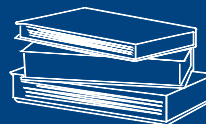


A NATIONAL FRAMEWORK FOR PRACTICE SUPERVISORS, PRACTICE ASSESSORS AND ACADEMIC ASSESSORS IN SCOTLAND

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(August 2019)

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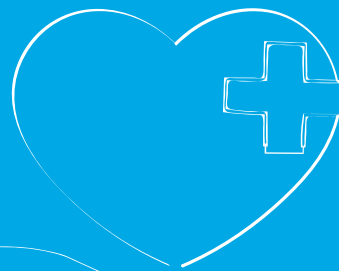
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FOREWORD



Foreword



Professor Fiona McQueen
Chief Nursing Officer, Scottish Government

This is an exciting time for the development of nursing and midwifery in Scotland. The new NMC standards for education, combined with the Nursing 2030 Vision for Scotland, The Best Start, and our Once for Scotland approach, have come together to create a framework within which our Health and Social Care system will meet the needs of Scotland through to the middle of the twenty-first century.

Health care is being delivered in a range of settings, and all new practitioners need to be equipped to work wherever that is – in the community, in hospitals, and in people’s homes. This framework provides the opportunity for our future health care professionals to be supported to provide high quality physical and mental health care, no matter their area of specialisation, and for all members of the health and social care team to work together in partnership in growing our future workforce. This is a collaboration between practitioners, educators and students – each equally important in ensuring that people’s needs are met.

I welcome this framework and look forward to working with staff and students across Scotland to implement these new ways of working.

Foreword



Karen Wilson

Director of Nursing, Midwifery & Allied Health Professions, NHS Education for Scotland

The development and launch of this framework provide the opportunity to reinforce the critical role registered staff such as nurses and midwives, both in practice and higher education settings, play in educating, supporting, supervising and assessing pre and post-registration student nurses and midwives. The role, which now includes other registered health and social care colleagues, in preparing our future nurses, midwives and specialist community public health nurses will ensure that safe, effective and person-centred care is the central priority and at the heart of everything we do.

Supervision and educational support for nursing and midwifery students will be a key component to achieving Scotland's 2020 workforce and Nursing 2030 visions, where individuals and teams are empowered to perform to the best of their abilities, and where values based, compassionate care informs all we do. The new tripartite system of practice supervisors, practice assessors and academic assessors will provide opportunities for education and practice to improve and widen students' practice learning experiences, distinguish learning support from formal assessment and add to the objectivity of this process. Partnership working is at the heart of the Standards for student supervision and assessment and our already strong foundation of collaborative working, between practice learning partners and education providers within Scotland, will provide the positive, nurturing, inclusive and productive learning environments that our pre and post registration students need in order to flourish.

I would like to take this opportunity to reinforce the commitment of NHS Education for Scotland to supporting, developing and enhancing the quality of the learning environment for all health care staff within our practice learning environments. This includes continuing to provide and strengthen the Practice Education network of support for practitioners, currently through Practice Education Facilitators (PEFs), Care Home Education Facilitators (CHEFs), Practice Educators and AHP Practice Education Leads (PELs).

1

INTRODUCTION



1.1 Introduction to the framework

This document offers a Scotland-wide framework for the introduction and wider implementation of the new supervision and assessment roles to support students on Nursing and Midwifery Council (NMC) approved pre and post-registration programmes. The information contained within this framework has been informed by questions raised and feedback received from participants at a series of stakeholder engagement events held in Scotland between October 2018 and March 2019. Further details of which can be found on the Scottish Future Nurse and Midwife programme board webpage;



www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/scottish-future-nurse-and-midwife-programme-board.aspx

A social media campaign [#yourstandardsyoursay](#) [#Scotfuturenurse](#) and [#Scotfuturemidwife](#) to raise awareness of the changes in nursing and midwifery education also contributed towards the content.

This national framework is designed to introduce the regulatory changes for student supervision and assessment in the context of health and social care in Scotland (sections 1.1 and 1.2), provide guidance for mentors, sign-off mentors, practice teachers and teachers to transition into the new NMC roles for student supervision and assessment (section 2.0) and outline how practitioners and academic colleagues undertaking the new roles of practice supervisor, practice assessor or academic assessor will be prepared, supported and developed (sections 5, 6 and 7 respectively). In addition, the NMC requirements for, and a practical outline of, each role are included in the relevant sections. The role and responsibilities of approved education institutions (AEIs) and practice learning partners for the supervisor and assessor roles are summarised in section 8.

1.2 Why is the supervision and assessment of nursing and midwifery students changing?

Nursing and midwifery practice have both significantly evolved since the pre-registration standards were reviewed almost a decade ago. Changes in the scope and context of nursing and midwifery practice have largely been in response to the age and public health profile of the United Kingdom's population, health and social care policy development in the devolved nations, emerging health research and the increasing use of digital technologies.

In order for the NMC to continue to meet its regulatory responsibilities¹ in ensuring that nurses and midwives are appropriately prepared for new and emerging roles, the NMC standards underpinning all pre and post-registration programmes needed to be modernised to reflect nursing and midwifery practice now and in the future.

In 2016 the NMC launched its programme of change for education, in that, it would be undertaking a major review of all its education standards and publishing new standards from 2018 onwards. The NMC consulted with nurses and midwives on its professional register and the wider health, social care and education communities across the four UK countries. The NMC also sought the views of patients, carers and members of the public in determining the role and proficiencies of the future nurse and future midwife and the education programmes and practice learning experiences that would be needed to prepare them.

The NMC Realising professionalism: Standards for education and training are now set out in three parts; Part 1: Standards framework for nursing and midwifery education, Part 2: Standards for student supervision and assessment and Part 3: Programme standards as shown in Figure 1. Together these standards help nursing and midwifery students achieve the required proficiencies and programme outcomes.

¹2.3 To promote and maintain proper professional standards and conduct for nurses, nursing associates and midwives.

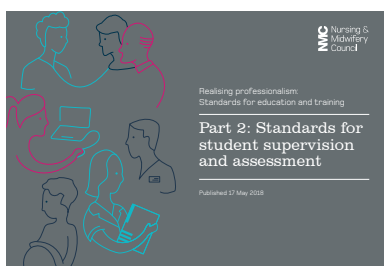
3.2 Set standards of education, training, conduct and performance so that nurses, nursing associates and midwives are able to deliver high-quality healthcare consistently throughout their careers. *Extract from NMC (2018) Nursing and Midwifery Council Annual Report and Accounts 2017 – 2018 and Strategic Plan 2018 – 2019. NMC.*



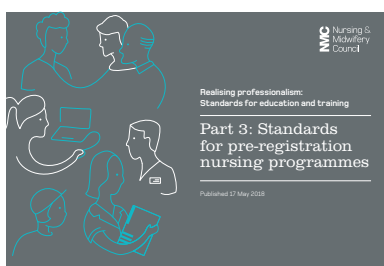
As part of the programme of change, to date, the NMC have published the following Realising professionalism: Standards for education and training:



Standards framework for education and training – these are standards for providers of all pre and post-registration nursing and midwifery programmes (NMC 2018a)



Standards for student supervision and assessment – these standards describe how nursing and midwifery students are supported and assessed in theory and practice (introducing the new roles of practice supervisor, practice assessor and academic assessor) (NMC 2018b)



Standards for pre-registration nursing programmes – these standards describe the entry criteria, programme length and the award for providers of pre-registration nursing programmes (such as universities which the NMC refer to as Approved Education Institutions (AEIs), and their practice partners, this includes NHS Boards, care homes and other organisations that offer students practice learning experiences) (NMC 2018c)



Standards of proficiency for registered nurses

– these standards describe the knowledge and skills nurses should have at the point of joining the NMC register (NMC 2018d)



Standards for prescribing programmes

– these standards describe the entry criteria, programme length and the award for education providers of prescribing programmes (NMC 2018e)



Standards for return to practice programmes

– these standards describe the entry requirements, programme content, methods of assessment and award for education providers of return to practice programmes (NMC 2019a)

The NMC is continuing with its programme of change for education and is in the process of reviewing the standards for the future midwife. Also a number of the post-registration standards have yet to be consulted on, reviewed and new versions published, therefore, continue to access the NMC website² regularly to keep up to date with information and developments regarding the NMC standards.

² www.nmc.org.uk/

1.3 What are the new roles for the supervision and assessment of students?

Alongside the above changes to the standards for pre-registration programmes and proficiencies that nurses and midwives will need to demonstrate before they can enter the professional register, the NMC reviewed how students on pre and post-registration programmes will be supervised and assessed in both theory and practice (NMC 2018b). The roles of mentor, sign-off mentor, practice teacher and teacher³ (NMC 2008) have been withdrawn, and three new roles introduced to undertake the supervision and assessment of students; the practice supervisor, practice assessor and academic assessor as shown in Figure 2 below.

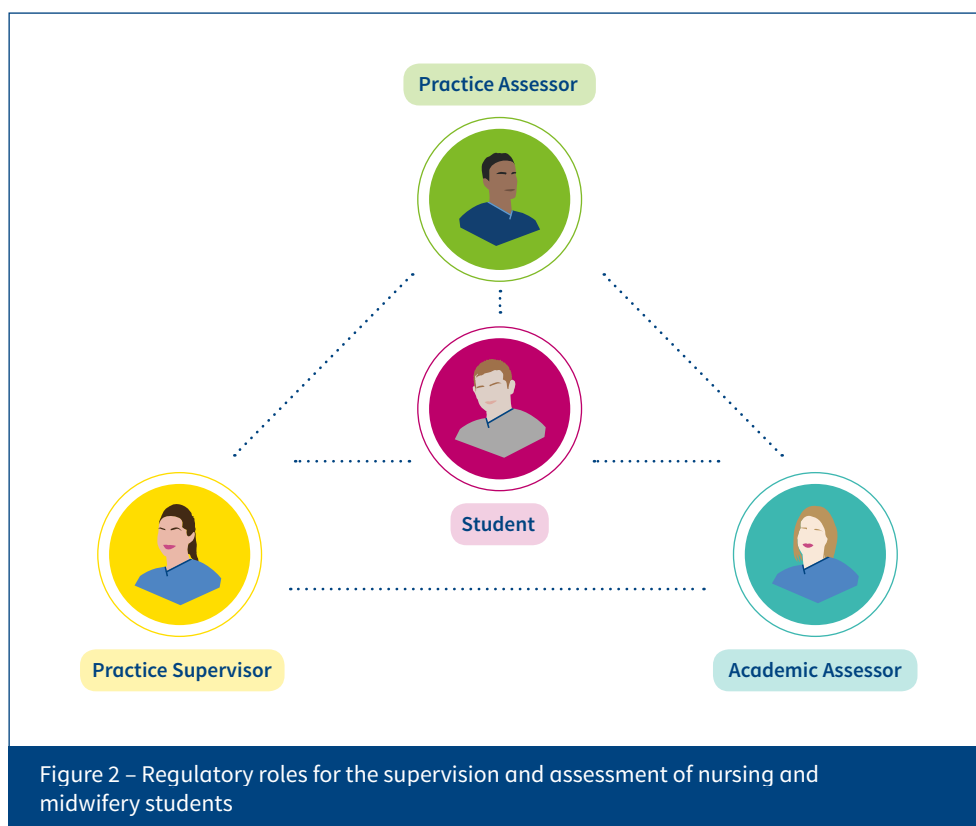


Figure 2 – Regulatory roles for the supervision and assessment of nursing and midwifery students

The following section outlines the purpose of this framework and identifies the health, social care and education colleagues for whom this framework has been developed.

³ Nursing and midwifery teachers who already have an annotation and those currently studying for teacher status will continue to have an annotation on the NMC register. However, this annotation will not exist for teachers / lecturers prepared in the future.

1.4 Why is a national framework for supervision and assessment needed?

This national framework has been developed to provide guidance for the implementation of the practice supervisor, practice assessor and academic assessor roles in Scotland. It builds on the previous national approaches for mentor (NHS Education for Scotland (NES) 2007 and 2013a) and practice teacher preparation (NES 2008a) and the strong collaboration that already exists within nursing and midwifery practice and education across Scotland.

In order to begin preparations for the NMC publishing their *Realising professionalism: standards for education and training*, NHS Education for Scotland⁴ (NES), on behalf of the Scottish Government, hosted a national event in June 2017⁵. The programme for this event was informed by a rapid review of the literature in response to the question “What roles currently exist to provide practice education support to pre-registration students or their mentors, across the UK and overseas?” The evidence identified within that literature review on how practice education support roles have been introduced, prepared, supported and developed elsewhere has been incorporated, where relevant, within this framework document.

In adopting this approach, the programme board can build on the geographically diverse and strong foundation already in place for practice learning. Figure 3 provides details of some of the practice learning experiences already available within NHS Health Boards, Care Homes, Community settings and other sectors within Scotland.

⁴ Further information about NES is available at: www.nes.scot.nhs.uk/about-us/what-we-do.aspx

⁵ The report from this event is available at: www.nes.scot.nhs.uk/media/4093424/continuing_the_conversation_-_practice_learning_9th_june_summary_of_event_final260218.pdf

⁶ Further information on the Scottish Future Nurse and Midwife Programme Board available at: www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/scottish-future-nurse-and-midwife-programme-board.aspx

This 'Once for Scotland' framework will introduce national principles for the practice supervisor, practice assessor and academic assessor roles, promote flexibility to meet local needs and importantly, as the three roles become established, encourage innovative approaches to supervising and assessing students experiencing a range of health and social care practice placements across Scotland.

This document therefore forms part of the Scotland-wide approach to the implementation of the suite of *NMC Realising professionalism: standards for education and training* detailed in the Future Nurse and Midwife Programme Board Workplan⁷. Other national approaches that are relevant to practice supervisors, practice assessors and academic assessors include;

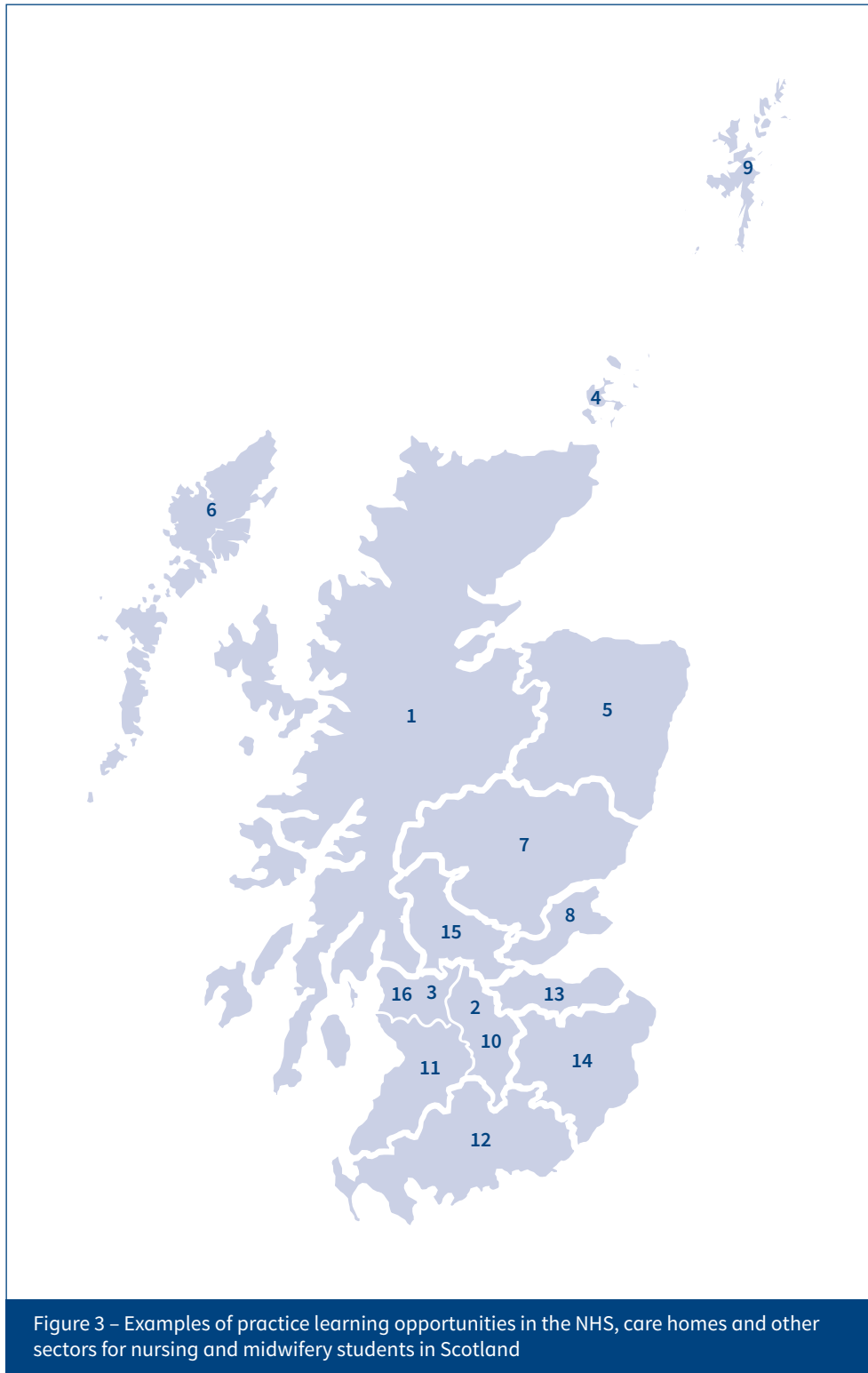
- Scottish Practice Assessment Document (PAD) (pre-registration nursing programmes)
- Midwifery Practice Assessment Document (pre-registration midwifery programmes)
- Quality Management of the Practice Learning Experience⁸ (QMPL) incorporating student feedback on their practice learning experience and a practice placement educational audit tool
- Quality Standards for Practice Placements⁹ (QSPP) (NES 2008b)
- Raising concerns in practice: Student guidance. A national approach for students, practice learning providers and higher education institutions in Scotland¹⁰ (Strachan et al 2018).

⁷ Scottish Future Nurse and Midwife Programme Board Workplan is available at: www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/scottish-future-nurse-and-midwife-programme-board/workplan.aspx

⁸ Further information on QMPL available at: [www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/quality-management-of-the-practice-learning-environment-\(qmple\).aspx](http://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/quality-management-of-the-practice-learning-environment-(qmple).aspx)

⁹ Further information available at: [www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/quality-management-of-the-practice-learning-environment-\(qmple\)/quality-standards-for-practice-placements-\(revised-2008\).aspx](http://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/quality-management-of-the-practice-learning-environment-(qmple)/quality-standards-for-practice-placements-(revised-2008).aspx)

¹⁰ Available at: www.nes.scot.nhs.uk/media/4231080/240718_final_version_national_rc_with_leaflet_1_.doc



1. **NHS Highland** – Prison and forensic services, General Practitioner (GP) practice in Wick and care homes.
2. **The State Hospital** – High secure forensic environment covering Scotland and Northern Ireland, mental health and learning disability services.
3. **Golden Jubilee National Hospital** – Merge placements within critical care and orthopaedics, wards, theatres and cardiac catheter laboratories.
4. **NHS Orkney** – Dounby community nurses, inpatient wards and older adult residential care.
5. **NHS Grampian** – Dementia outreach teams, substance misuse team, spoke experiences with nursery team and learning disability day centres. Developing placements in HMP Peterhead and Fraserburgh police custody suite.
6. **NHS Western Isles** – North Uist Medical Practice and specialist Nurse rotation placement.
7. **NHS Tayside** – Care Homes, National Children’s Trust, Centrepoint and homeless teams in the community.
8. **NHS Fife** – Chest Heart and Stroke Association Scotland – based at Cameron Hospital, hub and spoke antenatal and postnatal experience within midwifery, Scoonie medical practice in Leven.
9. **NHS Shetland** – Island placement within Yell community and adjacent non-doctor islands.
10. **NHS Lanarkshire** – Homeless units, perinatal mental health team and smoking cessation service
11. **NHS Ayrshire and Arran** – Hospice, private hospitals and the prison service
12. **NHS Dumfries and Galloway** – Practice Nurses, Alzheimer Scotland and Kaleidoscope – support in mind Scotland.
13. **NHS Lothian** – New evolving service where Mental Health Nurses work within a GP practice, stroke liaison and local authority care homes
14. **NHS Borders** – Community hospitals, health centres, community nursing teams, health visitors and school nurses
15. **NHS Forth Valley** – New innovative service for Mental Health students along with Neurology and new Short Stay Medical Area for Adult Nursing students, trialling placing undergraduate students with Practice Nurses for sign off placements.
16. **NHS Greater Glasgow and Clyde** – Spinal injuries unit, voluntary sector to include; Richmond Fellowship, capability Scotland and youth groups, out of hours services in adult nursing and mental health and council services such as “Care at home”.

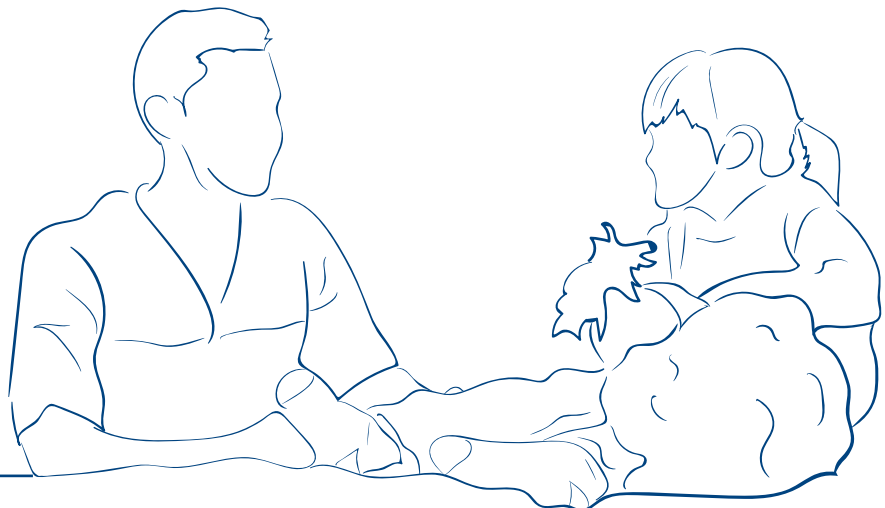
1.5 Who has this framework been developed for?

This framework has been developed for those involved, now and in the future, in the support, supervision and assessment of pre and post-registration nursing and midwifery students. This may include but is not limited to; mentors, sign-off mentors, practice teachers, lecturers, nurse / midwifery teachers, managers, leads for practice education in universities and NHS Boards, care homes and other local and national health and social care organisations. It may also be useful for other health and social care professionals currently involved in nursing and midwifery education for example social workers, paramedics and ambulance teams, general practitioners, pharmacists, occupational therapists and physiological technicians.

To consider the interprofessional learning opportunities afforded by the new standards, a reference group was established with representation extended to the allied health professions, chaplaincy, dentistry, medicine, optometry, pharmacy and social services. The reference group explored supervisory practice, the potential for reciprocal arrangements and undertook a scoping exercise to map each profession's regulatory requirements and standards to the NMC standards for student supervision and assessment. The interprofessional scoping exercise is available at:



www.nes.scot.nhs.uk/media/4330151/mapping_exercise_1.4.doc



This framework should also be helpful to those who support practitioners undertaking the roles of supervisors and assessors. Scotland, perhaps uniquely within the UK, has a national network of nursing, midwifery and allied health professions (NMAHP) practice education roles that work across health and social care sectors to:

- Support the NMAHP workforce to demonstrate compliance with regulatory body requirements for practice education (NMC and Health and Care Professions Council (HCPC))
- Contribute to the delivery of safe, effective and person centred care by increasing capacity for practice based learning and strengthening education provided where NMAHPs practice
- Enhance the quality of the practice learning experience to provide high quality practice education experiences to all learners and positive learning experiences for the NMAHP workforce
- Strengthen relationships between education and all professions and sectors to enable access to a wider range of learning opportunities
- Embed and sustain practice education to ensure a contemporary workforce for the future.

The NMAHP national network consists of the NES practice education team, nursing and midwifery practice educators, practice education facilitators (PEFs) and care home education facilitators (CHEFs) and allied health professions practice education leads (AHP PELs) as shown below in Figure 3.

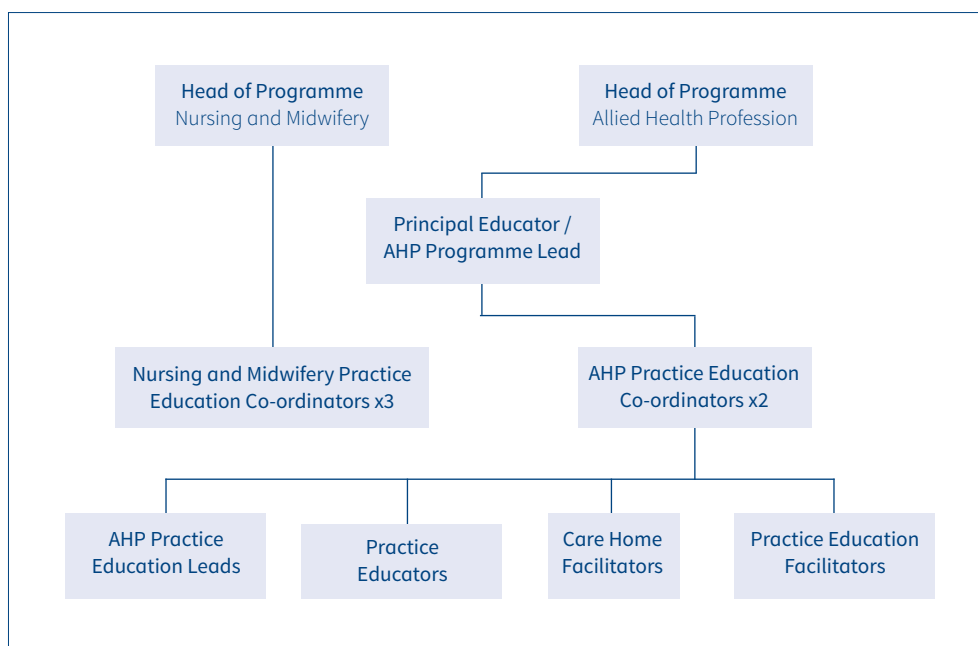


Figure 3 – Scotland's national network of practice education roles for nursing, midwifery and allied health professions.

Information about the roles of practice educators, PEFs, CHEFs and AHP PELs is available on the NES website. Details on each of the roles can be accessed at:

Practice Educators

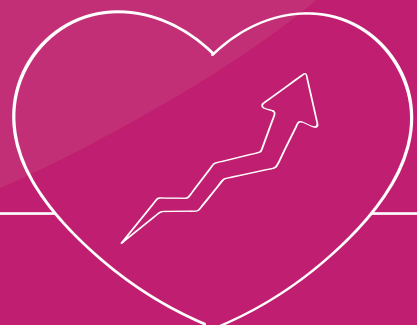
PEFs

CHEFs

AHP PELs

2

TRANSITION TO THE STANDARDS FOR STUDENT SUPERVISION AND ASSESSMENT



2.1 What are the transitional arrangements for the supervisor and assessor roles?

The NMC have withdrawn the roles of mentor, sign-off mentor, practice teacher and registered teacher for all new education programmes using the *Realising professionalism* standards (NMC 2018a-e and 2019a) and are introducing practice supervisors, practice assessors and academic assessors. The NMC recognises and respects there is already a wealth of expertise amongst practitioners in supporting and assessing pre and post-registration students that should be drawn upon when introducing these new roles. The knowledge, skills and experience of nurses and midwives who have previously undertaken the roles of mentor, sign-off mentor, practice teacher and teacher **WILL** be directly transferable to the new NMC roles.

This process of recognising the existing knowledge, skills and experience of health and social care professionals and supporting the transfer of their relevant attributes (knowledge, skills and experience) into the new roles is called the *transitional arrangements*.

Transition to the standards for student supervision and assessment for all NMC approved pre and post-registration programmes in Scotland will commence during September 2020. This means all students commencing new programmes and some students already studying on NMC approved nursing and midwifery programmes from September 2020 onwards will be supervised and assessed by practice supervisors, practice assessors and academic assessors. AEI's and their practice partners will provide information locally detailing the exact timeframes in which each NMC approved programme will transition to the standards for student supervision and assessment. Figure 4 shows the transition timeline for the new regulatory roles, up to and including September 2020.





¹¹ Further information available at: www.sssc.uk.com/

¹² Further information available at: www.scottishcare.org/

The following sections provide guidance for mentors, sign-off mentors, practice teachers and teachers about what they need to do to transition to become a practice supervisor, practice assessor and an academic assessor.

The NMC are also very clear that **all** registered nurses and midwives are capable of supervising students (NMC 2018b:6) and this is also reflected in the following clauses from the NMC Code; ‘9.4 support students’ and colleagues’ learning to help them develop their professional competence and confidence’ and ‘20.8 act as a role model of professional behaviour for students and newly qualified nurses, midwives and nursing associates¹³ to aspire to’ (NMC 2018f). Involvement in and contributing towards the preparation of the future nursing and midwifery workforce and the continuing professional development of colleagues is therefore a core responsibility of all NMC registrants. Information is provided in section 3 and 4 of this document about the preparation required by nurses and midwives who have not previously been a mentor, sign-off mentor or a practice teacher on the steps required to become a practice supervisor and / or practice assessor for students.

¹³ There are no nursing associate roles in Scotland

2.2 How do nursing and midwifery mentors, sign-off mentors and practice teachers transition to become practice supervisors and practice assessors?

The process nurses and midwives (and prescribers) should take to ensure a smooth transfer of their knowledge, skills and experience into the role of practice supervisor and practice assessor are provided below. Having updated their knowledge of the new roles, programmes and associated practice assessment documentation:

- All mentors, sign off mentors and practice teachers on the mentor / practice teacher register as of September 2020 will transition to become, simultaneously, both practice supervisors and practice assessors.
- All *nursing* mentors, sign-off mentors and practice teachers on the mentor / practice teacher register as of September 2020 will transition to become practice assessors for pre-registration *nursing* and return to practice *nursing* students.
- All *midwifery* sign-off mentors and practice teachers on the mentor /practice teacher register as of September 2020 will transition to become practice assessors for pre-registration *midwifery* and return to practice *midwifery* students.
- All practice teachers on the practice teacher register as of September 2020 will transition to become practice assessors for nurses and midwives studying for registration as a specialist community public health nurse (SCPHN).
- All mentors, sign-off mentors and practice teachers on the mentor / practice teacher register as of September 2020 will transition to become practice assessors for any NMC approved post-registration qualification in accordance with the relevant programme standards.

¹⁴ Nurses and midwives undertaking prescribing programmes should be assigned to a practice assessor who is registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme (NMC 2018e:12)

- All mentors, sign-off mentors and practice teachers on the mentor / practice teacher register as of September 2020 who have *community practitioner nurse or midwife prescriber*, independent or supplementary prescriber annotations on the NMC register will transition to become practice assessors for nurses and midwives undertaking post-registration prescribing programmes as shown below:-
 - mentors / sign-off mentors and practice teachers who have community practitioner nurse or midwife prescriber annotations against their name on the NMC register and suitable prescribing experience to transition to become a practice assessor for nurses and midwives undertaking *community practitioner prescribing programmes*
 - mentors / sign-off mentors and practice teachers who have independent prescriber annotations against their name on the NMC register and suitable prescribing experience to transition to become a practice assessor for nurses and midwives undertaking *independent prescribing programmes*
 - mentors / sign-off mentors and practice teachers who have *supplementary prescriber* annotations against their name on the NMC register and suitable prescribing experience to transition to become a practice assessor for nurses and midwives undertaking *supplementary prescribing programmes*.

There may be exceptional circumstances when it would not be appropriate for a nurse, midwife or SCPHN to act as a practice supervisor or a practice assessor. This may include, but is not limited to; NMC registrants who have capability or competence action plans in place and / or are undergoing a fitness to practice process.

Registered nurses, midwives and SCPHNs who are on the mentor / practice teacher register in Scotland in September 2020 to undertake a transitional programme developed collaboratively, with the support of NES, between approved education institutions and their practice learning partners. This transitional programme will include an update on the relevant pre or post-registration programme, the practice supervisor contribution towards the practice assessment documentation, the practice assessor role in conducting assessments, the relationship between the roles of practice supervisor, practice assessor and academic assessor and any other locally agreed content.

Mentors, sign-off mentors and practice teachers on the mentor / practice register as of September 2020 should consider undertaking a reflective self-assessment of their mentor / sign-off mentor / practice teacher experience and development against the practice supervisor and practice assessor roles which can also be used as evidence towards NMC revalidation. A template is provided in Appendix 1.

Effective practice learning becomes a focus for discussion within annual appraisal and revalidation for practice supervisors and practice assessors.

2.3 How do nursing and midwifery registered teachers within an AEI transition to become academic assessors?

The process nursing and midwifery registered teachers (and prescribers¹⁵) should take to ensure a smooth transfer of their knowledge, skills and experience into the role of academic assessor are provided below:

- All *nursing* registered teachers within an AEI as of September 2020 will transition to become academic assessors for pre-registration *nursing* and return to practice *nursing* students.
- All *midwifery* registered teachers within an AEI as of September 2020 will transition to become academic assessors for pre-registration *midwifery* and return to practice *midwifery* students.
- All SCPHN registered teachers within an AEI as of September 2020 will transition to become academic assessors for nurses and midwives studying for registration as a specialist community public health nurse (SCPHN).
- All nursing and midwifery registered teachers within an AEI will transition to become academic assessors for any NMC approved post-registration qualification in accordance with the relevant programme standards.

¹⁵ Nurses and midwives undertaking prescribing programmes should be assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking (NMC 2018e:12)

There may be exceptional circumstances when it would not be appropriate for a nurse, midwife or SCPHN to act as an academic assessor. This may include, but is not limited to; NMC registrants who have capability or competence action plans in place and / or who are undergoing a fitness to practice process.

Nursing and midwifery registered teachers within an AEI may also have a practice-related role, such as a lecturer / practitioner can transition to become a practice supervisor and / or a practice assessor. In these circumstances, the transitional guidance in section 2.1 should be followed.

Registered teachers within an AEI should consider undertaking a reflective self-assessment of their lecturer experience and development against the academic assessor role which can also be used as evidence towards NMC revalidation. A template is provided in Appendix 2.

Effective practice learning should become a focus for discussion within annual appraisal and revalidation for academic assessors.

Table 1 details how mentors, sign-off mentors, practice teachers and registered teachers can transition into the new NMC roles of practice supervisor, practice assessor and academic assessor for pre-registration, return to practice and post-registration students. The transitional arrangements for NMC approved prescribing programmes are shown in Table 2.

The NMC roles of practice supervisor, practice assessor and academic assessor and how they will be undertaken in the context of Scottish practice placements are provided in sections 3.0, 4.0 and 5.0 respectively of this framework. The responsibilities of AEIs, practice learning partners and other national organisations in Scotland beyond the September 2020 transitional period are included in section 6.0 for information and future reference.



Midwifery mentor	Practice supervisor for pre-registration and return to practice student nurses and midwives AND Practice assessor for pre-registration and return to practice student midwives.	<ul style="list-style-type: none"> ▪ Read the NMC standards for student supervision and assessment available at: www.nmc.org.uk/standards-for-education-and-training/standards-for-student-supervision-and-assessment/
Midwifery mentor <i>with relevant post registration qualifications, knowledge and experience.</i>	Practice supervisor for nurses and midwives undertaking NMC approved post-registration programmes AND Practice assessor for midwives undertaking NMC approved post-registration programmes <i>in accordance with the relevant programme standards.</i>	<ul style="list-style-type: none"> ▪ Read sections 3.0 and 4.0 of this framework on the practice supervisor and practice assessor roles in Scotland. ▪ Undertake a reflective self-assessment against the practice supervisor and practice assessor roles. A template is provided in Appendix 1 which can be used towards NMC revalidation. ▪ Become familiar with the student pre-and / or post- registration programme, the student learning outcomes relevant to the practice area, the proficiencies supporting students to achieve and the practice assessment document. ▪ Contact the local practice education facilitator or care home education facilitator to obtain support to address any areas of development identified. ▪ Making contact with the AEI and programme lead

<p>Practice teacher</p>	<p>Practice supervisor for pre-registration and return to practice student nurses and midwives AND Practice assessor for pre-registration and return to practice student nurses OR midwives.</p>	<ul style="list-style-type: none"> ▪ Read the NMC standards for student supervision and assessment available at: www.nmc.org.uk/standards-for-education-and-training/standards-for-student-supervision-and-assessment/ ▪ Read sections 3.0 and 4.0 of this framework on the practice supervisor and practice assessor roles in Scotland ▪ Undertake a reflective self-assessment against the practice supervisor and practice assessor roles. A template is provided in Appendix 1 which can be used for NMC revalidation.
<p>Practice teacher with relevant post registration qualifications, knowledge and experience.</p>	<p>Practice supervisor for nurses and midwives undertaking NMC approved post registration programmes AND Practice assessor for nurses OR midwives undertaking NMC approved post registration programmes in accordance with the relevant programme standards.</p>	<ul style="list-style-type: none"> ▪ Become familiar with the student pre-and / or post registration programme, the student learning outcomes relevant to the practice area (s), the proficiencies supporting students to achieve and the practice assessment document. ▪ Contact the local practice education facilitator or care home education facilitator to obtain support to address any areas of development identified or to share knowledge, skills and experience with others (for example, leading a session with practice assessors about using evidence from sources other than own / area of practice and from over a period of time to inform assessment of a student).

<p>Nursing and Midwifery registered teachers within an AEI.</p> <p>Lecturer and NMC registered teacher <i>with relevant post registration qualifications and experience.</i></p>	<p>Academic assessor for pre-registration and return to practice student nurses OR midwives.</p> <p>Academic assessor for nurses OR midwives undertaking NMC approved post registration programmes <i>in accordance with the relevant programme standards</i></p>	<ul style="list-style-type: none"> ▪ Read the NMC standards for student supervision and assessment available at: www.nmc.org.uk/standards-for-education-and-training/standards-for-student-supervision-and-assessment/ ▪ Read section 5.0 of this framework on the academic assessor role in Scotland. ▪ Undertake a reflective self-assessment against the academic assessor role. A template is provided in Appendix 2 which can be used for NMC revalidation. Become familiar with the student pre-and / or post-registration programme, in particular the part of the programme supporting students to achieve, and the practice assessment document. ▪ Work with the local practice education facilitator or care home education facilitator to : <ul style="list-style-type: none"> ▪ i) support practice supervisors and practice assessors become familiar with and undertake their new role ▪ ii) introduce scheduled communication to collaborate with practice assessors to evaluate and recommend student progression for each part of the programme.
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Table 2 – Transitional arrangements for the supervision and assessment of nurses and midwives studying for post-registration NMC approved prescribing programmes.

Current role	New role	What you need to do
<p>Other registered healthcare professionals with relevant post registration qualifications, knowledge and experience, for example allied health professionals, pharmacists, pharmacy technicians who have completed prescribing programmes.</p>	<p>Practice supervisor and/or practice assessor for nurses and midwives undertaking NMC post registration prescribing programmes in accordance with programme standards.</p>	<ul style="list-style-type: none"> ▪ Read the NMC standards for student supervision and assessment available at: www.nmc.org.uk/standards-for-education-and-training/standards-for-student-supervision-and-assessment/ ▪ Read sections 3.0 and 4.0 of this framework on the practice supervisor and practice assessor roles in Scotland. ▪ Undertake a reflective self-assessment against the practice supervisor and practice assessor roles. A template is provided in Appendix 1. ▪ Become familiar with the post-registration prescribing programme learning outcomes, the Royal Pharmaceutical Society's (RPS) Competency Framework (RPS 2016¹) supporting colleagues to achieve and the associated practice assessment document. ▪ Contact the local practice education facilitator, practice educators, allied health professional practice education lead, non-medical prescribing lead or pharmacy practice education roles, to: <ul style="list-style-type: none"> ▪ i) become familiar with the post-registration prescribing programme, learning outcomes and competencies supporting colleagues to achieve and the associated practice assessment document. ▪ ii) obtain support to address any areas of development identified.

¹ www.rpharms.com/Portals/0/RPS%20document%20library/Open%20access/Professional%20standards/Prescribing%20competency%20framework/prescribing-competency-framework.pdf?ver=2019-02-13-163215-030

Current role	New role	What you need to do
<p>Registered nurse or midwife mentor, sign-off mentor or practice teacher with community nurse or midwife prescriber annotation on NMC register.</p> <p>Registered nurse or midwife mentor, sign-off mentor or practice teacher with independent nurse or midwife prescriber annotation on NMC register.</p> <p>Registered nurse or midwife mentor, sign-off mentor or practice teacher with supplementary nurse or midwife prescriber annotation on NMC register.</p> <p>Registered healthcare professional, such as pharmacists, doctors, allied health professionals with prescribing qualification and experience and/ or qualification in assessment of colleagues studying for post registration prescribing qualifications.</p>	<p>Practice supervisor AND practice assessor for nurses and midwives undertaking community nurse/ midwife prescriber programmes.</p> <p>Practice supervisor AND practice assessor for nurses and midwives undertaking independent prescriber programmes.</p> <p>Practice supervisor AND practice assessor for nurses and midwives undertaking supplementary prescriber programmes.</p>	<ul style="list-style-type: none"> ▪ Read the NMC standards for student supervision and assessment available at: www.nmc.org.uk/standards-for-education-and-training/standards-for-student-supervision-and-assessment/ ▪ Read sections 3.0 and 4.0 of this framework on the practice supervisor and practice assessor roles in Scotland. ▪ Undertake a reflective self-assessment against the practice supervisor and practice assessor roles. A template is provided in Appendix 1, which can be used for NMC revalidation. ▪ Become familiar with the post-registration prescribing programme learning outcomes, the Royal Pharmaceutical Society's (RPS) Competency Framework (RPS 2016²) supporting colleagues to achieve and the associated practice assessment document. ▪ Contact the local practice education facilitator, practice educator or non-medical prescribing lead to obtain support or information.

² www.rpharms.com/Portals/0/RPS%20document%20library/Open%20access/Professional%20standards/Prescribing%20competency%20framework/prescribing-competency-framework.pdf?ver=2019-02-13-163215-030

Current role	New role	What you need to do
<p>Nurse or midwife registered teacher within an AEI who has suitable equivalent qualifications for the prescribing programme the student is undertaking.</p>	<p><i>Academic assessor for nurses and midwives undertaking NMC approved post registration prescribing programmes in accordance with programme standards</i></p>	<ul style="list-style-type: none"> ▪ Read the NMC standards for student supervision and assessment available at: www.nmc.org.uk/standards-for-education-and-training/standards-for-student-supervision-and-assessment/ ▪ Read section 5.0 of this framework on the academic assessor role in Scotland
<p>Registered healthcare professional, such as pharmacists, doctors, allied health professionals with prescribing qualification and experience and/or qualification in teaching and assessment of colleagues studying for post registration prescribing qualifications.</p>	<p>Academic assessor for nurses and midwives undertaking NMC approved post registration prescribing programmes in accordance with programme standards.</p>	<ul style="list-style-type: none"> ▪ Undertake a reflective self-assessment against the academic assessor role. A template is provided in Appendix 2, which can be used towards NMC revalidation. ▪ Become familiar with the post-registration prescribing programme, the Royal Pharmaceutical Society's (RPS) Competency Framework (RPS 2016³) supporting colleagues to achieve and the associated practice assessment document. ▪ Work with the local allied health professional practice education lead, non-medical prescribing lead, pharmacy practice education roles, practice education facilitator or practice educators to support practice supervisors and practice assessors become familiar with and undertake their new role.

³ www.rpharms.com/Portals/0/RPS%20document%20library/Open%20access/Professional%20standards/Prescribing%20competency%20framework/prescribing-competency-framework.pdf?ver=2019-02-13-163215-030

3

PRACTICE
SUPERVISORS

3.1 Practice Supervisors

The practice supervisor has a regulatory function, in that it is a requirement for all student nurses and midwives on pre-registration programmes and for nurses and midwives studying for NMC approved post-registration qualifications, such as specialist community public health and prescribing, to be supervised in practice.

Practice supervisors will supervise students learning in practice and working towards achievement of the programme learning outcomes and proficiencies. The practice supervisor is also a main source of support for students along with the practice assessor and other staff, such as senior charge nurses / midwives / care home managers / integrated team leader and academic assessor. A role summary of the practice supervisor, and their relationship to the practice assessor in supervising and assessing students is summarised in Figure 5 below.



3.2 Who can be a practice supervisor?

The practice supervisor can be any registered health and social care professional working in a practice environment. The NMC are very clear that **ALL** nurses and midwives in **ANY** practice learning environment should be able to act as a practice supervisor (NMC 2018b and 2018g) for pre-registration student nurses and midwives providing they've been prepared and supported to take up their role and have up-to-date knowledge and experience relevant to the student they are supervising.

Regardless of the profession, for example a nurse, midwife, doctor or a physiotherapist, the practice supervisor must be registered with a professional regulator like the NMC, General Medical Council (GMC), Health and Care Professions Council (HCPC) or General Pharmaceutical Council (GPC). Health and social care professionals who are **not** registered with a professional regulator can not be practice supervisors.

Students in Scotland on programmes leading to NMC recorded qualifications (including pre-registration nursing and midwifery, return to practice and relevant post-registration programmes) can, as a general rule, be supervised by health and social care professionals registered with the Scottish Social Services Council¹⁶ (SSSC), in the categories listed in below, if their registration is without conditions:

- Social Workers
- Managers of Residential Child Care Services
- Residential Child Care Workers with Supervisory responsibility
- Managers of Adult Day Care Services
- Managers of Care home Services for Adults
- Supervisors of Care Home Service for Adults
- Managers of Day Care of Children Services
- Managers of a Residential School Care Accommodation
- Supervisors of a Residential School Care Accommodation
- Managers of a Housing Support Service
- Supervisors of a Housing Support Service
- Managers of a Care at Home Service
- Supervisors of a Care at Home Service

This list is not exhaustive as roles and titles may vary and change over time. To enable students to meet their learning outcomes and uphold public protection, it is for each AEI together with practice learning partners to determine the suitability of any particular person or group of people to supervise students. An example of a SSSC registered social care supervisor undertaking the practice supervisor role is provided in Box 1.

¹⁶ www.sssc.uk.com/

Box 1 – SSSC registered social care supervisor undertaking practice supervisor role

Example – Cara is a social care supervisor, she is registered with SSSC and has completed the required qualifications related to her registration. Karen works in a local authority non-nursing care home which has a close working relationship with the local community nursing team, who undertake regular visits. After undertaking preparation which builds on her Scottish Vocational Qualification assessor qualification, Karen can be a practice supervisor for student nurses on practice placement (each AEI in collaboration with practice learning partners will determine for which students this may be appropriate. For example, it may be appropriate for a Year 1 or Year 2 student but may not be appropriate for a final year student). Janet, Hamish and Katie who are registered nurses in the local community team can undertake the roles of practice supervisor / s and practice assessor.

Social care workers registered with SSSC but not in one of the categories listed above, cannot be practice supervisors. These workers (including health and social care support workers) however can form part of the student's supervisory team in conjunction with other health or social care professionals.

There may be exceptional circumstances when it would not be appropriate for a social care professional to act as a practice supervisor. This may include, but is not limited to; SSSC registrants who have practice conditions attached.

Other professionals, who are not on the health and social care registers, but are working in a practice learning environment, such as teachers (in primary or secondary school) cannot be practice supervisors, however they may contribute to nursing and midwifery education. Their contribution depends on a number of things, including what skill is being taught, the experience and skills of the individual professional, what oversight there is, and the practice environment where learning is taking place (NMC 2018g) as illustrated in box 2. There may also be opportunities for other non-registered health and social care colleagues to contribute towards a student's practice placement experience as illustrated in Box 3.

Box 2 – Professionals', not on the health and social care registers, contribution towards child health field student nurse practice placement

Example – Joe, a child health student nurse has successfully progressed into the second part / year (for pre-registration programmes, a part of the programme is normally a year) of his pre-registration programme and is developing independence in working as part of the team and in providing care. There is an opportunity to spend some time in a primary school as part of the assisted learning schools and to work towards specific learning outcomes related to child development. Gemma the practice supervisor, provides long-arm support and supervision at a distance to Joe through communicating with and supporting the primary school teacher and teaching assistant.

Box 3 – Non-registered professionals' contribution towards midwifery students

Example – Karen, a student midwife, is on practice placement with an infant feeding team. The placement includes breast feeding NHS support workers and volunteer breast buddies. After discussion with the practice supervisor regarding the student's learning outcomes, the support worker and volunteer contribute towards the supervisory team by working with the student and communicating with the practice supervisor.

As shown in the above examples, supervision at a distance can be used as long as there is sufficient coordination and continuity of support and supervision. Please see Appendix 3 for further supporting information, drawn from the literature, on supervision in health and social care. Where there may be opportunities for other non-registered health and social care colleagues to contribute towards a student's practice placement experience, contact the local AEI, practice education facilitator or care home education facilitator for advice and guidance.

Nurse and midwife practice supervisors may also undertake the role of practice assessor, however they cannot be a practice supervisor AND the nominated practice assessor for the same student¹⁷ as illustrated in the box below.

¹⁷ The exception to this is nurses and midwives undertaking NMC approved post registration prescribing programmes, where, "In exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor for that part of the programme where the prescribing student is undergoing training in a practice learning setting" (NMC 2018e:12).

Box 4 – Jane, a practice supervisor and a practice assessor for different students

Jane is a midwife and works in ante natal and labour wards. Jane, as well as her other midwifery colleagues, is one of the practice supervisors for student nurse Abigail currently on a two week spoke placement as part of a women's health practice placement. Jane's role as one of the practice supervisors is to supervise Abigail's progress towards team working, communication and interpersonal skills in particular. At the same time Jane is a practice assessor for Clive a first-year midwifery student on a six week placement.

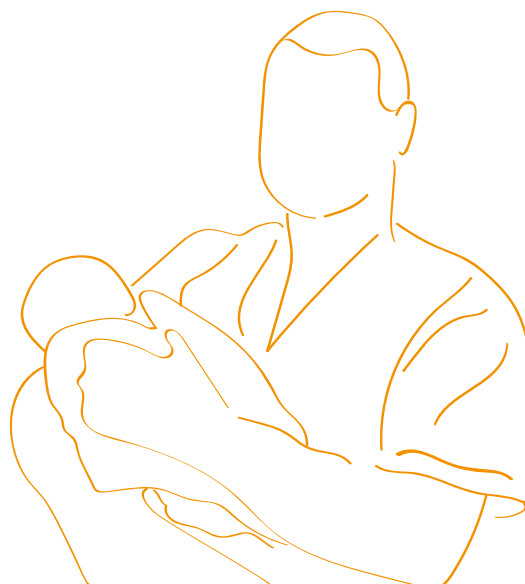
3.3 How will practice supervisors be prepared?

The NMC require approved education institutions and practice learning partners to ensure practice supervisors “*receive ongoing support to prepare, reflect and develop for effective supervision and contribution to student learning and assessment*” and “*have an understanding of the proficiencies and programme outcomes they are supporting students to achieve*” (NMC 2018b:7).

The NMC proficiencies for the future nurse and midwife include the following outcome; “*support and supervise students in the delivery of (nursing or midwifery) care, promoting reflection and providing constructive feedback, and evaluating and documenting their performance*” (NMC 2018d:20 and 2019b). When the future nurse and midwife proficiencies have been embedded within pre-registration programmes, all nurses and midwives completing these programmes will be ‘practice supervisor’ ready at the point of registration with the NMC. In the interim period, all nurses and midwives who have not previously been mentors or practice teachers and those entering the NMC register from 2020 until 2023 will require preparation to become a practice supervisor. Similarly, other health and care professionals will need some preparation before commencing this regulatory role for nursing and midwifery students and colleagues.

For nurses, midwives and other health and social care professionals without prior experience, preparation will include a selection or all of the following:-

- Inform line manager and local PEF, CHEF or AHP PEL of intention to become a practice supervisor.
- Read and become familiar with the NMC standards for student supervision and assessment (NMC 2018b) and all of section 3 within this document.
- Undertake a reflective self-assessment to consider what prior knowledge, skills and experience are transferable to the practice supervisor role. See Appendix 4 for a template. Discuss any areas for development with line manager.
- Undertake a preparation programme developed collaboratively, with the support of NES, between approved education institutions and their practice learning partners. This programme should include details of the pre or post-registration programme, the practice supervisor contribution towards the practice assessment documentation, the relationship between the roles of practice supervisor, practice assessor and academic assessor, and the development of supervisory and feedback skills.
- Undertake professional development activities, utilising relevant educational resources (examples of which are shown in Appendix 5), related to understanding the practice supervisors role in preserving public protection and safety, role modelling, raising concerns, identification of learning needs, equality and diversity, reasonable adjustments in practice placements (Dickens et al 2016), providing constructive feedback and raising a cause for concern about a student's conduct or competence.



3.4 What does the NMC expect of a practice supervisor?

The practice supervisor role is to support and supervise nursing and midwifery students in the practice learning environment. The NMC define the practice supervisor role, responsibilities and contribution towards assessment as shown below.

Practice supervisors will:

- Serve as role models for safe and effective practice in line with their code of conduct
- Support learning in line with their scope of practice to enable the student to meet their proficiencies and programme outcomes
- Support and supervise students, providing feedback on their progress towards and achievement of, proficiencies and skills
- Have current knowledge and experience of the area in which they are providing support, supervision and feedback, and
- Receive ongoing support to participate in the practice learning of students
- Contribute to the student's record of achievement by periodically recording relevant observations on the conduct, proficiency and achievement of the students they are supervising
- Contribute to student assessments to inform decisions for progression
- have sufficient opportunities to engage with practice assessors and academic assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising, and
- Appropriately raise and respond to student conduct and competence concerns and are supported in doing so (NMC 2018b:6-7).

Practice supervisors should read the [NMC standards for student supervision and assessment](#) and the [NMC supporting information on practice supervision](#). This framework and the above NMC documents should be used when starting to undertake the role of practice supervisor and to periodically reflect on practice as a supervisor of students.

3.5 How might the practice supervisor role be undertaken in Scotland?

The practice supervisor role in Scotland will reflect interprofessional working across health and social care sectors, the diverse geography of nursing and midwifery practice placements and incorporate Scottish Government (SG) policy drivers, such as, the Chief Nursing Officers (CNO) Nursing 2030 Vision (SG 2017a) and The Best Start for Maternity and Neonatal Care (2017b).

Given the nature of multidisciplinary and interprofessional teams, twenty-four-hour services and associated staff shift patterns, it is anticipated that a student will have support and supervision from one or *more* practice supervisors at any one time. As a practice supervisor, the role may involve supporting a student to develop a specific skill, such as bereavement support, personal care, chest examination, intravenous therapy or working alongside the student for the duration of their practice placement. Regardless of the amount of time spent with the student, practice supervisors record their observations in the student's practice assessment documentation.

To ensure students have safe and effective learning experiences the NMC require that *“there is a nominated person for each practice setting to actively support students and address student concerns” (NMC 2018b:5) and “there is sufficient coordination and continuity of support and supervision of students...” (NMC 2018:6)*. In Scotland, it has been agreed that each student will have a practice supervisor who will be their nominated person for student support and to address student concerns.

Approved education institutions, together with practice learning partners are required to meet the NMC standards and requirements for educators and assessors as shown in Appendix 6. Of particular note for practice supervisors is the requirement to ensure practice placements *“have the capacity, facilities and resources in place to deliver safe and effective learning opportunities and practical experiences for students as required by their programme learning outcomes” (NMC 2018a:8)* and for educators and assessors to *“have supported time and resources to enable them to fulfil their roles in addition to their other professional responsibilities” (NMC 2018a:11)*. This may include practice supervisors having time to work alongside and observe students, provide feedback to students, participate in student review meetings, complete practice assessment documentation and communicate with the student's nominated practice assessor. Students who require reasonable adjustments or underperforming students may require additional time for support and this should be agreed at a local level.

3.6 What will the practice supervisor do?

The following bullet points provide a practical interpretation of how the NMC requirements for the practice supervisor role may be undertaken. Research evidence of relevance for the practice supervisor role is available in Appendix 7.

A practice supervisor may:

- Provide students with an induction and orientation to the practice placement (*Flott and Linden 2016*). This may include involvement in the initial meeting with the student and completing the relevant practice assessment documentation (PAD), such as induction checklist, pre-practice placement learning activities and identifying student learning outcomes (*Sundler et al 2014 as cited in Forber et al 2016:89*). In discussion with the nominated practice assessor for the student, dates will be agreed for the interim and final performance review meetings and recorded in the PAD.
- Maximise the interprofessional learning opportunities for students. This may include an overview of the different health and social care professions that the student will encounter as part of the induction and orientation process and throughout their practice placement experience (*Davys and Beddoe 2015 and Sweet and Broadbent 2017*).
- Provide the appropriate level of supervision based upon the students learning needs, achievement of programme outcomes and stage of learning. Practice supervisors can refer to supervision in health and care in Appendix 3, and where relevant, the 'Participation in Care' model included in the pre-registration student practice assessment document, when using their professional judgment to determine the level of supervision required by the student.
- Be the "*nominated person for each practice setting to actively support students and address student concerns*" (*NMC 2018b:5*). In Scotland, it has been agreed that each student will have a practice supervisor who will be their nominated person for student support and to address student concerns.
- Contribute towards the continuity and coordination of supervision for individual students by documenting observations of student performance in the PAD and feeding back, where appropriate and requested, to the nominated practice assessor. The practice supervisor will also be aware that the student has an active role in the supervisory relationship. The students' knowledge of the programme outcomes and their own learning needs should inform the supervision of individual students.

- Make reference to the NMC definition of supernumerary status when determining the level of supervision required by students: *“students in practice or work placed learning must be supported to learn without being counted as part of the staffing required for safe and effective care in that setting. Placements should enable students to learn to provide safe and effective care, not merely to observe; students can and should add real value to care. The contribution students make will increase over time as they gain proficiency and they will continue to benefit from ongoing guidance and feedback. Once a student has demonstrated that they are proficient, they should be able to fulfil tasks without direct oversight. The level of supervision a student needs is based on the professional judgement of their supervisors, taking into account any associated risks and the students’ knowledge, proficiency and confidence” NMC (2018c:18).*
- Establish and maintain effective communication with other practice supervisors and the nominated practice assessor for the practice placement (or series of placements).
- Agree with the practice assessor, the contribution of the practice supervisor to the student’s practice placement review meetings, such as providing feedback or attending the meeting.
- Encourage students to develop feedback seeking behaviours (Allen and Molloy 2017) and ensure that any informal dialogue or suggested areas for improvement are named as student feedback (Adamson et al 2018).
- Understand, raise and respond to concerns about a students’ conduct and competence using the AEIs policy and process. The practice supervisor will inform the practice assessor, academic assessor and PEF / CHEF when they have concerns about a students’ conduct, competence or progress.
- Understand and utilise the national approaches for student learning in practice, to include the Scottish Practice Assessment Document, raising concerns in practice guidance (NMC 2018i and Strachan et al 2018) and Quality Standards for Practice Placements (QSPP) (NES 2008b).
- Encourage pre-registration students to provide feedback on their practice placement and / or practice learning experience through Quality Management of the Practice Learning Experience¹⁸ web-resource (QMPLE).
- Contribute towards educational audits of the practice placement, and in discussion with senior charge nurses / midwives / team leaders / care home and social care managers, act on feedback received from students to improve and enhance the quality and safety of the learning environment.

¹⁸ Further information on QMPLE available at: [www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/quality-management-of-the-practice-learning-environment-\(qmple\).aspx](http://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/quality-management-of-the-practice-learning-environment-(qmple).aspx)

The following figure is an example of the different types of supervisory relationship practice supervisors may have with a pre-registration student nurse during an eight-week practice placement, where practice supervisor A is the nominated person for student support and to address student concerns.

Week 1	Practice supervisor A undertakes student orientation and induction to practice placement.
Week 2	Practice supervisors A, B, C and D supervise the student, observe clinical skill and proficiency development and record in PAD.
Week 3	Practice supervisors A, C, E and F supervise the student, observe communication and professional conduct development and record in PAD.
Week 4	Practice supervisor G supervises the student during a spoke placement contributing towards health promotion and risk assessments and records in PAD. Practice supervisors B and C observe student develop clinical skills and proficiency.
Week 5	Practice supervisors A, C, E and F supervise the student, observe communication and professional conduct development and record in PAD.
Week 6	Practice supervisor H supervises the student contributing towards assessment and planning of nursing care for long term health conditions.
Week 7	Practice supervisors A, B and C observe the student develop clinical skills and proficiency.
Week 8	Practice supervisors A, C, E and F supervise the student, observe communication, leadership and professional conduct development and record in PAD.

Figure 6 – Community / social care student practice placement and relationship to practice supervisors (A – district nurse who is the nominated practice supervisor) (B, C, D, E – community nurses practice), (F- social worker), (G – occupational therapist), (H – general practice nurse).

At the beginning of the practice placement - practice supervisor A and student have initial meeting to discuss student's learning needs & agreed dates for interim & final assessment. Practice supervisor A also agrees with the practice assessor who will be attending student interim and final practice placement review meetings.

Throughout the practice placement - Practice supervisor A supervises the student, records observations in the PAD and provides feedback to the practice assessor. If there is a cause for concern with the students conduct or performance, practice supervisor A will seek feedback from other practice supervisors (B – H), contact and provide feedback to the practice assessor and academic assessor, and where required the PEF / CHEF for support.

3.7 How will practice supervisors be supported and developed?

Nurses, midwives and other health and social care professionals are required to participate in continuing professional development to maintain their registration with the professional regulator (NMC 2019c, HCPC 2017, GMC 2012 and SSSC 2016). Given that all nurses and midwives will, and any other registered health and social care professional *can*, become a practice supervisor, support needs and areas for professional development are likely to differ between individuals. Practice supervisors, as health and social care professionals, should be regularly reflecting in and on their supervisory role, and actively involved in determining their support needs and professional development activities.

3.8 What support is available for practice supervisors?

The NMC Realising professionalism standards expect that nursing and midwifery students will experience interprofessional supervision from other registered health and social care professionals. It is important that practice supervisors, regardless of their profession, can access appropriate support and guidance to supervise nursing and midwifery students in accordance with the NMC role and in the context of practice learning in Scotland.

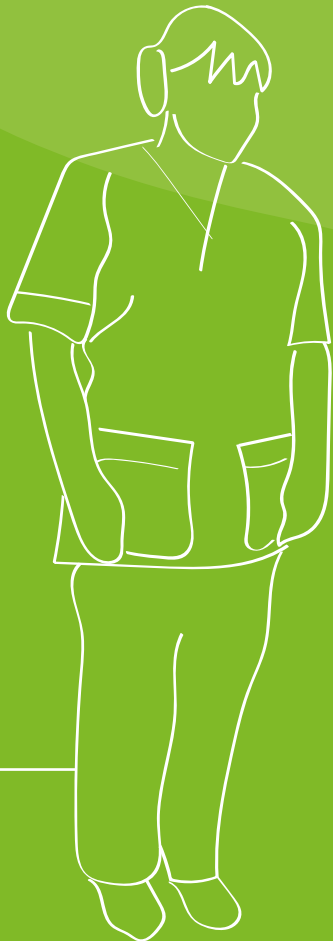
One of the main sources of support for practice supervisors, in addition to practice assessors and their line managers, will be from the AEI where the student is studying. Another source of support is the nursing, midwifery and allied health professional practice education national network and in particular the nursing and midwifery PEFs and CHEF and AHP PELs, who individually and as a national network have significant knowledge, experience and expertise in supporting those who supervise and assess student nurses, midwives and AHPs on practice placements. Further information about the roles of PEFs, CHEFs and AHP PELs is available in Section 1.5.

3.9 How can practice supervisors be developed in the role?

As with other aspects of the practice supervisor's substantive role, for example a staff nurse, midwife, care home supervisor or dietitian, identifying areas for personal and / or professional development should start with a self-reflection, appraisal or performance review process. Referring back to the NMC role and responsibilities as outlined in the reflective self-assessment template in Appendix 4 may enable practice supervisors to focus on key aspects of their supervisory relationship with students. The information below is intended to provide guidance for practice supervisors and their line managers about the types of development activities that may be useful. In addition, research evidence regarding supervision is incorporated where appropriate. For nursing and midwifery practice supervisors, it is suggested the following development activities should be undertaken:

- Effective practice learning should become a focus for discussion within annual appraisal and revalidation, for practice supervisors
- Reflection on supervisory role, feedback from students, continuing professional development hours focusing on the practice supervisor role may form part of the evidence for NMC revalidation.
- Professional development of practice supervisors may include one, a selection or all of the following, depending upon prior knowledge and experience:-
 - opportunities for interprofessional learning and development
 - undertake continuing professional development activities related to equality and diversity, reasonable adjustments in practice placements (Dickens et al 2016), unconscious or implicit bias, providing feedback about poor performance and raising a cause for concern about a student's conduct or competence
 - opportunity to discuss practice-related and individual feedback received from students and practice assessors (Flott and Linden 2016)
 - opportunities to shadow practice assessors
 - development opportunities regarding behaviours and skills-based aspects of the role, such as teaching, supervising, communication, feedback, wider professional development in relation to teaching and learning (Kilminster et al 2007:7) and identifying teaching / learning opportunities in the clinical environment, planning and incorporating structure into teaching moments (Hauck et al 2017)
 - building upon knowledge of the pre and / or post-registration programmes
 - understanding the role of PEFs, CHEFs and AHP PELs in supporting continuing professional development
 - utilising relevant educational resources, examples of which are shown in Appendix 5.

4

PRACTICE
ASSESSORS

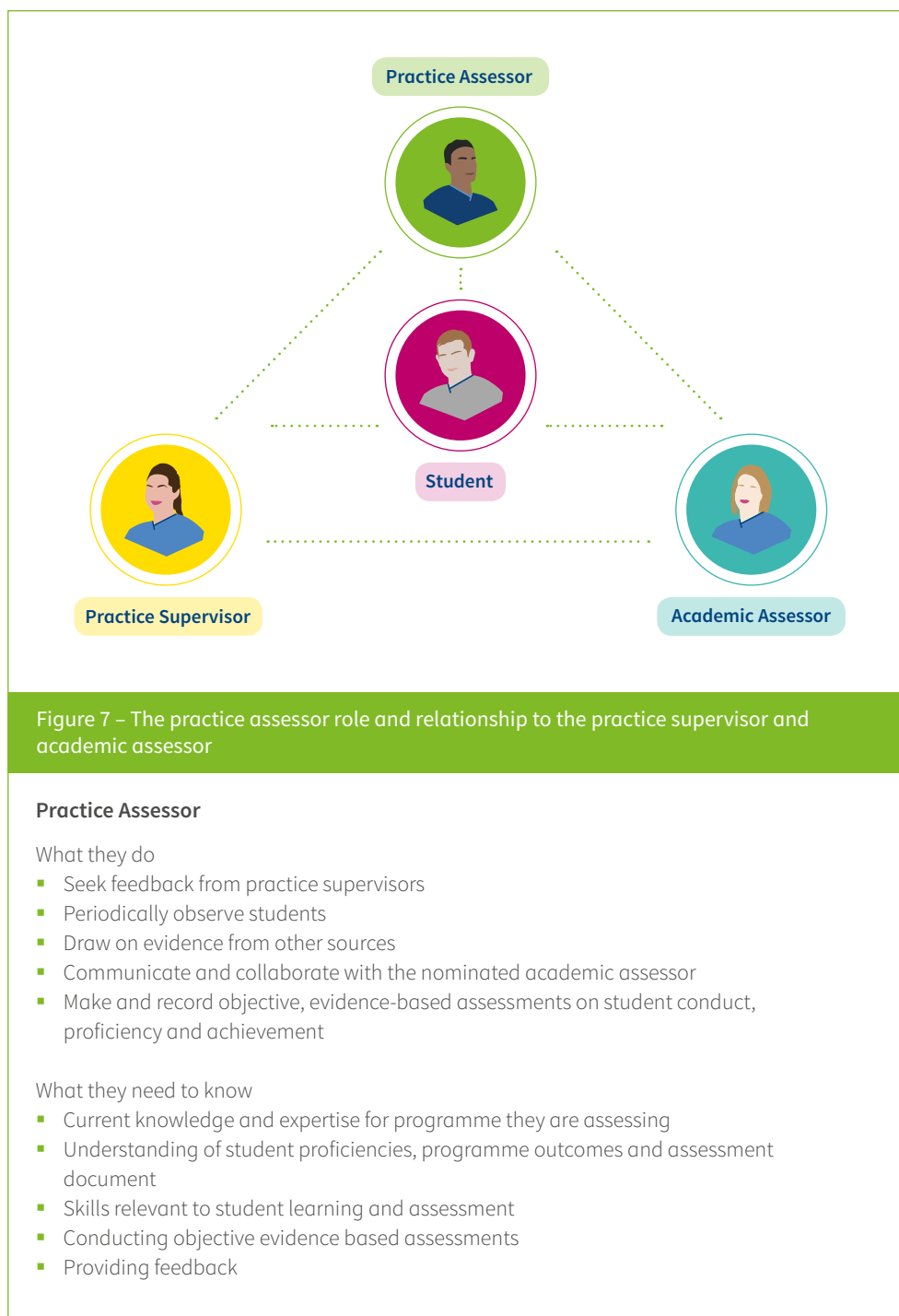
4.1 Practice Assessors

The practice assessor role has a regulatory function, in that it is a requirement for all student nurses and midwives, returners to practice and for nurses and midwives studying for NMC approved post-registration qualifications, such as specialist community public health, to be assigned to a nominated nurse or midwife practice assessor for a practice placement or a series of practice placements.

The practice assessor is one of the sources of support for students, along with the practice supervisor and academic assessor and other staff, such as senior charge nurses / midwives, team leaders or care home managers. The practice assessor role differs from the practice supervisor through seeking feedback from practice supervisors regarding student conduct and performance during practice placements to inform assessment decisions of students. During each part¹⁹ of the programme, at least one of the practice assessors, in partnership with the nominated academic assessor, will communicate and collaborate to evaluate and recommend the student for progression.

The relationship between the role of practice assessor, practice supervisor and academic assessor in supervising and assessing students is summarised in Figure 7.

¹⁹ For pre-registration programmes, a part of the programme is normally a year but as the length of a part is programme specific check with your local AEI the definition of 'a part' for the NMC approved pre or post registration programme the student is undertaking.



²⁰ Nurses and midwives undertaking prescribing programmes must be assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking (NMC 2018e:12)

4.2 Who can be a practice assessor?

A practice assessor will be an appropriately prepared registered nurse, midwife, or specialist community public health nurse (SCPHN). For prescribing programmes, the practice assessor can be any appropriately prepared qualified and experienced prescriber. A practice assessor assesses a student's learning for a practice placement or series of practice placements. Nursing students will have a registered nurse, with appropriate equivalent experience for the student's field of practice, as their nominated practice assessor for one or more practice placements as illustrated in the examples in Box 5.

Box 5 – Some examples of practice assessors for nursing fields of practice

Practice assessor with the same field of practice – child health

Ian is a children's nurse and works in the emergency department of a hospital. Ian is a mentor, has kept his mentoring experience up to date and is active on the mentor register as at September 2020. After completion of the transitional arrangements outlined in Section 2, he can be a practice assessor for child health student nurses.

Practice assessor with the same field of practice – adult field

Leona is a district nurse and a practice teacher. After undertaking the transitional arrangements in section 2 of this framework, Leona can be a practice assessor for adult student nurses.

Practice assessor with appropriate equivalent experience for mental health field of practice. Ken is an adult nurse, and in the last 6 years he has worked in the emergency department as part of the mental health crisis team and more recently as a charge nurse in the drug and alcohol community outreach service. After undertaking preparation Ken can be a practice assessor for mental health student nurses.

Practice assessor with appropriate equivalent experience for adult field of practice. Claire is a children's nurse and has worked in adult theatres for a number of years. After undertaking preparation, Claire can be a practice assessor for adult student nurses.

Practice assessor with appropriate equivalent experience for learning disabilities field of practice. Beverley is a mental health and adult nurse who has worked as part of a learning disability team in hospital and the community for the last 5 years. After undertaking preparation, Beverley can be a practice assessor for learning disability students.

Similarly, specialist community public health nurse students will have registered SCPHN with appropriate equivalent experience for the post-registration student's field of practice as their nominated practice assessor.

Student midwives will have registered midwives as their nominated practice assessors.

Nurses and midwives studying for post-registration prescribing programmes can have a registered healthcare professional who is a qualified prescriber as their nominated practice assessor as illustrated in Box 6 below.

Box 6 – Practice assessor for prescribing programmes

Nurse and midwifery practice assessor for prescribing

Carol is an advanced nurse practitioner in the out of hours / hospital at night team and an independent prescriber. Upon completion of relevant preparation, Carol can be a practice supervisor for nurses and midwives studying prescribing programmes and a practice assessor for nurses and midwives undertaking the independent prescribing programme.

Healthcare professional and prescriber practice assessor

Jamie is a community pharmacist and a prescriber. After undertaking appropriate preparation and development, Jamie can be a practice assessor for nurses and midwives studying on prescribing programmes in accordance with the programme standards.

There may be exceptional circumstances when it would not be appropriate for a nurse or midwife (or other health professional in the case of prescribing programmes) to act as a practice assessor. This may include, but is not limited to; registrants who have capability or competence action plans in place and / or undergoing a fitness to practice process.

4.3 How will practice assessors be prepared?

The practice assessor is expected to communicate and collaborate with the academic assessor and given the outcomes within the standards for student supervision and assessment (NMC 2018b) for both roles are comparable; it is therefore suggested, that at least one aspect of practice assessor preparation is undertaken in conjunction with the preparation of academic assessors.

- Undertake preparation or evidence prior learning and experience that enables them to demonstrate achievement of the following minimum outcomes
 - Interpersonal communication skills, relevant to student learning and assessment
 - Conducting objective, evidence based assessments of students
 - Providing constructive feedback to facilitate professional development in others, and
 - Knowledge of the assessment process and their role in it
- Receive ongoing support and training to reflect and develop in their role
- Continue to proactively develop their professional practice and knowledge in order to fulfil their role, and
- have an understanding of the proficiencies and programme outcomes that the student they assess is aiming to achieve (NMC 2018:10).

Evidence has shown that assessing students in clinical practice as part of pre-registration programmes and colleagues undertaking post-registration development is a complex and advanced role that requires individuals to be appropriately prepared (Carlson and Bengtsson 2015, Hughes et al 2019 and Wilkes 2011).

The practice assessor is expected to communicate and collaborate with the academic assessor; it is therefore suggested, that at least one aspect of practice assessor preparation is undertaken in conjunction with the preparation of academic assessors.

For nurses and midwives not already a mentor, sign-off mentor or practice teacher, preparation to become a practice assessor will include a selection or all of the following, depending upon their prior knowledge and experience:-

- Discuss with the line manager and inform the local PEF or CHEF of intention to become a practice assessor.
- Read and become familiar with the NMC Standards for student supervision and assessment (NMC 2018b) and all of section 6 within this document.
- Undertake a reflective self-assessment to consider what knowledge, skills and experience transferring to the practice assessor role. A template is provided in Appendix 8. Discuss any areas for development with the line manager.
- Undertake a preparation programme developed collaboratively, with the support of NES, between approved education institutions and their practice learning partners.
- Undertake development activities related to the practice assessor role minimum outcomes on page 10 of the NMC standards for student supervision and assessment (NMC 2018b) such as:
 - understanding their role in preserving public safety, role modelling, identification of learning needs, equality and diversity, reasonable adjustments in practice placements (Dickens et al 2016), providing constructive feedback, raising a cause for concern about a student's conduct or competence and AEI fitness to practice processes (Haycock-Stuart et al 2014).
 - methods of competence assessment, resilience and strategies for responding to students who challenge assessment decisions and assessment of borderline and underperforming students (Hughes et al 2019).



4.4 What does the NMC expect of a practice assessor?

The practice assessor role is to assess the student's overall performance and confirm the student's achievement of practice learning for a placement or a series of placements. The NMC define the practice assessor role and responsibilities as shown below.

The practice assessor will:

- Conduct assessments to confirm student achievement of proficiencies and programme outcomes for practice learning
- Inform their assessment decisions by feedback sought and received from practice supervisors
- Make and record objective, evidence-based assessments on conduct, proficiency and achievement, drawing on student records, direct observations, student self-reflection, and other sources
- Maintain current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing
- Work in partnership with the nominated academic assessor to evaluate and recommend the student for progression for each part of the programme, in line with programme standards and local and national policies
- Have sufficient opportunities to periodically observe the student across environments in order to inform decisions for assessment and progression
- Have an understanding of the student's learning and achievement in theory
- Communicate and collaborate with academic assessors at scheduled relevant points in the programme structure and student progression
- Not simultaneously be the practice supervisor and academic assessor for the same student, and
- For students on NMC approved prescribing programmes support learning in line with the NMC Standards for *prescribing programmes* (NMC 2018b:9).

Practice assessors should read the [NMC standards for student supervision and assessment](#) and the [NMC supporting information on practice assessment](#). These documents should be used when starting to undertake the role of practice assessor and periodically to reflect on practice as an assessor of students.

4.5 How might the practice assessor role be undertaken in Scotland?

The practice assessor role in Scotland will reflect the unique nature of interprofessional working across health and social care sectors, the diverse geography and scope of nursing and midwifery practice placements and incorporate Scottish Government (SG) policy drivers, such as, the Chief Nursing Officers (CNO) Nursing 2030 Vision (SG 2017a) and The Best Start for Maternity and Neonatal Care (2017b).

The practice assessor role may have a specific practice placement focus, for example, responsibility for a ward or a community nursing / midwifery placement, or a wider remit, such as overseeing a series of community or social care placements. Whatever the remit or reach, as the nominated practice assessor, the role has a significant focus on using evidence from a number of sources (practice supervisors, students, patients, carers and other colleagues) in making an assessment decision about the students' conduct and performance. The practice assessor, in a similar way to the academic assessor, is therefore a profession specific role and is one of a number of gatekeepers for entry to the nursing and midwifery professional register.

To ensure students have safe and effective learning experiences the NMC require that *“there is a nominated person for each practice setting to actively support students and address student concerns”* (NMC 2018b:5) and *“there is sufficient coordination and continuity of support and supervision of students...”* (NMC 2018b:6). In Scotland, it has been agreed that each student will have a practice supervisor as their nominated person for student support and to address student concerns. Practice assessors should be aware of the practice supervisors for their practice area and know which practice supervisor has been nominated as the person to have oversight of the students' overall practice placement experience.

Approved education institutions, together with practice learning partners are required to meet the NMC standards and requirements for educators and assessors as shown in Appendix 6. Of particular note for practice assessors are the requirements to ensure practice placements *“have the capacity, facilities and resources in place to deliver safe and effective learning opportunities and practical experiences for students as required by their programme learning outcomes”* (NMC 2018a:8) and educators and assessors to *“have supported time and resources to enable them to fulfil their roles in addition to their other professional responsibilities”* and *“liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment”* (NMC 2018a:11). This may include practice assessors having time to; participate in student orientation and induction, contribute towards student review meetings, seek feedback from practice supervisors and other colleagues, provide feedback to students, complete practice assessment documentation and communicate with the nominated academic assessor for the student. Students who require reasonable adjustments or underperforming students may need additional time and this should be agreed at a local level.

4.6 What will the practice assessor do?

The following bullet points provide a practical interpretation of how the NMC requirements for the practice assessor role may be undertaken. Research evidence of relevance for the practice assessor role is available in Appendix 7.

A practice assessor may:

- Contribute towards students' induction and orientation to the practice placement as required by practice supervisors. This may include contributing to an initial meeting with the student, identifying student learning outcomes and agreeing dates for the interim and final performance review meetings.
- Maximise the interprofessional learning opportunities for students. This may include an overview of the different health and social care professions that the student will encounter as part of the induction and orientation process and throughout their practice placement experience.
- Contribute towards the continuity and coordination of supervision through liaison with practice supervisors, students and other members of the team.
- Make reference to the NMC definition of supernumerary status when observing the student in practice: *“students in practice or work placed learning must be supported to learn without being counted as part of the staffing required for safe and effective care in that setting. Placements should enable students to learn to provide safe and effective care, not merely to observe; students can and should add real value to care. The contribution students make will increase over time as they gain proficiency and they will continue to benefit from ongoing guidance and feedback. Once a student has demonstrated that they are proficient, they should be able to fulfil tasks without direct oversight. The level of supervision a student needs is based on the professional judgement of their supervisors, taking into account any associated risks and the students' knowledge, proficiency and confidence” NMC (2018c:18).*
- Establish and maintain effective communication and collaboration with practice supervisors (information seeking and feedback) and the nominated academic assessor (making progression decisions) for the individual student (see Figures 8 and 9 below) as shown in Appendix 9.
- Discuss and agree the practice supervisor's contribution to the student's review meetings

- Encourage students to develop feedback seeking behaviours (Allen and Molloy 2017) and ensure that any informal dialogue or suggested areas for improvement are named as student feedback (Adamson et al 2018).
- Understand, raise and respond to concerns about a students' conduct and competence using the AEIs policy and process. The practice assessor will gather evidence from the nominated practice supervisor and other supervisors, discuss with the academic assessor and PEF / CHEF where they have concerns about a students' conduct, competence or progress, develop a development support plan and be involved in any subsequent AEI fitness to practice processes (NMC 2019c:18, Hughes et al 2019).
- Understand and utilise the national approaches for student learning in practice, to include the Scottish Practice Assessment Document (PAD), raising concerns in practice guidance (NMC 2018i and Strachan et al 2018) and Quality Standards for Practice Placements (NES 2008b).
- Contribute towards student practice placement review meetings.
- Undertake objective and evidence based assessment decisions and accurately record the rationale and outcome of these decisions in the students' PAD.
- Encourage pre-registration students to provide feedback on their practice placement and / or practice learning experience through Quality Management of the Practice Learning Experience²¹ web-resource (QMPLE).
- Contribute towards educational audits of the practice placement and in discussion with senior charge nurses / midwives / team leaders / care home and other managers, act on feedback received from students to improve and enhance the quality and safety of the learning environment.
- Provide feedback to practice supervisors on key aspects of their role such as, facilitating learning, teaching and feedback skills and their documented supervised practice in the students PAD (Flott and Linden 2016).

Figure 8 provides an example of a practice assessor's relationship with the pre-registration student nurse and practice supervisors during the practice placement where it is *not related to progression*, for example the pre-registration student's second practice placement in year 1.

²¹ Further information on QMPLE available at: [www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/quality-management-of-the-practice-learning-environment-\(qmple\).aspx](http://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/quality-management-of-the-practice-learning-environment-(qmple).aspx)

Week 1	Practice supervisor A undertakes student orientation and induction to practice placement.
Week 2	Practice supervisors A, B, C and D supervise the student, observe clinical skill and proficiency development and record in PAD.
Week 3	Practice supervisors E and F supervise the student, observe communication and professional conduct development and record in PAD.
Week 4	Practice supervisors A, B and C observe student develop clinical skills and proficiency.
Week 5	Practice supervisors A, C, E and F supervise the student, observe communication and professional conduct development and record in PAD.
Week 6	Practice supervisors G and H supervise the student contributing towards assessment and planning of nursing care and multi-disciplinary team working during spoke placement
Week 7	Practice supervisors B and C observe the student develop clinical skills and proficiency.
Week 8	Practice supervisors A, C, E and F supervise the student, observe communication, leadership and professional conduct development and record in PAD.

Figure 8 – Practice assessor relationship to the student nurse and practice supervisors during a practice placement, where practice supervisor A is the nominated practice supervisor.

At the beginning of the practice placement – the practice assessor may participate in the student orientation and induction through discussion regarding learning outcomes, learning plan and agreeing dates for interim review and final assessment and records this in the PAD.

Throughout the practice placement or series of practice placements – the practice assessor, where possible, creates opportunities to observe the student, such as during handovers, team meetings and / or when providing nursing or midwifery care and seeks feedback from practice supervisors.

During week 4 or 5 - The practice assessor and / or the nominated practice supervisor undertake the student's interim review meeting and records this in the PAD.

Towards the end of the practice placement - the practice assessor draws on evidence from other sources (practice supervisors, service users and carers, student reflections and other colleagues) and their own observations to undertake a fair and objective assessment of the student's conduct, proficiency and achievement of their learning outcomes and records this in the PAD.

If there is a cause for concern with the students conduct or performance, the practice assessor will seek feedback from other practice supervisors, contact and provide feedback to the academic assessor, and where required the PEF / CHEF for support.

Figure 9 demonstrates the practice assessor's relationship with the pre-registration student nurse, practice supervisors and academic assessor during the practice placement where *it is related to progression*, for example the final practice placement in year 2 for pre-registration students.

Week 1	Practice supervisor A undertakes student orientation and induction to practice placement.
Week 2	Practice supervisors A, B, C and D supervise the student, observe clinical skill and proficiency development and record in PAD.
Week 3	Practice supervisors E and F supervise the student, observe communication and professional conduct development and record in PAD.
Week 4	Practice supervisors A, B and C observe student develop clinical skills and proficiency.
Week 5	Practice supervisors A, C, E and F supervise the student, observe communication and professional conduct development and record in PAD.
Week 6	Practice supervisors G and H supervise the student contributing towards assessment and planning of nursing care and multi-disciplinary team working during spoke placement
Week 7	Practice supervisors B and C observe the student develop clinical skills and proficiency.
Week 8	Practice supervisors A, C, E and F supervise the student, observe communication, leadership and professional conduct development and record in PAD.

Figure 9 – Practice assessor relationship to the student nurse, practice supervisors and academic assessor during a practice placement related to progression, where 'A' is the nominated practice supervisor for the student.

At the beginning of the practice placement – the practice assessor may participate in the student orientation and induction through discussion regarding learning outcomes, learning plan and agreeing dates for interim review and final assessment and records this in the PAD. Academic assessor and practice assessor agree how they will communicate and collaborate for this particular student.

Throughout the practice placement – the practice assessor, where possible, creates opportunities to observe the student, such as during handovers, team meetings and / or when providing nursing or midwifery care and seeks feedback from practice supervisors.

During week 4 or 5 - The practice assessor and / or the nominated practice supervisor undertake the student's interim review meeting and records this in the PAD.

Towards the end of the practice placement - the practice assessor draws on evidence from other sources (practice supervisors, service users and carers, student reflections and other colleagues) and their own observations to undertake a fair and objective assessment of the student's conduct, proficiency and achievement of their learning outcomes and records this in the PAD. Practice assessor and academic assessor collaborate to evaluate evidence of the students conduct and performance and make recommendation for the student:-

- 1) to progress to year 3 of the programme OR
- 2) not to progress, raise and refer their concerns using AEI process and agree how to help the student improve their evidence, where appropriate.

If there is a cause for concern with the students conduct or performance, the practice assessor will seek feedback from other practice supervisors, contact and provide feedback to the academic assessor, and where required the PEF / CHEF for support.

4.7 How will practice assessors be supported and developed?

All nurses and midwives are required to participate in 35 hours of continuing professional development to renew their registration and revalidate every three years with the NMC (NMC 2019c).

Practice assessors, as registered nurses and midwives, should be regularly reflecting in and on their assessor role, and actively involved in determining their support needs and professional development activities (NMC 2019c). The information contained below is therefore intended to provide general guidance for practice assessors and their line managers.

4.8 What support is available for practice assessors?

In Scotland it is well known (Carlisle et al 2008, McGuinness 2015 and NES 2013b) that assessors of nursing and midwifery students on practice placements should have access to appropriate support and guidance to navigate and negotiate the complex decision-making processes they undertake to ensure students are fit for practice.

The main sources of support for practice assessors, in addition to their practice colleagues and line managers, will be from the AEI where the student is studying, academic assessors and from the nursing and midwifery practice education national network. The PEFs and CHEFs in particular, individually and as a national network have significant knowledge, experience and expertise in supporting those who supervise and assess students on practice placements. Further information about the roles of PEFs and CHEFs is available within section 1.5 of this document.

4.9 How can practice assessors be developed in the role?

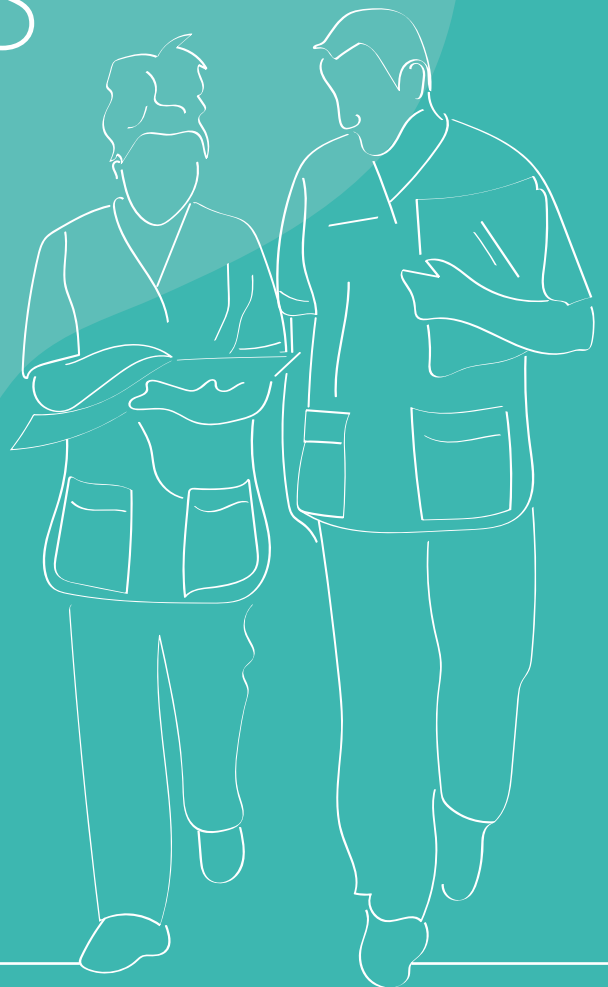
In a similar way to other aspects of the practice assessors' substantive role, for example a staff nurse, midwife, care home or community nurse, identifying areas for personal and / or professional development start with a self-reflection, appraisal or performance review process. The information outlined below is therefore intended to provide guidance for practice assessors and their line managers about the types of development activities that may be useful.

Professional development of practice assessors should include the first two bullet points and may include a selection or all of the remaining, depending upon prior knowledge and experience:-

- Effective practice learning should become a focus for discussion within annual appraisal and revalidation.
- Reflection on student assessment, feedback from students, practice supervisors or academic assessors and continuing professional development hours focusing on the practice assessor role may form part of the evidence for NMC revalidation.
- Undertake continuing professional development activities related to equality and diversity, reasonable adjustments in practice placements (Dickens et al 2016), unconscious or implicit bias, providing feedback about poor performance and raising a cause for concern about a student's conduct or competence.
- Undertake development activities related to methods of competence assessment, resilience and strategies for responding to students who challenge assessment decisions, assessment of borderline and underperforming students, providing feedback about performance (Hughes et al 2019) and AEI fitness to practice processes (Haycock-Stuart et al 2014).
- Opportunity to explore / discuss practice related and individual feedback received from students, practice supervisors, academic assessors and PEFs or CHEFs.
- Undertake development opportunities related to self-assessment, critical reasoning and reflection as educational tools (Carlson and Bengtsson 2015 and Bengtsson and Carlson 2015).
- Building on the practice assessor role regarding adult learning theories, teaching and skills- based aspects of the role – teaching, supervising, communication, feedback AND wider professional development in relation to teaching and learning (Bengtsson and Carlson 2015 and Kilminster et al 2007:7), utilising relevant educational resources, examples of which are shown in Appendix 5.
- Enhancing knowledge of the academic environment, including curriculum content, delivery and assessment methodologies and the research and science of higher education (Bengtsson and Carlson 2015).

5

ACADEMIC ASSESSORS



5.1 Academic assessors

The academic assessor has a regulatory function in a similar way to the practice assessor, in that it is a requirement for all student nurses and midwives, returners to practice, and nurses and midwives studying for NMC approved post-registration qualifications, such as specialist community public health, to be assigned to a different nominated academic assessor for each part of the education programme. The academic assessor role reflects the way learning and assessment is structured in the academic environment, and their role in collating and confirming the student's academic achievement. The academic assessor, in partnership with a nominated practice assessor, will communicate and collaborate to conduct assessments related to student achievement of proficiencies and programme outcomes for progression from one part* of the programme to another. The role of the academic assessor and their relationship with the practice assessor in collating evidence and assessing students is summarised in Figure 10 below.

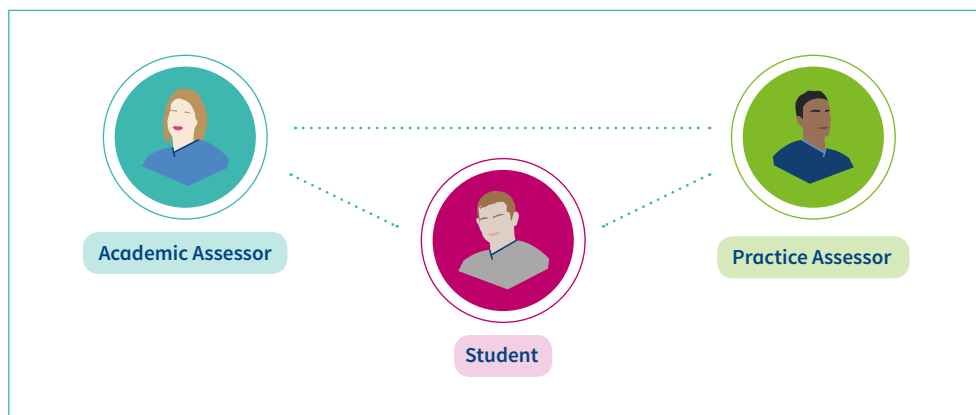


Figure 10 – The academic assessor role and relationship to the practice assessor and student

Academic Assessor

What they do

- Draw on evidence from other sources, which may include practice supervisor observations, where appropriate
- Communicate and collaborate with practice assessors
- Make and record objective, evidence-based assessments on student conduct, proficiency and achievement.
- In partnership with the practice assessor, make recommendations for progression for a part of the programme

What they need to know

- Adult learning theories and teaching
- Current knowledge and expertise for programme they are assessing
- Understanding of student proficiencies, programme outcomes and assessment document
- Conducting objective evidence based assessments
- Providing feedback

* For pre-registration programmes, a part of the programme is normally a year but as the length of a part is AEI programme specific the definition of 'a part' is defined within the programme documentation of NMC approved pre or post registration programmes that students are undertaking.

5.2 Who can be an academic assessor?

Academic assessors are nursing and midwifery²² lecturers within an AEI, who assess a student's learning for a part of the programme of education.

The academic assessor who has been prepared and supported to take up their role, are working towards or hold relevant qualifications required by their academic institution (such as a Post Graduate Certificate in teaching and learning and / or a Fellow of the Higher Education Academy²³ (HEA 2011), Appendix 10) and have current knowledge and experience relevant for the proficiencies and outcomes for a part or the whole programme they are assessing (NMC 2018b and NMC 2019d).

This means that student nurses will have a different registered nurse, with appropriate equivalent experience for the student's field of practice, as their nominated academic assessor for each part of the education programme as shown below.

Box 7 – Examples of academic assessors for nursing fields of practice

Learning disabilities

A learning disabilities registered nurse lecturer can be an academic assessor for pre-registration learning disabilities nursing students

Child

A children's registered nurse lecturer can be an academic assessor for pre-registration children's nursing students

Mental Health

An adult registered nurse lecturer with extensive experience in mental health services can be an academic assessor for pre-registration mental health nursing students.

Adult

A mental health registered nurse lecturer with significant post-registration experience and continuing professional development with older adults can be an academic assessor for adult nursing students.

²² or in the case of prescribing programmes, a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking (NMC 2018e)

²³ www.heacademy.ac.uk/

Similarly, specialist community public health nurse students will have a registered SCPHN lecturer with appropriate equivalent experience for the post-registration student's field of practice.

Student midwives will have midwifery lecturers as their nominated academic assessors.

Nurses and midwives studying for post-registration prescribing programmes should be assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking.

Academic assessors who also have a role in the practice setting, such as lecturer / practitioner or sessional / part time practice posts, cannot be the nominated academic assessor and a practice supervisor and / or a practice assessor for the same student for the same part of the programme.

In exceptional circumstances it would not be appropriate for a nurse or midwife (or other health professional in the case of prescribing programmes) to act as an academic assessor. This may include, but is not limited to; NMC (GMC or GPC) registrants who have capability or competence action plans in place and / or who are undergoing a fitness to practice process.

5.3 How will academic assessors be prepared?

The NMC require approved education institutions, together with practice learning partners to ensure that academic assessors:

- Are working towards or hold relevant qualifications as required by their academic institution and local and national policies
- Demonstrate that they have achieved the following minimum outcomes:
 - interpersonal communication skills, relevant to student learning and assessment
 - conducting objective, evidence based assessments of students
 - providing constructive feedback to facilitate professional development in others, and
 - knowledge of the assessment process and their role in it
- Receive ongoing support and training to reflect and develop in their role
- Continue to proactively develop their professional practice and knowledge in order to fulfil their role, and
- Have an understanding of the proficiencies and programme outcomes that the student they assess is aiming to achieve (NMC 2018b:11).

In addition to the above requirements, research has shown (Riner and Billings, and Scanlan as cited in Luhanga et al 2015) that preparation is required by academic colleagues when they are directly involved in or support the decision-making processes about the performance of pre-registration students in practice.

The academic assessor is expected to communicate and collaborate with the practice assessor and given the outcomes within the standards for student supervision and assessment (NMC 2018b) for both roles are comparable; it is therefore suggested, that at least one aspect of practice assessor preparation is undertaken in conjunction with the preparation of academic assessors

For nursing and midwifery lecturers without prior experience, preparation will include a selection or all of the following:-

- Inform the programme leader of intention to become an academic assessor.
- Read and become familiar with the NMC Standards for student supervision and assessment (NMC 2018b) and all of section 7 within this document.
- Undertake a reflective self-assessment to consider what knowledge, skills and experience transferring to the academic assessor role. A template is provided in Appendix 11. Discuss any areas for development with line manager / programme leader.
- Work towards a teaching qualification and / or recognition as a Fellow from the UK Professional Standards Framework for teaching and supporting learning in higher education (HEA 2011) (see Appendix 10).
- Undertake development activities related to the academic assessor role minimum outcomes on page 13 of the NMC standards for student supervision and assessment (NMC 2018b) such as:
 - understanding the academic assessor role in preserving public safety, role modelling, identification of learning needs, equality and diversity, reasonable adjustments in practice placements (Dickens et al 2016), providing constructive feedback about performance (Hughes et al 2019) and raising a cause for concern about a student's conduct or competence.
 - conducting objective and evidence based assessments, resilience and strategies for responding to students who challenge assessment decisions, assessment of borderline and underperforming students and AEI fitness to practice processes (Haycock-Stuart et al 2014).

5.4 What does the NMC expect of an academic assessor?

The academic assessor role is to collate and confirm the achievement of proficiencies and programme outcomes in academic learning for the students they are assigned to. The NMC describe the academic assessor role and responsibilities as shown below.

The academic assessor will:

- collate and confirm student achievement of proficiencies and programme outcomes in the academic environment for each part of the programme
- make and record objective, evidence-based decisions on conduct, proficiency and achievement and recommendations for progression, drawing on student records and other sources
- maintain current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing and confirming
- work in partnership with a nominated practice assessor to evaluate and recommend the student for progression for each part of the programme, in line with programme standards and local and national policies
- have an understanding of the student's learning and achievement in practice
- communicate and collaborate with practice assessors at scheduled relevant points in programme structure and student progression, and
- not simultaneously be the practice supervisor and practice assessor for the same student (NMC 2018b:10).

Academic assessors are recommended to read the [NMC Standards for student supervision and assessment](#) and the [NMC supporting information on academic assessment](#). These documents should be used when starting to undertake the role of academic assessor, to periodically to reflect on practice as an assessor of students and which can be used towards revalidation with the NMC.

5.5 How might the academic assessor role be undertaken in Scotland?

The academic assessor role will comply with the NMC standards for student supervision and assessment, be undertaken in the context of the Council of Deans of Health Scotland²⁴ strategic aims and the diverse nature of nursing and midwifery approved education institutions, academic and practice partnerships, practice placements and academic career pathways across Scotland. In Scotland, there is well-established national collaboration for pre-registration nursing and midwifery programmes delivered through the Scottish collaboration for the enhancement of pre-registration nursing (SCEPRN²⁵), the midwifery education group Scotland (MEGS²⁶) and the non-medical prescribing education and practice leads groups.

The academic assessor role may have responsibility for a specific module(s), a number of practice placements or a wider remit within the AEI. Whatever the role of the academic assessor within the academic environment, they will also have an oversight of their assigned student's progress towards the academic learning outcomes for the part of the programme they are responsible for. This means the nominated academic assessor will draw on evidence from other sources, (such as module leaders, lecturers, link lecturers) to make a judgement about the students' achievement in the academic environment. When a student's academic and practice placement achievements are related to their progression within (or completing) the programme, then the academic assessor will, in partnership with the practice assessor, make a recommendation about the student. The academic assessor, in a similar way to the practice assessor, is therefore a profession specific role and is one of a number of gatekeepers for entry to the nursing and midwifery professional register.

²⁴ Further information available at: <https://councilofdeans.org.uk/nations-and-regions/council-of-deans-of-health-scotland/>

²⁵ Further information on SCEPRN is available at: www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/managers-and-educators/pre-registration-nursing-and-midwifery-programme/performance-enhancement.aspx

²⁶ Further information on MEGS available at: www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/managers-and-educators/pre-registration-nursing-and-midwifery-programme/pre-registration-midwifery-education.aspx

Approved education institutions, together with practice learning partners are required to meet the NMC standards and requirements for educators and assessors as shown in Appendix 6. Of particular note for academic assessors is the requirement for AEs and practice partners to “adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes” (NMC 2018a:7) and to ensure that all educators and assessors “have supported time and resources to enable them to fulfil their roles in addition to their other professional responsibilities” (NMC 2018a:11). For academic assessors this may include having the time and authority to seek feedback from academic and practice colleagues, collate evidence and collaborate with the practice assessor to undertake student assessments, attend review meetings, provide feedback to students, complete practice assessment documentation. Students who require reasonable adjustments or underperforming students may require additional support and time and this should be agreed at a local level.

5.6 What will the academic assessor do?

The following bullet points provide a practical interpretation of how the NMC requirements for the academic assessor role may be undertaken. Research evidence of relevance for the academic assessor role is available in Appendix 7.

An academic assessor may:

- Receive a handover about the student from the previous academic assessor regarding their recommendations, including any areas of good / excellent practice, particular issues or points for consideration.
- Establish and maintain effective communication with academic colleagues (information seeking and feedback) the nominated practice assessor (making progression decisions) and practice supervisors, where appropriate, for the individual student (see Appendix 9).
- Agree with the nominated practice assessor their respective contribution to the student’s final performance review meeting, such as providing feedback or attending the meeting, where it is related to progression from one part of the programme.
- For some students, schedule meetings at relevant points within the programme, e.g. when concerns have been raised about student conduct or competence or supporting students with reasonable adjustments.

- Encourage students to develop feedback seeking behaviours (Allen and Molloy 2017) and ensure that any informal dialogue or suggested areas for improvement are named as student feedback (Adamson et al 2018).
- Understand, raise and respond to concerns about a students' conduct and competence using the AEIs policy and process. The academic assessor will discuss with the practice assessor and PEF / CHEF where relevant, any concerns about a students' conduct, competence or progress, support the development of an action plan and be involved in any subsequent AEI fitness to practice processes (NMC 2019d:18, Hughes et al 2019).
- Understand and utilise the national approaches for student learning in practice, to include but not limited to the Scottish Practice Assessment Document (PAD) and raising concerns in practice guidance (NMC 2018i and Strachan et al 2018).
- Communicate and collaborate through using for example digital technologies (Alton et al 2018), telephone, face to face or through other written means with the practice assessor to undertake objective, evidence based assessment decisions for student progression and accurately record the rationale and outcome of these decisions in the student's PAD.
- Encourage pre-registration students to provide feedback on their practice placement experience through Quality Management of the Practice Learning Experience²⁷ web-resource (QMPLE).
- Provide feedback to practice assessors on key aspects of their role such as, collating evidence from other sources, undertaking fair and objective evidence based assessment decisions, raising and responding to a cause for concern about a student's performance or conduct, providing feedback to students and their documented assessments in the students PAD (Flott and Linden 2016).
- Handover responsibility for the student to the next academic assessor, including record keeping of their recommendations, any particular issues or points to consider. As part of the handover, provide feedback to the student, letting them know where they are doing well and / or need to improve and how they may be able to do this.

²⁷ [www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/quality-management-of-the-practice-learning-environment-\(qmple\).aspx](http://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/quality-management-of-the-practice-learning-environment-(qmple).aspx)

5.7 How will academic assessors be supported and developed?

All nurses and midwives, whatever their scope of practice such as clinical practice, research or education, are required to participate in 35 hours of continuing professional development to renew their registration and revalidate with the NMC every three years (NMC 2019c).

Academic assessors may also wish, or as a Fellow may be required, to undertake continuing professional development related to the UK Professional Standards Framework teaching and supporting learning in higher education (HEA 2011) (see Appendix 10).

Regardless of their fellowship status with the HEA, as registered nurses and midwives, academic assessors should be regularly reflecting in and on their assessor role, and actively involved in determining their support needs and professional development activities (NMC 2019c). The information contained below is therefore intended to provide general guidance for academic assessors and their line managers.

5.8 What support is available for academic assessors?

The research evidence about assessors of pre- registration nursing programmes within the academic-practice environment highlights that AEs may attribute less value to the practice-related aspects of the role (Leigh 2016) and that regardless of the length of experience, there is little difference in the need for support and guidance within the role (Rinel and Billings as cited in Luhanga et al 2015).

The NMC are clear that academic assessors must be given ongoing support and time necessary for them to develop and undertake the requirements of their role. This support for academic assessors in Scotland may take a number of forms such as, from module or programme leaders, colleagues within the school or peer support from academic or practice assessor colleagues. Academic assessor support should be based on individual needs and therefore academic assessors will need to be active in undertaking self-reflection to identify their support needs and in determining who may be best placed to assist them.

As part of the early implementation of the NMC *Realising professionalism* standards, academic assessors may wish to establish peer or partnership groups and use this approach to actively seek feedback to inform their immediate support needs and ongoing development within the role.

5.9 How can academic assessors be developed in the role?

In a similar way to the other aspects of the academic assessors' substantive role within the AEI, for example a link or practice learning lecturer, identifying areas for personal and / or professional development start with a self-reflection, appraisal or performance review process. The information outlined below is therefore intended to provide guidance for academic assessors and their line managers about the types of development activities that may be useful. In addition, research evidence regarding learning in higher education and practice, is incorporated below, where appropriate.

Professional development of academic assessors may include one, a selection or all of the remaining, depending upon prior knowledge and experience:-

- Effective integration of academic and practice learning should become a focus for discussion within annual appraisal and revalidation.
- Reflection on student assessment, feedback from students, practice assessors or other colleagues and continuing professional development hours focusing on the academic assessor role may form part of evidence for NMC revalidation.
- Undertake continuing professional development activities related to equality and diversity, reasonable adjustments in practice placements (Dickens et al 2016) and the academic environment, unconscious or implicit bias, providing feedback about poor performance and raising a cause for concern about a student's conduct or competence.
- Undertake development activities related to methods of competence assessment, resilience and strategies for responding to students who challenge assessment decisions, assessment of borderline and underperforming students, providing feedback about performance (Hughes et al 2019) and AEI fitness to practice processes (Haycock-Stuart et al 2014).
- Opportunity to explore / discuss practice related and individual feedback received from students, practice assessors and other colleagues.
- Undertake development opportunities related to self-assessment, critical reasoning and reflection as educational tools (Carlson and Bengtsson 2015 and Bengtsson and Carlson 2015).
- Enhancing knowledge of the academic environment, including curriculum content, delivery and assessment methodologies and the research and science of higher education (Bengtsson and Carlson 2015).
- Opportunities to work towards recognition as a Senior Fellow from the UK Professional Standards Framework for teaching and supporting learning in higher education (HEA 2011) (see Appendix 10).

6

ORGANISATIONAL RESPONSIBILITIES



6.1 What are the organisational responsibilities for the supervisor and assessor roles?

In order for Scotland to meet the overall aim of the national health and social care workforce plan (Scottish Government 2017c and d) and address some of the workforce challenges (Scottish Government 2017a,b and Scottish Care 2016, 2017 and 2018) in ensuring safe and sustainable services, all education, health and social care organisations have a critical role to play in the preparation of the future nursing and midwifery workforce.

Overall aim of National Health and Social Care Workforce Plan:

Getting the right people into the right place, at the right time, to deliver sustainable and high quality health and social care services for Scotland's people.

The purpose of this section is to provide a high-level overview of the responsibilities of AElS together with their practice learning partners and the role of national organisations in implementing and embedding the standards for student supervision and assessment for future nurse and midwife education programmes. It should be acknowledged that education, health and social care organisations do have responsibilities beyond providing safe and effective supervision and evidence based, objective decisions about students' achievement, performance and conduct. This framework is intended to support the introduction of the new roles of practice supervisor, practice assessor and academic assessor and the organisational responsibilities outlined in this section will therefore be confined to these aspects of the NMC standards (see Appendix 6 for NMC requirements for educators and assessors and expectations of practice supervision and assessor roles).

The research evidence suggests (Forber et al 2016), that regardless of the specific model of practice learning adopted, there are a number of factors which should be recognised and addressed when introducing, adapting and sustaining practice learning. Although the research focused upon pre-registration nursing programmes, the following factors identified from the literature may have wider relevance:-

- *Centrality of relationships to promote student engagement, generate sufficient challenge, and support constructive and meaningful feedback.* The quality of the supervisory relationship influences student satisfaction with their clinical experience when this is extended to students having sufficient time to develop therapeutic interactions and a shift from a focus on patients to seeing the person. Longer placement times were enablers to developing insightful student assessment
- *Consistency and continuity in delivery must be well defined, including key roles and pathways for communication and welcoming, engaging, teaching and assessing students.* A consistent supervisor or contact person who understands and monitors students' knowledge, skills and attitude stimulates student learning and development.
- *Opportunity for varied models to increase the diversification of practice placements and extend opportunities for student learning.*
- *Validity of the model to include staffing levels and workload capacity, willingness to embrace a new model and adequate preparation and support to engage and sustain the model.*

In addition, national practice learning principles (Appendix 12) have been agreed. These national principles articulate Scotland's commitment to ensuring that practice learning environments support the ongoing development of the existing workforce and grow confident, autonomous nurses and midwives with a clear professional identity who can work in any care environment, within their field of practice, at the point of registration and beyond.

The above research evidence and national principles will be used alongside the NMC standards framework for nursing and midwifery education (NMC 2018a) to take forward implementation of the practice supervisor, practice assessor and academic assessor roles across health and social care organisations. This work will continue to be led by the Scottish Future Nurse and Midwife Programme Board²⁸ with the following groups providing a strategic or operational role in practice learning and in the delivery of the nursing and midwifery education programmes.

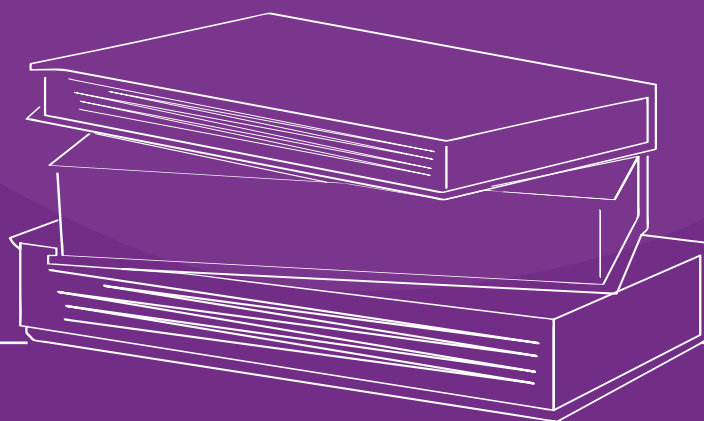
These groups include but are not limited to:

- Scottish Future Nurse and Midwife Programme Board
- Scottish Executive Nurse Directors
- Council of Deans of Health Scotland
- National Strategic Group for Practice Learning
- Scottish Collaboration for the Enhancement of Pre-registration Nursing
- Scottish Care Strategic Nursing Group
- Midwifery Education Group
- Practice Education Leads Forum and the national network of nursing and midwifery practice educators, practice education facilitators, care home education facilitators and allied health profession practice education leads groups and forums.

²⁸ Further information available at: www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/scottish-future-nurse-and-midwife-programme-board.aspx

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REFERENCES



- Adamson E, King L, Foy L, McLeod M, Traynor J, Watson W, Gray M (2018) Feedback in clinical practice: Enhancing the students' experience through action research. *Nurse Education in Practice*. 31, 48 – 53.
- Allen L, Molloy E (2017) The influence of a preceptor-student 'Daily Feedback Tool' on clinical practices in nursing education: A qualitative study. *Nurse Education Today*. 49, 57-62.
- Alton S, Luke SA, Wilder M (2018) Cost-Effective Virtual Clinical Site Visits for Nurse Practitioner Students. *The Journal of Nursing Education*. 57, 5, 308 – 311.
- Bengtsson M, Carlson E (2015) Knowledge and skills needed to improve as preceptor: development of a continuous professional development course – a qualitative study part I. *BMC Nursing*. 15, 5.
- Browning M, Pront L (2015) Supporting nursing student supervision: An assessment of an innovative approach. *Nurse Education Today*. 35, 6, 740 –745.
- Burden S, Topping AE, O'Halloran C (2018) Mentor judgements and decision-making in the assessment of student competence in practice: A mixed methods study. *Journal of Advanced Nursing*. 74, 1078 –1089.
- Carlisle C, Calman L, Ibbotson T (2008) *Evaluation of Practice Education Facilitator Project*. NHS Education for Scotland. Edinburgh. Available at: [Evaluation of PEF project](#)
- Carlson E, Bengtsson M (2015) Perceptions of preceptorship in clinical practice after completion of a continuous professional development course- a qualitative study Part II. *BMC Nursing*. 14. 41.
- Davys A, Beddoe E (2015). Interprofessional supervision: Opportunities and challenges. In L. Bostock (Ed.), *Interprofessional Staff Supervision in Adult Health and Social Care Services* (Vol. 1, pp. 37-41). Brighton, England: Pavilion Publishing.

Dickens GL, Craven R, Hallett N (2016) *Well adjusted? A systematic, integrative review of empirical research about making 'reasonable adjustments' in clinical practice placements to support pre-registration healthcare students who have a disability*. NHS Education for Scotland. Edinburgh. Available at: [Well adjusted? Reasonable adjustments in clinical practice placements](#)

D'Souza MS, Karkada SN, Parahoo K, Venkasaperumal R (2015) Perception of and satisfaction with the clinical learning environment among nursing students. *Nurse Education Today*. 35. 833 – 840.

Flott EA, Linden L (2016) The clinical learning environment in nursing education: a concept analysis. *Journal of Advanced Nursing*. 72. 3. 501-513.

Forber J, DiGiacomo, Carter B, Davidson P, Phillips J, Jackson D (2016) In pursuit of an optimal model of undergraduate nurse clinical education: An integrative review. *Nurse Education in Practice*. 21. 83 – 92.

General Medical Council (2012) *Continuing professional development. Guidance for all doctors*. General Medical Council. Manchester.

Gratix L, Barrett D (2017) Desperately seeking consistency: student nurses experiences and expectations of academic supervision. *Nurse Education Today*. 48, 7 -12.

Hauck Y, Lewis L, Pemberton A, Crichton C, Butt J (2017) 'Teaching on the Run' with Australian midwives in a tertiary maternity hospital. *Nurse Education in Practice*. 22. 47 – 54.

Haycock-Stuart E, James C, McLachlan A, MacLaren J (2014) *Students' and Mentors' Understandings of Fitness to Practice Processes in Pre-Registration Nursing Programmes in Scotland: "These terrifying three words"*. NES. Edinburgh. Available at: [Student and mentor understanding of fitness to practice processes](#)

Health and Care Professions Council (2017) *Continuing professional development and your registration*. Health and Care Professions Council. London.

Higher Education Academy (2011) *The UK Professional Standards Framework for teaching and supporting learning in higher education*. Higher Education Academy, Guild HE and Universities UK.

Hughes LJ, Mitchell ML, Johnston ANB (2019) Just how bad does it have to be? Industry and academic assessors' experiences of failing to fail – A descriptive study. *Nurse Education Today*. 76. 206 –215.

Institute for Research and Innovation in Social Services (2015) *IRISS insights 30: achieving effective supervision*. Institute for Research and Innovation in Social Services. Glasgow.

Kilminster S, Cottrell D, Grant J, Jolly B (2007) AMEE Guide No. 27: *Effective educational and clinical supervision*. *Medical Teacher*. 29, 2-19.

Launer J (2018) The irresistible rise of interprofessional supervision. *Postgraduate Medical Journal*. 94. 1114. 481 – 482.

Leigh JA (2016) The Role of the Nurse Lecturer Situated within a Practice – Education Partnership. *PHBL*, 2, 1, 122 – 141.

Luhanga FL, Irene K, Yonge O, Myrick F (2015) The role of faculty advisors in preceptorship: From a faculty point of view. *Journal of Nursing Education and Practice*. 5, 1, 85 – 94.

MacLaren JA (2018) Supporting nurse mentor development: An exploration of development constellations in nursing mentorship practice. *Nurse Education in Practice*. 28. 66-75.

McGuinness C (2015) *Phase 2 Impact Evaluation of the Care Home Education Facilitator (CHEF) Role. Final Report*. NHS Education for Scotland, Edinburgh. Available at: [Phase 2 Evaluation CHEF role](#)

NHS Education for Scotland (2007) *National Approach to Mentor Preparation for Nurses and Midwives Core Curriculum Framework*. NHS Education for Scotland, Edinburgh.

NHS Education for Scotland (2008a) *National Guidance for Practice Teacher Preparation in Scotland: A Principles based Approach*. NHS Education for Scotland, Edinburgh.

NHS Education for Scotland (2008b) *Quality Standards for Practice Placements (QSPP)*. NHS Education for Scotland, Edinburgh. Available at: [Quality Standards for Practice Placements](#)

NHS Education for Scotland (2013a) *National Approach to Mentor Preparation for Nurses and Midwives Core Curriculum Framework*. NHS Education for Scotland, Edinburgh. Available at: [National Approach to Mentor Preparation \(Second Edition\)](#)

NHS Education for Scotland (2013b) *The National Nursing and Midwifery Practice Education Facilitator Network. Their contribution to practice learning in Scotland*. NHS Education for Scotland Edinburgh.

NHS Education for Scotland (2018) *Clinical supervision resource*. NHS Education for Scotland. Edinburgh. Available at: [Clinical supervision resource](#)

Nursing and Midwifery Council (2008) *Standards to support learning and assessment in practice*. Nursing and Midwifery Council, London.

Nursing and Midwifery Council (2018a) *Realising professionalism: Standards framework for education and training. Part 1: Standards framework for nursing and midwifery education*. Nursing and Midwifery Council, London. Available at [Standards framework for education and training](#)

Nursing and Midwifery Council (2018b) *Realising professionalism: Standards framework for education and training. Part 2: Standards for student supervision and assessment*. Nursing and Midwifery Council, London. Available at: [Standards for student supervision and assessment](#)

Nursing and Midwifery Council (2018c) *Realising professionalism: Standards framework for education and training. Part 3: Standards for pre-registration nursing programmes*. Nursing and Midwifery Council, London. Available at: [Standards for pre-registration nursing programmes](#)

Nursing and Midwifery Council (2018d) *Future nurse: Standards of proficiency for registered nurses*. Nursing and Midwifery Council, London. Available at: [Standards of proficiency for registered nurses](#)

Nursing and Midwifery Council (2018e) *Realising professionalism: Standards framework for education and training. Part 3: Standards for prescribing programmes*. Nursing and Midwifery Council, London. Available at: [Standards for prescribing programmes](#)

Nursing and Midwifery Council (2018f) *The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates*. Nursing and Midwifery Council, London. Available at: [The Code](#)

Nursing and Midwifery Council (2018g) *Practice supervision: Guides*. Nursing and Midwifery Council, London. Available at: [Supporting information on standards for supervision and assessment - practice supervision guide](#)

Nursing and Midwifery Council (2018h) *Practice assessment: Guides*. Nursing and Midwifery Council, London. Available at: [Supporting information on standards for supervision and assessment - practice assessment guide](#)

Nursing and Midwifery Council (2018i) *Raising concerns. Guidance for nurses, midwives and nursing associates*. Nursing and Midwifery Council, London. Available at: [Raising concerns](#)

Nursing and Midwifery Council (2019a) *Realising professionalism: Standards for education and training. Part 3: Standards for return to practice programmes*. Nursing and Midwifery Council, London. Available at: [Standards for return to practice programmes](#)

Nursing and Midwifery Council (2019b) *Future Midwife: Standards of Proficiency for midwives. Draft – January 2019*. Nursing and Midwifery Council, London.

Nursing and Midwifery Council (2019c) *How to revalidate with the NMC. Requirements for renewing your registration*. Nursing and Midwifery Council, London.

Nursing and Midwifery Council (2019d) *Academic assessment: Guides*. Nursing and Midwifery Council, London. Available at: [Supporting information on standards for supervision and assessment - academic assessment guide](#)

Royal Pharmaceutical Society (2016) *A Competency Framework for all Prescribers*. Royal Pharmaceutical Society. Available at: [RPS Competency Framework for Prescribers](#)

Scottish Care (2016) *Voices from the Nursing Front Line*. Scottish Care, Ayr. Available at: [Voices from the Front Line](#)

Scottish Care (2017) *Voices from the Nursing Front Line – Update Report*. Scottish Care, Ayr. Available at: [Voices from the Front Line Update Report](#)

Scottish Care (2018) *Independent Sector Nursing Data 2018*. Scottish Care, Ayr. Available at: [Scottish Care - Nursing Data 2018](#)

Scottish Government (2017a) *Nursing 2030 Vision: Promoting confident, competent and collaborative nursing for Scotland's future*. Chief Nursing Officers Directorate, Scottish Government, Edinburgh. Available at: [CNO Nursing 2030 Vision](#)

Scottish Government (2017b) *THE BEST START. A Five-Year Forward Plan for Maternity and Neonatal Care in Scotland*. Scottish Government, Edinburgh. Available at: [The Best Start](#)

Scottish Government (2017c) *National Health and Social Care Workforce Plan: Part 1 – A framework for improving workforce planning across NHS Scotland*. Scottish Government, Edinburgh. Available at: [National Health and Social Care Workforce Plan: Part 1 - NHS Scotland](#)

Scottish Government (2017d) *National Health and Social Care Workforce Plan: Part 2 – A framework for improving workforce planning for social care in Scotland*. Scottish Government, Edinburgh. Available at: [National Health and Social Care Workforce Plan: Part 2 - Social Care](#)

Scottish Social Services Council (2016) *Post Registration Training and Learning (PRTL) requirements. Guidance Notes for Social Workers*. Scottish Social Services Council, Dundee.

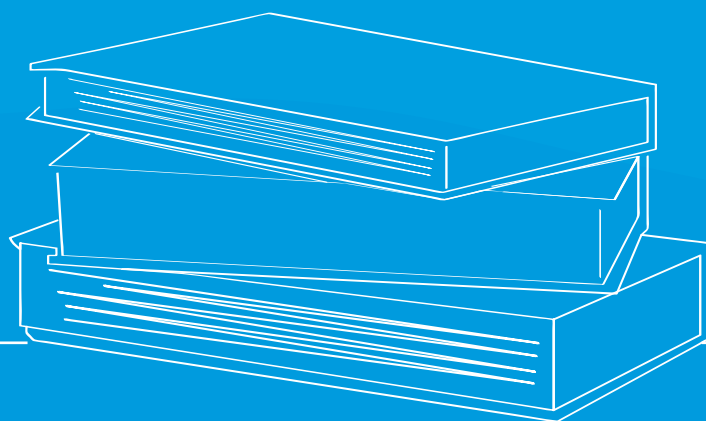
Strachan E, Ion R and Roxburgh M (2018) *Raising concerns in practice: Student guidance. A national approach for students, practice learning providers and higher education institutions in Scotland*. Available at: [National approach to raising concerns in practice](#)

Sweet L, Broadbent J (2017) Nursing students' perceptions of the qualities of the clinical facilitator that enhance learning. *Nurse Education in Practice*. 22, 30-36.

Wilkes Z (2011) A framework to support practice teachers in the assessment process. *Community Practitioner*. 84. 12. 24-27.

8

APPENDICES



Appendix 1 – Reflective self-assessment template for transition to the practice supervisor and practice assessor roles

This template is provided to enable mentors, sign-off mentors and practice teachers undertake a reflective self-assessment against the NMC practice supervisor and practice assessor roles as part of the transitional arrangements. This template can be used to identify transferable knowledge, skills and experience and identify areas for professional development as a practice supervisor and practice assessor.

The NMC practice supervisor and practice assessor requirements (What do I need to be able to do?)	Transferable skills (What knowledge, skills and experience do I currently have?)	Areas for development (What knowledge, skills and experience do I need to consolidate, enhance or develop?)
Practice supervisors <ul style="list-style-type: none"> ▪ serve as role models for safe and effective practice in line with their code of conduct ▪ support learning in line with their scope of practice to enable the student to meet their proficiencies and programme outcomes ▪ support and supervise students, providing feedback on their progress towards and achievement of, proficiencies and skills ▪ have current knowledge and experience of the area in which they are providing support, supervision and feedback 		

<ul style="list-style-type: none">▪ contribute to the student's record of achievement by periodically recording relevant observations on the conduct, proficiency and achievement of the students they are supervising▪ contribute to student assessments to inform decisions for progression▪ have sufficient opportunities to engage with practice assessors and academic assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising▪ are expected to appropriately raise and respond to student conduct and competence concerns and are supported in doing so		
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The NMC practice supervisor and practice assessor requirements (What do I need to be able to do?)	Transferable skills (What knowledge, skills and experience do I currently have?)	Areas for development (What knowledge, skills and experience do I need to consolidate, enhance or develop?)
<p>Practice assessors</p> <ul style="list-style-type: none"> ▪ conduct assessments to confirm student achievement of proficiencies and programme outcomes for practice learning ▪ assessment decisions are informed by feedback sought and received from practice supervisors ▪ make and record objective, evidence-based assessments on conduct, proficiency and achievement, drawing on student records, direct observations, student self-reflection, and other sources ▪ maintain current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing ▪ in partnership with the nominated academic assessor evaluate and recommend the student for progression for each part of the programme, in line with programme standards and local and national policies 		

<ul style="list-style-type: none">▪ periodically observe the student across environments in order to inform decisions for assessment and progression▪ have an understanding of the student's learning and achievement in theory▪ communicate and collaborate with academic assessors at relevant points in the programme structure and student progression		
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Appendix 2 – Reflective self-assessment template for transition to the academic assessor role

This template is provided to enable nursing and midwifery registered teachers within an AEI undertake a reflective self-assessment against the NMC academic assessor role as part of the transitional arrangements. This template can be used to identify transferable knowledge, skills and experience and identify areas for professional development as an academic assessor.

The NMC academic assessor role (What do I need to be able to do?)	Transferable skills (What knowledge, skills and experience do I currently have?)	Areas for development (What knowledge, skills and experience do I need to consolidate, enhance or develop?)
<ul style="list-style-type: none"> ▪ collate and confirm student achievement of proficiencies and programme outcomes in the academic environment for each part of the programme ▪ make and record objective, evidence-based decisions on conduct, proficiency and achievement and recommendations for progression, drawing on student records and other sources ▪ maintain current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing and confirming 		

<ul style="list-style-type: none">▪ works in partnership with a nominated practice assessor to evaluate and recommend the student for progression for each part of the programme, in line with programme standards and local and national policies▪ have an understanding of the student's learning and achievement in practice▪ communication and collaboration between academic and practice assessors is scheduled for relevant points in programme structure and student progression, and▪ are not simultaneously the practice supervisor and practice assessor for the same student		
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Appendix 3 – Supervision in health and social care

Supervision in health and social care

The supervision of nursing and midwifery students will include, among other teaching and learning methods, observation of the student providing nursing or midwifery care in practice (termed here supervised practice or supervision OF practice). What is widely known in the nursing and midwifery professions as clinical supervision, is a more reflective process and a core part of protecting the public and professional development for midwives and mental health nurses, in particular. Although the practice supervisor role may include providing clinical supervision for students, the information contained in this appendix will focus upon the supervision of practice as part of an education programme. For further information about clinical supervision and to access interprofessional educational resources that can support development as a clinical supervisor, please see (NES 2018) [Clinical supervision resource](#)

Definitions of supervision

There are a number of definitions of supervision and a selection are provided below.

Morrison (cited in Institute for Research and Innovation in Social Services 2015:3) defines supervision as:

“ A process by which one worker is given responsibility by the organisation to work with another worker(s) in order to meet certain organisational, professional and personal objectives. ”

In the context of nursing and midwifery education it means that the practice supervisor has been given responsibility by the AEI and the practice learning partner / organisation (for example, NHS Board or care home) to work with the student to support them to meet the programme learning outcomes and proficiencies during the practice placement.

Focusing more on supervision within a structured education programme, the Kilminster et al (2007:2) definition in their medical education guide is perhaps more closely aligned to that of the practice supervisor role:

“The provision of guidance and feedback on matters of personal, professional and educational development in the context of a trainee’s experience of providing safe and appropriate patient care.”

Although the above definitions do not explicitly refer to supervision as part of education programmes occurring predominately within professional boundaries, this has, until recently for nurses and midwives, been largely the case (NMC 2008).

Increasingly health and social care professionals, as well as providing health and care services as part of multidisciplinary and interprofessional teams, are being trained, developed and educated together. Interprofessional supervision can form part of pre-registration education programmes and in some circumstances, as in the NMC practice supervisor role, it forms part of the regulatory framework (NMC 2018). To reflect the interprofessional nature of supervision, Townend (cited in Davys and Beddoe 2015) usefully provides the following definition:

“Two or more [practitioners] meeting from different professional groups to achieve a common goal of protecting the welfare of the client. This protection is achieved through a process that enables increased knowledge, increased skill, appropriate attitude and values to maintain clinical and professional competence.”

Interprofessional supervision

Interprofessional supervision is increasingly becoming part of development opportunities for health and social care professionals. To reap the benefits, it is suggested that supervisors need to have a good understanding of the regulatory framework and the programme of education that students are studying (*Launer 2018*).

The research evidence (Davys and Beddoe 2015) into interprofessional supervision, although largely undertaken with registered practitioners from a social work or mental health area of practice, may have implications for the NMC practice supervisor role and in the context of the future nurse and midwife pre-registration programmes.

Interprofessional supervision has been reported as having three benefits, which are;

- the development of knowledge and skills – the fresh and rich perspectives from different professions or through introducing new knowledge and / or different skills into practice
- the development of critical thinking – opportunities to explore or challenge profession specific assumptions and norms which can influence day to day practice
- an understanding of different professions – deeper appreciation of the different professional roles and their contributions as part of health and / or social care teams.

A model for the supervision of practice

A model of supervision (adapted from Kilminster et al 2007:3) which practice supervisors may find useful is outlined in the table below. The model can be described as a supervision scale, which at one end requires the pre or post-registration student to be directly observed at all times, to providing support and guidance at a distance as the student achieves proficiencies and competences and demonstrates professional standards of practice.

Supervision scale for practice supervisors

Kilminster et al model	Adapted for nursing and midwifery practice
To be present in same room as the person being supervised.	Practicing / working alongside and in the same room as the student being supervised, for example, in the same inpatient single room, bay or in the patient's home.
To be nearby and immediately available to come to the aid of the person being supervised.	Practicing / working closely in the same ward / department / patient's home and immediately available to support the student being supervised.
To be in the hospital or primary care premises and available at short notice, able to offer immediate help by telephone and able to come to the aid of the person within a short time.	Practicing / working in the same hospital, community setting or care home and able to offer the student immediate support or guidance by telephone and face to face guidance within a short period of time.
To be on call and available for advice, able to come to the trainee's assistance in an appropriate length of time.	Practicing / working at a distance from the student and available for advice and guidance (via telephone or digital technology) and able to come to student's assistance in an appropriate length of time.

The type and frequency of supervised practice required by the student will vary according to a number of factors, which must be considered by the practice supervisor when they make their professional judgement about where and how to supervise the student. These 'supervisory factors' may include, for example, the part of the programme the student is studying, the students previous practice placement experience, complexity of the nursing / midwifery care being delivered, the needs of the client / patient and whether the student has been observed and previously signed off for specific nursing or midwifery clinical skills as proficient or competent.

For further information on the practice supervisor role please access the [NMC Standards for student supervision and assessment](#), the [NMC supporting information on practice supervision and section 5 of this document](#).

Appendix 4 – Reflective self-assessment template for the practice supervisor role

This template is provided to enable nurses, midwives, health and social care professionals undertake a reflective self-assessment against the NMC practice supervisor role. This template can be used to consider transferable knowledge, skills and experience and identify areas for professional development as a practice supervisor.

The NMC practice supervisor requirements (What do I need to be able to do?)	Transferable skills (What knowledge, skills and experience do I currently have?)	Areas for development (What knowledge, skills and experience do I need to consolidate, enhance or develop?)
<p>Preparation</p> <ul style="list-style-type: none"> ▪ receive ongoing support to prepare, reflect and develop for effective supervision and contribution to student learning and assessment, and ▪ have an understanding of the proficiencies and programme outcomes they are supporting students to achieve <p>Role and responsibilities</p> <ul style="list-style-type: none"> ▪ serve as role models for safe and effective practice in line with their code of conduct ▪ support learning in line with their scope of practice to enable the student to meet their proficiencies and programme outcomes 		

<ul style="list-style-type: none"> ▪ support and supervise students, providing feedback on their progress towards and achievement of, proficiencies and skills ▪ have current knowledge and experience of the area in which they are providing support, supervision and feedback ▪ receive ongoing support to participate in the practice learning of students <p>Contribution to assessment and progression</p> <ul style="list-style-type: none"> ▪ contribute to the student's record of achievement by periodically recording relevant observations on the conduct, proficiency and achievement of the students they are supervising ▪ contribute to student assessments to inform decisions for progression ▪ have sufficient opportunities to engage with practice assessors and academic assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising ▪ are expected to appropriately raise and respond to student conduct and competence concerns and are supported in doing so 		
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Appendix 5 – Scope resources currently available to support preparation of new roles – practice supervisor / assessor and academic assessor

The aim of the scoping activity was to provide a list of relevant resources to support the preparation of the practice supervisor/assessor and academic assessor roles. The national Practice Education Facilitator Forum was approached to share any current resources being used to support mentors, sign off mentors and practice teachers in practice. This identified a wide range of local tools and resources utilised within the boards. A wider scoping of other possible online resources was also undertaken. To help narrow down the range of resources uncovered, only accessible national and UK resources were then reviewed for their suitability.

The next step involved reviewing the NMC's (2018) standards for student supervision and assessment to identify the areas of learning required to support preparation of the new roles. The knowledge and skills needed by practice supervisors/assessors and academic assessors was mapped from the standards and used to provide a structure to organise the learning resources. This is to provide practitioners with an easy to navigate flexible resource list where relevant learning areas can be identified, and resources accessed as necessary. The scoping activity resulted in a range of accessible national and UK resources, tools and programmes that could be utilised to support aspects of preparation and transition to the new roles.

N.B. The learning resources identified are to provide additional support for practitioners and not to replace existing or future local preparation programmes and is not an exhaustive list. See table below for full details of the recommended learning resources.

Learning resources recommended for practice supervisors / assessors

Identified learning areas mapped to NMC standards	Learning resource / activity
<p>Enabling a safe and effective learning environment</p> <p>NMC Standards: 2.1 – 2.6 8.1 – 8.4</p>	<p>Effective practitioner – The learning environment – all activities www.effectivepractitioner.nes.scot.nhs.uk/learning-and-development/facilitation-of-learning/the-learning-environment.aspx</p> <p>Effective practitioner – Supporting Learning - Opportunities to learn activity www.effectivepractitioner.nes.scot.nhs.uk/learning-and-development/facilitation-of-learning/supporting-learning.aspx</p>
<p>Facilitating safe and effective independent learning experiences</p> <p>NMC standards: 2.1 – 2.6 3.1 – 3.5 8.1 – 8.4</p>	<p>Effective practitioner – Teaching – all activities www.effectivepractitioner.nes.scot.nhs.uk/learning-and-development/facilitation-of-learning/teaching.aspx</p> <p>Turas Learn – video clip how to set SMART objectives https://learn.nes.nhs.scot/7204/leadership-and-management-zone/management-matters/managing-teams-and-others/managing-peoples-performance/watch-this/setting-smart-objectives</p> <p>NHS leadership Academy – SMART www.londonleadingforhealth.nhs.uk/sites/default/files/SMART-goals-LAL1.pdf</p> <p>Train the Trainers toolkit¹ – Unit 2 learning and teaching style, Unit 5 teaching a practical skill</p> <p>Anglia Ruskin University – scenarios for supervisor and assessor session www.anglia.ac.uk/business-employers/mentors/nursing/mentor-updates</p> <p>Anglia Ruskin University – supervisor and assessor activities www.anglia.ac.uk/business-employers/mentors/nursing/mentor-updates</p> <p>GoodPractice.net – informal learning infographic https://app-goodpractice-net.knowledge.idm.oclc.org/#/nhs-dyo/s/9e308409</p> <p>GoodPractice.net – Learning styles https://app-goodpractice-net.knowledge.idm.oclc.org/#/nhs-dyo/s/00811fa1</p> <p>GoodPractice.net – Effective learning https://app-goodpractice-net.knowledge.idm.oclc.org/#/nhs-dyo/s/f589ac47</p>

¹ Train the trainer toolkit is available at <https://nes.scot.nhs.uk/education-and-training/by-theme-initiative/facilitation-of-learning/train-the-trainers-toolkit-resources.aspx>

Local delivery of this programme takes place in Health Boards across Scotland. Contact your local practice education facilitator, care home education facilitator or practice educator for further information.

<p>Understanding learning needs and stage of learning of students</p> <p>NMC standards: 2.3, 2.4 3.2, 3.4</p>	<p>Train the Trainers toolkit² – Unit 2 learning and teaching style, Unit 5 teaching a practical skill</p> <p>Turas Learn - Health Literacy tools and techniques https://learn.nes.nhs.scot/1449/elearning-digital/health-literacy-tools-and-techniques</p> <p>Anglia Ruskin University – scenarios for supervisor and assessor session www.anglia.ac.uk/business-employers/mentors/nursing/mentor-updates</p> <p>Anglia Ruskin University – supervisor and assessor activities www.anglia.ac.uk/business-employers/mentors/nursing/mentor-updates</p>
<p>Supporting reflective practice in self and others</p> <p>NMC Standards: 3.1 5.1 8.2</p>	<p>Effective practitioner – Supporting learning – Supporting reflective practice activity www.effectivepractitioner.nes.scot.nhs.uk/learning-and-development/facilitation-of-learning/supporting-learning.aspx</p> <p>Effective practitioner – Learning Resources – Effective reflective practice www.effectivepractitioner.nes.scot.nhs.uk/learning-and-development/learning-resources/effective-reflective-practice.aspx</p> <p>NHS Leadership Academy – 5 Whys www.londonleadershipacademy.nhs.uk/sites/default/files/5_Whys-LAL1.pdf</p>

² Train the trainer toolkit is available at <https://nes.scot.nhs.uk/education-and-training/by-theme-initiative/facilitation-of-learning/train-the-trainers-toolkit-resources.aspx>

Local delivery of this programme takes place in Health Boards across Scotland. Contact your local practice education facilitator, care home education facilitator or practice educator for further information.

<p>Developing supervision, facilitation and coaching skills</p> <p>NMC Standards: 3.1 – 3.5</p>	<p>Effective practitioner – Supporting Learning - Support and Supervision activity www.effectivepractitioner.nes.scot.nhs.uk/learning-and-development/facilitation-of-learning/supporting-learning.aspx</p> <p>Career Framework – giving support and supervision learning activity www.careerframework.nes.scot.nhs.uk/support-and-supervision/giving-support-and-supervision/introduction.aspx</p> <p>Career Framework – what is support and supervision www.careerframework.nes.scot.nhs.uk/support-and-supervision/what-is-support-and-supervision/introduction.aspx</p> <p>Turas Learn – Unit 2 Facilitation section, Unit 3 -all, https://learn.nes.nhs.scot/3580/clinical-supervision</p> <p>NHS Leadership Academy – GROW coaching conversation www.londonleadingforhealth.nhs.uk/sites/default/files/GROW-LAL1_0.pdf</p> <p>GoodPractice.net – GROW model animation https://app-goodpractice-net.knowledge.idm.oclc.org/#/nhs-dyo/s/9890511d</p> <p>GoodPractice.net – Coaching tips https://app-goodpractice-net.knowledge.idm.oclc.org/#/nhs-dyo/s/d9d75035</p>
<p>Being a role model and keeping myself and others up to date</p> <p>NMC Standards: 3.1, 3.2, 3.4 5.1, 5.2 7.4 8.2, 8.3 10.3, 10.4</p>	<p>Turas Learn – Leadership qualities – motivating and inspiring module https://learn.nes.nhs.scot/2658/leadership-and-management-zone/leadership-qualities-motivating-and-inspiring-module</p> <p>Turas Learn – developing self-awareness https://learn.nes.nhs.scot/2111/leadership-and-management-zone/leadership-links/webinar-library/developing-self-awareness-gillian-mccready</p> <p>Anglia Ruskin University – range of updates and learning www.anglia.ac.uk/business-employers/mentors/nursing/mentor-updates</p> <p>NHS Leadership Academy – development planning tool www.londonleadingforhealth.nhs.uk/sites/default/files/Build_your_development_plan-LAL1.pdf</p> <p>GoodPractice.net – setting a good example https://app-goodpractice-net.knowledge.idm.oclc.org/#/nhs-dyo/s/12c1628a</p> <p>GoodPractice.net – 7 habits of highly effective people https://app-goodpractice-net.knowledge.idm.oclc.org/#/nhs-dyo/s/0aa5f8e1</p>

<p>Giving and receiving effective feedback</p> <p>NMC Standards: 3.3 4.1 7.7</p>	<p>Effective Practitioner – Supporting learning – Giving and receiving feedback activity www.effectivepractitioner.nes.scot.nhs.uk/learning-and-development/facilitation-of-learning/supporting-learning.aspx</p> <p>Turas Learn – Top tips pdf https://learn.nes.nhs.scot/3730/leadership-and-management-zone/leading-for-the-future-tips-for-giving-and-receiving-feedback</p> <p>Train the Trainers toolkit³ – Unit 4 Giving Feedback</p> <p>GoodPractice.net – Delivering feedback overview of models https://app-goodpractice-net.knowledge.idm.oclc.org/#/nhs-dyo/s/1a89e892</p> <p>NHS Leadership Academy – AIID feedback tool pdf information sheet www.londonleadingforhealth.nhs.uk/sites/default/files/AIID-feedback-LAL1_1.pdf</p>
<p>Developing my leadership skills to support others to learn and develop</p> <p>NMC Standards: All</p>	<p>Effective Practitioner – Leadership – Personal qualities and self-awareness – all activities www.effectivepractitioner.nes.scot.nhs.uk/learning-and-development/leadership/personal-qualities-and-self-awareness.aspx</p> <p>Effective Practitioner – Learning Resources – Clinical decision making www.effectivepractitioner.nes.scot.nhs.uk/learning-and-development/learning-resources/clinical-decision-making.aspx</p> <p>Making delegation safe and effective https://learn.nes.nhs.scot/3652/nmahp-repository/making-delegation-safe-and-effective-a-learning-resource-for-nurses-midwives-allied-health-professionals-and-health-care-support-workers</p> <p>Turas Learn – Leadership qualities: self-leadership module https://learn.nes.nhs.scot/2659/leadership-and-management-zone/leadership-qualities-self-leadership-module</p> <p>Turas Learn – Leadership qualities: empowering module https://learn.nes.nhs.scot/2657/leadership-and-management-zone/leadership-qualities-empowering-module</p> <p>NHS Leadership Academy – dealing with difficult people www.londonleadershipacademy.nhs.uk/sites/default/files/Dealing_with_difficult_people-LAL1_0.pdf</p>

³ Train the trainer toolkit is available at <https://nes.scot.nhs.uk/education-and-training/by-theme-initiative/facilitation-of-learning/train-the-trainers-toolkit-resources.aspx>

Local delivery of this programme takes place in Health Boards across Scotland. Contact your local practice education facilitator, care home education facilitator or practice educator for further information.

<p>Enabling effective communication</p> <p>NMC Standards: 7.5 7.9</p>	<p>Effective Practitioner – Leadership – Personal qualities and self-awareness – communication activity www.effectivepractitioner.nes.scot.nhs.uk/learning-and-development/leadership/personal-qualities-and-self-awareness.aspx</p> <p>Anglia Ruskin University – skillful questioning pdf www.anglia.ac.uk/business-employers/mentors/nursing/mentor-updates</p> <p>NHS Leadership Academy – GROW coaching conversation www.londonleadingforhealth.nhs.uk/sites/default/files/GROW-LAL1_0.pdf</p> <p>NHS Leadership Academy – Conversation guide www.londonleadingforhealth.nhs.uk/sites/default/files/Conversation_guide-LAL1.pdf</p> <p>NHS Leadership Academy – Listening skills www.londonleadingforhealth.nhs.uk/sites/default/files/Practise_your_listening_skills-LAL1.pdf</p> <p>Turas learn - Empathetic questioner video https://learn.nes.nhs.scot/2539/leadership-and-management-zone/leadership-links/webinar-library/empathic-questioner https://vimeo.com/238374341</p>
<p>Enabling evidence-based assessment of student learning - knowledge of the assessment process and their role within it</p> <p>NMC Standard: 4.1 – 4.4 7.1 – 7.3 9.1 – 9.5</p>	<p>OU Facilitating Learning - Assessment, failing student www.open.edu/openlearn/health-sports-psychology/facilitating-learning-practice/content-section-overview?active-tab=description-tab</p> <p>Anglia Ruskin University – Example of formative feedback pdf www.anglia.ac.uk/business-employers/mentors/nursing/mentor-updates</p>

<p>Manage a failing student</p> <p>NMC Standard: 4.4 9.1 – 9.5</p>	<p>OU Facilitating Learning – Supporting the failing student www.open.edu/openlearn/ocw/mod/oucontent/view.php?id=20107</p> <p>Supporting the underachieving student workbook https://staff.napier.ac.uk/faculties/fhlss/mentorcentre/Pages/Mentor%20Updates.aspx</p> <p>Anglia Ruskin University - supporting the under achieving student pdf workbook www.anglia.ac.uk/business-employers/mentors/nursing/mentor-updates</p> <p>University of Plymouth www.plymouth.ac.uk/student-life/your-studies/academic-services/placements-and-workbased-learning/poppi/poppi-health/mentor-centre/managing-poor-performance</p>
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Appendix 6 – NMC requirements for educators and assessors and expectations of practice supervision and assessor roles

NMC Requirements for Educators and assessors

In the Standards framework for nursing and midwifery education, the NMC outline their requirements for educators and assessors for approved education institutions and practice learning partners, which are provided for information below:

Standard 4.1 – Theory and practice learning and assessment are facilitated effectively and objectively by appropriately qualified and experienced professionals with necessary expertise for their educational and assessor roles.

Requirements

Approved education institutions, together with practice learning partners, must ensure that all educators and assessors:

- 4.1 – comply with all standards and requirements in the NMC Standards for education and training
- 4.2 – act as a professional role model at all times
- 4.3 – receive relevant induction, ongoing support and access to education and training which includes training in equality and diversity
- 4.4 – have supported time and resources to enable them to fulfil their roles in addition to their other professional responsibilities
- 4.5 – respond effectively to the learning needs of individuals
- 4.6 – are supportive and objective in their approach to student supervision and assessment
- 4.7– liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment
- 4.8 – are expected to respond effectively to concerns and complaints about public protection and student performance in learning environments and are supported in doing so
- 4.9 – receive and act upon constructive feedback from students and the people they engage with to enhance the effectiveness of their teaching, supervision and assessment
- 4.10 – share effective practice and learn from others, and
- 4.11 – appropriately share and use evidence to make decisions on student assessment and progression” (NMC 2018a:11)

NMC expectations of practice supervision

In the Standards for student supervision and assessment, the NMC outline their expectations of practice supervision for approved education institutions and practice learning partners, which are provided for information below:

Practice supervision enables students to learn and safely achieve proficiency and autonomy in their professional role. All NMC registered nurses, midwives and nursing associates are capable of supervising students, serving as role models for safe and effective practice. Students may be supervised by other registered health and care professionals.

Approved education institutions, together with practice learning partners, must ensure that:

- 2.1 – all students on an NMC approved programme are supervised while learning in practice
- 2.2 – there is support and oversight of practice supervision to ensure safe and effective learning
- 2.3 – the level of supervision provided to students reflects their learning needs and stage of learning
- 2.4 – practice supervision ensures safe and effective learning experiences that uphold public protection and the safety of people
- 2.5 – there is sufficient coordination and continuity of support and supervision of students to ensure safe and effective learning experiences
- 2.6 – practice supervision facilitates independent learning, and
- 2.7 – all students on an NMC approved programme are supervised in practice by NMC registered nurses, midwives, nursing associates, and other registered health and social care professionals”
(NMC 2018b:6).

NMC expectations of assessor roles (Practice assessors and academic assessors)

In the Standards for student supervision and assessment, the NMC outline their expectations of assessor roles for approved education institutions and practice learning partners, which are provided for information below:

Student assessments are evidence based, robust and objective. Assessments and confirmation of proficiency are based on an understanding of student achievements across theory and practice. Assessments and confirmation of proficiency are timely, providing assurance of student achievements and competence.

Approved education institutions, together with practice learning partners, must ensure that:

- 6.1 – all students on an NMC approved programme are assigned to a different nomination academic assessor for each part of the education programme
- 6.2 – all students on an NMC approved programme are assigned to a nominated practice assessor for a practice placement or series of practice placements, in line with local and national policies
- 6.3 – nursing students are assigned to practice and academic assessors who are registered nurses with appropriate equivalent experience for the student’s field of practice
- 6.4 – midwifery students are assigned to practice and academic assessors who are registered midwives
- 6.5 – specialist community public health nurse (SCPHN) students are assigned to practice and academic assessors who are registered SCPHNs with appropriate equivalent experience for the student’s field of practice
- 6.6 – nursing associate students are assigned to practice and academic assessors who are either a registered nurse associate or a registered nurse
- 6.7 – students studying for an NMC approved post-registration qualification are assigned to practice and academic assessors in accordance with relevant programme standards
- 6.8 – practice and academic assessors receive ongoing support to fulfil their roles, and
- 6.9 – practice and academic assessors are expected to appropriately raise and respond to concerns regarding student conduct, competence and achievement, and are supported in doing so” (NMC 2018b:8)

Appendix 7 – Research evidence for the supervisor and assessor roles

Although the practice supervisor, practice assessor and academic assessors are new regulatory roles with the NMC, supervised learning in and assessment of students in theory and nursing and midwifery practice is already a substantial part of undergraduate, pre-registration and post-registration programmes for health and care professionals. The following evidence from the research literature and potential implications for practice supervisors, practice assessors and academic assessors should be considered when undertaking the role.

Practice Supervisor

- Nursing students have been found to value positive supervisory and interpersonal relationships, interactions with clinical colleagues, engagement in nursing care and being recognised as part of the team (D’Souza et al 2015). Practice supervisors may have regular contact with students and play a crucial role in their learning environment. Evidence has also shown (Browning and Pront 2015) that preparation is required when undertaking a supervisory role in practice to provide role clarity, empower supervisors to provide student-centred and student-led learning and promote learning at the appropriate level. Implications for practice supervisors – maximise opportunities for students to work with and be seen as part of the clinical team through identifying and achieving their own and programme learning outcomes and proficiencies.
- A study in Australia (Sweet and Broadbent 2017) found nursing students wanted clinical facilitators who were available to provide support and guidance, approachable and respectful of learning for enhancement and able to provide feedback. Implications for practice supervisors - a culture of learning for all within the practice setting / environment and making the most of opportunistic as well as planned supervisory relationships.
- Literature on the supervision of doctors in training suggests that behavioural changes can occur relatively quickly as a result of supervision whilst changes in thinking and attitude take longer. This is particularly important because there may be relatively frequent changes of supervisor due to rotations (Kilminster et al 2007). Implications for practice supervisors - the supervisory relationship should include a balance of clinical competence, critical thinking and professional attitude and conduct, particularly where the student will be exposed to a large number of practice supervisors.

- Students' disrupted continuity or feeling as though they were starting again with each practice placement has been reported as a cause for student dissatisfaction in their clinical experience in the literature (Sundler et al 2014 as cited in Forber et al 2016:89). Implications for practice supervisors - student induction and orientation into the practice placement and identification of their learning outcomes / development needs could consider aspects that the student would like to build upon further as well as any new areas of practice and / or competencies.
- Research evidence (Davys and Beddoe 2015) suggests that practitioners are not necessarily bound by traditional same-profession supervision and will select a supervisor who they believe best meets their needs regardless of that person's profession. Implications for practice supervisors - it is important that students are made aware at the start of the practice placement the different professions that are part of the clinical / practice team. Students should have an opportunity to understand these different roles and are given permission to seek practice supervisors outwith nursing and midwifery.

Practice assessor

- A study exploring mentor decision-making and assessment judgements (Burden et al 2018) found mentors' impressions of the student influence their assessment decisions more than formal assessment strategies, competences and documentation. Through the process of agreeing practice placement outcomes, mentors formed initial judgements about students as "good" - organised and understood what they need to achieve or "not so good" when the converse was true. Mentors often reached a decision early on in the practice placement whether the student would be successful. The criteria mentors used to make judgements about students were categorised around three aspects of practice: firstly as a "learner" - through the student's participation in practice, enthusiasm, questioning and incremental development; secondly as a "deliverer of care" - students ability to demonstrate and perform key skills in a proficient way and thirdly as a "nurse" - the students ability to fit in and work with the team in a professional manner. Mentors prioritised their judgements in rank order of deliverer of care, nurse and learner. Mentors frame of reference when undertaking assessments was not always consistent with the requirement of the programme or professional standards. This study also found that students, who at some point received a fail decision in practice, received less documented feedback across all placements regarding of the placement outcome. Implications for practice assessors - use formal assessment strategies (competences and PAD), draw on evidence from other sources (for example, observations from practice supervisors, service user / carer feedback, student reflections) and accurately record your feedback, the rationale and outcome of your assessment decisions for all students regardless of the level of performance.

- Exploratory study (Hughes et al 2019) exploring academic and industry (service) assessor experiences of grading a student performance when that performance is not a clear pass or fail. The study found that most assessors found feedback rewarding and it resulted in improved student performance in the majority of cases. Assessors did not feel students should be given the benefit of the doubt although almost a quarter had sometimes or often done so. Assessor tolerance for passing students decreased as they progressed through the programme, ie, assessors more tolerant in their assessments of first year students and more likely to give the benefit of the doubt than students in years two or three. Almost all assessors experienced positive responses to their feedback but two thirds experienced anger and manipulative behaviour from students, one third aggression and one tenth violence. Failing a student on professional attitude alone divided assessor opinion, and assessors believed it took longer to fail a student rather than pass them. Implications for practice assessors - base assessment decisions on all the sources of evidence available, and raise any concerns regarding student performance with the student, refer their concerns to the academic assessor and assist the student to develop a plan to improve their performance.
- MacLaren (2018) undertook a small-scale study to examine the significant learning relationships of nurses undertaking a mentorship course. Findings demonstrated that mentors' relationships largely fell into a receptive network, characterised by weak or passive relationships with immediate colleagues, a traditional network which had formalised relationships (such as with university colleagues), opportunistic network which was wide ranging but potentially superficial or entrepreneurial networks characterised by strong ties to a large number of supportive individuals from varied practice settings. Implications for practice assessors - develop and role model extended networks and entrepreneurial relationships to expose students to interprofessional and interagency colleagues and to extend the range of health and social care practice supervisors.

Academic assessor

- Exploratory study (Hughes et al 2019) exploring academic and industry (service) assessor experiences of grading a student performance when that performance is not a clear pass or fail. The study found that most assessors found feedback rewarding and it resulted in improved student performance in the majority of cases. Assessors did not feel students should be given the benefit of the doubt although almost a quarter had sometimes or often done so. Assessor tolerance for passing students decreased as they progressed through the programme, ie, assessors more tolerant in their assessments of first year students and more likely to give the benefit of the doubt than students in years two or three.

Almost all assessors experienced positive responses to their feedback but two thirds experienced anger and manipulative behaviour from students, one third aggression and one tenth violence. Failing a student on professional attitude alone divided assessor opinion, and assessors believed it took longer to fail a student rather than pass them. Implications for academic assessor role - base assessment decisions on all the sources of evidence available, and raise any concerns regarding student performance and achievement with the student, refer concerns using AEI processes and assist the student to develop a plan to improve.

- A study (Luhanga et al 2015) examining the Canadian learning triad for pre-registration nursing programmes, which involves a registered nurse preceptor employed by service, a nursing student and representative of the educational programme, the faculty advisor (FA). Research explored FA perceptions of preparation for their role and resources and support essential for preceptors and FAs. Participants described facilitating student success, which included facilitating learning, communicating, evaluating and assigning the final grade. Faculty advisors reported the importance of communication with preceptors; including having contact information, meeting with the student, connecting with the preceptor and the student when issues arose, being present and involved when needed and making site visits. Faculty advisors also provided advice and guidance to the preceptor, especially when decisions needed to be made about students' clinical performance. They also encouraged preceptors to document and validate their observations by consulting with other staff to support their decision. Faculty advisors rarely directly observe or supervise student performance, they rely on preceptor observations to make judgements about a student's ability to achieve clinical outcomes. As custodians of the teaching and learning process, FAs needed to be diligent and consistent in their efforts to communicate with both the preceptor and student. Implications for academic assessor role – establish and maintain effective communication mechanisms with practice assessors, this may include agreeing the most appropriate method(s) of communication and at scheduled times during the practice placement and programme structure.
- Study in the UK (Leigh 2016) to explore nurse lecturers role operating within a practice and education (Academic in Practice AiP) partnership. Findings include that AiP should capitalise on the strength of nurse academics from within the practice setting, a narrow job outline dominated by functional tasks is perceived as limiting, role strain and role mal-integration can occur due to role duplication and lack of clarity, especially between AiP and PEF, emphasis placed on relationships developed as opposed to the role performed; the relationship then becomes the platform for how the subsequent role is developed and negotiation undertaken.

Characteristics of innovative AiPs appear to include: high level skills in partnership working and collaboration, good communication skills, being visible, working collaboratively with people in practice, leadership skills to negotiate the role within multiple settings and genuine interest in practice learning. In some areas there was evidence of the AiP disengaging from practice because the role had no meaning to them and AEs attributing less value to the practice role, with priority afforded to classroom teaching and other academic commitments. There is a need to facilitate productive interaction to bridge different cultures of lecturer and healthcare organisation, share power and develop robust communication to challenge assumptions and limit thinking and action. Implications for academic assessor role – the role should be operationalised to best suit the needs of the partnership and not restricted by an inflexible role outline dominated by functional activities.

- Study (Gratix and Barrett 2017) in the UK of student nurse experiences and expectations of academic supervision. Findings fall under three themes; the relationship with the academic supervisor, variation between supervisors and the link between supervision and marking. Building of a relationship is important in the development of high-quality academic work, it enhances academic supervision and allows trust to develop in seeking support. A strong supervisor – student relationship builds a virtuous circle with participants reporting feedback from supervisors motivated them to put in additional effort. Variation was reported in the feedback provided, including the amount and depth of supervision provided. Some supervisors were willing to provide regular, detailed feedback whilst others less so. Variation was also reported in specific advice given to the assessment task and general presentation. Students had perceived a relationship between the supervision provided and the mark eventually received. Where supervisors did not mark students work, some students had concerns regarding the consistency and fairness of marking decisions. Implications for academic assessor role – working with other academic colleagues who are assessing the student during the part of the programme to promote consistency in decision-making and to build a relationship with the student for the duration of the time assigned to them to create opportunities for student reflection and feedback.

Appendix 8 – Reflective self-assessment template for the practice assessor role

This template is provided to enable nurses and midwives undertake a reflective self-assessment against the NMC practice assessor role. This template can be used to consider transferable knowledge, skills and experience and identify areas for professional development as a practice assessor.

The NMC practice assessor role requirements (What do I need to be able to do?)	Transferable skills (What knowledge, skills and experience do I currently have?)	Areas for development What knowledge, skills and experience do I need to consolidate, enhance or develop?
Preparation <ul style="list-style-type: none"> ▪ Undertake preparation or evidence prior learning and experience that enables them to demonstrate achievement of the following minimum outcomes <ul style="list-style-type: none"> ▪ interpersonal communication skills, relevant to student learning and assessment ▪ conducting objective, evidence based assessments of students ▪ providing constructive feedback to facilitate professional development in others, and ▪ knowledge of the assessment process and their role in it 		

<ul style="list-style-type: none"> ▪ receive ongoing support and training to reflect and develop in their role ▪ continue to proactively develop their professional practice and knowledge in order to fulfil their role, and ▪ have an understanding of the proficiencies and programme outcomes that the student they assess is aiming to achieve <p>Responsibilities</p> <ul style="list-style-type: none"> ▪ conduct assessments to confirm student achievement of proficiencies and programme outcomes for practice learning ▪ assessment decisions are informed by feedback sought and received from practice supervisors ▪ make and record objective, evidence-based assessments on conduct, proficiency and achievement, drawing on student records, direct observations, student self- reflection, and other sources ▪ maintain current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing 		
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<ul style="list-style-type: none">▪ works in partnership with the nominated academic assessor to evaluate and recommend the student for progression for each part of the programme, in line with programme standards and local and national policies▪ there are sufficient opportunities to periodically observe the student across environments in order to inform decisions for assessment and progression▪ have an understanding of the student's learning and achievement in theory▪ communication and collaboration with academic assessors is scheduled for relevant points in the programme structure and student progression▪ are not simultaneously the practice supervisor and academic assessor for the same student, and▪ for students on NMC approved prescribing programmes support learning in line with the NMC Standards for prescribing programmes		
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Appendix 9 – Collaborative assessment of nursing and midwifery students on NMC approved education programmes

The NMC standards require nursing and midwifery students on pre-registration programmes and nurses and midwives on NMC approved post-registration programmes to be assessed in theory and practice by nominated academic assessors and practice assessors.

Academic assessors and practice assessors are not required nor expected to make assessment judgements of students in isolation or on their own. Collaboration is a key part of the NMC Standards for student supervision and assessment and in ensuring fair, objective, evidence-based assessment decisions on student conduct, proficiency and achievement of the programme outcomes. In line with their role titles, academic assessors are responsible for collating and confirming student achievement of academic learning and practice assessors are responsible for the assessment and confirmation of student achievement in the practice placement.

Collaboration as part of the student assessment process occurs in two ways as shown in the diagram below. Firstly, collaboration takes place through academic assessors and practice assessors seeking feedback from their respective academic and practice colleagues. Secondly academic assessors and practice assessors communicate and collaborate to evaluate the student and make a recommendation for progression from one part of the programme to another or completion / achievement of programme outcomes, such as entry to the professional register as a nurse or midwife.

Collaborative assessment processes as part of NMC programmes



Academic assessors collaborate in AELs with their academic colleagues, such as personal tutors, link lecturers and module leaders.



Practice assessors collaborate with practice supervisors, health care support workers, service users and carers in the practice environment.



Academic assessors and practice assessors bring feedback about academic and practice learning together with evidence from other sources to collaboratively evaluate the students conduct, proficiency and achievement of outcomes for progression for each part of the programme.

The NMC have produced supporting information and guides on different aspects of student supervision and assessment; to include practice supervision, practice assessment, academic assessment, learning environments and experience and student empowerment. These guides should be accessed directly from the NMC website to access the latest version. [NMC supervision and assessment supporting information](#).

Appendix 10 – The UK Professional Standards Framework for teaching and supporting learning in Higher Education

The aims and dimensions of the UK Professional Standards Framework are provided below and the descriptors for Fellow and Senior Fellow with the Higher Education Academy. Further information about the framework is available at:

www.heacademy.ac.uk/ukpsf

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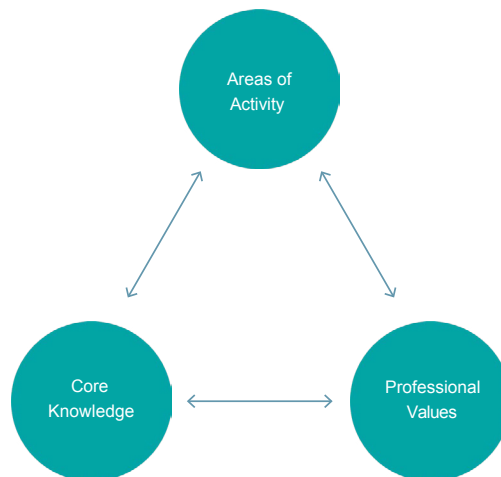
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Aims of the Framework

The UK Professional Standards Framework:

1. Supports the initial and continuing professional development of staff engaged in teaching and supporting learning
2. Fosters dynamic approaches to teaching and learning through creativity, innovation and continuous development in diverse academic and/or professional settings
3. Demonstrates to students and other stakeholders the professionalism that staff and institutions bring to teaching and support for student learning
4. Acknowledges the variety and quality of teaching, learning and assessment practices that support and underpin student learning
5. Facilitates individuals and institutions in gaining formal recognition for quality-enhanced approaches to teaching and supporting learning, often as part of wider responsibilities that may include research and/or management activities



Dimensions of the Framework

Areas of Activity

A1	Design and plan learning activities and/or programmes of study
A2	Teach and/or support learning
A3	Assess and give feedback to learners
A4	Develop effective learning environments and approaches to student support and guidance
A5	Engage in continuing professional development in subjects/disciplines and their pedagogy, incorporating research, scholarship and the evaluation of professional practices

Core Knowledge

K1	The subject material
K2	Appropriate methods for teaching, learning and assessing in the subject area and at the level of the academic programme
K3	How students learn, both generally and within their subject/disciplinary area(s)
K4	The use and value of appropriate learning technologies
K5	Methods for evaluating the effectiveness of teaching
K6	The implications of quality assurance and quality enhancement for academic and professional practice with a particular focus on teaching

Professional Values

V1	Respect individual learners and diverse learning communities
V2	Promote participation in higher education and equality of opportunity for learners
V3	Use evidence-informed approaches and the outcomes from research, scholarship and continuing professional development
V4	Acknowledge the wider context in which higher education operates recognising the implications for professional practice



Descriptor 2	Typical individual role/career stage	Aligned to
<p>Demonstrates a broad understanding of effective approaches to teaching and learning support as key contributions to high quality student learning. Individuals should be able to provide evidence of:</p>	<p>Individuals able to provide evidence of broadly based effectiveness in more substantive teaching and supporting learning role(s). Such individuals are likely to be established members of one or more academic and/or academic-related teams. Typically, those likely to be at Descriptor 2 (D2) include:</p>	<p>Fellow</p>
<p>I. Successful engagement across all five Areas of Activity</p>		
<p>II. Appropriate knowledge and understanding across all aspects of Core Knowledge</p>	<p>a. Early career academics</p> <p>b. Academic-related and/or support staff holding substantive teaching and learning responsibilities</p>	
<p>III. A commitment to all the Professional Values</p>		
<p>IV. Successful engagement in appropriate teaching practices related to the Areas of Activity</p>	<p>c. Experienced academics relatively new to UK higher education</p>	
<p>V. Successful incorporation of subject and pedagogic research and/or scholarship within the above activities, as part of an integrated approach to academic practice</p>	<p>d. Staff with (sometimes significant) teaching-only responsibilities including, for example, within work-based settings</p>	
<p>VI. Successful engagement in continuing professional development in relation to teaching, learning, assessment and, where appropriate, related professional practices</p>		

Descriptor 3	Typical individual role/career stage	Aligned to
<p>Demonstrates a thorough understanding of effective approaches to teaching and learning support as a key contribution to high quality student learning. Individuals should be able to provide evidence of:</p>	<p>Individuals able to provide evidence of a sustained record of effectiveness in relation to teaching and learning, incorporating for example, the organisation, leadership and/or management of specific aspects of teaching and learning provision. Such individuals are likely to lead or be members of established academic teams. Typically, those likely to be at Descriptor 3 (D3) include:</p>	<p>Senior Fellow</p>
<p>I. Successful engagement across all five Areas of Activity</p>		
<p>II. Appropriate knowledge and understanding across all aspects of Core Knowledge</p>	<p>a. Experienced staff able to demonstrate, impact and influence through, for example, responsibility for leading, managing or organising programmes, subjects and/or disciplinary areas</p>	
<p>III. A commitment to all the Professional Values</p>		
<p>IV. Successful engagement in appropriate teaching practices related to the Areas of Activity</p>	<p>b. Experienced subject mentors and staff who support those new to teaching</p>	
<p>V. Successful incorporation of subject and pedagogic research and/or scholarship within the above activities, as part of an integrated approach to academic practice</p>	<p>c. Experienced staff with departmental and/or wider teaching and learning support advisory responsibilities within an institution</p>	
<p>VI. Successful engagement in continuing professional development in relation to teaching, learning, assessment, scholarship and, as appropriate, related academic or professional practices</p>		
<p>VII. Successful co-ordination, support, supervision, management and/or mentoring of others (whether individuals and/or teams) in relation to teaching and learning</p>		

Appendix 11 – Reflective self-assessment template for nursing and midwifery lecturers without prior experience

This template is provided to enable nursing and midwifery lecturers without prior experience within an AEI to undertake a reflective self-assessment against the NMC academic assessor role. This template can be used to identify transferable knowledge, skills and experience and identify areas for professional development as an academic assessor.

The NMC academic assessor role (What do I need to be able to do?)	Transferable skills (What knowledge, skills and experience do I currently have?)	Areas for development (What knowledge, skills and experience do I need to consolidate, enhance or develop?)
<ul style="list-style-type: none"> ▪ collate and confirm student achievement of proficiencies and programme outcomes in the academic environment for each part of the programme ▪ make and record objective, evidence-based decisions on conduct, proficiency and achievement and recommendations for progression, drawing on student records and other sources ▪ maintain current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing and confirming 		

<ul style="list-style-type: none">▪ works in partnership with a nominated practice assessor to evaluate and recommend the student for progression for each part of the programme, in line with programme standards and local and national policies▪ have an understanding of the student's learning and achievement in practice▪ communication and collaboration between academic and practice assessors is scheduled for relevant points in programme structure and student progression, and▪ are not simultaneously the practice supervisor and practice assessor for the same student		
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Appendix 12 – National Principles of Practice Learning (May 2019)

The Practice Learning Principles articulate how within Scotland we are committed to ensuring that our practice learning environments support the ongoing development of the existing workforce and grow confident, autonomous nurses and midwives with a clear professional identity who can work in any care environment, within their field of practice, at the point of registration and beyond.

Principle 1 – All areas of practice across health and social care are valued equally as learning opportunities

Principle 2 – Equity of access across Scotland to practice learning opportunities, resources and supportive networks

Principle 3 – A positive nurturing, inclusive and productive learning environment that engages and challenges all learners (including pre and post-registration students) to fulfil their learning potential

Principle 4 – A learning culture which promotes and proactively facilitates feedback (giving and receiving) behaviours to support enhancement of excellence in practice learning for all

Principle 5 – A nourishing and flourishing practice learning environment which celebrates and supports sharing of learning across the workforce, empowering individuals to take responsibility for their own learning

Principle 6 – Supervision and robust assessment of learners within the practice learning environment by suitably prepared nursing and midwifery and other health and social care professionals

Principle 7 – A committed, open, collaborative partnership approach (Partner placement providers, Approved Education Institutions and NHS Education for Scotland) to the co-production of a national framework, with local flexibility, for the preparation of supervisors and assessors of learners in practice

Principle 8 – Use of evidence and emerging data from Excellence in Care to enhance the quality of the practice learning environment and the practice learning experience

Principle 9 – Engage in sharing and networking nationally and internationally to inform development of practice learning environments which provide ongoing support and development of practitioners.

Appendix 13 – Glossary of terms

Approved education institutions (AEIs)	Higher education institutions that have been awarded approved status by the NMC to work with practice learning partners to provide pre and / or post registration programmes.
Academic assessor	Academic assessors collate and confirm the student's achievement of proficiencies and programme outcomes in the academic environment for each part of the programme.
Practice assessor	Practice assessors assess and confirm the student's achievement of practice learning for a placement or a series of placements.
Practice learning partners	Organisations that provide practice learning experiences for supporting pre and post registration students to meet proficiencies and programme outcomes. Examples of practice learning partners include the NHS, care homes and charitable organisations.
Practice placement	A practice placement provides students with learning opportunities to undertake in practice under the support and supervision of supervisors and assessors.
Practice supervisor	Practice supervisors' role is to support and supervise nursing and midwifery students in the practice learning environment.
Student	Any individual enrolled onto an NMC approved programme at the pre-registration or post-registration level whether full time or part time.

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¹ Recordings of the GoTo stakeholder meetings can be accessed at www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/scottish-future-nurse-and-midwife-programme-board/workplan.aspx

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