The University of Nottingham

Division of Nursing

School of Health Sciences

Mentor's Handbook

5th Edition
2015

Preface

The Mentor Handbook is produced for all placement areas. The aim is to provide clear information to enable mentors in practice to support student nurse's in your placements.

This file has been produced in loose, leaf format so that you can place the information in the order that is most useful to you and so that you can add extra information to tailor it to meet the needs of your placements. For example, you may wish to include the Mentors Newsletters and /or minutes and newsletters from Practice Learning Teams meetings.

In this 5th edition information has been arranged in sections to enable you to find what you need easily. We will update information when things change on the on line version. If you have any suggestions about any other information that you would like us to include or any suggestion about the content and presentation of the file, please contact:

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Preface

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Introduction

The University of Nottingham School of Health Sciences offers a variety of pathways as part of the course leading to registration as a nurse;

- BSc (Hons) in Nursing
- Master of Nursing Science (MNursSci)
- Graduate Entry Nursing (GEN) MSc

All pathways have been developed collaboratively through partnership work with all our practice colleagues. All our pathways emphasise the need for quality learning in the practice setting and we believe programme development in both practice and education settings will improve the quality of the students' learning and teaching experiences and ultimately the care that patients and clients receive.

All of these pre-registration pathways lead to a University of Nottingham award and a professional qualification. On successful completion of the course students will be eligible to register as a nurse with the Nursing and Midwifery Council (NMC).

In line with most courses at the University of Nottingham, the pathways are modular in structure. Each module contains elements designed to develop the knowledge, skills and attitudes students will require, in order to function effectively as professional nurses in their chosen field of nursing. There is a balance of 50% practice and 50% theory throughout each of the pre-registration pathways and they are structured to provide students with a wide range of nursing practice placement experience in community, hospital, voluntary, independent, social and educational settings. Whilst in practice each student is allocated to a registered nurse or other suitably qualified professional to act as their mentor.

The practice areas selected as placements offer a comprehensive range of nursing practice experiences, within which the students can practise and develop the skills, required to achieve the competencies as set out by the NMC. All areas have to have a successful educational audit before students can be allocated to the area.

Useful Contacts

University Link Lecturer:

Practice Representative:

Education centre telephone numbers:

Nottingham Centre 0115 82 30850

Derby Centre 01332 724900

Student Services: 0115 82 30830

Who can be a mentor?

Following registration the registered nurse (RN) will have to complete 12 months as a registered nurse before being eligible to start a mentor preparation programme (NMC 2008). This is an NMC validated course and is funded by Health Education East Midlands (HEEM). Mentorship courses are provided by several Universities within the East Midlands and your employer will review the most suitable course and location for prospective mentors.

The University of Nottingham has three options for the mentorship preparation module; level 0, offering no academic credits but NMC requirements to become a mentor. A module at degree level (B73) and a module at Masters level (B74). There is more information on the LBR website at www.nottingham.ac.uk/healthsciences/learning-beyond-registration/modules.aspx (then click on the blue mentorship tab). Please note that some Universities do not accept transfer of credits from one institution to another.

On successful completion of the mentor preparation programme the RN will be able to assess students. It is really useful to have an experienced mentor overseeing the novice mentor for the first time as a support.

How you maintain your status as a mentor/sign off mentor

All mentors need to have an annual mentor update and inform the mentor database holder of the date this was undertaken so that it can be recorded on the mentor database. Failure to have an annual update will mean your status as a mentor has lapsed and you will not be eligible to mentor and assess students.

What can constitute a mentor update?

A mentor update must contain a face to face element and can consist of:

- A face to face update with a PLT representative, lecturer or senior person in the trust/department
- An online update that includes opportunity for discussion
- Attendance at PLT meetings

NB: You should keep a record of your attendance/completion of mentor updates. The mentor database holders for each Trust will be notified of your completion via a register so please ensure you sign this when attending an update.

Triennial Review

In addition, every 3 years the mentor has to have a triennial review with their line manager (NMC 2008). The triennial review is to ensure you have had annual mentor updates, have mentored at least 2 students in the previous 3 years, and that you have evidence of continual professional development in relation to mentoring. Additional information regarding triennial review can be found on the FAQ section at www.nmc-uk.org

Who can be a sign off mentor?

Sign off mentors (SOM) are required for nursing students in their final placement experience i.e. management students. SOMs are experienced mentors who have completed 2 online, simulated exercises successfully on the University website.

These simulations can be found at
www.nottingham.ac.uk/nursing/practice/mentors/resources/som/index.php
On successful completion of the simulated sign off exercises, the mentor can then be allocated a final placement student under the direct supervision of an existing sign off mentor.

Each trust has its' own documentation to be completed for the simulation exercises and the supervised signing off of a management student. A copy of this documentation needs to be sent to the local mentor database holder in order for the mentor to be annotated on the mentor database as a sign off mentor.

The Sign Off Mentor Must:

- **Be on same part of NMC register and branch**
- **Be on Mentor data base**
- **Have completed 3 observed assessments (2 can be on-line)** http://www.nottingham.ac.uk/nursing/practice/mentors
- **Work with student in Final Management placement**
- **Have protected time of x1 hour per week (NMC requirement)**

NB: If you mentor a final placement student without having completed the sign off mentor preparation and being annotated as a sign off mentor on the mentor database, the student will have to undertake the placement experience again with a bona fide SOM. This will delay the student's registration.

Associate Mentors

Associate mentors are RNs who have not completed the mentor preparation programme but who will work with and support students as well as giving some feedback to the mentor about a student's performance. They are not allowed to formally assess students and complete the assessment documents.

The associate mentor is a developmental role that will help the RN to develop their facilitation skills and teaching skills as part of their preparation for their future mentoring role.

Other healthcare professionals e.g. physiotherapists, social workers, ODPs.

The NMC (2010) have stated that, during the first part of a student's programme other qualified healthcare professionals can mentor and assess students if it is appropriate to do so. The criteria for being able to do this is that they have completed a mentor preparation programme (either the nursing one or their own professional one), have an annual mentor update, undertake a triennial review, and are on the mentor database.

The Role of Mentors in Nursing Practice Placements

1. The nature of the placements on pre-registration courses is such that the role of the mentor is of vital importance. As well as supporting the student during placement that person will also be assessing students' progress and practice development. In this sense they are the lynch pin in the students' learning environment.

2. It may not always be possible for the mentor to work the same shifts as the student. If they are not on duty with the student, they should ensure that another qualified member of staff is available to supervise them. Students should spend 40% of their time in practice working with a mentor (a mentor who is active on the database) and are encouraged to follow their mentors' shift pattern whenever possible. If students request a change in off duty, the student should ensure they are still working alongside a mentor for 40% of their time in placement.

3. The role of the mentor forms a critical element in ensuring that the student gains the maximum from the learning environment. The NMC Standards to Support Learning and Assessment in Practice (2008) lists 8 domains with associated outcomes for mentors to achieve when supporting students in practice. Details of these can be found at www.nmc-uk.org

Nurses and Midwives who take on the role of mentor must have current registration with the NMC. They will have completed at least twelve months full-time experience (or equivalent part-time). Mentors will require preparation for, and support in, their role. This

should include access to a University Link Lecturer and/or practice educator as well as support from their line manager.

Support available to mentors

- **Practice Learning Teams**

Practice learning Teams (PLTs) support mentors and the development of the learning environment. Each team links to individual Units/Directorates and/or groups of nursing practice areas and consist of University Link Lecturers and designated mentors from a placement experience. The ways in which each team operates is agreed at local level so that they meet the needs of individual directorates and/or groups of practice areas. Each team has developed terms of reference to guide developments and allow monitoring of PLT activities.

The aims of Practice Learning Teams are to:
- Develop effective partnerships between the Division of Nursing and the practice areas.
- Reflect a valuing and development of practice-based learning, which is an essential component of the students learning experience.
- Support practice staff as they facilitate students' learning and achievement of their learning outcomes and proficiencies through effective assessment processes.

The constitution of Practice Learning Teams

All teams consist of a combination of Division of Nursing and practice staff. The team elects an individual to act as the team chair, the Chair can be from the University or from practice. Team roles include support and advice to assessors on learning and teaching matters, provision of support for students in practice, updating staff on curriculum matters, providing support to practice managers and developing the practice learning environment.

The functions of the Practice Learning Team

The functions of the Practice Learning Teams include:

- Strengthening the partnerships between practice and education by providing a tangible presence
- Developing, facilitating and supporting students' practice-based learning
- Providing a forum for sharing 'good practice' and the exchange of information
- Developing initiatives that enhance practice based learning
- Participating in the update of mentors
- Provide practice colleagues with information and the opportunity to contribute towards curriculum changes
- Acting as a resource for the professional development of practice staff
- Providing feedback to practice staff about students' evaluation of their placement experience, including action plans for addressing issues, where appropriate

Minimum requirements for all PLTs are to:

1. Have terms of reference for the team
2. Identify the specific support mechanisms available for mentors and students that have been agreed with the placement area
3. Map the learning opportunities available in placements to the NMC (2010) Standards for pre registration nursing

Have standard agenda items for meetings that should include:

- Student evaluation summaries and issues
- Action planning for issues identified by students
- Mentor issues
- Lecturer issues
- Mentor update issues.
- Curriculum changes and developments

Your local PLT newsletters can be accessed at

www.nottingham.ac.uk/healthsciences/practice/nursing/plts/newsletters/index.aspx

The Practice Support Teacher role

The Division of Nursing created a new position in 2009; the Practice Support Teacher (PST). It was developed to provide support to mentors/ potential mentors and students. This is a particularly important role in the student's first year of training. The PST role provides a valuable developmental link from practice to education. The role includes input to the PLTs, provision of mentor updates, clinical skills training, and acting as an expert resource to other lecturing staff regarding practice experience issues.

The PSTs also facilitate most of the student forums in year one of the programme. The Student Forum was initiated to address the feeling of isolation that a student nurse can feel on their first practice placement. The concept was born from a University of Nottingham study 'Staying the Course – An Exploratory Study of Student Nurse Persistence' (Mallik M, Avis M and Leducq M 2009). The Student Forum takes place during the first few weeks of their HUB placement, and then again in their Spoke and final HUB placement. It consists of the PST co-ordinating and helping to facilitate small groups of students to reflect on practice and to engage in peer support. The students are formally invited to attend, and the mentor is informed of the time and date as the forums are held in the student's practice hours.

The Practice Support Teachers can be contacted via their generic email address:
practicesupportteachers@notttingham.ac.uk

Signposting plays a large role in the facilitation of the Student Forum; the facilitator will encourage the student to seek advice when unsure and point the student in the right direction for the appropriate support. The Student Forum is also used as an opportunity to revisit and answer questions on student practice documentation, including evidence gathering for the student's portfolios. The first year student's reflection on practice can give a realistic and current indication of their perception of the practice learning environment. This can be valuable if used to inform the student's preparation for practice and when used as a discussion agenda item at Practice Learning Team meetings.

- **The Buddy System (peer support)**

With placement allocation becoming longer and more evenly spread throughout the 3 part programme there will be a better balance in many placements of junior (students in their first year) and senior students (students in their final 6 months of training) and where possible working and learning at the same time within the same placement areas. It is beneficial for the senior and junior students to form a supportive relationship, aiding the development of both parties. Senior student's managerial skills benefit by contributing to the orientation and support of junior students, and the anxieties and problems that junior students often experience in new and unfamiliar surroundings can be reduced.

It is not a role that would involve the senior student in any form of assessment of junior students and it will only occur under the supervision of a qualified nurse.

The way in which the peer support system is organised will vary according to individual student abilities and needs and the local environment. The educational PLT representative will offer help and support in relation to establishing local structure and management of this role.

Aims

1. To increase the professional responsibility of senior students through the development of registrant level mentoring skills (NMC 2010).

2. To provide a mechanism for senior students to provide support of a helping nature in clinical practice for a junior student.

Objectives

Senior Students

Peer support will:

1. Provide the opportunity for the development of registrant level mentorship skills.

2. Develop the confidence and competence of the student within the clinical environment.

3. Further develop critical reflective thinking processes.

4. Enable the acquisition of teaching skills.

Junior Students

Peer support will:

- Reduce initial anxieties regarding the placement experience.
- Assist the development of essential care skills.
- Aid the integration of theoretical knowledge within the practice setting.
- Encourage reflection on practice.

Roles and Responsibilities

Senior Students

- Provide support to the junior student in developing specific clinical skills that the junior student has been taught and the senior student has acquired
- Assist the junior student to understand the rationale for simple, but essential, nursing interventions
- Help the junior student to reflect on practice, sharing personal reflections and experiences where appropriate.
- Assist in the initial orientation to the clinical area, where appropriate
- Maintain confidentiality in relation to this relationship.

Junior Student

- Assist in the identification of their specific learning needs.
- Actively participate in this process, maintaining confidentiality within this relationship.

Mentor Responsibilities

The mentor is required to:

- Satisfy themselves that the management student is able to undertake clinical skills to a satisfactory standard
- Discuss what they expect the management student to achieve with the junior student
- Allocate the management student to a junior student
- Monitor the management's student's success in this role
- Provide constructive feedback to the management student with respect to their teaching and support of junior students
- Participate in feedback to the junior student.

Preparing senior students for this role

Preparation for the senior student requires the development of registrant level mentorship skills, the nature of helping relationships, reinforcement of reflective skills, the acquisition of appropriate clinical skills, demonstrating skills and problem solving.

Many of these skills will have already been taught within the senior student's programme, prior to their management placement, but need to be revisited by the mentor with the emphasis on providing support for junior colleagues.

Preparing junior students for this role

For the junior student, preparation for this support mechanism is provided as part of the preparation for clinical practice. This preparation explores the peer support role, the aims of providing peer support and advice on how to access support for matters relating to this process. The need for sensitivity and confidentiality within such a relationship is also reinforced to all students.

Preparation for mentors

Preparation for mentors occurs through mentor preparation and updates. Ongoing support for this initiative is provided by the educational PLT representative to the area.

Evaluation of the Role

Evaluation of the role occurs through:

- Student placement experience evaluations
- Reflection on practice sessions following placement experiences
- A sharing forum via the practice learning team.

- **Befriender scheme**

Healthcare support workers (HCSWs) play a vital role in supporting students. For junior students they can help with orientation and socialisation into the practice setting and can work alongside the students to help to develop their essential care skills e.g. meeting patient's hygiene needs, toileting, completing charts such as food charts and fluid balance charts.

Whilst working with the student they can observe them and give some feedback to the mentor as to how the student is developing. They can also complete statements about the student performance (observed learning records) which can contribute to the student's portfolio of learning.

For more senior students who are having to learn to manage patient care the HCSW support is also vital. Students are having to learn to delegate and can feel a bit vulnerable doing this with staff who are well established in the area. The HCSW can make it clear to students that they understand they need to learn to delegate and can give feedback on this process to both the student and the mentor. In addition, sharing the expertise and the knowledge gained by the HCSW can help the student tremendously.

- **Health care professional (HCP) role**

It is important that students work alongside other members of the healthcare team to learn about others' roles and to learn to work collaboratively with other professionals for the benefit of patients. Arranging time with other members of the team is important and this should be structured with the student identifying what they aim to achieve by doing this. Feedback to the mentor is also important both verbally and through signing observed learning records for the student to verify what has been achieved during this time.

- **Support from Disability Liaison Officers (DLO's)**

Some Nursing students may have problems due to disabilities, including dyslexia or long term medical conditions. At the Division of Nursing there are disability liaison officers who can provide support and advice for students and mentors in practice learning and assessment. Guidelines to help you to support a student who discloses they have dyslexia can be found at

www.nottingham.ac.uk/nursing/sonet/rlos/placs/dyslexia2/

If you would like advice or guidance about student's assessment that may be affected by these issues please contact your University Link Lecturer who will be able to support you and if appropriate sign post you to the DLO's.

General guidelines for Practice Placements

In order to register with the NMC the student **must** have acquired experience in specified nursing practice placements. 50% of all courses are in practice with associated levels of assessment of their competency in line with the NMC standards for pre- registration nurse education (2010). Students must have completed the requisite number of hours of clinical experience laid down by the NMC before they can complete the course.

Standards for placement areas, supervisors and mentors are contained in the audit documents and can be found at www.nottingham.ac.uk/healthsciences/practice/nursing/audit/index.aspx

Students shift patterns and hours of working and sickness reporting

Students have supernumerary status; they are not part of the workforce during this time, i.e. not included in the establishment figures. They should work under supervision, towards achieving the practice competencies. 40% of their shift time must be on duty with a mentor.

The students are required to work 40 hours per week (exclusive of meal times), spread over 5 working days. 37.5 hours in practice placement and 2.5 hours of personal reflection time. In areas where it is normal practice to work 12 hour shifts, students may also undertake these if it is considered appropriate to meet their educational needs - for example to work with their mentor. However students should work **no more** than three 12 hour shifts in one week. Students **are** required to work planned shifts in keeping with normal shift patterns. This will entail working weekends and night duty. However, students would not normally be expected to work more than one weekend every four weeks.

In semester one (first HUB Placement), they would not be expected to undertake night duty, but from semester two (spoke placement onwards), a maximum of three nights in any six week period could be undertaken.

The course is educationally led and students may be required to attend student forums, clinical supervision, programmed study days, seminars and tutorials whilst in placement. These will be highlighted on allocation change lists. Students are not allowed time from practice for study days or tutorials unless dates/times have been confirmed, in writing or on email, by allocations or teaching staff. If students are working in a placement over a **bank holiday** they should work it within their normal hours of work. If a placement is closed on a bank holiday they should take it as an additional day off.

Students **must** attend practice placements as **allocated**, and for the hours specified in order to fulfil statutory course requirements. **Students' absence from practice for any reason, must be reported to the School**

Student's MUST report ALL sickness or absence to the School and practice placement. Students should not make up absences or sickness unless an action plan relating to this has been agreed and signed by their personal tutor and negotiated where appropriate with practice and the allocations team. Any sickness or absence MUST be recorded on the student's final interview sheet.

Absences of seven days or more require a Medical Certificate which should be given to the Division of Nursing by the Student.

All students are required to complete a minimum number of hours in practice before they are eligible to enter onto the NMC professional register. It is therefore imperative that an accurate record is kept of attendance throughout the duration of the course. Student off duty records should be kept in placements until the end of their course.

Uniform policy

Throughout the course students must adhere to the uniform policy/dress code of the placement area.

Time Sheets

Students from 1309 onwards have a timesheet in their OAR documentation. Students are required to record their hours of work on placement including study days, reflection time and any sickness or absence. This should be signed at the end of each shift by their mentor or supervising registered nurse.

Getting ready to have students

Preparation for Practice

Introduction

Practice based learning takes place in a wide variety of placement settings such as selected wards, departments, schools, community health centres, and other non-institutional settings within NHS Trusts, the Private Sector, Voluntary and Social Services and Local Education Authorities. Students will experience the hub and spoke model of practice experience to ensure the student has insight into the patient's journey.

Practice-based learning is learning from practice, in practice. Practice based learning is not just about helping students to acquire nursing practice skills. It is also about assisting students to apply their theoretical knowledge within the practice setting thus helping them to acquire the decision making skills required to function as a Registered Nurse. Hence, activities such as enquiry based learning, reflective writing and portfolio development form part of the practice based learning element of the theoretical component of the curriculum.

Each pathway is divided into 3 parts, the student's assessment documents (OAR) will indicate which part they are currently studying in.

The focus for the students are as follows:

Part one of the programme:

The student needs to demonstrate by the end of part one of the programme that they have acquired essential care skills, demonstrate professional behaviour and are aware of how to safeguard patients.

Part two of the programme:

By then end of part two the student should demonstrate that they are clearly working towards independent practice.

Part three of the programme:

The student demonstrates good decision making skills, demonstrates leadership qualities and can work with minimal supervision so they are eligible to enter the live register of nurses.

Practical Examinations and Essential Skills Clusters

Students have practical exams as part of their course, some are undertaken in clinical practice (the essential skills clusters ESC's) and some are undertaken in the classroom setting (simulated assessments or OSCEs).

Details of these practical exams can be found in the student's OAR documentation. The essential skills cluster assessments (ESC's) need to be completed at certain points in the programme in order for students to progress. Students have two summative attempts at the Essential Skills Clusters. Essential skills can only be assessed by a registered nurse on the mentor database. ESC assessment is a formal assessment taking place in your practice setting. Please ensure your student is ready for the assessment before you commence.

Learning Pathway's - Hub and Spoke Model

The Nursing and Midwifery Council (NMC) guidelines state students should gain a balance between practice learning experiences in a range of practice areas to include acute, community, and independent and voluntary settings which reflect the journey of the person using services. (NMC, 2010).
In order to meet these opportunities, the university is utilising a hub and spoke model for the allocation of students.
Students should be supported and encouraged to access inter-professional learning opportunities during these pathways.
Students will be based in a hub/base placement for one year and during the year they will experience other areas related to the individual's pathway through health and social care settings. The student allocation (change) list indicates whether the student is with you on a hub or spoke placement. The Bondy skills escalator assessment tool is used to assess level of competence in both hub and spoke.

Hub- Core Features:

- The hub is where the main mentor is based and the student will be associated with for a year.
- Hub placements should be in a field specific area(formerly known as branch placements)
- Hub placements may be in the independent or voluntary sector (provided they have been audited and have trained mentors)
- Competencies are assessed within hub.
- Mentors within hub placements complete final assessments.

Spoke -Core Features:

- A named person, who is a mentor, is allocated to the student.
- Spokes are 2 weeks or more and in audited areas.
- Spokes are areas associated with the base placement, where students gain a breadth of experience reflecting the modern healthcare delivery system.
- A structured and planned practice learning experience that reflects the person using health services' journey and/or the diversity of nursing (in relation to the hub)
- Competencies are fulfilled during a spoke practice learning experience and assessed by a registered mentor.

Insight visits

- A short experience which is meaningful to practice learning and relates to the person using health care services journey.
- May include settings outside of 'traditional' placements e.g. coroner's court, trust training workshops and conferences.
- Usually arranged by the student but should be agreed with their mentor. Generally one or two days but must be less than 2 weeks.
- May still include potential to achieve competencies – observed learning record forms could be used.

Initially, preparation for practice will enable students to learn appropriate skills immediately prior to placements so that they can then practice these skills within their placements to consolidate learning. In addition, there will be study days during the placement and **student forums** in part one, followed by **clinical supervision** in parts two and three of the programme, that will be used to help the student to reflect on their learning whilst in practice.

Initially, the emphasis for this aspect of the course will be on teacher/mentor facilitation, with a gradual move throughout the course to student-centred, self-directed learning.

- **Educational Audit**

Before a placement area can be allocated students they must have a successful educational audit

www.nottingham.ac.uk/healthsciences/practice/nursing/audit/index.aspx led by university staff. Audits are undertaken every 2 years or more frequently if the nature of the area changes, or concerns about an area are raised either by students, lecturers or service partners.

Any issues/concerns raised at the educational audit need to be addressed satisfactorily before students are allocated. If an area goes longer than 2 years without an audit for any reason, students will be withdrawn until the audit is successfully completed.

- **Student workbook/induction pack**

It is best practice to develop a workbook/induction pack for the area for students. The pack should contain information relevant to the area, details of the University Link Lecturer, and their contact details, advice about shift patterns, type of nursing undertaken in the area and any other information the placement staff feel is relevant for students when preparing for their placement. This information assists students to prepare for their experience which can help them to settle in more quickly so they can start to learn. The pack can be included on the placement database so that students can access a copy before commencing their placement.

- **Orientation programme**

This needs to be completed on the student's first day to help them settle in but also for health and safety reasons e.g. showing them where things are stored, where fire exits are and moving and handling equipment used in the area, where they can get refreshments etc. There is also an orientation checklist in the student's OAR documentation of what they need to cover on the first day and by the end of the first week.

Orientation programmes do not have to take up a registered nurses time. You can involve the HCSWs or senior students in providing an orientation programme for new students to your area. It is useful to have a written programme outlining what the orientation needs to consist of so that important aspects are not omitted.

- **Worksheets**

While not a requirement, it is useful to have some worksheets/guides for students about what you expect them to learn within your area. These may differ for each level of student. These can help to give the student some structure to their learning and helps to give some consistency between student and mentors in terms of the learning outcomes expected.

Assessment of Competency

Introduction

The assessment strategy within all nursing courses is intended to extend students' personal development and professional learning and to serve as a means of recording their level of competency. In order to ensure that the students acquire the standards of competency required for registration with the NMC, the mentor must make sure the student has achieved at the Bondy level required for the relevant point the student is at on the programme. This is clearly indicated in the student's assessment documents (OAR)

Essential components of this framework are:

- Theoretical assessments.
- Achievement of NMC Standards for competence
- Objective Structured Clinical Examinations (OSCE's)
- Simulations
- Evidence based portfolios of learning.
- Essential Skills Clusters (ESC)
- Ongoing Achievement Record (OAR)
- Self assessment by the student.

What is Assessment?[1]

Assessment is the ongoing process of gathering, analysing and reflecting on evidence to make informed and consistent judgements to improve future student learning.

Assessment strategies are designed to:

- Enable the learner to identify their strengths and areas for development.
- Provide a way of knowing when a learner is proficient to practice.

Therefore, assessment in the nursing practice settings should:
- Provide a clear picture of the progress of the learner.
- Enable the learner to be aware of their progress in each nursing practice experience.

Principles of assessment

- Judgements should be made using the agreed criteria for assessment using the Bondy skills escalator.
- Learners must be aware of the criteria on which they are being assessed.

Assessment is a continuous process and in the final analysis a single incident should not be allowed to 'make or mar' a learner's reputation

Assessment is a continuous process of learning in which the learner is equally involved with their assessors. Within this process there is both FORMATIVE and SUMMATIVE assessment.

Formative assessment is diagnostic in nature and is concerned with the development of the student, with identifying strengths and weaknesses, and with providing the student with feedback on their progress during the learning process. A formative assessment should be completed at the end of the students first HUB placement and in their Spoke. At the mid-point of the student's year in placement a tripartite discussion between the student, mentor and practice learning team lecturer will assist the formative assessment process and give feed-forward to the student on their progress towards the summative assessment.

Summative assessment is a final assessment that occurs at the end of each part of the programme and is decision making in nature, awarding the relevant Bondy level according to the student's performance. The summative assessment should take place at the end of the final HUB placement. This assessment would also include the award of grades for credits for practice.

Who Assesses?

Assessment throughout the programme is essentially a team activity involving mentors, other health and social care practitioners, the student and their personal tutor.

The Student's responsibility is to:
- Keep the Ongoing Achievement Record (OAR) and Clinical skills book in a safe place and ensure it is available at all times when discussions are held with their mentor.
- Develop an action plan to provide the starting point for discussion with their mentor at the beginning of the nursing practice placement.
- Reflect on their progress and provide evidence to support achievement of their competencies. They should be encouraged to achieve this through portfolio activity.

- Arrange meetings with their mentor to discuss their progress at designated points during each nursing practice experience.
- Arrange their tripartite interviews with mentor and University link lecturer within the published time frame on the course assessment schedule, notified on email to each student.
- Submit their OAR to the assessment office by the submission date on the assessment schedule for their programme to ensure their practice grades are recorded on their academic record.
- Arrange an end of year meeting with their tutor to complete the personal academic record.

The Mentor's responsibility is to:

- Designate time to discuss the student's progress.
- Provide the student with formative feedback on the progress that they are making towards achievement of the competencies.
- Attend the tripartite discussion meeting arranged by the student unless clinical workload prevents this.
- Document whether or not the student has achieved the competencies following discussion with the student and verification of the supporting evidence provided by the student.
- Develop action plans that will help the student to achieve.
- Sign Ongoing Achievement Record (OAR) and Clinical skills book to confirm whether or not they believe that the student has the potential to be a safe competent practitioner.
- Inform the University Link Lecturer if at any time during the placement there is concern about the student's progress, attitudes and /or attendance, and /or if the student fails to achieve any of the competencies.

Role of the HUB Mentor

- Is allocated a student for year
- Meets with the University Link Lecturer for the Tripartite discussion
- Writes summative assessment at end of year
- Can assess competencies
- Can assess Essential Skills Clusters
- Allocates credits for practice

Role of the Spoke Mentor

- Has student for short placement period
- Liaises with Hub mentor to feedback
- Does formative feedback
- Can assess competencies
- Can assess Essential Skills Clusters

The University Link Lecturer's responsibility is to:

- Assist the student to reflect on their learning and develop a portfolio of learning whilst in placement.
- Provide support and advice for both mentor and student when and as required
- Attend the tripartite meeting

The Personal Tutor's responsibility is to:

- Ratify that the student has achieved/not achieved the requisite competence and record the results in the student's Personal Academic Record.
- Validate the credits for practice awarded by the HUB mentor
- Inform the Assessment Clerk of student's progress at the end of each year, so that the Examinations Board can receive results for progression on the course.

Dealing With Concerns Regarding Students in Placements

Healthcare professionals of the future need to ensure that they meet the requirements of both the Nursing and Midwifery Council (NMC) as fit, caring, responsible, professional individuals who will have the privilege of caring for vulnerable patients and clients during their careers.

The School of Health Sciences at The University of Nottingham will ensure that their graduates are of the highest standards and fit to care for patients. In order to do this, we will make certain that they meet all professional requirements in terms of their attitude and behavior.

- If you have any concerns regarding students within your placement, please discuss these with the student initially and if appropriate, document your concerns in the student's Ongoing Achievement Record. As part of the discussion with the student, it may be necessary to document an action plan regarding the concerns you have together with a review date. This is extremely important so that, in the event of your concerns not being resolved, there is evidence available of action/s you have taken.

- If you have concerns regarding a student or require advice/support on how to deal with the concerns you have, even if you have not yet discussed them with the student, please contact your University Link Lecturer. **Please do not hesitate to contact someone.** Problems/concerns can often be easily dealt with and seeking advice/support early can often prevent misunderstandings and can save you time.

- **Documenting concerns/problems is vital**. On the rare occasion that situations are not resolved, accurate record keeping is essential in enabling the Division of Nursing to follow up concerns identified and in assisting the student to develop an appropriate action plan for the future.

If you experience difficulty contacting a member of your University Link Lecturer please contact the Division of Nursing. It is useful to indicate how urgently you require a response so that your concerns can be dealt with as soon as possible.
You can also find information on your University Link Lecturer on the Practice Learning Web page:

www.nottingham.ac.uk/healthsciences/practice/nursing/plts/index.aspx

Values & Behaviours Tool -
The values and behaviours tool is mapped to the NMC competencies. As part of the student's summative assessment at the end of each part of the programme mentors are required to complete the checklist in the students OAR. If you answer no to any of these criteria then relevant competencies must be recorded as not achieved. If you concerns about any aspect of a student's values or behaviour then you must contact the University Link Lecturer so that this can be discussed with the student, documented and an action plan made with a date for review. Answering yes to the values and behaviours tool however, does not equate to automatic achievement of the mapped NMC Competencies.

Following discussion with your University Link Lecturer, should you wish to raise a concern about a student, please complete and submit the Concern Form, found at the link below:

http://www.nottingham.ac.uk/healthsciences/contact-find/raising-a-concern/index.aspx

Service User & Carer Feedback

The involvement of service users, carers and relatives in the assessment of practice is highly valued, as it supports students' professional development and acquisition of evidence for NMC competencies and skills. Student nurses from 1409 are required to gain feedback from service users, carers and relatives regarding the care that they have given.

During each part of the programme there is a requirement that mentors seek written feedback about a student's performance from a minimum of two service users, carers or relatives. At least one of these must be feedback from a service user. It is acknowledged that the needs of the service user, carer or relative must remain the primary concern. **Feedback should only be sought by the mentor. There may be some situations when it may not be feasible or appropriate to obtain feedback. It is not necessary for the student to know the identity of the service users, carers and relatives involved.**
More information/guidance can be found on line

http://www.nottingham.ac.uk/healthsciences/documents/practice-nursing/service-user/service-user-carer-guidance.pdf

Completing students Assessment of Practice record and Ongoing Achievement Record.

A Guide to Roles and Responsibilities for Mentors, Students and Teachers.

The Division of Nursing strongly encourages students to accept responsibility for their own learning and self-assessment.

The Assessment Process

First Week on placement:

- During the first week of placement the student must negotiate with their mentor time for the preliminary interview to set learning objectives, action plan and sates for the intermediate and final interviews. The preliminary interview and orientation records are to be completed in the student's practice assessment documentation.

- The student is to identify with their mentor the specific learning objectives for the placement. They must share with their mentors the action plan from their previous placement (unless this is their first placement) which is contained in their Ongoing Achievement Record (OAR). This is a mandatory requirement of the Nursing and Midwifery Council (NMC Circular 33/2007).

- During the placement the student should work with a range of health and social care professionals, gaining experience to develop knowledge, attitude and skills. The student should spend at least 40% of their time on placement being supervised (either directly or indirectly) by an up to date mentor or practice teacher (NMC Standards to Support Learning and Assessment in Practice, 2008) and should work a full range of shifts.

- The student should consistently demonstrate development and achievement of practice competencies in conjunction with their assessment and completion of skills schedule. These competencies are those provided in the NMC Standards for pre-registration nursing education, 2010.

- Utilising their own enquiry based learning skills and the guidance of their mentor, the student will gather evidence such as reflection on care intervention, notes of reflective discussions, observed learning records/insight visits, application of knowledge and understanding to care delivery under direct observation, and the application of protocols, policies and procedures to patient/clients in practice. In addition, evidence from the spoke placement that forms part of the learning pathway for the student, will need to be reviewed by the mentor. This portfolio of activity, when enhanced with sources of evidence e.g. reference to literature, protocols, etc, can then be used by the student to demonstrate evidence of achievement of competencies. This evidence **must** be retained in the student's portfolio.

Service User & Carer Feedback

Service user, carer or relative feedback – is a new NMC requirement. During each part of programme mentors are requested to seek written feedback from a minimum of two service user, carers or relatives. At least one should be from a service user.

- This should planned at the initial interview as to how this will be obtained.
- Mentor selects the person, approaches, explains process and collects feedback (anonymous).
- Student is required to reflect on the feedback and discuss with mentor.

Tripartite Interview:

Students should have a tripartite discussion meeting between, their HUB mentor and University Link Lecturer. This should occur midway through the placement, at the intermediate interview stage of their HUB placement.

- The student has responsibility to arrange this
- The mentor role is to facilitate discussion of student's progress, issues action plan, and provisional grading of practice.
- Does not replace other support such as extra meetings re: student performance

- This provides a formative opportunity to review the progress of learning and achievement of competencies and identify any areas of concern and update action plans. It should include an exploration of what has been learnt, what still needs to be learnt, guidance on gathering evidence and the quality of the evidence of achievement the student has collected.

- The mentor **must** provide constructive feedback to the student in relation to their punctuality, interpersonal skills, professionalism, attitude (referral to the previous professional progress record may be made in the Ongoing Achievement Record), care delivery and/or management skills, knowledge, understanding and application to care interventions. Comment should be made of the student's strengths and areas that require development and this should be recorded in the Ongoing Achievement Record. If required, both mentor and student should negotiate a revised learning action plan. This will provide the student with identified opportunity to improve.

- If at any time there is concern that the student is not achieving the competencies at the required standard outcomes/standards of proficiency, or is making slow progress in spite of the learning opportunities and discussion, or is unsafe, it **must** be discussed with the student and the University Link Lecturer and recorded in their documentation.

Please do not wait until the final interview before discussing it.

Final Week:

- The final interview **must** take place during the students last week on hub placement and at a time convenient to both mentor and student.

- The student will submit the OAR and portfolio of evidence, identifying in the appropriate boxes the type and location of evidence being submitted to demonstrate the achievement of competencies.

- The mentor should indicate the Practice Level of Achievement using the Bondy assessment tool at the front of the OAR. The mentor should document the Bondy Level achieved and sign at the end of each of the four domains (four signatures required in total).

The HUB mentor will award credits for practice as part of the summative assessment using the credits for practice framework detailed in the students OAR. The mentor must justify grade with comments linked to Bondy level the student has achieved against the competencies.

- Please note you can only award a fail or 45%, 55%, 65%, 75%. Do not use any other numbers when grading students as the OAR will then need to be returned to you and it delays the student's progression on the programme.

Please see the Credits for Practice Flow Chart for further guidance, this is also in the student's OAR document.

The mentor will assess the appropriateness of the evidence submitted determining that the student:

Achieved: Competently, safely, effectively and consistently throughout the placement.

Not Achieved: (a) - No opportunity - the type and kind of placement did not present an opportunity of achievement.

Not Achieved: (b) - Inadequate/inappropriate evidence - the student fails to submit sufficient and appropriate evidence of achievement. The mentor needs to advise the student of improvements to be made in the next placement.

Not Achieved: (c) - Poor/unsafe practice - the student has demonstrated poor/unsafe practice throughout the period of practice.

- When assessing the student as not achieving as in a, b or c above, the mentor **must** qualify the rationale for this in the section provided in the OAR document. Supporting reports may be required and the mentor should discuss "not achieved" in either b or c with the University Link Lecturer and involve them in the final interview. Following a first attempt failure in any competency the student will be allowed a further attempt before a recommendation can be made for discontinuation from the course.

- The mentor should make comment of the student's overall performance and record any absences on the final interview sheet. The student and mentor should formulate an action plan of learning for the next placement.

- The student should be requested to sign the OAR Record sheets in recognition of completion of the assessment and the placement.

- The student will submit the OAR to the Assessment Clerk in accordance with the Cohort Assignment Submission Schedule. Some students may also be required to submit their Portfolio of Evidence and Clinical Skills book.

- The Division of Nursing will randomly audit OAR documents and verify authenticity.

Incident reporting/IR1 reports

If a student is involved in an incident and an IR1/ Incident form has been completed this must be recorded in the student's OAR. This is located on professional progress interview/final interview. The practice area need to inform their University Link Lecturer as soon as possible following the incident. Students should not be asked to submit a statement without having had access to support from; the University Link Lecturer, Personal Tutor or Practice Learning Leads.

Final placement of the course:

- In the student's final placement the NMC require the sign off mentor to make the declaration that they "have had the opportunity to review the student's Ongoing Achievement Record and where appropriate, through the student or their personal tutor have accessed evidence in support of the standards of competence". The sign off mentor confirms that the named student has successfully completed all practice requirements and is capable of safe and effective practice at the end of the programme" (NMC 2006). This forms part of the formal process leading to registration with the NMC.

- The sign off mentor is accountable for their decision in the above declaration. The Ongoing Achievement Record provides a robust record of the student's progress and aims to support the sign off mentor by providing documentation of the student's practical developmental needs and progress throughout the programme. It permit's the sign off mentor to track the student's placements, follow their progress and contact previous mentors and the student's Personal Tutor if appropriate.

- The Sign Off Mentor **MUST** be on the same part of the register as the student, otherwise this invalidates the student's assessment.

- The sign off mentor must be noted on the local Trust mentor database as having sign off mentor status, otherwise it invalidates the students assessment.

Clinical Skills Book

Students on all pre-registration courses have a Clinical Skills Book. The fundamental idea behind the book is to reintroduce a tool for students and mentors to record the acquisition of clinical skills throughout their pre-registration course (and potentially beyond this).

This book will:

- Provide mentors with a brief overview of the student's skills experience and development.
- Provide the students with a visual record of their skills acquisition.
- Enable the personal tutor and University Link Lecturer to have an overview of the students' progress in relation to clinical skills.

At the current time, the book itself is not formally assessed. Students will need to use it as part of their portfolio development and clinical assessors will find it to be a vital part of the portfolio of evidence for the achievement of clinical competencies.

Because of the pressures already on clinical assessors, we have designed this as a self-assessment document and there is no formal expectation for assessors to 'sign off' a student, however we would encourage mentors to sign the clinical skills book if the student is using it as supporting evidence for achievement of competencies. We do thank any assessors who wish to contribute to the book. We feel that this is potentially an important aspect so that assessors can obtain a view of which skills the student has acquired within the placement and monitor progress within the placement and the course as a whole. In order they undertake this, reviewing the skills booklet as part of the preliminary, tripartite and final interviews may be helpful.

We acknowledge that because of the huge range of activities nurses undertake it will never be a totally comprehensive document. We do hope however, it will be constantly developing and welcome any comments or suggestions of skills which have been omitted. Please send your suggestions on the clinical skills book back to The Division of Nursing with the student or direct to us via email:

Elizabeth.williams@nottingham.ac.uk

Collecting the evidence for the Portfolio

When judgements are being made about a student's progress it is important that the student is actively involved. The collection of a portfolio of evidence is to support the achievement of competencies demonstrating the student's knowledge base.

The aims of asking students to develop a portfolio of evidence are:
- To encourage students to accept responsibility for their own learning
- To assist them to learn how to reflect on their own progress and to review where they are going.

This process involves the student setting targets and action planning, i.e. identifying the learning opportunities, and the amount of supervised practice they are likely to require. These personal skills are important 'key skills' that underpin the development of all nursing practice skills. Therefore, this process is an essential component of achievement in practice assessment.

The strengths of using a portfolio of evidence to show evidence of achievement of competency are;

- Establishing the principle of student participation and self-assessment
- Increasing student motivation through the recognition of personal achievement.
- Providing a focus for diagnosis of achievements and learning needs.
- Placing assessment of practice at the centre of the learning process.
- Assisting students to reflect critically on and to accept responsibility for their own learning.

In the early stages of the course many students will have little experience of using portfolios to support their learning. Your role as a mentor and our role within the Division of Nursing will be to help the students to select the most appropriate evidence to support their claims for achievement of proficiency through the development of a portfolio. Support for the student with portfolio development is part of the Preparation for Practice sessions they attend during their first year. Support can also be gained from the University Link Lecturer if the student is struggling with the requirements.

Assessing the quality of the evidence

Reliability and sufficiency*:* How much evidence does a student need to produce to show that they have achieved the stated competency?
There is no easy answer to this question, as the nature of the evidence that the student provides to demonstrate achievement will be very dependent on the nature of the nursing care they are providing, and the needs of individual patients and clients. Therefore, the broader the type of evidence, and the context and the number of occasions on which the students produce this evidence, the more likely it will be that student is able to demonstrate that they have reliably achieved the appropriate level.
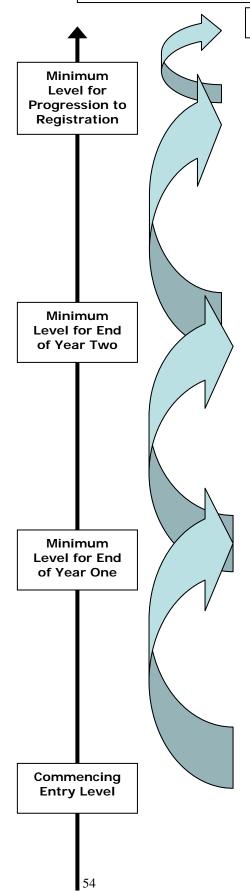
Validity: This requires that you get as close as possible to the student's actual performance. It also requires that you ensure that the evidence that the student is producing is recent and that it belongs to that particular student. Consequently, it will be important to ensure that students produce new evidence to support achievement of each standard of competency in each part of the programme.

Credits for Practice Guidance

Grade	Criteria	Prompts (comments to be aware of)
45%	• Achieved all competencies are required level of Bondy. • Comments from mentor/ colleagues indicate further development required.	• Needs to develop confidence ...... • Undertakes care with supervision, however..... • Is developing the ability to .... • Is starting to employ good communication skills ..... • Needs to investigate ...... to develop knowledge base
55%	• Achieved all competencies are required level of Bondy. • +5 competencies above that level. And/or • Mentor comments indicate satisfactory level in practice.	• Is able to explain rationale for ..... • Can demonstrate effectively .... • Has developed to a good level ...... • Is starting to develop an understanding ....
65%	• Achieved all competencies are required level of Bondy. • +10 competencies above that level. And/or • Mentor comments indicate has worked very well overall in practice.	• Has demonstrated very well ..... • Has a good level of understanding .... • Has a good judgement of ..... • The student has been very self-directed in their learning • Has applied knowledge to practice well.... • Is able to adapt behaviour effectively to the needs of patients/clients..... • Provides safe and effective care with minimal supervision • Communicates effectively
75%	• Achieved all competencies are required level of Bondy. • +15 competencies above that level. And/or • Mentor comments indicate student has worked consistently above expected level in practice.	• Prioritises care well .... • Can draw on a wide range of evidence and rationales for practice ..... • Has excellent communication and interpersonal skills • Safe and effective practice • Consistently demonstrates very good .... • Is able to analyse a situation well and mage a case load

Skills Escalator Pre-Registration Nursing Courses
Adapted from Bondy (1983)

The Practice Levels below are the minimum levels of achievement for each learning pathway in both hub and spoke placements

Minimum Level for Progression to Registration

Minimum Level for End of Year Two

Minimum Level for End of Year One

Commencing Entry Level

Registered Practitioner

Practice Level 4:
Student self-assessment: I have practised with **minimal supervision** and within NMC and Trust Guidelines, meeting the standards of proficiency, seeking advice and support as appropriate and demonstrating knowledge, skills and attitudes appropriate to this practice level. **Indicators**:
- Prioritises care appropriately, demonstrating careful, planning and delegation.
- Demonstrates evidence-based practice approaches, drawing and evaluating a wide range of sources of evidence to support care delivery decisions.
- Actions underpinned with sound evidence-based rationales, communicated in a coherent and accurate manner.
- Demonstrates professional behaviour, showing awareness of responsibilities as an accountable practitioner in relation to self and others.
- Demonstrates ability to adapt behaviour/interventions to needs of client and environment.
- Safe, co-ordinated and efficient practice associated with an autonomous practitioner.
- Consistently communicates effectively with multidisciplinary team, users and carers, voluntary sector and other agencies.

Practice Level 3:
Student self-assessment: I have practised with **decreasing supervision** to achieve the standards of proficiency, requiring occasional support and prompts in the development of appropriate knowledge, skills and attitudes. **Indicators**:
- Demonstrates increasing independence in initiating appropriate interventions.
- Applies knowledge to practice, providing a critical appraisal of the evidence.
- Makes informed judgements, considering more than one source of evidence.
- Demonstrates professional behaviour with underpinning ethical framework.
- Provides safe and efficient care under minimal supervision, demonstrating increasing confidence in own and others abilities.
- Gives informed rationale for care, demonstrating transferability of skills and knowledge.
- Communicates effectively with the nursing team and other health/social care professionals.
- Demonstrates understanding of role of autonomous practitioner

Practice Level 2:
Student self-assessment: I have practised **with assistance** in the delivery of care to achieve my practice competencies demonstrating knowledge, skills and attitudes appropriate to this level. **Indicators**:
- Prioritises care and adapts to meet client needs with support.
- Applies knowledge to practice, identifying possible sources of evidence.
- Makes judgements, providing an evidence based rationale.
- Demonstrates professional behaviour and understanding of professional responsibilities.
- Provides safe care under frequent supervision, demonstrating developing confidence in own abilities.
- Initiates appropriate interventions in relation to essential care without prompts.
- Communicates effectively with clients and the nursing team.

Practice Level 1:
Student self-assessment: I have practised, **with constant supervision**, in the delivery of essential care to develop the knowledge skills and attitude required to achieve my practice outcomes. **Indicators**:
- Undertakes care with direction and supervision from others.
- Identifies possible locations of information to support practice.
- Provides appropriate explanation in relation to care delivery activities.
- Demonstrates professional behaviour and understanding of personal responsibilities.
- Developing the ability to deliver safe and accurate practice.
- Initiates appropriate interventions with prompts.
- Developing communication skills.

Reference;

Nursing and Midwifery Council (NMC) 2006.Standards to support learning and assessment in practice London NMC

Nursing and Midwifery Council (NMC) 2008. Standards to support learning and assessment in practice (2nd edition) London NMC.

Nursing and Midwifery Council (NMC) 2010. Standards for pre-registration nursing education London NMC