



## Faculty of Health and Wellbeing

### FPLC 7: Guidelines for Long Arm Practice Supervision

Version	Date prepared	Date reviewed	Reviewer name	Date for next review
1	March 2015 by Gayle Le Moine and Andrew Southgate	17 <sup>th</sup> April 2015	FPLC	January 2016
2	Alex Levine	23 <sup>rd</sup> August 2016	FDPL	January 2018
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Specific notes for file	Name of reviewer
<i>These boxes should be used to identify specific actions taken / changes made to document and the date.</i>	

## 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 as outlined in Standards to support learning and assessment in practice (Slaip): Standards for Mentors, Practice Teachers" (2008) Nursing and Midwifery Council (NMC) and Health and Care Professions Council (HCPC) (2014) 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 and 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 practice 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 practice areas. In addition, the existing pool of areas may no longer be suitable for, or match the needs of students. Furthermore, as professional practice evolves new areas are becoming available (Betony 2012).

These practice learning areas provide valuable learning opportunities related to achieving NMC and HCPC competencies. However, some of these areas 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 documents and professional statutory 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:

“Long arm supervising refers to the process whereby a supervisor, who is located at a distance to the practice learning area, takes responsibility for supervising and supporting the student. They also confirm/verify achievement of outcomes.”

(Adapted from NHS Education for Scotland 2013)

The principles of LAPS will be utilised in practice in agreement with the relevant Programme/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 practice assessment.

Where LAPS is used, it is the responsibility of individual pathways/programmes to ensure that students are suitably prepared. This will be undertaken by an appropriate member of academic or practice staff.

#### **Allocation to a Long Arm Practice Supervisor**

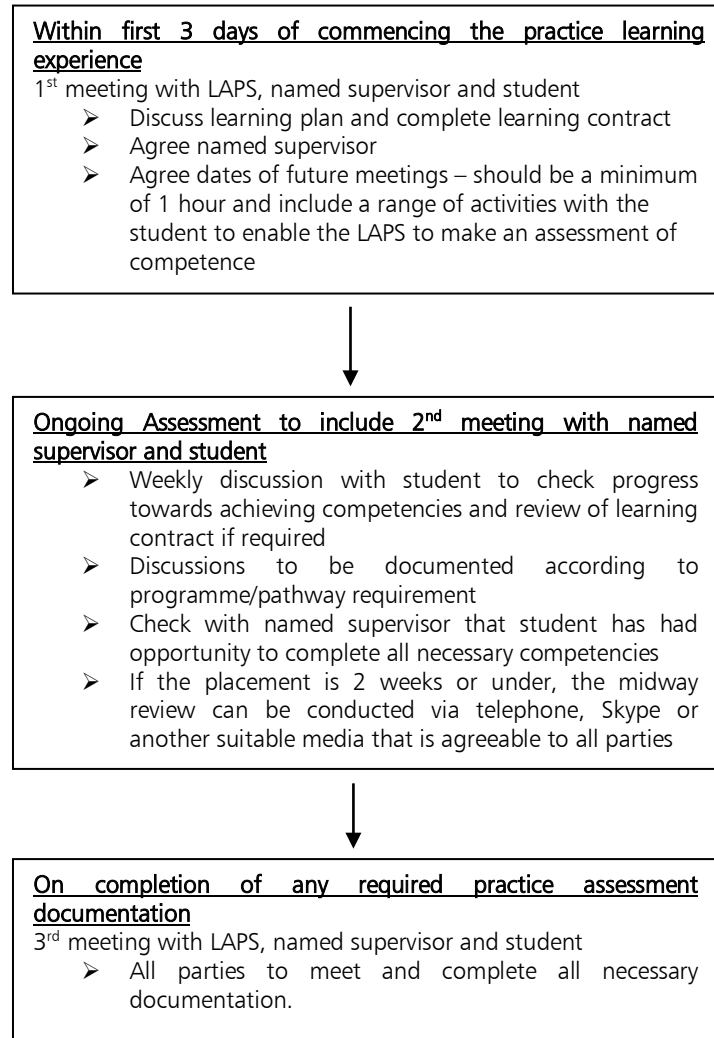
The following will be agreed prior to commencing the practice learning experience:

- the student will be supervised on a day to day basis by a named member of staff within the practice area
- the student will also 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.

## Process for Long Arm Practice Supervision

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



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 practice experience.
- learning opportunities available.
- availability and level of competence of practice staff

It is the student's responsibility whilst in the practice area:

- to work within the level of knowledge and competence relevant to their stage of education

- to contact the Long Arm Practice Supervisor or Professional Pathway Practice Lead if they have any concerns regarding their practice experience.

### **Preparation of Practice Staff**

It is strongly advised that staff must be prepared for the role in supporting student by accessing resources available. This will depend on whether staff are registrants and therefore require a mandatory yearly update provided by each professional pathway or alternative means for non-registrants. Such 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.

## References

Betony, K, (2012) Clinical Practice Placements in the community: A Survey to determine if they reflect the shift in healthcare delivery from secondary to primary care settings *Nurse Education Today*, 32, 21-26

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

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/212821/HV-Framework.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/212821/HV-Framework.pdf)

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

<http://www.hcpc-uk.org/assets/documents/1000295EStandardseducationandtraining-fromSeptember2009.pdf>

Nursing and Midwifery Council (2008) Standards to Support Learning and Assessment in Practice <http://www.nmc-uk.org/Documents/NMC-Publications/NMC-Standards-to-support-learning-assessment.pdf>

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

NHS Education for Scotland (2013) National Approach to Mentor Preparation -2nd Edition <http://www.nes.scot.nhs.uk/media/2066328/national-approach-to-mentor-preparation-2nd-edition.pdf>