Faculty of Health and Wellbeing

Practice Learning policies, procedures and guidelines

Effective: January 2015
For review: January 2016
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Faculty of Health and Wellbeing

FPLC 1: Procedure for maintaining and monitoring the Mentor/Practice Teacher registers

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Specific notes for file

This procedure relates to the following pathways / programmes:

- IPL Adult Nursing
- IPL Child Nursing
- IPL Mental Health Nursing
- IPL Midwifery
- 78 week midwifery
- Return to Practice
- SCPHN

These boxes should be used to identify specific actions taken / changes made to document and the date.
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1. Introduction
2. Purpose
3. Scope
4. Definitions
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1. INTRODUCTION

This procedure addresses professional regulations that are outlined in the document ‘Standards to Support Learning and Assessment in Practice: NMC Standards for Mentors, Practice Teachers” (2008) Nursing and Midwifery Council (NMC). The main focus of the relevant NMC Standards is found on pages 27 – 30, section 3.2.3 to 3.2.6, of the NMC document.

2. PURPOSE

a) To outline professional requirements for supporting learners on Nursing and Midwifery Council approved programmes and determines how staff employed by Canterbury Christ Church University and local placement providers will implement and monitor them.

b) To clarify roles and responsibilities in meeting NMC regulatory standards for supporting learning in practice.

3. SCOPE

All nursing and midwifery academic staff, Practice Placement Facilitators or equivalent, Practice Learning Unit staff and the Director of Practice Learning.

4. DEFINITIONS

a) The mentor database is a local and University database of mentors, sign-off mentors and Practice Teachers.

b) When referring to a student this document refers to a Specialist Community Public Health Nurses (SCPHN) or pre-registration student nurse/ midwife.

c) A mentor is a registered nurse/ midwife who has successfully completed a mentorship course that has been approved by the NMC or has submitted a successful APEL application on locally approved documentation (Appendix D.)

d) Sign-off mentors are more experienced mentors who have achieved additional criteria that will mentor and support students during the practice placements at specified points during their programme and also support other mentors.

e) A Practice Teacher is an assessor who has knowledge, skills competence in both their specialist area and their teaching role. A Practice Teacher will have met their outcomes at stage 3 of the NMC developmental framework (NMC 2010). The Practice Teacher has the ability and experience to mentor students and registered nurses / midwives who are undertaking post-registered courses which lead to an NMC registration.
f) A triennial review (Appendix A- mentors, Appendix F –Practice Teachers), should be completed every 3 years, to ensure that the mentor is still able to mentor and support students during their clinical placements

5. DUTIES AND RESPONSIBILITIES

a) All qualified nurses, midwives, and managers responsible for supporting and managing students undertaking pre-registration programmes have a duty to make themselves familiar with the ‘Standards to Support Learning and Assessment in Practice: NMC Standards for Mentors, Practice Teachers and Teachers’, 2008 Nursing and Midwifery Council

b) Organisations and managers have responsibility for ensuring mentors/ Practice Teachers are enabled to undertake annual updating as part of fulfilling their mandatory requirements.

c) All academic staff and Practice Placement Facilitators have a responsibility to contribute to the maintenance of the ‘live’ mentor register and adhere to the guidelines laid out in this document.

d) The Faculty is responsible for providing organisations with the outcomes of module completion and achievement of either mentor or sign-off mentor status.

e) Practice Placement Facilitators have a responsibility to maintain a ‘live’ mentor register (nursing and midwifery) and where appropriate Practice Teachers, for their organisation.

f) Practice Placement Facilitators have a responsibility to report key issues related to the currency/ availability of mentors and Practice Teachers to the Practice Assessors Forum (PAF) on a 3 monthly basis and share copies of their mentor/ Practice Teacher registers with the Faculty Director of Practice Learning on a 3-monthly basis (July, October, Jan and April).

g) Practice Placement Facilitators have a responsibility to ensure that mentors/ Practice Teachers who do not meet NMC requirements at triennial review are removed from the live register.

h) The Faculty Director of Practice Learning will maintain an overview of the Private and Voluntary Independent Sector (PVIS) mentor register and work with academic staff to highlight and respond to any issues that arise, to include removal of practitioners from the mentor register or closure of placements if appropriate.

i) The Faculty Director of Practice Learning (FDLP) and Senior Lecturers in Practice Learning (SLPLs) have a responsibility to develop action plans in response to key issues raised in Trust reports.

j) Academic staff/ Placement Leads have a responsibility to implement relevant parts of the action plans.
k) The Director of Practice Learning is responsible for providing reports for the Faculty Quality Committee detailing status of the mentor register and any identified risks.

l) Heads of School are responsible for ensuring identified risks are addressed.

m) Practice Placement Facilitators (PPFs) or equivalent and Practice Learning Unit staff are responsible for ensuring student allocations are congruent with the numbers of ‘live’ mentors.

n) Academics delivering mentor/Practice Teacher updates are responsible for ensuring update records are completed (PEMS), ensuring registers of attendance are submitted to appropriate PPFs or Practice Learning Unit.

PPFs or equivalent as well as the SLPLs are responsible for monitoring alternative methods of updating and ensuring update records are completed.

6. PROCESS

Mentorship Database

a) Each NHS organisation must hold a live and current mentor database which must be current to enable effective liaison with the Higher Education Institution regarding capacity to provide practice placements. CCCU must hold the live and current mentor database for Private, Voluntary and Independent sector placements. This information will normally be stored on PEMS.

b) All qualified mentors/Practice Teachers must be listed on the Mentors/Practice Teachers Database. Registered nurses appointed to the Trust who already hold a mentor/Practice Teacher qualification and were on their previous employer’s database are required to complete a proforma with supporting evidence, Appendix E mentors, Appendix F, practice teachers.

c) The ‘live’ database must hold the following details:

First name and surname
Place of work
Date and type of initial qualification
Date of last update
Date of triennial review
Status (mentor / sign-off mentor / practice teacher

Mentors & Sign-off Mentors

- Mentors and sign-off mentors should be able to provide evidence of ongoing support of students in clinical practice settings, i.e. mentored at least 2 students
(Practice Teachers to mentor at least 1 student) with due regard (extenuating circumstances permitting) within a 3 year period

- Sign-off mentors are responsible for assessing whether students have demonstrated an appropriate level of practice proficiency to pass the final practice placement in their programme. This confirmation contributes to the student’s portfolio of evidence that will confirm to the NMC that the required proficiencies for entry to the Register have been achieved. N.B. Students must also have successfully completed the educational aspects of the course. (See NMC Standards section 2). [http://www.nmc-uk.org/Educators/Standards-for-education/Standards-to-support-learning-and-assessment-in-practice/](http://www.nmc-uk.org/Educators/Standards-for-education/Standards-to-support-learning-and-assessment-in-practice/)

- All Midwifery mentors are sign-off mentors or mentors that can evidence working towards sign-off status.

- For the process of becoming a sign-off mentor, please see appendix B and C.

- All mentors are required to complete an annual update facilitated by a member of the academic team or practice placement facilitator or equivalent

### 7. MONITORING

a) Mentors, sign-off mentors and Practice Teachers are subject to triennial review. Evidence of this review should be identified on the register. Practitioners who either a) do not participate in triennial review or b) do not meet NMC requirements at triennial review should be removed from the live register until such time they have met the criteria for regaining their status (Appendix D / E)

b) The SLPLs will monitor the status of mentors in their placement areas, contribute to their annual updating and identify actual / potential risks to the PPF / Placement Lead (NHS) or equivalent

c) PPFs or equivalent will maintain and monitor their local register, report its status on a 3-monthly basis and action issues raised from an organisational basis.

d) The Faculty Director of Practice Learning will monitor currency of registers across Kent and Medway and provide 3 monthly reports to FQC

e) Any risks identified will be reported to the Faculty Executive Team for action by Heads of School.
APPENDICES:

Appendix A: Triennial review form mentors/ sign-off mentors

Appendix B: Sign off mentor handbooks

Appendix C: Sign off mentor form

Appendix D: CCCU APEL document

Appendix E: CCCU Practice teacher APEL document

Appendix F: Triennial review Practice Teacher
Faculty of Health and Wellbeing

FPLC 2: Guidance for practice learning facilitators and students when undertaking unaccompanied work in the community and for the use of the students' own car during placement activity

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Specific notes for file | Name of reviewer
These boxes should be used to identify specific actions taken / changes made to document and the date.
Guidance for practice learning facilitators and students when undertaking unaccompanied work in the community and for the use of the students’ own car during placement activity

Scope and purpose
The following principles are set out as guidance and need to be recorded in student documentation to ensure that both practice learning facilitators and students understand their own roles and responsibilities relating to unaccompanied placement activity in the home setting and the use of the student’s own transport during practice placements.

It is vital that all students adhere to the policies and procedures of the host organisation and specifically any section that relates directly to students. It also must be clearly stated that any activities undertaken by students must be within their level of competence and congruent with their stage of education as outlined in their assessment of practice document.

Students must always have an identified practice learning facilitator, but if acting without direct supervision, both student and practitioner will need to be clear what the scope and purpose of the ‘lone’ activity is and ensure that the student can demonstrate clear understanding of:

- The current plan for the person involved
- The purpose of the activity being undertaken
- What should be done in the event of a crisis or untoward event
- How the base / supervisor / key personnel can be contacted.

These principles must be reviewed and recorded by the practice learning facilitator and student prior to any unaccompanied activity.

Risk assessment
- The practice learning facilitator should use their professional judgement and involve the student in the selection of appropriate home visits for the student to undertake on their own. This decision should take into account:
  a) The ability and experience of the student,
  b) The nature of the visit
  c) The needs of the person and the level of responsibility integral to their plan of care
  d) The intended outcomes of the placement experience

- Before making unaccompanied visits:
  a) The student must have worked under the supervision of the delegating practitioner so that safe delegating decisions can be made.
  b) Both student and PLF should discuss the visit and explore anticipated issues to ensure the student is aware of the level of responsibility they are required to take, who to ask for assistance and whom to report to, as well as ensuring that the student has the means to do so.
  c) Ensure that the student is aware of the feedback mechanisms that will take place following visits.
d) Checks should be made within the placement that the student has current business insurance for their transport for the activity planned.

e) The restrictions on the use of own transport is clarified below.

f) The base / PLF should ensure they have a mobile contact number for the student or the contact details of clients the student will be visiting.

Students must:

- Work within their level of understanding and competence and this must be congruent with the expectations outlined in their assessment of practice document
- Not undertake any aspect of practice which they do not feel fully prepared for or for which they require further supervision
- Not administer medication without supervision
- Be conversant and comply with the organisations Lone worker policy and other relevant policies such as ‘Health and Safety’ and ‘Risk management’
- Confirm they have ‘business insurance’ for their own transport and carry a copy at all times
- Ensure that under no circumstances do they carry patients or their relatives in their transport
- Always notify their PLF when going out on a visit, where they are going and when they expect to return to base
- Carry the base telephone number with them in case of emergencies
- If provided with safety equipment students must carry it with them at all times
- Provide their supervisor with their mobile number and keep it turned on at all times except when driving. If the student does not have a mobile phone they should ensure the contact numbers of each of their planned visits is available at their base.

Faculty of Health and Wellbeing

FPLC 3: Readiness for Practice

This document contains details of requirements agreed by Canterbury Christ Church University (CCCU) and Placement Providers that must be completed prior to students commencing practice placements at the commencement of their programme and subsequent years.

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Specific notes for file

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- Shortened Midwifery programme requirements updated
  - Helen Muscat, 24.03.14

- Updated to include good health good character declarations for all students prior to first year placement. Terminology updated throughout to match PEMS and some formatting changes
  - Annie Hayford, 14.04.14
Mandatory Training required as part of evidence of Readiness for Practice

It is the Faculty's responsibility to ensure that every effort is made to ensure you are Ready for Practice prior to commencing your placement experiences. One aspect of this is to ensure that students complete the relevant mandatory training. The following table lists the training agreed with local placement providers for your pathway. Failure to complete this training or provide documented evidence for your practice learning facilitator will prevent you from commencing your placement.

<table>
<thead>
<tr>
<th>IPL pre-registration Programme</th>
<th>On admission</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
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<td>• Introduction to professional code and expected standards of behaviour for practice</td>
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<td>• Rights of service users in relation to student participation</td>
<td>• Use of assessment of practice documents</td>
<td>• Safeguarding</td>
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<td>• Responding to concerns in practice to include RAEC policy</td>
<td>• Rights of service users in relation to student participation</td>
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<td></td>
<td>• Support available during placement</td>
<td>• Responding to concerns in practice to include RAEC policy</td>
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<td>• Business insurance if applicable</td>
<td>• Support available during placement</td>
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Induction to Trust undertaken at the beginning of the programme. Introduction to Placements undertaken at the beginning of each year by the Practice Lead.
Mandatory Training required as part of evidence of Readiness for Practice

It is the Faculty’s responsibility to ensure that every effort is made to ensure that students are Ready for Practice prior to commencing their placement experiences. One aspect of this is to ensure that the relevant mandatory training required by placement providers is completed by students. The following table lists the training agreed with placement providers for your pathway. Failure to comply with these requirements will prevent you from commencing your placement.

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<th>Year 2</th>
<th>Year 3</th>
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                         • Occupational Health Clearance | • Moving and Handling (Theory and Practice)  
                         • Life Support and first aid  
                         • Safeguarding  
                         • Standard precautions  
                         • Introduction to professional code and expected standards of behaviour for practice  
                         • Self-declaration of Good Health and Good Character  
                         • Placement preparation  
                         • Use of assessment of practice documents.  
                         • Rights of service users in relation to student participation  
                         • Responding to concerns in practice to include RAEC policy  
                         • Support available during placement  
                         • Business insurance if applicable | • Moving and Handling  
                         • Life Support  
                         • Self-declaration of Good Health and Good Character  
                         • Safeguarding | • Moving and Handling  
                         • Life Support  
                         • Self-declaration of Good Health and Good Character  
                         • Safe Medicate prior to final sign off of proficiency  
                         • Safeguarding |

Induction to the organisation and placement is facilitated by placement providers
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Induction to Trust undertaken at the beginning of the programme. Introduction to Placements undertaken at the beginning of each year by Practice Placement Facilitators.
Mandatory Training required as part of evidence of Readiness for Practice

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<td>• Responding to concerns in practice to include RAEC policy</td>
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<td>• Support available during placement</td>
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<td>• Business insurance if applicable</td>
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</tbody>
</table>

Induction to the organisation and placement is facilitated by placement providers
### Mandatory Training required as part of evidence of Readiness for Practice

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<thead>
<tr>
<th>IPL pre-registration Programme</th>
<th>On admission</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
</tr>
</thead>
</table>
| Operating Department Practice | • DBS Clearance  
• Occupational health clearance | • Moving and Handling (Theory and Practice)  
• Life Support and first aid  
• Safeguarding  
• Standard Precautions  
• Introduction to HCPC standards of proficiency and Standards of conduct, performance and ethics.  
• Self-declaration of Good Health and Good Character  
• Placement preparation  
  • Use of assessment of practice documents.  
  • Rights of service users in relation to student participation  
  • Responding to concerns in practice to include RAEC policy  
  • Support available during placement  
  • Business insurance if applicable | • Moving and Handling  
• Life Support  
• Self-declaration of Good Health and Good Character  
• Safe Medicate  
• Safeguarding  
• Standard Precautions | • Moving and Handling  
• Life Support  
• Self-declaration of Good Health and Good Character  
• Safe Medicate  
• Safeguarding  
• Standard Precautions |

*Induction to the organisation and placement facilitated by placement providers*
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<th>On admission</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
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</thead>
<tbody>
<tr>
<td><strong>Occupational Therapy</strong></td>
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<tr>
<td>• DBS clearance</td>
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<tr>
<td>• Occupational Health Clearance</td>
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<tr>
<td>• Moving and Handling (Theory and Practice)</td>
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<td>• Life Support and first aid</td>
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<td>• Safeguarding</td>
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<tr>
<td>• Standard precautions</td>
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<td></td>
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<tr>
<td>• Introduction to HCPC standards of proficiency and Standards of conduct, performance and ethics.</td>
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<td></td>
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<tr>
<td>• Self-declaration of Good Health and Good Character</td>
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<tr>
<td>• Placement preparation</td>
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<tr>
<td>• Use of assessment of practice documents.</td>
<td></td>
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<tr>
<td>• Rights of service users in relation to student participation</td>
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<td></td>
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<tr>
<td>• Responding to concerns in practice to include RAEC policy</td>
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<tr>
<td>• Support available during placement</td>
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<tr>
<td>• Business insurance if applicable</td>
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Mandatory Training required as part of evidence of Readiness for Practice

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<th>IPL pre-registration Programme</th>
<th>On admission</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Paramedic Science</strong></td>
<td>• DBS clearance</td>
<td>• Moving and Handling (Theory and Practice)</td>
<td>• Moving and Handling</td>
<td>• Moving and Handling</td>
</tr>
<tr>
<td></td>
<td>• Occupational Health Clearance</td>
<td>• Life Support and first aid</td>
<td>• Life Support</td>
<td>• Life Support</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Safeguarding</td>
<td>• Self-declaration of Good Health and Good Character</td>
<td>• Safeguarding</td>
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<td></td>
<td></td>
<td>• Standard precautions</td>
<td>• Standard precautions</td>
<td>• Standard precautions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Introduction to HCPC standards of proficiency and Standards of conduct, performance and ethics.</td>
<td>• Infection prevention</td>
<td>• Infection prevention</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Self-declaration of Good Health and Good Character</td>
<td>• Slips, trips and falls</td>
<td>• Slips, trips and falls</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Placement preparation</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>• Use of assessment of practice documents</td>
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<td></td>
<td>• Rights of service users in relation to student participation</td>
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<td></td>
<td>• Responding to concerns in practice to include RAEC policy</td>
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<td></td>
<td></td>
<td>• Support available during placement</td>
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<td></td>
<td></td>
<td>• Business insurance if applicable</td>
<td></td>
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</tr>
</tbody>
</table>

Year 1: South East Coast Ambulance NHS Trust (SECAmb) Induction by SECAmb staff – 7 hours to include policies and procedures, health and safety, ambulance and equipment familiarisation.
Mandatory Training required as part of evidence of Readiness for Practice

It is the Faculty’s responsibility to ensure that every effort is made to ensure that students are Ready for Practice prior to commencing their placement experiences. One aspect of this is to ensure that the relevant mandatory training required by placement providers is completed by students. The following table lists the training agreed with placement providers for your pathway. Failure to comply with these requirements will prevent you from commencing your placement.

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<thead>
<tr>
<th>IPL pre-registration Programme</th>
<th>On admission</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
</tr>
</thead>
</table>
| Diagnostic Radiography        | • DBS clearance  
• Occupational Health Clearance | • Moving and Handling (Theory and Practice)  
• Life Support and first aid  
• Safeguarding  
• Introduction to HCPC standards of proficiency and Standards of conduct, performance and ethics.  
• Self-declaration of Good Health and Good Character  
• Placement preparation  
  • Use of assessment of practice documents  
  • Rights of service users in relation to student participation  
  • Responding to concerns in practice to include RAEC policy  
  • Support available during placement  
  • Business insurance if applicable | • Moving and Handling  
• Life Support  
• Safeguarding  
• Self-declaration of Good Health and Good Character | • Moving and Handling  
• Life Support  
• Safeguarding  
• Self-declaration of Good Health and Good Character |

Students are inducted to the organisation when they first arrive at placement by the placement Clinical Liaison Radiographer and be included in any trust inductions.
Mandatory Training required as part of evidence of Readiness for Practice

It is the Faculty’s responsibility to ensure that every effort is made to ensure that students are Ready for Practice prior to commencing their placement experiences. One aspect of this is to ensure that the relevant mandatory training required by placement providers is completed by students. The following table lists the training agreed with placement providers for your pathway. Failure to comply with these requirements will prevent you from commencing your placement.

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<tr>
<th>Programme</th>
<th>On admission</th>
<th>Year 1</th>
<th>Year 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>PgDip Speech and Language Therapy</td>
<td>• DBS Clearance</td>
<td>• Self-declaration of Good Health and Good Character</td>
<td>• Moving and Handling</td>
</tr>
<tr>
<td></td>
<td>• Occupational Health Clearance</td>
<td>• Moving and Handling (Theory and Practice)</td>
<td>• Basic Life Support</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Basic life Support</td>
<td>• Enhanced safeguarding for vulnerable adults in SLT services</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Safeguarding for Adults and Children in SLT services</td>
<td>• Infection control (including practical hand washing)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Infection control (including practical hand washing)</td>
<td>• Self-declaration of Good Health and Good Character</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Introduction to R.C.S.L.T and professional code and expected standards of behaviour in practice</td>
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<tr>
<td></td>
<td></td>
<td>• Business insurance if applicable</td>
<td></td>
</tr>
</tbody>
</table>

Induction is carried out in the organisation as part of the learning agreement.
Requirements as part of evidence of readiness and fitness to undertake direct practice

It is the Faculty’s responsibility to ensure that students are Ready for Practice prior to commencing their placement experiences. One aspect of this is to ensure that the relevant regulatory body and practice agency requirements are completed by students. The following table lists the requirements for your pathway. Failure to comply with these requirements will prevent you from commencing your placement.

<table>
<thead>
<tr>
<th>Programme</th>
<th>On admission</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3 (BA only)</th>
</tr>
</thead>
</table>
| IPL Pre-registration BA Social Work and MA Social Work | • DBS Clearance  
• Occupational Health Clearance  
• Suitability for social work clearance  
• HCPC Restricted List Check | • BA & MA – Assessed Readiness for Direct Practice  
• Agency DBS clearance if required  
• Self-declaration of Good Health and Good Character  
• Placement preparation  
  o Use of assessment of practice documents  
  o Rights of service users in relation to student participation  
  o Responding to concerns in practice to include RAEC policy  
  o Support available during placement  
  o Business insurance if applicable | • Pass first placement (MA only)  
• Good Health and Good Character assessment  
• Agency DBS clearance if required | • Pass first placement (BA)  
• Good Health and Good Character assessment  
• Agency DBS clearance if required |

Induction is carried out in the organisation as part of the learning agreement. Some placements may require immunisations and some may advise.
Mandatory Training required as part of evidence of Readiness for Practice

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<table>
<thead>
<tr>
<th>Programme</th>
<th>On admission</th>
<th>Stage 1</th>
<th>Stage 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>BSc (Hons)/ PgDip Midwifery (Shortened programme)</td>
<td>• DBS&lt;br&gt;• Occupational Health Clearance</td>
<td>• Life Support provided by the Trust&lt;br&gt;• Manual Handling Provided by Trust&lt;br&gt;• Self-declaration of Good Health and Good Character&lt;br&gt;• Placement preparation&lt;br&gt;  • Use of assessment of practice documents.&lt;br&gt;  • Rights of service users in relation to student participation&lt;br&gt;  • Responding to concerns in practice to include RAEC policy&lt;br&gt;  • Support available during placement&lt;br&gt;  • Business insurance if applicable</td>
<td>• Life Support provided by the Trust&lt;br&gt;• Neonatal Life Support&lt;br&gt;• Manual Handling Provided by Trust&lt;br&gt;• Safeguarding&lt;br&gt;• Self-declaration of Good Health and Good Character&lt;br&gt;• Safe Medicate&lt;br&gt;• Preparation for Case-Loading/ Lone working</td>
</tr>
</tbody>
</table>

Induction to the organisation and placement is facilitated by the placement provider
Mandatory Training required as part of evidence of Readiness for Practice

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<tr>
<th>Programme</th>
<th>On admission</th>
<th>Year 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Return to Practice (Adult/ Child/ SCPHN)</td>
<td>• DBS clearance</td>
<td>• Moving and Handling (Theory and Practice)</td>
</tr>
<tr>
<td></td>
<td>• Occupational Health Clearance</td>
<td>• Life Support</td>
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<tr>
<td></td>
<td></td>
<td>• Safeguarding</td>
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<tr>
<td></td>
<td></td>
<td>• Standard precautions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Introduction to professional code and expected standards of behaviour for practice</td>
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<tr>
<td></td>
<td></td>
<td>• Self-declaration of Good Health and Good Character</td>
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<td>• Placement preparation</td>
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<td>• Use of assessment of practice documents.</td>
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</tbody>
</table>

Induction to Trust undertaken at Benenden Hospital and this includes introduction to all main policies and procedures such as health and Safety and Data Protection
Faculty of Health and Wellbeing

FPLC 4: Guidelines for the support of students requiring reasonable adjustment during placement

<table>
<thead>
<tr>
<th>Version</th>
<th>Date prepared</th>
<th>Date reviewed</th>
<th>Reviewer name</th>
<th>Date for next review</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>7.2.11</td>
<td>11.3.11</td>
<td>Karen Lumsden, Sue Plummer, Margaret Scott, Andy Nazarjuk, Claire Thurgate, Faculty Practice Learning Committee, Janet Wiseman, Anne Kelly, Moira Mitchell, Robert Melville</td>
<td>December 2014</td>
</tr>
<tr>
<td>2</td>
<td>12th December 2014</td>
<td>Faculty Practice Learning Committee</td>
<td>January 2016</td>
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</tbody>
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Document trail

Version | Date
---|---
1-5 LSP | 17.2.10
Draft 1 Flow Chart | 1.11.10
Draft 2 Flow Chart | 5.8.11

Specific notes for file

These guidelines relate to the following programmes/pathways:
- IPL pre-registration programme
- Shortened Midwifery programme

These boxes should be used to identify specific actions taken / changes made to document and the date.
1. Introduction

1.1. Purpose

The Faculty of Health and Wellbeing recognises that there are a wide range of individual circumstances that may require reasonable adjustment to be made in practice placements to provide a positive learning environment and to offer the opportunity to achieve the requirements of professional programmes. The purpose of these guidelines is:

1.1.1. To outline the underlying principles for the positive and effective management of equal opportunities for students with additional needs
1.1.2. To make explicit the process whereby reasonable adjustments can be put in place, while ensuring due consideration is given to Data Protection and Confidentiality.

The Faculty of Health and Wellbeing is committed to:

- The use of consistent and justifiable criteria for the selection and admission of students.
- The creation of a supportive environment that enables students to disclose issues related to their disability.
- Undertaking reasonable adjustments as necessary, without compromise to professional regulations or lowering of practice quality and standards.

1.2. Reasonable adjustments

In order to provide effective support for students with additional needs, the Faculty actively complies with University guidelines to support students for the academic component of their education programme:


These guidelines are particularly concerned with provision of support before, during and after the placement experience that takes account of the specific needs disclosed by students.

2. Guidelines for practice

2.1. Confidentiality

Information about a disability is, by its nature, sensitive personal data and regarded as confidential. It must be processed in accordance with the Data Protection Act 1988. Faculty staff are committed to providing an environment in which disclosure is encouraged so that the needs of students can be met. There are some key principles that underpin issues of disclosure and the practice experience.
• Sensitive disclosures must be treated as confidential and never discussed or disclosed to any person not entitled to receive the information and without wherever possible the prior knowledge of the student concerned. (For example if a student discloses that they are diabetic but does not wish their diagnosis to be disclosed further, then their diagnosis is confidential and only the reasonable adjustment related to the frequency of meal breaks can be disclosed; there would be no further recording of the information and there would be no further adjustment made).
• An example of a person with whom the information is shared would be where an issue that affects the student’s fitness to practise in the placement and the persons receiving the information requires it to provide for reasonable adjustment, support the student on the placement or to protect the safety of student, staff or service users.
• If students do not wish details of their disability to be disclosed to placement staff, they must be made aware that this may inhibit adjustments being made. Staff would respect the right not to disclose unless this may affect the safety of student, staff or service users.

2.2. Recruitment and selection

2.2.1. Professional guidelines

The Nursing and Midwifery Council (2010), and Health and Care Professions Council (2012) detail the requirements to be met as evidence of good health and good character prior to applicants being entered on to the professional register. It is acknowledged that ‘good health’ is a relative concept, and that a registrant may have a disability and be capable of safe and effective practice. As programme providers we have an obligation to ensure that students’ health status meets the requirement of our regulatory bodies.

2.2.2. Selection, interviews and offers

The interview team

• All staff involved in selection and interview receive guidance / training on equality and disability awareness
• Transparent and justifiable criteria will be used for the selection of students
• Programme teams will work collaboratively and proactively with Student Support, Health and Wellbeing to ensure that appropriate support is offered.

2.3. Reasonable adjustments

Reasonable adjustments may be funded by disabled student allowances (DSA), CCCU or the placement provider. There are a number of situations which may require these adjustments to be made and may be required for students who:

2.3.1. Are disabled, as defined by the Equality Act 2010, which includes any ‘physical or mental impairment which has a substantial and long term adverse effect on (the individual’s) ability to carry out normal day-to-day activities’. Long term means that the effect has lasted or is likely
to last at least 12 months. Some of these conditions may include hearing & visual impairment, asthma, diabetes etc. (Further advice on the legal definitions of terms such as impairment, disability and substantial can be found at [http://www.lawsociety.org.uk/support-services/advice/practice-notes/equality-act-2010/](http://www.lawsociety.org.uk/support-services/advice/practice-notes/equality-act-2010/) Have a temporary / acute health problem such as fractures, pregnancy, post-operative recovery that are not covered by the Equality Act 2010.

2.3.2. Have learning difficulties such as dyslexia, dyspraxia or autistic spectrum disorder that are covered by the Equality Act 2010.

Some of the adjustments that can be made, might include (some examples below)

- Scheduled meal breaks
- Provision of facilities to express and store breast milk
- Provision of additional time to develop practice skills / develop self management skills
- Special equipment in practice
- Shift patterns to accommodate the effects of medication

2.4. Roles and responsibilities

2.4.1. The Student Support, Health and Wellbeing team

- The manager of Student Support, Health and Wellbeing and this team receive application forms prior to invitation to interview. Potential applicants can ask for a meeting to discuss their needs at open days or informally prior to application
- All applicants invited to interview who have disclosed a disability (on the UCAS form) are invited to a meeting with the support team on the same date.
- A list of successful candidates who have disclosed a disability is sent to the support team at the same time that the offers go out.
- If the candidate accepts, there is then a further email from the support team, reminding them of the service they can provide, and offering help with the gathering of evidence to support any claim for DSA.
- Appointments are offered for individuals with the support team, and the first meeting explores possible evidence to support any claims. Following this meeting, an email goes out to the main teaching team for that student, outlining their support needs.
- At this stage, the process becomes much more individualised, assessment may lead to referral to Occupational Health teams or specialist advice may be sought.
- All students with a disclosed disability will participate in the development of a Placement Learning Support Plan (Appendix 1) for both academic and practice support.

2.4.2. Faculty staff

- The Faculty Director of Practice Learning will maintain an overview of students requiring reasonable adjustments, plan and participate in
panel meetings as required and review these guidelines annually in partnership with Programme staff and Student Support, Health and Wellbeing.

- Mentor / Practice Educator preparation and updates will prepare placement staff to support students requiring adjustments
- Each pathway field will nominate a lead to develop their expertise.
- Each pathway field will consider where adjustments to learning and assessment can be made while still meeting regulatory requirements.
- Recruitment Leads should encourage prospective students to utilise all opportunities available to disclose disabilities and how follow up occurs
- Students identified as requiring reasonable adjustments after commencing the programme will be referred to Student Support, Health and Wellbeing (SSHW) and if appropriate, Occupational Health.
- In the case of students with physical disabilities and severe dyslexia / dyspraxia (if identified as a need by SSHW), Panel members (academic lead for pathway or tutor, SSHW team member, practice representative (if appropriate) and student) will meet to develop initial Placement Learning Support Plan (PLSP) and review annually.
- In the case of students with Dyslexia / dyspraxia, personal tutors will provide support for the implementation of a core PLSP and review its effectiveness annually. The personal tutor will advise Student Support, Health and Wellbeing if there are specific coping strategies that the student needs help to develop to enable them to practice at the required level of their programme. It is acknowledged that reasonable adjustments for a Year 1 student may not be reasonable for a student later in their programme.
- An identified academic lead person will work with Placement leads to agree optimal placement allocation, inform Placement administrators and circulate these guidelines to placement providers
- Placement administrators will implement placement plan and utilise a ‘Flag system’
- Placement administrators will inform Pathway leads / PPFs of issues related to planned allocations.

2.4.3. Placement staff

- Placement staff will implement (and fund where appropriate) the adjustments outlined in the PLSP
- Mentors / Practice Educators will assess students objectively against regulatory standards / proficiencies.
- Placement leads / PPFs will support implementation of the plan and monitoring of the effectiveness of adjustments

2.4.4. Students

- Students need to understand the importance of disclosure and will play a key role in communicating their own needs and will need to be proactive in sharing their PLSP with placement staff and academic links.
• Students will work to develop self-management strategies that will enable them to practice at an appropriate level for their stage in the programme.
• Students will understand that adjustments have been planned to help them meet the standards of the profession and that not utilising the planned adjustment may adversely affect their progress and achievement.
• Students will practice within their professional code and required professional standards.
• Students will participate actively in annual review
• Inform academic teams / SSU if there is a need for earlier review of their plan.

**Identified lead by profession**

<table>
<thead>
<tr>
<th>Profession</th>
<th>Name</th>
<th>Contact details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Nursing</td>
<td>Karen Daniels</td>
<td><a href="mailto:karen.daniels@canterbury.ac.uk">karen.daniels@canterbury.ac.uk</a></td>
</tr>
<tr>
<td>Child Nursing</td>
<td>Gayle LeMoine</td>
<td><a href="mailto:gayle.lemoine@canterbury.ac.uk">gayle.lemoine@canterbury.ac.uk</a></td>
</tr>
<tr>
<td>Mental Health Nursing</td>
<td>Pam Pringle</td>
<td><a href="mailto:pam.pringle@canterbury.ac.uk">pam.pringle@canterbury.ac.uk</a></td>
</tr>
<tr>
<td>Midwifery</td>
<td>Hema Turner</td>
<td><a href="mailto:hema.turner@canterbury.ac.uk">hema.turner@canterbury.ac.uk</a></td>
</tr>
<tr>
<td>Operating Department Practitioner</td>
<td>Alan Mount</td>
<td><a href="mailto:alan.mount@canterbury.ac.uk">alan.mount@canterbury.ac.uk</a></td>
</tr>
<tr>
<td>Occupational Therapy</td>
<td>Lindsey Keefe</td>
<td><a href="mailto:lindsey.keefe@canterbury.ac.uk">lindsey.keefe@canterbury.ac.uk</a></td>
</tr>
<tr>
<td>Paramedic</td>
<td>Paul Vigar</td>
<td><a href="mailto:paul.vigar@canterbury.ac.uk">paul.vigar@canterbury.ac.uk</a></td>
</tr>
<tr>
<td>Radiography</td>
<td>Rebecca Sandys</td>
<td><a href="mailto:Rebecca.sandys@canterbury.ac.uk">Rebecca.sandys@canterbury.ac.uk</a></td>
</tr>
<tr>
<td>Social Work</td>
<td>Beverley Murray</td>
<td><a href="mailto:beverley.murray@canterbury.ac.uk">beverley.murray@canterbury.ac.uk</a></td>
</tr>
<tr>
<td>Speech and Language Therapy</td>
<td>Fiona Fowler</td>
<td><a href="mailto:fiona.fowler@canterbury.ac.uk">fiona.fowler@canterbury.ac.uk</a></td>
</tr>
</tbody>
</table>
**References and useful resources**

Direct Gov, Learning and your rights, disabled people-


Health Professions Council (HPC)- A disabled persons guide to becoming a health professional


Royal College of Nursing (RCN) Dyslexia, dyspraxia and dyscalculia, guidance for practice-

Placements Learning Support Plan

**Section 1**

**Personal details**

<table>
<thead>
<tr>
<th>Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme of study</td>
<td></td>
</tr>
<tr>
<td>Year/ Cohort</td>
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</tr>
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<td>Campus/Location</td>
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<tr>
<td>Personal Tutor/Contact</td>
<td></td>
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<td>Campus Ext</td>
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</tr>
<tr>
<td>Date of Form Completion</td>
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</table>

**Rationale for form completion**

(Disability, Occupational Health Request, Pregnancy*)

* *If issues occur related to the pregnancy then this form to be completed in addition to standardised pregnancy risk assessment form**
## Section 2: Provision required

<table>
<thead>
<tr>
<th>Effect of disability</th>
<th>Provision on placement for consideration</th>
<th>Action</th>
<th>Responsible person or department</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mobility</td>
<td>Personal Emergency Exit Plan (PEEP) Work station assessment Information on student’s own equipment. Adapted equipment Length of day, shifts, pace of work, regular breaks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hearing</td>
<td>PEEP Provision of safety equipment, or management system. Communication equipment Strategies for improving communication in meetings etc Adapted equipment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vision</td>
<td>PEEP Work station assessment Assistive technology Orientation</td>
<td></td>
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</tr>
<tr>
<td>Dyslexia, dyspraxia, dyscalculia</td>
<td>Identifying strategies to counter effects of condition. Students who bring in their own laptops must have them checked by the Trusts.</td>
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</tr>
<tr>
<td>Other</td>
<td>e.g. Medical conditions</td>
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</table>
**DISCLOSURE OF PERSONAL INFORMATION**

**Important**
The purpose of this form is for you to give the University permission to liaise with Placement Providers about any disabilities related facilities you may need. Please sign in the space provided. If you do not sign, information will not be passed on to the department concerned, and this may prevent us from making reasonable adjustments for you. Please note that in signing this you are also agreeing for this Plan to be kept with your student record.

<table>
<thead>
<tr>
<th>Organisation/Department</th>
<th>Reason for disclosure to them</th>
<th>Student’s signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relevant staff on placement e.g. PPF, practice educators, mentors, area managers.</td>
<td>To ensure that reasonable adjustments are delivered when you are on placement.</td>
<td></td>
</tr>
</tbody>
</table>

**Summary of information to be disseminated:**

**PLEASE NOTE**
It is your responsibility to inform your Pathway Director and Placements Coordinator/ Practice Placement Facilitator if your condition alters if this may impact upon your experience on placement.

Read and actioned by the following members of staff within University /Practice:

<table>
<thead>
<tr>
<th>Name</th>
<th>Organisation/Department</th>
<th>Signature</th>
<th>Date</th>
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</table>
Student identified as having additional support requirements during placement

At start of programme through UCAS / SSU

Student support confirms in email to Pathway Director (copy to Director of Practice Learning)

During academic weeks by student / personal tutor

Always refer to SSU and OH (if required)

OH clearance

During placement by student / academic link / practitioner

Virtual discussion with SSU/ designated academic disability support to agree urgent / non-urgent action

Urgent

? Placement deferral or continue

Non-Urgent

Continue placement and continue as per programme process

Placement Learning Support Plan developed

Panel meeting convened
Meeting arranged between student, student support, designated member of academic staff and practice representative where required. Placement Learning Support Plan developed

Students with all other additional needs and dyslexia if requested by SSU)

Student with Dyslexia

- Information emailed to personal tutor
- Standard Placement Learning Support Plan discussed with student

PLSP
- Filed on shared drive ‘Orris’
- Sent to pathway Director for dissemination to academic team and file in student records
- Copy to student to share with academic link / placement learning facilitator

Placement allocations
Planned to accommodate student requirements
Flag system initiated

Review of coping strategies with Personal Tutor/ further advice may be sought from SSU on specific strategies to promote progression

Panel reconvenes
PLSP formally reviewed at the end of each academic year or sooner if initiated by student or following 1st placement in complex situations. This meeting will 1) assess currency of plan 2) consider whether adjustments are appropriate to the students stage of education.
Faculty of Health and Wellbeing

FPLC 5: Guidelines for reviewing a student’s placement experience

<table>
<thead>
<tr>
<th>Version</th>
<th>Date prepared</th>
<th>Date reviewed</th>
<th>Reviewer name</th>
<th>Date for next review</th>
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<tr>
<td>1</td>
<td>28.10.11</td>
<td></td>
<td>Sandra Huntington, Susan Crowhurst, Helen Muscat, Gayle Le Moine, Karen Daniels, Lindsey Keefe, Karen Lumsden, Sue West, Lorraine Jacobs</td>
<td>December 2014</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>12th December 2014</td>
<td>Faculty Practice Learning Committee</td>
<td>January 2016</td>
</tr>
</tbody>
</table>

**Specific notes for file**

- This box should be used to identify specific actions taken / changes made to document and the date.

**Name of reviewer**

- These boxes should be used to identify specific actions taken / changes made to document and the date.
Introduction

A review of a student’s placement experience may need to occur at any time for one or more of the reasons below:

1. Reasons related to the student
2. Reasons related to practice learning facilitators
3. Reasons related to the placement.

Some of the triggers for reviewing placement allocations are illustrated on the following page. It is important to establish that being asked to review a placement experience will not necessarily result in a discontinuation of the placement, although this may have been the anticipated outcome of those involved.

The roles and responsibilities of the key people involved in reviewing placement experiences will vary, particularly with regard to the power they have to define the nature of the problem. Students and practitioners may feel vulnerable if they consider that their ability is being questioned. It is important that all involved work together in an objective manner, provide clear evidence to support their perspective, follow the attached guidelines and maintain a record of the discussions and outcomes. Form PIR1 (Appendix 1) should be used for this purpose.

Each situation is unique and those involved and accountable for decision making will need to use their professional judgement to interpret the guidelines sensitively in a collaborative manner. Whilst the easiest solution might seem to be to remove the student from the placement area, this should be not necessarily be the first course of action and should be very carefully considered.

Any action taken must be transparent and consistent and for this reason decisions should be a tripartite process that takes into account equity, inclusion and diversity.
Triggers for reviewing a placement

- **Practitioner related**
  - Personal competence, conduct or currency issue
  - Personal issues
  - Service user related

- **Placement related**
  - Change in available learning opportunities
  - Placement closure / re-configuration
  - Quality of practice issues
  - Issues with team dynamics

- **Student related**
  - Health and Safety and mandatory programme requirements
  - Personal issues
  - Issues of competency and fitness to practice
  - Adherence with standards of behaviour and conduct in practice

- **Nature of Issue identified**
  - Reasonable adjustments
Guidelines for decision-making when reviewing placement allocation

**Student related (this is not an exhaustive list)**
Consider:
1. Informing Senior Lecturer Practice Learning, Placement Lead and Placements Learning Unit if appropriate
2. Linking to and action appropriate policies for example
   - Health and Safety
   - Occupational Health
   - Placement provider policies and procedures
   - Financial services (Hardship fund etc.)
   - Fitness to Practice
   - Completion of documentation outlining all perspectives
3. Review of Placement Learning Support Plan (PLSP) / referral to Student Support, Health and Wellbeing Completion of documentation, copies kept by all involved
4. Sensitive involvement of service users if appropriate

**Practitioner related (this is not an exhaustive list)**
Consider:
1. Informing Senior Lecturer Practice Learning, Placement Lead and Placements office if appropriate
2. Linking to Placement Learning Facilitator (PLF)/ roles and responsibilities / Nursing and Midwifery Council (NMC) / Health and Care Professions Council (HCPC) standards (where available)
   - Professional codes
   - Education Audit requirements
3. Involvement of placement manager / PPF / student co-ordinator
4. Completion of documentation, copies kept by all involved
5. Sensitive involvement of service users, etc.

**Placement related (this is not an exhaustive list)**
Consider:
1. Informing Senior Lecturer Practice Learning, Placement Lead and Placements office if appropriate
2. Linking to Education Audit, action plan and review
3. Assess need for additional academic support
4. Involve placement manager / PPF or equivalent
5. Completion of documentation, copies kept by all involved

Tripartite decision made by Senior Lecturer Practice Learning, Placement Lead and PPF or equivalent (where in post) to continue the placement (and circumstances / action needed to facilitate this). Decisions to re-allocate student placement or withdraw of student subject to further action should involve the Faculty Director of Practice Learning.
Appendix 1  

**PIR1 – Report for issues in practice**  
This form should be completed by placement staff such as a Practice Placement Facilitator (or equivalent) or a member of University Academic staff. Once fully completed it should be forwarded electronically to placementsquality@canterbury.ac.uk.

A copy of the completed form will be kept in a secure placements file. No personal details of service users / placement provider staff should be included in this report.

**PART 1: Contact details**

<table>
<thead>
<tr>
<th>Name of who is completing this form</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Email address</td>
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<tr>
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<tr>
<td>Organisation</td>
<td></td>
</tr>
<tr>
<td>Practice Placement Facilitator or equivalent</td>
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<tr>
<td>Placement Lead/Senior Lecturer in Practice Learning</td>
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**PART 2: Incident details**

<table>
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<th>Date and time of incident(s)</th>
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</tr>
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</table>

**Issue / Incident detail:** NB: Please do not include personal details of placement staff / service users on this form
### PART 3: University action taken

**Please provide details of action taken by Canterbury Christ Church University**

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<thead>
<tr>
<th>Reported to placement provider (please delete one as appropriate)</th>
<th>Yes / No</th>
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<tr>
<td>If Yes please provide name and email address</td>
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<tr>
<td>If No please indicate why</td>
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### PART 4: Placement provider action taken

**Please provide details of action agreed by the placement provider**

<table>
<thead>
<tr>
<th>Name</th>
<th>Designation</th>
<th>Date</th>
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<tbody>
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Faculty of Health and Wellbeing

FPLC 6: Raising and Escalating Concerns in Practice

<table>
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<tr>
<th>Version</th>
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<th>Date reviewed</th>
<th>Reviewer name</th>
<th>Date for next review</th>
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<tr>
<td>1</td>
<td>5th April 2011</td>
<td>October 2011</td>
<td>FPLC Robert Melville</td>
<td>March 2014</td>
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<td></td>
<td>January 2011</td>
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<td>2</td>
<td></td>
<td>March 2014</td>
<td>FPLC Robert Melville</td>
<td>July 2014</td>
</tr>
<tr>
<td>2.1</td>
<td></td>
<td>July 2014</td>
<td>Faculty Board</td>
<td>January 2016</td>
</tr>
</tbody>
</table>

**Specific notes for file**

This procedure relates to programmes delivered within the Faculty of Health and Wellbeing

*These boxes should be used to identify specific actions taken / changes made to document and the date.*

Terminology updated to reflect Senior Lecturer in Practice Learning role and formatting changes.  

Elizabeth Welch 28.01.15
Preamble

This policy and the associated procedure aims to offer guidance to facilitate and support students from the Faculty of Health and Wellbeing to safely raise and escalate concerns that may arise in practice placements that relate to what is considered to be malpractice that represents a risk to the public. For these procedures to be applied, the student must demonstrate an honest and reasonable suspicion that malpractice has occurred, is occurring or is likely to occur.

This policy and the associated procedure does not relate to malpractice within the University, which is addressed through the procedures set out in Guidance to Students on Whistleblowing.

The policy and the associated procedure should be read alongside other relevant guidance for supporting students within practice learning environments. However, the policy and procedure relate the means by which student concerns about activity witnessed in a placement that represent malpractice are to be handled. They are not the means of addressing student complaints about their experience as a student or student disciplinary action.

1. Introduction

It is recognised that as a student or member of academic staff within the Faculty of Health and Wellbeing you must act in accordance with the professional code of your respective professional/statutory/regulatory body and that this includes acting to protect vulnerable people and raise concerns if you witness, abusive, unsafe and poor standards of care within your workplace or practice placement.

Speaking up on the behalf of people being cared for is an every day part of professional practice. Raising genuine concerns represents good practice; ‘doing nothing’ and failing to report concerns is unacceptable. Students are often one of the first people to suspect or realise that something may be wrong and as such must be empowered to report any genuine concerns that arise without fear of reprisal.

2. Aim

The aim of this policy and procedure is to:
2.1 Ensure that students from the Faculty understand their responsibility and are enabled to protect the interest of patients, service users, clients and colleagues.

2.2 Ensure that concerns are quickly reported to appropriate staff in provider organisations to enable action to be taken where necessary with a view to speedy resolution.

2.3 Ensure that there is a feedback mechanism for staff and students following escalation of a concern.

2.4 Enable students to be professional in adherence with their Professional Code and safeguarding responsibility.

2.5 Ensure students feel safe through the provision of ongoing support.

2.6 Ensure confidential records are maintained and concerns reported to regulatory bodies where appropriate.

2.7 Share a record of concerns with Health Education Kent Surrey and Sussex on a monthly basis for monitoring and quality assurance purposes.

2.8 Undertake review of concerns raised and their management with students and staff to ensure the policy is fully embedded in the Faculty and where appropriate use anonymised incidents as learning and teaching aids with students, practitioners and new members of academic staff.

3. **What is considered a ‘Concern’?**

In line with professional codes, health and social care students are expected to work with others to protect the health and well-being of those in their care. As a result this policy applies to the wider context of practice and not only those that relate to the practice of individuals. Some illustrative examples are given below but this is not an exhaustive list:

3.1 A breach of the professional code towards a patient, their family / carers, another member of staff or student by a member of staff within the practice placement.

3.2 Discriminatory or oppressive practice, unprofessional attitudes or behaviour towards a patient, their family / carers, another member of staff or student by a member of staff within the practice placement.

3.3 Bullying or any form of harassment towards a patient, their family / carers, another member of staff or student by a member of permanent or temporary staff within the practice placement.

3.4 Non adherence with Health and Safety guidelines that places patients, their family, carers, members of staff or students at risk.

3.5 Issues to do with the health of a member of staff within the practice placement or student that may affect their ability to practise safely.
3.6 There may be other concerns that students wish to raise that do not have safeguarding implications for people in their care. These may relate to their mentorship or learning opportunities. These issues are taken seriously but are managed outside of this policy through discussion with members of academic staff with placement responsibilities and completion of Practice Issue Reports (PIR) when appropriate. Please see appendix 1 for PIR template.

4. Confidentiality

When raising a concern during practice placement, the University cannot guarantee anonymity due to the fact that any concern raised will need to be fully investigated. This may also include students being asked to complete a full and accurate witness statement for the Police or the university which may be shared with others under the Kent and Medway Information Sharing Protocol.

Students are advised to seek help from personal tutors / Student Services and Administration department and / or a union representative during this process. The University will do everything possible to ensure learning and progress is not affected by raising a genuine concern.

This policy acknowledges that students may be seconded and as such may be expressing a concern about their employing organisation and under these circumstances concerns will be addressed as a student of the University.

5. Raising a concern

5.1 Stage 1: Discussing initial concerns

If a student witnesses or suspects there is cause for concern (see section 3), the first step is to discuss this concern informally with a senior member of staff. This may be a mentor / practice educator, supervisor, academic link or the Senior Lecturer in Practice Learning (SLPL) for the organisation. They will help students think about what has happened, if there are is any additional information that may have influenced the situation, help the student to decide if there is a genuine concern that needs to be reported.

The initial concern must be raised with the mentor / academic link and / or the Practice Placement Facilitator (PPF) or equivalent immediately and before leaving the placement. The aim of this discussion is to promote prompt local resolution.

If the issue is resolved at this stage, no further action is required.

Some concerns may be serious enough to warrant direct escalation to Stage 3 of the procedure ‘Whistleblowing’

5.2 Stage 2- Formal exploration

If the concern is not resolved, a formal meeting must be arranged. The meeting will be convened by the Practice Placement Facilitator (where available) or equivalent and should include the SLPL and / or Academic link and the student. The concern
should be examined and discussed fully. The content and outcome of this
discussion should be documented on a Practice Issues Report (PIR). Any confidential
information or additional evidence should be attached to the form and both should
be returned to placementsquality@canterbury.ac.uk.

This possible outcome of this meeting may include:

- No action required
- No action required and student to undertake a reflection with the
  PPF / SLPL so that the situation can be used as a learning opportunity
- Limited evidence but sufficient to warrant action by the placement
- Safeguarding issue warrants escalation following providers
  safeguarding / whistleblowing policies.

5.3 Stage 3 Whistleblowing

If a concern is not resolved through the informal and formal processes outlined in
Stage 1 and 2 of this document or because of its’ nature, the concern requires
immediate escalation to Stage 3, students should contact the designated
Placement Lead or SLPL agree who will provide support through the escalation
process.

5.3.1 The member of academic staff, with the student must complete a PIR form
if not already completed. Forms are available on Placements BlackBoard /
Guidelines.

5.3.2 The member of academic staff must immediately inform the Faculty Director
of Practice Learning (FDPL) and forward the completed form.

5.3.3 The Faculty Director of Practice Learning (FDPL) will immediately inform the
Senior Manager within the practice area (and the PPF or equivalent, if not
already involved at Stage 2) and forward the PIR form.

5.3.4 The placement provider will invoke organisational policies and procedures
as appropriate and / or complete the investigation.

5.3.5 The FDPL will maintain the confidential records and monitor all issues raised
and report these to Health Education, Kent, Surrey and Sussex (HEKSS) on a
monthly basis for monitoring and quality assurance issues.

5.3.6 The SLPL or Placement Lead and Personal Tutor will support the student
throughout the procedure.

5.3.6 If a representative from the Placement provider wishes to interview the
student, this should first be discussed with the member of academic staff
referred to in 5.3.5

5.3.7 Action taken will depend on the nature and severity of the concern, but may
include:

- Referral to local Safeguarding Team / Police
• Withdrawal of area as an active placement with reallocation of students to alternate placements
• Informing regulatory body
• Supportive action to maintain students in placement
• Ongoing communication and discussion with provider
• No further action

6. Keeping students informed

If students have raised a concern, the FDPL will make contact in writing in order to:

• Acknowledge that the concern has been received and is being dealt with
• Explain whether any further investigations are taking place and
• Provide an expected time frame for a final response
**Appendix 1**  
**PIR1 – Report for issues in practice**

This form should be completed by placement staff such as a Practice Placement Facilitator (or equivalent) or a member of University Academic staff. Once fully completed it should be forwarded electronically to placementsquality@canterbury.ac.uk.

A copy of the completed form will be kept in a secure placements file. No personal details of service users / placement provider staff should be included in this report.

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<tr>
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<tr>
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<tr>
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</thead>
<tbody>
<tr>
<td>If Yes please provide name and email address</td>
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<tr>
<td>If No please indicate why</td>
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### PART 4: Placement provider action taken

**Please provide details of action agreed by the placement provider**

<table>
<thead>
<tr>
<th>Name</th>
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Faculty of Health and Wellbeing

FPLC 7: Guidelines for Long Arm Practice Supervision

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<th>Date reviewed</th>
<th>Reviewer name</th>
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<td>1</td>
<td>March 2015 by Gayle Le Moine and Andrew Southgate</td>
<td>17th April 2015</td>
<td>FPLC</td>
<td>January 2016</td>
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Specific notes for file

These guidelines apply to all placement settings where learners who require a practice assessment do not have direct access to a named Practice Supervisor.

These boxes should be used to identify specific actions taken / changes made to document and the date.

Name of reviewer
Introduction

There is a professional requirement that all Faculty of Health and Wellbeing pre-registration students, are supervised in accordance with relevant professional body regulatory requirements (NMC 2008; HCPC 2012) when undertaking practice placements. In addition, some Continuing Professional Development (CPD) and Foundation Degree (FD) modules require learners to be supervised and assessed in the practice setting.

To undertake supervision and assessment in practice requires practitioners to be suitably prepared for the role. As the Health Care Professions Council (HCPC) and the Nursing and Midwifery Council (NMC) apply different standards, the guidance is based on a principles approach. It is expected that practitioners will review the supervision requirements for their own profession and apply them in the context of the guidelines. The NMC and HCPC use different terminology to describe the role of the supervisor in the practice setting.

For the purpose of this document:

- Long Arm Practice Supervision refers to the process of supporting students in placements in line with professional body requirements
- Long Arm Practice Supervisor refers to the person undertaking the activity.
- Student refers to the person requiring supervision

Context

There are continuous and increasing demands for placements for students within the Faculty of Health and Wellbeing. This is exacerbated by increasing commissions and socio-economic and workforce developments that have resulted in students being required to access a wider range and variety of placements (Murray and Williamson 2009). In addition the existing pool of placements may no longer be suitable for or match the needs of students. Furthermore as professional practice evolves new placements are becoming available.

These placements provide valuable learning opportunities related to achieving NMC and HCPC competencies. However, some of these placements may

- not employ practitioners who have achieved HCPC or NMC requirements to supervise students
- not be staffed by Registered Practitioners or
- have a significantly high proportion of staff who are not Registered Practitioners.

This can result in the student being supported by a member of staff who is not a Registered Practitioner. Therefore challenges in ensuring that students receive appropriate supervision in relation to teaching and learning; and ensuring formative and summative assessment is conducted in accordance with the validated pathway documents and professional body requirements needs to be addressed.
Long Arm Practice Supervision (LAPS)

As a result of the contextual factors, LAPS may be required for some students undertaking placements within FD, pre-registration and CPD programmes. This is a positive response to workforce development initiatives and increasing placement capacity. The NMC (2011) and the DH (2012) support the principles of LAPS as a proactive response, and are confident that the process ensures that quality assurance and potential overloading of the Practice Supervisor are addressed.

Principles of Long Arm Practice Supervision

Definition of a Long Arm Practice Supervisor

For the purpose of this guidance, a Long Arm Practice Supervisor is defined as someone:

“who does not supervise the student on a day to day basis but provides support from a distance, meeting the learner at the start, the middle and the end of the placement so they have sufficient knowledge of the learners progress to make an informed judgement of achieving the module practice outcomes”

(Adapted from University of Southampton 2011)

The principles of LAPS will be utilised in placements in agreement with the relevant Pathway Director. This will be in accordance with NMC or HCPC guidelines and will clearly indicate whether LAPS is appropriate for formative and/or summative placements

Where LAPS is used, it is the responsibility of individual pathways to ensure that students are prepared for this. This will be undertaken by a designated senior lecturer from the relevant pathway. They will provide information related to LAPS and the responsibilities of the placement staff, the student and the Long Arm Practice Supervisor prior to commencing and during the placement.

Allocation to a Long Arm Practice Supervisor

The following will be agreed prior to commencing the placement:

- the student will be supervised on a day to day basis by a named member of staff within the placement
- the student will be allocated a named Long Arm Practice Supervisor

For students undertaking pre-registration education and students undertaking CPD modules, the Practice Supervisor will be allocated in accordance with HCPC or NMC guidance.
Meetings between the Long Arm Practice Supervisor and the student

During the placement the Long Arm Practice Supervisor must have a minimum of 3 face to face meetings with the student.

1. Within the first 3 days of the placement commencing to provide them with a detailed timetable that details exactly what they are doing and who they are working with throughout the placement and to set their learning contract. Dates for future meetings will also be agreed

2. Half way through the placement to discuss with the student their progress towards achieving the competencies required and to review the learning contract if necessary.

   If the placement is 2 weeks or under the midway review can be conducted via telephone, Skype or another suitable media that is agreed at the of the placement.

3. At the end of the placement to complete their formative or summative assessment.

At these scheduled meetings the Long Arm Practice Supervisor will spend a minimum of 1hr with the student undertaking a range of activities such as teaching, reflection, supervision and application of theory to practice that is relevant to the placement. This will enable the Long Arm Practice Supervisor the opportunity to assess the student’s competence for formative or summative assessment when combined with feedback from the placement. A record of these meetings will be made by the Long Arm Practice Supervisor in the students Practice Assessment Document.

In addition to the three face to face meetings the Long Arm Practice Supervisor must maintain regular contact throughout the placement with the student. This will be on a weekly basis and can be undertaken via a range of media such as email, telephone and Skype. The Long Arm Practice Supervisor will follow up all communication via email.

The Long Arm Practice Supervisor must use their professional judgement when selecting appropriate learning opportunities for the student. This should take into account the:

- intended learning outcomes of the placement experience.
- learning opportunities available.
- availability and level of competence of placement staff

It is the student’s responsibility whilst in the placement:

- to work within the level of knowledge and competence relevant to their stage of education
- not to undertake any aspect of clinical care if they have not been assessed as competent by Registered Practitioner
- contact the Long Arm Practice Supervisor or Professional Pathway Placement Lead if they have any concerns regarding their placement.
Meetings between the Long Arm Practice Supervisor and placement staff

During the placement the Long Arm Practice Supervisor must have a minimum of 3 face to face meetings with the named member of staff in the placement.

1. Within the first 3 days of the placement commencing to provide them with a detailed timetable that details exactly what the student will be focusing on. Dates for future meetings will also be agreed

2. Half way through the placement to discuss the students’ progress towards achieving the competencies required and to review the learning contract if necessary.

   If the placement is 2 weeks or under the midway review can be conducted via telephone, Skype or another suitable media that is agreed at the start of the placement

3. At the end of the placement prior to the formative or summative assessment.

Preparation of Placement Staff

Staff who support students who are not Registered Practitioners must be prepared for the role by attending a mandatory yearly update provided by each professional pathway. These staff will not undertake formative or summative practice assessments. They will however be able to document formative comments in the relevant section of the Practice Assessment Document.

Raising Concerns

If the student has concerns regarding the placement the first contact will be the Long Arm Practice Supervisor. If they are not available the placement staff are to contact the relevant Pathway Placement Lead. These details must be made available to the student prior to commencing the placement.

If there are concerns regarding a student’s performance the first contact will be the Long Arm Practice Supervisor. If they are not available the placement staff are to contact the relevant Pathway Placement Lead. These details must be available at all times to the placement staff.

Any concerns whether raised by the student, the Long Arm Practice Supervisor or the placement must be recorded on a PIR 1 form and investigated accordingly

The check list in appendix 1 must be completed by the Long Arm Practice Supervisor and student during their initial meeting in the first week of the placement

The check list in appendix 2 must be completed by the Long Arm Practice Supervisor and the placement manager during their initial meeting in the first week of the placement
References

Department of Health (2012) *Health Visitor Teaching in Practice: A Framework Intended for Use for Commissioning, Education and Clinical Practice of Practice Teachers (PTs)*

Health and Care Professions Council (2014) *Standards of Education and Training*


Nursing and Midwifery Council (2011) *Practice teachers supporting more than one student (health visitor) in practice* NMC Circular 08/2011

University of Southampton (2011) *Becoming a Sign Off Mentor: Ongoing Record of Achievement*
http://www.southampton.ac.uk/assets/imported/transforms/peripheral-block/UsefulDownloads_Download/64A8FEC5F3A3434D97DABD68AD2B8A95/Sign-off%20Mentor%20booklet.pdf (accessed 03/04/104)
Appendix 1 FPLC 7: Guidelines for Long Arm Practice Supervision

Checklist for Long Arm Practice Supervisor and student to complete at the start of the placement

<table>
<thead>
<tr>
<th></th>
<th>Date</th>
<th>Signature of Long Arm Practice Supervisor</th>
<th>Signature of Student</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student has in depth timetable detailing learning opportunities during the placement.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student states they know when they will meet with the Long Arm Practice Supervisor during their placement.</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Student has been allocated a to a member of staff in the placement</td>
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<tr>
<td>Student has written a learning contract which reflects the placement learning outcomes and is agreed with the Long Arm Practice Supervisor</td>
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<tr>
<td>Student states they know the limitations of their knowledge and skill</td>
<td></td>
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<tr>
<td>Student states they know practice staff will provide written feedback in the Assessment of Practice Document</td>
<td></td>
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<tr>
<td>Student states they know who to contact if they have concerns during their placement.</td>
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</tbody>
</table>

Student Name:
Student Signature:

Date:

Long Arm Practice Supervisor Name:
Long Arm Practice Supervisor Signature:

Date:
Appendix 2 FPLC 7: Guidelines for Long Arm Practice Supervision

Checklist for Long Arm Practice Supervisors and placement manager to complete at the start of the placement.

If this checklist is not required the Long Arm Practice Supervisor must document the reasons for this.

<table>
<thead>
<tr>
<th>Description</th>
<th>Date</th>
<th>Signature of Long Arm Practice Supervisor</th>
<th>Signature of Student</th>
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<tr>
<td>Placement manager has in depth timetable detailing learning opportunities during the placement.</td>
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<td>Placement manager states they know when the student will meet with the Long Arm Practice Supervisor during their placement.</td>
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<td></td>
</tr>
<tr>
<td>Placement manager states staff know the limitations of their knowledge and skill</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Placement manager states they know the limitations of the students’ knowledge and skill</td>
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<td></td>
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<tr>
<td>Placement manager knows staff can provide written feedback in the Assessment of Practice Document</td>
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<tr>
<td>Placement manager states staff know who to contact if they have concerns during their placement.</td>
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</tbody>
</table>

Placement Manager Name:  
Placement Manager Signature:

Date:

Long Arm Practice Supervisor Name:  
Long Arm Practice Supervisor Signature:

Date:
The Long Arm Practice Supervisor to complete if Appendix 2 is not required.

<table>
<thead>
<tr>
<th>Appendix 2 has not been completed due to the following reasons:</th>
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<tbody>
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</tbody>
</table>

Long Arm Practice Supervisor Name:
Long Arm Practice Supervisor Signature:

Date:
Faculty of Health and Wellbeing

FPLC 8: Guidance on identifying and acting on concerns raised within an academic context

<table>
<thead>
<tr>
<th>Version</th>
<th>Date prepared</th>
<th>Date reviewed</th>
<th>Reviewer name</th>
<th>Date for next review</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>1st August 2012</td>
<td></td>
<td>FPLC</td>
<td>April 2013</td>
</tr>
<tr>
<td>2</td>
<td>April 2013</td>
<td>April 2013</td>
<td>FJM, IPL, PMT, FMT</td>
<td>December 2014</td>
</tr>
<tr>
<td>3</td>
<td>12th December 2014</td>
<td></td>
<td>Faculty Practice Learning Committee</td>
<td>January 2016</td>
</tr>
</tbody>
</table>

**Specific notes for file**

This box should be used to identify specific actions taken / changes made to document and the date.

*These boxes should be used to identify specific actions taken / changes made to document and the date.*
Introduction

In accordance with the Code: Standards of Conduct, performance and ethics for nurses and midwives (NMC 2010) and the Standards of conduct, performance and ethics (HCPC 2012) and in order to protect and promote the health and well-being of the public; deviations from established health and social care practice, concerns and risks raised in the practice setting, academic assignments and reflective tutorials must be reported to those responsible for managing the potential risks.

Prior to commencing placement experiences, students should familiarise themselves with the Faculty of Health and Wellbeing ‘Raising and Escalating Concerns’ policy. This policy explains the roles and responsibilities of students and academic staff. It is available on Blackboard ‘Placements’ and it outlines the prime role of the Faculty as one of support for students with a genuine concern to help them raise these concerns, during the placement, following the service provider’s policies and procedures.

Establishing genuine concerns

To help students analyse the issue causing concern a template (Appendix 1) is attached. This template takes students through the reflective process discussed in the Raising and Escalating Concerns policy and will enable: students to clarify their thoughts before discussing their concerns in practice. It will also help members of the academic team to identify whether there is a genuine concern and also assess the severity of its nature.

In the practice setting

All Health and Social Care students have a duty of care to those they work with. Both the NMC and HCPC expect pre-qualifying students to inform their mentor/placement manager, practice educator or a member of academic staff immediately if they believe that they, a colleague or anyone else is putting someone at risk of harm. It is expected that students will seek help immediately from an appropriately qualified professional if someone, for whom they are providing care for, has suffered harm for any reason.

We appreciate that students may find it difficult to discuss their concerns during their placement. It is not appropriate to do nothing (NMC 2010), or delay action until they have returned to University, if they feel concerned that a patient/client may be at risk. It is also possible that students may not understand the full context surrounding their concerns. A discussion with a practitioner or member of the academic team may help to reduce their anxiety. The role of the academic link will be vital in supporting students through this process.

In the University

Should students raise any issues in the classroom, in tutorials or in their academic work that questions their own or others practice, academic staff as qualified professionals have a duty to report any concerns which put the safety of individuals or the public at risk.

1. Tutorial / classroom discussions

If any professional and or/ethical issues are raised as part of tutorial discussion, these must be discussed further with students on a one to one basis. If there is deemed to be a
genuine concern that has not been risk managed, an accurate account of the issues raised should be completed electronically on a Practice Issues Reporting (PIR1) form (Appendix 2) and forwarded to the Faculty Director of Practice Learning.

2. **Written work**

Written work submitted which appears to identify risks to patient/client safety without identifying how the risks were managed/reported at the time will be identified by the marker.

The marker will arrange a discussion with the student to verify accuracy of the situation and clarify whether or not the situation was managed appropriately in the workplace.

In the case of a genuine concern that has not been appropriately managed, an account of the issues raised will be documented on a PIR1 form and forwarded to the Faculty Director of Practice Learning.

3. **When immediate risks to patients/clients are identified**

Students should be aware that if the concern identified is considered to have an immediate risk to patients/clients, in the professional judgement of the involved member of academic staff, that they will be expected to follow the relevant placement providers process for ‘Raising and escalating concerns’. A member of academic staff will support them to do this.

In addition the completed PIR 1 form will be kept on file and used to inform our overall quality monitoring process of the learning environment.

4. **In all other cases**

A PIR 1 form (Appendix 2) will be completed and kept on file. The themes and trends that emerge from these forms will be collated and reported to relevant service/placement providers on a quarterly basis for further action as appropriate.

These guidelines should be used in conjunction with the following documents:

- Faculty of Health and Wellbeing (2014) Raising and escalating concerns policy
- Faculty of Health and Wellbeing (2012) Student Fitness to Practise policy
- HCPC (2012) Standards of conduct, performance and ethics
### Reflective analysis of issue of concern

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>What happened to trigger your concerns (what did you see? what was said, what did you do?)</td>
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<tr>
<td>Who was involved?</td>
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</tr>
<tr>
<td>Who was involved?</td>
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<tr>
<td>Did you ask their perspective and if so, what was it?</td>
<td></td>
</tr>
<tr>
<td>Were there any additional influences that are relevant (emergency situations, previous issues, context or environmental factors)</td>
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</tr>
<tr>
<td>What is your interpretation of what happened?</td>
<td></td>
</tr>
<tr>
<td>How confident are you of your interpretation?</td>
<td></td>
</tr>
<tr>
<td>Do you think your perspective is complete or could there be some information missing? If so, what might that be?</td>
<td></td>
</tr>
<tr>
<td>Can you think of any alternative explanation?</td>
<td></td>
</tr>
<tr>
<td>Was there anything else you could have done / said at the time?</td>
<td></td>
</tr>
<tr>
<td>What action was taken or proposed during the placement (incident reporting etc.)</td>
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</tbody>
</table>
Appendix 2

**PIR1 – Report for issues in practice**
This form should be completed by placement staff such as a Practice Placement Facilitator (or equivalent) or a member of University Academic staff. Once fully completed it should be forwarded electronically to placementsquality@canterbury.ac.uk.

A copy of the completed form will be kept in a secure placements file. No personal details of service users / placement provider staff should be included in this report.

**PART 1: Contact details**

<table>
<thead>
<tr>
<th>Name of who is completing this form</th>
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</thead>
<tbody>
<tr>
<td>Email address</td>
<td></td>
</tr>
<tr>
<td>Date</td>
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</table>

<table>
<thead>
<tr>
<th>Student Name</th>
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<tbody>
<tr>
<td>Cohort</td>
<td></td>
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<tr>
<td>Pathway</td>
<td></td>
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<tr>
<td>Placement Name</td>
<td></td>
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<tr>
<td>Organisation</td>
<td></td>
</tr>
<tr>
<td>Practice Placement Facilitator or equivalent</td>
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<tr>
<td>Placement Lead/Senior Lecturer in Practice Learning</td>
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</tbody>
</table>

**PART 2: Incident details**

<table>
<thead>
<tr>
<th>Date and time of incident(s)</th>
<th></th>
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</table>

**Issue / Incident detail**: NB: Please do not include personal details of placement staff / service users on this form
PART 3: University action taken

Please provide details of action taken by Canterbury Christ Church University

<table>
<thead>
<tr>
<th>Reported to placement provider (please delete one as appropriate)</th>
<th>Yes / No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If Yes please provide name and email address</td>
<td></td>
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<tr>
<td>If No please indicate why</td>
<td></td>
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</tbody>
</table>

PART 4: Placement provider action taken

Please provide details of action agreed by the placement provider

<table>
<thead>
<tr>
<th>Name</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Designation</td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td></td>
</tr>
</tbody>
</table>
Flow chart for identifying concerns and ‘Sharing themes and Trends’

Actual / potential risks to patients / clients identified.

- In placement
  - Discuss with student. No further action required.
- During tutorials
  - Discuss with student. No further action required.
- In academic work
  - Marker arrange discussion with student.

Follow guidelines in Faculty ‘Raising & Escalating Concerns Policy’ for verifying issues and supporting students to follow provider policies.

Analyse issue with student using Appendix 1 and verify accuracy of concern.

Concern verified?
- YES
- No

Were concerns risk assessed / managed in the workplace?

- YES
  - Discuss with student. No further action required.
- NO
  - In professional judgement issue requires immediate action
    - YES
      - Complete PIR1 form and return to FDPL
    - NO
      - Complete PIR1 form and return to FDPL

In line with Faculty ‘Raising and Escalating Concerns Policy’ and support student to follow providers RAEC policy.

FDPL collate data and report to organisation.