

Wessex Community Education Provider Networks

Health Education England's (HEE) Training Hub in Wessex





Resource for Developing Student Nurse Placements in Primary Care

Developing people for health and healthcare

www.hee.nhs.uk

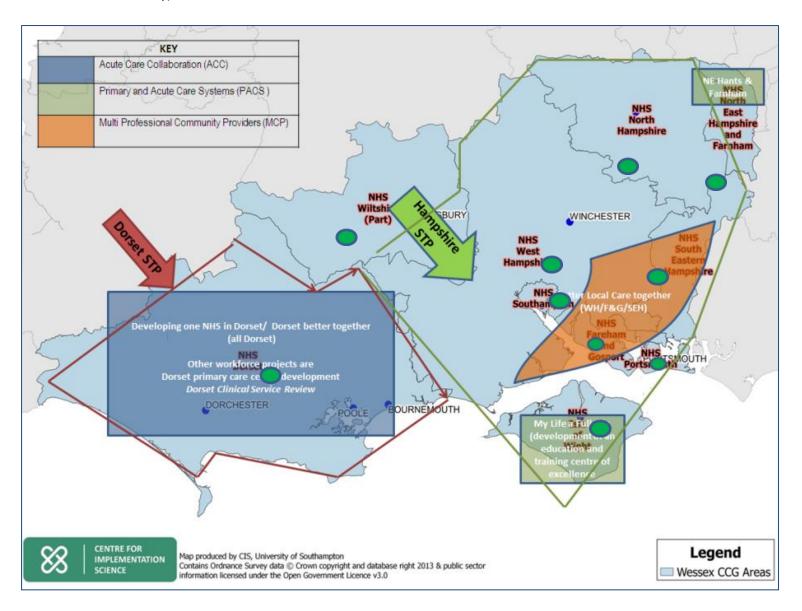




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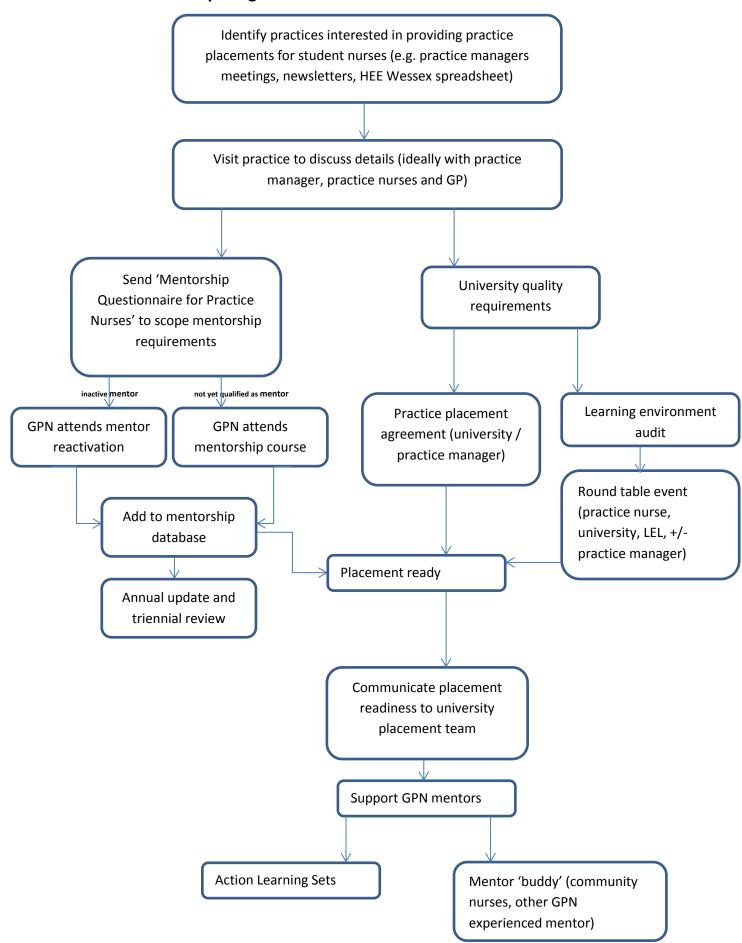


Wessex Health Economy - Vanguards, Clinical Commissioning Groups (CCG) footprints and Sustainability & Transformation Plans (STP) (vanguard footprints and STP areas are indicative only)





Flow Chart for Preparing General Practice Placements





Mentorship Questionnaire for Practice Nurses

| 1. What is | your name? | | |
|------------|----------------------------|----------|------------------------------|
| | | | |
| 2. What Pi | ractice do you work at? | | |
| | | | |
| - | ur practice currently prov | <u> </u> | cements for pre-registration |
| | ves | No | |

4. Do you have any of the following mentor / teaching qualifications?

| | Yes/No |
|---|--------|
| ENB 997 or 998 (Teaching & Assessing in Clinical Practice) | |
| City and Guilds 7307 or equivalent | |
| Community Practice Teachers course or equivalent | |
| Registered Clinical Nurse Teachers Course | |
| Certificate in Education, | |
| Postgraduate Certificate in Education | |
| Diploma in Education, | |
| Postgraduate Diploma in Education | |
| Bachelor of Education | |
| Masters in Education | |
| Practice Educator Programme | |
| Stand-alone mentorship or teaching and assessing unit/module from any UK | |
| university at diploma or degree level | |
| District Nursing Course where a teaching and learning / mentorship module was | |
| incorporated into the programme | |
| Health Visitor Course where a teaching and learning / mentorship module was | |
| incorporated into the programme | |
| Occupational Health Nursing Course where a teaching and learning / mentorship | |
| module was incorporated into the programme | |
| Public Health degree where a teaching and learning / mentorship module was | |
| incorporated into the programme | |
| Certificate in Teaching Clinical Nursing | |
| Community and Practice Teacher Qualification (SOM level) | |
| Other – please state | |
| | |
| | |

If no to Q4 please finish here and contact your Learning Environment Lead re: mentorship courses. If yes to Q4 please continue over page



5. With regard to your mentorship experience:

| | Yes | No |
|--|-----|----|
| Have you participated in annual mentor updates? | | |
| Have you mentored a minimum of 2 students in the past 3 years? | | |
| Have you had a Triennial Review of your mentorship CPD (NMC 2008)? | | |
| Do you have an understanding of the requirements of the pre-registration | | |
| programme (or post registration courses) for students who are allocated to | | |
| your practice? | | |
| Have you maintained a record of your mentoring of students? | | |
| Are you aware of the support that is available for Mentors? E.g. University Link | | |
| Tutors | | |

If yes to all of part 5 – you are ready to mentor student nurses; if no you need to do a mentor reactivation workshop – please contact;

- Portsmouth and Isle of Wight Helen Baker h.baker@nhs.net
- Mid Wessex lan Winkworth ian.winkworth@nhs.net
- Southampton and New Forest Amanda Pike Amanda.pike@nhs.net
- Dorset Annette Farrell <u>annette.farrell1@nhs.net</u>

References

NMC (2008). Standards to Support Learning and Assessment in Practice. London. NMC.



Mentor Reactivation Workshop

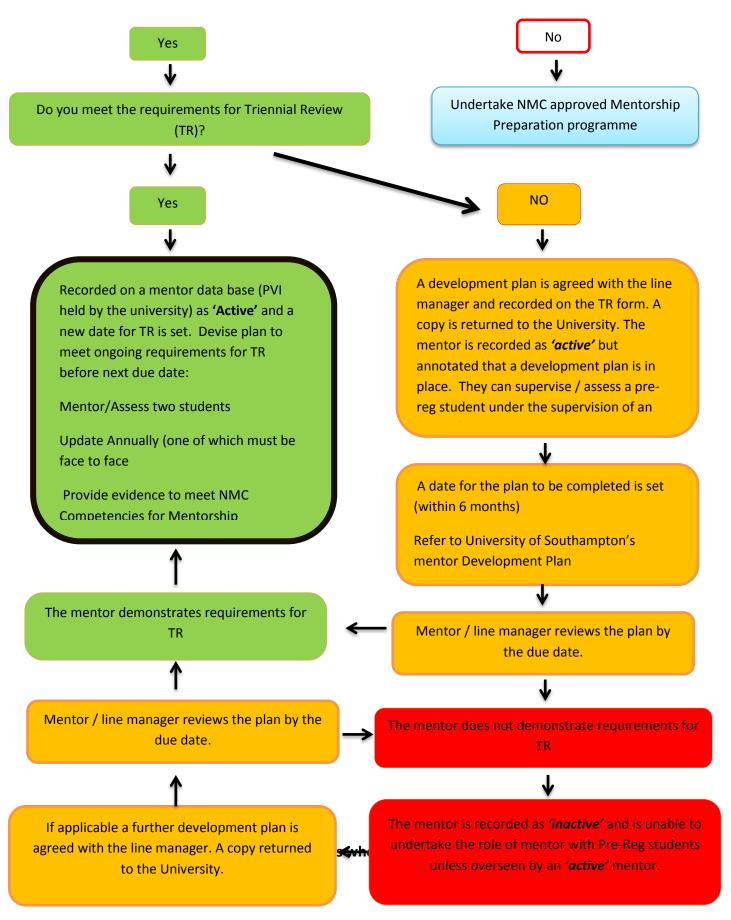
A typical mentorship reactivation workshop will take about 3 hours and will follow a format similar to below. However content is always subject to change.

| 1. | Overview of CEPNs (20 mins) |
|----|--|
| 2. | Introduction to pre-registration nursing programme (PG Dip / BN) (30 mins) Programme Plan The Students Placement Plan Action Learning Groups Assignment due while on placement |
| 3. | Mentor Update (60 mins + Break) NMC Requirements (40% with a mentor, off duty) AoP for P2 (competencies/ESC/grading) Challenging Students – scenarios |
| 4. | Navigating the eAoPP / assessment of practice documents (45 mins) |
| 5. | Action Learning Sets |
| 6. | Close |



Flowchart - Becoming an Active Mentor in General Practice

Have you a recognised Mentor Qualification?





Collecting Evidence

The following will enable you to collect evidence to meet the NMC Competencies for Mentorship and Triennial Review. Please remember that this evidence will also be able to be used to support revalidation.

Prior to student commencing placement

- Undertake Self Assessment against NMC Competencies for Mentorship
- Devise a CPD plan to address any areas for development
- Attend face to face mentor update
- Undertake e-AOPP training
- Curriculum update
- Organise a Practice Based Supervisor (PBS) (NMC qualified Active Mentor who meets TR requirements)
- Meet with PBS to prepare for students placement

During the students placement

• Under the supervision of the PBS undertake initial, interim and final interviews with the student and facilitate the students learning plan as required.

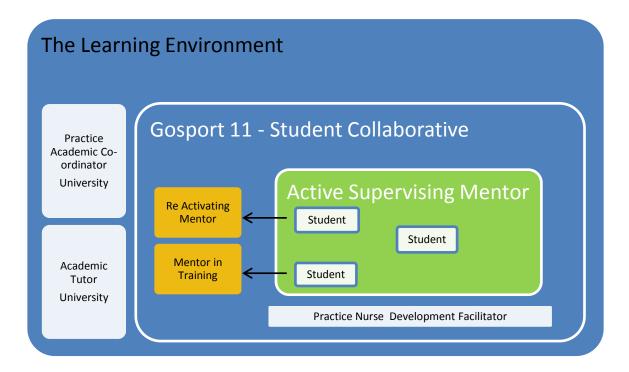
Following the students placement

- Keep a record of type of student, duration of placement and nature of any assessments undertaken.
- Keep a record of any additional activity you have participated in to support learning in practice.

Developed in association with D Baker IOW NHS Trust 2015



UoS Proposed Placement Support Model – General Practice



The Role of the Supervising Mentor Facilitator

- a) Overall responsibility for the students
- b) To assist the other mentors to undertake their role
- c) In collaboration with the other mentors undertake
 - a. The Initial interview and review the learning plan
 - b. Support the student and mentor to undertake Interim assessments
 - c. Jointly agree and counter sign the final assessment of practice

The Practice Academic Co-ordinator (PAC) University based

In addition to established role the PAC will support and guide the supervising mentor and mentors to meet the requirements of the Triennial Review (NMC) requirements

Academic Tutor

Each student has a designated tutor; they are the first port of call for support with student issues

Practice Nurse Development Facilitator

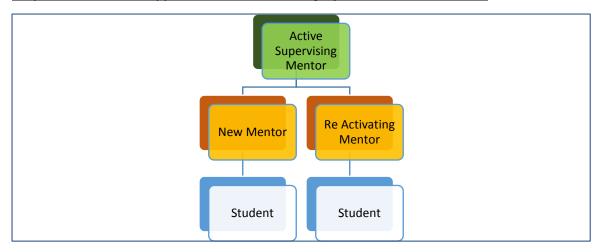
To support the development of the mentors in training and the supervising mentors

M. Rawlinson ©University of Southampton 2015

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<u>Proposed Placement Support Structure at the Surgery Level – General Practice</u>



Supervising mentor to assist other mentors to-

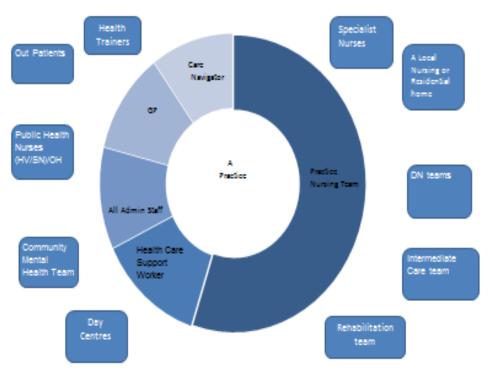
- a) set up a learning contract and Initial interview with the student
- b) Interim student review
- c) Final review

An Example of a PHC HUB with Spokes

Year 1 Placement 1

Level 1 - Participate and Initiate

Domains - Professional Values/Communication and Interpersonal Skills



M Rawlinson D Baker University of Southampton/NHSIOW 2011/15

Developed in association with D Baker IOW NHS Trust 2015



Application Form for Entry to the Register for Mentors

EXISTING MENTORS

| Surname: | Forename(s): | | | |
|--|---|-------------------|--|--|
| Work Base: : | Line Manager: | | | |
| Professional Qualification / s: | Part of NMC Register: Nurse / Midwife / SCPHN | | | |
| | Field of Practice: Adult, Children, MH, LD, Midw | vifery, HV, SN,OH | | |
| Title of Mentor Qualification: | Date of Mentor qualification: | | | |
| Evidence of Qualification must be able to be | supplied if requested to do so by the NN | 1C. | | |
| Ask yourself the following questions | | | | |
| 1 I have completed all elements of an accredited co | ourse to become a mentor? | Yes / No | | |
| 2. I can provide evidence that I have mentored and three years? | assessed at least two students in the last | Yes / No | | |
| 3. I can provide evidence that I have updated annual attendance at a face-to-face mentor update session | | Yes / No | | |
| 4. I can demonstrate that I meet the NMC Competencies and Outcomes for a mentor/sign off mentor Yes / No | | | | |
| 5. I understand my accountability and responsibility as a mentor/sign off mentor? Yes / No | | | | |
| Date of last face to face update: Date of last triennial review: | | | | |
| | | | | |
| PART 1 | | | | |
| If you answered yes to all questions please complete | | | | |
| I am competent to | perform the role of mentor | | | |
| Signature: | | | | |
| Date: | | | | |
| PART 2 If you answered no to any questions please sign the manager agree a learning plan. A copy of this learn mentor register. | | | | |
| | fore I can perform this role in a competent m ase complete | anner. | | |
| Signature: | Date: | | | |

^{*}Please return completed form to your LEL (See Page) so that your details can be added to the mentorship database

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MENTORSHIP DEVELOPMENT PLAN (if required)

| Mentor name | Work Base | |
|---|-------------------|------|
| | | |
| My Learning Needs are: | | Date |
| | | |
| | | |
| Indicate how you plan to meet your learning n | eeds and by when: | Date |
| | | |
| | | |
| Progress Report: | | Date |
| | | |
| | | |
| | | |



UoS Self-Assessment against NMC Competencies for Mentorship (Mentor Stage 2)

| Domains and Outcomes for Mentors | | GC | NFD |
|--|------------------------|----------------|----------------|
| | Examples of Evidence | (Good level of | (Needs Further |
| | | Competence) | Development) |
| 1 – Establish effective working relationships | | | |
| Demonstrate an understanding of the factors | Attendance at Face to | | |
| that influence how students integrate into | Face update. | | |
| practice | Mentor hand over's | | |
| Provide ongoing support to facilitate transition | Entries in Assessment | | |
| from one learning environment to another | of Practice Document | | |
| Have effective professional and | (eAoPP) | | |
| interprofessional working relationships to | | | |
| support learning for entry to the register | | | |
| 2 - Facilitation of Learning | | | |
| Use knowledge of the student's stage of | eAoPP documentation | | |
| learning to select appropriate learning | Student Evaluations | | |
| opportunities to meet their individual needs | Mentor Testimony of | | |
| Facilitate selection of appropriate learning | facilitating learning | | |
| strategies to integrate learning from practice | experiences | | |
| and academic experiences | Record of assessing | | |
| Support students in critically reflecting upon | students | | |
| their learning experiences in order to enhance | | | |
| future learning | | | |
| 3 - Assessment and accountability | | | |
| Foster professional growth, personal | Planning learning | | |
| development and accountability through | opportunities | | |
| support of students in practice | Completing learning | | |
| Demonstrate a breadth of understanding of | plans within eAoPP | | |
| assessment strategies and the ability to | document | | |
| contribute to the total assessment process as | Completing formative/ | | |
| part of the teaching team | summative | | |
| Provide constructive feedback to students and | assessments within the | | |
| assist them in identifying future learning needs | eAoPP document | | |
| and actions. Manage failing students so that | Record of assessing | | |
| they may either enhance their performance | students | | |
| and capabilities for safe and effective practice | | | |
| or be able to understand their failure and | | | |
| implications of this for the future | | | |
| Be accountable for confirming that students | | | |
| have met, or not met, the NMC competencies | | | |
| in practice. Confirm that students have met, or | | | |
| not met the NMC standards of proficiency in | | | |
| practice and are capable of safe and effective | | | |
| practice | | | |



| | | GC | NFD |
|---|-----------------------|-------------------------------|-----------------------------|
| Domains and Outcomes for Mentors | Examples of Evidence | (Good level of Competence) | (Needs Further Development) |
| 4 - Evaluation of learning | | | |
| Contribute to the evaluation of student | Completing the eAoPP | | |
| learning and assessment experiences – | documentation | | |
| proposing aspects for change resulting in such | Mentor testimonies | | |
| evaluation. | Student evaluations | | |
| Participate in self and peer evaluation to | | | |
| facilitate personal development, and | | | |
| contribute to the development of others | | | |
| 5 - Creating an environment for learning | | | |
| Enable students to identify learning needs and | Taking part in the | | |
| experiences appropriate to their level of | learning environment | | |
| learning | Audits | | |
| Use a range of learning experiences, involving | Appraisal | | |
| service users, carers and the professional | CPD portfolio | | |
| team, to meet defined learning needs | | | |
| Identify aspects of the learning environment, | | | |
| which could be enhanced – negotiating with | | | |
| others to make appropriate changes | | | |
| Facilitate personal and professional | | | |
| development of others | | | |
| 6 - Context of practice | | | |
| Contribute to the development of an | Taking part in the | | |
| environment in which effective practice is | learning environment | | |
| fostered, implemented, evaluated and | Audit | | |
| disseminated | Active in clinical | | |
| Set and maintain professional boundaries that | audits/development of | | |
| are sufficiently flexible for providing | standards /guidelines | | |
| interprofessional care | /protocols | | |
| Initiate and respond to practice developments | | | |
| to ensure safe and effective care is achieved | | | |
| and an effective learning environment is | | | |
| maintained | | | |
| 7 - Evidence based practice | | | |
| Identify and apply research and evidence | Taking part in the | | |
| based practice to area of practice | learning environment | | |
| Contribute to strategies to increase the | Audit | | |
| evidence base to support practice | Active in clinical | | |
| Support students in applying an evidence base | audits/development of | | |
| to their practice area | standards /guidelines | | |
| | /protocols | | |
| 8 – Leadership | | | |
| Plan a series of learning experiences that will | Record of mentoring | | |
| meet students defined learning needs | students | | |
| Be an advocate for students to support them in | Completing the eAoPP | | |
| accessing learning opportunities and meet | document | | |
| their individual needs – involving a range of | Completed learning | | |
| other professionals, service users and carers | plans | | |
| Prioritise work to accommodate support of | | | |
| students within their practice roles | | | |
| Provide feedback about the effectiveness of | | | |
| learning and assessment in practice | | | |



Triennial Review Assessment Form

| Surname: | Forename(s): |
|---------------------------|------------------------------|
| | |
| | |
| Dept/Ward/Unit/Team: | Job Title/Designation: |
| | |
| | |
| Mentorship Qualification: | Date Qualification Obtained: |
| | |
| | |

In accordance with the Nursing and Midwifery Council's (NMC) Standards to Support Learning and Assessment in Practice (2008) all mentors/practice teachers need to be reviewed every 3 years to ensure that they continue to meet the mentor/practice teacher requirements to remain on the local mentor register/database.

As part of your review, you are required to complete this form which will provide evidence of continued compliance with the NMC Standards and will enable you to remain on the Community Provider Education Network's mentor register/database.

This form should be discussed, updated and signed at appraisal between the mentor and their manager/appraiser.

Standards to Support Learning and Assessment in Practice. NMC. 2008

| Statement | | Development Plan Required? * | Review Date (if development Plan implemented) | For use Post Development Plan if Applicable |
|--|--------|------------------------------|---|---|
| I verify that I have been involved with mentoring at least 2 students in the last 3 years | Yes/No | Yes/No | | Yes/No |
| I verify that I have participated in annual updating in the last 3 years, including attendance at face to face mentors update sessions | Yes/No | Yes/ No | | Yes/No |



| I verify that I have mapped my ongoing development in my role as mentor against the current NMC mentor/practice teacher standards | Yes/No | Yes/No | | Yes/No | |
|---|----------------|------------------------|--------------------------------|---------------------|--|
| I verify that I am able to provide eviden | ce of the abov | ve for NMC quality ass | urance purposes. | | |
| , | | ,, , | | | |
| Mentor Signature | | Date | | | |
| | | | | | |
| * In the event that the Appraiser is not satisf instigated between the mentor and their ap | | _ | ve been met then a developm | nent plan should be | |
| | | - (| | | |
| I am satisfied that | | has met | all of the criteria for trienr | nial review and is | |
| eligible to remain on the CPEN mentor d | atabase. | | | | |
| Appraiser's signature Print Name | | | | | |
| Designation Date | | | | | |
| | | | | | |
| To be signed triennially. Please retain copies of this form for your manager and personal portfolio and return a copy to your Learning Environment Lead as below; | | | | | |
| Portsmouth and Isle of Wight Helen Baker <u>h.baker@nhs.net</u> | | | | | |
| Mid Wessex Ian Winkworth ian.winkworth@nhs.net | | | | | |
| Southampton and New Forest Amanda Pike Amanda.pike@nhs.net | | | | | |
| Dorset Annette Farrell annette.farrell1@nhs.net | | | | | |



Triennial Review Development Plan (if required)

Mentor Name

| Learning needs: | Date |
|---------------------------------------|------|
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| How I plan to meet my learning needs: | Date |
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| Progress report: | Date |
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Confirmation of Achievement of Sign Off Mentor Status

| Surname: | Forename(s): | | | |
|--|--------------------------|-----------------------------|----------|--|
| Practice Area: | Job title / designation: | | | |
| Mentorship qualification: | Date mento | orship qualification attain | ned: | |
| Self-verification of competence is undertaken by assessment against the statements below. These statements are designed to indicate competence to perform this role. Responsibility for use remains with the user. If you are in any doubt regarding your competence to perform this role, you should seek advice from your Learning Environment Lead or the university; or explore further education (consider self-directed learning, coaching and formal training) to bring about development. | | | | |
| Ask yourself the following questions. | | Assessment date: | | |
| 1. I have successfully completed all elements of an NMC approved | d mentorship | preparation course | YES / NO | |
| 2. I have read and understood the NMC standards to support learning and assessment in practice | | YES / NO | | |
| 3. I have a working knowledge of current programme requirements, practice assessment strategies and relevant changes in education and practice | | YES / NO | | |
| 4. I have an understanding of the NMC registration requirements and responsibility as a mentor in endorsing a student as fit for proNMC | | | YES / NO | |
| 5. I have an in-depth knowledge of my accountability to the NMC for the decisions I make to pass or | | YES / NO | | |

| Tall a student when assessing proficiency requirements at the end of a programme | |
|---|----------|
| 6. I have been involved in mentoring students on the same part of the NMC register and in tht the | YES / NO |
| ne field of practice as the students and have been supervised on at least three oc | |
| asions signing off student proficiency by an existing sign off mentor / practice teacher | |

| assessment and supervision issues with other mentors and I have evidence of updating on the CPEN |
|---|
| mentor database*. (* Date of last update) = |
| 8. I have mapped my ongoing development in my role as mentor against the current NMC mentor / |
| practice teacher standards and I have identified and documented objectives as part of my appraisal. I |
| am aware of the requirement to undertake a triennial review every 3 years as part of PDR / appraisal |

7. I have participated in face to face annual updating which has included an opportunity to explore

| YES / NO | |
|----------|--|
| | |
| | |

YES / NO

STATEMENT OF PROFICIENCY

to maintain my mentorship status

I certify that I am aware of my professional accountability for continuing professional development and that I am accountable for my actions. With this in mind I make the following statement;

I am competent to perform this role

Signature: Date:

Print name in full as it appears on NMC Professional Register:

Please return the completed form to your Learning Environment Lead as follows;

- Portsmouth and Isle of Wight Helen Baker <u>h.baker@nhs.net</u>
- Mid Wessex Ian Winkworth <u>ian.winkworth@nhs.net</u>
- Southampton and New Forest Amanda Pike Amanda.pike@nhs.net
- Dorset Annette Farrell <u>annette.farrell1@nhs.net</u>

Keep a copy of this form in your personal portfolio. Ensure you have discussed this with your manager and provided them with a copy.



Promoting high quality patient care and learning environments

A values based toolkit to select mentors

We all have a role model, someone we aspire to be like

Can you think of someone who has inspired your learning?

Are you ready to be someone's inspiration?

www.valuesbasedmentorship.co.uk

A web based toolkit of six fundamental values, used to establish whether prospective mentors have the right values, skills and behaviours to undertake the mentor role.





Process for Receiving Tarriff Placements for Supporting Non-Medical Students

Payment for placements in non-NHS organisations / PVI sector is made by Health Education England Wessex, not the University. HEE Wessex currently pays placement providers £86/week/student and payments are made once a year toward the end of the NHS Finance Year.

The process is:

- 1. The University keeps a record of where students are placed.
- When the placement is over, the placement provider will confirm the number of weeks the student spent in placement (please note - you are the placement provider) - please contact university allocations team at the end of the students placement to make this confirmation.
- 3. In February / March each year, HEW will ask the University to send in a list of all non-NHS providers which includes GP Practices and PVI sector organisations, and the number of placement weeks that students spent with each provider.
- 4. The university informs the placement provider to submit an invoice to HEE Wessex for payment via NHS Shared Services
- 5. On receipt of the invoice, HEE Wessex will check the invoice claim for payment against the University spreadsheet.
- 6. HEE Wessex make a payment to the placement provider organisation.



Our Ref: LBP/SG/LH/cr/13072016

Department of Education and Quality
St Chads Court
213 Hagley Road
Edgbaston
Birmingham
B16 9RG

To: GP Practices, CCGs, Responsible Officers, HEIs, LMCs

Dear Colleagues,

Student nurses indemnity on placement in GP practices.

This letter sets out our current understanding of indemnity cover arrangements for student nurses on placement in a GP practice. It is unlikely that a clinical negligence claim would be bought against a student as in most cases they would be present as an observer or in a directly- supervised role with the supervising doctor or nurse retaining responsibility for any patient contact. We believe student nurse placements in general practice carries a very low risk if general practice professionals take the following steps:

- 1. Practice nurses acting as nurse mentors hold a mentorship qualification that meets the NMC guidelines.
- 2. The practice ensures all clinical members of GP practice have medical indemnity cover.
- 3. GP practices should sign a Learning Development Agreement with relevant university to clarify what student nurses are able to carry out and at what stage of their study.
- 4. Ideally an honorary educational contract is signed between the student nurse and GP Practice/Nurse Mentors to clarify role and responsibilities for all parties.

Training and supervision is the responsibility of the primary care provider (e.g. practice partners) who retains responsibility for clinical consultations, decisions and treatment, irrespective of the involvement of students, and they should ensure that students are appropriately supervised at all times. It is expected that the level of supervision is based on an appropriate assessment of the competence of the student, and that duties delegated are in accordance with GMC guidelines.

In the unlikely event that a student nurse commits clinical negligence while working at a GP practice, the practice could be the focus of any such litigation. Therefore, GP practices should ensure that their indemnity cover extends to the actions of student nurses working on their premises and under their supervision. The three largest medical indemnity organisations have advised HEE that they do not need to be notified individually if practices have medical or nursing students on placement or otherwise involved in their education.

Yours sincerely,

Professor Lisa Bayliss-Pratt
Director of Nursing and
Deputy Director of Education & Quality
Health Education England

Professor Simon Gregory
Regional Director and Dean of Education
and Quality, Midlands and East
Health Education England

Developing people for health and healthcare

