

Standards for nursing and midwifery student supervision and assessment: key information

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This document provides key information for each programme and standards relating to the following four areas:

1. Practice Supervisors/Practice Assessors for any single student
2. Other staff who will oversee student experience
3. Nominated Person in each setting who will support the student
4. Statement of Definition of practice learning hours

Key Information for each programme

Nursing pre-registration programmes

- Have [Hub and Spoke placements](#)
- Have 2 Hub placements per year
- Each placement is of approximately 330 hours (10 weeks duration)
- A Hub placement is of a minimum of 4 weeks
- Spoke placements normally stem from the Hub placement
- Spoke placements may be long or short
- All spoke placements are deemed to be formative or observational
- The student will be overseen by a range of Practice Supervisors who will feedback to the Hub Practice Assessor in order to contribute to the student's summative assessment
- Long Spoke Experience - students may undertake 'Long Spoke' placements which will be between 3 days - 4 weeks long undertaken either in one block or spaced over the duration of the hub placement block
- Students require support in gaining experience across the lifespan (4 fields of practice) and working interprofessionally
- Student support will include fostering in learners the teaching and supervision of other

Midwifery

- have up to 4 hub placements a year, plus spoke placements
- 2 hub placements are graded. Competencies may be achieved in any placement
- students will be overseen by a range of practice supervisors who will feed back to the hub practice assessor
- students are in placement for an average of 30 hours per placement week
- students require support to develop autonomy and work interprofessionally
- student support will include fostering in learners the teaching and supervision of others

Return to practice

- Have one placement per course
- Have to complete up to 200 hours adult, children's and mental health nursing/or,
- complete up to 450 hours midwifery in selected RtP programme
- Will be overseen by a range of Practice Supervisors who will feedback to the Practice Assessor in order to contribute to the student's summative assessment
- Student support will include fostering in learners the teaching and supervision of others

Trainee Nursing Associate

- Have a base placement for the programme in their area of employment
- Have two alternative placement a year
- Have to complete 675 hours over two years in the alternative placements
- They will be overseen by a range of Practice Supervisors who will feedback to the Practice Assessor in order to contribute to the student's summative assessment
- Students require support in gaining experience across the lifespan and working interprofessionally
- Student support will include fostering in learners the teaching and supervision of others

Post graduate nursing students (SCPHN and SPQ)

- The SCPHN and SPQ routes (full time (1 year); part time (2 years); and the future route of the apprentice pathway (anticipated minimum 18 months) will each be considered as having three parts
- Each part of the SPQ and SCPHN programmes represents a progression point.
- Study the programme in three acknowledged pathways, full time (1 year); part time (2 years); and the future route of the apprentice pathway (anticipated minimum 18 months)
- Will have a minimum of one placement in one programme, it is usual for the student to move placement part way through the programme
- They will be overseen by a range of Practice Supervisors who will feedback to the Practice Assessor in order to contribute to the student's summative assessment.

Non-medical prescribing (V300/ V100)

- SCPHN Students can access the V100 Non-Medical Prescribing qualification via three specialist practice modules embedded throughout the Post Graduate Diploma for SCPHN (accessed, full time (1 year); part time (2 years); and the future route of the apprentice pathway – anticipated minimum 18 months)
- SPQ Students will access the V300 double module as part of the SPQ compulsory programme structure in semesters 1 and 2
- Registrant nurses and midwives can access the V300 double module
- Students studying V100 and V300 will be allocated a Practice Supervisor (with appropriate knowledge skills and experience)
- Students studying V100 and V300 will be allocated a Practice Assessor (who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme - 4.5 NMC 2018)
- The Practice Supervisor and Practice Assessor can be the same person in exceptional circumstances (4.5.1 NMC 2018)

Standards:

1. Practice Assessors/ Practice Supervisors

“Each student on a placement should normally be allocated to a single Practice Assessor at any one time.” NMC 2018

As consistency and continuity are key to effective learning and assessment, there needs to be a planned approach to identify a diverse range of people to be Practice Supervisors or to oversee each student in practice. How this is achieved for Practice Supervisors and Practice Assessors to effectively support, supervise and assess students will vary between practice settings, but will be clearly identified in placement profiles.

2. Other staff who will oversee student experience within their sphere of responsibility

There will be many other people who will oversee daily contribution to care/service delivery guide student's learning opportunities within their sphere of responsibility. **These staff remain accountable and responsible for the care/service delivery and patient, client and student safety.**

These staff will confirm to Practice Supervisor(s)/Practice Assessors the experiences the student has had and the contributions the student has made.

Practice Supervision can be either direct or via a long arm supervision arrangement (Appendix 1)

Nominated Person in each setting

"There is a nominated person for each practice setting to actively support students and address student concerns" (NMC 2018)

For all nursing students this will be their allocated Link Lecturer.

4. Statement of definition of practice learning hours

This statement is compliant with the Faculty statement on "Recording Nursing, Midwifery, ODP, Paramedic student hours in practice" (which was agreed in partnership through the Practice Education Group) which is attached as Appendix 2 for ease of reference.

Principles:

Learning in practice is a dynamic process, which needs to be flexible to accommodate all practice learning opportunities. Models of supervision that are in place can facilitate practice learning in a variety of ways. Examples can include peer dyads, hub and spoke, and clinical supervision models.

Practice hours enable the student to experience practice learning, which

- includes engaging in the care of an individual or a group of patients
- involves more than the experience of the provision of direct care
- requires exploration of the evidence base for the care provided

- involves learning from a range of healthcare and social work professionals from the practice setting applied directly to specific care delivery in placement
- enables reflection and/or clinical supervision

The above will enable the student to demonstrate how their learning directly impacts on patient care delivery.

All learning experiences should be discussed and agreed beforehand with the Practice Supervisor/Practice Assessor to ensure appropriate use of practice learning hours.

Examples:

Therefore practice learning can take place in a variety of forms and settings, which include (this list is not exhaustive):

- direct care hours
- placement induction
- placement updates
- attending relevant practice meetings, forums and conferences
- reflective practice, action learning sets and/or clinical supervision within practice learning partner settings
- documenting evidence to support attainment of competencies
- therapeutic interventions
- peer support for practice learning
- conferences and other practice related workshops.
- preparation for transition to registration
- preparation for practice and in-class placement evaluation.
- simulation based education hours
- audit / research in practice
- eliciting patient experience/listening to patient stories
- exploring quality standards relating to aspects of care

Appendix 1

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FACULTY OF HEALTH AND LIFE SCIENCES

PRACTICE EDUCATION GROUP

Strategy for Long Arm /Off- site Placements

1. Definition:

Long arm placements are:

Where there are appropriate student learning experiences in practice but there is no qualified practice assessor¹ available to ensure compliance with PSRB requirements. There will be an allocated qualified practice assessor identified/appointed to oversee the student experience and comply with statutory requirements for the programme in being accountable for the learning experience and the assessment of achieving professional competence/capabilities. The number of long arm placements that will be established will be informed by the strategy for the programme in meeting their learning opportunity and placement capacity requirements.

The duration for a long arm/ off site placement will be determined by the following professional requirements

- o Learning need
- o Placement setting
- o Other placement arrangements

N.B. For nursing and midwifery programmes, long arm placements are those where there is a person who will oversee daily contribution to care/service delivery guide student's learning opportunities within their sphere of responsibility. These staff remain accountable and responsible for the care/service delivery and patient, client and student safety. These staff will confirm to Practice Supervisor(s)/Practice Assessors the experiences the student has had and the contributions the student has made.

¹ A generic term for the person supporting a student on placement is practice assessor (e.g. NMC Practice Supervisor, NMC Practice Assessor, practice educator, mentor, clinical mentor, clinical educator)

2. Establishing a Long Arm placement

The setup of new long arm placements will meet statutory and Faculty placement quality assurance requirements/processes.

- The following documents are required to be applied in establishing new long arm placement provision
 - Criteria for selection of new providers: See Appendix 1
 - Information pack list of contents for potential new providers: See Appendix 2
 - Process for setting up new long arm placement provider: See Appendix 3

3. Identification and responsibilities of off-site practice assessors

For each professional programme, the minimum statutory regulatory requirements need to have been met by each individual practice assessor appointed. In addition, currency in relation to the relevant professional association education standards will also be a requirement. These include: NMC, HCPC, COT, CSP, BODP, BCoP, etc, ensuring standards of induction and quality assurance are met

4. Quality Assurance

Quality Assurance requirements will follow the faculty requirements for “Interprofessional placement quality assurance (QA) guidance for health and social care placements for pre-registration programmes” found in this document: [Risk Based Placement Quality Assurance \(QA\) Guidance](#) or for Social Work, the relevant Quality Assurance of Placement Learning (QAPL) requirements.

5. Identification and responsibilities of on-site supervisors/practice assessors

In addition to the long arm/ off-site practice assessor, students will be allocated a named on-site supervisor/ practice assessor, who will be responsible for supporting their learning in practice. This named on-site supervisor/practice educator must meet the following criteria:

- The permission of the placement organisation to undertake the role
- Suitable experience and seniority to organise, facilitate and authorise the required learning within the placement learning environment
- Knowledge and understanding of practice in the placement setting

- Understanding of the purpose of the placement and the required student learning outcomes
 - Ability to contribute to the assessment through providing evidence of student learning
- Authority to establish contingency plans for when the on site supervisor/practice assessor is absent during a placement to ensure continuity of student support

6. Dealing With Issues

- In the event of difficulties arising on placement the normal university protocols will need to be applied.
- In particular, the following document: [guidance for implementing freedom to speak up: raising concerns about practice \(including whistleblowing/bullying/harassment\)](#) is designed to help students and placement providers to address concerns at all levels.

7. Payment

Payment for long arm placements is dependent upon the models and funding streams available for each programme and the type of student.

Pre-Registration Social Work (undergraduate and postgraduate pre-registration programmes)

Social Work placement payments are managed according to the Education Support Grant (ESG) criteria and managed in association with the NHS Business Service Authority (BSA):

[http://www.nhsbsa.nhs.uk/Students/Documents/Students/A_universitys_guide_to_arrangements_for_ESG_funding_2016-17_\(V1\)_10.2016.pdf](http://www.nhsbsa.nhs.uk/Students/Documents/Students/A_universitys_guide_to_arrangements_for_ESG_funding_2016-17_(V1)_10.2016.pdf)

A day rate is set for payment to support student placements (£20 per day for academic year 2016/17). In cases where the practice assessment function is not provided by the placement provider organisation, this payment can be shared between the provider and the long arm/off-site practice assessor. The HEI has the authority to decide how the funding is shared distributed between the two parties.

Pre-Registration Healthcare (Occupational Therapy, Physiotherapy) Commissioned Students

Pre-registration healthcare students' placements are supported by the Health Education England (HEE) Non-medical Educational Tariff (NMET), which is managed in collaboration with the HEE Regional offices. Link to "Healthcare education and training tariff: 2015 to 2016 guidance"

<https://www.gov.uk/government/publications/healthcare-education-and-training-tariff-2015-to-2016-guidance>

The tariff is set by HEE and paid by the regional offices a year in arrears following confirmation by the University and Trusts of the number and duration of placements used in the preceding NHS financial year (01 April to 31 March).

The tariff is set nationally. For financial year 15/16 the level was set at £86 per placement week (37.5 hours) for assessed placements (~ £3,175/yr). All NHS placement providers and providers in the private, independent and voluntary (PVI) sectors are eligible for payments; with the exception that it is not payable for 'short' placements or ad-hoc placement days that are not assessed.

There is no provision for payment of off-site practice educators.

From 2017 onwards changes to both tariff payment and placement payments are likely due to the comprehensive spending review

Appendix 1 Criteria for selection of new providers

Service needs to meet the relevant Quality Assurance requirements . e.g.

- Faculty of Health and Life Sciences quality processes
- QAPL
- PLEAT
- QAA
- OFSTED

1. Sufficient personnel to ensure the student remains supernumerary
2. On site supervisor will be required to work with the long arm off site assessor to undertake placement preparation including familiarisation with Practice Assessment Document (PAD) and Learning Objectives
3. Provision of facilities as appropriate to the setting and service provision to support student
4. Evidence of a structured induction programme

Appendix 2 Information pack list of contents for potential new providers

INFORMATION PACK CONTENTS LIST FOR NEW LONG ARM PLACEMENT PROVIDERS

1. Strategy document
2. Establishing a Long Arm placement provider: "Criteria for selection of new providers"
3. Process for setting up new long arm placement provider
4. Contractual requirements for placements:
 - a. Practice Placement/Workplace agreement (PPA/WPA)
 - b. Learning Contract for SW students
5. Relevant Practice Assessment Documentation
6. Requirements for mentorship/supervision/practice assessment (HCPC and /or NMC and professional body standards (COT, CSP, BODP, , BCoP)
7. Roles and responsibilities
8. Meeting NMC/HCPC revalidation requirements for mentorship
9. Providing the relevant placement learning opportunities and experience (including contingency plans for when on site supervisor/practice assessor is absent during a placement to ensure ongoing student support)
10. Example of a student placement experience and learning opportunities, and supernumerary status/supervision information
11. Link to [supernumerary status statement](#)
12. [Guidance for implementing freedom to speak up: raising concerns about practice \(including whistleblowing/bullying/harassment\)](#)

Appendix 2

Recording Nursing, Midwifery, ODP, Paramedic Student Hours in Practice

All student practice hours are calculated, taking account of professional statutory regulatory body requirements for registration. Students are also normally regarded as supernumerary. The primary role of the student on placement is that of a learner.

Supernumerary status of students means that students are additional to the workforce requirement and staffing figures. They will make an evolving contribution to the work of the placement area to enable them to learn how to care for clients/patients and meet the professional competence requirements of their programme.

To learn how to care for clients / patients over the 24-hour period, students' supernumerary status continues through the night shift. Where the placement shift pattern involves practice assessors rotating to nights, students may follow their rotation. It is important for students to learn how to prepare for night shifts^{1 2}, and to have experience of working night duty.

Student hours in practice should be recorded on the relevant timesheet. The student's recorded time is from the start of the shift/practice session until the end of the shift/practice session/ or the time they leave (as approved by the practice assessor).

This includes all practice learning opportunities and reflection during the practice session. For example, break times within the practice sessions, team meetings, in house training, preparation time required by the practice area, and other learning activities agreed by the practice assessor.

Minutes are to be rounded up/down to the nearest 30 minutes.

Some students may also be required to document their shifts/practice sessions in the placement provider rostering system.

1. 'The Royal College of Physicians' guidance for their junior doctors, *Working the night shift: preparation, survival and recovery* can easily be adapted for other healthcare workers' (NHS Employers.org)

2. https://my.rcn.org.uk/_data/assets/pdf_file/0004/479434/004285.pdf