

Practice Assessment Document (PAD) Scotland

Name:

PI no.:

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Practice Assessment Document (PAD) Scotland

Student's Name:
University:
Jniversity ID:
Programme:

Cohort:
Field of Practice:

























GLOSSARY OF TERMS AND ABBREVIATIONS

AEI	Approved Education Institution
BLS	Basic Life Support
CHEF	Care Home Education Facilitator
CPR	Cardiopulmonary Resuscitation
MH	Manual Handling
HAI	Healthcare Associated Infection
HEI	Higher Education Institution
Level 1	Year one approximately
Level 2	Year two approximately
Level 3	Year three (and four) approximately
NES	NHS Education for Scotland
NHS	National Health Service
NHSS	National Health Service Scotland
NMC	Nursing and Midwifery Council
OU	The Open University
PAD	Practice Assessment Document
PEF	Practice Education Facilitator
PLE	Practice Learning Experience
PSMAV	Prevention & Safe (Therapeutic) Management of Aggression and Violence.
QMPLE	Quality Management of Practice Learning Environment
SIPCEP	Scottish Infection Prevention & Control Education Pathway

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SECTION 1: GUIDANCE

1.0. Introduction to the Scottish Practice Assessment Document (PAD)

All Scottish Higher Education Institutions (HEIs) deliver their pre-registration nursing programmes in accordance with the Nursing and Midwifery Council (NMC) *Future Nurse: Standards of Proficiency for Registered Nurses* (NMC, 2018a; 2018b; 2018c; 2018d) and the European Union Directive 2005/36/EC requirements. All Scottish HEIs have worked collaboratively to produce a single Practice Assessment Document (PAD) for Scotland, which must be completed by all nursing students undertaking a pre-registration nursing programme.

The purpose of the PAD is to provide a record of your practice learning progress and achievement of learning outcomes throughout each practice learning experience (PLE). This allows current and future practice supervisors, practice assessors and academic assessors to see an overview of your progress from the first PLE through to the last.

The PAD is an integral part of the learning process. It is not simply a catalogue of learning activities; rather, will provide clear evidence of the learning that has occurred. The PAD provides an opportunity to demonstrate evidence of learning from academic activities and application to practice learning as well as from practice experience; it is essential to demonstrate achievement of the NMC *Future Nurse: Standards of Proficiency for Registered Nurses* (NMC, 2018a).

As a pre-registration nursing student, you will have consented to the carrying of your PAD throughout the duration of your programme. You will also have confirmed that you recognise the importance of the PAD to your ongoing learning supported by your practice supervisor. Assessment of your proficiency will be undertaken by your practice assessor and academic assessor for each level in preparation for future practice.

1.1. Your responsibilities as a student within practice learning experiences

Your PAD is an important tool in presenting an overall picture of your achievement and progression through your programme. It provides evidence for your practice supervisors and assessors about your achievements and/or needs. This is in accordance with the NMC (2018d) which states, that "all proficiencies are recorded in an ongoing record of achievement" (NMC, 2018d, p.11).

As a student it is your responsibility to:

- Take a proactive approach to practice and personal learning by developing learning plans.
- Complete the pre practice learning activities prior to the start of the PLE.
- Be aware of who your academic assessor is and the Practice Education Facilitator (PEF/CHEF) for the area.
- Identify the approved mechanism by which you, as a student, may raise concerns about the safety of service users. This is addressed in the NES (2020) Raising Concerns in Practice: Student Guidance document https://www.nes.scot.nhs.uk/media/4387539/final_nov_2019_version_national_rc_with_leaflet.pdf and in addition please refer to the OU Programme Handbook. You MUST make yourself aware of your responsibilities in relation to this aspect of your role.
- At all times seek consent from service users and you must respect the rights of a service user to decline your participation in care, or to decline care.
- Provide access to your PAD on day 1 of each PLE and thereafter, so that your supervisor/assessor can review your progress to date. Failure to do so may result in a delay to the commencement of your placement.
- Ensure that your practice supervisors/assessors sign the 'record of signatories' form once they have reviewed your PAD.
- Ensure all actions and entries in your PAD are undertaken in collaboration with your practice supervisors/assessors and documented by them.
- Identify experiences and learning opportunities with practice supervisor/assessor to enable the achievement of practice learning outcomes, NMC Proficiencies, communication and relationship management skills and nursing procedures and personal objectives.
- Critically reflect in and on your practice and document within your PAD.
- Demonstrate your ability to integrate theoretical learning with practice.
- Share with your practice supervisors and assessors evidence of learning and development to inform assessment of performance.
- Ensure that all elements of the assessment section are completed fully and signed before you leave your PLE.
- Ensure that your practice supervisors/practice assessors complete and sign your 'attendance record'.
- On completion of the PLE, individual HEI procedures will be followed for your submission of documentation.
- Ensure that you have knowledge of the requirements and declare your Good Health and Good Character (NMC, 2019). You must declare a Good Health and Good Character for every level of your programme and for entry to the register.

• Ensure that you have knowledge of the requirements of the NMC (2015) *Duty of Candour* and act upon this accordingly at all times.

In addition to the activities described above, as a student you must be aware of the requirement to complete an <u>evaluation after each PLE</u>; this is part of the formal university audit process.

This PAD will show your achievements, progression through the programme and contribute to the decision for entry to the register. If you have any questions regarding this document or how to use it please do not hesitate to speak to your academic assessor/practice tutor/staff tutor.

The Nursing and Midwifery Council (2018d, p.10) state that: "Approved education institutes together with practice learning partners must ensure that students are supernumerary".

Supernumerary status means that: "Students in practice or work-placed learning must be supported to learn. This may include being supernumerary, meaning that they are not counted as part of the staffing required for safe and effective care in that setting" NMC (2018c, p.4).

"The decision on the level of supervision provided for students should be based on the needs of the individual student. The level of supervision can decrease with the student's increasing proficiency and confidence." NMC (2018c, p.4).

This means that you have supernumerary status whilst within the practice learning environment; you are not to be 'counted in the numbers' but you will make an active contribution to the provision of care under a varying degree of supervision whilst on your programme of study.

1.2. The roles of Practice Supervisors, Practice Assessors and Academic Assessors/Practice Tutors

You will have a number of practice learning experiences throughout your programme. During your PLEs responsibility for supervision and assessment will lie with a practice supervisor, practice assessor and an academic assessor (NMC, 2018c, p.8).

Practice Supervisor

There may be a number of practice supervisors in each learning environment who will support and supervise you as a student however, you must have a nominated practice supervisor identified to actively support you and address any concerns you may have during this experience. They can be any registered health and social care professional working in a practice environment, but most of the time they will be nurses or midwives. Practice supervisors will have been prepared and supported to take up their role and will have up-to-date knowledge and experience relevant to the supervision they must provide for you. All NMC registered nurses and midwives are capable of supervising students.

Practice supervision will enable you to learn and safely achieve proficiency and autonomy in your professional role. Your supervision will reflect your learning needs and stage of learning.

Your practice supervisor will act as a role model. In line with their scope of practice they will provide you with support and feedback, liaise with colleagues and your practice assessor to document your progress and complete your summative assessments at each level of this PAD.

Practice Assessor

The practice assessor, in collaboration with your practice supervisor(s), will arrange sufficient opportunities to periodically observe your PLE(s). This will enable them to make informed decisions about your assessment and progression in practice.

Your practice assessor works in partnership with your academic assessor to evaluate and recommend your progression for each level of the programme. This will be in line with programme standards and local and national policies. They will maintain current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing. Your practice assessors will understand your learning and achievement in theory and will collaborate with your academic assessors to reach a decision as part of the assessment process.

The same person cannot be your practice assessor and practice supervisor simultaneously.

What is an Academic Assessor/Practice Tutor?

Unlike other universities who provide students with Academic Assessors only, The Open University provides you with Academic Assessors/Practice Tutors. They are Registered Nurses with appropriate experience in the field of practice that you are studying. Although the role includes two titles, the role itself is undertaken by one person. However, because it is an NMC requirement that "all students on an NMC approved programme are assigned to a different nominated academic assessor for each 'part' (level) of the education programme" (NMC, 2018c, p.8) there will be occasions when you will be allocated two Academic Assessors/Practice Tutors. When this happens one of the Academic Assessors/Practice Tutors will focus on the Academic Assessor elements of their role whilst the other will focus on the Practice Tutor elements of their role. We have provided additional name and signature boxes throughout the PAD for the Academic Assessors/Practice Tutors to complete when required.

Academic Assessors/Practice Tutors maintain their current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing and confirming. This allows them to understand your learning and achievement in practice and to make and record objective, evidence-based decisions on your conduct, proficiency and achievement. They work closely with your nominated practice assessor and make recommendations for your progression based on your assessments, PAD and other resources. They also collate and confirm your achievement of proficiencies and programme outcomes in the academic environment for each Level of the programme. The Practice Tutor element of the role also enables them to provide you with pastoral support within practice learning environments if required.

You will meet with your academic assessor/practice tutor at the beginning of your practice experience to ensure you have learning opportunities available and appropriate supervision and support in place. Further meetings will take place between you, your practice supervisor and your practice tutor/academic assessor midway and at the end of each level of the programme. At the final meeting your practice assessor and academic assessor/practice tutor collate and confirm that all academic results and practice requirements have been met and recommend whether you should progress to the next part of the programme.

Included below are some examples of evidence that could be used as part of the assessment process:

- how services users, carers and other professionals contribute to your assessment
- the need for risk assessments to be undertaken in certain circumstances
- requirements for reasonable adjustment
- raising and reporting causes for concern
- attendance requirements.

1.3. Performance review process

1.3.1 Pre-practice activities

Pre-practice learning activities including practice information – Practice Supervisor

The University has set designated activities and it is essential that you complete these prior to commencing your PLE. Information about your PLE that will help you to complete these activities will be available via your practice education teams and/or the Quality Management of the Practice Learning Environment (QMPLE) University electronic platform. These pre-placement learning activities focus on the nature of the care area, the practice placement profile, the service user and the nature of common conditions that may be encountered. These activities will enable you to identify potential learning opportunities thereby facilitating the development of a learning plan to achieve the required proficiencies (detailed in Section 2), skills and procedures (NMC, 2018a) whilst within the PLE. These pre-practice activities will be documented as complete by a Practice Supervisor in the PAD once you commence your PLE.

1.3.2 Orientation and preliminary meeting

Orientation and Preliminary Meeting: orientation and induction to practice learning environment - Practice Supervisor and Student (the Practice Assessor and Academic Assessor/Practice Tutor may also attend or provide input to this meeting if required)

Your preliminary meeting must include completion of the checklist of topics of discussion. This should take place within the first 48 hours of starting your PLE. As part of this conversation, your practice supervisor will familiarise you with the PLE and review your previous learning development plans. This will give you the opportunity to identify the range of learning available. **Your practice assessor and academic assessor/practice tutor may take part in this meeting if required.**

Your practice supervisor must record this in your PAD. At this point, you should agree and document the <u>dates for your interim feedback meeting and final assessment.</u>

It is also helpful to review any NMC Proficiencies, communication and relationship management skills and nursing procedures (NMC, 2018a) and learning outcomes that you think may be met in the PLE.

You **must** ensure that your practice supervisor(s) complete the details required within section 1.8a - the Record of Signatories, and you must sign to confirm that all signatures in this PAD are authentic.

You **must** ensure that your practice assessor completes the details required within section 1.8b - the Record of Signatories, and you must sign to confirm that all signatures in this PAD are authentic.

You **must** also ensure that your academic assessor/practice tutor completes the details required within section 1.8c - the Record of Signatories, and you must sign to confirm that all signatures in this PAD are authentic.

1.3.3 Interim feedback meeting

Interim feedback meeting – Practice Supervisor and Student (the Practice Assessor and Academic Assessor/Practice Tutor may also attend or provide input to this meeting if required)

You should plan to meet with your practice supervisor and practice assessor regularly to discuss your progress and to review your learning plan. You should reflect on your progress regularly and this will inform your interim feedback meeting.

Your interim feedback meeting is formative, documented and signed by you, your supervisor and/or assessor in the PAD.

Situations may arise when your practice supervisor or practice assessor raises concerns about your knowledge, proficiency, professionalism or fitness to progress. The NMC Code (2018e) reminds registrants of their professional accountability and responsibilities and your practice supervisors would be expected to "appropriately raise and respond to student conduct and competency concerns" (NMC, 2018c, p.7).

It is important that you speak with your practice supervisor and/or practice assessor and your academic assessor/practice tutor to work collaboratively to address any issues. In section 3, there is guidance for addressing these issues, please take time to read the information.

1.3.4 Final performance

Final Performance Assessment – Practice Assessor and Student (the Academic Assessor/Practice Tutor may also attend or provide input to this meeting if required)

It is your responsibility, in collaboration with your practice assessor, to ensure the completion and documentation of your summative assessment of performance. This should be completed during the last few days of the PLE. Your practice assessor will review your progress and, in collaboration with your academic assessor/practice tutor, will identify evidence to support their professional judgement. Others who have supported your learning will be asked to provide evidence to develop your assessment. You should seek feedback from service users/carers to inform your learning and development.

Following this assessment you should reflect on your progress and document this, along with your learning needs, and use this to inform your Learning Development Plan in your next PLE.

1.4. Feedback from service users and carers

The NMC (2018b, p.6, 1.12; p.12, 5.14) values the role of service users, carers and professional colleagues in assessment of your practice learning and advocate their involvement in the assessment process. You and your practice supervisors should seek feedback from service users and carers on your abilities in relation to how you communicate, how you respect the service user as an individual and the care that you provided. We would encourage you to consider feedback received from these individuals when reviewing your performance with your practice supervisors and take

cognisance of this when preparing to discuss your final written performance assessment with your practice assessor.

Please note the following guidance:

- You should try to seek feedback from service users/carers <u>at least once per practice learning experience</u>, <u>but a minimum of once per level</u>.
- If additional opportunities arise, these should be actioned, and additional documentation can be inserted within the PAD to reflect any further feedback you receive.
- You <u>must seek consent</u> from the service user/carer and respect that service users and carers have the right to refuse to participate. If they do not want to, you must assure them that this will not affect their future care or treatment.
- It is your practice supervisors' responsibility to collate and document this feedback in a sensitive, anonymous manner within your PAD in the appropriate section.
- Feedback received in other formats (for example the receipt of cards, emails to PLE staff or University) should be recorded within the Service User/Carer Feedback pages, anonymised and reflected upon.
- Please also refer to the NHS Education for Scotland (NES) document NHS
 Education for Scotland (NES) (2013) Evaluation of Current Practices to
 Involve Service Users and Carers in Practice Assessment in 11 Higher
 Education Institutes (HEIs) in Scotland.

1.5. Risk assessment

Introduction:

During a programme of pre-registration nurse education each accredited HEI has a duty of care to ensure that you are safe whilst undertaking PLEs. The HEI and practice providers work collaboratively to support all students. According to current Health and Safety legislation (Management of Health and Safety at Work Regulations, 1999) some groups of student nurses must be aware of particular hazards in the practice setting. Students under the age of 18 (young workers) and those who are pregnant or breastfeeding, may need additional consideration to ensure that they are not exposed to undue risk. Reasonable adjustments will be underpinned by a risk assessment and, where appropriate, this will interface with any risk assessment undertaken by your employer. For example, if you become pregnant your employer will undertake a risk assessment and the university will reflect this in its own risk assessment and reasonable adjustment form.

If you fall within any of these categories whilst a student, it is your responsibility to:

 Alert your employer and the university as soon as possible if you are pregnant or will be under the age of 18 when you first commence practice or

- if you are returning to a practice learning environment following maternity leave and are still breastfeeding.
- Consent to sharing information. Whilst any information divulged by you will be treated sensitively, it will be necessary to share information relating to your situation with the member of staff responsible for the practice learning environment [please see further information in your Programme Handbook].
- Comply with measures recommended to manage risk.

Please refer to your Programme Handbook for information about:

- Student Nurses as Young Workers
- Students Nurses who are pregnant or breastfeeding
- Outline of roles and responsibilities in relation to the risk assessment process.

1.6. Reasonable adjustments

Reasonable adjustments may have to be made to allow those with a disability to achieve proficiency. The NMC state that Universities and practice learning partners 'must take account of students' individual needs and personal circumstances when allocating their practice learning including making reasonable adjustments for students with disabilities' (NMC, 2018d, p.10). It is important to recognise that reasonable adjustments can be made to support you and to assess how you can demonstrate that you have met a standard or proficiency. Whilst every attempt will be made to make reasonable adjustments to support your learning in practice, the requirement remains that you must demonstrate achievement of the NMC standards and proficiencies.

If you have declared a disability including specific learning differences such as dyslexia, provided evidence of this and it is recognised on your student record by the university, reasonable adjustments will be agreed. Any reasonable adjustments in place must still enable you to meet the level of competence required to successfully achieve proficiencies, skills and procedures. Reasonable adjustments will be underpinned by a risk assessment, and where appropriate this will interface with any risk assessment undertaken by your employer. Further advice is available from your academic assessor/practice tutor.

Ultimately, it is your own responsibility to inform the Practice Supervisor and Practice Assessor of any reasonable adjustment in practice that you may require. It is therefore good practice to discuss this provision prior to, or at, the preliminary meeting and consider whether reasonable adjustments can be made to enable you to practise safely and effectively. Adjustments may be put in place for the duration of your placement or for shorter periods of time to address a temporary requirement.

You, your practice supervisor, practice assessor, academic assessor/practice tutor and other members of practice education staff can make feedback on how the reasonable adjustments are working on the interim feedback meeting pages. Further information on policies and reasonable adjustments can be accessed via Government sites, the NMC, your placement provider and within Section 6 of your programme handbook.

1.7. Attendance

The NMC Standards for pre-registration nursing education (NMC, 2018d, (Annexe 1), p.13) state that as a student nurse, you must achieve 2,300 hours in practice during your programme. Attendance at practice is mandatory. It is therefore essential that practice hours are recorded and any absence hours are retrieved. It is your professional responsibility (NMC, 2018e, *The Code*) to follow Open University (OU) and practice policy and procedures when reporting absence.

1.7.1 Working time directive

- Your placements are planned according to the requirements set out in the practice learning pathways available on your module websites. As a student you must not negotiate any reduction to the allocated time.
- As a student you are expected to work the shifts allocated by the practice learning environment. Any requests for alteration to designated shift patterns for any reason should be made to the Practice Learning Environment Manager and the OU through your academic assessor/practice tutor.
- During your Programme, the NMC requires all students to undertake practice learning that enables you to experience the full 24 hour, 7 days per week care of patients.
- When in clinical practice, you are expected to work within the shift pattern of that practice learning environment. You will complete 770 hours of placement during each level of the programme.
- As a student, you must ensure that any other work that you regularly undertake does not result in you working more than 48 hours per week. This is to ensure the health and safety of you as a student nurse, your colleagues and the patients and clients in your care.
- Guidance regarding working patterns for young workers (under 18 years) can be found in your programme handbook.

1.7.2 Attendance record sheets

- Attendance records are important documents in that they provide evidence to confirm that students have achieved the minimum NMC requirement of 2,300 hours of practice during the pre-registration nursing programme.
- Students and Practice Supervisors are responsible for ensuring attendance records are accurate and signed.
- Attendance records should accurately reflect the number of hours worked in practice.
- At the end of every month your record of completed hours, sickness and absence must be submitted electronically to your academic assessor/practice tutor. Your employer may also require a copy.
- Attendance records should not be signed in advance. If the Practice Supervisor is not going to be on duty during the last few days of your PLE the attendance records for these days should be signed by the Practice Assessor (if available) or another member of registered staff.
- If the PLE closes for any reason e.g. because of a public holiday, you can either work in a different environment on that day or make up the time.

At the end of every supernumerary practice shift that you work, you must enter this on the record provided for this purpose in your Practice Assessment Document (PAD). Your attendance must be verified on that day by a registered professional with whom you have worked: this will normally be your practice supervisor.

1.7.3 Authorised absence

• You should adhere to your employer sickness policy. Please refer to Section 5 in your programme handbook.

1.7.4 Unauthorised absence

- If you accrue significant periods of unauthorised absence the OU disciplinary procedures will be followed to address this. This could, ultimately, result in your discontinuation from the programme.
- Please see point 1.7.3 above.

1.7.5 Reporting sickness / absence

- If you are ill or experience a significant problem and are scheduled to undertake a supernumerary practice shift, you must ring the practice placement area and inform the person in charge that you will not be attending. You must also email your line manager at work, your practice supervisor/practice assessor in the placement area and your academic assessor/practice tutor to inform them of your sick leave or absence. This message should be sent before the start of the sickness/absence. You must email them again to confirm the date on which you are resuming your work and studies.
- You must enter all days of sickness/absence on the record in your PAD whether these occur on a theory day, a supernumerary practice day or a day when you are working in the workforce numbers.

1.7.6 Returning from sickness / absence

 You should inform your academic assessor/practice tutor when you are returning to work as well as your line manager at work and your placement area (if this is different from your usual place of work). Make sure all episodes of sickness or other reasons for absence are identified on your record of hours sheets.

1.8a Record of signatories – Practice Supervisor

PLEASE COMPLETE AT THE START OF EVERY PRACTICE LEARNING EXPERIENCE.

NB. Practice Supervisors must be NMC registered nurse or midwife or another registered health and social care professional (NMC, 2018c, p.6)

			_	
			One	PLE
			Ward 5 GRI	Name
			CLAIRE COCHRANE	Practice Supervisor Name (please print)
			Claire Cochrane	Practice Supervisor Signature. I confirm that I have been suitably prepared for the role of practice supervisor
			0#C	Practice Supervisor Initials
			Adult	Practice Supervisor's field of nursing practice/ profession
			Nursing student	Students sign to confirm that all signatures in this document are authentic
			Xx/xx/xx	Date

1.8b Record of signatories - Practice Assessor

PLEASE COMPLETE AT THE START OF EVERY PRACTICE LEARNING EXPERIENCE.

NB. Practice Assessors must be a registered nurse on the same part of the register as the student or have appropriate equivalent experience for the student's field of practice

1		 1	 	 		1	
PLE	One						
PLE Name	Ward 5 GRI						
Practice Assessor Name (please print)	JACQUELINE BLACK						
Practice Assessor Signature I confirm that I have been suitably prepared for the role of practice assessor	Jacqueline Black						
Practice Assessor Initials	JB						
Practice Assessor's field of practice	Adult						
Students sign to confirm that all signatures in this document are authentic	Nursing student						
Date	Xx/xx/xx						

1.8c Record of signatories – Academic Assessor/Practice Tutor

PLEASE COMPLETE FOR EACH LEVEL OF THE PROGRAMME.

NB. Academic Assessor/Practice Tutor must be a Registered Nurse on the same part of the register as the student, or have appropriate equivalent experience for the student's field of practice

LEVEL of PROGRAMME	Level One				
Academic Assessor/Practice Tutor Name (please print)	Robert Brown				
Academic Assessor/Practice Tutor Signature I confirm that I have been suitably prepared for the role of academic assessor/practice tutor	Schert Brown				
Academic Assessor/Practice Tutor Initials	\$.B				
Academic Assessor/Practice Tutor Field of Practice	Adult				
Date	xx/xx/xx				



SECTION 2: PRACTICE LEARNING EXPERIENCES (PLE)

2.0. Programme outline

R39 - BSc (Honours) Nursing [Adult] [Children and Young People's Nursing] [Learning Disabilities] [Mental Health]

Level 1

KYN102 Introducing Health and Social Care (60 credits) KYN104 Introduction to Healthcare Practice (60 credits)	
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Level 2

KYN210 Understanding Nursing: Knowledge and Theory (60 credits)	KYN211 Developing Nursing Practice (60 credits)



Level 3

KYN325	KYN326	KYN327	KYN328	KYN329
Assimilating	Becoming an	Becoming an	Becoming an	Becoming an
Nursing:	Autonomous	Autonomous	Autonomous	Autonomous
Knowledge	Practitioner: in	Practitioner: in	Practitioner:	Practitioner:
and Theory	Adult Nursing	Mental Health	in Learning	in Children
(60 credits)	(60 credits)	Nursing (60	Disability	and Young
		credits)	Nursing (60	People's
			credits)	Nursing (60
				credits)

2.1. Assessment criteria

Background Information

Student supervision and assessment in practice requires that practice supervisors and assessors work together with you as a student to facilitate your learning. This, combined with the input of your academic assessor/practice tutor, will help to ensure a robust assessment process for each level of your programme, and at the point of professional registration.

The assessment process includes your supervision and support in practice and the assessment of your performance based on specific components which have been determined by the Nursing and Midwifery Council (NMC, 2018a). These are outlined as part of this documentation and your practice supervisors and assessors should review this information prior to engaging in the supervision and assessment of your performance in practice.

Assessment Components

There are two components to your assessment

- 1. Platforms and Proficiencies
- 2. Skills and Procedures

1. Platforms and Proficiencies

These are assessed for every practice learning experience (PLE). There are seven platforms, each of which has associated proficiencies (NMC, 2018a). As a student you must achieve all proficiencies for each platform during your programme. Each of the platforms are listed below, including the number of proficiencies associated with each. All proficiencies detailed within the 'Platforms and Proficiencies' Section of the document must be achieved. Evidence of this achievement of the proficiencies will be assessed in line with the levels of the participation in care framework. Using the levels of this framework to assess your performance will ensure that this assessment confirms that there has been progression in your performance as you progress through your programme of study.

It is the responsibility of the practice supervisor and practice assessor to discuss your progress together in collaboration with others and in consideration of feedback from service users and carers. Through this collaborative dialogue they will determine whether or not you have achieved each of the platform proficiencies at the required level of performance. The outcome of this assessment will then be reviewed and confirmed by your academic assessor/practice tutor at the end of each LEVEL:

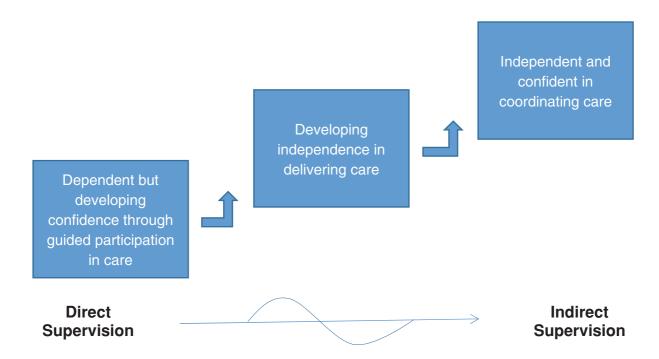
- Platform 1 Being an accountable professional
 - 20 proficiencies to be achieved
- Platform 2 Promoting health and preventing ill health
 - 12 proficiencies to be achieved
- Platform 3 Assessing needs and planning care
 - o 16 proficiencies to be achieved

- Platform 4 Providing and evaluating care
 - 18 proficiencies to be achieved
- Platform 5 Leading and managing nursing care and working in teams
 - o 12 proficiencies to be achieved
- Platform 6 Improving safety and quality of care
 - 12 proficiencies to be achieved
- Platform 7 Coordinating care
 - 13 proficiencies to be achieved

Assessment of Proficiencies through participation in Care

The practice assessor will ultimately be responsible for determining the assessment outcome in practice however, this will involve collaborative discussion with others who support and come into contact with you as you progress through each level of your programme. The participation in care framework below is designed to assist you, and those supporting and assessing you, to identify the level of your performance for each of the proficiencies associated with each of the platforms.

Participation in Care – Dependent to Independent (PLPAD 2.0) *



The description of each level of participation, detailed in the diagram above, and explained in more detail below, will help you and your practice supervisors/assessors to understand what is expected of you as a student by the end of each level of your programme. The explanation below outlines the expected level of performance which must be demonstrated by the end of each Level, as well as the level of assistance you can expect to receive from your practice supervisors/assessors:

• Participation in Care – Explanation of Levels of participation

- <u>Dependent</u> Minimal standard of participation in care to be achieved by the end of Level 1 of nursing students' programme.
 - You will be working closely with your practice supervisor who will direct and guide you. Through this guided participation in care, you will be able to demonstrate delivery of safe, effective, personcentred care in a professional manner using appropriate nursing skills. You will also demonstrate a professionalism in your attitudes and values as well as a positive attitude to own learning.
- <u>Developing Independence</u> Minimum standard of participation in care to be achieved by the end of Level 2 of nursing students' programme.
 - You will be developing independence and your practice supervisor will offer guidance and support when required. You will actively participate in care with this guidance and will demonstrate increasing confidence and competence. You will also demonstrate an understanding of professional roles and responsibilities and will maximise opportunities to extend your own knowledge.
- Independent Minimum standard of participation in care to be achieved by the end of Level 3 of nursing students' programme.
 - You will be working independently, and your practice supervisor will offer a more indirect form of supervision. You will demonstrate the ability to lead and coordinate care, and the ability to act as an accountable and responsive practitioner, demonstrating a comprehensive knowledge base that informs safe and effective practice. You will also assume responsibility for your own learning, as well as the learning of others.

Please see Appendix 1 at the back of PAD document for criteria outlining levels of proficiency.

2. Annexes A and B: Skills and Procedures

In addition to the platforms and proficiencies detailed above, there are also skills and procedures. These skills and procedures must be **safely demonstrated** before being confirmed by your practice supervisors/practice assessors. This will mostly take place in the practice environment however, in exceptional circumstances for example, if it is not possible to perform cardiopulmonary resuscitation in practice, you may be able to achieve these through simulation within your clinical environment. Clinical skills and procedures practiced and safely demonstrated in both practice and simulation will be documented and signed for within the PAD as LEVEL of the 'Annexes A and B Skills and Procedures' section.

Your practice supervisors and practice assessor will determine through collaborative dialogue between themselves and/or others to determine whether or not you have safely demonstrated both the skills and procedures. The sets of skills and procedures

^{*}Adapted with permission from: Pan London Practice Learning Group (2019). Pan London Practice Assessment Document 2.0 available from: www.plplg.uk

identified as having to be safely demonstrated prior to entry to the NMC register are detailed below:

Communication and relationship management skills

- Skill Set 1 Underpinning communication skills for assessing, planning, providing and managing best practice, evidence-based nursing care
 - 12 skills
- Skill Set 2 Evidence-based, best practice approaches to communication for supporting people of all ages, their families and carers in preventing ill health and in managing their care
 - 9 skills
- Skill Set 3 Evidence-based, best practice communication skills and approaches for providing therapeutic interventions
 - 9 skills
- Skill Set 4 Evidence-based, best practice communication skills and approaches for working with people in professional teams
 - 11 skills

Nursing Procedures

- Procedure Set 1 Procedures for assessing people's needs for person-centred care
 - 26 procedures
- Procedure Set 2 Procedures for the planning, provision and management of person-centred nursing care
 - 90 procedures

Skill and Procedure Achievement

The Annexe skills and procedures are provided as a list as part of this PAD and you must safely demonstrate each of these to enable your practice supervisors/assessors to sign to confirm that this has taken place. Safely demonstrating skills and procedures will take place throughout each level of your programme and will involve a number of practice supervisors as well as, potentially, the practice assessor. It is therefore important that at the start of each placement, you review all skills and procedures with your practice supervisor to help you to determine which skills and procedures you could potentially work towards safely demonstrating in each area. Opportunities should be noted within the Learning Development Plan at the start of your PLE. Any skill or procedure that has been safely demonstrated must continue to be demonstrated safely whenever the opportunity arises in practice.

Your practice supervisors and assessors must not only communicate with one another but must also provide you with frequent feedback on your performance. Areas of strength and aspects for development should also be discussed and documented at all times to feed forward for each subsequent PLE.

2.2. Mandatory Training

You must be up to date and stay up to date with the mandatory training provided by your employer. This supports your safety and the safety of patients or service users and colleagues whilst in practice settings. If you have a placement with another local healthcare provider who is not your employer, you may need to undertake additional training before starting the placement. Please discuss this with your academic assessor/practice tutor.

This must be signed by you and verified by your line manager when sessions are attended/completed.

	Pre-Practice	LEVEL 1	LEVEL 2	LEVEL 3 & 4
Manual Handling (Statutory)	Theory and Practice to support achievement of A- F, or A-D, as per 'The Scottish Manual Handling Passport' Scheme	Practice to support achievement of E-F (if not done pre practice)	Annual update	Annual update
Student Signature:				
Line Manager/ Signature:				
Date:				
Prevention & Safe (Therapeutic) Management of Violence and Aggression	Breakaway technique – theory and practice	Theory and Practice	Theory Refresher	Theory and Practice
Student Signature:				
Line Manager Signature:				
Date:				
Fire Safety (Statutory)	Learn Pro Community Module Fire Safety Awareness Online Assessment		Lecture / Online Assessment	Lecture / Online Assessment
Student Signature:				
Line Manager/ Signature:				
Date:				

Better Blood Transfusion		Safe Transfusion Practice Module 1	
Student Signature:			
Line Manager/ Signature:			
Date:			

2.3. Record of compulsory practice skills

Practice Skills	Pre-Practice	LEVEL 1	LEVEL 2	LEVEL 3 & 4
Cardio-Pulmonary	BLS		BLS/AED	BLS/AED
Resuscitation (Theory and Practice)				or
(**************************************				II C
Student Signature:				ILS
Line Manager/				
Signature:				
Date:				
Control of Infection	No. 4 Hand Hygiene **	SIPCEP Foundation Pathway		
Student Signature:	, ,			
Line Manager/				
Signature:				
Date:				
Numeracy		Numeracy	Numeracy	Numeracy
		assessment	assessment	assessment (100%)
Student Signature:				
Line Manager/				
Signature:				
Date:				
Adult Support and		Learn Pro		
Protection		Community Module: Adult Support and		
		Protection		
Student Signature:				
Line Manager/				
Signature:				
Date:				

2.3. Record of compulsory practice skills continued

Child Wellbeing (Protection) for the general contact workforce		Learn Pi Commu	ro nity Module		
Student Signature:					
Line Manager/ Signature:					
Date:					
Skin Surveillance					
Student Signature:					
Line Manager/ Signature					
Date:					
Field specific skills	Informed Level		Skilled Level		
Dementia Promoting Excellence Framework					
*Student Signature:					
Line Manager/ Practice Tutor Signature: Date:					
Date.					

^{*}Level of skill will be according to field of practice. Please check with your academic assessor/practice tutor if you are unsure what level of skill you should have.

Level 1 (Pink pages) Practice Learning Experiences (3)

Practice Learning Experience (PLE) 1

Practice Learning Experience (PLE) 2

Practice Learning Experience (PLE) 3

Introduction to Health Care Practice KYN104

LEVEL 1 PLE 1

PRACTICE LEARNING EXPERIENCE

Informat	tion for Students
1.	Please ensure you only complete the PINK pages within the PAD during Level 1 of the programme.
2.	Please contact your PLE prior to your start date to confirm who your nominated practice supervisor is and to confirm your shift pattern.
3.	Please note that it is expected that your working hours reflects the range of hours expected of registered nurses (NMC, 2018d). This includes working weekends and night shifts; please refer to your Programme Handbook for more details.
4.	Please ensure that you liaise with your nominated practice supervisor to secure dates for your interim review of progress and your final assessment. This should take place during your initial discussions with your practice supervisor.
	Please check with your practice supervisor who needs to attend the interim and final assessments.
	Please arrange to have an initial meeting with your academic assessor/practice tutor.
5.	Please note the expected practice hours to be achieved whilst within this PLE and ensure that your shift pattern will enable you to achieve these hours.
6.	Please refer to the skills and procedures in Annexe A and B and discuss with your practice supervisor to identify the skills that can be safely demonstrated within the PLE.

MODULE LEARNING OUTCOMES

LEVEL 1: PLE 1

Module Summary

The module will be one of two modules studied at level 1, as the first stage of pre-registration nursing qualifications. The other module (KYN102, *Introducing Health and Social Care*), which focuses on theory to underpin health and social care, will usually be studied concurrently but some students may study KYN102 outside the qualification, and then study this module as the second module. The module will run across 51 weeks and includes 770 practice learning hours. The module also includes 125 hours of theory learning, 30 hours for assessment preparation and 15 hours for online tutorials.

The module contains 16 learning guides which focus on learning in practice and aims to support students to develop an understanding of the role of a nursing student and develop an awareness of the roles of health and social care professionals across a range of care settings. The content also enables students to become proactive learners in the practice setting. Students' learning is also facilitated through the online tutorials. Students will be introduced to the principles of Enquiry Based Learning (EBL) which forms part of the underpinning learning and teaching strategy of the nursing curriculum.

The module will introduce students to reflective models and techniques to develop self-awareness and resilience, so students gain insights into their own abilities and when to seek support in a timely way. The module will introduce the principles of holistic and person-centred approaches to assessment and care. The module aims to develop students' cognitive skills grounded in their practice learning experiences. This will be done by reviewing information gathered during assessment and nursing care delivery, discussing rationale for nursing care and underpinning evidence, and identifying and discussing factors influencing the quality and safety of care. The module also aims to develop key skills including questioning, problem-solving, communication and relationship management skills, numeracy and literacy skills with application to safe and effective nursing practice, including medicines management. The module will prepare students to take professional responsibility for the care they deliver and their own role, and to develop a range of personal and professional skills including professional values and behaviour, skills in assessment, care planning, care delivery and documentation, and practical/clinical skills. The module will also introduce health promotion, and prepare students to work effectively with people, their families, carers and colleagues.

Module learning outcomes:

Knowledge and Understanding

When you complete your studies for this module, you will have knowledge and understanding of:

KU1 An understanding of the role of the nursing student and how to be a proactive learner in the practice setting

KU2 An awareness of the roles of health and social care professionals across a range of care settings

KU3 An understanding of reflective models and techniques, self-awareness and resilience

KU4 An understanding of the principles of holistic and person-centred approaches to assessment and care

KU5 The biological, pharmacological, physical, socio-cultural, political, legal, organisational and psychological concepts and theories relevant to contemporary practice

KU6 The nature of professional care including the values, ethics and standards applied to care providers in a range of contexts.

Cognitive Skills

On completion of this module you will have developed the following cognitive skills:

- CS1 Review the information gathered during assessment and nursing care delivery
- CS2 Discuss the rationale for nursing care, with reference to available evidence
- CS3 Identify and discuss factors influencing the quality and safety of care from practice experience
- CS4 Consider the risks associated with quality and safety in health and social care and evaluate strategies for safety and quality improvement
- CS5 Reflect on experiences of health, wellbeing and social care from your own and others' perspectives
- CS6 Recognise the process associated with the promotion of health and wellbeing, and the concept and impact of health inequalities.

Key Skills

When you complete this module you will be able to:

KS1 Use a questioning and problem-solving approach to nursing care

KS2 Demonstrate a range of communication and relationship management skills with people, families and colleagues, and as appropriate to own field of practice

KS3 Develop numeracy and literacy skills with application to safe and effective nursing practice, including medicines management

KS4 Demonstrate personal responsibility for care delivered in practice and discuss own role

KS5 Manage your own learning through identifying learning needs, setting objectives, responding to feedback and monitoring progress through critical reflection

KS6 Search for, synthesise, evaluate and apply relevant information from a range of sources KS7 Communicate effectively and manage relationships with people, families, carers and health and social care colleagues, using a range of appropriate methods and applying emotional intelligence.

Practical and/or Professional Skills

When you complete this module you will be able to:

PPS1 Demonstrate professional values and behaviour in accordance with the Nursing and Midwifery Council's Code

PPS2 Identify and discuss opportunities for health promotion activities in the practice setting

PPS3 Demonstrate an ability to assess people's needs using appropriate skills and tools

PPS4 Apply care planning skills, deliver and document care, in partnership with people and families

PPS5 Demonstrate a range of practical/clinical skills, as appropriate to own field of practice, in the delivery of safe, effective, dignified and compassionate nursing care

PPS6 Demonstrate an ability to work with people, their families, carers and colleagues

PPS7 Display insights into own abilities and when to seek support in a timely way

PPS8 Apply the values of equality, diversity, protection and confidentiality to professional healthcare practice

PPS9 Demonstrate resilience and acknowledge the impact and demands of professional practice on your personal health and wellbeing, engaging in self-care and accessing support when required.

PRE-PRACTICE LEARNING ACTIVITIES LEVEL 1: PLE 1 PRACTICE LEARNING EXPERIENCE DETAILS Student Name: Cohort: Student ID: Level: **Practice Learning** Start date: **Environment:** Finish date: Telephone Number: PLE Type: Name of PEF/CHEF: Nominated Practice Supervisor Name: Nominated Practice Assessor Name: Nominated Academic Assessor/Practice Tutor Name: Additional Nominated Academic Assessor/Practice Tutor Name (if required): Prior to the commencement of each PLE, the student should: 1. Make contact with the practice learning environment and ascertain the shift patterns in operation, the name of your designated practice supervisor/ assessor and if appropriate, arrange a pre-practice experience visit. 2. Read the appropriate PLE profile, which can be accessed via electronic platforms. 3. Briefly summarise what the PLE does:

4. From the Learning Opportunities outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
 5. Considering the service user group that attend the practice learning experience, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these. From your search, identify two key resources on the topic and list below (using appropriate reference style) In the space below provide a brief summary of these two resources and outline any best practice recommendations in relation to these
Resource 1-
Resource 2-
Condition/situation:

from your theory modu environment. Please no	ou are about to enter, identif les that will support your lead ote your thoughts below:	rning within this care
procedures listed in An HCSW role. Discuss the learning within this care	nat you are about to enter, ic nexe A and B that you curre ese with your practice super e environment. Please note y	ntly undertake in your visor in relation to your your thoughts below:
Practice Supervisor – plea activities have been comp	leted by the student	
Date/	Student Signature:	Practice Supervisor Signature:

ORIENTATION & PRELIMINARY MEETING

LEVEL 1: PLE 1

In accordance with the *NHS Education for Scotland Quality Standards for Practice Placements*, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	Please initial when complete
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident/incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice	
assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and final assessment	

LEVEL 1: PLE 1							
Please use the space below to summarise the main points arising from the preliminary meeting with the student and discussion around the students learning development plan.							
Please identify skills and procedures that could be achieved within area:							
Practice Supervisor – please sign to confirm that the orientation and preliminary meeting learning activities have been completed by the student							
Date/	Student Signature:	Practice Supervisor Signature:					
Agreed date for next	Interim:	Final:					

meetings

INTERIM FEEDBACK MEETING

LEVEL 1: PLE 1

Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments):
Platform 1: Being an accountable professional
Platform 2: Promoting health and preventing ill health
Platform 3: Assessing needs and planning care
Trattoring of Assessing needs and planning care
Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams

Platform 6: Improving sa	afety and quality of care		
Platform 7: Coordinating	g care		
Skills and Procedures:			
Student feedback: Have any issues been re		Yes	No
Assessor AND/OR Acad Tutor? Development Support P		Yes	No
Date/	Student Signature:	Practice Supervisor Signature: Practice Assessor Signature (if required) Academic Assessor/Practice Tutor Signature (if	

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4) LEVEL1: PLE 1

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:

You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

want to, this will not affect your future care or treatment.							
Please tick if you are: T	he patient/s	service user	C	arer/Relative			
How happy were you with the way the student nurse	Very happy	Нарру	I'm not sure	Unhappy	Very unhappy		
cared for you?							
listened to your needs?							
understood the way you felt?							
talked to you?							
showed you respect?							
What did the student nurse do well?							
What could the student nurse have done differently?							
Date/	Student Signature: Practice Supervisor Signature:						

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK LEVEL 1: PLE 1 Please note any other forms of service user/carer feedback (e.g. cards, letters, emails). Please ensure anonymity is maintained Use the box below to record your thoughts and feelings on all service user/carer feedback received: Date Student Signature: Practice Supervisor Signature: ____/____

FEEDBACK FROM ADDITIONA	L LEARNING OPPORTUNITIES				
LEVEL 1: PLE 1					
Student Name:	STUDENT ID:				
	Cohort:				
Name of Placement:	Practice Supervisor:				
Name and Location of Organisation/Pro					
Individual overseeing student's opportunity comments – Please comment on student performance and what learning has taken place?					
Print Name:	Sign:				
Date:					
Student reflection - please reflect on what you have learned?					
Date:					
Student signature:					

ADDITIONAL NOTES LEVEL 1: PLE 1 Date Time Signature Detail Student, Practice Supervisors, Practice Assessors, Academic Assessor/Practice Tutor can add notes to this page

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR LEVEL 1: PLE 1 Student Name: STUDENT ID: Cohort: The minimum level of performance for this part of the programme is **DEPENDENT**. This means that the student nurse requires continuous or frequent support from the practice supervisor/assessor but is developing confidence through guided participation in care. Please comment on the Platforms below: Platform 1: Being an accountable professional Platform 2: Promoting health and preventing ill health Platform 3: Assessing needs and planning care

Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams
Platform 6: Improving safety and quality of care
Platform 7: Coordinating care

Please comment on progress towards safely demonstrating the skills and procedures in Annexe A and B. Identify aspects for the student to focus on in future PLEs.							
Date/	Student Signature:	Practice Assessor's Signature:					
		Academic Assessor/Practice Tutor (if required)					
Practice Assessor PLE	E 1 Overall Formative Ass	sessment Comments					
Name of Practice Asses							
Signature of Practice As Designation:	5555UI.	Date:					

Practice Assessor Confirmatory Statement						
I confirm that: Student Nurse (print full name)						
following a	period of hours of					
attendance at placement (please refer to attendance record), and through objective						
evidence-based assessments, has:						
ACHIEVED / NOT ACHIEVED (Please delete as appropriate the control of the control	ropriate) the expected level of					
Signature of Practice Assessor:						
Date:						
Student Statement						
I (w	rite name in capital letters)					
have received feedback on my performance and have	had the opportunity to reflect					
and discuss this with the Practice Assessor. Please w	rite comments below:					
Student signature:	Date:					

LEVEL 1: PLE 1										
Studen	t Name and	ID								
Module Name										
Progra	mme and co	hort								
Field o	f Practice									
Practic	e learning e	nvironr	nent							
Week No	Week beginning	М	Т	W	Т	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12.5	12.5	12.5	DO	DO	37.5	S. Nurse
1										
2										
3										
					Tot	al num	her of	houre		
					100		eks =			
See sec	ction 1.7.1 f	or max	imum	hours	s worke	ed per	week			
See section 1.7.1 for maximum hours worked per week Key: DO=Day Off AL=Annual Leave										
C=Compassionate leave S=Sick A=Absent (not sick)						ot sick)				
Date Student Signature: Practice Supervisor Signature:										

ATTENDANCE RECORD

PRE-PRACTICE LEARNING ACTIVITIES LEVEL 1: PLE 2 PRACTICE LEARNING EXPERIENCE DETAILS Student Name: Cohort: Student ID: Level: **Practice Learning** Start date: **Environment:** Finish date: Telephone Number: PLE Type: Name of PEF/CHEF: Nominated Practice Supervisor Name: Nominated Practice Assessor Name: Nominated Academic Assessor/Practice Tutor Name: Additional Nominated Academic Assessor Name (if required): Prior to the commencement of each PLE, the student should: 8. Make contact with the practice learning environment and ascertain the shift patterns in operation, the name of your designated practice supervisor/ assessor and if appropriate, arrange a pre-practice experience visit. 9. Read the appropriate PLE profile, which can be accessed via electronic platforms. 10. Briefly summarise what the PLE does:

you are unfamiliar with and write a short summary.
12. Considering the convice upor group that attend the practice learning
12. Considering the service user group that attend the practice learning experience, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these.
 From your search, identify two key resources on the topic and list below (using appropriate reference style)
 In the space below provide a brief summary of these two resources and outline any best practice recommendations in relation to these
Resource 1-
Resource 2-
Condition/situation:

from your theory modu environment. Please no	rou are about to enter, identifices that will support your lead ote your thoughts below:	rning within this care	
procedures listed in An HCSW role. Discuss the learning within this care	nat you are about to enter, ice inexe A and B that you curre lese with your practice supere environment. Please note your practice is a sign to confirm that the	ntly undertake in your visor in relation to your your thoughts below:	
Practice Supervisor – please sign to confirm that the pre-practice learning activities have been completed by the student			
Date/	Student Signature:	Practice Supervisor Signature:	

ORIENTATION & PRELIMINARY MEETING

LEVEL 1: PLE 2

In accordance with the *NHS Education for Scotland Quality Standards for Practice Placements*, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	Please initial when complete
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident /incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice	
assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and	
final assessment	

LEARNING DEVELOPMENT PLAN

LEVEL 1: PLE 2

LEVEL 1. PLE 2
Please use the space below to summarise the main points arising from the preliminary meeting with the student and discussion around the student's learning development plan.
5 1 11 15 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Please identify skills and procedures that could be achieved within area:

Date/	Student Signature:	Practice Supervisor Signature:
		Practice Assessor Signature (if required)
		Academic Assessor/Practice Tutor Signature (if required)
Agreed date for next meetings	Interim:	Final:

INTERIM FEEDBACK MEETING

LEVEL 1: PLE 2

Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments):
Platform 1: Being an accountable professional
Platform 2: Promoting health and preventing ill health
Platform 3: Assessing needs and planning care
Platform 4: Providing and evaluating care
Triationin 4. Froviding and evaluating date
Platform 5: Leading and managing nursing care and working in teams

Platform 6: Improving sa	fety and quality of care		
Platform 7: Coordinating	care		
Skills and Procedures:			
Student feedback:			
Have any issues been referred to the Practice Assessor AND/OR Academic Assessor/Practice Tutor?		Yes	No
Development Support Pla	an (see Section 3)	Yes	No
Date/	Student Signature:	Practice Supervisor Signature:	
		Practice Assessor Signature (if required):	
		Academic Assessor/Practice Tutor Signature (if required):	

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4) LEVEL1: PLE 2

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:

You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.					
Please tick if you are:	he patient/s	service user		arer/Relative	
How happy were you with the way the	Very happy	Нарру	I'm not sure	Unhappy	Very unhappy
student nurse	ê	00		ŷ ŷ	9,00
cared for you?					
listened to your needs?					
understood the way you felt?					
talked to you?					
showed you respect?					
What did the student nurse do well?					
What could the student nurse have done differently?					
Date/	Student	Signature:		ictice Supervi nature:	isor

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK LEVEL 1: PLE 2 Please note any other forms of service user/carer feedback (e.g. cards, letters, emails). Please ensure anonymity is maintained Use the box below to record your thoughts and feelings on all service user/carer feedback received: Date Student Signature: Practice Supervisor Signature:

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES			
LEVEL 1: PLE 2			
Student Name:	STUDENT ID:		
	Cohort:		
Name of Placement:	Practice Supervisor:		
Name and Location of Organisation/Pro	fessional Visited:		
Individual overseeing student's opportunity comments – Please comment on student performance and what learning has taken place?			
Print Name: Sign:			
Date:			
Student reflection - please reflect on what you have learned?			
Date:			
Student signature:			

ADDITIONAL NOTES LEVEL 1: PLE 2 Date Time Signature Detail Student, Practice Supervisors, Practice Assessors, Academic Assessors/Practice Tutors can add notes to this page

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR LEVEL 1: PLE 2 Student Name: STUDENT ID: Cohort: The minimum level of performance for this part of the programme is **DEPENDENT**. This means that the student nurse requires continuous or frequent support from the practice supervisor/assessor but is developing confidence through guided participation in care. Please comment on the Platforms below: Platform 1: Being an accountable professional Platform 2: Promoting health and preventing ill health Platform 3: Assessing needs and planning care

Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams
Platform 6: Improving safety and quality of care
Platform 7: Coordinating care

Please comment on progress towards safely demonstrating the skills and procedures in Annexe A and B. Identify aspects for the student to focus on in future PLEs.				
Date/	Student Signature:	Practice Assessor's Signature: Academic		
		Assessor/Practice Tutor Signature (if required)		
		_		
Practice Assessor PLE	2 Overall Formative Asses	sment Comments		
Name of Practice Asses				
Signature of Practice As Designation:	5E55UI.	Date:		

Practice Assessor Confirmatory Statement	
I confirm that: student nurse (print full name)	
following a	period of hours of
attendance at placement (please refer to attendance i	record), and through objective
evidence-based assessments, has:	
ACHIEVED / NOT ACHIEVED (Please delete as appl	ropriate) the expected level of
DEPENDENT	
Signature of Practice Assessor:	
Date:	
Student Statement	
I (w	rite name in capital letters)
have received feedback on my performance and have	e had the opportunity to reflect
and discuss this with the Practice Assessor. Please w	rite comments below:
Student signature:	Date:

LEVEL 1: PLE 2										
Studer	t Name and	ID								
Module	Name									
Programme and cohort										
Field of Practice										
Practice learning environment										
Week No	Week beginning	М	Т	W	Т	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12.5	12.5	12.5	DO	DO	37.5	S. Nurse
1										
2										
3										
								-		
				Total number of hours weeks =hrs						
•										
See section 1.7.1 for maximum hours worked per week										
Key : DO=Day Off C=Compassionate leave			AL = Annual Leave S=Sick							
			,							
Date St			Stude	dent Signature:				Practice Supervisor Signature:		

ATTENDANCE RECORD

PRE-PRACTICE LEARNING ACTIVITIES LEVEL 1: PLE 3 PRACTICE LEARNING EXPERIENCE DETAILS Student Name: Cohort: Student ID: Level: **Practice Learning** Start date: **Environment:** Finish date: Telephone Number: PLE Type: Name of PEF/CHEF: Nominated Practice Supervisor Name: Nominated Practice Assessor Name: Nominated Academic Assessor/Practice Tutor Name: Additional Nominated Academic Assessor/Practice Tutor Name (if required): Prior to the commencement of each PLE, the student should: 15. Make contact with the practice learning environment and ascertain the shift patterns in operation, the name of your designated practice supervisor/ assessor and if appropriate, arrange a pre-practice experience visit. 16. Read the appropriate PLE profile, which can be accessed via electronic platforms. 17. Briefly summarise what the PLE does:

	18. From the Learning Opportunities outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
	19. Considering the service user group that attend the practice learning experience, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these.
	 From your search, identify two key resources on the topic and list below (using appropriate reference style)
	 In the space below provide a brief summary of these two resources and outline any best practice recommendations in relation to these
	Resource 1-
	Resource 2-
1	Condition/situation:
	Condition/situation.

from your theory modu environment. Please r	rou are about to enter, identifices that will support your lead note your thoughts below:	rning within this care			
procedures listed in Ar HCSW role. Discuss th	hat you are about to enter, ice inexe A and B that you curre sees with your practice superse environment. Please note	ently undertake in your relation to your your thoughts below:			
activities have been completed by the student					
Date/	Student Signature:	Practice Supervisor Signature:			

ORIENTATION & PRELIMINARY MEETING

LEVEL 1: PLE 3

In accordance with the *NHS Education for Scotland Quality Standards for Practice Placements*, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	Please initial when complete
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident/incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice	
assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and final assessment	

LEARNING DEVELOPMENT PLAN

LLANNING DEVELOPMENT FLAN						
LEVEL 1: PLE 3						
	to summarise the main points student and discussion arour					
Please identify skills and procedures that could be achieved within area:						
Date	Student Signature:	Practice Supervisor Signature:				
/						

Final:

Interim:

Agreed date for next meetings

INTERIM FEEDBACK MEETING

LEVEL 1: PLE 3

Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments):
Platform 1: Being an accountable professional
Platform 2: Promoting health and preventing ill health
Platform 3: Assessing needs and planning care
Platform 4: Providing and evaluating care
Triationin 4. Froviding and evaluating date
Platform 5: Leading and managing nursing care and working in teams

Platform 6: Improving sa	fety and quality of care		
Platform 7: Coordinating	care		
Skills and Procedures:			
Student feedback:			
Have any issues been re and/or academic assess	ferred to the practice or?	Yes	No
Development Support Pl	an (see Section 3)	Yes	No
Date/	Student Signature:	Practice Supervisor Signature:	
		Practice Assessor Signature (if required):	
		Academic Assessor/Practice Tutor Signature (if required):	

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4) LEVEL1: PLE 3

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:

You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

want to, this will not affect.	your ruture t	care or treat			
Please tick if you are: The patient/service user Carer/Relative					
How happy were you with the way the student nurse	Very happy	Нарру	I'm not sure	Unhappy	Very unhappy
cared for you?					
listened to your needs?					
understood the way you felt?					
talked to you?					
showed you respect?					
What did the student nurse do well?					
What could the student nurse have done differently?					
Date/	Student	Signature:		ctice Supervi nature:	isor

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK LEVEL 1: PLE 3 Please note any other forms of service user/carer feedback (e.g. cards, letters, emails). Please ensure anonymity is maintained Use the box below to record your thoughts and feelings on all service user/carer feedback received: Date Student Signature: Practice Supervisor Signature:

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES				
LEVEL 1: PLE 3				
Student Name:	STUDENT ID:			
	Cohort:			
Name of Placement:	Practice Supervisor:			
Name and Location of Organisation/Pro	fessional Visited:			
Individual overseeing student's opportustudent performance and what learning has				
Print Name:	Sign:			
Date:				
Student reflection - please reflect on what you have learned?				
Date:				
Student signature:				

ADDITIONAL NOTES LEVEL 1: PLE 3 Date Time Signature Detail Student, Practice Supervisors, Practice Assessors, Academic Assessors/Practice Tutors can add notes to this page

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR LEVEL 1: PLE 3 Student Name: STUDENT ID: Cohort: The minimum level of performance for this part of the programme is **DEPENDENT**. This means that the student nurse requires continuous or frequent support from the practice supervisor/assessor but is developing confidence through guided participation in care. Please comment on the Platforms below: Platform 1: Being an accountable professional Platform 2: Promoting health and preventing ill health Platform 3: Assessing needs and planning care

Platform 4: Providing and evaluating care
Flationii 4. Floviding and evaluating care
Platform 5: Leading and managing nursing care and working in teams
Platform 6: Improving safety and quality of care
, , , ,
Dietferme 7. Oceandination care
Platform 7: Coordinating care

Please comment on progress towards safely demonstrating the skills and procedures in Annexe A and B. Identify aspects for the student to focus on in future PLEs.				
Date/	Student Signature		Practice Assessor's Signature:	
			Academic Assessor/Practice Tutor Signature (if required):	
Practice Assessor PLE	1 Overall Summa	tive Asses	sment Comments	
Overall result for this PLE PASS / FAIL				
Name of Practice Asses				
Signature of Practice As	sessor:		Б.	
Designation:			Date:	

Practice Assessor Confirmatory Statement	
I confirm that: Student Nurse (print full name)	
following a p	period of hours of
attendance at placement (please refer to attendance re	ecord), and through objective
evidence-based assessments, has:	
ACHIEVED / NOT ACHIEVED (Please delete as appro	opriate) the expected level of
DEPENDENT	. , .
Signature of Practice Assessor:	
Date:	
Student Statement	
I (wr	ite name in capital letters)
have received feedback on my performance and have	had the opportunity to reflect
and discuss this with the Practice Assessor. Please wr	rite comments below:
Student signature:	Date:
Student Signature.	Dale.

LEVEL 1: PLE 3										
Studen	t Name and	ID								
Module	Name									
Progra	mme and co	hort								
Field o	f Practice									
Practic	e learning e	nvironr	nent							
Week No	Week beginning	M	Т	W	Т	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12.5	12.5	12.5	DO	DO	37.5	S. Nurse
1										
2										
3										
					Tot	al num	ber of eks =			
	tion 1.7.1 f	or max	imum	hours		-				
_	O=Day Off					nnual L	eave			
C=Compassionate leave			S=Sic				sent (no			
Date/_				Stude	ent Sigi	nature:			actice S gnature:	upervisor

ATTENDANCE RECORD

CONFIRMATION OF COMPLETION - LEVEL 1

Practice Assessor Confirmation of Proficiency

This feedback should be informed by feedback sought from Practice Supervisors and Practice Assessors (see previous pages) and any other relevant people in order to be assured about your decision. Review platform proficiencies section for the Level to ensure all have been signed as achieved.

Practice Assessor: Confirmation of Achien END OF LEVEL 1:		tforms
Ple	ease initial the re	levant column
	Achieved	Not achieved
Platform 1: Being an accountable professional		
Platform 2: Promoting health and preventing ill-health		
Platform 3: Assessing needs and planning care		
Platform 4: Providing and evaluating care		
Platform 5: Leading and managing nursing care and working in teams		
Platform 6: Improving safety and quality of care		
Platform 7: Coordinating care		

Practice Assessor: Comment on areas of development for safe demonstration of skills and procedures (Annexes A & B)

Practice Assessor Confirmatory States	ment – END OF LEVEL 1		
I confirm that in partnership with the nominate Student Nurse (print name)	inated Academic Assessor/Practice Tutor,		
Ctadent rtailed (print maine)	has ACHIEVED/NOT		
ACHIEVED (please delete as appropriate			
DEPENDENT level 1 of the programme a			
RECOMMEND (please delete as appropr	riate) progression to LEVEL 2 .		
Signature of Practice Assessor:			
Date:			
Academic Assessor/Practice Tutor Co END OF LEVEL 1	ntirmatory Statement (HEI use only) –		
I confirm that in partnership with the nomi	inated Practice Assessor, Student Nurse		
(print name)	has		
ACHIEVED/NOT ACHIEVED (please del	ete as appropriate) all platforms (and		
proficiencies) at the DEPENDENT level for			
RECOMMEND/DO NOT RECOMMEND (please delete as appropriate) progression			
to LEVEL 2.			
Comments:			
Signature of Academic Assessor/Practice	Tutor:		
Date:			
OU USE ONLY			
Number of hours for Level 1			
Hours carried forward to Level 2			
Retrieval programme required?	YES / NO (delete as appropriate)		

LEVEL 2 (Yellow pages) Practice Learning Experiences

Practice Learning Experience (PLE) 4

Practice Learning Experience (PLE) 5

Practice Learning Experience (PLE) 6

Developing Nursing practice KYN211

LEVEL 2 PLE

PRACTICE LEARNING EXPERIENCE

Informat	tion for Students
1.	Please ensure you only complete the YELLOW pages within the PAD during Level 2 of the programme
2.	Please contact your PLE prior to your start date to confirm who your nominated practice supervisor is and to confirm your shift pattern.
3.	Please note that it is expected that your working hours reflect the range of hours expected of registered nurses (NMC, 2018d). This includes working weekends and night shifts; please refer to your Programme Handbook for more details.
4.	Please ensure that you liaise with your nominated practice supervisor to secure dates for your interim review of progress and your final assessment. This should take place during your initial discussions with your practice supervisor.
	Please check with your practice supervisor who needs to attend the interim and final assessments.
	Please arrange to have an initial meeting with your academic assessor/practice tutor.
5.	Please note the expected clinical hours to be achieved whilst within this PLE and ensure that your shift pattern will enable you to achieve these hours.
6.	Please refer to the skills and procedures in Annexe A and B and discuss with your practice supervisor to identify the skills that can be safely demonstrated within the PLE.

MODULE LEARNING OUTCOMES

LEVEL 2

Module Summary

This module is a practice-based module at level 2. Students undertake 770 practice hours and 85 hours for tuition and assessment over 33/34 weeks. Students will build upon practice skills and knowledge required at Level 1.

The module will be made up of five learning guides and will be shaped by the following topics: leadership, management, critical thinking, wider contexts of health care such as policy, legislation and politics, along with pharmacology.

Alongside KYN210, this module serves to build on Level 1 learning. Therefore, it is a platform for increasing knowledge, understanding and skills across health and social care relating to all four fields of nursing, and provides opportunities for students to develop deeper insights to the field of practice relevant to their workplace as they progress towards preparation for registered practice.

Module learning outcomes:

Knowledge and Understanding

When you complete your studies for this module, you will have knowledge and understanding of:

KU1 How evidence-based practice supports your learning and decision-making processes for practice

KU2 How healthcare theory, concepts, models and frameworks underpin personal and organizational leadership

KU3 The principles and methodologies of improvement science and how these can be used to affect change in practice

KU4 The principles of safe and effective administration and optimisation of medicines in accordance with local and national legislation, policies and professional issues that govern medicine management

KU5 The practitioner's personal and professional responsibility in recognising and escalating safeguarding concerns within national and local legislative and policy frameworks.

Cognitive Skills

On completion of this module you will have developed the following cognitive skills:

CS1 Utilise models of reflection to analyse practice and person-centred care – both your own and that of other practitioners

CS2 Evaluate and challenge evidence, in order to understand decision-making processes of self and others and apply these to the delivery of integrated services

CS3 Within the context of interprofessional working and integrated service delivery, evaluate methods that facilitate quality improvement and explore strategies utilised to deliver safe and effective care

CS4 Analyse multi-agency values which underpin safeguarding practice across the life course CS5 Examine own and others' leadership styles in relation to integrated care and its delivery.

Key Skills

When you complete this module you will be able to:

KS1 Effectively use models of reflection to support individual and team development, leadership and interpersonal skills which enable you to respectfully challenge (the practice of others) and be challenged

KS2 Demonstrate effective communication skills and emotional intelligence to manage professional relationships with service users, their families and colleagues KS3 Utilise digital literacy competently within nursing and healthcare.

Practical and/or Professional Skills

When you complete this module you will be able to:

PPS1 Demonstrate proficiencies, skills and values that underpin critical, person-centred, evidence-based nursing interventions commensurate with your field of practice and stage of learning

PPS2 Explore your professional role and responsibilities within a variety of healthcare experiences to demonstrate your understanding of individual and shared values that underpin your professional practice and professional identity

PPS3 Demonstrate your increasing ability to safely and effectively deliver care, demonstrating appropriate prioritisation, delegation and assignment of care to others involved in providing care

PPS4 Apply and analyse your learning to inform ways of working and acquire new competencies to increase responsibility, problem solving and decision-making skills PPS5 Demonstrate a developing awareness of how to ensure the safety of children, young people, adults, families and carers, raising concerns where appropriate, using national and local legislative and policy frameworks.

PRE-PRACTICE LEARNING ACTIVITIES LEVEL 2: PLE 4 PRACTICE LEARNING EXPERIENCE DETAILS Student Name: Cohort: Student ID: Level: **Practice Learning** Start date: **Environment:** Finish date: Telephone Number: PLE Type: Name of PEF/CHEF: Nominated Practice Supervisor Name: Nominated Practice Assessor Name: Nominated Academic Assessor/Practice Tutor Name: Additional Nominated Academic Assessor/Practice Tutor Name (if required): Prior to the commencement of each practice learning environment, the student should: 1. Make contact with the practice learning environment and ascertain the shift patterns in operation, the name of your designated practice supervisor/assessor and if appropriate, arrange a pre-practice experience visit. 2. Read the appropriate practice learning environment profile, which can be accessed on the student portal/via InPlace/QMPLE. 3. Briefly summarise what the practice learning environment does:

4. From the <i>Learning Opportunities</i> outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
5. Considering the service user group that attend the PLE, select one
condition/situation that those service users are likely to present with and undertake a literature search in relation to these.
 From your search, identify two key resources on the topic and list below (using appropriate reference style).
o In the space below provide a brief summary of these two resources and outline any best practice recommendations in relation to these. Resource 1 -
nesource i -
Resource 2 -
Condition/oity ation
Condition/situation:

from your theory mo	E that you are about to enter, odules that would support you e note your thoughts below:			
	LE that you are about to enter ous PLEs and clinical skills.ne			
learning within this	care environment. In addition	n, identify any skills or		
procedures, listed in Annexe A and B, that you currently undertake in your HCSW role. Discuss these with your practice supervisor in relation to your				
learning within this care environment. Please note your thoughts below:				
Practice Supervisor AND/OR Practice Assessor – please sign to confirm that the pre-practice learning activities have been completed by the student				
Date	Student Signature:	Practice Supervisor		
/		Signature:		
		Practice Assessor Signature:		

ORIENTATION & PRELIMINARY MEETING

LEVEL 2: PLE 4

In accordance with the *NHS Education for Scotland (2008) Quality Standards for Practice Placements*, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	Please initial when complete
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident/incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice	
assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and	
final assessment	

LEARNING DEVELOPMENT PLAN				
LEVEL 2: PLE 4				
Please use the space below to summarise the main points arising from the preliminary meeting with the student and discussion around the student's learning development plan.				
Please review skills achieved to date and identify skills and procedures that could be achieved within area:				
Practice Supervisor AND/OR Practice Assessor – please sign to confirm that the orientation and preliminary meeting learning activities have been completed by the student				
Date	Student Signature:	Practice Supervisor Signature:		
		Practice Assessor Signature:		
Agreed date for next meetings	Interim:	Final:		

INTERIM FEEDBACK MEETING

LEVEL 2: PLE 4

Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments):
Platform 1: Being an accountable professional
Platform 2: Promoting health and preventing ill health
Platform 3: Assessing needs and planning care
Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams

Platform 6: Improving sa	afety and quality of care			
Platform 7: Coordinating care				
Skills and Procedures:				
Student feedback:				
Have any issues been re Assessor AND/OR Acad Tutor?	eferred to the Practice emic Assessor/Practice	Yes	No	
Development Support P	lan (see Section 3)	Yes	No	
Date/	Student Signature:	Practice Supe Signature:	ervisor	
		Practice Asse Signature (if I		
		Academic Assessor/Pra Signature (if I		

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4) LEVEL 2: PLE 4

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:

You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

want to, this will not affect your future care or treatment.					
Please tick if you are:				Carer/Relative	e 🔲
How happy were you with the way the student nurse	Very happy	Нарру	I'm no sure		Very unhappy
cared for you?					
listened to your needs?					
understood the way you felt?					
talked to you?					
showed you respect?					
What did the student nurse do well?					
What could the student nurse have done differently?					
Date/	Student S	ignature:		Practice Superv Signature:	/isor

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK LEVEL 2: PLE 4 Please note any other forms of service user/carer feedback (e.g. cards, letters, emails). Please ensure anonymity is maintained. Use the box below to record your thoughts and feelings on all service user/carer feedback received: Student Signature: Practice Supervisor Date Signature: ____/____

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES				
LEVEL 2: PLE 4				
Student Name: STUDENT ID:				
	Cohort:			
Name of Placement:	Practice Supervisor:			
Name and Location of Organisation/Pro				
Individual overseeing student's opportunity comments – Please comment on student performance and what has been learned				
Print Name:	Sign:			
Date:				
Student reflection - please reflect on what you have learned:				
Date:				
Student signature:				

ADDITIONAL NOTES				
LEVEL 2: PLE 4				
Time	Detail	Signature		
	Student, Practice Supervisors, Practice Assessors, Academic Assessors can add notes to this page			
	Time	Time Detail Student, Practice Supervisors, Practice Assessors, Academic Assessors can add notes		

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR LEVEL 2: PLE 4 Student Name: STUDENT ID: Cohort: The minimum level of performance for this level of the programme is **DEVELOPING INDEPENDENCE**. This means that the student nurse will be delivering safe and effective care through guided participation in care under increasingly indirect supervision from you in your role as practice supervisor/assessor. Please comment on the Platforms below: Platform 1: Being an accountable professional Platform 2: Promoting health and preventing ill health Platform 3: Assessing needs and planning care

Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams
Platform 6: Improving safety and quality of care
Platform 7: Coordinating care

Please comment on progress towards safely demonstrating the skills and procedures in Annexe A and B. Identify aspects for the student to focus on in future PLEs.		
Date/	Student Signature:	Practice Assessor Signature:
		Academic Assessor/Practice Tutor Signature (if required):
Practice Assessor Overall	Formative Assessment C	omments
Name of Practice Assessor	,	
Signature of Practice Assess	sor:	
Designation:		Date:

Practice Assessor Confirmatory Statement			
I confirm that: student nurse (print full name)			
· · · · · · · · · · · · · · · · · · ·			
following a	•		
attendance at placement (please refer to attendance r	record), and through objective		
evidence-based assessments, has:			
ACHIEVED / NOT ACHIEVED (Please delete as appr	ropriate) the expected level of		
DEVELOPING INDEPENDENCE			
DEVELOTING INDELENDENCE			
Signature of Practice Assessor:			
Date:			
Date.			
Student Statement			
I (w	rite name in capital letters)		
have received feedback on my performance and have	e had the opportunity to reflect		
and discuss this with the Practice Assessor. Please w			
Student signature:	Date:		

ATTENDANCE RECORD										
LEVEL 2: PLE 4										
Studer	nt Name and	ID								
Module Name										
Programme and level										
Field c	Field of Practice									
Practice learning environment										
Week No	Week beginning	М	Т	W	Т	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	0	12.5	12. 5	12.5	DO	DO	37.5	S. Nurse
1										
2										
3										
Total number of hours weeks =hrs										
See section 1.7.1 for maximum hours worked per week Key: DO=Day Off AL=Annual leave										
C=Compassionate leave					S=Sick A=Absent (not sick)					
Date Student					Signature: Practice Superviso Signature:			pervisor		

PRE-PRACTICE LEARNING ACTIVITIES **LEVEL 2: PLE 5** PRACTICE LEARNING EXPERIENCE DETAILS Student Name: Cohort: Student ID: Level: **Practice Learning** Start date: **Environment:** Finish date: Telephone Number: PLE Type: Name of PEF/CHEF: Nominated Practice Supervisor Name: Nominated Practice Assessor Name: Nominated Academic Assessor/Practice Tutor Name: Additional nominated Academic Assessor/Practice Tutor Name: (if required) Prior to the commencement of each practice learning environment, the student should: 8. Make contact with the practice learning environment and ascertain the shift patterns in operation, the name of your designated practice supervisor/assessor and if appropriate, arrange a pre-practice experience visit. 9. Read the appropriate practice learning environment profile, which can be accessed on the student portal/via InPlace/QMPLE. 10. Briefly summarise what the practice learning environment does:

11. From the <i>Learning Opportunities</i> outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
12. Considering the service user group that attend the PLE, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these.
 From your search, identify two key resources on the topic and list below (using appropriate reference style)
 In the space below provide a brief summary of these two resources and outline any best practice recommendations in relation to these Resource 1 –
Nesource 1 –
Resource 2 –
Condition / situation

environment. Please	Definition of the state of the							
14. In relation to the PLE that you are about to enter, identify any related learning from previous PLE's and clinical skills.net that would support your learning within this care environment. In addition, identify any skills or procedures, listed in Annexe A and B, that you currently undertake in your HCSW role. Discuss these with your practice supervisor in relation to your learning within this care environment. Please note your thoughts below:								
Practice Supervisor AND/OR Practice Assessor – please sign to confirm that the pre-practice learning activities have been completed by the student								
Date/	Student Signature:	Practice Supervisor Signature:						
		Practice Assessor Signature:						

ORIENTATION & PRELIMINARY MEETING

LEVEL 2: PLE 5

In accordance with the *NHS Education for Scotland (2008) Quality Standards for Practice Placements*, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	Please initial when complete
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident/incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice	
assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and	
final assessment	

LE	EARNING DEVELOPMENT PL	AN			
	LEVEL 2: PLE 5				
Please use the space below to summarise the main points arising from the preliminary meeting with the student and discussion around the students learning development plan.					
Please review skills achieved to date and identify skills and procedures that could be achieved within area:					
	OR Practice Assessor – plea ninary meeting learning activ t				
Date/	Student Signature:	Practice Supervisor Signature:			
		Practice Assessor Signature:			
Agreed date for next	Interim:	Final:			

meetings

INTERIM FEEDBACK MEETING

LEVEL 2: PLE 5

Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments):
Platform 1: Being an accountable professional
Platform 2: Promoting health and preventing ill health
Platform 3: Assessing needs and planning care
Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams

Platform 6: Improving sa	afety and quality of care		
Platform 7: Coordinating	g care		
Skills and Procedures:			
Student feedback:			
Have any issues been re Assessor and/or Acader Tutor?		Yes	No
Development Support P	lan (see Section 3)	Yes	No
Date / /	Student Signature:	Practice S Signature:	
		Practice A Signature	ssessor (if required):
			Practice Tutor (if required):

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4) LEVEL 2: PLE 5

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:

You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

want to, this will not affect your future care or treatment.						
Please tick if you are:	e tick if you are: The patient/service user Carer/Relative					
How happy were you with the way the student nurse	Very happy	Нарру	I'm no sure		Very unhappy	
cared for you?						
listened to your needs?						
understood the way you felt?						
talked to you?						
showed you respect?						
What did the student nurse do well?						
What could the student n	iurse have	done differ	ently?			
Date/	Student S	Signature:		Practice Super Signature:	rvisor	

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK LEVEL 2: PLE 5 Please note any other forms of service user/carer feedback (e.g. cards, letters, emails). Please ensure anonymity is maintained. Use the box below to record your thoughts and feelings on all service user/carer feedback received: Practice Supervisor Date Student Signature: Signature: ____/____

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES					
LEVEL	2: PLE 5				
Student Name:	STUDENT ID:				
	Cohort:				
Name of Placement:	Practice Supervisor:				
Name and Location of Organisation/Pro					
Individual overseeing student's opportustudent performance and what has been le					
Print Name:	Sign:				
Date:					
Student reflection - please reflect on what you have learned:					
Date:					
Student signature:					

		ADDITIONAL NOTES	
		LEVEL 2: PLE 5	
Date	Time	Detail	Signature
		Student, Practice Supervisors, Practice Assessors, Academic Assessors/Practice Tutors can add notes to this page	

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR LEVEL 2: PLE 5 Student Name: STUDENT ID: Cohort: The minimum level of performance for this level of the programme is **DEVELOPING INDEPENDENCE**. This means that the student nurse will be delivering safe and effective care through guided participation in care under increasingly indirect supervision from you in your role as practice supervisor/assessor. Please comment on the Platforms below: Platform 1: Being an accountable professional Platform 2: Promoting health and preventing ill health Platform 3: Assessing needs and planning care

Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams
Platform 6: Improving safety and quality of care
Platform 7: Coordinating care

Please comment on progreprocedures in Annexe A a future PLEs.	ess towards safely demon	istrating the skills and the student to focus on in
Date/	Student Signature:	Practice Assessor's Signature:
		Academic Assessor/Practice Tutor Signature (if required)
Practice Assessor Overall	Formative Assessment C	omments
Name of Practice Assessor	·	
Signature of Practice Asses	sor:	5 .
Designation:		Date:

Practice Assessor Confirmatory Statement			
I confirm that: student nurse (print full name)			
	poriod of hours of		
following a			
attendance at placement (please refer to attendance i	record), and through objective		
evidence-based assessments, has:			
ACHIEVED / NOT ACHIEVED (Please delete as appr	ropriate) the expected level of		
DEVELOPING INDEPENDENCE			
Signature of Practice Assessor:			
Date:			
Student Statement			
I (w	rite name in capital letters)		
have received feedback on my performance and have	e had the opportunity to reflect		
and discuss this with the Practice Assessor. Please write comments below:			
and discuss the with the Fractice Accesser Fraction			
Student signature:	Date:		

ATTENDANCE RECORD										
LEVEL 2: PLE 5										
Studer	Student Name and ID									
Module	Name									
Progra	mme and le	vel								
Field o	f Practice									
Practic	e learning e	nvironr	nent	:						
Week No	Week beginning	М	Т	W	Т	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12.5	12. 5	12.5	DO	DO	37.5	S. Nurse
1										
2										
3										
				,	То	tal nun	nber of			
See sec	ction 1.7.1 fe	or may	imu	m hours	work	ed ner	week			
	O=Day Off	or max		iii iioare		Annual				
-	C=Compassi	onate l	eave	Э	S=Si	ck		A=Ab	sent (no	ot sick)
Date Student Signature: Practice Supervisor Signature:					pervisor					

PRE-PRACTICE LEARNING ACTIVITIES LEVEL 2: PLE 6 PRACTICE LEARNING EXPERIENCE DETAILS Student Name: Cohort: Student ID: Level: **Practice Learning** Start date: **Environment:** Finish date: Telephone Number: PLE Type: Name of PEF/CHEF: Nominated Practice Supervisor Name: Nominated Practice Assessor Name: Nominated Academic Assessor/Practice Tutor Name: Additional Academic Assessor/Practice Tutor Name (if required): 15. Make contact with the practice learning environment and ascertain the shift

Prior to the commencement of each practice learning environment, the student should:

- patterns in operation, the name of your designated practice supervisor/assessor and if appropriate, arrange a pre-practice experience visit.
- 16. Read the appropriate practice learning environment profile, which can be accessed on the student portal/via InPlace/QMPLE.
- 17. Briefly summarise what the practice learning environment does:

18. From the <i>Learning Opportunities</i> outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
19. Considering the service user group that attend the PLE, select one
condition/situation that those service users are likely to present with and undertake a literature search in relation to these. o From your search, identify two key resources on the topic and list
below (using appropriate reference style) o In the space below provide a brief summary of these two resources and outline any best practice recommendations in relation to these
Resource 1 —
Resource 2 –
Condition / situation

from your theory mo	E that you are about to enter, dules that would support you e note your thoughts below:	
learning from previ learning within this	E that you are about to enter ous PLEs and clinical skills.ne care environment. In addition	et that would support your , identify any skills or
	n Annexe A and B, that you c ss these with your practice su	
	care environment. Please no	
	D/OR Practice Assessor – p g activities have been comp	
Date	Student Signature:	Practice Supervisor
//		Signature:
		Practice Assessor Signature:

ORIENTATION & PRELIMINARY MEETING

LEVEL 2: PLE 6

In accordance with the *NHS Education for Scotland (2008) Quality Standards for Practice Placements*, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	Please initial when complete
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident/incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice	
assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and	
final assessment	

		A N I				
LEARNING DEVELOPMENT PLAN						
	LEVEL 2: PLE 6					
	w to summarise the main points e student and discussion arour					
Please review skills achieved to date and identify skills and procedures that could be achieved within area: Practice Supervisor AND/OR Practice Assessor – please sign to confirm that the orientation and preliminary meeting learning activities have been						
completed by the student	t					
Date/	Student Signature:	Practice Supervisor Signature:				
		Practice Assessor Signature:				
Agreed date for next	Interim:	Final:				

meetings

INTERIM FEEDBACK MEETING

LEVEL 2: PLE 6

Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments):
Platform 1: Being an accountable professional
Platform 2: Promoting health and preventing ill health
Flationii 2. Fromoting health and preventing in health
Platform 3: Assessing needs and planning care
Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams

Platform 6: Improving sa	afety and quality of care		
Platform 7: Coordinating	g care		
Skills and Procedures:			
Student feedback:			
Have any issues been re Assessor and/or Acade		Yes	No
Development Support P	lan (see Section 3)	Yes	No
Date/	Student Signature:	Practice Supe Assessor Sign	
		Academic Assessor/Pra Signature (if r	

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4) LEVEL 2: PLE 6

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:

You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

want to, this will not affect your future care or treatment.							
Please tick if you are:	The patient/service user Carer/Relative						
How happy were you with the way the student nurse	Very happy	Нарру	I'm no sure		Very unhappy		
cared for you?							
listened to your needs?							
understood the way you felt?							
talked to you?							
showed you respect?							
What did the student nurse do well?							
What could the student nurse have done differently?							
Date/	Student S	Signature:		Practice Super Signature:	rvisor		

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK LEVEL 2: PLE 6 Please note any other forms of service user/carer feedback (e.g. cards, letters, emails). Please ensure anonymity is maintained. Use the box below to record your thoughts and feelings on all service user/carer feedback received: Student Signature: Practice Supervisor Date Signature: ____/____

FEEDBACK FROM ADDITIONA	L LEARNING OPPORTUNITIES					
LEVEL 2: PLE 6						
Student Name:	STUDENT ID:					
	Cohort:					
Name of Placement:	Practice Supervisor:					
Name and Location of Organisation/Pro	fessional Visited:					
	Individual overseeing student's opportunity comments – Please comment on student performance and what has been learned					
Print Name:	Sign:					
Date:						
Student reflection - please reflect on what you have learned:						
Date:						
Student signature:						

ADDITIONAL NOTES								
LEVEL 2: PLE 6								
Date	Time	Detail	Signature					
Date		Student, Practice Supervisors, Practice Assessors, Academic Assessors/Practice Tutors can add notes to this page	Oignature					

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR **LEVEL 2: PLE 6** Student Name: STUDENT ID: Cohort: The minimum level of performance for this level of the programme is **DEVELOPING INDEPENDENCE**. This means that the student nurse will be delivering safe and effective care through guided participation in care under increasingly indirect supervision from you in your role as practice supervisor/assessor. Please comment on the Platforms below: Platform 1: Being an accountable professional Platform 2: Promoting health and preventing ill health Platform 3: Assessing needs and planning care

Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams
Platform 6: Improving safety and quality of care
Platform 7: Coordinating care

Please comment on progreprocedures in Annexe A a future PLEs.		nstrating the skills and r the student to focus on in	
Date/	Student Signature:	Practice Assessor's Signature:	
	Academic Assessor/Practice Tutor Signature (if required):		
Practice Assessor Overall	Summative Assessment	t Comments	
Overall result for this PLE		PASS / FAIL	
Name of Practice Assessor			
Signature of Practice Asses	sor:	1	
Designation:		Date:	

Practice Assessor Confirmatory Statement						
I confirm that: student nurse (print full name)						
	neriod of hours of					
following a period of hours of attendance at placement (please refer to attendance record), and through objective						
	ecordy, and infought objective					
evidence-based assessments, has:						
ACHIEVED / NOT ACHIEVED (Please delete as appr	ropriate) the expected level of					
DEVELOPING INDEPENDENCE						
Signature of Practice Assessor:						
Date:						
Student Statement						
I (wi	rite name in capital letters)					
have received feedback on my performance and have had the opportunity to reflect						
and discuss this with the Practice Assessor. Please write comments below:						
Student signature:	Date:					
3						

ATTENDANCE RECORD										
LEVEL 2: PLE 6										
Student Name and ID										
Module	Name									
Programme and level										
Field o	f Practice									
Practic	e learning e	nvironr	nent	<u> </u>						
Week No	Week beginning	М	Т	W	Т	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12.5	12. 5	12.5	DO	DO	37.5	S. Nurse
1									0110	
2										
3										
			'		То	tal nun	nber of			
See sec	ction 1.7.1 fo	or may	imu	ım hours	work	ed ner	week			
	O=Day Off	oi iiiax		iiii iiours		Annual				
-	=Compassi	onate l	eave	Э	S=Si	ck		A=Ab	sent (no	ot sick)
Date/_										

CONFIRMATION OF COMPLETION - LEVEL 2

Practice Assessor Confirmation of Proficiency

This feedback should be informed by feedback sought from practice supervisors and assessors (see previous pages) and any other relevant people in order to be assured about your decision. Review platform proficiencies section for the LEVEL to ensure all have been signed as achieved.

Practice Assessor: Confirmation of Achievements of Platforms END OF LEVEL 2:				
Plea	ease initial the relevant column			
	Achieved	Not achieved		
Platform 1: Being an accountable professional				
Platform 2: Promoting health and preventing ill-health				
Platform 3: Assessing needs and planning care				
Platform 4: Providing and evaluating care				
Platform 5: Leading and managing nursing care and working in teams				
Platform 6: Improving safety and quality of care				
Platform 7: Coordinating care				

Practice Assessor: Comment on areas of development for safe demonstration of skills and procedures (Annexes A & B)						

Practice Assessor Confirmatory Statement – END OF LEVEL 2						
confirm that in partnership with the nominated Academic Assessor/Practice Tutor, student nurse (print name)						
(режения)	has ACHIEVED/NOT					
ACHIEVED (please delete as appropriate						
DEVELOPING INDEPENDENCE level fo						
	(please delete as appropriate) progression					
to LEVEL 3.						
Signature of Practice Assessor:						
Date:						
Buto.						
Academic Assessor/Practice Tutor Co END OF LEVEL 2	nfirmatory Statement (OU use only) –					
I confirm that in partnership with the nomi	inated Practice Assessor, student nurse					
(print name)	has					
ACHIEVED/NOT ACHIEVED (please del	ete as appropriate) all platforms (and					
proficiencies) at the DEVELOPING INDE	PENDENCE level for LEVEL 2 of the					
programme and, RECOMMEND/DO NOT	RECOMMEND (please delete as					
appropriate) progression to LEVEL 3 .						
Comments:						
Signature of Academic Assessor/Practice	e Tutor:					
Date:						
Designation: Date:						
OU USE ONLY						
Number of hours for LEVEL 2						
Hours carried forward to LEVEL 3						
Retrieval programme required?	YES / NO (delete as appropriate)					

LEVEL 3 (Green pages)

Practice Learning Experiences (3)

Practice Learning Experience (PLE) 7

Practice Learning Experience (PLE) 8

Practice Learning Experience (PLE) 9

Becoming an autonomous practitioner KYN326/327/328/329 *

LEVEL 3 PLE

PRACTICE LEARNING EXPERIENCE

Informat	tion for Students
1.	Please ensure you only complete the GREEN pages within the PAD during Level 3 of the programme
2.	Please contact your PLE prior to your start date to confirm who your nominated practice supervisor is and to confirm your shift pattern.
3.	Please note that it is expected that your working hours reflects the range of hours expected of registered nurses (NMC, 2018d). This includes working weekends and night shifts; please refer to your Programme Handbook for more details.
4.	Please ensure that you liaise with your nominated practice supervisor to secure dates for your interim review of progress and your final assessment. This should take place during your initial discussions with your practice supervisor.
	Please check with your practice supervisor who needs to attend the interim and final assessments.
	Please arrange to have an initial meeting with your academic assessor/practice tutor.
5.	Please note the expected clinical hours to be achieved whilst within this PLE and ensure that your shift pattern will enable you to achieve these hours.
6.	Please refer to the skills and procedures in Annexe A and B and discuss with your practice supervisor to identify the skills that can be safely demonstrated within the PLE.

^{*}Delete as appropriate

MODULE LEARNING OUTCOMES

LEVEL 3

Module Summary

Alongside K325, the module K236/7/8/9 serves to build on Level 2 learning. Therefore, it is a platform for increasing knowledge, understanding and skills across health and social care relating to all four fields of nursing, and provides opportunities for students to develop deeper insights to the field of practice relevant to their workplace as they progress towards preparation for registered practice. Content will be delivered through four Learning Guides alongside practice learning hours running throughout the 33 weeks. This module is the final module for students to undertake practice learning hours and achieve the required standard in practice for registration with the NMC. As such, 770 hours will be dedicated to practice hours.

Learning Guides will allow the student to develop and hone their skills acquired from previous modules to become independent, critical thinkers in relation to the standard required for registration as a qualified nurse. Learning Guides will therefore allow students to focus on areas such as leadership, management, critical thinking, wider contexts of health care such as policy, legislation and politics, along with pharmacology.

Learning in practice as stated above requires 770 hours (enabling the student to accrue the 2300 hours required by the NMC by the end of the module). There are also 85 theory hours allocated for tuition and assessment.

Module learning outcomes:

Knowledge and Understanding

When you complete your studies for this module, you will have knowledge and understanding of:

KU1 Leadership and the influence of socio-cultural, political, regulatory frameworks on delivering nursing care

KU2 How person-centred care and evidence informed practice can be utilised together to provide enhanced nursing care

Cognitive Skills

On completion of this module you will have developed the following cognitive skills:

CS1 An ability to evaluate the necessary socio-cultural, psychological, biological, cultural, religious, political, ethical, regulatory and governance components that can be drawn upon when planning care

CS2 An ability to appraise the current discussion in nursing care relating to biological, social and psychological approaches to understanding health and illness

CS3 To resolve complex care-related problems which draw upon your understanding of epidemiology, demography and the wider determinants of health

Key Skills

When you complete this module you will be able to:

KS1 Critically appraise your own actions and decisions for nursing care along with those of other professionals

KS2 Formulate biological (including pharmacological), social and psychological care approaches including assessment, planning, decision making and goal setting

KS3 Accurately and effectively communicate your evaluations and analysis of nursing care and practice

KS4 Understand how the quality of nursing care can be evaluated in practice and used to shape future care and service delivery

Practical and/or Professional Skills

When you complete this module you will be able to:

PPS1 Provide person-centred care and evidence informed practice, utilised together to provide enhanced nursing care in a variety of situations

PPS2 Act to professional standards as an accountable practitioner, to act proactively and flexibly to a variety of clinical situations

PPS3 Demonstrate a comprehensive knowledge base to support safe and effective practice including the recognition of and process of raising concerns and referral

PPS4 Demonstrate leadership, including the guidance, support and motivation of others

PRE-PRACTICE LEARNING ACTIVITIES LEVEL 3: PLE 7

LEVEL 3: PLE 7							
PRACTICE LEARNING EXPERIENCE DETAILS							
Student Name:			Cohort:				
Student ID:			Level:				
Practice Learning Environment:			Start date:				
Telephone Number:			Finish date:				
PLE Type:							
Name of PEF/CHEF:							
Nominated Practice	Supervisor Name:						
Nominated Practice Assessor Name:							
Nominated Academic							
Assessor/Practice T	utor Name:						
Additional Nominated Academic							
Assessor/Practice Tutor Name (if							
required):							
Prior to the commencement of each practice learning environment, the student should:							
 Make contact with the PLE and ascertain the shift patterns in operation, the name of your designated practice supervisor/assessor and if appropriate, arrange a pre-practice experience visit. 							
Read the appropriate PLE profile, which can be accessed on the student portal / via InPlace / QMPLE							
3. Briefly summa	rise what the PLE do	oes:					

4. From the Learning Opportunities outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
 5. Considering the service user group that attend the PLE, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these. From your search, identify two key resources on the topic and list below (using appropriate reference style) In the space below provide a brief summary of these two resources and outline any best practice recommendations in relation to these
Resource 1 –
Resource 2 –
Condition / situation

from your theory modu	hat you are about to enter, io les that would support your l note your thoughts below:	
learning from previous learning within this can procedures, listed in a role. Discuss these w	that you are about to enter, s PLEs and clinical skills.net are environment. In addition, Annexe A and B, that you unith your practice supervisor in the supervisor in the supervisor in the supervisor. Please note your the supervisor in the supervisor in the supervisor in the supervisor in the supervisor.	that would support your identify any skills or idertake in your HCSW n relation to your learning oughts below:
the pre-practice learning a	-	
Date/	Student Signature:	Practice Supervisor Signature:
		Practice Assessor Signature:

ORIENTATION & PRELIMINARY MEETING

LEVEL 3: PLE 7

In accordance with the *NHS Education for Scotland Quality Standards for Practice Placements*, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	Please initial when complete
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident/incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice	
assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and final assessment	

LEARNING DEVELOPMENT PLAN
LEVEL 3: PLE 7
Please use the space below to summarise the main points arising from the preliminary meeting with the student and discussion around the student's learning development plan.
Please review skills achieved to date and identify skills and procedures that could be achieved within area:

Practice Supervisor AND/OR Practice Assessor – please sign to confirm that the orientation and preliminary meeting learning activities have been completed by the student

Date/	Student Signature:	Practice Supervisor Signature:
		Practice Assessor Signature:
Agreed date for next meetings	Interim:	Final:

INTERIM FEEDBACK MEETING

LEVEL 3: PLE 7

Practice Supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments):
Platform 1: Being an accountable professional
Platform 2: Promoting health and preventing ill health
Platform 3: Assessing needs and planning care
Distriction 4. Description and exclanation and
Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams
Flationin 5. Leading and managing hursing care and working in teams

Platform 6: Improving safety and quality of care
Platform 7: Coordinating care
Skills and Procedures:
Student feedback:

Have any issues been Assessor and/or Aca Tutor?	Yes	No	
Development Support Plan (see Section 3)		Yes	No
Date/	Student Signature:	Practice Supervisor Signature: Practice Assessor Signature (if required):	
			Practice Tutor (if required):

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4) LEVEL 3: PLE 7

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:

You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

want to, this will not allect your luture care or treatment.					
Please tick if you are: The patient/service user Carer/Relative					
How happy were you with the way the student nurse	Very happy	Happy	I'm not sure	Unhappy	Very unhappy
cared for you?					
listened to your needs?					
understood the way you felt?					
talked to you?					
showed you respect?					
What did the student nurse do well?					
What could the student nurse have done differently?					
Date Student Signature: Practice Supervisor Signature::			pervisor		

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK LEVEL 3: PLE 7 Please note any other forms of service user/carer feedback (eg cards, letters, emails). Please ensure anonymity is maintained. Use the box below to record your thoughts and feelings on all service user/carer feedback received: Date Student Signature: Practice Supervisor Signature:

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES				
LEVEL 3: PLE 7				
Student Name:	STUDENT ID:			
	Cohort:			
Name of Placement:	Practice Supervisor:			
Name and Location of Organisation/Pro				
Individual overseeing student's opportunity comments – Please comment on student performance and what has been learned				
Print Name:	Sign:			
Date:				
Student reflection - please reflect on what you have learned:				
Date:				
Student signature:				

		ADDITIONAL NOTES				
LEVEL 3: PLE 7						
Date	Time	Detail	Signature			
		Student, Practice Supervisors, Practice Assessors, Academic Assessors/Practice Tutors can add notes to this page				

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR LEVEL 3: PLE 7 Student Name: STUDENT ID: Cohort: The minimum level of performance for this LEVEL of the programme is **INDEPENDENT**. This means that the student nurse independently and confidently coordinates care, whilst acknowledging their own limitations, through guided participation in care under indirect supervision from you in your role as practice supervisor/assessor. Please comment on the Platforms below: Platform 1: Being an accountable professional Platform 2: Promoting health and preventing ill health Platform 3: Assessing needs and planning care

Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams
Platform 6: Improving safety and quality of care
riationii o. improving salety and quanty of care
Platform 7: Coordinating care

Please comment on progress towards safely demonstrating the skills and procedures in Annexe A and B. Identify aspects for the student to focus on in future PLEs.					
Date/	Student Signature:	Practice Assessor's Signature:			
		Academic Assessor/Practice Tutor Signature (if required):			
Practice Assessor Overall	Formative Assessment C	comments			
Name of Practice Assessor (print full name)				
Signature of Practice Assess	sor:				
Designation:		Date:			

Practice Assessor Confirmatory Statement					
I confirm that: student nurse (print full name)					
following a period of hours of attendance at placement (please refer to					
attendance record), and through objective evidence-based assessments, has:					
	,				
ACHIEVED / NOT ACHIEVED (Please delete as appr	ropriate) the expected level of				
INDEPENDENT					
Signature of Practice Assessor:					
orginature of Fractioe Assessor.					
Date:					
Student Statement					
Student Statement					
I (w	rite name in capital letters)				
have received feedback on my performance and have	had the opportunity to reflect				
and discuss this with the Practice Assessor. Please w	rite comments below:				
Student signature:	Date:				

ATTENDANCE						RECO	ORD			
	EL 3:	PLE 7								
Studer	nt Name and	ID								
Module	e Name									
Progra	mme and le	vel								
Field o	f Practice									
Practic	e learning e	nvironr	ment							
Week No	Week beginning	М	Т	W	Т	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12	12	12	DO	DO	36	S. Nurse
1										
2										
3										
									<u> </u>	
					10		nber of eeks =			
C			-!·-							
	ction 1.7.1 fo DO=Day Off		kimun	n nours						
C=Compassionate leave				AL=Annual Leave S=Sick A=Absent (not s		ot sick)				
				ent Signature:		Practice Supervisor				
Student				Oigi	ataro.			ature:	C. 11001	

PRE-PRACTICE LEARNING ACTIVITIES

LEVEL 3. PLE 0					
PR	ACTICE LEARNING	EXPERIENC	E DETAILS		
Student Name:			Cohort:		
Student ID:			Level:		
Practice Learning Environment:			Start date: Finish date:		
Telephone Number:					
PLE Type:					
Name of PEF/CHEF	ī:				
Nominated Practice	Supervisor Name:				
Nominated Practice	Assessor Name:				
Nominated Academ	ic				
Assessor/Practice T	utor Name:				
Additional Nominate	ed Academic				
Assessor/Practice T	utor Name (if				
required):					
Prior to the commer should:	cement of each prac	ctice learning e	nvironment, th	e student	
name of your o	with the PLE and aso designated practice s practice experience	supervisor/asse			
 Read the appropriate PLE profile, which can be accessed on the student portal / via InPlace / QMPLE 					
10. Briefly summa	rise what the PLE do	oes:			

you are unfamiliar with and write a short summary.
10. Considering the continuous group that attend the DLE coloct one
12. Considering the service user group that attend the PLE, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these.
 From your search, identify two key resources on the topic and list below (using appropriate reference style) In the space below provide a brief summary of these two resources
and outline any best practice recommendations in relation to these Resource 1 –
Resource 2 –
Condition / situation

from your theory modu environment. Please n	hat you are about to enter, io les that would support your l ote your thoughts below:	learning within this care
learning from previou learning within this ca procedures, listed in a role. Discuss these w	that you are about to enter, is PLE's and clinical skills.neure environment. In addition, Annexe A and B, that you unith your practice supervisor is nament. Please note your thought	t that would support your identify any skills or dertake in your HCSW n relation to your learning oughts below:
Date//		

ORIENTATION & PRELIMINARY MEETING

LEVEL 3: PLE 8

In accordance with the *NHS Education for Scotland Quality Standards for Practice Placements*, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	Please initial when complete
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident/incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice	
assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and	
final assessment	

LEARNING DEVELOPMENT PLAN

LEVEL 3: PLE 8

Please use the space below to summarise the main points arising from the	
preliminary meeting with the student and discussion around the students learning	g
development plan.	

Please review skills achieved to date and identify skills and procedures that could be achieved within area:

Date	Student Signature:	Practice Supervisor:
		•
/		
Agreed date for next	Interim:	Final:
meetings	interiii.	i iiiai.

INTERIM FEEDBACK MEETING

LEVEL 3: PLE 8

Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments):
Platform 1: Being an accountable professional
Platform 2: Promoting health and preventing ill health
The same of the sa
Platform 3: Assessing needs and planning care
Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams
riationii or Educing and managing haroling out of and working in tourio

Platform 6: Improving safe	ty and quality of care					
Platform 7: Coordinating c	are					
Flationii 7. Goordinating c	aic					
Skills and Procedures:						
Student feedback:						
Have any issues been referred to the Practice Assessor and/or Academic Assessor/Practice Tutor? Yes No						
Development Support Plan	n (see Section 3)	Yes	No			
Date / /	Student Signature:	Practice Sup Signature:	pervisor			
		Practice Ass Signature:	sessor			
		Academic Assessor/Pr Signature:	actice Tutor			

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4) LEVEL 3: PLE 8

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:

You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

Please tick if you are:	C	arer/Relative					
How happy were you with the way the student nurse	Very happy	Нарру	I'm not sure	Unhappy	Very unhappy		
cared for you?							
listened to your needs?							
understood the way you felt?							
talked to you?							
showed you respect?							
What did the student nurse do well?							
What could the student nurse have done differently?							
Date Student Signature: Practice Supervisor Signature:							

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK LEVEL 3: PLE 8 Please note any other forms of service user/carer feedback (eg cards, letters, emails). Please ensure anonymity is maintained. Use the box below to record your thoughts and feelings on all service user/carer feedback received: Date Student Signature: Practice Supervisor Signature:

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES			
LEVEL	3: PLE 8		
Student Name:	STUDENT ID:		
	Cohort:		
Name of Placement:	Practice Supervisor:		
Name and Location of Organisation/Pro			
Individual overseeing student's opportunity comments – Please comment on student performance and what has been learned			
Print Name:	Sign:		
Date:			
Student reflection - please reflect on what you have learned:			
Date:			
Student signature:			

ADDITIONAL NOTES				
LEVEL 3: PLE 8				
Date	Time	Detail	Signature	
		Student, Practice Supervisors, Practice Assessors, Academic Assessors/Practice Tutors can add notes to this page		

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR LEVEL 3: PLE 8 Student Name: STUDENT ID: Cohort: The minimum level of performance for this LEVEL of the programme is **INDEPENDENT**. This means that the student nurse independently and confidently coordinates care, whilst acknowledging their own limitations, through guided participation in care under indirect supervision from you in your role as practice supervisor/assessor. Please comment on the Platforms below: Platform 1: Being an accountable professional Platform 2: Promoting health and preventing ill health Platform 3: Assessing needs and planning care

Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams
Platform 6: Improving safety and quality of care
Plation 6. Improving salety and quality of care
Platform 7: Coordinating care

Please comment on progress towards safely demonstrating the skills and procedures in Annexe A and B. Identify aspects for the student to focus on in future PLEs.				
Date/	Student Signature:	Practice Assessor's Signature:		
		Academic Assessor/Practice Tutor Signature (if required):		
Practice Assessor Overall	Formative Assessment C	omments		
Name of Practice Assessor (•			
Signature of Practice Assess	sor:			
Designation:		Date:		

Practice Assessor Confirmatory Statement		
I confirm that: student nurse (print full name)		
following a period of hours of attendance at placement (please refer to		
attendance record), and through objective evidence-b		
ACHIEVED / NOT ACHIEVED (Please delete as app	ropriate) the expected level of	
INDEPENDENT		
Signature of Practice Assessor:		
Date:		
Date.		
Student Statement		
I (w	rite name in capital letters)	
have received feedback on my performance and have	had the opportunity to reflect	
and discuss this with the Practice Assessor. Please w	rite comments below:	
Student signature:	Date:	

ATTENDANCE RECORD										
				LEV	EL 3:	PLE 8				
Studer	nt Name and	ID								
Module	e Name									
Progra	mme and le	vel								
Field o	f Practice									
Practic	e learning e	nvironr	nent							
Week No	Week beginning	М	Т	W	Т	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12	12	12	DO	DO	36	S. Nurse
1										
2										
3										
					То		nber of eeks =			
See section 1.7.1 for maximum hours worked per week Key: DO=Day Off AL=Annual Leave										
Key:DO=Day OffAL=Annual LeaveC=Compassionate leaveS=SickA=Absent (not sick)										
Date Student Signature: Practice Supervisor										
/			n Olgi	atul 6.			ature:	0.141301		

PRE-PRACTICE LEARNING ACTIVITIES

LEVEL 3. PLE 9					
PRACTICE LEARNING EXPERIENCE DETAILS					
Student Name:			Cohort:		
Student ID:			Level:		
Practice Learning Environment:			Start date: Finish date:		
Telephone Number:					
PLE Type:					
Name of PEF/CHEF	ī:				
Nominated Practice	Supervisor Name:				
Nominated Practice	Assessor Name:				
Nominated Academ	ic				
Assessor/Practice T	utor Name:				
Additional Nominate	ed Academic				
Assessor/Practice T	utor Name (if				
required):					
Prior to the commer should:	cement of each prac	ctice learning e	nvironment, th	e student	
name of your o	with the PLE and aso designated practice s practice experience	supervisor/asse			
16. Read the appr portal / via InP	opriate PLE profile, v lace / QMPLE	which can be a	ccessed on the	estudent	
17. Briefly summarise what the PLE does:					

18. From the <i>Learning Opportunities</i> outlined in the PLE profile, choose one that you are unfamiliar with and write a short summary.
10. Considering the contine were group that attend the DLE colort and
19. Considering the service user group that attend the PLE, select one condition/situation that those service users are likely to present with and undertake a literature search in relation to these.
 From your search, identify two key resources on the topic and list below (using appropriate reference style)
o In the space below provide a brief summary of these two resources and outline any best practice recommendations in relation to these
Resource 1 –
Resource 2 –
Condition / situation

from your theory modu	hat you are about to enter, io les that would support your l ote your thoughts below:			
21. In relation to the PLE that you are about to enter, identify any related learning from previous PLE's and clinical skills.net that would support your learning within this care environment. In addition, identify any skills or procedures, listed in Annexe A and B, that you undertake in your HCSW role. Discuss these with your practice supervisor in relation to your learning within this care environment. Please note your thoughts below:				
Practice Supervisor AND/OR Practice Assessor – please sign to confirm that the pre-practice learning activities have been completed by the student				
Date/	Student Signature:	Practice Supervisor Signature:		
		Practice Assessor Signature:		

ORIENTATION & PRELIMINARY MEETING

LEVEL 3: PLE 9

In accordance with the *NHS Education for Scotland Quality Standards for Practice Placements*, a preliminary meeting should take place within two days of commencing practice. Preferably your practice supervisor (or someone acting on their behalf) should meet with you. The discussion should establish the following:

- The previous skills you have practised, in order to identify your current learning needs
- The level at which the proficiencies/practice learning outcomes have to be achieved during this PLE
- The available learning opportunities within this PLE
- Any additional student support requirements taking cognisance of reasonable adjustment
- An initial Learning Development Plan for Learning

Date of preliminary meeting	
Topics to be Discussed:	Please initial when complete
Orientation to the practice learning environment and equipment	
Shift patterns and meal breaks/facilities	
Sickness/absence reporting procedure	
Accident/incident reporting procedures and systems	
Emergency and fire procedure	
Health and Safety Policy including lone working	
Introduction to Health and Social Care Professionals	
Introduction to Patients/Clients	
Confidentiality and data protection	
Professional behaviour	
Policy on corporate and personal use of social media	
Raising concerns guidance	
Access to Scottish Practice Assessment Document (PAD)	
Student's individual requirements, e.g. reasonable adjustments	
Available practice learning experiences	
Student's practice learning expectations	
Student's strengths and areas for improvement	
Uniform policy for the practice learning environment	
Student's previous practice assessment, previous practice	
assessor's written comments and learning development plan	
Development support plan	
Student's mandatory training record	
Consider if a risk assessment is required (see Section 1.5)	
Consider appropriate dates for interim feedback meeting and	
final assessment	

LEARNING DEVELOPMENT PLAN
LEVEL 3: PLE 9
slow to summarise the main points arise

	LEVEL 3: PLE 9	
Please use the space below preliminary meeting with the development plan.		
Please review skills achiev could be achieved within a	rea:	
Practice Supervisor AND/C the orientation and preliming completed by the student		
Date / /	Student Signature:	Practice Supervisor Signature:
		Practice Assessor Signature:
Agreed date for next meetings	Interim:	Final:

INTERIM FEEDBACK MEETING

LEVEL 3: PLE 9

Practice supervisor's comments (please refer to the associated proficiencies for each platform to inform your discussion with the student and comments):
Platform 1: Being an accountable professional
Diatform O. Dramating health and proventing ill health
Platform 2: Promoting health and preventing ill health
Platform 3: Assessing needs and planning care
Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams

Platform 6: Improving safe	ty and quality of care		
Platform 7: Coordinating c	are		
Skills and Procedures:			
Student feedback:			
Have any issues been refe Assessor and/or Academic		Yes	No
Development Support Plan	(see Section 3)	Yes	No
Date/	Student Signature:	Practice Super Signature: Practice Asset	
		Signature: Academic Assessor/Pra	
		Signature (if	

SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4) LEVEL 3: PLE 9

Aim: We would value the views of service users and/or their carers/families on the contact the student has had with you. This helps the student nurse and their practice supervisor to learn what you thought of what the student did for you and how they did it. The information you provide will be used to help the student's learning and development and it will benefit future service users/carers.

Information to be given to the service user/carer/family member:

You have been asked to participate in this feedback exercise, as the student nurse has been involved in delivering your care. The student's supervisor will ask you some questions about your experience with the student. These comments will be anonymous and will be treated in confidence: they will not affect your care in any way. You do not have to participate if you do not wish to do so and if you do not want to, this will not affect your future care or treatment.

Want to, this will not affect				/D	_
Please tick if you are:	ne patient/s	service user		arer/Relative	
How happy were you with the way the student nurse	Very happy	Нарру	I'm not sure	Unhappy	Very unhappy
cared for you?					
listened to your needs?					
understood the way you felt?					
talked to you?					
showed you respect?					
What did the student nur	se do well?	?			
What could the student n	urse have	done differ	ently?		
Date/	Stud	lent Signatur	re:	Practice Sup Signature:	pervisor

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK LEVEL 3: PLE 9 Please note any other forms of service user/carer feedback (e.g. cards, letters, emails). Please ensure anonymity is maintained. Use the box below to record your thoughts and feelings on all service user/carer feedback received: Date Student Signature: Practice Supervisor Signature:

FEEDBACK FROM ADDITIONA	FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES						
LEVEL 3: PLE 9							
Student Name:	STUDENT ID:						
	Cohort:						
Name of Placement:	Practice Supervisor:						
Name and Location of Organisation/Pro							
Individual overseeing student's opporte student performance and what has been le							
Print Name:	Sign:						
Date:							
Student reflection - please reflect on wha	t you have learned:						
Date:							
Student signature:							

ADDITIONAL NOTES						
	LEVEL 3: PLE 9					
Date	Time	Detail	Signature			
		Student, Practice Supervisors, Practice Assessors, Academic Assessors/Practice Tutors can add notes to this page				

FINAL ASSESSMENT: END OF PLE TO BE COMPLETED BY PRACTICE ASSESSOR LEVEL 3: PLE 9 Student Name: STUDENT ID: Cohort: The minimum level of performance for this LEVEL of the programme is **INDEPENDENT**. This means that the student nurse independently and confidently coordinates care, whilst acknowledging their own limitations, through guided participation in care under indirect supervision from you in your role as practice supervisor/assessor. Please comment on the Platforms below: Platform 1: Being an accountable professional Platform 2: Promoting health and preventing ill health Platform 3: Assessing needs and planning care

Platform 4: Providing and evaluating care
Platform 5: Leading and managing nursing care and working in teams
Platform 6: Improving safety and quality of care
Platform 7: Coordinating care

Diagon comment on myonya		fals, daman	atuation the abilla and
Please comment on progre procedures in Annexe A ar future PLEs.			
Date	Student Signa	iture:	Practice Assessor's Signature:
/			Oignaturo.
			Academic
			Assessor/Practice Tutor Signature (if required):
			olghature (ii required).
Practice Assessor Overall	Summative As	sessment (Comments
Overall result for this PLE			PASS / FAIL
Name of Practice Assessor (. ,		
Signature of Practice Assess	sor:	1	Data
Designation:			Date:

Practice Assessor Confirmatory Statement						
I confirm that: student nurse (print full name)						
following a period of hours of attendance at placement						
attendance record), and through objective evidence-based assess	-					
atteridance record), and through objective evidence-based assess	ments, nas.					
ACHIEVED / NOT ACHIEVED (Please delete as appropriate) the expected level of						
INDEPENDENT						
Signature of Practice Assessor:						
Date:						
Student Statement						
I (write name in o	capital letters)					
have received feedback on my performance and have had the opp						
and discuss this with the Practice Assessor. Please write comments below:						
Student signature:						

ATTENDANCE RECORD										
LEVEL 3: PLE 9										
Studer	t Name and									
Module Name										
Programme and level										
Field of Practice										
Practic	e learning e	nvironr	nent							
Week No	Week beginning	М	Т	W	Т	F	S	S	Total hours	Practice signature
e.g.	dd/mm/yy	DO	U 0	12	12	12	DO	DO	36	S. Nurse
1										
2										
3										
					То		nber of eeks =			
	tion 1.7.1 f		kimun	n hours						
_	DO=Day Off						Leave			
	C=Compassi	onate I	eave		S=Si				sent (no	
Date						nature:			tice Sup ature:	ervisor

CONFIRMATION OF COMPLETION - LEVEL 3

Practice Assessor Confirmation of Proficiency

This feedback should be informed by feedback sought from practice supervisors and assessors (see previous pages) and any other relevant people in order to be assured about your decision. Review platform proficiencies section for the LEVEL to ensure all have been signed as achieved.

Practice Assessor: Confirmation of Achievements of Platforms

END OF LEVEL 3		orms
PI	ease initial the rele	evant column
	Achieved	Not achieved
Platform 1: Being an accountable professional		
Platform 2: Promoting health and preventing ill-health		
Platform 3: Assessing needs and planning care		
Platform 4: Providing and evaluating care		
Platform 5: Leading and managing nursing care and working in teams		
Platform 6: Improving safety and quality of care		
Platform 7: Coordinating care		
Practice Assessor: Comment on safe demonstra (Annexes A & B) [ALL must be completed by the		procedures

Tractice ricesces Communicity Clate.	ment – END OF LEVEL 3						
I confirm that in partnership with the nomi Student Nurse (print name)	nated Academic Assessor/Practice Tutor, has ACHIEVED/NOT						
ACHIEVED (please delete as appropriate	e) all platforms (and proficiencies) and skills						
at procedures at the INDEPENDENT leve	. •						
	please delete as appropriate) progression						
to THE REGISTER.							
Signature of Practice Assessor:							
orginature of Fractice Addeddor.							
Date:							
A - day in A - a - a - a - a - a - a - a - a - a -							
Academic Assessor/Practice Tutor Co END OF LEVEL 3	nfirmatory Statement (HEI use only) –						
I confirm that in partnership with the nomi	nated Practice Assessor, Student Nurse						
(print name)	has						
\(
ACHIEVED/NOT ACHIEVED (please delete as appropriate) all platforms (and proficiencies) and skills at procedures at the INDEPENDENT level for Level 3 of the							
" ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '							
programme and RECOMMEND/DO NOT	RECOMMEND (please delete as						
. •							
programme and, RECOMMEND/DO NO1 appropriate) progression to THE REGIST							
. •							
appropriate) progression to THE REGIST							
appropriate) progression to THE REGIST							
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PLATFORMS AND PROFICIENCIES

proficiencies and the annexes are explained in more detail in the next section. The proficiencies are grouped under seven platforms followed by two annexes; this section focuses on the platforms and

are assessed Please remember, the examples provided are only suggestions and it is therefore not a requirement that these specific examples knowledge, skills, values and your increasing independence in practice to your practice supervisor (PS)/practice assessor (PA). required level. The examples also help explain ways in which you might be able to evidence the progression of your developing participation in care framework, there are suggested examples of how you can evidence achievement of each proficiency at the This section contains the platforms and the related proficiency statements for each Level of your programme. In keeping with the

entry to the register, all proficiencies should have been achieved across your programme of study. See explanation below Shading has been used to distinguish which proficiencies must be achieved in each LEVEL, meaning that by the point of for this achievement:

- LEVEL 1 ALL non-shaded proficiencies must be achieved at the dependent level by the end of this Level
- LEVEL 2 ALL non-shaded proficiencies must be achieved at the developing independence level by the end of this
- LEVEL 3 ALL non-shaded proficiencies must be achieved at the independent level by the end of this Level

been provided to help you and your practice supervisor and practice assessor work together to document this. the required level of participation within all subsequent PLEs. An explanation of the levels of the participation in care framework has If a proficiency has been signed as achieved in a previous PLE of the Level, you must continue to demonstrate the achievement of

Participation in Care Framework

effective person-centred care in a professional manner using appropriate nursing skills. supervisor who will direct and guide you. Through guided participation in care, you will be able to demonstrate delivery of safe, The expected level of performance for LEVEL ONE is Dependent. This means that you will be working closely with your practice

this guidance and will demonstrate increasing confidence and competence. independence and your practice supervisor will offer guidance and support when required. You will actively participate in care with The expected level of performance for LEVEL TWO is Developing Independence. This means that you will be developing

to act as an accountable practitioner, demonstrating a comprehensive knowledge base that informs safe and effective practice. supervisor will offer a more indirect form of supervision. You will demonstrate the ability to lead and coordinate care, and the ability The expected level of performance for LEVELTHREE is Independent. You will be working independently and your practice

Mapping to the EU Directives and The Code (NMC, 2018)

are, as a consequence of this mapping, also demonstrating that their practice is in adherence to the expectations of The Code practice supervisors, practice assessors and academic assessors to be assured that, when students achieve each proficiency, they the clinical instruction elements of the EU directives. This mapping is visible below each proficiency statement. This will allow Each proficiency from the seven platforms has been mapped to The Code (NMC, 2018). Each proficiency has also been mapped to (NMC, 2018) for a registered nurse. This mapping also ensures that the clinical instruction aspects of the EU Directives are met as _EVEL of proficiency achievement.

Coding of EU Directives to Support Mapping to NMC (2018) Future Nurse: Standards of proficiency for registered nurses

training leading to the award of a formal qualification of nurses responsible for general care shall consist of the following two Article 31 (V.2 Nurse Responsible for General Care) - '5.2.1 Training programme for nurses responsible for general care - the LEVELs...' (NMC, 2018; pp.15-16)

						B. Clinical Instruction
	0	7	7	0	0	
Home nursing	Care of the old and geriatrics	Mental health and psychiatry	Maternity care	Child care and paediatrics	General and specialist surgery	General and specialist medicine
B.7	B.6	B.5	B.4	B.3	B.2	B.1

Platform 1: Being an accountable professional

about care. They communicate effectively, are role models for others, and are accountable for their actions. Registered nurses compassionate. They act professionally at all times and use their knowledge and experience to make evidence-based decisions continually reflect on their practice and keep abreast of new and emerging developments in nursing, health and care. Registered nurses act in the best interests of people, putting them first and providing nursing care that is person-centred, safe and

Platfo	Platform 1: Being an accountable professional		
1.1	understand and act in accordance with <i>The Code</i> (2015): Professional standards of and fulfil all registration requirements	<i>Code</i> (2015): Professional standards of practic	practice and behaviour for nurses and midwives,
	All statements outlined as LEVEL of The Code (NMC, 2018): EU clinical instruction	de (NMC, 2018): EU clinical instruction Directi	Directives N/A
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	Demonstrates:- Professional behaviour and appearance,	Demonstrates:- Professional behaviour and appearance,	Demonstrates:- Professional behaviour and appearance,
	honesty and integrity, good timekeeping, adherence to appropriate policies and	honesty and integrity, good timekeeping, adherence to appropriate policies and	honesty and integrity, good timekeeping, adherence to appropriate policies and
	protocols, accurate record keeping,	protocols, accurate record keeping,	protocols, accurate record keeping,
	accountability for own actions, accepts and	accountability for own actions, accepts and	accountability for own actions, accepts and
	acts on constructive feedback, respect for	acts on constructive feedback, respect for	acts on constructive feedback, respect for
	the privacy and dignity of others,	the privacy and dignity of others,	the privacy and dignity of others,
	appropriate information sharing.	appropriate information sharing.	appropriate information sharing.
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date

ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature	
flects upon practice in raises concerns appro and appropriately impledour. Report and docuents appropriately.	te the ability to work in raises concerns appro areness of duty of candling of medication erro alate these.	te the ability to work in raises concerns appro of duty of candour. ling of medication erro alate these.	
LEVEL 3 - Independent	LEVEL 2 - Developing Independence	LEVEL 1 - Dependent	
7.1; 17.2; 17.3; 20.8; 25.1: EU clinical instruction	s; 16.1; 16.2; 16.3; 16.4; 16.5; 16.6; 17.1; 17.2;	The Code (NMC, 2018) 9.3; 14.1; 14.2; 14.3; 16.1; 16.2; 16.3; 16.4; 16.5; 16.6; 1 Directives N/A	
f candour, recognising and reporting any	understand and apply the principles of courage, transparency and the professional duty of candour, recognising and reporting any situations, behaviours or errors that could result in poor care outcomes		1.3
Date	Date	Date	
ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature	
olicies, and ethical frameworks, including any atte between the devolved legislatures of the United EU clinical instruction Directives N/A EVEL 3 - Independent Selects and applies appropriate legal, regulatory and governance; legal basis for regulatory and governance; legal basis for practice, for example, Children's Act, MH Act, Power of Attorney, Guardianship, Carers' Act. Critically reflects on self and others' practice in line with The Code and is able to raise concerns appropriately.			1,2

				1.5					1.4
Date	ACHIEVED Signature	Practices within local procedures around self-care and responsibility for oneself. Reporting sickness absence in line with local guidelines. Is able to seek support for self. Can identify critical or adverse incidents and considers how these may impact on professional practice.	The Code (NMC, 2018) 4.4; 8.1; 8.2; 8.4; 8.7 20.9: EU clinical instruction Directives N/A	understand the demands of professional practice and demonstrate how to recognis colleagues and the action required to minimise risks to health	Date	ACHIEVED Signature	In conversation with the PS/PA demonstrate knowledge of the protected characteristics of discriminatory behaviour e.g. age, race, pregnancy, religion or belief, disability, gender, marital status, sexual orientation. Can discuss appropriate mechanisms to highlight concerns.	The Code (NMC, 2018) 1.1; 1.3; 1.5; 3.4; 4.4	demonstrate an understanding of, and the ability to challenge, discriminatory behaviour
Date	ACHIEVED Signature	Practices within local procedures around self-care and also care of colleagues. Starts to develop analysis of critical incidents. Identifies vulnerability in colleagues and signposts opportunities for support and improving future practice.	<i>The Code</i> (NMC, 2018) 4.4; 8.1; 8.2; 8.4; 8.7; 9.1; 9.2; 9.3; 11.1; 11.2; 11.3; 13.3; 15.3; 16.1; 16.2; 16.6; 19.4; 20.2; 20.3; 20.5; 20.8; 20.9: EU clinical instruction Directives N/A	ctice and demonstrate how to recognise signs se risks to health	Date	ACHIEVED Signature	Able to identify and respond appropriately to challenging situations involving discrimination. Is able to identify situations where discriminatory behaviour may occur in clinical practice. Provides support to people when discriminatory behaviours are evident.	The Code (NMC, 2018) 1.1; 1.3; 1.5; 3.4; 4.4; 7.3; 9.3; 16.1; 16.4; 16.6; 17.1; 17.2; 17.3; 20.2: EU clinical instruction Directives N/A	oility to challenge, discriminatory behaviour
Date	ACHIEVED Signature	Takes responsibility for promoting care of vulnerable members of the team in line with local procedures. Follows appropriate reporting mechanisms. Is supportive of others experiencing vulnerability. Reflects on critical or adverse incidents to inform or change practice.	î.1; 16.2; 16.6; 19.4; 20.2; 20.3; 20.5; 20.8;	e signs of vulnerability in themselves or their	Date	ACHIEVED Signature	Acts as a role model in providing uncompromised, non-judgemental care whilst respecting the individuality of others. Demonstrate the ability to challenge discrimination. Exhibits confidence in engaging with courageous conversation. Takes an active role in reporting and documenting poor or discriminatory behaviour. Provides unambiguous, constructive feedback to others where discriminatory behaviours are evident. Acts as an advocate as required.	0.2: EU clinical instruction Directives N/A	

ACHIEVED Date	ACHIEVED Signature Date	ACHIEVED Signature Date	
Can interpret, analyse and apply research to promote and enhance best possible nursing practice in the practice learning environment. Actively shares evidence from research findings with colleagues.	Actively seeks out opportunities to engage in scholarly activity within the practice area. Developing awareness of current evidence or research related to clinical area / client group. Can identify deficits in the research methods or evidence base.	Engages with pre-practice learning activities and identifies evidence that supports best nursing practice within this context. Appears keen to learn from the current evidence base related to the practice area. Actively seeks out opportunities to engage in scholarly activity within the practice area.	
LEVEL 3 - Independent	LEVEL 2 - Developing Independence	LEVEL 1 - Dependent	
B7	The Code (NMC, 2018) 6.1; 6.2; 8.4; 9.2; 10.6; 19.2: EU clinical instruction Directives B1-B7	The Code (NMC, 2018) 6.1; 6.2; 8.4; 9.2; 10	
itically an	demonstrate an understanding of research methods, ethics and governance in order to critically analyse, safely use, share and apply research findings to promote and inform best nursing practice	demonstrate an understanding of research methods, ethics at research findings to promote and inform best nursing practice	1.7
Date	Date	Date	
ACHIEVED	ACHIEVED Signature	ACHIEVED Signature	
environment of the student's physical and emotional health to enable them to support the care needs of others.	maintain personal, mental and physical health.	importance of one's own health in relation to being able to care for others.	
Clear evidence within the practice	Can identify appropriate actions, agencies	In conversation with your PS/PA	
LEVEL 3 - Independent	LEVEL 2 - Developing Independence	LEVEL 1 - Dependent	
	struction Directives N/A	The Code (NMC, 2018) 20.9: EU clinical instruction Directives N/A	
of perso	understand the professional responsibility to adopt a healthy lifestyle to maintain the level of personal fitness and wellbeing required to meet people's needs for mental and physical care	understand the professional responsibility to adop meet people's needs for mental and physical care	1.6

ν <u> </u>	and preferences.		In association with PS/PA engages in the holistic multifactorial assessment of clients.	LEVEL 1 – Dependent	The Code (NMC, 2018) 1.1; 1.3; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 3.4; 4.1; 4.2; 4.3; 4.4; 5.5; 7.3; 7.4: EU clinical instruction Directives N/A	1.9 understand the need to base all decisions regarding care and interventions on people's addressing any personal and external factors that may unduly influence their decisions	Date Signature	current research relating to the rning environment and its lient group and significant k out opportunities to source support learning within	LEVEL 1 – Dependent	The Code (NMC, 2018) 6.2; 13.1; 15.1; 17.3; 19.2; 19.3; 22.3: EU clinical instruction Directives B1-B7	1.8 demonstrate the knowledge, skills and ability to think critically when applying evidence and drawing on experience to make evidence informed decisions in all situations
		assess social, cultural differences and provide effective and appropriate care. Understand concept of unconscious bias. Reflect upon feedback from clients to enhance future assessment activity and client interactions.	Communicate effectively with the client group and significant others. Is able to	LEVEL 2 – Developing Independence	2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 3.4; 4.1; 4.2;	rding care and interventions on people's nenat may unduly influence their decisions	ACHIEVED Signature Date	knowledge and under and how to integrate and how to integrate aperience to inform decreases within the practice and the control of the contro	LEVEL 2 – Developing Independence	9.2; 19.3; 22.3: EU clinical instruction Direc	think critically when applying evidence and
		establish the person's needs and preferences. Effectively assesses social, cultural differences and plans effective and appropriate care. Is non-discriminatory and non-judgemental in planning or prioritising care delivery. Actively reflects upon feedback from various sources to enhance future assessment activity and client interactions and satisfaction.	Initiates skilled communication with the client group and significant others to	LEVEL 3 – Independent	4.3; 4.4; 5.5; 7.3; 7.4: EU clinical instruction	le's needs and preferences, recognising and one	Date Signature	arch and evidence to panning care. Problem tient care in accordan sarch evidence. Identii wledge and takes appidress.	LEVEL 3 – Independent	tives B1-B7	drawing on experience to make evidence

			_					_
			1.11					1.10
Date	Appropriate use of verbal and non-verbal communication skills. Actively listens, recognises and responds to verbal and non-verbal communication. Participates in producing accurate, clear and legible documentation. Participates in ward rounds/MDT/case conference/ handovers. ACHIEVED Signature	The Code (NMC, 2018) 1.1; 7.1; 7.2; 7.3; 7.4	communicate effectively using a range of skills and strategies with colleagues and mental, physical, cognitive and behavioural health challenges	Date	ACHIEVED Signature	Able to engage confidently with people within the practice area. Sensitive to needs of others. Participates actively in routine care delivery/activities within the practice area with appropriate supervision. Developing confidence in explaining the rationale for a variety of routine actions/ care decisions.	The Code (NMC, 2018) 1.4; 2.3; 2.4; 2.5; 4.1 Directives N/A	demonstrate resilience and emotional intelligence and be capable of explaining the decisions in routine, complex and challenging situations
Date	Developing confidence and competence in appropriate use of verbal and non-verbal communication skills. Produces accurate, clear and legible documentation. Adopts an active role in ward rounds/MDT/case conference/ handovers. ACHIEVED Signature	The Code (NMC, 2018) 1.1; 7.1; 7.2; 7.3; 7.4; 7.5; 8.2; 8.3; 9.3; 20.10: EU clinical instruction Directives N/A		Date	ACHIEVED Signature	Engages confidently with a wide range of people within and outwith the practice area. Developing confidence in assuming responsibility for the delivery of care/routine activities within the practice setting. Sensitive to the needs of others and can adapt care in line with changing situations/preferences. Understands and provides clear explanations regarding decisions made within the care setting.	<i>The Code</i> (NMC, 2018) 1.4; 2.3; 2.4; 2.5; 4.1; 5.2; 6.2; 7.1; 9.2; 9.3; 14.1; 15.1; 18.1; 19.2; 19.4; 20.2; 20.6: EU clinical instruction Directives N/A	
Date	Confidently and clearly presents and shares verbal and written reports with individuals and groups. Leads ward rounds/MDT/case conference/ handovers, formulate and document plans. Analyse and accurately records and shares digital information and data. ACHIEVED Signature	ion Directives N/A	people at all stages of life and with a range of	Date	ACHIEVED Signature	Assumes responsibility for liaison with a wide range of people within and outwith the practice area. Is confident and competent in assuming responsibility for the delivery of care in more complex situations within the practice setting. Sensitive to the changing needs of others and can adapt care in line with evolving situations/preferences. Is confident and competent in rationalising decisions made within the care setting even in more complex and challenging situations.	; 19.4; 20.2; 20.6: EU clinical instruction	rationale that influences their judgments and

1.12	demonstrate the skills and abilities required the Code (NMC, 2018) 1.1; 1.3; 1.5; 2.1; 2.3	1.12 demonstrate the skills and abilities required to support people at all stages of life who are emotionally or physically vulnerable The Code (NMC, 2018) 1.1; 1.3; 1.5; 2.1; 2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 3.4; 4.1; 4.2; 4.3; 5.5; 7.4; 13.1; 13.2; 13.3; 13.4; 15.3; 17.1;	motionally or physic 5.5; 7.4; 13.1; 13.2;
	LEVEL 1 - Dependent LEVEL 2 -	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	In association with the PS/PA is able to provide reassurance to clients. Is aware of	Provides reassurance to clients. Is aware and able to participate in appropriate	Is confident and competent in providing effective reassurance in a variety of
	agencies. Demonstrates empathy in communicating with clients. Is aware of the	Demonstrates empathy. Demonstrates ability to utilise appropriate and timely de-	appropriate referrals. Is skilled in demonstrating sensitive and empathic
	need to report any perceived vulnerability	escalation.	care. Is skilled and confident in utilising
	to senior staff. Is aware of principles of de-		appropriate and timely de-escalation
	ACHIEVED Signature	Signature ACHIEVED Signature	ACHIEVED
	Date	Date	Date

1.13	demonstrate the skills and abilities required to develop, manage and maintain appropriate relationships with people, their families, carers and colleagues	o develop, manage and maintain appropriate i	relationships with people, their families,
	The Code (NMC, 2018) 1.1; 2.5; 2.6; 4.4; 5.5 21.6: EU clinical instruction Directives B1-B7	<i>The Code</i> (NMC, 2018) 1.1; 2.5; 2.6; 4.4; 5.5; 7.3; 7.5; 8.1; 8.2; 9.3; 17.3; 20.1; 20.2; 20.3; 20.6; 20.7; 20.8; 21.1; 21.2; 21.3; 21.5; 21.6: EU clinical instruction Directives B1-B7	20.6; 20.7; 20.8; 21.1; 21.2; 21.3; 21.5;
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
Г	Utilise verbal and non-verbal	Developing confidence and competence in	Is confident and competent in engaging in
	communication skills. Developing ability to	engaging in verbal and non-verbal	verbal and non-verbal communication with
	actively listen and respond to verbal cues	communication with others. Engages in	others. Actively engages in active listening
	from others. Demonstrates empathy when	active listening to identify relevant	to identify relevant information from
	interacting with people, their families,	information from patients, their families and	patients, their families and carers. Is skilled
	carers and colleagues. Aware of the need	carers. Responds appropriately to verbal	in recognising and responding to verbal
	to engage in appropriate information	cues from others. Demonstrates empathy	cues from others. Demonstrates empathy
	sharing. Developing a professional	when interacting with people, their families,	when interacting with people, their families,
	disposition when interacting with all	carers and colleagues. Engages	carers and colleagues. Confidently and
	people.	confidently in appropriate information	appropriately identifies relevant information
		sharing. Developing a professional	for sharing with appropriate
		disposition when interacting with all	individuals/agencies. Always presents self
		people.	in a professional manner when interacting
1			with all people.
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date

1.14	provide and promote non-discriminatory, per diverse backgrounds, cultural characteristics adjustments	provide and promote non-discriminatory, person centred and sensitive care at all times, reflecting on people's values and beliefs, diverse backgrounds, cultural characteristics, language requirements, needs and preferences, taking account of any need for adjustments	lecting on people's values and beliefs, ces, taking account of any need for
	The Code (NMC, 2018) 1.3; 1.5; 3.4; 5.5; 7.2	The Code (NMC, 2018) 1.3; 1.5; 3.4; 5.5; 7.2; 7.3; 7.4; 20.2; 24.1: EU clinical instruction Directives N/A	irectives N/A
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	Participates in active listening and appropriate questioning techniques to identify individual needs and preferences. Understands the need to assess social and cultural differences and provide effective and appropriate care. Aware of the concept of unconscious hiss. Under	Developing confidence and competence in active listening and appropriate questioning techniques to identify individual needs and preferences. Is able to assess social and cultural differences and provide effective and appropriate care.	Competently engages in non- discriminatory and person-centred care at all times. Engages in active listening, and skilled questioning, utilising appropriate techniques to identify individual needs and preferences. Competently assesses social
	concept of unconscious bias. Under supervision is able to adapt care to be person centred and sensitive to individual needs.	Understands the concept of unconscious bias. Is able to adapt care to be person centred and sensitive to individual needs.	and cultural differences and provides effective person centred and individually adjusted care. Avoids unconscious bias.
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date
1.15	demonstrate the numeracy, literacy, digital and technological skills required to mediand effective nursing practice	nd technological skills required to meet the ne	et the needs of people in their care to ensure safe
	The Code (NMC, 2018) 10.1; 10.3; 10;4; 10.	<i>The Code</i> (NMC, 2018) 10.1; 10.3; 10;4; 10.5; 10.6; 14.3; 17.2; 18.1; 18.2; 18.3; 20.10: EU clinical instruction Directives B1-B7	J clinical instruction Directives B1-B7
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	Participating in using numeracy, literacy and digital technology in the care of service users, medicine management and monitoring.	Developing confidence in using numeracy, literacy and digital technology in the care of service users medicine management and monitoring.	Confidently and accurately engages in the use of numeracy, literacy and digital technology in the care of service users, their medicine management and monitoring.
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date

					1.17					1.16
Date	ACHIEVED Signature	Seeking feedback with PS/PA from service users, carers and MDT professionals. Engage in reflection.	LEVEL 1 – Dependent	The Code (NMC, 2018) 8.4; 9.2; 22.3; 23.1; 24.2: EU clinical instruction Directives N/A	take responsibility for continuous self-reflection, seeking and responding to support knowledge and skills	Date	ACHIEVED Signature	Participates in sharing clear and accurate verbal statements and written reports in patient notes and documentation.	The Code (NMC, 2018) 2.5; 4.2; 5.2; 5.4; 5.5; 7.5; 8.2; 8.6; 9.1; 10 18.3; 18.5; 20.10. 21.4; 23.1: EU clinical instruction Directives N/A	demonstrate the ability to keep complete, clear, accurate and timely records
Date	ACHIEVED Signature	Seeking feedback with PS/PA from service users, carers and MDT professionals and using this for development/to inform future practice. Actively engages in reflection.	LEVEL 2 – Developing Independence	24.2: EU clinical instruction Directives N/A	on, seeking and responding to support and fe	Date	ACHIEVED Signature	Developing confidence and competence in sharing clear and accurate verbal statements and written reports in patient notes, documentation or handovers.	The Code (NMC, 2018) 2.5; 4.2; 5.2; 5.4; 5.5; 7.5; 8.2; 8.6; 9.1; 10.1; 10.2; 10.3; 10.4; 10.5; 10.6; 13.2; 14.3; 16.2; 17.2; 18.1; 18.2; 18.3; 18.5; 20.10. 21.4; 23.1: EU clinical instruction Directives N/A	ar, accurate and timely records
Date	ACHIEVED Signature	Taking the lead to obtain feedback from service users, carers and MDT professionals and using information for personal and professional development/inform future practice. Utilises reflection to inform action.	LEVEL 3 – Independent		and feedback to develop their professional	Date	ACHIEVED Signature	Confidently and accurately presents and shares verbal and written statements in patient notes and documentation. Provides clear verbal, digital or written information and instructions when delegating or handing over responsibility for care.	5; 10.6; 13.2; 14.3; 16.2; 17.2; 18.1; 18.2;	

					1.19				1.18
Date	ACHIEVED Signature	ur PS/PA standing of mal values nt. Acts in th all staff ronment. to respect thers and itate inform licies and practice a	LEVEL 1 - Dependent	The Code (NMC, 2018) 1.1; 2.2; 3.2; 3.4; 5.1 19.1; 19.2; 20.1; 20.2; 20.3; 20.7; 20.8; 20.9;		Attend and participate in appropriate MDT meetings, ward rounds, demonstrates effective and appropriate communication with team. ACHIEVED Signature	LEVEL 1 - Dependent	The Code (NMC, 2018) 3.3; 5.4; 6.1; 8.1; 8.2; 8. 20.3; 25.1: EU clinical instruction Directives N/A	demonstrate the knowledge and confidence to contribute effectively and proactively
Date	ACHIEVED Signature	ole model to junior stude confidence and compone a professional mannature of personal limitations. Acts appoint aprivacy and dignity strates appropriate infections to relate policies approfessional behaviore.	LEVEL 2 - Developing Independence	<i>The Code</i> (NMC, 2018) 1.1; 2.2; 3.2; 3.4; 5.1; 6.2; 7.1; 8.1; 9.3; 9.4; 11.1; 12.1; 13.5; 14.1; 16.1; 16.2; 16.3; 16.4; 16.5; 16.6; 17.3; 19.1; 19.2; 20.1; 20.2; 20.3; 20.7; 20.8; 20.9; 21.1; 21.2; 22.1; 22.2; 22.3; 23.1; 23.2; 23.3 : EU clinical instruction Directives N/A	act as an ambassador, upholding the reputation of their profession and promoting public confidence in nursing, health and care services	Attend and participate in MDT meetings and engages in effective and appropriate communication with team members. ACHIEVED Signature	LEVEL 2 - Developing Independence	<i>The Code</i> (NMC, 2018) 3.3; 5.4; 6.1; 8.1; 8.2; 8.3; 8.4; 8.5; 8.6; 8.7; 9.1; 9.3; 9.4; 10.2; 11.1; 11.3; 13.2; 13.3; 16.1; 16.5; 17.2; 19.4; 20.3; 25.1: EU clinical instruction Directives N/A	to contribute effectively and proactively in an in
Date	ACHIEVED Signature	Acts as a role model to other students and colleagues demonstrating professionalism at all times whilst accepting personal and professional limitations. Acts in a way which inspires confidence in colleagues and clients. Actively protects the privacy and dignity of others and demonstrates appropriate information sharing. Takes a lead role in ensuring that policies and protocols are followed. Reports and documents poor or discriminatory behaviour. Provides unambiguous, constructive feedback to others where discriminatory behaviours are evident. Acts as an advocate as required.	LEVEL 3 - Independent	: EU clinical instruction Directives N/A	onfidence in nursing, health and care	Takes an active role in MDT meetings fostering effective, appropriate and informed communication with team. ACHIEVED Signature	LEVEL 3 - Independent	1; 11.3; 13.2; 13.3; 16.1; 16.5; 17.2; 19.4;	in an interdisciplinary team

					1.20
Date	ACHIEVED Signature	Achieving skills and procedures and demonstrates safe practice as detailed in the PAD.	LEVEL 1 - Dependent	The Code (NMC, 2018) 4.3; 6.1; 6.2; 17.3; 1	1.20 safely demonstrate evidence-based practice in all skills and procedures stated in A
Date	ACHIEVED Signature	Achieving skills and procedures and demonstrates safe practice as detailed in the PAD.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 4.3; 6.1; 6.2; 17.3; 18.2; 19.2; 19.3; 20.4; 20.6; 22.3: EU clinical instruction Directives B1-B7	in all skills and procedures stated in Annexes
Date	ACHIEVED Signature	Achieving all skills and procedures and demonstrates safe and effective practice as detailed in the PAD.	LEVEL 3 - Independent	struction Directives B1-B7	nnexes A and B

Platform 2: Promoting health and preventing ill health

community development and global health agendas, and in the reduction of health inequalities. informed choices about how to manage health challenges in order to maximise their quality of life and improve health outcomes. people, families, communities and populations. They support and enable people at all stages of life and in all care settings to make Registered nurses play a key role in improving and maintaining the mental, physical and behavioural health and well-being of They are actively involved in the prevention of, and protection against, disease and ill health and engage in public health,

Platfo	Platform 2: Promoting health and preventing ill health	Ħ	
2.1	understand and apply the aims and principles	understand and apply the aims and principles of health promotion, protection and improvement, and the prevention of ill health when	ment, and the prevention of ill health when
	The Code (NMC, 2018) 1.3; 2.2; 2.3; 2.4; 3.1: EU clinical instruction Directives B1-B7	: EU clinical instruction Directives B1-B7	
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	In conversation with your PS/PA	Apply your understanding of these	Deliver a health promotion or health
	these principles. Support people to make	positive health choices.	people. Work within the parameters of national health protection policy e.g.
			Smoking Health and Social Care
			(Scotland) Act 2005.
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date

2:2	demonstrate knowledge of epidemiology, demography, genomics and the wider de apply this to an understanding of global patterns of health and wellbeing outcomes The Code (NMC, 2018) 3.1: 6.1: 6.2: 22.3: EU clinical instruction Directives B1-B7	demonstrate knowledge of epidemiology, demography, genomics and the wider determinants of health, illness and wellbeing and apply this to an understanding of global patterns of health and wellbeing outcomes The Code (NMC, 2018) 3.1: 6.1: 6.2: 22.3: EU clinical instruction Directives B1-B7	nts of health, illness and wellbeing and
	1118 Code (NWIC, 2010) 3:1, 0:1, 0:2, 22:3:	O CIIIICAI II SU OCUOIT DII eCUVES DI-D/	
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	In conversation with your PS/PA demonstrate a foundation understanding of these principles.	Demonstrate knowledge of epidemiology, demography, genomics and the wider determinants of health, illness and wellbeing and apply this to an understanding of global patterns of health and wellbeing outcomes.	Be able to relate core theories, concepts, principles and terminology to individual or groups within your care.
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date
2.3	understand the factors that may lead to inequalities in health outcomes	ualities in health outcomes	
	The Code (NMC, 2018) 3.1; 3.3; 3.4; 4.3; 6.2	The Code (NMC, 2018) 3.1; 3.3; 3.4; 4.3; 6.2; 17.3: EU clinical instruction Directives B1-B7	7
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	In conversation with your PS/PA demonstrate a foundation understanding of these principles.	In conversation demonstrate an understanding of the core theories, concepts, principles and terminology of health inequalities and health outcomes and their impact on the people in your care.	Relate the core theories, concepts and principles of health inequalities and health outcomes to the care needs of individuals and groups in your care.
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date

Date Signature	Date Signature		
ere a person could eng ening and support thei informed choice about	understanding of theso support people to ma		
LEVEL 3 - Independent	LEVEL 2 - Developing Independence	LEVEL 1 - Dependent	
es B1-B7	The Code (NMC, 2018) 1.3; 2.2.; 2.3; 2.4; 2.5; 3.1; 6.1; 6.2: EU clinical instruction Directives B1-B7	The Code (NMC, 2018) 1.3; 2.2.; 2.3; 2.4; 2.1	
understanding and explaining the princi	promote and improve mental, physical, behavioural and other health related outcomes by understanding and explaining the principles, practice and evidence-base for health screening programmes		2.5
Date	Date	Date	
ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature	
Create opportunities to discuss promoting health choices with people or groups of people in relation to one or more of these health behaviours.	Recognise appropriate opportunities to discuss promoting health choices with people in relation to one or more of these health behaviours.	Observe and have reflective discussion about promoting health in relation to one or more of these health behaviours.	
LEVEL 3 - Independent	LEVEL 2 - Developing Independence	LEVEL 1 - Dependent	
uction Directives B1-B7	The Code (NMC, 2018) 2.2; 2.3; 2.4; 3.1; 7.1; 7.2; 7.3; 7.4; 8.2; 8.3; 13.2: EU clinical instruction Directives B1-B7	The Code (NMC, 2018) 2.2; 2.3; 2.4; 3.1; 7.1	
red, to discuss the impact of smoking, behavioural health and wellbeing, in the	identify and use all appropriate opportunities, making reasonable adjustments when required, to discuss the impact of smoking, substance and alcohol use, sexual behaviours, diet and exercise on mental, physical and behavioural health and wellbeing, in the context of people's individual circumstances		2.4

ACHIEVED	In convers demonstra the above	LEVE	The C	2.7 unders	Date	ACHIEVED	In convers demonstrathe above.	inec	2.6 unders
EVED Signature	In conversation with your PS/PA demonstrate a foundation understanding of the above.	LEVEL 1 - Dependent	ode (NMC, 2018) 2.2; 2.3; 2.4; 3.1; 7.1	understand and explain the contribution of social influte mental, physical and behavioural health outcomes		Signature	In conversation with your PS/PA demonstrate a foundation understanding of the above.	The Code (NMC, 2018) 6.2: EU clinical instruction Directives B1-B/	understand the importance of early years and behavioural health and wellbeing
ACHIEVED Signature	In conversation demonstrate an understanding of the core theories, concepts, principles and terminology of health behaviours and health outcomes and their impact on the people in your care.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 2.2; 2.3; 2.4; 3.1; 7.1; 7.2; 7.3; 7.4; 8.2; 8.3; 13.2: EU clinical instruction Directives B1-B7	understand and explain the contribution of social influences, health literacy, individual circumstances, behaviours and lifestyle choices to mental, physical and behavioural health outcomes	Date	ACHIEVED Signature	In conversation demonstrate an understanding of the core theories, concepts, principles and terminology of health inequalities and health outcomes and their impact on the people in your care.		understand the importance of early years and childhood experiences and the possible impact on life choices, mental, physical and behavioural health and wellbeing
ACHIEVED Signature	Apply your understanding of the core theories, concepts and principles to care planning and delivery, taking into account a person's experiences.	LEVEL 3 - Independent	iction Directives B1-B7	ımstances, behaviours and lifestyle choices	Date	ACHIEVED Signature	Apply your understanding of the core theories, concepts and principles to care planning and delivery, taking into account a person's experiences.		act on life choices, mental, physical and

N 	explain and demonstrate the use of up-to-date approaches to behaviour change to and make informed choices when managing their own health and making lifestyle <i>The Code</i> (NMC, 2018) 1.3; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 3.1; 3.2; 3.3; 6.1; 6.1; 6.2;	explain and demonstrate the use of up-to-date approaches to behaviour change to enable people to use their strengths and expertise and make informed choices when managing their own health and making lifestyle adjustments The Code (NMC, 2018) 1.3; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 3.1; 3.2; 3.3; 6.1; 6.1; 6.2; 7.3; 8.1: EU clinical instruction Directives B1-B7	people to use their strengths and expertise ents EU clinical instruction Directives B1-B7
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
		Recognise and apply techniques such as teachback, motivational interviewing or other similar approaches to enable people to make informed choices.	Recognise opportunities to apply techniques such as teachback, motivational interviewing or other similar approaches to enable people to make informed choices. Integrate appropriate behaviour change approaches to your practice.
		ACHIEVED Signature	ACHIEVED Signature
		Date	Date
2.9	use appropriate communication skills and str their care to manage health challenges in ord	use appropriate communication skills and strength-based approaches to support and enable people to make informed choices about their care to manage health challenges in order to have satisfying and fulfilling lives within the limitations caused by reduced capability,	le people to make informed choices about the limitations caused by reduced capability,
	The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.1; 3.2;	.2; 2.3; 2.4; 2.5; 2.6; 3.1; 3.2;	3.3; 3.4; 4.1; 4.2; 4.3; 4.4; 5.4; 5.5; 7.1; 7.2; 7.3; 7.4;
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	Use appropriate communication skills to support people to make informed choices about their care.	Use appropriate communication skills and strengths-based approaches to support people to make informed choices about their care.	Work collaboratively to identify people's individual strengths and support them to identify personally meaningful goals.
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date

Platform 3: Assessing needs and planning care.

and spiritual needs. They use information obtained during assessments to identity the priorities and requirements for personcare plans that take into account their circumstances, characteristics and preferences. centred and evidence-based nursing interventions and support. They work in partnership with people to develop person-centred Registered nurses prioritise the needs of people when assessing and reviewing their mental, physical, cognitive, behavioural, social

											_
				3.2						3.1	Platfo
ACHIEVED Signature	n in nursing assessme care. Discuss with PS ed in 3.2 and impact a n nursing assessment	LEVEL 1 - Dependent	The Code (NMC, 2018) 2.1; 3.1; 3.2; 3.3; 6.1; 6.2; 10.1; 13.1; 13.2; 17.3; 18.1; 18.2;	demonstrate and apply knowledge of body systems and homeostasis, human anator pharmacology and social and behavioural sciences when undertaking full and accur developing appropriate care plans	Date	ACHIEVED Signature	Participation in nursing assessment and planning of care. For each, discuss with PS/PA the stage of human development and the implications for care planning.	LEVEL 1 - Dependent	The Code (NMC, 2018) 1.4; 2.1; 2.2; 2.4; 3.1; 4.2; 5.5; 6.2; 7.1; 10.1; 13.1; 13.2: EU	demonstrate and apply knowledge of human development from conception to death centred nursing assessments and developing appropriate care plans	Platform 3: Assessing needs and planning care
ACHIEVED Signature	complete nursing assort care. Explore with Posed in 3.2 and the impart nursing assessment	LEVEL 2 - Developing Independence		demonstrate and apply knowledge of body systems and homeostasis, human anatomy and physiology, biology, genomics, pharmacology and social and behavioural sciences when undertaking full and accurate person-centred nursing assessment developing appropriate care plans	Date	ACHIEVED Signature	Initiate and complete nursing assessments and plans of care. For each, explore with PS/PA the stage of human development and the implications for care planning.	LEVEL 2 - Developing Independence		g appropriate care plans	
ACHIEVED Signature	tly complete nursing ts and plans of care. A the aspects listed in 3 and influence on nursing tand care planning.	LEVEL 3 - Independent	18.3: EU clinical instruction Directives B1-B7	my and physiology, biology, genomics, ate person-centred nursing assessments and	Date	ACHIEVED Signature	Independently complete nursing assessments and plans of care. Analyse with PS/PA the stage of human development and the implications for care planning.	LEVEL 3 - Independent	clinical instruction Directives B1-B7	when undertaking full and accurate person-	

ω ω	demonstrate and apply knowledge of all commonly encountered mental, physical medication usage and treatments when undertaking full and accurate assessment prioritising and reviewing person centred care plans The Code (NMC, 2018) 2.1; 3.1; 3.2; 3.3; 6.1; 6.2; 10.1; 13.1; 13.2; 17.3; 18.1; 18.	demonstrate and apply knowledge of all commonly encountered mental, physical, behavioural and cognitive health conditions, medication usage and treatments when undertaking full and accurate assessments of nursing care needs and when developing, prioritising and reviewing person centred care plans The Code (NMC, 2018) 2.1; 3.1; 3.2; 3.3; 6.1; 6.2; 10.1; 13.1; 13.2; 17.3; 18.1; 18.2; 18.3: EU clinical instruction Directives B1-B7	I, behavioural and cognitive health conditions, nts of nursing care needs and when developing, 8.2; 18.3: EU clinical instruction Directives B1-B7
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	Participation in nursing assessment and planning of care. For each, demonstrate knowledge of conditions and the impact	Initiate, complete and review nursing assessments and plans of care. For each, apply knowledge of conditions and	Independently complete and review nursing assessments and plans of care. For each, apply knowledge of conditions
	this will have on planning care.	illustrate the impact this will have on planning care.	and evaluate the impact this will have on planning care.
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date
3.4	understand and apply a person-centred approach to nursing care, demonstrating goal setting when working with people, their families, communities and population		shared assessment, planning, decision-making and ns of all ages
	The Code (NMC, 2018) 1.1.; 1.3; 1.5; 2.1; 2.2 instruction Directives B1-B7	<i>The Code</i> (NMC, 2018) 1.1.; 1.3; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.3; 3.4; 4.1; 4.2; 4.3; 5.5; 6.1; 7.1; 10.1; 13.1; 13.2: EU clinical instruction Directives B1-B7	; 6.1; 7.1; 10.1; 13.1; 13.2: EU clinical
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	Participation in nursing assessment and planning of care. For each, demonstrate and discuss the importance of working in partnership with people to assess and plan care.	Working collaboratively with people, assess, plan and deliver care devising individualised goals.	Working collaboratively with people, assess, plan, deliver and evaluate care devising individualised goals.
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date

					3.7						3.6						ა 5
			LEVEL 1 - Dependent	The Code (NMC, 2018) 1.3; 1.5; 2.1; 2.3; 2.4 Directives B1-B7	understand and apply the principles and processes for making reasonable adjustments	Date	ACHIEVED Signature	In collaboration with PS/PA, assess a person's capacity to consent and make decisions about care.	LEVEL 1 - Dependent	The Code (NMC, 2018) 1.3; 1.5; 2.3; 2.4; 2.5 instruction Directives B1-B7	effectively assess a person's capacity to male	Date	ACHIEVED Signature	Participation in nursing assessment and planning of care and in discussion with your PS/PA, develop a person-centred plan of care with agreed goals.	LEVEL 1 - Dependent	The Code (NMC, 2018) 1.1.; 1.3; 1.5; 2.1; 2. instruction Directives B1-B7	demonstrate the ability to accurately process individualised nursing care and develop pers
Date	ACHIEVED Signature	Recognises individual needs and adapts practice to meet individual care requirements.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 1.3; 1.5; 2.1; 2.3; 2.4; 2.5; 2.6; 3.3; 3.4; 4.1; 4.2; 4.3; 4.4; 5.1; 10.1; 17.1; 17.2; 17.3: EU clinical instruction Directives B1-B7	cesses for making reasonable adjustments	Date	ACHIEVED Signature	Demonstrate the ability to assess a person's capacity to consent and make decisions about care.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 1.3; 1.5; 2.3; 2.4; 2.5; 2.6; 3.2; 3.3; 3.4; 4.1; 4.2; 4.3; 4.4; 7.2; 7.3; 7.4; 7.5; 17.1; 17.2; 17.3: EU clinical instruction Directives B1-B7	effectively assess a person's capacity to make decisions about their own care and to give or withhold consent	Date	ACHIEVED Signature	Initiate and complete nursing assessments and plans of care. Interpret data gathered and in discussion with your PS/PA, explore and devise a person-centred plan of care with agreed goals.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 1.1.; 1.3; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.3; 3.4; 4.1; 4.2; 4.3; 5.5; 6.1; 7.1; 10.1; 13.1; 13.2: EU clinical nstruction Directives B1-B7	demonstrate the ability to accurately process all information gathered during the assessment process to identify needs for individualised nursing care and develop person-centred, evidence-based plans for nursing interventions with agreed goals
Date	ACHIEVED Signature	Assess individual needs and initiate adaptations to practice to meet individual care requirements.	LEVEL 3 - Independent	l; 17.1; 17.2; 17.3: EU clinical instruction		Date	ACHIEVED Signature	Assess a person's capacity to consent and make decisions about care.	LEVEL 3 - Independent	7.4; 7.5; 17.1; 17.2; 17.3: EU clinical	or withhold consent	Date	ACHIEVED Signature	Independently complete nursing assessments and plans of care. Interpret and synthesise data gathered, explore and devise a person-centred plan of care with agreed goals.	LEVEL 3 - Independent	; 6.1; 7.1; 10.1; 13.1; 13.2: EU clinical	ent process to identify needs for interventions with agreed goals

Date	Date	Date	
Achieved Signature	Achieved Signature	Achieved Signature	
safeguarding measures and escalating where appropriate.	harm and initiate safeguarding measures.		
at risk of harm or potential harm, initiating	participate in assessing people at risk of	who are or may be vulnerable.	
Independently identify and assess people	In collaboration with your PS/PA,	Demonstrate the ability to identify people	
LEVEL 3 - Independent	LEVEL 2 - Developing Independence	LEVEL 1 - Dependent	
14.3; 15.2; 15.3; 16.1; 16.2; 16.4; 17.1; 17.2; 17.3:	• •	The Code (NMC, 2018) 1.5; 3.1; 3.4; 4.3; 5.4; 8.5; 8.6; 14.1; 13.2; 13.4; 14.1; 14.2; EU clinical instruction Directives B3; B4; B5; B6; B7	
ensuring prompt action is taken to safeguar	recognise and assess people at risk of harm and the situations that may put them at risk, ensuring prompt action is taken to safeguard those who are vulnerable		3.9
Date	Date		
ACHIEVED Signature	ACHIEVED Signature		
Apply knowledge of legal frameworks to the assessment of capacity and the implications for assessing and planning care.	Apply knowledge of legal frameworks to inform assessment of capacity.		
LEVEL 3 - Independent	LEVEL 2 - Developing Independence	LEVEL 1 - Dependent	
10.1: EU clinical instruction Directives B3;	<i>The Code</i> (NMC, 2018) 1.3; 1.5; 2.1; 2.5; 3.1; 3.4; 4.1; 4.2; 4.1; 4.4; 5.1; 5.2; 5.5; 7.1; 7.5; 10.1: EU clinical instruction Directives B3; B6; B7	The Code (NMC, 2018) 1.3; 1.5; 2.1; 2.5; 3.1 B5; B6; B7	
are practising when making decisions in	understand and apply the relevant laws about mental capacity for the country in which you are practising when making decisions in relation to people who do not have capacity		3.8

	>	TO a C		7	3.11 u					7 D	3.10 d
Date	ACHIEVED Signature	Complete observations (e.g. Temp, P, BP) and investigations (e.g. specimen collection) and discuss findings with PS/PA.	LEVEL 1 - Dependent	<i>he Code</i> (NMC, 2018) 1.4; 2.1; 6.2; 8.1; 8.2	undertake routine investigations, interpreting and sharing findings as appropriate				LEVEL 1 - Dependent	<i>The Code</i> (NMC, 2018) 2.6; 3.1; 4.3; 6.2; 7.1 Directives B3; B4; B5	emonstrate the skills and abilities required
Date	ACHIEVED Signature	Complete routine investigations, analyse findings and in collaboration with your PS/PA share as appropriate.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 1.4; 2.1; 6.2; 8.1; 8.2; 8.3; 8.4; 8.5; 13.1; 13.2: EU clinical instruction Directives B1-B7	and sharing findings as appropriate	Date	ACHIEVED Signature	In collaboration with your PS/PA, explore how to recognise and discuss / participate in assessing people who show signs of self-harm and/or suicidal ideation.	LEVEL 2 - Developing Independence	<i>The Code</i> (NMC, 2018) 2.6; 3.1; 4.3; 6.2; 7.1; 7.3; 7.5; 8.6; 13.1; 13.2; 13.3; 13.4; 15.1; 15.1; 15.3; 17.1: EU clinical instruction Directives B3; B4; B5	demonstrate the skills and abilities required to recognise and assess people who show signs of self-harm and/or suicidal ideation
Date	ACHIEVED Signature	Identify appropriate investigations based upon assessment data. Analyse findings and share with relevant others.	LEVEL 3 - Independent	on Directives B1-B7		Date	ACHIEVED Signature	Independently identify and assess people who show signs of self-harm and/or suicidal ideation.	LEVEL 3 - Independent	.1; 15.3; 17.1: EU clinical instruction	ns of self-harm and/or suicidal ideation

					3.13						3.12
			LEVEL 1 - Dependent	The Code (NMC, 2018) 2.1; 2.2; 2.3;		Date	ACHIEVED Sig	Consider any abnormalities from 3.11 and with assistance from your PS/PA, consider further investigations required.	LEVEL 1 - Dependent	The Code (NMC, 2018) 1.4; 2.1; 6.2;	
Date	ACHIEVED Signature	In collaboration with your PS/PA apply knowledge of co-morbidities to identify priorities of care when planning care.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 2.1; 2.2; 2.3; 3.1; 3.2; 6.1; 6.2; 13.1; 13.2; 18.1; 22.3: EU clinical instruction Directives B1-B7	demonstrate an understanding of co-morbidities and the demands of meeting people's complex nursing and social care needs when prioritising care plans	Date	Signature ACHIEVED Signature	1 and Interpret any abnormalities from 3.11 and in collaboration with your PS/PA, implement necessary actions and consider if further investigations are required.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 1.4; 2.1; 6.2; 8.1; 8.2; 8.3; 8.4; 8.5; 13.1; 13.2: EU clinical instruction Directives B1-B7	ing prompt action when required
Date	e ACHIEVED Signature	Applying knowledge of co-morbidities, prioritise care to meet the demands of people's complex nursing and social care needs.	LEVEL 3 - Independent	l instruction Directives B1-B7	complex nursing and social care needs when	Date	e ACHIEVED Signature	Interpret any abnormalities from 3.11 and, implement necessary actions and consider if further investigations are required.	LEVEL 3 - Independent	ction Directives B1-B7	by implementing appropriate interventions, requesting

demonstrate the ability to work in partnership with people, families and carers to continuously monitor, evaluate and reassess the effectiveness of all agreed nursing care plans and care, sharing decision making and readjusting agreed goals, documenting progand decisions made	demonstrate the ability to work in partnership with people, families and carers to continuously monitor, evalua effectiveness of all agreed nursing care plans and care, sharing decision making and readjusting agreed goal and decisions made The Code (NMC, 2018) 1.1; 2.1; 2.2; 2.3; 2.4; 2.6; 3.1; 3.2; 3.3; 3.4; 5.2; 5.4; 5.5; 7.1; 7.3; 8.1; 8.2; 8.3; 13.1; clinical instruction Directives B3; B5; B6; B7	emonstrate the ability to work in partnership with people, families and carers to continuously monitor, evalual frectiveness of all agreed nursing care plans and care, sharing decision making and readjusting agreed goal nursing decisions made The Code (NMC, 2018) 1.1; 2.1; 2.2; 2.3; 2.4; 2.6; 3.1; 3.2; 3.3; 3.4; 5.2; 5.4; 5.5; 7.1; 7.3; 8.1; 8.2; 8.3; 13.1; linical instruction Directives B3; B5; B6; B7 LEVEL 1 - Dependent LEVEL 2 - Developing Independence LEVEL 3 - Independence	demonstrate the ability to work in partnership with people, families and carers to continuously monitor, evalua effectiveness of all agreed nursing care plans and care, sharing decision making and readjusting agreed goal and decisions made The Code (NMC, 2018) 1.1; 2.1; 2.2; 2.3; 2.4; 2.6; 3.1; 3.2; 3.3; 3.4; 5.2; 5.4; 5.5; 7.1; 7.3; 8.1; 8.2; 8.3; 13.1; clinical instruction Directives B3; B5; B6; B7 LEVEL 1 - Dependent Under direct supervision, review plans of plans of care, document progress and care, document progress and care, document progress and carers to continuously monitor, evalua and care, samily monitor, evalua and carers to continuously monitor, evalua and carers to continuously monitor, e	demonstrate the ability to work in partnership with people, families and carers to continuously monitor, evalua effectiveness of all agreed nursing care plans and care, sharing decision making and readjusting agreed goal and decisions made The Code (NMC, 2018) 1.1; 2.1; 2.2; 2.3; 2.4; 2.6; 3.1; 3.2; 3.3; 3.4; 5.2; 5.4; 5.5; 7.1; 7.3; 8.1; 8.2; 8.3; 13.1; clinical instruction Directives B3; B5; B6; B7 LEVEL 1 - Dependent Under direct supervision, review plans of care with PS/PA and participate in documenting progress and any appropriate document adjustments to plans of care. In collaboration with your PS/PA, review plans of care, document progress and appropriate adjustments to plans of care. In collaboration with your PS/PA, review plans of care, document appropriate adjustments to plans of care.	lity to work in partnership with people, families and carers to continuously monitor, evalua agreed nursing care plans and care, sharing decision making and readjusting agreed goal (18) 1.1; 2.1; 2.2; 2.3; 2.4; 2.6; 3.1; 3.2; 3.3; 3.4; 5.2; 5.4; 5.5; 7.1; 7.3; 8.1; 8.2; 8.3; 13.1; irectives B3; B5; B6; B7 In collaboration with your PS/PA, review plans of care, document progress and implement appropriate adjustments to plans of care. Signature ACHIEVED Signature ACHIEVED
Signature ACHIEVED Signature Date Continuously monitor, evaluate and reassess the g and readjusting agreed goals, documenting progress	nature ACHIEVED Signature Date Date nd readjusting agreed goals, documenting progress 7.1; 7.3; 8.1; 8.2; 8.3; 13.1; 13.1; 13.2; 13.3: EU	nature ACHIEVED Signature Date Date Individual preferences and requirements. Signature Signature Date Intinuously monitor, evaluate and reassess the readjusting agreed goals, documenting progress 7.1; 7.3; 8.1; 8.2; 8.3; 13.1; 13.1; 13.2; 13.3: EU Ce LEVEL 3 - Independent	nature ACHIEVED Signature Date Individual preferences and requirements. Signature Signature Date Intinuously monitor, evaluate and reassess the not readjusting agreed goals, documenting progress T.1; 7.3; 8.1; 8.2; 8.3; 13.1; 13.1; 13.2; 13.3: EU Ce LEVEL 3 - Independent In collaboration with people, evaluate plans of care, document progress and implement	nature ACHIEVED Signature Date Date Individual preferences and requirements. Signature Signature Notinuously monitor, evaluate and reassess the progress the readjusting agreed goals, documenting progress 1, 7, 3, 8, 1, 8, 2, 8, 3, 13, 1, 13, 1, 13, 2, 13, 3, EU LEVEL 3 - Independent In collaboration with people, evaluate plans of care, document progress and implement of paperopriate adjustments to plans of care.	nature ACHIEVED Signature Date Date Indinuously monitor, evaluate and reassess the nd readjusting agreed goals, documenting progress 7.1; 7.3; 8.1; 8.2; 8.3; 13.1; 13.1; 13.2; 13.3: EU ce LEVEL 3 - Independent iew In collaboration with people, evaluate plans of care, document progress and implement appropriate adjustments to plans of care. ACHIEVED Signature Signature
effectiveness of all agreed nursing care plans and care, sharing decision making and readjusting agreed goals, documenting progress and decisions made	agreed nursing care plans and care, sharing decision making and readjusting agreed goals, documenting progress le	agreed nursing care plans and care, sharing decision making and readjusting agreed goals, documenting progress le 2018) 1.1; 2.1; 2.2; 2.3; 2.4; 2.6; 3.1; 3.2; 3.3; 3.4; 5.2; 5.4; 5.5; 7.1; 7.3; 8.1; 8.2; 8.3; 13.1; 13.1; 13.2; 13.3: EU Directives B3; B5; B6; B7 LEVEL 2 - Developing Independence LEVEL 3 - Independent	agreed nursing care plans and care, sharing decision making and readjuncted in the plans and care, sharing and	LEVEL 2 - Developing Independence In collaboration with your PS/PA, review plans of care, document progress and implement appropriate adjustments to plans of care.	LEVEL 2 - Developing Independence In collaboration with your PS/PA, review plans of care, document progress and implement appropriate adjustments to plans of care. ACHIEVED Signature
	The Code (NMC, 2018) 1.1; 2.1; 2.2; 2.3; 2.4; 2.6; 3.1; 3.2; 3.3; 3.4; 5.2; 5.4; 5.5; 7.1; 7.3; 8.1; 8.2; 8.3; 13.1; 13.1; 13.2; 13.3: EU clinical instruction Directives B3; B5; B6; B7	2018) 1.1; 2.1; 2.2; 2.3; 2.4; 2.6; 3.1; 3.2; 3.3; 3.4; 5.2; 5.4; 5.5; 7.1; 7.3; 8.1; 8.2; 8.3; 13.1; 13.1; 13.2; 13.3: EU Directives B3; B5; B6; B7 LEVEL 2 - Developing Independence LEVEL 3 - Independent	2; 2.3; 2.4; 2.6; 3.1; 3.2; 3.3; 3.4; 5.2; 5.4; 5.5; 7.1; 7.3; 8 5; B6; B7 LEVEL 2 - Developing Independence lans of In collaboration with your PS/PA, review plans of care, document progress and	LEVEL 2 - Developing Independence In collaboration with your PS/PA, review plans of care, document progress and implement appropriate adjustments to plans of care.	LEVEL 2 - Developing Independence In collaboration with your PS/PA, review plans of care, document progress and implement appropriate adjustments to plans of care. ACHIEVED Signature

Date	Date	
ACHIEVED Signature	ACHIEVED Signature	
pased upon assessment of need.	where opportunities arise.	
Safely refer people to relevant services	In collaboration with your PS/PA, discuss	
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LEVEL 3 - Independent	LEVEL 2 - Developing Independence	LEVEL 1 - Dependent
ion Directives B1-B7	The Code (NMC, 2018) 2.1; 7.1; 8.1; 8.2; 8.3; 8.4; 8.5; 11.1; 13.2; 13.3; EU clinical instruction Directives B1-B7	The Code (NMC, 2018) 2.1; 7.1; 8.1; 8.2; 8.3
ervices for clinical intervention or support	refer people safely to other professionals or s	3.16 demonstrate knowledge of when and how to refer people safely to other professionals or services for clinical intervention or support

Platform 4: Assessing needs and planning care

care they provide and delegate is person-centred and of a consistently high standard. They support people of all ages in a range of have been met in line with their wishes, preferences and desired outcomes. care settings. They work in partnership with people, families and carers to evaluate whether care is effective and the goals of care Registered nurses take the lead in providing evidence-based, compassionate and safe nursing interventions. They ensure that the

safety, dignity, privacy, comfort and sleep can be met, acting as a role model for oth care The Code (NIMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 6.2; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 8.2; 8.3; 8.4; 8.5; 8.6; 8.7; 9.1; 9.2; 9.3; 9.4; 13.1; 13. 25.1; 25.2: EU clinical instruction Directives B1-B7 LEVEL 1 - Dependent Communicates effectively with people to identify their goals and uses this information to plan and evaluate care in collaboration with PS/PA. In collaboration with PS/PA, undertake risk assessments prior to initiating care. Updates documentation and maintains accurate records. Ensures care promotes patient dignity and privacy. ACHIEVED Signature Signature ACHIEVED Signature Signature	Platfo 4.1	Platform 4: Assessing needs and planning care 4.1 demonstrate and apply an understanding of what is important to people and how to		use this knowledge to ensure their needs for
care Care The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 3.4; 4.1; 4.6.2; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 8.2; 8.3; 8.4; 8.5; 8.6; 8.7; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3; 13.25.1; 25.2: EU clinical instruction Directives B1-B7 LEVEL 1 - Dependent Communicates effectively with people to identify their goals and uses this information to plan and evaluate care in collaboration with PS/PA. In collaboration with PS/PA, undertake risk assessments prior to initiating care. Updates documentation and maintains accurate records. Ensures care promotes patient dignity and privacy. ACHIEVED Signature Communicates effectively with people to identify their goals and uses this information to plan and evaluate care with information to plan and evaluate care with information and maintains ascurate records. Ensures care promotes situ patient dignity and privacy. ACHIEVED Signature Communicates effectively with people to identify their goals and uses this information to plan and evaluate care with information to plan and evaluate care with information and maintains ascurate records. Ensures care promotes situ patient dignity and privacy. ACHIEVED Signature Date		safety, dignity, privacy, comfort and sleep ca	n be met, acting as a role model for others in l	oroviding
The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 3.4; 4.1; 4.6.2; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 8.2; 8.3; 8.4; 8.5; 8.6; 8.7; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3; 13.25.1; 25.2; EU clinical instruction Directives B1-B7 LEVEL 1 - Dependent Communicates effectively with people to identify their goals and uses this information to plan and evaluate care in collaboration with PS/PA. In collaboration increasing independence. Undertakes risk evaluates documentation and maintains accurate records. Ensures care promotes patient dignity and privacy. ACHIEVED Signature Date LEVEL 2 - Developing Independence Communicates effectively with people to identify their goals and uses this information to plan and evaluate care with information to plan and evaluate care with information and maintains accurate records. Ensures care promotes situ patient dignity and privacy. ACHIEVED Signature Date		care		Ì
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25.2: EU clinical instruction Directives B1-B7 EL 1 - Dependent LEVEL 2 - Developing Independence Communicates effectively with people to identify their goals and uses this information to plan and evaluate care in boration with PS/PA. In collaboration boration with PS/PA, undertake risk assessments to initiating care. Updates mentation and maintains accurate res. Ensures care promotes patient ty and privacy. EVED Signature B1-B7 LEVEL 2 - Developing Independence Communicates effectively with people to identify their goals and uses this information to plan and evaluate care with increasing independence. Undertakes risk assessments whilst delivering care. Updates documentation and maintains accurate records. Ensures care promotes patient dignity and privacy. Signature Date		6.2; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 8.2; 8.3; 8.4; 8	3.5; 8.6; 8.7; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3	; 13.
EL 1 - Dependent Communicates effectively with people to ify their goals and uses this mation to plan and evaluate care in boration with PS/PA. In collaboration PS/PA, undertake risk assessments to initiating care. Updates mentation and maintains accurate res. Ensures care promotes patient ty and privacy. EVED LEVEL 2 - Developing Independence in identify their goals and uses this information to plan and evaluate care with increasing independence. Undertakes risk assessments whilst delivering care. Updates documentation and maintains accurate records. Ensures care promotes patient dignity and privacy. Communicates effectively with people to identify their goals and uses this information to plan and evaluate care with increasing independence. Undertakes risk assessments whilst delivering care. Updates documentation and maintains accurate records. Ensures care promotes patient dignity and privacy. ACHIEVED Signature Date Communicates effectively with people to identify their goals and uses this information to plan and evaluate care with increasing independence. Undertakes risk assessments delivering care. Updates documentation and maintains accurate records. Ensures care promotes patient dignity and privacy. ACHIEVED Signature Date Communicates effectively with people to identify their goals and uses this information to plan and evaluate care with increasing independence. Undertakes risk assessments whilst delivering care. Updates Communicates effectively with people to identify their goals and uses this information to plan and evaluate care with increasing independence. Undertakes risk assessments whilst delivering care. Updates Communicates effectively with people to identify their goals and uses this		25.1; 25.2: EU clinical instruction Directives	B1-B7	
municates effectively with people to identify their goals and uses this nation to plan and evaluate care in boration with PS/PA. In collaboration horation with PS/PA. In collaboration with PS/PA, undertake risk assessments to initiating care. Updates mentation and maintains accurate ros. Ensures care promotes patient ty and privacy. EVED Communicates effectively with people to identify their goals and uses this information to plan and evaluate care with increasing independence. Undertakes risk assessments whilst delivering care. Updates documentation and maintains accurate records. Ensures care promotes patient dignity and privacy. Signature Communicates effectively with people to identify their goals and uses this increasing independence. Undertakes risk assessments whilst delivering care. Updates documentation and maintains accurate patient dignity and privacy. Signature Communicates effectively with people to identify their goals and uses this increasing independence. Undertakes risk assessments whilst delivering care. Updates documentation and maintains patient dignity and privacy. Signature Date		LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	ᇤ
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PS/PA, undertake risk assessments to initiating care. Updates to initiating care. Updates mentation and maintains accurate records. Ensures care promotes patient ty and privacy. EVED Signature ACHIEVED Signature Date		collaboration with PS/PA. In collaboration	increasing independence. Undertakes risk	eva
to initiating care. Updates mentation and maintains accurate rds. Ensures care promotes patient ty and privacy. EVED Signature Updates documentation and maintains accurate records. Ensures care promotes patient dignity and privacy. ACHIEVED Signature Date		with PS/PA, undertake risk assessments	assessments whilst delivering care.	ass
mentation and maintains accurate accurate records. Ensures care promotes patient ty and privacy. EVED Signature ACHIEVED Signature Date		prior to initiating care. Updates	Updates documentation and maintains	res
ty and privacy. EVED Signature Date patient dignity and privacy. Patient dignity and privacy. Patient dignity and privacy. Date		documentation and maintains accurate	accurate records. Ensures care promotes	Si
ty and privacy. EVED Signature ACHIEVED Signature Date		records. Ensures care promotes patient	patient dignity and privacy.	π
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					4.3						4.2
Date	ACHIEVED Signature	In conversation with the PS/PA demonstrates understanding of the knowledge and skills needed to support people, families and carers before, during and after a range of interventions. Demonstrates an understanding of the principles of informed consent, breaking bad news, withdrawing consent/refusing treatment, duty of candour and other relevant issues.	LEVEL 1 - Dependent	The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2 18.2; 18.3; 20.6; 20.7; 20.10: EU clinical instruction Directives B1-B7	demonstrate the knowledge, communication accurate information that meets their needs to	Date	ACHIEVED Signature	In collaboration with PS/PA, uses appropriate communication skills to support people, families and carers to manage their care when appropriate.	LEVEL 1 - Dependent	The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 7.2; 7.3; 7.4; 7.5 : EU clinical instruction Directives B1-B7	work in partnership with people to encourage manage their own care when appropriate
Date	ACHIEVED Signature	Obtains informed consent prior to nursing interventions. In collaboration with PS/PA, answers questions from patients/families or refers on as appropriate. Uses range of information sources e.g. translators, alternative language, audio or graphics, props to meet individual needs.	LEVEL 2 - Developing Independence	<i>The Code</i> (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 3.4; 4.1; 5.2; 5.5; 7.1; 7.2; 7.3; 7.4; 7.5; 14.2; 18.2; 18.3; 20.6; 20.7; 20.10: EU clinical instruction Directives B1-B7	demonstrate the knowledge, communication and relationship management skills required to provide people, families and carers with accurate information that meets their needs before, during and after a range of interventions	Date	ACHIEVED Signature	Uses appropriate communication skills to support people, families and carers to manage their care when appropriate.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6;; 3.1; 3.2; 3.3; 3.4; 4.1; 4.2; 4.3; 4.4; 5.1; 5.2; 5.3; 5.4; 5.5; 7.1; 7.2; 7.3; 7.4; 7.5 : EU clinical instruction Directives B1-B7	work in partnership with people to encourage shared decision making in order to support individuals, their families and carers to manage their own care when appropriate
Date	ACHIEVED Signature	Takes an active role in supporting people and families prior to and after interventions. Where appropriate, provides patients/families with results from procedures or refers on where necessary. Identifies additional support services which the person may require/makes referrals to other services.	LEVEL 3 - Independent	4.1; 5.2; 5.5; 7.1; 7.2; 7.3; 7.4; 7.5; 14.2;	to provide people, families and carers with	Date	ACHIEVED Signature	Identifies opportunities to participate in shared decision making with people, families and carers to manage their care when appropriate.	LEVEL 3 - Independent	4.1; 4.2; 4.3; 4.4; 5.1; 5.2; 5.3; 5.4; 5.5; 7.1;	ndividuals, their families and carers to

																4.4
Date	ACHIEVED Signature	impacts of mental ill health.	nursing care to reduce the negative	the PS/PA, provides evidence-based	people of all abilities. In collaboration with	with PS/PA, communicates effectively with	approaches to treatment. In collaboration	conditions in the practice area and	a number of common mental health	In conversation with the PS/PA, discusses	LEVEL 1 - Dependent	Directives B1-B7	7.4; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3; 13.4; 17.1; 17.2; 17.3; 20.1; 20.2; 20.3; 20.4;	The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5	and learning challenges, and act as a role m	demonstrate the knowledge and skills require
Date	ACHIEVED Signature		health.	reduce the negative impacts of mental ill	Provides evidence-based nursing care to	aides to ensure effective communication.	people of all abilities. Uses techniques and	conditions. Communicates effectively with	a number of common mental health	Demonstrates ability to support people with	LEVEL 2 - Developing Independence		17.1; 17.2; 17.3; 20.1; 20.2; 20.3; 20.4; 20.5;	The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.1; 3.4; 4.1; 4.2; 4.3; 5.1; 5.2; 5.3; 5.4; 5.5; 6.2; 7.1; 7.2; 7.3;	and learning challenges, and act as a role model for others in providing high quality nursing interventions to meet people's needs	demonstrate the knowledge and skills required to support people with commonly encountered mental health, behavioural, cognitive
Date	ACHIEVED Signature	takes steps to address.	Identifies gaps in own knowledge and	challenges appropriately when not.	ensuring care is evidence based and	challenges. Acts as a role model by	behavioural, cognitive and learning	commonly encountered mental health,	evaluating care with people with a range of	Takes an active role in planning and	LEVEL 3 - Independent		20.5; 20.6; 20.8; 22.3: EU clinical instruction	4.3; 5.1; 5.2; 5.3; 5.4; 5.5; 6.2; 7.1; 7.2; 7.3;	g interventions to meet people's needs	red mental health, behavioural, cognitive

4.5	demonstrate the knowledge and skills required to support people with commonly encountered physical health conditions, their medication usage and treatments, and act as a role model for others in providing high quality nursing interventions when meeting people's needs The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 4.1; 4.2; 5.1; 5.2; 5.3; 5.4; 5.5; 6.1; 6.2; 7.1; 7.2; 7.3;	ed to support people with commonly encount a role model for others in providing high quarters are model for 2.1; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.1; 4.1; 4.2; 5.1;	5 a e
	The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 4.1; 4.2; 5.1; 5.2; 5.3; 5.4; 5.5; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3; 13.4; 18.1; 18.2; 18.3; 20.1; 20.2; 20.3; 20.4; 20.5; 20.6; 20.8; 22.3: EU clinical instruction Directives B1-B7	The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 4.1; 4.2; 5.1; 5.2; 5.3; 5.4; 5.5; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3; 13.4; 18.1; 18.2; 18.3; 20.1; 20.2; 20.3; 20.4; 20.5; 20.6; 20.8; 22.3: EU clinical instruction Directive B1-B7	ى بى
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	
	In conversation with the PS/PA, discusses a number of common physical conditions in the practice area and approaches to	Demonstrates ability to support people with a number of common physical health conditions. Communicates effectively with	ith 1
	discusses the principles of medicines	management. Provides evidence-based	
	management and pharmacology of	nursing care to reduce the negative	
	practice area. In collaboration with the	inpacts of physical in fleatur.	
	PS/PA, provides evidence-based nursing care to reduce the negative impacts of		
	ACHIEVED Signature	ACHIEVED Signa	Signature ACHIEVED
	Date	Date	

demonstrate the knowledge, skills and ability to act as a role model for others in providing evidence-based nursing care to meet people's needs related to nutrition, hydration and bladder and bowel health The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2; 3; 2.4; 2.5; 2.6; 3.1; 4.1; 4.2; 5.1; 5.2; 5.3; 5.4; 5.5; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3; 13.4; 20.1; 20.2; 20.3; 20.4; 20.5; 20.6; 20.8; 22.3; EU clinical instruction Directives B1-B7 LEVEL 1 - Dependent In conversation with PS/PA, explains the signs and symptoms of dehydration and mutritional needs suring evidence-based tools to assess fluid and nutritional needs and bladder and bowel function. Assists with tolieting whilst any problems with bladder/bowel function to PS/PA. Takes an active role in planning and evaluating nursing care to address evaluating nursing care to address people's fluid and nutritional needs. Undertakes assessment of bladder and bowel function. Assists with tolieting whilst and reports back to PS/PA. Identifies when to PS/PA. Takes an active role in planning and evaluating nursing care to promote bladder and bowel function to set appropriate goals regarding fluid and appropriate referrals to other health earle professionals or services. Communicates effectively with people to set appropriate goals regarding fluid and evidence based and challenges appropriately when not. Identifies gaps in own knowledge and takes steps to address. ACHIEVED Signature Signature	Date	Da	Date	Date	
demonstrate the knowledge, skills and ability to act as a role model for others in providing evidence-based nursing care to meet people's needs related to nutrition, hydration and bladder and bowel health necorversation with PS/PA, explains the signs and symptoms of dehydration and maintaining privacy and dignity. Reports any problems with bladder/bowel function to PS/PA. LEVEL 1 - Developing Independence LEVEL 2 - Developing Independence LEVEL 3 - Independent LEVEL 3 - Developing Independence LEVEL 3 - Developing Independence LEVEL 3 - Independent LEVEL 3 - In		Signature			
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demonstrate the knowledge, skills and ability to act as a role model for others in providing evidence-based nursing care to meet people's needs related to nutrition, hydration and bladder and bowel health	5.3; 5.4; 5.5; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4;	2.2;2.3; 2.4; 2.5; 2.6; 3.1; 4.1; 4.2; 5.1; 5.2;	4; 1.5; 2.1; 2	<i>he Code</i> (NMC, 2018) 1.1; 1.2; 1.3; 1. ²	
demonstrate the knowledge, skills and ability to act as a role model for others in providing evidence-based nursing care to meet	9	ladder and bowel health	ation and bl	eople's needs related to nutrition, hydr	
	dence-based nursing care to meet	t as a role model for others in providing evid	ability to act	emonstrate the knowledge, skills and a	4.6

				4.7
Date	ACHIEVED Signature	In collaboration with the PS/PA, provides evidence-based nursing care which meets people's needs regarding mobility, hygiene, oral care, wound care and skin integrity.	The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3; 13.4; 20.1;	demonstrate the knowledge, skills and ability to act as a role model for others in providing evidence-based, person-centred nursing care to meet people's needs related to mobility, hygiene, oral care, wound care and skin integrity
Date	ACHIEVED Signature	Uses evidence-based tools to assess people's needs regarding mobility, hygiene, oral care, wound care and skin integrity and reports back to PS/PA. Provides evidence-based care which meets people's needs regarding mobility, hygiene, oral care, wound care and skin integrity with increasing independence. Identifies when people may need referral to other health care professionals or services.	<i>The Code</i> (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 4.1; 4.2; 5.1; 5.2; 5.3; 5.4; 5.5; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4; 9.1; 9.2; 9.3; 9.4; 13.1; 13.2; 13.3; 13.4; 20.1; 20.2; 20.3; 20.4; 20.5; 20.6; 20.8; 22.3: EU clinical instruction Directives B1-B7	demonstrate the knowledge, skills and ability to act as a role model for others in providing eviden care to meet people's needs related to mobility, hygiene, oral care, wound care and skin integrity
Date	ACHIEVED Signature	Takes an active role in planning and evaluating nursing care to address people's needs regarding mobility, hygiene, oral care, wound care and skin integrity. Makes safe and appropriate referrals to other health care professionals or services in relation to mobility, hygiene, oral care, wound care and skin integrity needs. Acts as a role model by ensuring care is evidence based and challenges appropriately when not. Identifies gaps in own knowledge and takes steps to address.	5.2; 5.3; 5.4; 5.5; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4; Sinical instruction Directives B1-B7	evidence-based, person-centred nursing negrity

				4.8
Date	ACHIEVED Signature	In conversation with PS/PA, discusses a range of interventions for people with commonly encountered symptoms. In collaboration with PS/PA, provides evidence-based nursing care to people with a range of commonly encountered symptoms.	The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 8.3; 8.5; 8.6; 11.1; 11.2; 11.3; 13.1; 13.2; 13.	demonstrate the knowledge and skills required to identify and initiate appencountered symptoms including anxiety, confusion, discomfort and pain
Date	ACHIEVED Signature	Uses evidence-based tools to assess commonly encountered symptoms and discusses findings with PS/PA. Provides evidence-based care to people with commonly encountered symptoms with increasing independence. Identifies when people may need referral to other health care professionals or services.	The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6; 3.1; 3.3; 4.1; 4.2; 4.3; 5.1; 5.2; 5.3; 5.4; 5.5; 6.1; 6.2; 8.1; 8.2; 8.3; 8.5; 8.6; 11.1; 11.2; 11.3; 13.1; 13.2; 13.3; 13.4: EU clinical instruction Directives B1-B7	demonstrate the knowledge and skills required to identify and initiate appropriate interventions to support people with commonly encountered symptoms including anxiety, confusion, discomfort and pain
Date	ACHIEVED Signature	Takes an active role in planning and evaluating nursing care to address commonly encountered symptoms. Makes safe and appropriate referrals to other health care professionals or services in relation to commonly encountered symptoms. Acts as a role model by ensuring care is evidence based and challenges appropriately when not. Identifies gaps in own knowledge and takes steps to address.	4.3; 5.1; 5.2; 5.3; 5.4; 5.5; 6.1; 6.2; 8.1; 8.2; 37	tions to support people with commonly

The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6: EU clinical instruction Directives B1-B7 LEVEL 1 - Dependent In conversation with PS/PA, discusses common signs and symptoms of people for signs of deterioration in mental people for signs of deterioration in mental people for signs of deterioration in mental people for signs of deterioration.	In conversation with PS/PA, discusses the principles of palliative care. In collaboration with the PS/PA, provides evidence-based palliative care. In conversation with the PS/PA, discusses sources of support for people who are dying and for the bereaved. ACHIEVED LEVEL 2 - Developing Independence with increasing independence. Identifies when people may need referral to other health care professionals or services. ACHIEVED Signature LEVEL 2 - Developing Independence with increasing independence. Identifies when people may need referral to other health care professionals or services. ACHIEVED Signature Date	demonstrate the knowledge and skills required to prioritise what is important to people and their families when providing evidence-based person-centred nursing care at end of life including the care of people who are dying, families, the deceased and the bereaved <i>The Code</i> (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6: EU clinical instruction Directives B1-B7
0	er es	portant to people and their famil people who are dying, families, 6: EU clinical instruction Directiv
and challenges appropriately when not. Identifies gaps in own knowledge and takes steps to address. ACHIEVED Date Of deterioration or distress in mental, physical,	Takes an active role in planning and evaluating palliative nursing care. Makes safe and appropriate referrals to other health care professionals or services in relation to people requiring palliative care and the bereaved. Acts as a role model by ensuring care is evidence based	nilies when providing evidence- s, the deceased and the bereaved tives B1-B7

4.11	demonstrate the knowledge and skills required to initiate and evaluate appropriate self-harm and/or suicidal ideation		interventions to support people who show signs of
	The Code (NMC, 2018) 1.1; 1.2; 1.3; 1.4; 1.5; 2.1; 2.2;2.3; 2.4; 2.5; 2.6: EU clinical		instruction Directives B1-B7
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	In conversation with PS/PA, discusses common signs of self-harm and suicide ideation.	Identifies when people show signs of self- harm and/or suicide ideation and alerts clinical staff promptly and appropriately.	Recognises people at risk of self-harm and/or suicidal ideation and demonstrates the knowledge and skills required to support person-centred care using evidence-based risk assessment tools.
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date
4.12	demonstrate the ability to manage commonly encountered devices and confidently people's needs for evidence-based, person-centred care		carry out related nursing procedures to meet
	The Code (NMC, 2018) N/A: EU clinical instruction Directives B1-B7	uction Directives B1-B7	
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
-	In conversation with PS/PA, demonstrates an understanding of the safe and effective	Safely and effectively uses devices commonly encountered in the practice	Safely and effectively uses devices commonly encountered in the practice area
	use of devices commonly encountered in the practice area. In collaboration with the	area with increasing independence where appropriate. Recognises when devices are	with increasing independence where appropriate. Recognises when devices are
	PS/PA, safely and effectively uses devices commonly encountered in the practice	not functioning as required and makes sound clinical decisions regarding	not functioning as required and makes sound clinical decisions regarding
	area. Recognises and reports when devices are not functioning as required.	malfunction.	malfunction with increasing confidence.
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date

				4.14				4.13
Date	ACHIEVED Signature	Shadow your PS/PA carrying out medication administration. Demonstrate safe and effective practice in distinct processes of medicines administration, e.g. identity check, preparation of medication, drawing up an injectable preparation or administering a topical product. In discussion with PS/PA demonstrate understanding of medicines management policies. Demonstrate safe and effective disposal of waste.	The Code (NMC, 2018) 18.1; 18.2; 18.3: EU clinical instruction Directives B1-B7		Date	ACHIEVED Signature	The Code (NMC, 2018) 1.4; 6.2; 15.1; 15.2; 15.3: EU clinical instruction Directives LEVEL 1 - Dependent In discussion with PS/PA, demonstrate knowledge of first aid procedures. Know where in the learning environment to find first aid equipment and personnel. In discussion, demonstrate awareness of basic life support procedures and equipment. LEVEL 2 - Developing Independent In discussion with PS/PA, demonstrate knowledge of first aid procedures. Know where in the learning environment to find first aid equipment and personnel. Demonstrate awareness of basic life support procedures and ways of summoning help. Demonstrate orien to BLS equipment in the learning environment and an awareness of th student role in life support.	
Date	ACHIEVED Signature	Shadow your PS/PA carrying out medication administration and participate in supervised medicines medicines after and effective practice in supervised medicines administration and supervised medicines administration and drug calculations. Demonstrate understanding of medicines management policies and where to seek assistance should support be required. Demonstrate safe and effective disposal of waste.	clinical instruction Directives B1-B7	understand the principles of safe and effective administration and optimisation of medicines in accordance with local and nationa policies and demonstrate proficiency and accuracy when calculating dosages of prescribed medicines	Date	ACHIEVED Signature	LEVEL 2 - Developing Independence In discussion with PS/PA, demonstrate knowledge of first aid procedures. Know where in the learning environment to find first aid equipment and personnel. Demonstrate awareness of basic life support procedures and ways of summoning help. Demonstrate orientation to BLS equipment in the learning environment and an awareness of the student role in life support.	
Date	ACHIEVED Signature	Safely and effectively administer medications, supervised by your PS/PA. Complete drug calculations independently, checked by PS/PA. Demonstrate compliance with medicines management policies and awareness of where to find information and support.		s in accordance with local and national dimedicines	Date	ACHIEVED Signature	In discussion with PS/PA, demonstrate knowledge of first aid procedures. Where possible demonstrate first aid skills. Know where in the learning environment to find first aid equipment and personnel, including escalation procedures when required. Demonstrate knowledge of basic life support procedures. Demonstrate ability to perform BLS and knowledge of equipment within the learning environment. Understand how to summon assistance and escalate as required.	c life support

					4.16				4.15
Date	ACHIEVED Signature	In discussion with PS/PA, demonstrate understanding of prescription generation. Show awareness of risks associated with prescribing and how to seek assistance.	LEVEL 1 - Dependent	The Code (NMC, 2018) 18.1; 18.2; 18.3: EU clinical instruction Directives B1-B7	demonstrate knowledge of how prescriptions can be generated, the role of generic, understanding of the potential risks associated with these approaches to prescribing	Date	ACHIEVED Signature	The Code (NMC, 2018) 18.1; 18.2; 18.3: EU clinical instruction Directives B1-B7 LEVEL 1 - Dependent In discussion with PS/PA, demonstrate knowledge of the effects of common drugs. Identify signs of allergy or adverse drug reactions and know how to summon help. In discussion, demonstrate understanding of polypharmacy and use of OTC medication. In discussion, demonstrate understanding of polypharmacy and use of OTC admission or prescribing paperwore find pharmacological information. Identify polypharm discussion, demonstrate knowledge of the effects of common drugs. Identify signs of all subject to the effects of common drugs. Identify signs of all subject to the effects of common drugs. Identify signs of all subject to the effects of common help. In discussion, demonstrate understanding of polypharmacy and use of OTC in discussion or prescribing paperwore discussion, demonstrate understanding of whom the prescribing paperwores.	demonstrate knowledge of pharmacology an contraindications, incompatibilities, adverse i
Date	ACHIEVED Signature	Demonstrate understanding of safe prescription generation. Show awareness of risks associated with prescribing, alternative sources of medication and understand reporting procedures.	LEVEL 2 - Developing Independence	clinical instruction Directives B1-B7	s can be generated, the role of generic, unlicered with these approaches to prescribing	Date	ACHIEVED Signature	clinical instruction Directives B1-B7 LEVEL 2 - Developing Independence Demonstrate knowledge of the effects of common drugs. Identify signs of allergy or adverse drug reactions and know how to summon help. In discussion, demonstrate understanding of polypharmacy and use of OTC medication. Identify polypharmacy on admission or prescribing paperwork. Demonstrate understanding of where to find pharmacological information. In discussion, demonstrate knowledge of prescribing error procedures.	demonstrate knowledge of pharmacology and the ability to recognise the effects of medicines, allergies, drug sensitivities, side effects, contraindications, incompatibilities, adverse reactions, prescribing errors and the impact of polypharmacy and over the counter
Date	ACHIEVED Signature	Challenge poor prescribing in the learning environment. Understand the source of further information. Demonstrate ability to source pharmacological information from both written sources and practitioners.	LEVEL 3 - Independent		unlicensed, and off-label prescribing and an	Date	ACHIEVED Signature	LEVEL 3 - Independent Demonstrate knowledge of the effects of drugs and recognise side effects. Identify signs of allergy or adverse drug reactions and know how to summon help. Demonstrate understanding of polypharmacy and challenge it when encountered. Demonstrate understanding of where to find pharmacological information. Demonstrate knowledge of prescribing error procedures and of the safe prescription processes.	nes, allergies, drug sensitivities, side effects, polypharmacy and over the counter

In discus the nece safe and	Observe with you understa arranger consider	LEVEL .	The Coc	4.18 demonst	Date	ACHIEVED	Demons aware o the phar encount and dem necessa	LEVEL .	The Coc	4.17 apply know registration
	Observe the discharge/transfer process with your PS/PA. Demonstrate understanding of the details and arrangements which need to be considered. Demonstrate your ability to document arrangements made in records. In discussion, demonstrate awareness of the necessary communication required for safe and effective discharge/transfer.	LEVEL 1 - Dependent	The Code (NMC, 2018) 3.3; 5.4: EU clinical instruction Directives B1-B7	demonstrate the ability to coordinate and undertake the processes safe discharge home or transfer of people between care settings		ED Signature	Demonstrate in discussion that you are aware of prescribing procedures. Discuss the pharmacological effects of medications encountered in the learning environment and demonstrate understanding of the necessary administration procedures.	LEVEL 1 - Dependent	The Code (NMC, 2018) 18.1; 18.2; 18.3: EU clinical instruction Directives B1-B7	owledge of pharmacology to the care on
10LIEV/ED 0:250+1150	Take part, alongside your PS/PA, in a conversation about discharge home/transfer. Demonstrate understanding of the details and arrangements which need to be considered and how to make the necessary plans. Demonstrate your ability to document arrangements made in records. Demonstrate awareness of the necessary communication required for safe and effective discharge/transfer.	LEVEL 2 - Developing Independence	instruction Directives B1-B7	dertake the processes and procedures involved	Date	ACHIEVED Signature	Understand and demonstrate prescribing procedures, supervised by your PS/PA. Discuss the pharmacological effects of medications encountered in the learning environment and demonstrate understanding of the necessary administration procedures.	LEVEL 2 - Developing Independence	clinical instruction Directives B1-B7	apply knowledge of pharmacology to the care of people, demonstrating the ability to progre registration
	Initiate and carry out a conversation about discharge home/transfer with your PS/PA observing. Make arrangements, with support of your supervisor, and record these arrangements appropriately. Initiate and carry out communication between stakeholders in the discharge or transfer of an individual, observed by your supervisor.	LEVEL 3 - Independent		and procedures involved in routine planning and management of	Date	ACHIEVED Signature	Understand and demonstrate prescribing procedures independently, checked by your PS/PA. Discuss the pharmacological effects of medications encountered in the learning environment and demonstrate understanding of the necessary administration procedures.	LEVEL 3 - Independent		progress to a prescribing qualification following

Platform 5: leading and managing nursing care and working in teams

others in the team including lay carers. They play an active and equal role in the interdisciplinary team, collaborating and communicating with a range of colleagues. responsible for managing nursing care and are accountable for the appropriate delegation and supervision of care provided by Registered nurses provide leadership by acting as a role model for best practice in the delivery of nursing care. They are

					5.2						5.1	Platt
Date	ACHIEVED Signature	Discuss with PS/PA principles of effective team working.	LEVEL 1 - Dependent	The Code (NMC, 2018) 1.1; 1.3; 1.4; 1.5; 2.1 7.5; 8.2; 13.2; 13.3; 13.4; 16.2; 16.3; 17.3; 1;	understand and apply the principles of huma	Date	ACHIEVED Signature	Discuss with PS/PA principles of leadership and working within teams.	LEVEL 1 - Dependent	The Code (NMC, 2018) 4.3; 4.4; 5.4; 6.2; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 8.2; 8.3; 8.4; 8.5; 10.5; 11.1; 11.2; 11.3; 13.2; 13.3; 13.5; 15.1; 15.3; 16.1; 16.2; 16.3; 17.2; 19.1; 19.2; 20.10; 25.1; 25.2: EU clinical instruction Directives B1-B7	understand the principles of effective leaders team working and decision-making	Platform 5: Leading and managing nursing care and working in teams
Date	ACHIEVED Signature	Demonstrate ability to recognise how human, environmental factors impact on team function.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 1.1; 1.3; 1.4; 1.5; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 3.4; 4.2; 4.2; 4.3; 5.1; 5.2; 5.3; 5.5; 7.1; 7.2; 7.3; 7.4; 7.5; 8.2; 13.2; 13.3; 13.4; 16.2; 16.3; 17.3; 19.2; 25.1: EU clinical instruction Directives B1-B7	understand and apply the principles of human factors, environmental factors and strength-based approaches when working in teams	Date	ACHIEVED Signature	Demonstrate ability to work effectively within a team recognising how dynamics and culture influence decision-making.	LEVEL 2 - Developing Independence	4; 7.5; 8.1; 8.2; 8.3; 8.4; 8.5 16.2; 16.3; 17.2; 19.1; 19.2;	understand the principles of effective leadership, management, group and organisational dynamics and culture and apply these to team working and decision-making	d working in teams
Date	ACHIEVED Signature	Demonstrate ability to effectively lead and promote team cohesion and function.	LEVEL 3 - Independent	4.2; 4.3; 5.1; 5.2; 5.3; 5.5; 7.1; 7.2; 7.3; 7.4; -B7	-based approaches when working in teams	Date	ACHIEVED Signature	Initiate leadership in care delivery and demonstrate understanding of organisational dynamics and culture.	LEVEL 3 - Independent	; 8.6; 8.7; 9.1; 9.2; 9.3; 9.4; 10.1; 10.2; 10.3; 10.4; 19.4; 20.1; 20.3; 20.5; 20.6; 20.7; 20.8; 20.9;	dynamics and culture and apply these to	

				5.4						5.3
ACHIEVED Signature	Discuss with PS/PA the principles of an effective Multi-disciplinary team (MDT).	LEVEL 1 - Dependent	The Code (NMC, 2018) 5.4; 8.2; 8.3; 8.4; 8.5; 8.6; 9.3; 11.1; 11.2; 11.3; 13.2; 13.3;	demonstrate an understanding of the roles, responsibilities and scope of practice of team and how to make best use of the contributions of others involved in providing				LEVEL 1 - Dependent	The Code (NMC, 2018) 8.1; 8.2; 8.4; 8.7; 9.1; 9.2; 9.3; 9.4; 11.1; 11.2; 11.3; 12.1; 19.3; 19.4; 20.1; 20.2; 20.3; 20.5; 20.8; 22.2; 22.3; 23.1; 23.2; 23.3; 23.4; 23.5; 24 B1-B7	understand the principles and application of
ACHIEVED Signature	Demonstrate an understanding of the roles of all those within the MDT and how they impact on the delivery of care.	LEVEL 2 - Developing Independence	5; 8.6; 9.3; 11.1; 11.2; 11.3; 13.2; 13.3; 13.5; 2	demonstrate an understanding of the roles, responsibilities and scope of practice of all members of the nursing and interdisciplinary team and how to make best use of the contributions of others involved in providing care	Date	ACHIEVED Signature	Discuss how performance concerns can affect practice. Discuss local policies for escalation and seeking support.	LEVEL 2 - Developing Independence		understand the principles and application of processes for performance management and how these apply to the nursing team
ACHIEVED Signature	As an active member of the MDT, lead and manage team collaboration to enhance and coordinate patient care.	LEVEL 3 - Independent	13.5; 25.1: EU clinical instruction Directives B1-B7	mbers of the nursing and interdisciplinary	Date	ACHIEVED Signature	Gather and reflect on feedback from a variety of sources, using it to improve your practice and performance.	LEVEL 3 - Independent	13.5; 16.1; 16.2; 16.3; 16.4; 16.5; 16.6; 19.1; 19.2; 1; 24.2; 25.1; 25.2 : EU clinical instruction Directives	how these apply to the nursing team

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Signature
Demonstrate appropriate use of support and motivational skills with members of the care team.
LEVEL 2 - Developing Independence
<i>The Code</i> (NMC, 2018) 7.1; 7.4; 7.5; 8.1; 8.2; 8.4; 8.7; 9.1; 9.2; 9.3; 11.1; 11.2; 11.3; 22; 20.3; 20.8; 25.1; 25.2: EU clinical instruction Directives B1-B7
members of the care team
2
Signature
In collaboration with PS/PA using appropriate prioritisation and delegation principles assign care responsibilities to appropriate care providers e.g. HCSW.
LEVEL 2 - Developing Independence
<i>The Code</i> (NMC, 2018) 5.4; 6.2; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 8.2; 8.3; 8.4; 8.5; 8.6; 8.7; 9.1; 9.2; 9.3; 9.4; 10.1; 10.2; 10.3; 10.4; 10.5; 11.1; 11.2; 11.3; 13.2; 13.3; 13.5; 15.1; 15.3; 16.1; 16.2; 16.3; 17.2; 19.1; 19.2; 19.4; 20.1; 20.3; 20.5; 20.6; 20.7; 20.8; 20.9; 20.10; 25.1; 25.2: EU clinical instruction Directives B1-B7
safely and effectively lead and manage the nursing care of a group of people, demonstrating appropriate prioritisation, delegation and assignment of care responsibilities to others involved in providing care

				5ī .8						5.7
		LEVEL 1 - Dependent	The Code (NMC, 2018) 6.1; 7.1; 7.4; 7.5; 9.4 Directives B1-B7	support and supervise students in the delivery of nursing care, promoting reflection evaluating and documenting their performance	Date	ACHIEVED Signature	Discuss with PS/PA the principles of evaluation of quality care delivery.	LEVEL 1 - Dependent	The Code (NMC, 2018) 8.4; 9.1; 9.3; 20.2; 2	demonstrate the ability to monitor and evalua
Date Signature	supervision of junior st nd providing feedback e.	LEVEL 2 - Developing Independence	<i>The Code</i> (NMC, 2018) 6.1; 7.1; 7.4; 7.5; 9.4; 10.1; 10.2; 10.3; 10.4; 10.5; 11.1; 11.2; 11.3; 20.8; 25.2: EU clinical instruction Directives B1-B7	ry of nursing care, promoting reflection and pr	Date	ACHIEVED Signature	In collaboration with PS/PA demonstrate ability to identify, monitor and evaluate quality of care delivery.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 8.4; 9.1; 9.3; 20.2; 25.1; 25.2: EU clinical instruction Directives B1-B7	demonstrate the ability to monitor and evaluate the quality of care delivered by others in the team and lay carers
ACHIEVED Signature Date	te effective support an for learners, engage scussions evaluating g performance.	LEVEL 3 - Independent	3; 20.8; 25.2: EU clinical instruction	and providing constructive feedback, and	Date	ACHIEVED Signature	Demonstrate ability to appraise, monitor and evaluate the care delivered by team members.	LEVEL 3 - Independent	I-B7	he team and lay carers

Date
Signature
Demonstrate ability to contribute to group discussions / reflection on improvements in practice and service.
ice
The Code (NMC, 2018) 8.2; 8.4; 9.1; 9.2; 9.3; 9.4; 11.2: EU clinical instruction Directives B1-B7
practice and services
Signature
within the team. Reflect on own personal learning outcomes and identifying needs.
and managing expectations of others
Discuss with PS/PA challenging situations
ıce
The Code (NMC, 2018) 2.1; 3.4; 8.2; 8.4; 9.1; 9.3; 9.4; 20.3; 20.5; 25.1: EU clinical instruction Directives B1-B7
delivered by others in the team, and support them

ACHIEVED	organisational poli	LEVEL 1	The Code	5.12 understan	Date	ACHIEVED	Discuss and digital techno environment.	LEVEL 1	The Code	5.11 effectively and res
D Signature	organisational policies and impact of political influences.	LEVEL 1 - Dependent Discuss with PS/PA elements of	(NMC, 2018) 8.2; 9.2; 20.3; 20.7:	understand the mechanisms that can be use political awareness and skills		D Signature	Discuss and identify with PS/PA a range of digital technologies within the working environment.	LEVEL 1 - Dependent	(NMC, 2018) 8.2; 8.6; 10.4; 10.5;	and responsibly use a range of digagencies
ACHIEVED Signature	ability to distinguish between organisational and political changes.	In collaboration with PS/PA demonstrate	The Code (NMC, 2018) 8.2; 9.2; 20.3; 20.7: EU clinical instruction Directives B1-B7	understand the mechanisms that can be used to influence organisational change and public policy, demonstrating the development of political awareness and skills	Date	ACHIEVED Signature	In collaboration with PS/PA demonstrate ability to share and record information within the team and other agencies utilising digital technologies.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 8.2; 8.6; 10.4; 10.5; 10.6; 20.4: EU clinical instruction Directives B1-B7	effectively and responsibly use a range of digital technologies to access, input, share and apply information and data within teams and between agencies
ACHIEVED Signature	and external influences on organisational change policies and political awareness.	LEVEL 3 - Independent Ability to analyse and recognise internal		ic policy, demonstrating the development of	Date	ACHIEVED Signature	Ability to input, access and share relevant information/data utilising digital technologies within the team and other agencies.	LEVEL 3 - Independent	1-B7	apply information and data within teams and

Platform 6: Improving safety and quality of care

Registered nurses make a key contribution to the continuous monitoring and quality improvement of care and treatment in order to enhance health outcomes and people's experience of nursing and related care. They assess risks to safety or experience and take appropriate action to manage those, putting the best interests, needs and preferences of people first.

					6.2						6.1	Platf
Date	ACHIEVED Signature	In conversation with your PS/PA consider the relationships between safe staffing and skill mix. Know where to access the HEI and NMC guidance about raising concerns.	LEVEL 1 - Dependent	The Code (NMC, 2018) 8.5, 10.2, 11.1, 16.1,	understand the relationship between safe staffing levels, appropriate skills mix, safet protection and quality of care, escalating concerns appropriately	Date	ACHIEVED Signature	In conversation with your PS/PA demonstrate a foundation understanding of the principles of health and safety legislation and regulations.	LEVEL 1 - Dependent	The Code (NMC, 2018) 13.4, 16.1, 19.1, 19.	understand and apply the principles of health	Platform 6: Improving safety and quality of care
Date	ACHIEVED Signature	In conversation with your PS/PA consider the evidence that demonstrates the relationship between safe staffing levels, appropriate skills mix, safety and quality of care, recognising risks to public protection and quality of care.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 8.5, 10.2, 11.1, 16.1, 19.1, 25.1: EU clinical instruction Directives B1-B7	affing levels, appropriate skills mix, safety and ocerns appropriately	Date	ACHIEVED Signature	Be able to reflect on your knowledge of the principles of health and safety legislation and regulations to the maintenance of safe work and care environments.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 13.4, 16.1, 19.1, 19.2, 19.3, 19.4, 20.4: EU clinical instruction Directives B1-B7	understand and apply the principles of health and safety legislation and regulations and maintain safe work and care environments	
Date	ACHIEVED Signature	In conversation with your PS/PA explain the processes involved in raising concerns appropriately. Consider the impact on public protection and quality of care.	LEVEL 3 - Independent	B1-B7	y and quality of care, recognising risks to public	Date	ACHIEVED Signature	Be able to understand and apply the processes of health and safety legislation when any circumstances impact on a safe work and care environment.	LEVEL 3 - Independent	ctives B1-B7	aintain safe work and care environments	

	ACHIEVED	In conversatic the principles	LEVEL 1 - Dependent	The Code (NN	6.4 demonstrate appropriate qu	Date	ACHIEVED	In conversation with you the local and national from legislation and regulation managing and reporting impact on your practice.	The Code (NN	6.3 comply with local and national appropriate action is taken
	Signature	In conversation with your PS/PA consider the principles of quality improvement.	pendent	1C, 2018) 6.2, 8.4, 10.2, 19.2:	demonstrate an understanding of the princip appropriate quality improvement strategies		Signature	In conversation with your PS/PA consider the local and national frameworks, legislation and regulations for assessing, managing and reporting risks and their impact on your practice.	10, 2018) 3.4, 43, 10.2, 14.1, i	cal and national frameworks, lition is taken
(ACHIEVED Signature	In conversation with your PS/PA consider the range of methodologies available to develop practice and how you might use them.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 6.2, 8.4, 10.2, 19.2: EU clinical instruction Directives B1-B7	demonstrate an understanding of the principles of improvement methodologies, participate appropriate quality improvement strategies	Date	ACHIEVED Signature	In conversation with your PS/PA consider how you will action the local and national frameworks, legislation and regulations for assessing, managing and reporting risks and their impact on your practice.	The Code (NMC, 2018) 3.4, 43, 10.2, 14.1, 16.1, 17.2, 17.3, 19.1, 19.4, 20.4, 25.1: EU clir	comply with local and national frameworks, legislation and regulations for assessing, managing and reporting risks, ensuring the appropriate action is taken
	ACHIEVED Signature	Participate in audit activity in your PLE and share with your PS/PA how the outcomes may inform quality improvement.	LEVEL 3 - Independent		rticipate in all stages of audit activity and identify	Date	ACHIEVED Signature	In your practice be able to demonstrate how you comply with local and national frameworks, legislation and regulations for assessing, managing and reporting risks and ensure the appropriate action is taken and documented.	EU clinical instruction Directives B1-B7	aging and reporting risks, ensuring the

					6.7						6.6						6.5
Date	ACHIEVED Signature	In conversation with your PS/PA consider how nursing care can be evaluated and how findings may be used to improve practice.	LEVEL 1 - Dependent	The Code (NMC, 2018) 8.4, 8.6, 19.2, 25.1: EU clinical instruction Directives B1-B7	understand how the quality and effectiveness of nursing care can be evaluated delivery evaluation and audit findings to bring about continuous improvement	Date	ACHIEVED Signature	In conversation with your PS/PA discuss risk reduction strategies.	LEVEL 1 - Dependent	The Code (NMC, 2018) 8.5, 8.6, 10.2, 16.1,	identify the need to make improvements and	Date	ACHIEVED Signature	In conversation with your PS/PA consider the principles of risk assessment and the tools that may be available to do this.	LEVEL 1 - Dependent	The Code (NMC, 2018) 8.6, 10.2, 19.1, 19.2: EU clinical instruction Directives B1-B	demonstrate the ability to accurately undertake risk assessments in a range of care assessment and improvement tools
Date	ACHIEVED Signature	Under supervision participate in evaluations in and of practice, for example completing audits or assisting people to complete evaluations.	LEVEL 2 - Developing Independence	EU clinical instruction Directives B1-B7	understand how the quality and effectiveness of nursing care can be evaluated in practice, and demonstrate how to use service delivery evaluation and audit findings to bring about continuous improvement	Date	ACHIEVED Signature	Under supervision implement risk reduction strategies.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 8.5, 8.6, 10.2, 16.1, 17.2, 19.2, 20.4, 25.1: EU clinical instruction Directives B1-B7	identify the need to make improvements and proactively respond to potential hazards that may affect the safety of people	Date	ACHIEVED Signature	Under supervision undertake a risk assessment using evidence-based contemporary tools.	LEVEL 2 - Developing Independence	: EU clinical instruction Directives B1-B7	ke risk assessments in a range of care setting
Date	ACHIEVED Signature	Identify changes or improvements that have taken place as a consequence of service evaluation and consider the evidence base to support them.	LEVEL 3 - Independent		, and demonstrate how to use service	Date	ACHIEVED Signature	Initiate risk reduction strategies in response to hazards.	LEVEL 3 - Independent	Directives B1-B7	may affect the safety of people	Date	ACHIEVED Signature	Assess and document risk assessments in your PLEs.	LEVEL 3 - Independent		settings, using a range of contemporary

	The Code (NMC, 2018) 8.4, 8.6, 9.2, 10.2, 16.1, 19.1, 19.2, 22.3, 25.1: EU clinical in:	The Code (NMC, 2018) 8.4, 8.6, 9.2, 10.2, 16.1, 19.1, 19.2, 22.3, 25.1: EU clinical instruction Directives B1-B7	on Directives B1-B7
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	In conversation with your PS/PA consider the process used to identify and report near misses, critical incidents, major	Participate with your PS/PA to complete the appropriate documentation to report near misses, critical incidents, major	Develop your understanding of how to identify, report and critically reflect on near misses, critical incidents, major incidents
	incidents and serious adverse events.	incidents and serious adverse events.	and serious adverse events by using for example the Quality Improvement Scotland or Healthcare Improvement Scotland
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date
6.9	work with people, their families, carers and of feedback and learning from positive outcome	work with people, their families, carers and colleagues to develop effective improvement strategies for quality and safety, sharing feedback and learning from positive outcomes and experiences, mistakes and adverse outcomes and experiences	rategies for quality and safety, sharing comes and experiences
	The Code (NMC, 2018) 2.1, 2.2, 5.2, 5.4, 8.1, 8.4, 8.5, 8.6, 9.1, 9.2, 10.2, 10.6, B7	, 8.4, 8.5, 8.6, 9.1, 9.2, 10.2, 10.6, 16.4, 19.1,	16.4, 19.1, 25.1: EU clinical instruction Directives B1-
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	Take some time to observe your PS/PA	In conversation with your PS/PA consider the strategies used to develop effective	Participate in activities that enable you to
	and other colleagues seeking and responding to feedback from people, their families, carers and colleagues.	the strategies used to develop effective improvement strategies.	work with people, their families, carers and colleagues to achieve the above.
	ACHIEVED Signature	ACHIEVED Signature	ACHIEVED Signature
	Date	Date	Date

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Date	ACHIEVED Signature	In conversation with your PS/PA develop an understanding of what may be considered a major incident – e.g. public health, traumatic event, adverse weather.	LEVEL 1 - Dependent	The Code (NMC, 2018) 7.1, 8.1, 8.5, 10.1, 11	understand the role of registered nurses and other health and care professionals at managing and prioritising actions and care in the event of a major incident	Date	ACHIEVED Signature	an understanding of the concept of resilience.	LEVEL 1 - Dependent	The Code (NMC, 2018) 1.3, 3.1, 6.1, 8.7, 13.1: EU clinical instruction Directives B1-B7	acknowledge the need to accept and manage self and others	Date	ACHIEVED Signature	the differences between risk aversion and risk management.	In conversation with your PS/PA consider	LEVEL 1 - Dependent	The Code (NMC, 2018) 1.3, 4.1, 4.3, 5.4, 17.	apply an understanding of the differences bet and health outcomes
Date	ACHIEVED Signature	Review the major incident protocols for your PLEs and share your understanding with your PS/PA.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 7.1, 8.1, 8.5, 10.1, 11.1, 13.3, 13.4, 15.1, 15.3, 19.1, 25.1: EU clinical instruction Directives B1-B7		Date	ACHIEVED Signature	accept and manage uncertainty.	LEVEL 2 - Developing Independence	1: EU clinical instruction Directives B1-B7	acknowledge the need to accept and manage uncertainty, and demonstrate an understanding of strategies that develop resilience in self and others	Date	ACHIEVED Signature	the methodologies used to develop for example SIGN or NICE Guidelines and their potential use.	In conversation with your PS/PA consider	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 1.3, 4.1, 4.3, 5.4, 17.1, 19.1, 20.3, 25.1: EU clinical instruction Directives B1-B7	apply an understanding of the differences between risk aversion and risk management and how to avoid compromising quality of care and health outcomes
Date	ACHIEVED Signature	Critically reflect on any major incidents that have recently occurred and consider the various roles and responsibilities of registered nurses and other health and care professionals.	LEVEL 3 - Independent	cal instruction Directives B1-B7	different levels of experience and seniority when	Date	ACHIEVED Signature	reflection with others and keep a reflective diary to help develop resilience in yourself and others.	LEVEL 3 - Independent		ling of strategies that develop resilience in	Date	ACHIEVED Signature	risk aversion and risk assessment and the implications for safe effective personcentred care.	Critically reflect on the difference between	LEVEL 3 - Independent	ctives B1-B7	how to avoid compromising quality of care

Platform 7: Coordinating care

Registered nurses play a leadership role in coordinating and managing the complex nursing and integrated care needs of people at any stage of their lives, across a range of organisations and settings. They contribute to processes of organisational change through an awareness of local and national policies.

					7.2						7.1	Platfo
Date	ACHIEVED Signature	In conversation with your PS/PA demonstrate a foundation understanding of some of the health and social care policies that influence the PLE.	LEVEL 1 - Dependent	The Code (NMC, 2018) 4.3, 18.2, 20.4: EU clinical instruction Directives	understand health legislation and current head development and change, differentiating whe	Date	ACHIEVED Signature	In conversation with your PS/PA demonstrate a foundation understanding of the principles of partnership and interdisciplinary working.	LEVEL 1 - Dependent	The Code (NMC, 2018) 2.1, 8.1, 8.2, 8.3, 8.4, 8.5, 8.6, 9.3, 13.2, 13.3, 17.2: EU clini	understand and apply the principles of partne	Platform 7: Coordinating Care
Date	ACHIEVED Signature	In conversation with your PS/PA demonstrate an understanding of the key methodologies applied to influence policy.	LEVEL 2 - Developing Independence	linical instruction Directives	understand health legislation and current health and social care policies, and the mechanisms involved in influencing policy development and change, differentiating where appropriate between the devolved legislatures of the United Kingdom	Date	ACHIEVED Signature	Plan and coordinate the care of people in your PLE and take and make referrals to other agencies and professionals.	LEVEL 2 - Developing Independence	l, 8.5, 8.6, 9.3, 13.2, 13.3, 17.2: EU clinical ins	understand and apply the principles of partnership, collaboration and interagency working across all relevant sectors	
Date	ACHIEVED Signature	Seek out opportunities to speak with others about health and social care legislation and apply the knowledge to your practice.	LEVEL 3 - Independent		sms involved in influencing policy ures of the United Kingdom	Date	ACHIEVED Signature	Plan and coordinate complex care and consider the influence local and national policy may have on care.	LEVEL 3 - Independent	ical instruction Directives	across all relevant sectors	

Date	ACH	In co some deve	LEVI	The	7.4 ident of po	Date	ACH	some	In co	LEVI	The	7.3 unde other
	ACHIEVED Signature	In conversation with your PS/PA identify some of the organisations that influence or develop policy.	LEVEL 1 - Dependent	<i>Code</i> (NMC, 2018) 6.2, 13.5, 17.3, 18.2,	identify the implications of current health policy and future of policy changes on the delivery and coordination of care		ACHIEVED Signature	some aspects of health economics and nursing's role in governance.	In conversation with your PS/PA consider	LEVEL 1 - Dependent	The Code (NMC, 2018) 6.1, 25.1: EU clinical instruction Directives	understand the principles of health economic other agencies
	ACHIEVED Signature	In conversation with your PS/PA identify and discuss the impact of policy on the specific PLE.	LEVEL 2 - Developing Independence	The Code (NMC, 2018) 6.2, 13.5, 17.3, 18.2, 20.4, 22.3: EU clinical instruction Directives	identify the implications of current health policy and future policy changes for nursing and other professions and understand the impact of policy changes on the delivery and coordination of care	Date	ACHIEVED Signature	the allocation of resources for complex care and nursing interventions.	In conversation with your PS/PA consider	LEVEL 2 - Developing Independence	instruction Directives	understand the principles of health economics and their relevance to resource allocation in health and social care organisations and other agencies
Date	ACHIEVED Signature	In conversation with your PS/PA and others consider how current and future health policy may influence the delivery and coordination of care.	LEVEL 3 - Independent		other professions and understand the impact	Date	ACHIEVED Signature	the allocation of resources for complex care across disciplines and agencies.	In conversation with your PS/PA consider	LEVEL 3 - Independent		n health and social care organisations and

					7.6						7.5
Date	ACHIEVED Signature	In conversation with your PS/PA consider some of the complexities of mental, cognitive, behavioural and physical care.	LEVEL 1 - Dependent	The Code (NMC, 2018) 4.1, 4.3, 8.1, 10.1, 17.3: EU clinical instruction Directives	demonstrate an understanding of the comple range of integrated care settings	Date	ACHIEVED Signature	In conversation with your PS/PA consider the needs of a person with co-morbidities and complex care needs. Share your understanding of person-centred care.	LEVEL 1 - Dependent	The Code (NMC, 2018) 1.3, 2.4, 3.3, 4.3, 5.5 Directives	understand and recognise the need to respond to the challenges of providing safe, people who have co-morbidities and complex care needs
Date	ACHIEVED Signature	In conversation with your PS/PA share your understanding of the complexities of mental, cognitive, behavioural and physical care in the PLE.	LEVEL 2 - Developing Independence	7.3: EU clinical instruction Directives	demonstrate an understanding of the complexities of providing mental, cognitive, behavioural and physical care services across a wide range of integrated care settings	Date	ACHIEVED Signature	In conversation with your PS/PA explain how you recognise and respond to the challenges of providing safe, effective person-centred care.	LEVEL 2 - Developing Independence	<i>The Code</i> (NMC, 2018) 1.3, 2.4, 3.3, 4.3, 5.5, 6.1, 6.2, 7.1, 7.4, 8.3, 8.6, 10.2, 13.2, 13.3, 17.1, 18.3, 19.1, 25.1: EU clinical instruction Directives	- 1
Date	ACHIEVED Signature	In conversation with your PS/PA and in your practice, demonstrate your understanding of the complexities of mental, cognitive, behavioural and physical care in a range of PLEs.	LEVEL 3 - Independent		ural and physical care services across a wide	Date	ACHIEVED Signature	With your PS/PA critically reflect on your practice when providing safe, effective and person-centred nursing care for people who have co-morbidities and complex care needs.	LEVEL 3 - Independent	17.1, 18.3, 19.1, 25.1: EU clinical instruction	effective and person-centred nursing care for

					7.8							7.7
Date	ACHIEVED Signature	In conversation with your PS/PA consider some of the principles and processes that may optimise a person's independence.	LEVEL 1 - Dependent	The Code (NMC, 2018) 2.1, 2.5, 3.1, 3.3, 4.1, 4.3, 5.5, 7.1, 7.2, 7.4, 8.3, 10.2, 20.5:	understand the principles and processes involved in supporting people and famil independence and avoid unnecessary interventions and disruptions to their lives	Date	ACHIEVED Signature	how you can communicate with people to enable them to share their experience of care.	In conversation with your PS/PA consider	LEVEL 1 - Dependent	The Code (NMC, 2018) 2.1, 7.1: EU clinical instruction Directives	understand how to monitor and evaluate the
Date	ACHIEVED Signature	In conversation with your PS/PA share your understanding of some of the principles and processes that enable people and families with a range of care needs to maintain optimal independence.	LEVEL 2 - Developing Independence		understand the principles and processes involved in supporting people and families with a range of care needs to maintain optimal independence and avoid unnecessary interventions and disruptions to their lives	Date	ACHIEVED Signature	the range of approaches you can use to monitor and evaluate care.	In conversation with your PS/PA consider	LEVEL 2 - Developing Independence	instruction Directives	understand how to monitor and evaluate the quality of people's experience of complex care
Date	ACHIEVED Signature	Demonstrate your understanding of how to optimise independence and avoid unnecessary interventions and disruptions to people's lives.	LEVEL 3 - Independent	EU clinical instruction Directives	range of care needs to maintain optimal	Date	ACHIEVED Signature	you will combine the range of approaches you can use to monitor and evaluate care to ensure a positive experience.	Demonstrate your understanding of how	LEVEL 3 - Independent		Ò

7.9	facilitate equitable access to healthcare for people who are vulnerable or have a disability, demonstrate the ability to advoce behalf when required, and make necessary reasonable adjustments to the assessment, planning and delivery of their care The Code (NMC, 2018) 3.1, 3.3, 3.4, 4.3, 7.1, 7.2, 13.2: EU clinical instruction Directives LEVEL 1 - Dependent LEVEL 2 - Developing Independence LEVEL 3 - Independent
Discuss access vulneral Talk abo	A what equitable or people who are sability might be. hat might support Health (Care and Act 2003.
Date	Date
understa caseloac	understand the principles and processes involved in planning and facilitating the caseloads, settings and services
Th	The Code (NMC, 2018) 2.3, 3.3, 4.3, 5.5, 7.1, 7.4, 8.3, 10.3, 13.2, 25.1: EU clinical instruction Directives
	LEVEL 1 - Dependent LEVEL 2 - Developing Independence
	In conversation with your PS/PA consider some of the principles and processes that may influence safe discharge or transition of care between settings and services. In conversation and practice with your some PS/PA share your understanding of some of the principles and processes that enable safe discharge and transition by participating in related activities.
	ACHIEVED Signature ACHIEVED
	Date Date

7.11		demonstrate the ability to identify and manage risks and take proactive measures to improve the quality of needed The Code (NMC, 2018) 8.6, 10.2, 14.1, 14.3, 16.1, 19.1, 19.2, 19.4, 25.1: EU clinical instruction Directives LEVEL 1 - Dependent In conversation with your PS/PA consider how nurses may identify and manage risk. In conversation with your PS/PA identify your PS/PA identify your PS/PA identify your PS/PA identify your profession may be managed. ACHIEVED ACHIEVED Date demonstrate an understanding of the processes involved in developing a basic business case for additional instruction Directives The Code (NMC, 2018) 6.1, 21.3, 25.1: EU clinical instruction Directives The Code (NMC, 2018) 6.1, 21.3, 25.1: EU clinical instruction Directives	improve the quality of care and services when linstruction Directives LEVEL 3 - Independent With your PS/PA demonstrate how you use your professional knowledge to improve quality of care and services by responding to and managing risk. ACHIEVED Date Date Date Compared to a polying in the polying in the polying applying in the polying applying in the polying in the polying applying in the polying in the polying applying in the polying applying in the polying in the polying in the polying applying in the polying in the p
7.12			ase for additional care funding b
	LEVEL 1 - Dependent	LEVEL 2 - Developing Independence	LEVEL 3 - Independent
	In conversation with your PS/PA consider the processes involved in funding care by for example discussing the Health and Care (Staffing) (Scotland) Bill or Indicator of Relative Need processes.	In conversation with your PS/PA consider how you would participate in processes to develop a business case for additional funding for care.	Using your professional knowledge participate in activities and conversations with colleagues who are developing a basic business case for additional care funding.
	ACHIEVED Signature	ACHIEVED Signature Date	ACHIEVED Date

ACHIEVED Signature	In conversation with your PS/PA consider the importance of exercising political awareness by engaging with literature from a variety of organisations, e.g. your university student union, the Nursing and Midwifery Council, The Royal College of Nursing or UNISON.	LEVEL 1 - Dependent	7.13 demonstrate an understanding of the importance of exercising political awareness through and effect of registered nursing on quality of care, patient safety and cost effectiveness <i>The Code</i> (NMC, 2018) 1.5, 2.2, 20.8
ACHIEVED Signature	Consider how you may participate in activities that may influence and affect the role of registered nursing on quality of care, patient safety and cost effectiveness. This may be by reviewing literature, attending conferences or taking part in surveys.	LEVEL 2 - Developing Independence	
ACHIEVED Signature	Participate in conversations and activities that enable you to demonstrate your understanding of being politically aware.	LEVEL 3 - Independent	throughout their career, to maximise the influence ness

SKILLS AND PROCEDURES (ANNEXES A & B)

expertise and preferences of people are always valued and taken into account. and procedures should be carried out in a way which reflects cultural awareness and ensures that the safety, needs, priorities, compassionate, evidence-based, person-centred nursing care. A holistic approach to the care of people is essential and all skills the NMC register, you must be able to undertake these skills and procedures safely and effectively in order to provide able to safely demonstrate on entry to the NMC register. We will now refer to these as skills and procedures. Equally, on entry to There are communication and relationship management skills (listed first) and nursing procedures (listed second) that you must be

support need it is essential that appropriate reasonable adjustments are made to ensure that all procedures can be undertaken care and treatment for mental, physical, cognitive and behavioural health challenges. Where a student has declared an additiona interventions and support for people of **all** ages, who require nursing procedures during the processes of assessment, diagnosis, On entry to the register, all newly registered nurses, in all fields of practice, must demonstrate the ability to provide nursing

and procedures at least once in either practice or in simulation. registration (the end of your programme), to have reached the level of being able to safely demonstrate each of the skills university regarding simulated skills as you progress through your programme. You are therefore expected, by the point of safely demonstrate each of these skills and procedures during your practice learning experiences; you will be guided by your skills.net. However, simulation should only be in exceptional circumstances and it is expected that you will be able to practise and As a student you will be able to observe and practise some of these skills and procedures through simulation such as clinical

Section	skills for	1. At the p	Commu
	skills for assessing, planning, providing and managing best practice, evidence	1. At the point of registration, the registered nurse will be able to safely demon	Communication and relationship management skills (NMC, 2018a)
Demonstrated safely	e-based nursing care:	nstrate underpinning	
Demonstrated safely		communication	

del		1.10 An	1.9 Co ind	1.8 Wr	1.7 De	1.6 Ch	1.5 Us	1.4 Ma	1.3 Us per	1.2 Us	1.1 Ac			Coction
delegating or handing over responsibility for care	Provides clear verbal, digital or written information and instructions when	Analyses and clearly records and shares digital information and data	Confidently and clearly presents and shares verbal and written reports with individuals and groups	Writes accurate, clear, legible records and documentation	Demonstrates awareness of own unconscious bias in communication encounters	Checks understanding and uses clarification techniques	Uses caring conversation techniques	Makes appropriate use of open and closed questioning	Uses appropriate non-verbal communication including touch, eye contact and personal space	Uses prompts and positive verbal and non-verbal reinforcement	Actively listens, recognises and responds to verbal and non-verbal cues		Skill	Scation desessing, planning, providing and managing best practice; evidence-based initially care:
												Please date and sign	in practice whilst acknowledging own limitations	Demonstrated safety
_												Please date and sign	through simulation whilst acknowledging own limitations	Demonstrated safety

managing their care: approaches to communication for supporting people of all ages, their families and carers in preventing ill health and in 2. At the point of registration, the registered nurse will be able to safely demonstrate evidence-based, best practice

managii	managing their care:		
Section	Skill	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		Please date and sign	Please date and sign
2.1	Shares information and checks understanding about the causes, implications and treatment of a range of common health conditions including: • anxiety		
	• depression		
	memory loss		
	• diabetes		
	dementia		
	 respiratory disease 		
	cardiac disease		
	neurological disease		
	• cancer		
	skin problems		
	immune deficiencies		
	 psychosis 		
	 stroke 		
	 arthritis 		
2.2	Uses clear language and appropriate, written materials, making reasonable adjustments where appropriate in order to optimise people's understanding of		

	what has caused their health condition and the implications of their care and treatment		
2. At the approach managin	point of registration, the registered nurse will be able to nes to communication for supporting people of all ages, g their care:	safely demonstrate evidence-based, best practice their families and carers in preventing ill health an	d, best practice ing ill health and in
Section	Skill	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		Please date and sign	Please date and sign
2.3	Recognises and accommodates sensory impairments during all communications		
2.4	Supports and manages the use of personal aids		
2.5	Identifies the need for, and manages a range of alternative communication techniques		
2.6	Uses repetition and positive reinforcement strategies		
2.7	Assesses motivation and capacity for behaviour change and clearly explains cause and effect relationships related to common health risk behaviours including: smoking		
	• obesity		
	sexual practice		
	• alcohol		
	substance use		
2.8	Provides information and explanation to people, families and carers, and responds to questions about their treatment and care and possible ways of preventing ill health to enhance understanding		
2.9	Engages in difficult conversations, including breaking bad news and supports people who are feeling emotionally or physically vulnerable or in distress, conveying compassion and sensitivity		

3. At the commun	3. At the point of registration, the registered nurse will be able to safely demonstrate evidence-based, best practice communication skills and approaches for providing therapeutic interventions	strate evidence-base	d, best practice
Section	Skill	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		Please date and sign	Please date and sign
3.1	Motivational interview techniques		
3.2	Solution focused therapies		
3.3	Reminiscence therapies		
3.4	Talking therapies		
3.5	De-escalation strategies and techniques		
3.6	Cognitive behavioural therapy techniques		
3.7	Play therapy		
3.8	Distraction and diversion strategies		
3.9	Positive behaviour support approaches		

4. At the point of registration, the registered nurse will be able to safely demonstrate evidence-based, best practice communication skills and approaches for working with people in professional teams Demonstrated safely in Demonstrated safely D			
nstrate e teams	Sportion	communication skills and approaches for working with people in professiona	4. At the point of registration, the registered nurse will be able to safely demo
d, best practice	Demonstrated safely in	al teams	nstrate e
	Demonstrated safety		d, best practice

Section		Demonstrated safely in	Demonstrated safely
	Skill	practice whilst acknowledging own limitations	through simulation whilst acknowledging own limitations
		Please date and sign	Please date and sign
4.1	Demonstrate effective supervision, teaching and performance applied:	raisal through the use	
	4.1.1 Clear instructions and explanations when supervising, teaching or		
	(0)		
	4.1.2 Clear instructions and check understanding when delegating care		
	4.1.3 Unambiguous, constructive feedback about strengths and		
	weaknesses and potential for improvement		
	4.1.4 Encouragement to colleagues that helps them to reflect on their		
	4.1.5 Unambiguous records of performance		
4.2	Demonstrate effective personal and team management through the use of:	e use of:	
	4.2.1 Strengths based approaches to developing teams and managing change		
	4.2.2 Active listening when dealing with team members' concerns and anxieties		
	4.2.3 A calm presence when dealing with conflict		
	4.2.4 Appropriate and effective confrontation strategies		
	4.2.5 De-escalation strategies and techniques when dealing with conflict		
	4.2.6 Effective coordination and navigation skills through:		
	4.2.6.1 Appropriate negotiation strategies		
	4.2.6.2 Appropriate escalation procedures		
	4.2.6.3 Appropriate approaches to advocacy		

Nursing	Nursing Procedures (NMC, 2018a)		
Part 1: A	Part 1: At the point of registration, the student nurse will be able to safely del people's needs for person-centred care	monstrate procedures for assessing	or assessing
Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		Please date and sign	Please date and sign
1. Use ev	 Use evidence-based, best practice approaches to take a history, observe, if ages: 	recognise and accurately assess people of	ly assess people of
<u>-</u>	Mental Health and wellbeing status		
	1.1.1 Signs of mental and emotional distress or vulnerability		
	1.1.2 Cognitive health status and wellbeing		
	1.1.3 Signs of cognitive distress and impairment		
	1.1.4 Behavioural distress-based needs		
	1.1.5 Signs of mental and emotional distress including:agitation		
	aggression		
	 challenging behaviour 		
	1.1.6 Signs of self-harm and/or suicidal ideation		
1.2	Physical health and wellbeing		
	1.2.1 Symptoms and signs of physical ill health		
	1.2.2 Symptoms and signs of physical distress		
	1.2.3 Symptoms and signs ofdeterioration		
	sepsis		

Part 1: A people's	Part 1: At the point of registration, the student nurse will be able to safely demonstrate procedures for assessing people's needs for person-centred care	nonstrate procedures t	or assessing
Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		Please date and sign	Please date and sign
2. Use ev	Use evidence-based, best practice approaches to undertake the following procedures:	procedures:	
2.1	Take, record and interpret vital signs manually and via technological devices		
2.2	Undertake:		
	 venepuncture 		
	cannulation		
	blood sampling		
	 interpreting normal and common abnormal blood profiles and venous blood gases 		
2.3	Set up and manage routine electrocardiogram (ECG) investigations		
	 interpret normal and commonly encountered abnormal traces 		
2.4	Manage and monitor blood component transfusions		
2.5	Manage and interpret: • cardiac monitors		
	 infusion pumps 		
	 blood glucose monitors 		
	other monitoring devices		
2.6	Accurately measure weight and height, calculate body mass index		
	 recognise healthy ranges and clinically significant low/high readings 		

Part 1: A people's	Part 1: At the point of registration, the student nurse will be able to safely demonstrate procedures for assessing people's needs for person-centred care	monstrate procedures t	or assessing
Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		Please date and sign	Please date and sign
2.cont/ \	Use evidence-based, best practice approaches to undertake the following procedures:	wing procedures:	
!	• respiratory		
-	 circulatory 		
	 neurological 		
	musculoskeletal		
	• cardiovascular		
	 skin status 		
2.8	Undertake chest auscultation and interpret findings		
2.9	Collect and observe specimens, undertaking routine analysis and interpreting findings:		
	 sputum 		
	urine		
	 stool 		
	 vomit 		
2.10	Measure and interpret blood glucose levels		
2.11	Recognise and respond to signs of all forms of abuse		

Part 1: At people's	Part 1: At the point of registration, the student nurse will be able to safely demonstrate procedures for assessing people's needs for person-centred care	nonstrate procedures t	or assessing
Section		Demonstrated safely in	Demonstrated safely
	Procedure	acknowledging own	whilst acknowledging
	(may be appropriate to attain at a higher level for the different fields)	limitations	own limitations
		Please date and sign	Please date and sign
2.cont/ L	2.cont/ Use evidence-based, best practice approaches to undertake the follow	wing procedures:	
2.12	Undertake, respond to and interpret neurological observations and assessments		
2.13	Identify and respond to signs of:		
	deterioration		
	• sepsis		
2.14	Administer basic mental health first aid		
2.15	Administer basic physical first aid		
2.16	Recognise and manage, providing appropriate basic life support seizures		
	 choking 		
	 anaphylaxis 		
2.17	Recognise and respond to challenging behaviour, providing appropriate safe holding and restraint		

Part 2: A provision	Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care	ate safely, procedures	for the planning,
Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		ricase date and sign	riedse date and sign
and the r	and the maintenance of dignity, accurately assessing the person's capacity for independence and self-care and	are and support with re or independence and so	elf-care and
initiating	initiating appropriate interventions		
3.1	Observe and assess comfort and pain levels and rest and sleep patterns		
3.2	Use appropriate bed-making techniques including those required for people who are unconscious or who have limited mobility		
3.3	Use appropriate positioning and pressure-relieving techniques		
3.4	Take appropriate action to ensure privacy and dignity at all times		
3.5	Take appropriate action to reduce or minimise pain or discomfort		
3.6	Take appropriate action to reduce fatigue, minimise insomnia, support improved rest, and sleep hygiene		

Part 2: A provision Section 4. Use even maintena appropri	Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care Section Procedure Please date and sign own limitations Please date and support with hygiene and the maintenance of skin integrity, accurately assessing the person's capacity for independence and self-care and initiating the needs for care and self-care and initiating the point of registration, the planning, personstrate safely, procedures for the planning, personstrated safely in through simulation whilst acknowledg own limitations Please date and support with hygiene and the maintenance of skin integrity, accurately assessing the person's capacity for independence and self-care and initiating the point of the planning, person to demonstrate safely in practice whilst acknowledg whilst acknowledg own limitations Please date and support with hygiene and the person's capacity for independence and self-care and initiating the procedures of the planning, person to demonstrate safely in through simulations own limitations
7 5 Q	4. Use evidence-based, best practice approaches for meeting the needs for camaintenance of skin integrity, accurately assessing the person's capacity for appropriate interventions.
4.1	Observe, assess and optimise skin and hygiene status and determine the need for support and intervention
4.2	Use contemporary approaches to the assessment of skin integrity and use appropriate products to prevent or manage skin breakdown
4.3	Assess need for and provide appropriate assistance with washing, bathing, shaving and dressing
4.4	Identify and manage skin irritations and rashes
4.5	Assess need for and provide appropriate care and decide when an onward referral is needed for:
	dental care
	• eye care
	• nail care

Part 2: At provisior	Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care	ate safely, procedures	for the planning,
Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		Please date and sign	Please date and sign
4. cont/ the main	4. cont/ Use evidence-based, best practice approaches for meeting the needs for care and support with hygiene and the maintenance of skin integrity, accurately assessing the person's capacity for independence and self-care and	s for care and support / for independence and	with hygiene and I self-care and
Filliaming			
0.4	Ose aseptic techniques when undertaking wound care including.		
	 dressings 		
	 pressure bandaging 		
	 suture removal 		
	vacuum closures		
4.7	Use aseptic techniques when managing wound and drainage processes		
4.8	Assess, respond and effectively manage • pyrexia		
	 hypothermia 		

emonstrate safely, procedures for the planning,	esalei	Part 2: At the point of registration, the student nurse will be able to demonstrat provision and management of person-centred nursing care
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Procedure Procedure Demonstrated safely in through simu practice whilst acknowledging own interventions. S.1 Observe, assess and optimise: - nutrition status and determine the need for intervention and support - hydration status and determine the need for intervention and support - hydration status and determine the need for intervention and support - hydration status and determine the need for intervention and support - hydration status and determine the need for intervention and support - hydration status and determine the need for intervention and support - hydration and drinking are are and support with nutrition and support are and support are and support and
Demonstrated safely in practice whilst acknowledging own limitations Please date and sign r care and support with r nd self-care and initiating t

Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care
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5.8 Mana	5. cont/ Use ev	Soction
oral enteral parenteral routes Manage the administration of IV fluids	Procedure 5. cont/ Use evidence-based, best practice approaches for meeting the needs	
	97	Demonstrated safety in
	through simulation whilst acknowledging own limitations Please date and sign with nutrition and	Demonstrated safety

Part 2: A provision	Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care	ate safely, procedures	for the planning,
Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		Please date and sign	Please date and sign
6. Use ev	6. Use evidence-based, best practice approaches for meeting the needs for care and support with bladder and bowel health, accurately assessing the person's capacity for independence and self-care and initiating appropriate	are and support with bladder ar	adder and bowel
interventions			
6.1	Observe and assess level of urinary and bowel continence to determine the		
	and privacy and managing the use of appropriate aids		
6.2	Select and use appropriate continence products; insert, manage and remove catheters for all genders; and assist with self-catheterisation when required		
6.3	Manage bladder drainage		
6.4	Assess bladder and bowel patterns to identify and respond to constipation, diarrhoea and urinary and faecal retention		
6.5	Administer enemas and suppositories and undertake rectal examination and manual evacuation when appropriate		
6.6	Undertake stoma care identifying and using appropriate products and approaches		

Part 2: Approvision	Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care	ate safely, procedures	for the planning,
Section		Demonstrated safely in practice whilst	Demonstrated safely through simulation
	Procedure	acknowledging own limitations	whilst acknowledging own limitations
		Please date and sign	Please date and sign
7. Use ev	7. Use evidence-based, best practice approaches for meeting the needs for care and support with mobility and safety,	are and support with m	obility and safety,
accurate	accurately assessing the person's capacity for independence and self-care a	nd initiating appropriate interventions	e interventions.
7.1	Observe and use evidence-based risk assessment tools to determine need for support and intervention to optimise mobility and safety, and to identify and manage risk of falls using best practice risk assessment approaches		
7.2	Use a range of contemporary moving and handling techniques and mobility aids		
7.3	Use appropriate moving and handling equipment to support people with impaired mobility		
7.4	Use appropriate safety techniques and devices		

Part 2: /	Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing car	ate safely, ursing care	
Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		Please date and sign	Please date and sign
8. Use e	8. Use evidence-based, best practice approaches for meeting the needs for re	espiratory care and	
appropr	support, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.	ill-care and initiating	
8.1	Observe and assess the need for intervention and respond to restlessness, agitation and breathlessness using appropriate interventions		
8.2	Manage the administration of oxygen using a range of routes and best practice approaches		
8.3	Take and interpret peak flow and oximetry measurements		
8.4	Use appropriate nasal and oral suctioning techniques		
8.5	Manage inhalation, humidifier and nebuliser devices		
8.6	Manage airway and respiratory processes and equipment		

Procedure Procedure Procedure Procedure Procedure Demonstrated safely in chronic sign acknowledging own independence-based, best practice approaches for meeting the needs for care and support with practice and self-care and initiating appropriate interventions. 9.1 Description and management of infection, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions. Please date and sign own limitations Please date and sign own limitations own limitations own limitations. Please date and sign own limitations own limitations own limitations. Please date and sign own limitations.	Part 2: A	Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care	ate safely, ursing care	
Jse evidence-based, best practice approaches for meeting the needs for care and support with prevention and management of infection, accurately assessing the person's capacity for lependence and self-care and initiating appropriate interventions. Observe, assess and respond rapidly to potential infection risks using best practice guidelines Use standard precautions protocols Use effective aseptic, non-touch techniques Use appropriate personal protection equipment Implement isolation procedures Use evidence-based hand hygiene techniques Safely use and dispose of waste, laundry and sharps Safely assess and manage invasive medical devices and lines	Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
9. Use evidence-based, best practice approaches for meeting the needs for care and support with the prevention and management of infection, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions. 9.1 Observe, assess and respond rapidly to potential infection risks using best practice guidelines 9.2 Use standard precautions protocols 9.3 Use effective aseptic, non-touch techniques 9.4 Use appropriate personal protection equipment 9.5 Implement isolation procedures 9.6 Use evidence-based hand hygiene techniques 9.7 Safely decontaminate equipment and environment 9.8 Safely use and dispose of waste, laundry and sharps 9.9 Safely assess and manage invasive medical devices and lines			Please date and sign	Please date and sign
	9. Use evenue the prevenue independent	idence-based, best practice approaches for meeting the needs for cantion and management of infection, accurately assessing the personence and self-care and initiating appropriate interventions.	are and support with are capacity for	
	9.1	Observe, assess and respond rapidly to potential infection risks using best practice guidelines		
	9.2	Use standard precautions protocols		
	9.3	Use effective aseptic, non-touch techniques		
	9.4	Use appropriate personal protection equipment		
	9.5	Implement isolation procedures		
	9.6	Use evidence-based hand hygiene techniques		
	9.7	Safely decontaminate equipment and environment		
	9.8	Safely use and dispose of waste, laundry and sharps		
	9.9	Safely assess and manage invasive medical devices and lines		

10 3 Access ar	10.2 Manage <i>a</i> pumps an	• de	• an	• ag	• re	• 00	• thirst	• na	and signs o	10.1 Observe,	10. Use evidence- accurately assess		Section	Part 2: At the poin provision and mar
Assess and review preferences and care priorities of the dying person and their family and carers	Manage and monitor effectiveness of symptom relief medication, infusion pumps and other devices	depression	anxiety	agitation	restlessness	constipation	rst	nausea	and signs of distress including: • pain	Observe, and assess the need for intervention for people, families and	10. Use evidence-based, best practice approaches for meeting the needs for care and support at the end of life, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.		Procedure	Part 2: At the point of registration, the student nurse will be able to demonstration and management of person-centred nursing care
											care and support at the end of life, nd initiating appropriate interventi	Please date and sign	Demonstrated safely in practice whilst acknowledging own limitations	ate safely, procedures for the planning,
											e end of life, te interventions.	Please date and sign	Demonstrated safely through simulation whilst acknowledging own limitations	for the planning,

Part 2: A provision	Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care	ate safely, procedures	for the planning,
Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		Fiedse date and sign	ricase date and sign
10.cont/ accurate	10.cont/ Use evidence-based, best practice approaches for meeting the needs for care and support at the end of life, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.	s for care and support ad initiating appropriat	at the end of life, e interventions.
10.4	Understand and apply:		
	 organ and tissue donation protocols 		
	 advanced planning decisions 		
	 living wills and health and lasting powers of attorney for health 		
10.5	Understand and apply DNACPR (do not attempt cardiopulmonary resuscitation) decisions and		
	 verification of expected death 		
10.6	Provide care for the deceased person and the bereaved respecting cultural requirements and protocols		

Part 2: A provision	Part 2: At the point of registration, the student nurse will be able to demonstrate safely, procedures for the planning, provision and management of person-centred nursing care	ate safely, procedures	for the planning,
Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
11 Drock	11 Drocedural competencies required for best practice evidence-based modi	Please date and sign Please date and sign Please date and sign	Please date and sign
11.1	Carry out initial and continued assessments of people receiving care and their ability to self-administer their own medications		
11.2	Recognise the various procedural routes under which medicines can be prescribed, supplied, dispensed and administered; and the laws, policies, regulations and guidance that underpin them		
11.3	Use the principles of safe remote prescribing and directions to administer medicines		
11.4	Undertake accurate drug calculations for a range of medications		
11.5	Undertake accurate checks, including transcription and titration, of any direction to supply or administer a medicinal product		
11.6	Exercise professional accountability in ensuring the safe administration of medicines to those receiving care		
11.7	Administer injections using the following routes and manage injection equipment: • intramuscular		
	 subcutaneous 		
	 intradermal 		
	intravenous		
11.8	Administer medications using a range of routes		

provision	Part 2: At the point of registration, the student nurse will be able to demonstrate salely, procedures for the planning, provision and management of person-centred nursing care	ate sately, procedures	for the planning,
Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		Please date and sign	Please date and sign
11.cont/ Procoptimisation	11.cont/ Procedural competencies required for best practice, evidence-based optimisation.	medicines administration and	tion and
11.9	Administer and monitor medications using vascular access devices and enteral equipment		
11.10	Recognise and respond to adverse or abnormal reactions to medications		
11.11	Undertake safe storage, transportation and disposal of medicinal products		



SECTION 3: POLICIES, GUIDELINES, PROTOCOLS

The OU Student Handbook contains specific policies, guidance and protocols that relate to the OU Future Nurse Programme. Please take time to familiarise yourself with the content and how these apply to you as a student on the nursing programme. You can access the programme handbook on your StudentHome page.

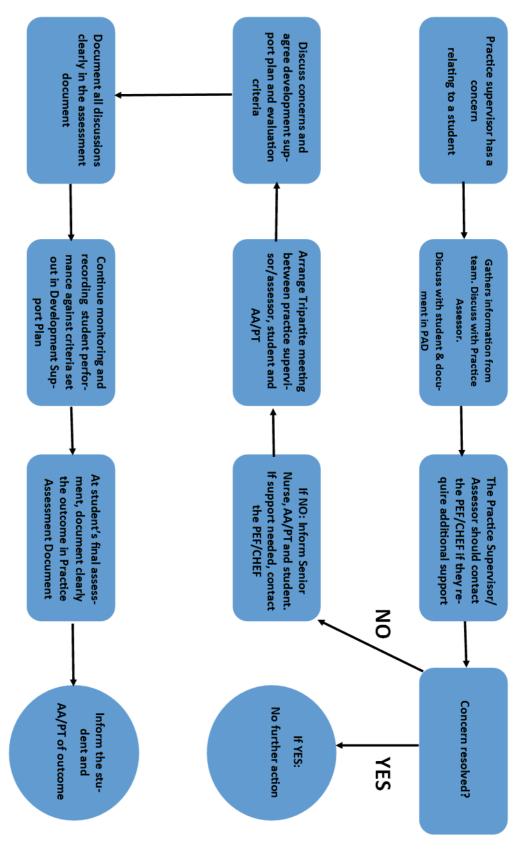
NHS Education for Scotland (NES) has produced a number of guidance documents around how you will be supported, supervised and assessed and these can be accessed at https://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education.aspx.

The national framework for the Standards for Student Supervision and Assessment (SSSA) can be accessed at https://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/scottish-future-nurse-and-midwife-programme-board/national-framework-for-sssa.aspx

It is important that you access and familiarise yourself with these resources as part of your professional development.

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3.1 FLOWCHART FOR RAISING PROFICIENCIES CONCERNS



KEY:

AA = Academic Assessor; PT = Practice Tutor; PEF = Practice Education Facilitator; CHEF = Care Home Practice Education Facilitator

3.2 Development Support Plan

standards. In order to ensure a supportive framework for this we provide you, your practice supervisor and your practice assessor practice areas. progress in relation to this. These documents must be kept as part of your PAD to ensure consistency of assessment across with a development plan and feedback document below. This should be used to record any areas of concern and your development During your practice learning experience, you may require more support to achieve particular learning outcomes or professional

Development Support Plan

Development support plan outcome :	Practice Assessor Signature:	Protion Companion Ciapatura		Specific areas to be addressed	Development Need Identified:
me:				Related Platform number /proficiency	
Achieved / Not Achieved (please circle)		Ottober Circumstance		Participation in Care level	
lot Achieved				Learning Resources/actions	
	Additional Academic Assessor/Practice Tutor Signature (if required):	Applemin Apple of December 1		ions	
	ssessor/Practice Tutor	Setion Tutor Cinnaturo:		Evidence of achievement	
Date				Achievement/ Review date	

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Example of Development Support Plan:

Development Need Identified:

Student demonstrates a very limited theory, knowledge and skills in relation to medicine administration for current stage of pre-reg nursing programme

Specific areas to be addressed Student is required to enhance	Platform Platform /proficiency	participation in Care level	Learning Resources/actions • Re-visit The Code (NMC)	Explain via discussion	Achievement/ Review date Complete action
Student is required to enhance their skills and knowledge to the required level in relation to medicine administration	Platform 1.15/1.20 Platform 3.3	Developing independence	 Re-visit The Code (NMC) Review PAD/procedures 	Explain via discussion your understanding of the code in relation to the areas of development	Complete action and Review by 1/1/2020
	Platform 4 .5/ 4.14/4.15		 Read the NHS policy of medication management and administration 	Through discussion explain the policy and the importance for this policy	Complete action and Review by 1/1/2020
		Developing independence	 With your supervisor/assessor participate in medication administrations Under supervision safely administer and record the prescribed medication for 5 consecutive drug administrations Identify 5 common drugs each week. understanding what they are used for, side effects and contraindications 	Through participation/observation /discussion demonstrate proficiency Discussion. Q&A sessions. Evidence within medicine management workbook	Complete action and Review by 7/1/2020 on- going/complete for end of placement

DEVELOPMENT SUPPORT PLAN FEEDBACK with example of feedback

	Participation/shadowing of medicine administration is ongoing. The student is able to explain the process and safety checks required. This learning action is still on going.	
	The student is still reviewing the NHS policy, is able to provide limited information so this learning action will be reviewed at the next review meeting 7/1/2020.	
	Student nurse has accessed and review the NMC code and through discussion with me, the student was able to highlight the four pillars and identify the keys areas that are required for a registrant nurse in relation to medicine management and administration. This learning action has been achieved.	
	Development plan was agreed on the 1/1/2020.	3/1/2020
Practice Supervisor AND Practice Assessor		
SIGNATURES: Student AND	PROGRESS	DATE

USEFUL REFERENCES FOR STAFF AND STUDENTS

Health and Safety Executive (1999) Management of Health and Safety at Work Regulations Approved Code of Practice and guidance L21 (2nd edition) HSE Books 2000 ISBN 0 7176 2488 9

NHS Education for Scotland (NES) (2013). Evaluation of Current Practices to Involve Service Users and Carers in Practice Assessment in 11 Higher Education Institutes (HEIs) in Scotland. [online]. NES. available from:

https://www.nes.scot.nhs.uk/media/2063151/nes_user_and_carers_final_report_word_290313-no_appendix_inc_nes_and_gcu_logo_wsv.pdf [accessed 01/05/20]

NHS Education for Scotland (NES) (2019) Raising concerns in practice: Student Guidance: A national approach for students, practice learning experience providers and Higher Education Institutions in Scotland. [online]. NES. available from: https://www.nes.scot.nhs.uk/media/4387539/final_nov_2019_version_national_rc_with_leaflet.pdf [accessed 01/05/20]

NHS Education for Scotland (NES) (2020) Supporting Learning in Practice resources NES. available from: https://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education.aspx [accessed 01/05/20]

NHS Education for Scotland (NES) (2020) The national framework for the Standards for Student Supervision and Assessment (SSSA) NES. available from: https://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/scottish-future-nurse-and-midwife-programme-board/national-framework-for-sssa.aspx [accessed 01/05/20]

Nursing and Midwifery Council (NMC) General Medical Council (GMC) (2015) *Openness and honesty when things go wrong: the professional duty of candour* NMC/GMC available from: https://www.nmc.org.uk/globalassets/sitedocuments/nmc-publications/openness-and-honesty-professional-duty-of-candour.pdf [accessed 01/05/20]

Nursing and Midwifery Council (NMC) (2018a) Future nurse: standards of proficiency for registered nurses NMC available from:

https://www.nmc.org.uk/standards/standards-for-nurses/standards-of-proficiency-for-registered-nurses/ [accessed 01/05/20]

Nursing and Midwifery Council (2018b) *Standards framework for nursing and midwifery education (part 1)* NMC available from: https://www.nmc.org.uk/standards-for-education-and-training/standards-framework-for-nursing-and-midwifery-education/ [accessed 01/05/20]

Nursing and Midwifery Council (2018c) *Standards for student supervision and assessment (part 2)* NMC available from: https://www.nmc.org.uk/standards-for-education-and-training/standards-for-student-supervision-and-assessment/ [accessed 01/05/20]

Nursing and Midwifery Council (2018d) *Standards for pre-registration nursing programmes (part 3)* NMC available from:

https://www.nmc.org.uk/standards/standards-for-nurses/standards-for-pre-registration-nursing-programmes/ [accessed 01/05/20]

Nursing and Midwifery Council (2018e) *The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates* NMC available from: https://www.nmc.org.uk/standards/code/ [accessed 01/05/20]

APPENDIX 1

Coding of EU Directives to Support Mapping to NMC (2018) Future Nurse: Standards of proficiency for registered nurses

training leading to the award of a formal qualification of nurses responsible for general care shall consist of the following two PARTs...' (NMC, 2018; p15-16) Article 31 (V.2 Nurse Responsible for General Care) - '5.2.1 Training programme for nurses responsible for general care - the

General and specialist medicine General and specialist surgery Child care and paediatrics Maternity care Mental health and psychiatry Care of the old and geriatrics Home nursing			
paediatrics nd psychiatry and geriatrics	B. Clinical instruction	General and specialist medicine	σ.1
paediatrics and psychiatry and geriatrics		General and specialist surgery	B.2
and geriatrics B		Child care and paediatrics	B.3
and geriatrics B B B		Maternity care	
and geriatrics B		Mental health and psychiatry	B.5
В		Care of the old and geriatrics	
		Home nursing	B.7