administered</li> </ul>	
		14. Monitors effects and is aware of common side effects and how these are managed.	
6. Checks for allergies <ul style="list-style-type: none"> <li>• Asks patient/service user.</li> <li>• Checks prescription chart or identification band</li> </ul>		15. Uses appropriate sources of information e.g. British National Formulary	
		16. Offers patient /service user further support/advice.	
<b>Comments</b>			
<b>Student's signature:</b>		<b>Date:</b>	
<b>Mentor's signature:</b>		<b>Date:</b>	



**Action Plan**

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

The mentor/supervisor must liaise with the academic representative and senior practice representative

Date	Placement Name	Date for Review
Area of Concern Note professional value or Essential Skill number if appropriate	Criteria for Success / Support Available	Review Meeting
		Date:
		Reviewer:
		Comments:
<b>Signed (Mentor).....</b> <b>Date.....</b> <b>Mentor's Name (please print)</b> <b>Signed (Student) .....</b> <b>Date .....</b> <b>.....</b> <b>Signed (Academic Representative).....</b> <b>Date.....</b>		

**Action Plan**

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

The mentor/supervisor must liaise with the academic representative and senior practice representative

Date	Placement Name	Date for Review
Area of Concern Note professional value or Essential Skill number if appropriate	Criteria for Success / Support Available	Review Meeting
		Date:
		Reviewer:
		Comments:
<b>Signed (Mentor).....</b> <b>Date.....</b> <b>Mentor's Name (please print)</b> <b>Signed (Student) .....</b> <b>Date .....</b> <b>.....</b> <b>Signed (Academic Representative).....</b> <b>Date.....</b>		

**Action Plan**

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

The mentor/supervisor must liaise with the academic representative and senior practice representative

Date	Placement Name	Date for Review
Area of Concern Note professional value or Essential Skill number if appropriate	Criteria for Success / Support Available	Review Meeting
		Date:
		Reviewer:
		Comments:
<b>Signed (Mentor).....</b> <b>Date.....</b> <b>Mentor's Name (please print)</b> <b>Signed (Student) .....</b> <b>Date .....</b> <b>.....</b> <b>Signed (Academic Representative).....</b> <b>Date.....</b>		

**Action Plan**

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

The mentor/supervisor must liaise with the academic representative and senior practice representative

Date	Placement Name	Date for Review
Area of Concern Note professional value or Essential Skill number if appropriate	Criteria for Success / Support Available	Review Meeting
		Date:
		Reviewer:
		Comments:
<b>Signed (Mentor).....</b> <b>Date.....</b> <b>Mentor's Name (please print)</b> <b>Signed (Student) .....</b> <b>Date .....</b> <b>.....</b> <b>Signed (Academic Representative).....</b> <b>Date.....</b>		

**Action Plan**

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

The mentor/supervisor must liaise with the academic representative and senior practice representative

Date	Placement Name	Date for Review
Area of Concern Note professional value or Essential Skill number if appropriate	Criteria for Success / Support Available	Review Meeting
		Date:
		Reviewer:
		Comments:
<b>Signed (Mentor).....</b> <b>Date.....</b> <b>Mentor's Name (please print)</b> <b>Signed (Student) .....</b> <b>Date .....</b> <b>.....</b> <b>Signed (Academic Representative).....</b> <b>Date.....</b>		

**Action Plan**

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

The mentor/supervisor must liaise with the academic representative and senior practice representative

Date	Placement Name	Date for Review
Area of Concern Note professional value or Essential Skill number if appropriate	Criteria for Success / Support Available	Review Meeting
		Date:
		Reviewer:
		Comments:
<p>Signed (Mentor)..... Date..... Mentor's Name (please print)</p> <p>Signed (Student) ..... Date ..... .....</p> <p>Signed (Academic Representative)..... Date.....</p>		

**Sign-off mentor record sheet**

The NMC identify that sign off mentors must have time allocated to reflect, give feedback and keep records of student achievements in their final period of practice learning. This will be equivalent to an hour per student per week. The time allocated may need to be greater earlier in the practice experience and reduced as the student becomes more confident and competent, (NMC 2007). The first meeting should include a discussion of the student's Ongoing Achievement Record (OAR).

**Name of Sign Off Mentor:****Designation:**

<b>Date and time of meeting</b>	<b>During meeting review evidence, documentation and record key points from discussions</b>	<b>Signatures</b>
		<b>Mentor:</b>  <b>Student:</b>
		<b>Mentor:</b>  <b>Student:</b>
		<b>Mentor:</b>  <b>Student:</b>
		<b>Mentor:</b>  <b>Student:</b>
		<b>Mentor:</b>  <b>Student:</b>
		<b>Mentor:</b>  <b>Student:</b>

**Sign off declaration statement should be completed in the Ongoing Achievement Record**

## Practice Assessment Document

Date and time of meeting	During meeting review evidence, documentation and record key points from discussions	Signatures
		<b>Mentor:</b>  <b>Student:</b>
		<b>Mentor:</b>  <b>Student:</b>
		<b>Mentor:</b>  <b>Student:</b>
		<b>Mentor:</b>  <b>Student:</b>
		<b>Mentor:</b>  <b>Student:</b>
		<b>Mentor:</b>  <b>Student:</b>

I certify this student as fit to practise safely and effectively without supervision and practises at the level of competence required for entry on to the Nursing and Midwifery Council register for the United Kingdom.

**Sign Off Mentor Name (please print):** **NMC PIN Number:**

**Signature:** **Date:**



Practice Assessment Document

**Please start a new page per placement**

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

**PRACTICE HOURS**

**Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by Mentor/Supervisor**

	Date	Placement	Total Hrs	Registrant Initials	Shift Type		Date	Placement	Total Hrs	Registrant Initials	Shift Type
Example of hours confirmation						Sun	1/7/13	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 =					
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
Weekly Total =						Weekly Total =					

**Total hours completed on this page.... Figures**

**Words**

Signed: \_\_\_\_\_ (Mentor)

Name (print): \_\_\_\_\_

**Verification by Mentor:** I have checked the hours of experience recorded by the student,

Clinical Area: \_\_\_\_\_

Date: \_\_\_\_\_

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

Signed: \_\_\_\_\_ (Student)

Date: \_\_\_\_\_

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

**Shift Codes**

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

Practice Assessment Document

**Please start a new page per placement**

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

**PRACTICE HOURS**

**Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by Mentor/Supervisor**

	Date	Placement	Total Hrs	Registrant Initials	Shift Type		Date	Placement	Total Hrs	Registrant Initials	Shift Type
Example of hours confirmation						Sun	1/7/13	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 =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			

**Total hours completed on this page.... Figures**

**Words**

Signed: \_\_\_\_\_ (Mentor)

Name (print): \_\_\_\_\_

**Verification by Mentor:** I have checked the hours of experience recorded by the student,

Clinical Area: \_\_\_\_\_

Date: \_\_\_\_\_

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

Signed: \_\_\_\_\_ (Student)

Date: \_\_\_\_\_

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

**Shift Codes**

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

Practice Assessment Document

**Please start a new page per placement**

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

**PRACTICE HOURS**

**Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by Mentor/Supervisor**

	Date	Placement	Total Hrs	Registrant Initials	Shift Type		Date	Placement	Total Hrs	Registrant Initials	Shift Type
Example of hours confirmation						Sun	1/7/13	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 =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			

**Total hours completed on this page.... Figures**

**Words**

Signed: \_\_\_\_\_ (Mentor)

Name (print): \_\_\_\_\_

**Verification by Mentor:** I have checked the hours of experience recorded by the student,

Clinical Area: \_\_\_\_\_

Date: \_\_\_\_\_

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

Signed: \_\_\_\_\_ (Student)

Date: \_\_\_\_\_

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

**Shift Codes**

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

Practice Assessment Document

**Please start a new page per placement**

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

**PRACTICE HOURS**

**Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialised by Mentor/Supervisor**

	Date	Placement	Total Hrs	Registrant Initials	Shift Type		Date	Placement	Total Hrs	Registrant Initials	Shift Type
Example of hours confirmation						Sun	1/7/13	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 =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			

**Total hours completed on this page.... Figures**

**Words**

Signed: \_\_\_\_\_ (Mentor)

Name (print): \_\_\_\_\_

**Verification by Mentor:** I have checked the hours of experience recorded by the student,

Clinical Area: \_\_\_\_\_

Date: \_\_\_\_\_

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

Signed: \_\_\_\_\_ (Student)

Date: \_\_\_\_\_

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

**Shift Codes**

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

Practice Assessment Document

**Please start a new page per placement**

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

**PRACTICE HOURS**

**Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialised by Mentor/Supervisor**

	Date	Placement	Total Hrs	Registrant Initials	Shift Type		Date	Placement	Total Hrs	Registrant Initials	Shift Type
Example of hours confirmation						Sun	1/7/13	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 =					
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
Weekly Total =						Weekly Total =					

**Total hours completed on this page.... Figures**

**Words**

Signed: \_\_\_\_\_ (Mentor)

Name (print): \_\_\_\_\_

**Verification by Mentor:** I have checked the hours of experience recorded by the student,

Clinical Area: \_\_\_\_\_

Date: \_\_\_\_\_

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

Signed: \_\_\_\_\_ (Student)

Date: \_\_\_\_\_

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

**Shift Codes**

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

Practice Assessment Document

**Please start a new page per placement**

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

**PRACTICE HOURS**

Please ensure all details are printed CLEARLY and sickness days identified. All hours completed, alterations and totals should be initialled by Mentor/Supervisor

	Date	Placement	Total Hrs	Registrant Initials	Shift Type		Date	Placement	Total Hrs	Registrant Initials	Shift Type
Example of hours confirmation						Sun	1/7/13	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 =			
Mon						Mon					
Tue						Tue					
Wed						Wed					
Thu						Thu					
Fri						Fri					
Sat						Sat					
Sun						Sun					
		Weekly Total =						Weekly Total =			

**Total hours completed on this page.... Figures**

**Words**

Signed: \_\_\_\_\_ (Mentor)

Name (print): \_\_\_\_\_

**Verification by Mentor:** I have checked the hours of experience recorded by the student,

Clinical Area: \_\_\_\_\_

Date: \_\_\_\_\_

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

Signed: \_\_\_\_\_ (Student)

Date: \_\_\_\_\_

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

**Shift Codes**

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

**Placement Number:**

**Placement Provider:**

(e.g. Trust)

**Name of Practice Area:**

**Type of Experience:**

(e.g. Community/Ward based)

**Practice Placement Telephone:**

**Placement Contact Email:**

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

**Mentor/Co-Mentor/Supervisor Details:**

**Name:**

**Designation:**

**Name:**

**Designation:**

**Other Practice Staff/Key Contacts:**

**Name:**

**Designation:**

**Academic Contact Details:**

(e.g. Link Lecturer)

**Name:**

**Designation:**

**Name:**

**Designation:**

**I have seen and discussed the purpose of the student's Ongoing Achievement Record**

**Mentor's signature:**

**Date:**

**Placement Number:**

**Placement Provider:**

(e.g. Trust)

**Name of Practice Area:**

**Type of Experience:**

(e.g. Community/Ward based)

**Practice Placement Telephone:**

**Placement Contact Email:**

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

**Mentor/Co-Mentor/Supervisor Details:**

**Name:**

**Designation:**

**Name:**

**Designation:**

**Other Practice Staff/Key Contacts:**

**Name:**

**Designation:**

**Academic Contact Details:**

(e.g. Link Lecturer)

**Name:**

**Designation:**

**Name:**

**Designation:**

**I have seen and discussed the purpose of the student's Ongoing Achievement Record**

**Mentor's signature:**

**Date:**



**Placement Number:**

**Placement Provider:**

(e.g. Trust)

**Name of Practice Area:**

**Type of Experience:**

(e.g. Community/Ward based)

**Practice Placement Telephone:**

**Placement Contact Email:**

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

**Mentor/Co-Mentor/Supervisor Details:**

**Name:**

**Designation:**

**Name:**

**Designation:**

**Other Practice Staff/Key Contacts:**

**Name:**

**Designation:**

**Academic Contact Details:**

(e.g. Link Lecturer)

**Name:**

**Designation:**

**Name:**

**Designation:**

**I have seen and discussed the purpose of the student's Ongoing Achievement Record**

**Mentor's signature:**

**Date:**

**Ongoing Feedback from Staff in Practice**

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments

**Ongoing Feedback from Staff in Practice**

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments

**Ongoing Feedback from Staff in Practice**

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments

**Ongoing Feedback from Staff in Practice**

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments

**Ongoing Feedback from Staff in Practice**

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments

**Ongoing Feedback from Staff in Practice**

This can be completed by any individual involved in the student learning e.g. the mentor, staff (other than the mentor), practice educator, link lecturer or personal tutor. This is in addition to the pages referring to Inter-professional Working, as above.

Date/time	Signature/ Designation	Comments

This PAD document has been developed by the Pan London Steering Group in collaboration with practice partners, mentors, academic staff, students and service users across the London Region.

### **Membership of the Pan London Practice Assessment Document Steering Group**

- Zoe Scullard, Principal Lecturer, Practice Learning, Buckinghamshire New University (Chair)
- Joady Mitchell, Principal Lecturer Practice Learning & Clinical Skills Teaching, London South Bank University (Vice Chair) (*Child Lead & NMC Liaison*)
- Kath Sharples, Senior Lecturer Adult Nursing and Practice Innovation, Faculty of Health, Social Care Sciences and Education, Kingston University and St George's, University of London (*Mentor Handbook*)
- Kathy Wilson, Head of Practice Based Learning, Middlesex University (*Adult Lead*)
- Angela Parry, Director of Clinical Education, Florence Nightingale School of Nursing & Midwifery, King's College London (*Adult Lead*)
- Michelle Ellis Senior Lecturer & Practice Lead, Child Health, City University London (*Child Lead*)
- Mark Jones, Senior Lecturer & Head of Practice Education. School of Health Sciences, City University London
- Nicki Fowler Programme Leader/Professional Lead, Learning Disabilities, University of Greenwich (*Mental Health Lead*)
- Matt Snowden, Director of Contracts, College of Nursing, Midwifery and Healthcare, University of West London (*Pan London Implementation Plan*)
- Alan Randle, Associate Dean (AQA-Practice Enhancement), University of Hertfordshire (*Learning Disability Lead*)
- Mark Statham, Head of Pre-Registration and CPPD, London LETB Shared Service.
- David Marston, Senior Commissioning Manager Non-Medical Commissioning & Quality Management, London LETB Shared Services
- Chris Caldwell, Dean of Healthcare Professions, Health Education North Central and East London (*Representing London LETBs*)
- Louise Morton, Head of Nursing and Non-Medical Clinical Education & Acting Assistant Chief Nurse, Great Ormond Street Hospital for Children NHS Foundation Trust, London (*Representing the London Directors' of Nursing*)
- Sue West, Academic Dean, Faculty of Society & Health, Buckinghamshire New University (*Representing The Council of Deans*)
- Jane Fish, PLPAD Project Manager
- Josee Soobadoo, PLPAD Project Team Associate
- Ian Grant-Rowan PLPAD Project Administrator

The development of this document was funded by Health Education North Central and East London, Health Education North West London and Health Education South London.

© PLPLG 2014 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.



**Health Education  
North West London**



**Health Education  
North Central and East London**



**Health Education South London**