

Practice Assessment Document (PAD) Scotland

Student's Name: _____

University: **Robert Gordon University**

School: **School of Nursing, Midwifery and Paramedic Practice**

Matric No: _____

Programme: **Return to Practice (Nursing)**

Year of Intake: _____

Field of Practice: _____



GLOSSARY OF TERMS AND ABBREVIATIONS

AEI	Approved Education Institution
BLS	Basic Life Support
CHEF	Care Home Education Facilitator
MH	Manual Handling
HAI	Healthcare Associated Infection
HEI	Higher Education Institution
NES	NHS Education for Scotland
NHS	National Health Service
NHSS	National Health Service Scotland
NMC	Nursing and Midwifery Council
PAD	Practice Assessment Document
Part 3	Return to Practice (Nursing)
PEF	Practice Education Facilitator
PLE	Practice Learning Experience
SIPCEP	Scottish Infection Prevention & Control Education Pathway

Table of Contents

SECTION 1 GUIDANCE	1
1.0 Introduction to the Scottish Practice Assessment Document (PAD)	2
1.1 Your responsibilities as a student within practice learning experiences	3
1.2 The roles of Nominated Person, Practice Supervisors, Practice Assessors and Academic Assessors	4
1.3 Performance review process	6
1.3.1 <i>Pre-practice activities</i>	6
1.3.2 <i>Orientation and preliminary meeting</i>	6
1.3.3 <i>Interim feedback meeting</i>	7
1.3.4 <i>Final performance</i>	7
1.4 Feedback from service users and carers	7
1.5 Risk assessment	8
1.6 Reasonable adjustments	9
1.7 Attendance	9
1.7.1 <i>Working time directive</i>	9
1.7.2 <i>Timesheets</i>	10
1.7.3 <i>Authorised absence / sickness absence</i>	10
1.7.4 <i>Unauthorised absence</i>	10
1.7.5 <i>Reporting sickness / absence</i>	10
1.7.6 <i>Returning from sickness / absence</i>	10
1.8 Record of signatories – Practice Supervisor	11
1.9 Record of signatories – Practice Assessor	12
1.10 Record of signatories – Academic Assessor	13
SECTION 2 PRACTICE LEARNING EXPERIENCES (PLE)	15
2.0. Programme Outline	16
2.1. Educational Aims of Module	16
2.2. Assessment Criteria	16
2.2.1 <i>Background Information</i>	16
2.2.2 <i>Assessment Components</i>	16
2.3. Statutory and Mandatory Training	20
PART 3	25
<i>PLATFORMS AND PROFICIENCIES</i>	49
<i>Participation in Care Framework</i>	50
<i>Mapping to the EU Directives and The Code (NMC 2018)</i>	50
<i>Platform 1: Being an accountable professional</i>	51
<i>Platform 2: Promoting health and preventing ill health</i>	63

<i>Platform 3: Assessing needs and planning care</i>	69
<i>Platform 4: Assessing needs and planning care</i>	76
<i>Platform 5: leading and managing nursing care and working in teams</i>	88
<i>Platform 6: Improving safety and quality of care</i>	94
<i>Platform 7: Coordinating care</i>	99
SKILLS AND PROCEDURES (ANNEXES A & B)	107
<i>Communication and relationship management skills (NMC 2018a)</i>	108
<i>Nursing Procedures (NMC 2018a)</i>	113
SECTION 3 POLICIES, GUIDELINES, PROTOCOLS	131
3.0 Practice Learning Support Protocol.....	132
3.1 Record of Accidents / Incidents.....	142
USEFUL REFERENCES FOR STAFF AND STUDENTS	143
APPENDIX 1	

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 or return to practice programme (nursing).

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.

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 particularly important to demonstrate achievement of the (NMC) Future Nurse: Standards of Proficiency for Registered Nurses (NMC, 2018a).

As a nursing student, you will have consented to the carrying of your practice assessment document 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, and assessment of your proficiency, undertaken by your practice assessor and academic assessor for each part and for your 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 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 through the “Raising Concerns in Practice” in your Practice Learning Handbook [integrated within Student Handbook] and you **MUST** make yourself aware of your responsibilities in relation to this aspect of your role.
- Always seek consent from service users at all times and you must respect the rights of a service user to decline your participation in care, or to decline care, at all times.
- 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 supervisor/assessor signs ‘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 supervisor/assessor 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 assessor 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 supervisor/practice assessor completes and signs your ‘timesheet’.
- 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. You must declare a Good Health and Good Character at the start of the course and for re-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.

- **[Adult field only]** Ensure that you use the additional learning opportunities to evidence achievement of the EU directive 2005/36/EC requirements in relation to alternative fields of practice. Please see Practice Learning Handbook [integrated within Student Handbook].

In addition to the activities described above, as a student you must be aware of the requirement to complete an evaluation after each PLE; this is part of the formal university audit process. This evaluation should be completed on QMPLE.

This PAD will show your achievements, progression through the programme and contribute to the decision for re-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/module/year/programme leader.

The Nursing and Midwifery Council (2018d p10,) 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, p4).

“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, p4).

This means that you have supernumerary status whilst within the PLE; 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 Nominated Person, Practice Supervisors, Practice Assessors and Academic Assessors

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, p8).

Nominated Person

There is a nominated person for each practice setting to actively support you and address student concerns. In Scotland this nominated person in each PLE is normally a practice supervisor.

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 following appropriate preparation.

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, liaising with colleagues and your practice assessor to document your progress and summative assessments as part of this practice assessment document.

Practice Assessor

Your practice assessor will in collaboration with your practice supervisor(s), create sufficient opportunities to periodically observe your practice across environment(s) in order to inform the decisions, they reach for your assessment and progression in practice.

Your practice assessor works in partnership with your academic assessor to evaluate and recommend your progression for each part 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 have an understanding of your learning and achievement in theory and will collaborate with your academic assessor to reach a decision as part of the assessment process. The same person cannot be your practice assessor and practice supervisor simultaneously.

Academic Assessor

Your academic assessor will make and record objective, evidence based decisions on your conduct, proficiency and achievement. They will also make recommendations for progression based on your assessments, practice assessment document and other resources. They will collate and confirm your achievement of proficiencies and programme outcomes in the academic environment for each part of the programme.

Academic assessors maintain their current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing and confirming. They will have an understanding of your learning and achievement in practice.

Your nominated academic assessor will work in partnership with your nominated practice assessor to evaluate your learning and make recommendations for progression for each part of the programme. This will be in line with programme standards and local and national policies.

Your academic assessor will collaborate with your practice assessors at scheduled points in the programme.

Your academic assessor cannot simultaneously be your practice supervisor or practice assessor.

Please read the following information which will assist you to understand the assessment process, including how services users, carers and other professionals' contribute to your assessment, the need for a risk assessment to be carried out in certain circumstances, reasonable adjustment, any cause for concerns and attendance.

1.3 Performance review process

1.3.1 Pre-practice activities

Pre-practice learning activities including practice information

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 University electronic platforms. 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 PLE.

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

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 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/or assessor and student

You should plan to meet with your supervisor/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 supervisor or 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, p7).

It is important that you speak with your supervisor and/or assessor and your academic assessor 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

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 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 p6, 1.12; p12, 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. As such, 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. 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.

Please note the following guidance:

- You should try to seek feedback from service users/carers **at least once per practice learning experience, but a minimum of once per PART**. 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 **must seek consent** from the service user/carer and respect that **service users and carers have the right to refuse to participate or to withdraw their consent at any time. 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 nurse education each accredited HEI has a duty of care to ensure that you are safe while 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 who are pregnant or breastfeeding, may need additional consideration to ensure that they are not exposed to undue risk. Students from these groups should be risk assessed on arrival in the PLE.

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

- Alert the university as soon as possible if you are pregnant when you first commence practice or if you are returning to a PLE following maternity leave and are still breastfeeding.
- Consent to sharing information. While 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 PLE.
- Comply with measures recommended to manage risk.

Please refer to your Practice Learning Handbook [incorporated within Student Handbook] for information about:

- Students Nurses who are pregnant or breastfeeding
- Outline of roles and responsibilities in relation to 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 p10). 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.

Ultimately, it is your own responsibility to inform the practice supervisor(s)/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(s)/practice assessor 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 your Practice Learning Handbook.

1.7 Attendance

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 relevant HEI and practice policy and procedures when reporting absence.

1.7.1 Working time directive

- The number of weeks that student must engage with their PLE is allocated by the Placements Office. 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 PLE. Any requests for alteration to designated shift patterns for any reason should be made to the PLE manager /HEI.
- 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 PLE. Your placement hours will be agreed with you before you commence on placement.
- 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.

1.7.2 Timesheets

- Timesheets are important documents in that they provide evidence to confirm that students have achieved the required placement hours.
- Both students and practice supervisor(s)/practice assessor are responsible for ensuring timesheets are accurate and signed.
- Timesheets should accurately reflect the number of hours worked in practice.
- The original (lilac) hard copy of your timesheet should be handed in to Room H510 at the end of your placement. You should keep a copy for your own records.
- Timesheets should not be signed in advance. If the practice supervisor and/or practice assessor is not going to be on duty during the last few days of your PLE, the timesheet for these days should be signed by another member of staff.
- If the PLE closes because of a public holiday, you can either work in a different environment on that day or make up the time at another time.

1.7.3 Authorised absence / sickness absence

Please refer to the Attendance Policy (PDF document):
<https://tinyurl.com/sfn2684>

For sickness absence of up to 7 days, a self-certificate is required; for absences of over 7 days, a medical certificate/fit note should be submitted to the programme administration team.

If you need authorised absence during placement, your practice supervisor(s)/practice assessor will be able to authorise this leave as per the Attendance Policy.

1.7.4 Unauthorised absence

If you accrue significant periods of unauthorised absence this will be addressed through the HEIs disciplinary policy and procedures. This may ultimately result in your discontinuation from the programme.

1.7.5 Reporting sickness / absence

If you are unable to attend the PLE, for any reason, you must fulfil the following responsibilities either personally or by asking someone to act on your behalf:

- Email snmpabsencereporting@rgu.ac.uk stating your reason for non-attendance.
- Phone the PLE before the start of the shift or as soon as possible thereafter also stating your reason for non-attendance.
- Please also inform Tracy Connon: t.connon1@rgu.ac.uk

1.7.6 Returning from sickness / absence

As a student you should phone the PLE to tell them when you are returning and email snmpabsencereporting@rgu.ac.uk when you have returned to the workplace. A medical certificate/fit note is required for all sickness of 7 days or more. Failure to present this will result in you still being recorded as sick/absent and this may have implications for your attendance record on the programme. Please also inform Tracy Connon: t.connon1@rgu.ac.uk

1.8 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, p6)

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

1.9 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

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

1.10 Record of signatories – Academic Assessor

PLEASE COMPLETE FOR EACH PART OF THE PROGRAMME.

NB. Academic 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

PART of PROGRAMME	Academic Assessor Name (print)	Academic Assessor Signature <i>I confirm that I have been suitably prepared for the role of Practice Assessor</i>	Academic Assessor Initials	Academic Assessor’s field of practice	Date
Part One	Robert Brown	<i>Robert Brown</i>	RB	Adult	



SECTION 2 PRACTICE LEARNING EXPERIENCES (PLE)

2.0. Programme Outline

The programme is designed to prepare the student to re-enter the NMC register and is underpinned by the Nursing and Midwifery Council (NMC) Standards relating to return to practice.

<https://www.nmc.org.uk/standards-for-education-and-training/standards-relating-to-return-to-practice/>

2.1. Educational Aims of Module

The aim of the module is to provide a Nursing and Midwifery Council (NMC) approved Return to Practice (RtP) programme enabling former nurses and midwives to re-enter the professional register.

2.2. Assessment Criteria

Achieve a pass grade in each assessment component and be verified as able to return to the NMC register.

2.2.1 Background Information

Student supervision and assessment in practice requires that practice supervisors and practice assessors work together with you as a student to facilitate your learning. This, combined with the input of your academic assessor, will help to ensure a robust assessment process for each part 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 practice assessors should review this information prior to engaging in the supervision and assessment of your performance in practice.

2.2.2 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 7 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

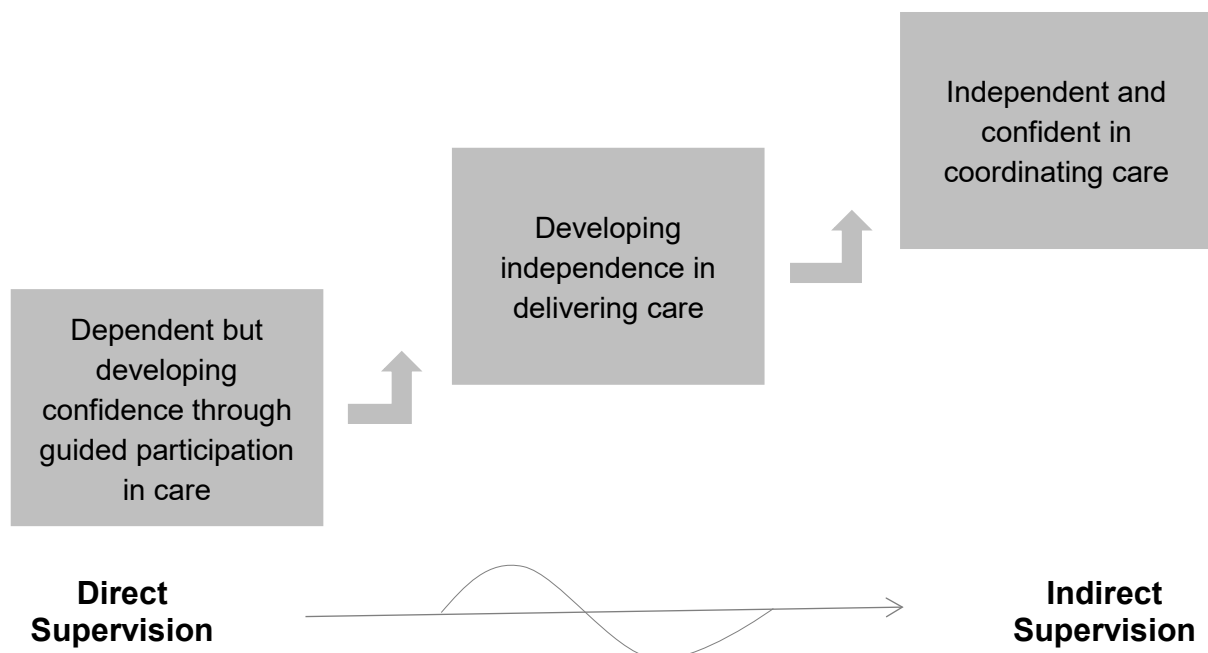
progress together, and with others including consideration of feedback from service users and carers and, through this collaborative dialogue, determine whether or not you have achieved each of the platform proficiencies at the required level of performance. The outcome of this assessment will then be reviewed and confirmed by your academic assessor at the end of the module.

- **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**
 - 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**
 - 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 the module. 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 supervisor(s)/ practice assessor(s) to understand what is expected of you as a student by the end of the module. The explanation below outlines the expected level of performance which must be demonstrated by the end of each Part, as well as the level of assistance you can expect to receive from your Practice Supervisor(s)/ Practice Assessor;

- **Participation in Care – Explanation of Levels of Participation**

<ul style="list-style-type: none"> ○ <u>Dependent</u> – Minimal standard of participation in care to be achieved by the end of Part 1 of nursing students’ programme. <ul style="list-style-type: none"> • <u>You will be working closely with your practice supervisor who will direct and guide you.</u> Through this guided participation in care, you will be able to demonstrate delivery of safe, effective, person-centred 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.
<ul style="list-style-type: none"> ○ <u>Developing Independence</u> – Minimum standard of participation in care to be achieved by the end of Part 2 of nursing students’ programme <ul style="list-style-type: none"> • 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.
<p>This is the level you will be required to demonstrate:</p>
<ul style="list-style-type: none"> ○ <u>Independent</u> – Minimum standard of participation in care to be achieved by the end of Part 3 of nursing students’ programme and students undertaking Part 4 Hons or dual registration Hons will be expected to maintain this level of practice. <ul style="list-style-type: none"> • 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.

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

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 supervisor/practice assessor. 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. Clinical skills and procedures practiced and safely demonstrated in both practice and simulation will be documented and signed for within the PAD as part of the ‘Annexes A and B Skills and Procedures’ section.

Your practice supervisor and practice assessor must discuss your progress and, through this collaborative dialogue, and also through discussion with others, determine whether or not you have safely demonstrated both the skills and procedures. The sets of skills and procedures identified by NMC as having to be safely demonstrated prior to re-entry to the NMC register are detailed overleaf:

- **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 Practice Assessment Document (PAD) and you must safely demonstrate each of these to enable your practice supervisor/ practice assessor to sign to confirm that this has taken place. Safely demonstrating skills and procedures will take place throughout each part of your programme and will, more often than not, 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 practice assessors must not only communicate with one another, but must also provide you with frequent feedback on your performance, indicating how you can best improve the safe demonstration of these skills and procedures going forward. Areas of strength and aspects for development should also be discussed and documented at all times to feed forward for each subsequent PLE.

2.3. Statutory and Mandatory Training

This must be signed by the student and verified by an academic member of staff when sessions are attended/completed.

	Part 1	Part 2	Part 3	Part 4
Moving and Handling (Statutory)				
Student signature:				
HEI signature:				
Date:				
Prevention and Safe (Therapeutic) Management of Violence and Aggression				
Student signature:				
HEI signature:				
Date:				
Fire Safety (Statutory)				
Student signature:				
HEI signature:				
Date:				
Better Blood Transfusion				
Student signature:				
HEI signature:				
Date:				

	Part 1	Part 2	Part 3	Part 4
Prevention and Management of Falls in Hospital				
Student signature:				
HEI signature:				
Date:				
Safe and Effective use of Bed Rails				
Student signature:				
HEI signature:				
Date:				
Information Governance, Safe Information Handling				
Student signature:				
HEI signature:				
Date:				
Think Capacity, Think Consent				
Student signature:				
HEI signature:				
Date:				

	Part 1	Part 2	Part 3	Part 4
Basic Life Support (Theory and Practice)				
Student signature:				
HEI signature:				
Date:				
SIPCEP				
Student signature:				
HEI signature:				
Date:				
Hand Hygiene				
Student signature:				
HEI signature:				
Date:				
Numeracy				
Student signature:				
HEI signature:				
Date:				

	Part 1	Part 2	Part 3	Part 4
Adult Support and Protection				
Student signature:				
HEI signature:				
Date:				
Child Protection				
Student signature:				
HEI signature:				
Date:				

PART 3

(Blue pages)

Practice Learning Experience

YOU ARE ONLY REQUIRED TO COMPLETE PART 3 PLE 1 FOR YOUR RTP PLACEMENT.

Practice Learning Experience (PLE) 1

Information for Students	
1.	Please check the information produced by the Practice Placement Team to ensure you complete the correct section of the PAD.
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 Practice Learning Handbook for more details.
4.	Please ensure that you liaise with your practice supervisor to secure dates for your interim review of progress and your final assessment. This should be done during your initial discussions with your practice supervisor.
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 discuss the skills and procedures with your practice supervisor to identify any skills that can be achieved within the PLE.

PRE-PRACTICE LEARNING ACTIVITIES			
PART 3: PLE 1			
PRACTICE LEARNING EXPERIENCE DETAILS			
Student Name:		Intake:	
Student ID:		Year:	
Practice Learning Environment:		Start date:	
Telephone Number:		Finish date:	
PLE Type:			
Name of PEF/CHEF:			
Nominated Practice Supervisor Name:			
Email address:			
Nominated Practice Assessor Name:			
Email address:			
Nominated Academic Assessor Name:			
Email address:			
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/ Practice 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/on QMPLE.			
3. Briefly summarise what the practice learning environment 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 articles on the topic and list below (using appropriate reference style).
- In the space below provide a brief summary of these two articles and outline any best practice recommendations in relation to these.

Article 1 –

Article 2 -

Condition / situation

6. In relation to the practice learning environment that you are about to enter, identify any related learning from your theory modules that would support your learning within this care environment. Please note your thoughts below:

7. In relation to the practice learning environment that you are about to enter, identify any related learning from the preparation for practice (or skills sessions) that would support your learning within this care environment. Please note your thoughts below:

Practice Supervisor/Practice Assessor – please sign to confirm that the pre-practice learning activities have been completed by the student

Date

____/____/____

Student Signature:

*Practice Supervisor and/
or Assessor Signature:*

Component 2 LEARNING OUTCOMES

PART 3: PLE 1

Component 2 Summary

To enable the student to become independent and confident in meeting Nursing and Midwifery Council (NMC) core proficiency outcome statements with indirect supervision.

Component 2 learning outcomes:

- | |
|---|
| 1. Demonstrate the ability to lead and co-ordinate care with indirect supervision from practice supervisor(s) assuming responsibility for own learning as well as learning of others. |
| 2. Demonstrate a comprehensive knowledge base that informs safe and effective practice. |
| 3. Demonstrate the ability to act as an accountable and responsive practitioner. |
| 4. Safely demonstrate a range of communication and relationship management skills in a compassionate, person-centred manner. |
| 5. Safely demonstrate a range of nursing procedures to provide compassionate, evidence-based, person-centred care. |

ORIENTATION & PRELIMINARY MEETING

PART 3: PLE 1

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

PART 3: 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 review skills achieved to date and identify skills and procedures that could be achieved within area:

Date ____ / ____ / ____	Student Signature:	<i>Practice Supervisor and/or Assessor Signature:</i>
Agreed date for next meetings	Interim:	Final:

INTERIM FEEDBACK MEETING

PART 3: 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

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

Skills and Procedures:

Student feedback:

Have any issues been referred to the Practice Assessor and/or Academic Assessor?	Yes	No
---	------------	-----------

Development Support Plan (see Section 3)	Yes	No
---	------------	-----------

Please circle result.

Interim result	PASS	FAIL
-----------------------	-------------	-------------

If the student has been awarded a FAIL grade at this point, the Practice Learning Support Protocol must be implemented in the consultation with the Practice Education Team (PET).

Date ____/____/____	Student Signature:	<i>Practice Supervisor and/or Assessor Signature:</i>
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SERVICE USER / CARER FEEDBACK (see guidance in Section 1.4)

PART 1: 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 you may withdraw your consent at any time. This will not affect your future care or treatment.

Please tick if you are:	The patient/service user			Carer/relative	
	Very happy	Happy	I'm not sure	Unhappy	Very unhappy
How happy were you with the way the student nurse....					
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:

PS and/or PA Signature:

STUDENT REFLECTION ON SERVICE USER / CARER FEEDBACK

PART 3: PLE 1

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 and/or
Assessor Signature:*

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES

PART 3: PLE 1

Student Name:

STUDENT ID:

Intake/Year Group:

Name of Placement:

Practice Supervisor:

Name and Location of Organisation/Professional Visited:

Individual overseeing student's opportunity comments – Please comment on student performance and what has been learnt

Print Name:

Sign:

Date:

Student reflection - please reflect on what you have learnt:

Date:

Student signature:

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES

PART 3: PLE 1

Student Name:

STUDENT ID:

Intake/Year Group:

Name of Placement:

Practice Supervisor:

Name and Location of Organisation/Professional Visited:

Individual overseeing student's opportunity comments – Please comment on student performance and what has been learnt

Print Name:

Sign:

Date:

Student reflection - please reflect on what you have learnt:

Date:

Student signature:

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES

PART 3: PLE 1

Student Name:

STUDENT ID:

Intake/Year Group:

Name of Placement:

Practice Supervisor:

Name and Location of Organisation/Professional Visited:

Individual overseeing student's opportunity comments – Please comment on student performance and what has been learnt

Print Name:

Sign:

Date:

Student reflection - please reflect on what you have learnt:

Date:

Student signature:

FEEDBACK FROM ADDITIONAL LEARNING OPPORTUNITIES

PART 3: PLE 1

Student Name:

STUDENT ID:

Intake/Year Group:

Name of Placement:

Practice Supervisor:

Name and Location of Organisation/Professional Visited:

Individual overseeing student's opportunity comments – Please comment on student performance and what has been learnt

Print Name:

Sign:

Date:

Student reflection - please reflect on what you have learnt:

Date:

Student signature:

ADDITIONAL NOTES

PART 3: PLE 1

Date	Time	Detail	Signature
		Student, practice supervisors, practice assessors, academic assessors can add notes to this page	

ADDITIONAL NOTES

PART 3: PLE 1

Date	Time	Detail	Signature
		Student, practice supervisors, practice assessors, academic assessors can add notes to this page	

FINAL ASSESSMENT: END OF PLE
TO BE COMPLETED BY PRACTICE ASSESSOR
PART 3: PLE 1

Student Name:

STUDENT ID:

Intake/Year Group:

The minimum level of performance for this part 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/practice 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 Annex A and B. Identify aspects for the student to focus on in future PLEs.

Date ____/____/____	Student Signature:	<i>Practice Assessor's Signature:</i>
------------------------	--------------------	---------------------------------------

Practice Assessor Overall Summative Assessment Comments

Please circle result.		
Overall result for this PLE	PASS	FAIL
Name of practice assessor: (print full name)		
Signature of practice assessor:		
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 the student's timesheet), and through objective evidence-based assessments, has:

ACHIEVED / NOT ACHIEVED (Please delete as appropriate) the expected participation in care level of **INDEPENDENT**.

Signature of practice assessor:

Date:

Student Statement

I _____ (write 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:

CONFIRMATION OF COMPLETION -

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 part to ensure all have been signed as achieved.

Practice Assessor: Confirmation of Achievements of Platforms		
<i>Please initial the relevant column</i>		
	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: Co-ordinating care		

Practice Assessor: Comment on safe demonstration of skills and procedures (Annexes A & B) [ALL must be completed by the end of Part 3]:

Practice Assessor Confirmatory Statement

I confirm that in partnership with the nominated Academic Assessor, student nurse (print name) _____ has **ACHIEVED/NOT ACHIEVED** (please delete as appropriate) all platforms (and proficiencies) and skills and procedures at the **INDEPENDENT** level for Part 3 of the programme and, **RECOMMEND/DO NOT RECOMMEND** (please delete as appropriate) progression to **THE REGISTER**.

Signature of Practice Assessor:

Date:

Academic Assessor Confirmatory Statement (HEI use only)

I confirm that in partnership with the nominated practice assessor, student nurse (print name) _____ has **ACHIEVED/NOT ACHIEVED** (please delete as appropriate) all platforms (and proficiencies) and skills and procedures at the **INDEPENDENT** level for Part 3 of the programme and, **RECOMMEND/DO NOT RECOMMEND** (please delete as appropriate) progression to **THE REGISTER**.

Comments:

Signature of Academic Assessor:

Date:

HEI USE ONLY

Number of hours for Part 3

Retrieval programme required?

YES / NO (delete as appropriate)

PLATFORMS AND PROFICIENCIES

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

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

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

- **RtP ALL non-shaded proficiencies must be achieved at the independent level by the end of this Part**

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

Participation in Care Framework

The expected level of performance is **Independent**. 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 practitioner, demonstrating a comprehensive knowledge base that informs safe and effective practice.

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

Each proficiency from the 7 platforms have been mapped to The Code (NMC 2018). Each proficiency has also been mapped to the clinical instruction elements of the EU directives. This mapping is visible below each proficiency statement. This will allow Practice Supervisors, Practice Assessors and Academic Assessors to be assured that, when students achieve each proficiency, they are, as a consequence of this mapping, also demonstrating that their practice is in adherence to the expectations of The Code (NMC 2018) for a registered nurse. This mapping also ensures that the clinical instruction aspects of the EU Directives are met as part of proficiency achievement.

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

Article 31 (V.2 Nurse Responsible for General Care) - '5.2.1 Training programme for nurses responsible for general care - the 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)

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

Platform 1: Being an accountable professional

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

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

1.2	Understand and apply relevant legal, regulatory and governance requirements, policies, and ethical frameworks, including any mandatory reporting duties, to all areas of practice, differentiating where appropriate between the devolved legislatures of the United Kingdom		
	<i>The Code</i> (NMC 2018)12.1; 14.3; 16.1; 16.2; 16.3; 17.3; 18.2; 20.4; 23.1; 25.2 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Discusses with PS/PA the legal basis underpinning practice, for example, Children’s Act, MH Act, Power of Attorney, Guardianship, Carers’ Act. Demonstrate the ability to work in line with The Code, to raise concerns appropriately.</i>	<i>Demonstrate ability to recognise specific issues relating to the legal basis for practice, for example, Children’s Act, MH Act, Power of Attorney, Guardianship, Carers’ Act. Practices in line with the Code, to raise concerns appropriately.</i>	<i>Selects and applies appropriate legal, 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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
1.3	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.		
	<i>The Code</i> (NMC 2018) 9.3; 14.1; 14.2; 14.3; 16.1; 16.2; 16.3; 16.4; 16.5; 16.6; 17.1; 17.2; 17.3; 20.8; 25.1 :EU clinical instruction Directives N/A		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Demonstrate the ability to work in line with The Code, raises concerns appropriately. Awareness of duty of candour. Understanding of medication errors and how to escalate these.</i>	<i>Demonstrate the ability to work in line with The Code, raises concerns appropriately. Explicit awareness of duty of candour. Understanding of medication errors and how to escalate these.</i>	<i>Critically reflects upon practice in line with The Code, raises concerns appropriately. Effectively and appropriately implements duty of candour. Report and document all adverse event appropriately.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

1.4	Demonstrate an understanding of, and the ability to challenge, discriminatory behaviour.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>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.</i>	<i>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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
1.5	Understand the demands of professional practice and demonstrate how to recognise signs of vulnerability in themselves or their colleagues and the action required to minimise risks to health.		
	<i>The Code (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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART THREE – Independent
	<i>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.</i>	<i>Practices within local procedures around self-care and also care of colleagues. Starts to develop analysis of critical incidents. Identifies vulnerability in colleagues and signpost opportunities for support and improving future practice.</i>	<i>Take 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. Reflect on critical or adverse incidents to inform or change practice.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

1.6	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.		
	<i>The Code (NMC 2018) 20.9 :EU clinical instruction Directives N/A</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA demonstrate an understanding of the importance of one's own health in relation to being able to care for others.</i>	<i>Can identify appropriate actions, agencies and support mechanisms to promote and maintain personal mental and physical health.</i>	<i>Clear evidence within the practice environment of the student's physical and emotional health to enable them to support the care needs of others.</i>
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
1.7	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.		
	<i>The Code (NMC 2018) 6.1; 6.2; 8.4; 9.2; 10.6; 19.2 :EU clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>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.</i>	<i>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.</i>
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

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.		
	<i>The Code (NMC 2018) 6.2; 13.1; 15.1; 17.3; 19.2; 19.3; 22.3 :EU clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Is aware of current research relating to the practice learning environment and its practices, client group and significant others. Seek out opportunities to source evidence to support learning within practice.</i>	<i>Developing knowledge and understanding of research and how to integrate this with previous experience to inform decisions and practises within the practice area / client group.</i>	<i>Apply research and evidence to patient care and planning care. Problem solve and prioritise patient care in accordance with current research evidence. Identifies gaps in own knowledge and takes appropriate steps to address.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
1.9	Understand the need to base all decisions regarding care and interventions on people's needs and preferences, recognising and addressing any personal and external factors that may unduly influence their decisions.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In association with PS/PA engages in the holistic multifactorial assessment of clients Is developing communication and listening /interview skills which gather information required to inform person centred care planning. Is aware of the need to utilise various sources of information to compile a thorough assessment of the client's needs and preferences.</i>	<i>Communicate effectively with the client group and significant others. Is able to 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.</i>	<i>Initiates skilled communication with the client group and significant others to 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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

1.10	Demonstrate resilience and emotional intelligence and be capable of explaining the rationale that influences their judgments and decisions in routine, complex and challenging situations.		
	<i>The Code (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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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 is explaining the rationale for a variety of routine actions/ care decisions.</i>	<i>Engages confidently with a wide range of people within and out-with 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>	<i>Assumes responsibility for liaison with a wide range of people within and out-with 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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
1.11	Communicate effectively using a range of skills and strategies with colleagues and people at all stages of life and with a range of mental, physical, cognitive and behavioural health challenges.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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. Participate in ward rounds/ MDT/case conference/ handovers.</i>	<i>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.</i>	<i>Confidently and clearly presents and shares verbal and written reports with individuals and groups Lead ward rounds/ MDT/case conference/ handovers, formulate and document plans. Analyse and accurately records and shares digital information and data.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

1.12	Demonstrate the skills and abilities required to support people at all stages of life who are emotionally or physically vulnerable.		
	<i>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; 17.2; 17.3; 20.5 :EU clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In association with the PS/PA is able to provide reassurance to clients. Is aware of appropriate support structures and agencies. Demonstrates empathy in communicating with clients. Is aware of the need to report any perceived vulnerability to senior staff. Is aware of principles of de-escalation.</i>	<i>Provides reassurance to clients. Is aware and able to participate in appropriate referrals to appropriate agencies. Demonstrate Empathy. Demonstrates ability to utilise appropriate and timely de-escalation.</i>	<i>Is confident and competent in providing effective reassurance in a variety of situations. Takes the lead in undertaking appropriate referrals. Is skilled in demonstrating sensitive and empathic care. Is skilled and confident in utilising appropriate and timely de-escalation.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

1.13	Demonstrate the skills and abilities required to develop, manage and maintain appropriate relationships with people, their families, carers and colleagues.		
	<i>The Code (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</i> :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Utilise verbal and non-verbal communication skills. Developing ability to actively listen and respond to verbal cues from others. Demonstrates empathy when interacting with people, their families, carers and colleagues. Aware of the need to engage in appropriate information sharing. Developing a professional disposition when interacting with all people.</i>	<i>Developing confidence and competence in engaging in verbal and non-verbal communication with others. Engages in active listen to identify relevant information from patients, their families and carers. Responds appropriately to verbal cues from others. Demonstrates empathy when interacting with people, their families, carers and colleagues. Engages confidently in appropriate information sharing. Developing a professional disposition when interacting with all people.</i>	<i>Is confident and competent in engaging in verbal and non-verbal communication with others. Actively engages in active listen to identify relevant information from patients, their families and carers. Is skilled in recognising and responding to verbal cues from others. Demonstrates empathy when interacting with people, their families, carers and colleagues. Confidently and appropriately identifies relevant information for sharing with appropriate individuals/agencies. Always presents self in a professional manner when interacting with all people</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

1.14	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.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Participates in active listening and appropriate questioning techniques to identify individual needs and preferences. Understand the need to assess social and cultural differences and provide effective and appropriate care. Aware of the concept of unconscious bias. Under supervision is able to adapt care to be person centred and sensitive to individual needs.</i>	<i>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. Understands the concept of unconscious bias. Is able to adapt care to be person centred and sensitive to individual needs.</i>	<i>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 and cultural differences and provide effective person centred and individually adjusted care. Avoids unconscious bias.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
1.15	Demonstrate the numeracy, literacy, digital and technological skills required to meet the needs of people in their care to ensure safe and effective nursing practice.		
	<i>The Code (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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Participating in using numeracy, literacy and digital technology in the care of service users, medicine management and monitoring.</i>	<i>Developing confidence in using numeracy, literacy and digital technology in the care of service users medicine management and monitoring.</i>	<i>Confidently and accurately engages in the use of numeracy, literacy and digital technology in the care of service users, their medicine management and monitoring.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

1.16	Demonstrate the ability to keep complete, clear, accurate and timely records.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Participates in sharing clear and accurate verbal statements and written reports in patient notes and documentation.</i>	<i>Developing confidence and competence in sharing clear and accurate verbal statements and written reports in patient notes, documentation or handovers.</i>	<i>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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
1.17	Take responsibility for continuous self-reflection, seeking and responding to support and feedback to develop their professional knowledge and skills.		
	<i>The Code (NMC 2018) 8.4; 9.2; 22.3; 23.1; 24.2 :EU clinical instruction Directives N/A</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Seeking feedback with PS/PA from service users, carers and MDT professionals. Engage in reflection.</i>	<i>Seeking feedback with PS/PA from service users, cares and MDT professionals and using this for development/ inform future practice. Actively engages in reflection.</i>	<i>Taking the lead to obtain feedback from service users, cares and MDT professionals and using information for personal and professional development/ inform future practice. Utilises reflection to inform action.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

1.18	Demonstrate the knowledge and confidence to contribute effectively and proactively in an interdisciplinary team.		
	<i>The Code (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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Attend and participate in appropriate MDT meetings, ward rounds, demonstrates effective and appropriate communication with team.</i>	<i>Attend and participate in MDT meetings and engages in effective and appropriate communication with team members.</i>	<i>Takes and active role in MDT meetings fostering effective, appropriate and informed communication with team.</i>
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
1.19	Act as an ambassador, upholding the reputation of their profession and promoting public confidence in nursing, health and care services.		
	<i>The Code (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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA demonstrate an understanding of the importance of professional values within the practice environment. Acts in a professional manner with all staff and people in the care environment. Understands the need to respect the privacy and dignity of others and is aware of the need for appropriate information sharing. Is aware of policies and protocols relating to professional practice and acts on feedback provided.</i>	<i>Acts as a role model to junior students. Developing confidence and competence in practicing in a professional manner whilst becoming more aware of personal and professional limitations. Acts appropriately to protect the privacy and dignity of others and demonstrates appropriate information sharing. Is able to relate policies and protocols to professional behaviour and performance.</i>	<i>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.</i>
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

1.20	Safely demonstrate evidence-based practice in all skills and procedures stated in Annexes A and B.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Achieving skills and procedures and demonstrates safe practice as detailed in the PAD.</i>	<i>Achieve skills and procedures and demonstrates safe practice as detailed in the PAD.</i>	<i>Achieve all skills and procedures and demonstrates safe and effective practice as detailed in the PAD.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

Platform 2: Promoting health and preventing ill health

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

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

2.2	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.		
	<i>The Code</i> (NMC 2018) 3.1; 6.1; 6.2; 22.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA demonstrate a foundation understanding of these principles.</i>	<i>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.</i>	<i>Be able to relate core theories, concepts, principles and terminology to individual or groups within your care.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
2.3	Understand the factors that may lead to inequalities in health outcomes.		
	<i>The Code</i> (NMC 2018) 3.1; 3.3; 3.4; 4.3; 6.2; 17.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA demonstrate a foundation understanding of these principles.</i>	<i>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.</i>	<i>Relate the core theories, concepts and principles of health inequalities and health outcomes to the care needs of individuals and groups in your care.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

2.4	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.		
	<i>The Code</i> (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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Observe and have reflective discussion about promoting health in relation to one or more of these health behaviours.</i>	<i>Recognise appropriate opportunities to discuss promoting health choices with people in relation to one or more of these health behaviours.</i>	<i>Create opportunities to discuss promoting health choices with people or groups of people in relation to one or more of these health behaviours.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
2.5	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.		
	<i>The Code</i> (NMC 2018) 1.3; 2.2.; 2.3; 2.4; 2.5; 3.1; 6.1; 6.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
		<i>Apply your understanding of these principles to support people to make informed health choices.</i>	<i>Identify where a person could engage in health screening and support them in making an informed choice about this.</i>
		ACHIEVED Date	ACHIEVED Date
		Signature	Signature

2.6	Understand the importance of early years and childhood experiences and the possible impact on life choices, mental, physical and behavioural health and wellbeing.		
	<i>The Code (NMC 2018) 6.2 :EU clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA demonstrate a foundation understanding of the above.</i>	<i>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.</i>	<i>Apply your understanding of the core theories, concepts and principles to care planning and delivery taking in to account a person's experiences.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
2.7	Understand and explain the contribution of social influences, health literacy, individual circumstances, behaviours and lifestyle choices to mental, physical and behavioural health outcomes.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA demonstrate a foundation understanding of the above.</i>	<i>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.</i>	<i>Apply your understanding of the core theories, concepts and principles to care planning and delivery taking in to account a person's experiences.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

2.8	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.		
	<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; 7.3; 8.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
		<i>Recognise and apply techniques such as teachback, motivational interviewing or other similar approaches to enable people to make informed choices.</i>	<i>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.</i>
	ACHIEVED Date	Signature Date	ACHIEVED Signature Date
2.9	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, ill health and disability.		
	<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; 4.2; 4.3; 4.4; 5.4; 5.5; 7.1; 7.2; 7.3; 7.4; 7.5; 8.2; 8.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Use appropriate communication skills to support people to make informed choices about their care.</i>	<i>Use appropriate communication skills and strengths-based approaches to support people to make informed choices about their care.</i>	<i>Work collaboratively to identify people's individual strengths and support them to identify personally meaningful goals.</i>
	ACHIEVED Date	Signature Date	ACHIEVED Signature Date

2.10	Provide information in accessible ways to help people understand and make decisions about their health, life choices, illness and care.		
	<i>The Code</i> (NMC 2018) 7.1; 7.2; 7.3; 7.4; 7.5 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
		<i>Use a range of information sources e.g. translators, alternative language, audio or graphics, to meet individual needs.</i>	<i>Identify the need for and utilise a range of information sources e.g. translators, alternative language, audio or graphics, to meet individual needs.</i>
		ACHIEVED Signature Date	ACHIEVED Signature Date
2.11	Promote health and prevent ill health by understanding and explaining to people the principles of pathogenesis, immunology and the evidence-base for immunisation, vaccination and herd immunity.		
	<i>The Code</i> (NMC 2018) 1.3; 1.4; 2.1; 2.2; 2.3; 2.4; 2.5; 2.6; 3.1; 3.2; 3.3; 4.1; 5.2; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4; 7.5 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
		<i>Consider the core theories, concepts, principles and terminology in conversation with your PS/PA.</i>	<i>Explain the core theories, concepts, principles and terminology in accessible language to individuals or groups.</i>
		ACHIEVED Signature Date	ACHIEVED Signature Date
2.12	Protect health through understanding and applying the principles of infection prevention and control, including communicable disease surveillance and antimicrobial stewardship and resistance.		
	<i>The Code</i> (NMC 2018) 1.2; 1.4; 2.2; 5.4; 5.5; 6.1; 6.2; 7.1; 7.2; 7.3; 7.4; 7.5; 8.2; 17.1; 17.3; 18.1; 18.3; 19.2; 19.3; 19.4 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Understand and apply the principles of infection prevention and control in your practice.</i>	<i>Apply and support others to apply the principles of infection prevention and control in your practice.</i>	<i>Support best practice in the application of the principles of infection prevention and control in your practice.</i>
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

Platform 3: Assessing needs and planning care.

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

Platform 3: Assessing needs and planning care			
3.1	Demonstrate and apply knowledge of human development from conception to death when undertaking full and accurate person-centred nursing assessments and developing appropriate care plans.		
	<i>The Code</i> (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 clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>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.</i>	<i>Independently complete nursing assessments and plans of care. Analyse with PS/PA the stage of human development and the implications for care planning.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
3.2	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 assessments and developing appropriate care plans.		
	<i>The Code</i> (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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Participation in nursing assessment and planning of care. Discuss with PS/PA the aspects listed in 3.2 and impact and influence on nursing assessment and care planning.</i>	<i>Initiate and complete nursing assessments and plans of care. Explore with PS/PA the aspects listed in 3.2 and the impact and influence on nursing assessment and care planning.</i>	<i>Independently complete nursing assessments and plans of care. Analyse with PS/PA the aspects listed in 3.2 and the impact and influence on nursing assessment and care planning.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

3.3	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.		
	<i>The Code</i> (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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Participation in nursing assessment and planning of care. For each, demonstrate knowledge of conditions and the impact this will have on planning care.</i>	<i>Initiate, complete and review nursing assessments and plans of care. For each, apply knowledge of conditions and illustrate the impact this will have on planning care.</i>	<i>Independently complete and review nursing assessments and plans of care. For each, apply knowledge of conditions and evaluate the impact this will have on planning care.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
3.4	Understand and apply a person-centred approach to nursing care, demonstrating shared assessment, planning, decision making and goal setting when working with people, their families, communities and populations of all ages.		
	<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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>Working collaboratively with people, assess, plan and deliver care devising individualised goals.</i>	<i>Working collaboratively with people, assess, plan, deliver and evaluate care devising individualised goals.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

3.5	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.		
	<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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>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.</i>	<i>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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
3.6	Effectively assess a person's capacity to make decisions about their own care and to give or withhold consent.		
	<i>The Code</i> (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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In collaboration with PS/PA, assess a person's capacity to consent and make decisions about care.</i>	<i>Demonstrate the ability to assess a person's capacity to consent and make decisions about care.</i>	<i>Assess a person's capacity to consent and make decisions about care.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
3.7	Understand and apply the principles and processes for making reasonable adjustments.		
	<i>The Code</i> (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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
		<i>Recognises individual needs and adapts practice to meet individual care requirements.</i>	<i>Assess individual needs and initiate adaptations to practice to meet individual care requirements.</i>
		ACHIEVED Date	ACHIEVED Date
		Signature	Signature

3.8	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.		
	<i>The Code (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; B5; B6; B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
		<i>Apply knowledge of legal frameworks to inform assessment of capacity.</i>	<i>Apply knowledge of legal frameworks to the assessment of capacity and the implications for assessing and planning care.</i>
	Achieved Date	Signature Date	Signature Date
3.9	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.		
	<i>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; 14.3; 15.2; 15.3; 16.1; 16.2; 16.4; 17.1; 17.2; 17.3 :EU clinical instruction Directives B3; B4; B5; B6; B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Demonstrate the ability to identify people who are or may be vulnerable.</i>	<i>In collaboration with your PS/PA, participate in assessing people at risk of harm and initiate safeguarding measures.</i>	<i>Independently identify and assess people at risk of harm or potential harm, initiating safeguarding measures and escalating where appropriate.</i>
	Achieved Date	Signature Date	Signature Date

3.10	Demonstrate the skills and abilities required to recognise and assess people who show signs of self-harm and/or suicidal ideation.		
	<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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
		<i>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.</i>	<i>Independently identify and assess people who show signs of self-harm and/or suicidal ideation.</i>
	ACHIEVED Date	Signature Date	ACHIEVED Date Signature
3.11	Undertake routine investigations, interpreting and sharing findings as appropriate.		
	<i>The Code</i> (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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Complete observations (eg Temp, P, BP) and investigations (eg specimen collection) and discuss findings with PS/PA.</i>	<i>Complete routine investigations, analyse findings and in collaboration with your PS/PA share as appropriate.</i>	<i>Identify appropriate investigations based upon assessment data. Analyse findings and share with relevant others.</i>
	ACHIEVED Date	Signature Date	ACHIEVED Date Signature
3.12	Interpret results from routine investigations, taking prompt action when required by implementing appropriate interventions, requesting additional investigations or escalating to others.		
	<i>The Code</i> (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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Consider any abnormalities from 3.11 and with assistance from your PS/PA, consider further investigations required.</i>	<i>Interpret any abnormalities from 3.11 and in collaboration with your PS/PA, implement necessary actions and consider if further investigations are required.</i>	<i>Interpret any abnormalities from 3.11 and, implement necessary actions and consider if further investigations are required.</i>
	ACHIEVED Date	Signature Date	ACHIEVED Date Signature

3.13	Demonstrate an understanding of co-morbidities and the demands of meeting people’s complex nursing and social care needs when prioritising care plans.		
	<i>The Code</i> (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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
		<i>In collaboration with your PS/PA apply knowledge of co-morbidities to identify priorities of care when planning care.</i>	<i>Applying knowledge of co-morbidities, prioritise care to meet the demands of people’s complex nursing and social care needs.</i>
	ACHIEVED Date	Signature Date	ACHIEVED Date
3.14	Identify and assess the needs of people and families for care at the end of life, including requirements for palliative care and decision making related to their treatment and care preferences.		
	<i>The Code</i> (NMC 2018) 1.2; 1.4; 2.1; 2.2; 3.2; 6.1; 6.2; 7.3; 13.1; 13.2; 18.1; 22.3 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Participate in or in discussion with your PS/PA, demonstrate an understanding of assessment and planning of palliative care.</i>	<i>Participate in or in discussion with your PS/PA, contribute to the assessment and planning of palliative care.</i>	<i>In collaboration with people and families, assess and plan palliative care to meet individual preferences and requirements.</i>
	ACHIEVED Date	Signature Date	ACHIEVED Date

3.15	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 progress and decisions made.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Under direct supervision, review plans of care with PS/PA and participate in documenting progress and any appropriate adjustments to plans of care.</i>	<i>In collaboration with your PS/PA, review plans of care, document progress and implement appropriate adjustments to plans of care.</i>	<i>In collaboration with people, evaluate plans of care, document progress and implement appropriate adjustments to plans of care.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
3.16	Demonstrate knowledge of when and how to refer people safely to other professionals or services for clinical intervention or support.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
		<i>In collaboration with your PS/PA, discuss relevant referral processes and action where opportunities arise.</i>	<i>Safely refer people to relevant services based upon assessment of need.</i>
		ACHIEVED Date	ACHIEVED Date
		Signature	Signature

Platform 4: Assessing needs and planning care

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

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 safety, dignity, privacy, comfort and sleep can be met, acting as a role model for others in providing evidence based person-centred care.		
	<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; 4.2; 4.3; 4.4; 5.1; 5.2; 5.3; 5.4; 5.5; 6.1; 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; 13.4; 13.5; 19.2; 20.1; 20.2; 20.3; 20.8; 25.1; 25.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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 maintain accurate records. Ensures care promotes patient dignity and privacy.</i>	<i>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 maintain accurate records. Ensures care promotes patient dignity and privacy.</i>	<i>Communicates effectively with people to identify their goals and uses this information to independently plan and evaluate care. Undertakes risk assessments whilst delivering care and responds appropriately to changing situations. Updates documentation and maintain accurate records. Ensures care promotes patient dignity and privacy and acts a role model for others.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

4.2	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.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In collaboration with PS/PA, uses appropriate communication skills to support people, families and carers to manage their care when appropriate.</i>	<i>Uses appropriate communication skills to support people, families and carers to manage their care when appropriate.</i>	<i>Identifies opportunities to participate in shared decision making with people, families and carers to manage their care when appropriate.</i>
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
4.3	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.		
	<i>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; 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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>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.</i>	<i>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.</i>
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

4.4	Demonstrate the knowledge and skills required to support people with commonly encountered mental health, behavioural, cognitive and learning challenges, and act as a role model for others in providing high quality nursing interventions to meet people's needs.		
	<i>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; 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; 20.5; 20.6; 20.8; 22.3 :EU clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with the PS/PA, discusses a number of common mental health conditions in the practice area and approaches to treatment. In collaboration with PS/PA, communicates effectively with people of all abilities. In collaboration with the PS/PA, provides evidence based nursing care to reduce the negative impacts of mental ill health.</i>	<i>Demonstrates ability to support people with a number of common mental health conditions. Communicates effectively with people of all abilities. Uses techniques and aides to ensure effective communication. Provides evidence based nursing care to reduce the negative impacts of mental ill health.</i>	<i>Takes an active role in planning and evaluating care with people with a range of commonly encountered mental health, behavioural, cognitive and learning challenges. 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.</i>
	ACHIEVED Date	Signature	ACHIEVED Date
	ACHIEVED Date	Signature	ACHIEVED Date

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.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with the PS/PA, discusses a number of common physical conditions in the practice area and approaches to treatment. In conversation with the PS/PA, discusses the principles of medicines management and pharmacology of medicines commonly prescribed in the practice area. In collaboration with the PS/PA, provides evidence based nursing care to reduce the negative impacts of physical ill health.</i>	<i>Demonstrates ability to support people with a number of common physical health conditions. Communicates effectively with people regarding their medicines management. Provides evidence based nursing care to reduce the negative impacts of physical ill health.</i>	<i>Takes an active role in planning and evaluating care with people with a range of commonly encountered physical health challenges. 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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

4.6	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.		
	<i>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; 20.1; 20.2; 20.3; 20.4; 20.5; 20.6; 20.8; 22.3 :EU clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with PS/PA, explains the signs and symptoms of dehydration and malnutrition. In collaboration with PS/PA, uses evidence based tools to assess fluid and nutritional needs and bladder and bowel function. Assists with toileting whilst maintaining privacy and dignity. Reports any problems with bladder/bowel function to PS/PA.</i>	<i>Undertakes assessment of fluid and nutritional needs using evidence based tools and reports back to PS/PA. Undertakes assessment of bladder and bowel function using evidence based tools and reports back to PS/PA. Identifies when people may need referral to other health care professionals or services. Communicates effectively with people to set appropriate goals regarding fluid and nutritional intake. Assists with toileting whilst maintaining privacy and dignity.</i>	<i>Takes an active role in planning and evaluating nursing care to address people's fluid and nutritional needs. Takes an active role in planning and evaluating nursing care to promote bladder and bowel function health. Makes safe and appropriate referrals to other health care professionals or services in relation to fluid/nutrition and bladder/bowel health. 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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

4.7	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.					
	<i>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; 20.1; 20.2; 20.3; 20.4; 20.5; 20.6; 20.8; 22.3 :EU clinical instruction Directives B1-B7</i>					
	PART 1 - Dependent		PART 2 - Developing Independence		PART 3 - Independent	
	<i>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.</i>		<i>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>		<i>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.</i>	
	ACHIEVED	Signature	ACHIEVED	Signature	ACHIEVED	Signature
	Date		Date		Date	

4.8	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.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>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.</i>	<i>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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

4.9	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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>Provides evidence based palliative care with increasing independence. Identifies when people may need referral to other health care professionals or services.</i>	<i>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 and challenges appropriately when not. Identifies gaps in own knowledge and takes steps to address.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
4.10	Demonstrate the knowledge and ability to respond proactively and promptly to signs of deterioration or distress in mental, physical, cognitive and behavioural health and use this knowledge to make sound clinical decisions.		
	<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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with PS/PA, discusses common signs and symptoms of deteriorating mental and physical health. Identifies when people are experiencing a deterioration in mental or physical health and alerts clinical staff promptly and appropriately.</i>	<i>Continuously and proactively assesses people for signs of deterioration in mental or physical health and alerts clinical staff promptly and appropriately in the event of a deterioration.</i>	<i>Continuously and proactively assesses people for signs of deterioration in mental or physical health and demonstrates sound clinical decision making in the event of a deterioration.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

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

4.13	Demonstrate the knowledge, skills and confidence to provide first aid procedures and basic life support.		
	<i>The Code (NMC 2018) 1.4; 6.2; 15.1; 15.2; 15.3 :EU clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>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.</i>	<i>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.</i>
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
4.14	Understand the principles of safe and effective administration and optimisation of medicines in accordance with local and national policies and demonstrate proficiency and accuracy when calculating dosages of prescribed medicines.		
	<i>The Code (NMC 2018) 18.1; 18.2; 18.3 :EU clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Shadow your PS/PA carrying out medications administration. Demonstrate safe and effective practice in distinct processes of medicines administration, eg 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.</i>	<i>Shadow your PS/PA carrying out medications administration and participate in supervised medications management. Demonstrate safe and effective practice in 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.</i>	<i>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.</i>
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

4.15	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 medication usage.		
	<i>The Code (NMC 2018) 18.1; 18.2; 18.3 :EU clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>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.</i>	<i>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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
4.16	Demonstrate knowledge of how prescriptions can be generated, the role of generic, unlicensed, and off-label prescribing and an understanding of the potential risks associated with these approaches to prescribing.		
	<i>The Code (NMC 2018) 18.1; 18.2; 18.3 :EU clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In discussion with PS/PA, demonstrate understanding of prescription generation. Show awareness of risks associated with prescribing and how to seek assistance.</i>	<i>Demonstrate understanding of safe prescription generation. Show awareness of risks associated with prescribing, alternative sources of medication and understand reporting procedures.</i>	<i>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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

4.17	Apply knowledge of pharmacology to the care of people, demonstrating the ability to progress to a prescribing qualifications on following registration.		
	<i>The Code (NMC 2018) 18.1; 18.2; 18.3 :EU clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>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.</i>	<i>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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
4.18	Demonstrate the ability to co-ordinate and undertake the processes and procedures involved in routine planning and management of safe discharge home or transfer of people between care settings.		
	<i>The Code (NMC 2018) 3.3; 5.4 :EU clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>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.</i>	<i>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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

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

Registered nurses provide leadership by acting as a role model for best practice in the delivery of nursing care. They are responsible for managing nursing care and are accountable for the appropriate delegation and supervision of care provided by 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.

Platform 5: Leading and managing nursing care and working in teams			
5.1	Understand the principles of effective leadership, management, group and organisational dynamics and culture and apply these to team working and decision-making.		
	<i>The Code</i> (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; 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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Discuss with PS/PA principles of leadership and working within teams.</i>	<i>Demonstrate ability to work effectively within a team recognising how dynamics and culture influence decision-making.</i>	<i>Initiate leadership in care delivery and demonstrate understanding of organisational dynamics and culture.</i>
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
5.2	Understand and apply the principles of human factors, environmental factors and strength-based approaches when working in teams.		
	<i>The Code</i> (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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Discuss with PS/PA principles of effective team working.</i>	<i>Demonstrate ability to recognise how human, environmental factors impact on team function.</i>	<i>Demonstrate ability to effectively lead and promote team cohesion and function.</i>
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

5.3	Understand the principles and application of processes for performance management and how these apply to the nursing team.		
	<i>The Code</i> (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; 13.5; 16.1; 16.2; 16.3; 16.4; 16.5; 16.6; 19.1; 19.2; 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; 24.1; 24.2; 25.1; 25.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
		<i>Discuss how performance concerns can affect practice. Discuss local policies for escalation and seeking support.</i>	<i>Gather and reflect on feedback from a variety of sources, using it to improve your practice and performance.</i>
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date
5.4	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.		
	<i>The Code</i> (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; 13.5; 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Discuss with PS/PA the principles of an effective Multi-disciplinary team (MDT).</i>	<i>Demonstrate an understanding of the roles of all those within the MDT and how they impact on the delivery of care.</i>	<i>As an active member of the MDT, lead and manage team collaboration to enhance and co-ordinate patient care.</i>
	ACHIEVED Signature Date	ACHIEVED Signature Date	ACHIEVED Signature Date

5.5	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.		
	<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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
		<i>In collaboration with PS/PA using appropriate prioritisation and delegation principles assign care responsibilities to appropriate care providers eg, HCSW.</i>	<i>Demonstrate leadership of prioritisation, delegation and assignment of care responsibilities to a group of people.</i>
	ACHIEVED Date	Signature Date	ACHIEVED Date
5.6	Exhibit leadership potential by demonstrating an ability to guide, support and motivate individuals and interact confidently with other members of the care team.		
	<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; 2-2; 20.3; 20.8; 25.1; 25.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Demonstrate ability to interact and communicate with members of the care team.</i>	<i>Demonstrate appropriate use of support and motivational skills with members of the care team.</i>	<i>Demonstrate leadership in guiding, supporting and motivating individuals to interact confidently.</i>
	ACHIEVED Date	Signature Date	ACHIEVED Date

5.7	Demonstrate the ability to monitor and evaluate the quality of care delivered by others in the team and lay carers.		
	<i>The Code</i> (NMC 2018) 8.4; 9.1; 9.3; 20.2; 25.1; 25.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Discuss with PS/PA the principles of evaluation of quality care delivery.</i>	<i>In collaboration with PS/PA demonstrate ability to identify, monitor and evaluate quality of care delivery.</i>	<i>Demonstrate ability to appraise, monitor and evaluate the care delivered by team members.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
5.8	Support and supervise students in the delivery of nursing care, promoting reflection and providing constructive feedback, and evaluating and documenting their performance.		
	<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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
		<i>Engage in supervision of junior students, reflecting and providing feedback on their performance.</i>	<i>Demonstrate effective support and supervision for learners, engage in reflective discussions evaluating and documenting performance.</i>
		ACHIEVED Date	ACHIEVED Date
		Signature	Signature

5.9	Demonstrate the ability to challenge and provide constructive feedback about care delivered by others in the team, and support them to identify and agree individual learning needs.		
	<i>The Code</i> (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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
		<i>Discuss with PS/PA challenging situations and managing expectations of others within the team. Reflect on own personal learning outcomes and identifying needs.</i>	<i>Demonstrate ability to discuss, challenge and construct positive feedback within the team. Encourage other learners to meet learning outcomes.</i>
	ACHIEVED Date	Signature Date	ACHIEVED Date Signature
5.10	Contribute to supervision and team reflection activities to promote improvements in practice and services.		
	<i>The Code</i> (NMC 2018) 8.2; 8.4; 9.1; 9.2; 9.3; 9.4; 11.2 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Discuss and explore with PS/PA methods to promote and demonstrate good practice and activities to improve services within a team.</i>	<i>Demonstrate ability to contribute to group discussions / reflection on improvements in practice and service.</i>	<i>Lead a group in discussing activities to promote and formulate improvements in practice and services within the team.</i>
	ACHIEVED Date	Signature Date	ACHIEVED Date Signature

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

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.

Platform 6: Improving safety and quality of care.			
6.1	Understand and apply the principles of health and safety legislation and regulations and maintain safe work and care environments		
	<i>The Code</i> (NMC 2018) 13.4, 16.1, 19.1, 19.2, 19.3, 19.4, 20.4 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA demonstrate a foundation understanding of the principles of health and safety legislation and regulations.</i>	<i>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.</i>	<i>Be able to understand and apply the processes of health and safety legislation when any circumstances impact on a safe work and care environment.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
6.2	Understand the relationship between safe staffing levels, appropriate skills mix, safety and quality of care, recognising risks to public protection and quality of care, escalating concerns appropriately.		
	<i>The Code</i> (NMC 2018) 8.5, 10.2, 11.1, 16.1, 19.1, 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>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.</i>	<i>In conversation with your PS/PA explain the processes involved in raising concerns appropriately. Consider the impact on public protection and quality of care.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

6.3	Comply with local and national frameworks, legislation and regulations for assessing, managing and reporting risks, ensuring the appropriate action is taken.		
	<i>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 clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>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.</i>	<i>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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
6.4	Demonstrate an understanding of the principles of improvement methodologies, participate in all stages of audit activity and identify appropriate quality improvement strategies.		
	<i>The Code (NMC 2018) 6.2, 8.4, 10.2, 19.2 :EU clinical instruction Directives B1-B7</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA consider the principles of quality improvement.</i>	<i>In conversation with your PS/PA consider the range of methodologies available to develop practice and how you might use them.</i>	<i>Participate in audit activity in your PLE and share with your PS/PA how the outcomes may inform quality improvement.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

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

6.8	Demonstrate an understanding of how to identify, report and critically reflect on near misses, critical incidents, major incidents and serious adverse events in order to learn from them and influence their future practice.		
	<i>The Code</i> (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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA consider the process used to identify and report near misses, critical incidents, major incidents and serious adverse events.</i>	<i>Participate with your PS/PA to complete the appropriate documentation to report near misses, critical incidents, major incidents and serious adverse events.</i>	<i>Develop your understanding of how to identify, report and critically reflect on near misses, critical incidents, major incidents and serious adverse events by using for example the Quality Improvement Scotland or Healthcare Improvement Scotland websites.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
6.9	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.		
	<i>The Code</i> (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, 16.4, 19.1, 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Take some time to observe your PS/PA and other colleagues seeking and responding to feedback from people, their families, carers and colleagues.</i>	<i>In conversation with your PS/PA consider the strategies used to develop effective improvement strategies.</i>	<i>Participate in activities that enable you to work with people, their families, carers and colleagues to achieve the above.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

6.10	Apply an understanding of the differences between risk aversion and risk management and how to avoid compromising quality of care and health outcomes.		
	<i>The Code</i> (NMC 2018) 1.3, 4.1, 4.3, 5.4, 17.1, 19.1, 20.3, 25.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA consider the differences between risk aversion and risk management.</i>	<i>In conversation with your PS/PA consider the methodologies used to develop for example SIGN or NICE Guidelines and their potential use.</i>	<i>Critically reflect on the difference between risk aversion and risk assessment and the implications for safe effective person-centred care.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
6.11	Acknowledge the need to accept and manage uncertainty, and demonstrate an understanding of strategies that develop resilience in self and others.		
	<i>The Code</i> (NMC 2018) 1.3, 3.1, 6.1, 8.7, 13.1 :EU clinical instruction Directives B1-B7		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA develop an understanding of the concept of resilience.</i>	<i>Use reflection as an approach to help you accept and manage uncertainty.</i>	<i>Create opportunities to participate in critical reflection with others and keep a reflective diary to help develop resilience in yourself and others.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
6.12	Understand the role of registered nurses and other health and care professionals at different levels of experience and seniority when managing and prioritising actions and care in the event of a major incident.		
	<i>The Code</i> (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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA develop an understanding of what may be considered a major incident – eg public health, traumatic event, adverse weather.</i>	<i>Review the major incident protocols for your PLEs and share your understanding with your PS/PA.</i>	<i>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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

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.

Platform 7: Coordinating Care			
7.1	Understand and apply the principles of partnership, collaboration and interagency working across all relevant sectors.		
	<i>The Code</i> (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 clinical instruction Directives		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA demonstrate a foundation understanding of the principles of partnership and interdisciplinary working.</i>	<i>Plan and coordinate the care of people in your PLE and take and make referrals to other agencies and professionals.</i>	<i>Plan and coordinate complex care and consider the influence local and national policy may have on care.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
7.2	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.		
	<i>The Code</i> (NMC 2018) 4.3, 18.2, 20.4 :EU clinical instruction Directives		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA demonstrate a foundation understanding of some of the health and social care policies that influence the PLE.</i>	<i>In conversation with your PS/PA demonstrate an understanding of the key methodologies applied to influence policy.</i>	<i>Seek out opportunities to speak with others about health and social care legislation and apply the knowledge to your practice.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

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

7.5	Understand and recognise the need to respond to the challenges of providing safe, effective and person-centred nursing care for people who have co-morbidities and complex care needs.		
	<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		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>In conversation with your PS/PA explain how you recognise and respond to the challenges of providing safe, effective person-centred care.</i>	<i>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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
7.6	Demonstrate an understanding of the complexities of providing mental, cognitive, behavioural and physical care services across a wide range of integrated care settings.		
	<i>The Code</i> (NMC 2018) 4.1, 4.3, 8.1, 10.1, 17.3 :EU clinical instruction Directives		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA consider some of the complexities of mental, cognitive, behavioural and physical care.</i>	<i>In conversation with your PS/PA share your understanding of the complexities of mental, cognitive, behavioural and physical care in the PLE.</i>	<i>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.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

7.7	Understand how to monitor and evaluate the quality of people's experience of complex care.		
	<i>The Code</i> (NMC 2018) 2.1, 7.1 :EU clinical instruction Directives		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA consider how you can communicate with people to enable them to share their experience of care.</i>	<i>In conversation with your PS/PA consider the range of approaches you can use to monitor and evaluate care.</i>	<i>Demonstrate your understanding of how you will combine the range of approaches you can use to monitor and evaluate care to ensure a positive experience.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
7.8	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.		
	<i>The Code</i> (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 :EU clinical instruction Directives		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA consider some of the principles and processes that may optimise a person's independence.</i>	<i>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.</i>	<i>Demonstrate your understanding of how to optimise independence and avoid unnecessary interventions and disruptions to people's lives.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

7.9	Facilitate equitable access to healthcare for people who are vulnerable or have a disability, demonstrate the ability to advocate on their behalf when required, and make necessary reasonable adjustments to the assessment, planning and delivery of their care.		
	<i>The Code (NMC 2018) 3.1, 3.3, 3.4, 4.3, 7.1, 7.2, 13.2 :EU clinical instruction Directives</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>Discuss with your PS/PA what equitable access to healthcare for people who are vulnerable or have a disability might be. Talk about legislation that might support you in this e.g. Mental Health (Care and Treatment) (Scotland) Act 2003.</i>	<i>Demonstrate how you would facilitate access to healthcare for people by advocating for them and working with their beliefs and values.</i>	<i>Using your professional knowledge, demonstrate and document your practice of advocating for people and making reasonable adjustments to your assessment, planning and delivery of care.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
7.10	Understand the principles and processes involved in planning and facilitating the safe discharge and transition of people between caseloads, settings and services.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>In conversation and practice with your PS/PA share your understanding of some of the principles and processes that enable safe discharge and transition by participating in related activities.</i>	<i>Using your professional knowledge of the principles and processes, participate in and document the activities the safe discharge and transition of people between caseloads, settings and services.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

7.11	Demonstrate the ability to identify and manage risks and take proactive measures to improve the quality of care and services when needed.		
	<i>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</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>In conversation with your PS/PA consider how nurses may identify and manage risk.</i>	<i>In conversation with your PS/PA identify risks in the PLE and consider how these may be managed.</i>	<i>With your PS/PA demonstrate how you use your professional knowledge to improve quality of care and services by responding to and managing risk.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature
7.12	Demonstrate an understanding of the processes involved in developing a basic business case for additional care funding by applying knowledge of finance, resources and safe staffing levels.		
	<i>The Code (NMC 2018) 6.1, 21.3, 25.1 :EU clinical instruction Directives</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>In conversation with your PS/PA consider how you would participate in processes to develop a business case for additional funding for care.</i>	<i>Using your professional knowledge participate in activities and conversations with colleagues who are developing a basic business case for additional care funding.</i>
	ACHIEVED Date	ACHIEVED Date	ACHIEVED Date
	Signature	Signature	Signature

7.13	Demonstrate an understanding of the importance of exercising political awareness throughout their career, to maximise the influence and effect of registered nursing on quality of care, patient safety and cost effectiveness.		
	<i>The Code (NMC 2018) 1.5, 2.2, 20.8</i>		
	PART 1 - Dependent	PART 2 - Developing Independence	PART 3 - Independent
	<i>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.</i>	<i>Consider how you may participate in activities that may influence and effect 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.</i>	<i>Participate in conversations and activities that enable you to demonstrate your understanding of being politically aware.</i>
	ACHIEVED Date	Signature	ACHIEVED Date
		Signature	ACHIEVED Date
			Signature

SKILLS AND PROCEDURES (ANNEXES A & B)

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

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

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

Communication and relationship management skills (NMC 2018a)

1. At the point of registration, the registered nurse will be able to safely demonstrate underpinning communication skills for assessing, planning, providing and managing best practice, evidence based nursing care:			
Section	Skill	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
1.1	Actively listens, recognises and responds to verbal and non-verbal cues		
1.2	Uses prompts and positive verbal and non-verbal reinforcement		
1.3	Uses appropriate non-verbal communication including touch, eye contact and personal space		
1.4	Makes appropriate use of open and closed questioning		
1.5	Uses caring conversation techniques		
1.6	Checks understanding and uses clarification techniques		
1.7	Demonstrates awareness of own unconscious bias in communication encounters		
1.8	Writes accurate, clear, legible records and documentation		
1.9	Confidently and clearly presents and shares verbal and written reports with individuals and groups		
1.10	Analyses and clearly records and shares digital information and data		
1.11	Provides clear verbal, digital or written information and instructions when delegating or handing over responsibility for care		
1.12	Recognise the need for, and facilitate access to, translator service and material.		

2. At the point of registration, the registered nurse will be able to safely demonstrate 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:			
Section	Skill	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		<i>Please date and sign</i>	<i>Please date and sign</i>
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 point of registration, the registered nurse will be able to safely demonstrate 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:			
Section	Skill	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
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 point of registration, the registered nurse will be able to safely demonstrate evidence based, best practice communication skills and approaches for providing therapeutic interventions			
Section	Skill	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
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			
Section	Skill	Demonstrated safely in practice whilst acknowledging own limitations	Demonstrated safely through simulation whilst acknowledging own limitations
		<i>Please date and sign</i>	<i>Please date and sign</i>
4.1	Demonstrate effective supervision, teaching and performance appraisal through the use of:		
4.1.1	Clear instructions and explanations when supervising, teaching or appraising others		
4.1.2	Clear instructions and check understanding when delegating care responsibilities to others		
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 practice		
4.1.5	Unambiguous records of performance		
4.2	Demonstrate effective personal and team management through the 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 co-ordination 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 Procedures (NMC 2018a)

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			
Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
1. Use evidence based, best practice approaches to take a history, observe, recognise and accurately assess people of all ages:			
1.1	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 of		
	• deterioration		
	• sepsis		

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			
Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
2. Use evidence based, best practice approaches to undertake the following 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: At the point of registration, the student nurse will be able to safely demonstrate procedures for assessing people's needs for person-centred care			
Section	Procedure	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
2.cont/ Use evidence based, best practice approaches to undertake the following procedures:			
2.7	Undertake a whole body systems assessment including:		
	• 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 the point of registration, the student nurse will be able to safely demonstrate procedures for assessing people's needs for person-centred care			
Section	Procedure (may be appropriate to attain at a higher level for the different fields)	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
2.cont/ Use evidence based, best practice approaches to undertake the following procedures:			
2.12	Undertake, respond to and interpret neurological observations and assessments		
2.13	Identify and respond to signs of:		
	<ul style="list-style-type: none"> • 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		
	<ul style="list-style-type: none"> • seizures 		
	<ul style="list-style-type: none"> • choking • anaphylaxis 		
2.17	Recognise and respond to challenging behaviour, providing appropriate safe holding and restraint		

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	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
3. Use evidence based, best practice approaches for meeting the needs for care and support with rest, sleep, comfort and the maintenance of dignity, accurately assessing the person's capacity for independence and self-care and 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: 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	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
4. 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 initiating 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 needs for and provide appropriate assistance with washing, bathing, shaving and dressing		
4.4	Identify and manage skin irritations and rashes		
4.5	Assess needs for and provide appropriate care and decide when an onward referral is needed for:		
	• oral care		
	• dental care		
	• eye care		
	• nail care		

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	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
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 initiating appropriate interventions.			
4.6	Use 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		

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	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
5. Use evidence based, best practice approaches for meeting the needs for care and support with nutrition and hydration, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.			
5.1	Observe, assess and optimise:		
	<ul style="list-style-type: none"> • nutrition status and determine the need for intervention and support • hydration status and determine the need for intervention and support 		
5.2	Use contemporary nutritional assessment tools		
5.3	Assist with feeding and drinking and use appropriate feeding and drinking aids		
5.4	Record fluid intake and output and identify, respond to and manage dehydration or fluid retention		
5.5	Identify, respond to and manage nausea and vomiting		
5.6	Insert oral/nasal/gastric tubes		
	manage oral/nasal/gastric tubes		
	remove oral/nasal/gastric tubes		

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	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
5. cont/ Use evidence based, best practice approaches for meeting the needs for care and support with nutrition and hydration, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.			
5.7	Manage artificial nutrition and hydration using:		
	• oral		
	• enteral		
	• parenteral routes		
5.8	Manage the administration of IV fluids		
5.9	Manage fluid and nutritional infusion pumps and devices.		

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	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
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 interventions.			
6.1	Observe and assess level of urinary and bowel continence to determine the need for support and intervention assisting with toileting, maintaining dignity 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: 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	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
7. Use evidence based, best practice approaches for meeting the needs for care and support with mobility and safety, accurately assessing the person's capacity for independence and self-care and initiating appropriate 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: 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	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
8. Use evidence based, best practice approaches for meeting the needs for respiratory care and support, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.			
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		

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	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
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		

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	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
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.			
10.1	Observe, and assess the need for intervention for people, families and carers, identify, assess and respond appropriately to uncontrolled symptoms and signs of distress including:		
	• pain		
	• nausea		
	• thirst		
	• constipation		
	• restlessness		
	• agitation		
	• anxiety		
	• depression		
10.2	Manage and monitor effectiveness of symptom relief medication, infusion pumps and other devices		
10.3	Assess and review preferences and care priorities of the dying person and their family and carers		

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	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
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.			
10.4	Understand and apply:		
	<ul style="list-style-type: none"> organ and tissue donation protocols 		
	<ul style="list-style-type: none"> advanced planning decisions 		
10.5	<ul style="list-style-type: none"> living wills and health and lasting powers of attorney for health 		
	Understand and apply DNACPR (do not attempt cardiopulmonary resuscitation) decisions and		
10.6	<ul style="list-style-type: none"> verification of expected death 		
	Provide care for the deceased person and the bereaved respecting cultural requirements and protocols		

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	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
11. Procedural competencies required for best practice, evidence-based medicines administration and optimisation.			
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: <ul style="list-style-type: none"> • intramuscular 		
	<ul style="list-style-type: none"> • subcutaneous 		
	<ul style="list-style-type: none"> • intradermal 		
	<ul style="list-style-type: none"> • intravenous 		
11.8	Administer medications using a range of routes		

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	Demonstrated safely in practice whilst acknowledging own limitations <i>Please date and sign</i>	Demonstrated safely through simulation whilst acknowledging own limitations <i>Please date and sign</i>
11.cont/ Procedural competencies required for best practice, evidence-based medicines administration and optimisation.			
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

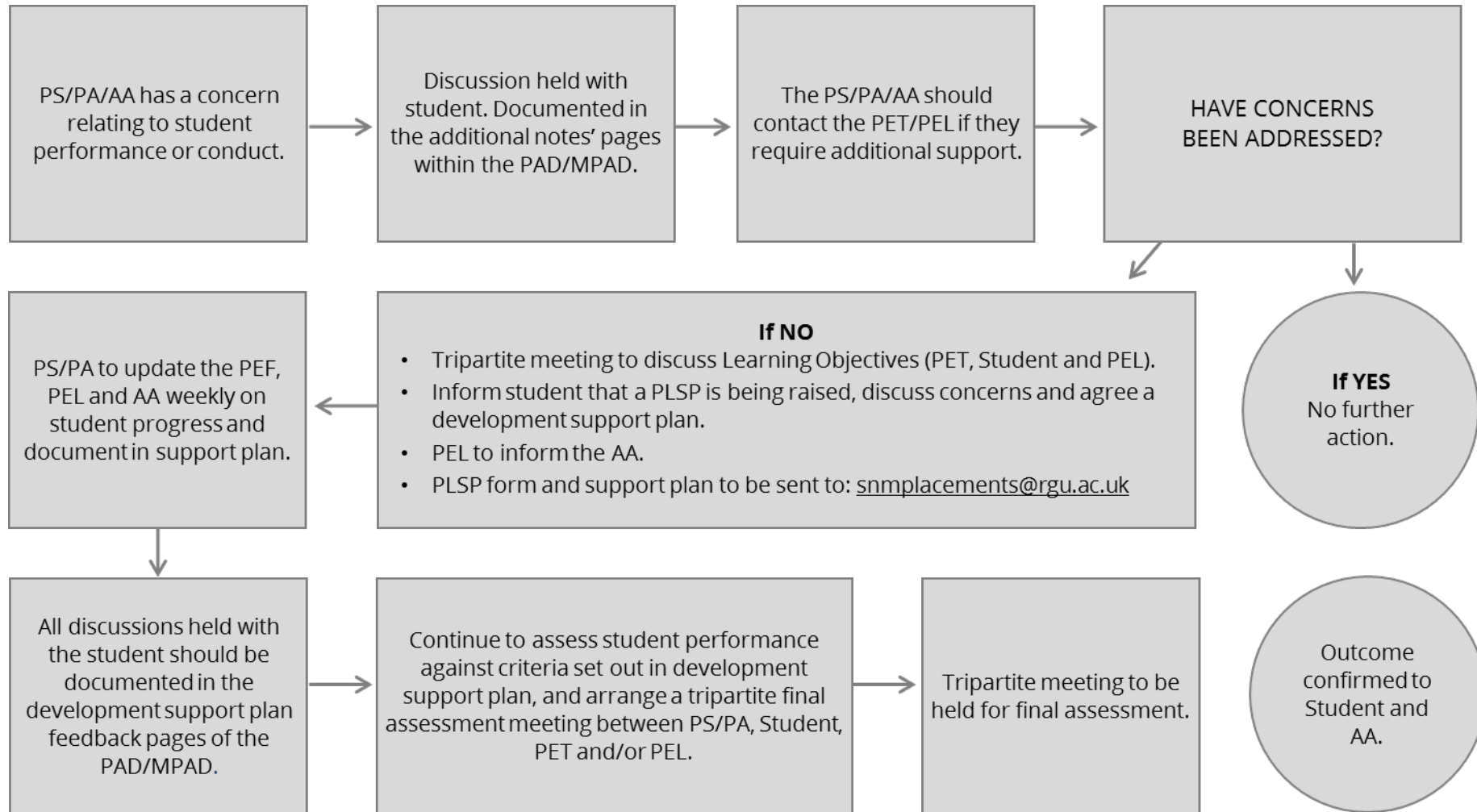
- 3.0 Practice Support Learning Protocol
- 3.1 Record of Accidents / Incidents

3.0 Practice Learning Support Protocol

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

Click here to access the full version of the Practice Learning Support Protocol (PDF document):
<https://tinyurl.com/ss2p3bl>

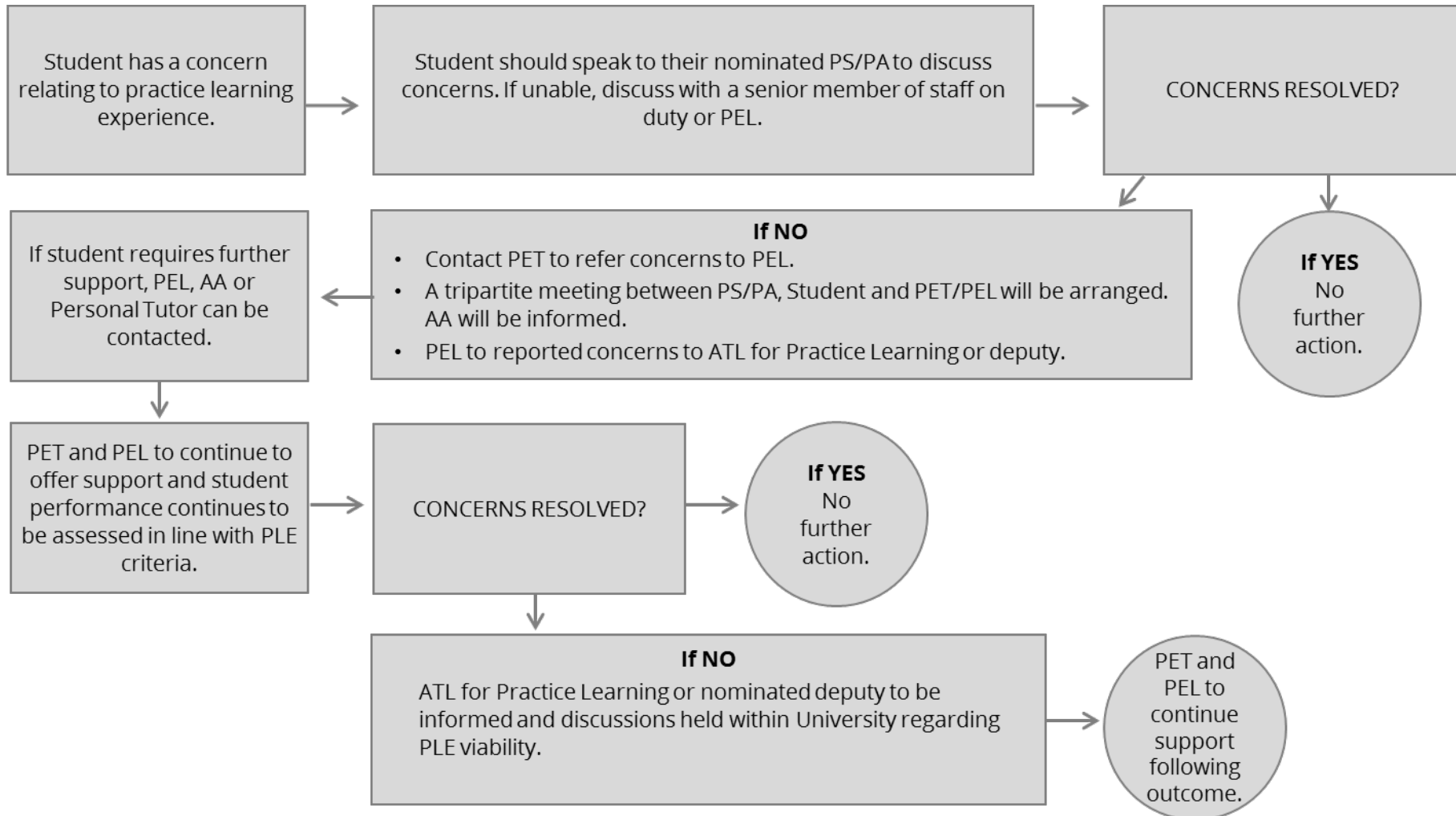
Raising Concerns Flowchart for Practice Supervisor / Practice Assessor / Academic Assessor



PET = Practice Education Team PEL = Practice Education Lecturer PS = Practice Supervisor PA = Practice Assessor AA = Academic Assessor

Raising Concerns Flowchart for Students

If students have significant concerns around patient safety/care, they should refer to the NES Raising Concerns, Student Guidance document and raise their concern immediately or at the earliest opportunity with the PET/PEL.



PET = Practice Education Team PEL = Practice Education Lecturer PS = Practice Supervisor PA = Practice Assessor AA = Academic Assessor
ATL for Practice Learning = Academic Team Lead for Practice Learning

Learning Development Support Plan

Development Need Identified:					
Specific areas to be addressed	Related Platform number /proficiency	Participation in Care level	Learning Resources/actions	Evidence of achievement	Achievement/ Review date
Practice Assessor & Supervisor Signature:		Student Signature:		Academic Assessor Signature:	
				Date _/_/___	
Development support plan outcome :		Achieved / Not Achieved			Date
		(please circle)			____/____/____

Development Need Identified:					
Specific areas to be addressed	Related Platform number /proficiency	Participation in Care level	Learning Resources/actions	Evidence of achievement	Achievement/ Review date
Practice Assessor & Supervisor Signature:		Student Signature:		Academic Assessor Signature:	Date _/_/___/___
Development support plan outcome :		Achieved / Not Achieved (please circle)			Date _/_/___/___

Development Need Identified:					
Specific areas to be addressed	Related Platform number /proficiency	Participation in Care level	Learning Resources/actions	Evidence of achievement	Achievement/ Review date
Practice Assessor & Supervisor Signature:		Student Signature:		Academic Assessor Signature:	Date _/_/___/___
Development support plan outcome :		Achieved / Not Achieved (please circle)			Date _/_/___/___

Development Support Plan Feedback

DATE	PROGRESS	SIGNATURE: Student & P. Supervisor & P. Assessor

DATE	PROGRESS	SIGNATURE: Student & P. Supervisor & P. Assessor

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	Related Platform number /proficiency	Participation in Care level	Learning Resources/actions	Evidence of achievement	Achievement/ Review date
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 Platform 4 .5/ 4.14/4.15	Developing independence	<ul style="list-style-type: none"> • <i>Revisit The Code (NMC)</i> • <i>Review PAD/procedures</i> • <i>Read the NHS policy of medication management and administration</i> 	<p>Explain via discussion your understanding of the code in relation to the areas of development</p> <p>Through discussion explain the policy and the importance for this policy</p>	<p>Complete action and Review by 1/1/2020</p> <p>Complete action and Review by 1/1/2020</p>
		Developing independence	<ul style="list-style-type: none"> • <i>With your supervisor/assessor participate in medication administrations</i> • <i>Under supervision safely administer and record the prescribe medication for 5 consecutive drug administrations</i> • <i>Identify 5 common drugs each week. understanding what they are used for, side effects and contraindications</i> 	<p>Through participation/observation /discussion demonstrate proficiency</p> <p>Discussion. Q&A sessions. Evidence within medicine management workbook</p>	<p>Complete action and Review by 7/1/2020</p> <p>on-going/complete for end of placement</p>

Development Support Plan Feedback *with example of feedback*

DATE	PROGRESS	SIGNATURE: Student & P. Supervisor P. Assessor
3/1/2020	<p><i>Development plan was agreed on the 1/1/2020.</i></p> <p><i>Student nurse has accessed and review the NMC code and through discussion with myself, the student was able to highlight the 4 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.</i></p> <p><i>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.</i></p> <p><i>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.</i></p>	

3.1 Record of Accidents / Incidents

If a student is directly involved in an accident or incident where a DATIX form has been completed, briefly record the details on the form below.

Placements must inform the School within 24 hours by email: snmpplacements@rgu.ac.uk

Date of accident / incident	Details of accident / incident	Actions (if any)	Absence incurred (if any)	School informed (please tick)	DATIX completed (please tick)	Follow-up by School (if required)

USEFUL REFERENCES FOR STAFF AND STUDENTS

HEALTH AND SAFETY EXECUTIVE (HSE), 2000. *Management of health and safety at work regulations 1999. Approved code of practice and guidance. L21*. 2nd ed. Norwich: HSE Books. 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*. Edinburgh: NES.

NURSING AND MIDWIFERY COUNCIL (NMC) and GENERAL MEDICAL COUNCIL (GMC), 2015. *Openness and honesty when things go wrong: the professional duty of candour*. London: NMC/GMC.

NURSING AND MIDWIFERY COUNCIL (NMC), 2018a. *Future nurse: standards of proficiency for registered nurses*. London: NMC.

NURSING AND MIDWIFERY COUNCIL (NMC), 2018b. *Realising professionalism: standards for education and training. Part 1: standards framework for nursing and midwifery education*. London: NMC.

NURSING AND MIDWIFERY COUNCIL (NMC), 2018c. *Realising professionalism: standards for education and training. Part 2: standards for student supervision and assessment*. London: NMC.

NURSING AND MIDWIFERY COUNCIL (NMC), 2018d. *Realising professionalism: standards for education and training. Part 3: standards for pre-registration nursing programmes*. London: NMC.

NURSING AND MIDWIFERY COUNCIL (NMC), 2018e. *The code: professional standards of practice and behaviour for nurses, midwives and nursing associates*. London: NMC.

APPENDIX 1

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

Article 31 (V.2 Nurse Responsible for General Care) - '5.2.1 Training programme for nurses responsible for general care - the 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)

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