

Supporting Learning in Practice Policy

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Purpose of Agreement	This policy reflects the stance taken by Solent Health NHS Foundation Trust (the Organisation) to comply with the Professional regulatory bodies and local initiatives in relation to supporting learners in practice.
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Executive Summary

The Supporting Learning in Practice policy has been developed to provide a framework for all staff who support learners in practice within Solent NHS Trust (the organisation) to ensure the organisation complies with the national Learning and Development Agreement (LDA) contract with Health Education England and provide assurance through the following quality processes which includes:

- Quality Assurance of Learning Environments
- Learning and Development Agreement (LDA)
- Care Quality Commission (CQC)
- NHS Litigation Authority (NHSLA)

Externally, this policy supports contractual agreements between the organisation, Health Education Wessex/Thames Valley and Education Providers and as part of the National Schedules that have been established to support education and training. Internally this policy lays down the requirements for supporting learners within Solent NHS Services. Please refer to contents page and introduction.

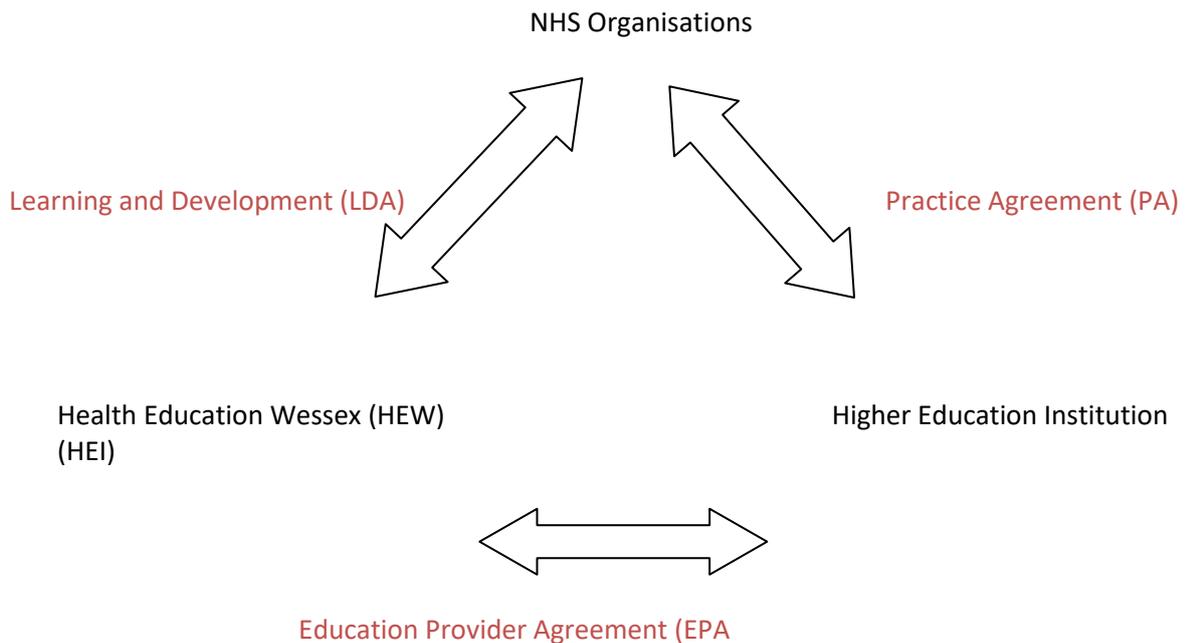
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1. INTRODUCTION

- 1.1 This policy has been developed to provide a framework for supporting learners in practice within Solent NHS Trust (the organisation) to ensure the organisation complies with the national Learning and Development Agreement (LDA) contract with Health Education England.
- 1.2 The LDA is a national agreement (requiring a signature from the Chief Executive of an organisation). It is a component of the suite of agreements which cover NHS organisations, Higher Education Institutions (HEI) and the Local Education and Training Board (LETB) which is Health Education Wessex (HEW).
- 1.3 The tripartite agreement identifies the roles and responsibilities of each component organisation in respect of supporting learners, including undergraduate non- medical students, medical students, and staff within Solent NHS Trust on educational programmes.
- 1.4 The three aspects of the LDA are
- Contracts between HEW and HEI's
 - Contract between HEW and NHS Organisation
 - Contract between HEI's and NHS Organisation



- 1.5 This policy acts to support organisational and local compliance and assurance through the following quality processes which includes:
- Quality Assurance of learning environments
 - Regulatory body requirements
 - Care Quality Commission (CQC)
 - NHS Litigation Authority (NHSLA)
- 1.6 Externally the policy supports contractual agreements between Solent NHS Trust, Health Education Wessex (HEW) and Education Providers and as part of the National Schedules that have been established to support education and training.

1.7 The organisation will work in partnership with education providers and Health Education Wessex (HEW). The organisation will have agreed practice placement capacity numbers for all identified learners and programmes.

1.8 This policy does not apply to qualified medical and dental staff. For this group of staff please see the Medical and Dental policy.

2. OBJECTIVES

2.1 The objectives of this policy are to:

- Assure quality education and training within practice areas for all learners
- Comply with the Learning and Development Agreement with Health Education Wessex
- Support the on-going development of educators, mentors, supervisors and assessors in practice who support learners
- Continue to develop quality learning environments
- Continue to provide quality patient care through staff that are trained, educated and updated

3. SCOPE

- This document applies to all directly and indirectly employed staff within Solent NHS Trust and other persons working within the organisation in line with Solent NHS Trust's Equal Opportunities Document
- This policy relates to all learners who are covered by the national Learning and Development Agreement
- All learners within the organisation who are undertaking pre-registration or undergraduate education programmes which are commissioned by HEW
- Learners who are undertaking other externally accredited courses such as apprenticeships or non-commissioned courses
- Learners who are undertaking in-house educational programmes

4. PARTNER ORGANISATIONS / STAKEHOLDERS

- Health Education Wessex (HEW) – Education commissioners that sit under Health Education England (HEE) who in turn sit under the Department of Health. Cover the Wessex Region
- Education providers – Colleges, Universities and other providers that the organisation and Health Education Wessex work with in order to provide education
- Higher Education Institutions (HEI's) – Universities commissioned to provide programmes of education leading to professional registration

5. DEFINITIONS

Supporting Learning in Practice – this policy relates to all students who are identified in the national LDA.

5.1 Learners who may include:

- Pre-registration Health and Social Care student's programmes commissioned by Health Education Wessex

- In-house learners such as those on seconded or salary supported programmes
- In house learners on internal programmes of development i.e. working towards achieving competence in practice or undertaking a preceptorship programme
- Learners who may enter the organisation on non-commissioned programmes such as Return to Practice Nurses, Apprentices and Work Experience students
- Undergraduate Medical Students are defined as an undergraduate receiving training or learning from a trainer and who is working towards an undergraduate medical degree, even if they also hold a non-medical degree

5.2 Educator / Mentor / Supervisor / Assessor

- An educator, mentor, supervisor, assessor is defined as a person who supports a learner in achieving their learning outcomes in a learning placement in their workplace
- This may be a registered professional who has undertaken additional training in order to support learners in practice or is accredited with an appropriate body e.g. professional body or educational provider
- An educator for in-house students is defined as any professionally registered member of staff who is supporting a learner through a programme of education or to gain a new skill / competency
- An educator for learners entering the organisation on non-commissioned programmes will be identified appropriately according to the criterion of their individual programme and awarding body

5.3 NMC Nurse Mentor

- A mentor is a specific term used by the Nursing and Midwifery Council (NMC) and relates to a registrant who, following completion of an NMC approved mentor preparation programme has achieved the knowledge, skills and competence required to meet the defined outcomes
- A qualified mentor is a mandatory requirement for pre-registration nursing programmes
- Further guidance on Professional requirements relating to Mentorship can be found in the NMC Standards for Mentors, Practice Teachers and Teachers
- This can be found at <http://www.nmc.org.uk/standards/additional-standards/standards-to-support-learning-and-assessment-in-practice/>
- Time for supporting learners will be allocated during working hours, following agreement with the learner and educator and their manager however protected time for learners should not be considered an automatic right and is at the discretion of line managers
- All 'live' NMC nurse mentors are individually and professionally accountable for adhering to the NMC Standards for mentorship and ensure that they:
 - Attend an annual face to face mentor update
 - Mentor at least 2 students within 3 years
 - Complete a triennial review every 3 years

- Have relevant evidence to demonstrate up to date knowledge, skills and experience to support learners
- Are responsible for keeping their current mentorship status up to date on the organisations Mentorship database

5.4 NMC Sign Off Mentor

- All areas will be required to agree the number of sign off mentors needed to support learners as per NMC standards
- Staff working towards becoming a sign off mentor can seek further guidance and information from the NMC standards and the L& D Team

5.5 Practice Teacher

- A Practice Teacher is a nurse on the NMC Register who will have previously fulfilled the NMC requirements to become a mentor and has received further preparation to achieve the knowledge and skills required to meet the NMC defined outcomes to become a practice teacher.
- A Practice Teacher is the qualification required to be able to support a student undertaking a Specialist Community Public Health Nursing (SCPHN) programme e.g. School Nursing / Health Visiting / District Nursing.
- In order to support their students, practice teachers have to attend update training, study days at a University and professional discussions with their student. They also have a responsibility to assess the student in practice. Work time and support to undertake these activities, and any others required as part of their role, must be given.

5.6 Educator in Practice (EIP) Team

- EIP team work within the Learning and Development (L&D) team and work across the organisation to positively support students and their mentors. They develop and deliver training activities primarily for students on placement, provide student inductions and access to Focus Groups. They deliver mentor/supervisor updates, support mentors / supervisors / assessors / practice educators / with struggling students. Complete student placement biannual audits.

5.7 Assessor / Supervisor /Educators

In order for Supervisors / Educators / Assessors, under the HCPC standards, to maintain their skills they are required to:

- Supervisor / Educator – Usually Allied Health Professional's (AHP's), actively seek appropriate supervisor educator training, it is good practice to be updated every 3 years.
- Assessor – Has a qualification to assess Qualifications Credit Framework (QCF) candidates.
- All must adhere to all their regulatory body requirements
- Time for supporting learners is allocated during working hours following agreement with the learner and educator and their manager however protected time for learners should not be considered an automatic right and is at the discretion of line managers.

5.8 Medical Trainer

- A Medical Trainer is an appropriately trained and experienced doctor who is responsible for education and training medical students within an environment of medical practice.

5.9 Learning/Practice Placement Area

- A learning/practice placement area is defined as a suitable supervised clinical, practical or other learning experience in a workplace environment within the organisation
- In order to support non-medical learners all learning/practice placement areas are subject to an educational audit every 2 years. Education audits are carried out by the EIP team in conjunction with the relevant HEI and the placement area to ensure they are meeting previously agreed organisational and education provider standards to support learners. For medical placements all placements are subject to annual review and may be audited by HEW HEI's at any time.
- Part of any placement audit process requires the learning/practice placement area to complete a profile of opportunities and experiences that are available to learners during their placement
- It is the responsibility of the learning/practice placement area to ensure this profile is completed and maintained. It is good practice for services to provide an up to date pack of service information for students
- Learning/practice placement areas will ensure that all learners undergo a local induction to their practice area which will cover all organisationally agreed requirements. Student induction packs will be available locally

6. ROLES AND RESPONSIBILITIES

- 6.1 **The Chief Nurse** has delegated authority and responsibility for Nursing and Allied Health Professional clinical practices and outcomes; professional regulation and clinical standards; staff training and development; governance (including compliance, risk management, patient safety and experience).
- 6.2 **Associate Director of Workforce Development** is responsible for strategic policies and processes for all staff and students in relation to workforce planning, workforce information, education, training leadership and development.
- 6.3 **Matrons / Department / Service / Education Leads** are responsible for assuring compliance with the policy within their clinical areas.
- 6.4 **Clinical Governance Leads** are responsible for governance arrangements and oversight within relevant service line /care group, including the learning and development of staff within the service line.
- 6.5 **Mentors / Clinical Educators in Practice / Practice Teachers / Education or Clinical Supervisors or Assessors** are responsible for supporting / facilitating and supervising learners who are allocated to them within the guidance from their professional regulatory bodies and education providers.

6.6 Staff

- All professionally registered staff within the organisation have a requirement and responsibility to support learners in practice.
- Supporting learners in practice is **not** an optional extra for any professionally registered member of staff working within the organisation and may include undertaking training to become a Mentor / Supervisor / Educator / Assessor as per professional body requirements
- All Educators / Mentors / Supervisors / Educators / Assessors have a professional duty and responsibility to support learners and to maintain their skills and should be aware of their individual professional responsibility in doing this. **See Appendix 3, 4, 5, 6**
- All Educators / Mentors / Supervisors / Educators / Assessors have a professional duty and responsibility to ensure that any staff they delegate to work with a learner is able to demonstrate the appropriate skills and values to do this. As with any delegated task the Educator / Mentor / Supervisor / Assessor remains responsible and accountable for what they delegate.

6.7 Learners

- Learners have a responsibility to commit to their learning and development and actively seek out learning opportunities
- Learners have a responsibility to show respect for, and courtesy to all service users and carers and all employees of the organisation, as well as safeguarding their well-being
- Learners have a responsibility to provide a high standard of practice and care at all times
- All Learners will comply with the organisations values, uniform and appearance policies and procedures and will be governed by these standards whilst in placement
- All learners have a responsibility to behave in a professional manner at all times including only agreed and appropriate use of personal mobile phones, good time keeping and clear communication with placement area e.g. absence, where abouts and study leave
- All learners using their own transport must have appropriate insurance cover to use their vehicle for work purposes
- Those learners on pre-registration programmes may undertake a variety of activities, if there is any doubt as to the appropriateness advice should be sought from the education provider.
- However under **no circumstances** should these learners undertake the following, even if accompanied: Medication given under a patient specific directive (PSD) or patient group directive (PGD), and IV's.

- If participating in the administration of medication (including prescribed injectables), urinary catheter insertion or venesection the learner **MUST** always be accompanied.
- The only exceptions being the application of eye drops, topical emollients or barrier cream preparations which the student may administer alone once deemed competent.

6.8 Learning/Practice Placement Area

- Learning placements will enable learners on any education programme to experience a variety of learning opportunities. These opportunities must reflect the provision of healthcare services and therefore placements (where appropriate) will reflect the 24 hours, 7 days a week delivery of services
- The organisations LDA agreement with HEW happens annually. Practice placement areas have a placement audit biannually where capacity for placement of learners is agreed. For nursing this capacity is dependent on numbers of qualified and up to date mentors. For AHP's students are allocated via the Fair Shares model which is based on WTEs and supervisory qualification. All must follow agreed processes if a change to overall capacity is required (Appendix One)
- Practice placement areas will encourage all learners to undertake the organisations evaluations of practice placements and compile action plans as necessary to support improvements and best practice reporting progress and outcomes via the local and Governance leads process
- If any issues, including health concerns, occur whilst a learner is in practice and these are unable to be resolved locally these should be referred back to the HEI and also Future Workforce, Learning and Development
- Practice placement areas must provide information to patients, relatives and carers regarding learners being in a placement area. Learners may examine, treat and / or advise patients, relatives and carers under the supervision of a qualified member of staff, though this supervision may be at a distance if deemed appropriate. Informed consent must be obtained from patients prior to any examination or treatment. Learners must not examine or treat patients who have not given the necessary consent
- Learners who already hold a Professional Qualification, have a professional responsibility to always act within their own professional competence
- Practice placement areas can allow learners to be involved in the chaperoning and escorting of patients. Staff must ensure that the learner understands this role and the responsibility associated with it before it is undertaken and have undertaken a risk assessment
- Learning placement areas may wish to produce their own local Standard Operating Procedure regarding supporting learners in their area
- Learning placement area CQC process and flow chart **see Appendix 7**

6.9 The Organisation

- The organisation has an obligation to provide practice placements for all learners as stipulated in the Learning and Development Agreement (LDA)
- The organisation has an obligation to ensure there are sufficient educators to support learners in practice. For supporting non-medical Pre Registration Learners there is more information about local responsibility in the Standard Operating Procedure for Supporting Pre-Registration Students in Practice
- The organisation will provide the resources for educators to be trained as deemed appropriate by Training Needs Analysis (TNA) and to maintain their skills to support learners
- The organisation will inform HEW of any likely impacts to the organisation's ability to provide practice placements and therefore any likelihood of the Trust being unable to meet its obligations under the LDA. **See Appendix 3**
- If there are concerns regarding the suitability of a practice placement this will be risk assessed and if necessary the practice placement withdrawn. The organisation is charged with informing the education provider of any placement alterations
- The Organisation will liaise with education providers regarding the placement of learners, however, the education provider will be responsible for the actual allocation process, unless the learner is an In-service trainee or there are particular reasons identified within the organisation
- The organisation will work in partnership with all education providers to enable optimal use of the available practice placement capacity and therefore support all learners to access appropriate learning to support achievement of learning outcomes
- The organisation will develop new and innovative placement opportunities that support emerging and integrated models of healthcare and understanding of inter-professional working
- The organisation will work in partnership with HEW and education providers to identify, plan, manage, audit and review practice placement opportunities
- When the organisation receives evaluations of learner experiences these will be fed back to placement providers as agreed locally. Action will be taken to rectify issues relating to poor evaluation outcomes
- Evaluations will be shared with educational commissioners and individuals / managers as appropriate to support continuing professional development and facilitate improvement in quality of the learner experience
- Under the LDA, the organisation must give priority to learners from programmes commissioned by HEW
- The organisation will inform the education providers of any concerns in practice placements raised in external reports that require action

7. HUMAN RESOURCES (HR) REQUIREMENTS FOR LEARNERS

The following applies to learners regarding Disclosure and Barring Service (DBS), Occupational Health (OH), Mandatory Training and Honorary Contracts:

7.1 HEW Commissioned Students undertaking clinical placements

- Learners on a HEW commissioned programme **do not** need an honorary contract, OH clearance or DBS check, as this will have been completed by the HEI before commencement of the programme
- A DBS will be undertaken at the start of their University course by the HEI. There is no requirement for the organisation to repeat the DBS for placements
- No honorary contract is required
- The education provider will ensure all UKSF mandatory training is undertaken prior to students coming out into practice, including any necessary annual updates
- The HEI will ensure that any requirements for vaccinations are met prior to placement

7.2 Non- Commissioned students undertaking clinical placements

- This includes elective requests.
- Since 1 April 2014 Solent NHS Trust no longer offer placements to non-commissioned students or out of area students unless funding is in place prior to any placement and only then if all of their commissioned placement capacity has been met.
- The organisation's Human Resources (HR) Department will need clarification from the base University / College / employer that satisfactory DBS / Occ Health checks have been received at the start of their course. If not, then a new DBS will be required prior to commencement of placement. This may delay start dates so will need to be planned ahead and should be facilitated by HR in conjunction with Learning and Development and the HEI
- The organisation's Human Resources (HR) Department will also need evidence of OH clearance including any required vaccinations from the HEI or the student will be required to be cleared via the organisation's OH department
- These learners will require an honorary agreement to cover the full period of their placement

HEW commissioned students/Non Commissioned students (see appendix 1)

7.3 Overseas Students on placement (usually Medical)

- Will require an honorary contract to cover full period of placement
- Will require a DBS where they have previously been resident in the UK
- Will accept a 'Certificate of Good Standing' from own country if placement is short (under 3 months)
- Will need a statement from the department manager to confirm that the student will be supervised at all times to mitigate risk as much as possible

7.4 Return to Practice

- Those employees seeking a return to practice placement through the Trust must be directed to the L& D Team to ensure the Trust's process is adhered to. Information around Return to Practice can be found in (see **Appendix 8**)

7.5 Diploma Students

- Those band 1 – 4 members of staff who are completing their diploma are required to complete a learning contract with Learning & Development (see appendix 2)

8 TRAINING REQUIREMENTS

- Mentorship training will be accessed via TNA and Band 5 – 9 funding or as determined by HEW. Supervisors / assessors training will be via relevant HEI in line with professional governing body requirements
- Identification of appropriate staff for this is the manager's responsibility and should be identified through the appraisal process and requested on the annual Training Needs Analysis (TNA)
- To support educators and the practice learning environment the organisation and local HEI's will provide opportunities for educators to update regularly

9 MONITORING COMPLIANCE

9.1 Process for Monitoring Compliance / Effectiveness

Monitoring of compliance will be via a number of routes which include:

- Bi annual Learning environment audits
- Annual review of contract linked to HEW
- Monitoring of the LDA using the HEW monitoring process
- Any identified areas of non-adherence or gaps in assurance arising from the monitoring of this policy will result in recommendations and proposals for change to address areas of non compliance and/or embed learning. Monitoring of these plans will be coordinated by the group/committee identified in the monitoring table.

9.2 Key aspects of the procedural document that will be monitored:

Element to be monitored	Lead	Tool	Frequency	Reporting arrangements
Learning and Development Agreement	Clinical Development Manager, L&D	LDA Spreadsheet	quarterly	Via HEW
Learning Environment Audit and Capacity	CEIP's and Workforce Coordinator, L&D	Learning environment Audit paperwork	Every 2 years for each area	Via Local Education Institutions and HEW
Annual reporting to HEW	Director of Education, L&D	HEW spreadsheet	Annually	Via HEW

- The Learning and Development team (L&D), on behalf of the organisation will collate information regarding the quality of all practice learning and subsequently the data will be used to inform and improve working practice

- The L&D, on behalf of the organisation report to commissioners at agreed intervals on the quality of practice learning
- The organisation provides evidence to HEW for review for compliance with the LD on all placements
- The L&D on behalf of the organisation report to HEW all non-medical student activity annually
- The organisation provides reports as requested by professional governing bodies, such as the NMC and Health and Care Professions Council (HCPC) and GMC
- The organisation will work in partnership with the HEI to audit the student placement environment
- The organisation will act upon any evaluations received from HEI's including any internal evaluations of practice placements and compile action plans as necessary to support improvements and best practice, reporting progress and outcomes via local governance process

10 ADDITIONAL SUPPORT

- Practice placements and the Trust will work in partnership with education providers to support any learner who requires reasonable adjustments in practice under the Disability Discrimination Act 1995. Risk assessments must be undertaken by the organisation in line with local policy
- Any learner who is not on a commissioned programme and who requires reasonable adjustments must be identified by the HEI, disclosure consent agreed and communicated to the organisation
- The organisation reserves the right to decline supporting a Learner where required adjustments are deemed not to be appropriate or practical

11 TRAVEL EXPENSES

- For non staff members these are the responsibility of the HEI
- For staff members these may / may not be reimbursed depending on agreement made prior to commencement
- For Undergraduate Medical students these are the responsibility of the Faculty of Medicine with the exception of Year 4/5 students undertaking a Community Psychiatry attachment when it is the responsibility of the Organisation

12 REVIEW OF PROGRAMMES AND NEW INNOVATIONS

- The Organisation will support appropriate staff to be involved in partnership with education providers and Health Education Wessex to represent their organisation / profession at education / service provider meetings, curricula development events and reviews by the regulatory bodies

13 ACCESS

- With suitable prior arrangement the organisation will ensure access to the premises to learners, academic staff from HEI's, regulatory body representatives and Health Education Wessex staff in order to support quality assurance of learning environments

14 SUPPORT, GUIDANCE AND DISCIPLINARY ISSUES

14.1 If, in the opinion of the Educator / Mentor / Supervisor / Assessor a learner's conduct, professional suitability or if patient safety has been compromised the following actions must be undertaken:

- Ensure patient safety / learner wellbeing – this may include removal of learner from learning environment
- Report incident through governance processes
- Inform the education provider and appropriate person/s within the Organisation immediately
- Co-operate with the education provider in relation to any investigation or disciplinary action
- Co-operate with the education provider regarding any patient complaint involving a learner
- If a learner is involved in a clinical incident this must be recorded on an incident form and Learning and Development **MUST** be informed if there is an impact on the learner
- Should any area of student performance cause concern regarding their ability to pass a placement, the concerns must be raised with the student as early as possible. Regular, discussions and review meetings with their mentor must be arranged and their HEI tutor informed. All meetings and discussions must be documented within the appropriate University paperwork. It may be necessary to implement an individual Student Learning Contract Action Plan to ensure all aspects of concern are clearly identified and managed in a timely manner to assess progress. **See Appendix 5**

15 MEDICAL UNDERGRADUATE – SPECIFIC REQUIREMENTS

- The Organisation will comply with all of section 1 of this policy when supporting undergraduate medical students as well as complying with these additional requirements

16 MEDICAL UNDERGRADUATE PROGRAMME IN CLINICAL PLACEMENT

- The Organisation will ensure that NHS Medical Educators will be available to support and teach undergraduate medical students in line with the Medical schools standards for teaching, assessing and examining
- The Organisation will ensure that NHS Medical Educators job descriptions and contracts of employment set out the requirements for supporting undergraduate medical students

- The Organisation will ensure that placements are made available that support the medical curriculum
- The Organisation will support NHS Medical Educators to comply with the Medical School's staff development requirements and ensure that there is a review of their teaching as part of annual appraisals, peer review of teaching and attendance at a teaching training event once in every three years
- Medical staff who are not Consultants are able to undertake teaching with the prior agreement of the Medical School. Such teaching must be undertaken under the direction and supervision of a Medical Consultant
- The Organisation shall have in place an Undergraduate co-ordinator who will be responsible for liaising with the Medical School and ensuring that any reasonable requirements of the School are put in place and to facilitate the student placements
- The Organisation will support formal examination processes where appropriate. This may include access to patients and facilitates. The required consent must be obtained from patients prior to exams starting
- The Organisation will provide examiners to support the exam process as reasonably required and may also be required to arrange and facilitate other assessments e.g. Mini clinical evaluations
- With notice, the Organisation may be required to support the Medical school with assignments, projects and with Special Study modules
- The Organisation will support undergraduate medical students. Clinical notes and activities observed by Supervisory staff and that at the end of a placement an assessment is completed
- To support undergraduate medical students' learning the Organisation will ensure that teaching resources, library and IT facilities are available

17 POLICY REVIEW

- This document may be reviewed at any time at the request of either at staff side or management, but will automatically be reviewed three years from initial approval and thereafter on a tri-annual basis unless organisational changes, legislation, guidance or non-compliance prompt an earlier

18 ASSOCIATED DOCUMENTS

- Learning and Development Policy
- Learning and Development Agreement
- Uniform and Appearance Policy
- Health and Safety Policy
- Promoting Excellence: standards for medical education and training
- Standard Operating Procedure (SOP)

19 Supporting References

Nursing and Midwifery Council (NMC) (2007) Standards to Support Learning and Assessment in Practice. NMC Standards for Mentors, Practice Teachers and Teachers. NMC.

London Guidance on Conduct and ethics for students <http://www.hpc-uk.org/assets/documents/10002c16guidanceonconductandethicsforstudents.pdf>

Appendix 1

Under Graduate Students Commissioned/Non-Commissioned Students (non-Medical)	
Pre-registration students: Services should be aware that pre-registration student placements are split into two categories:	
<p>Commissioned (funded) student placements. The Trust is committed to these student Community placements via the LDA agreement.</p> <p>No honorary contract or HR checks required</p>	<p>These student placements are commissioned by Health Education Wessex (HEW), the Trust is paid a tariff for these students. Solent signs a Learning & Development Agreement (LDA) to place a certain number every year. This payment is currently calculated approximately 1 x WTE = 37 weeks (1 week = 37.5 hours) = £86 / week, though this may increase following the tariff project.</p> <p>Medical students have an increased tariff</p>
<p>Non-commissioned & Out of Area students (non-funded) Services are not obliged to place these students.</p> <p>There is an administration process to follow which will require various checks and in most cases HR checks and an Honorary Contract</p>	<p>Although historically Solent NHS Trust has offered 'free' placements to these non-commissioned students it is not obliged to do so.</p> <p>From 1/4/15 unfortunately the Trust is no longer able to accommodate these requests unless they are funded as they use service capacity and are costly.</p> <p>Therefore if a student/University requests a non commissioned placement and the service has capacity to accommodate, it can only be agreed:</p> <ul style="list-style-type: none"> • If the service area Commissioned student (funded) commitments have been fully met. • The University in question agree to fund a minimum of £86 per/week (this may increase over time due to the Tariff project.) • However in some circumstances (usually MSc out of area placements) services may be able to negotiate more than this amount. • Funding can be waived if student is in a profession which the Trust need to employ <p>Unlike Commissioned placements any funding received by the service in this way can be ring fenced for service CPD. In no circumstance will individual members of staff receive payment.</p> <p>There is an administration process for these students which can be obtained from Learning & Development.</p> <p>However if a service has extra capacity to host students it would be preferable to increase their Commissioned (funded) student capacity</p>
<p>Social Work Students HR checks and Honorary contract required</p>	<p>Social Work students are slightly different; these students though non-commissioned do come with some small nationally agreed funds attached. Once their placement has ended the service in question has to invoice the University in question. (£20 per day with an on-site Practice Educator (PE), or £8 per day if the University had to supply and off-site PE)</p>
Open University Students:	
<p>Supporting Learners in Practice Policy</p> <p>Open University NHS HCSW employees studying for BSc Nurse training whilst working in</p>	<p>May 2016 Page 19 of 41</p> <p>Version 1</p> <p>Exceptional Solent HCSW staff can be supported by their work base for 4 years to complete their Nurse training*. These students require placements predominantly in their home base but also in other areas. Once qualified these students are often retained as a qualified member of staff by their home base.</p>

<p>the NHS Course usually takes 4 years</p>	<p>During training each student remains an employee and is required to complete 2300 practice hours and 2450 study hours across a 4 year programme. Course fees are usually funded by Health Education Wessex with backfill for the post which equates to 78% on the mid-point band 3 pay scale for the HCSW hours lost.</p> <p>*Numeracy and literacy key skills level 2 entry requirements and a rigorous application and interview process.</p>
<p>Return to Practice (RTP)</p>	
<p>Currently funded by HEW at the University of Southampton.</p>	<p>Previously NMC qualified Solent NHS Trust HCSW staff can, with the support of their manager, apply to complete a RTP course at The University of Southampton (UoS). Students have to complete 150 hours practice a week and attend University 1/2 day a week (Wednesday). It is a 20 week programme. Currently (2015) HEW is funding UoS fees for Adult, MH & LD RTP courses only, though this is subject to change.</p> <p>There is also the possibility of services providing a placement for staff external to the Trust.</p> <p>* Solent NHS Trust authorise the UoS application, full Manager support and placement required</p>
<p>Post Graduate (Commissioned) Student placements. The Trust is committed to these student Community placements via the LDA agreement. No honorary contract or HR checks required</p>	<p>Physiotherapy (MSc) - University of Southampton Advanced Diploma Nurse – University of Southampton Speech & Language Therapy (MSc) - University of Reading Specialist Community Public Health Nurse (SCPHN) School Nursing and Health Visiting –University of Southampton and University of Surrey District Nursing and Community Childrens Nurse MSc Advanced Clinical Practice – University of Southampton</p>
<p>Work Experience / Job Shadowing:</p>	
<p>Work Experience</p>	<p>Solent NHS Trust would like to encourage every service to offer a work experience opportunity of at least 1 week a Qtr. to a college student who may then go on to become our future workforce via the traditional University route or the Trust Apprenticeship scheme. The responsibility for this can be given to a junior member of staff as part of their development.</p> <p>Please contact L&D, Future workforce kate.then@solent.nhs.uk to offer your work experience 1 week placement each Qtr.</p> <p>There is an administration process for these students which can be obtained from L&D</p>
<p>Job Shadowing</p>	<p>Students may wish to job shadow for a period of time, this can range from 1 – 5 days.</p> <p>Please contact L&D, Future workforce team kate.then@solent.nhs.uk if you offer a job shadowing experience. There is an administration process for these students which can be obtained from L&D</p>
<p>Solent NHS Trust provides community placements for students from the following Higher Education Institutions (HEI's):</p>	

Higher Education Institute	Course	HEI	Course	HEI	Course
Bournemouth University	NMH	Tavistock & Portman	Chp	University of Reading	SALT
Eastman Centre	DeT	University of Hertfordshire	NLD	University of Southampton	CP, CN, HV, NA, NC, NMC, OT, P, PT
OU	NA, NMH	University of Portsmouth	DeN, DeT, NA	University of Surrey	HV

Key:

Child Psychotherapy	ChP	Dental Nursing	DeN	Improving Access to Psychological Therapies	IAPT	Nursing - Mental Health	NMH	Podiatry	P
Clinical Exercise	CE	Dental Therapists	DeT	Nursing - Child	NC	Occupational Therapy	OT	Return to Practice	RTP
Clinical Psychology	CP	Foundation Degree	FD	Nursing - Adult	NA	Paramedics	Para	Speech and Language Therapists	SALT
Community Nursing	CN	Health Visiting	HV	Nursing - LD	NLD	Physiotherapy	PT		

Non-Commissioned students are usually: BSc Psychology, Speech & Language & Communication (SLACS), Exercise Science, Biomedical Science & MSc or out of area students

If you require any further details about any of the above please contact L&D Team

**Solent NHS Trust QCF Centre
Candidate and Line Manager Contract**

This section to be completed and signed by the Candidate:

I, First Name..... Surname.....confirm that I have been a permanent employee of for a minimum of six months prior to this application and wish to be considered for funding (£2,800) for the following course which has been identified in my most recent Performance Excellence Appraisal.

QCF Level 2/3 Diploma in (course title):
.....

I accept that it is a condition of the Trust, agreeing to fully fund the Diploma and that I attend the required study times and undertake and submit all academic and practical assessments within the agreed timescales,

I agree to highlight with my Assessor and/or Line Manager if I need support to complete practical or academic assignments so that extra support can be provided to enable me to meet agreed deadlines..

I agree that if:

- I fail to attend the required study times or learner support without legitimate reason* (e.g. sickness of compassionate leave) *pressure at work is not a legitimate reason.
- I fail to submit or participate in the required academic or practical assignments.
- I fail to complete the course

I may be required to repay 50% of the course fees within 3 months of notification by my employer that such a charge is being made due to my nonattendance and or failure to submit evidence or participate in the required practical aspects of the above course.

I understand that it is my responsibility to inform my Line Manager and the QCF Centre if I am unable to complete the course for any reason.

Signed.....Date.....

This section to be completed by the Line Manager:

I understand the benefits of this training to the Candidate, the service and its users.

I agree to provide opportunities for study and access to information to enable the Candidate to complete the course.

I agree to the Candidate attending the training sessions required to undertake the Diploma as set out in the programme.

I will discuss their progress at regular intervals.

I am aware that I can contact the QCF Centre at any time if I have any concerns or issues regarding the Candidate and his/her progress at any time.

I am aware that my service may be charged a fee of £50 if the Candidate does not give a minimum of 7 days' notice for non- attendance of any of planned training events.

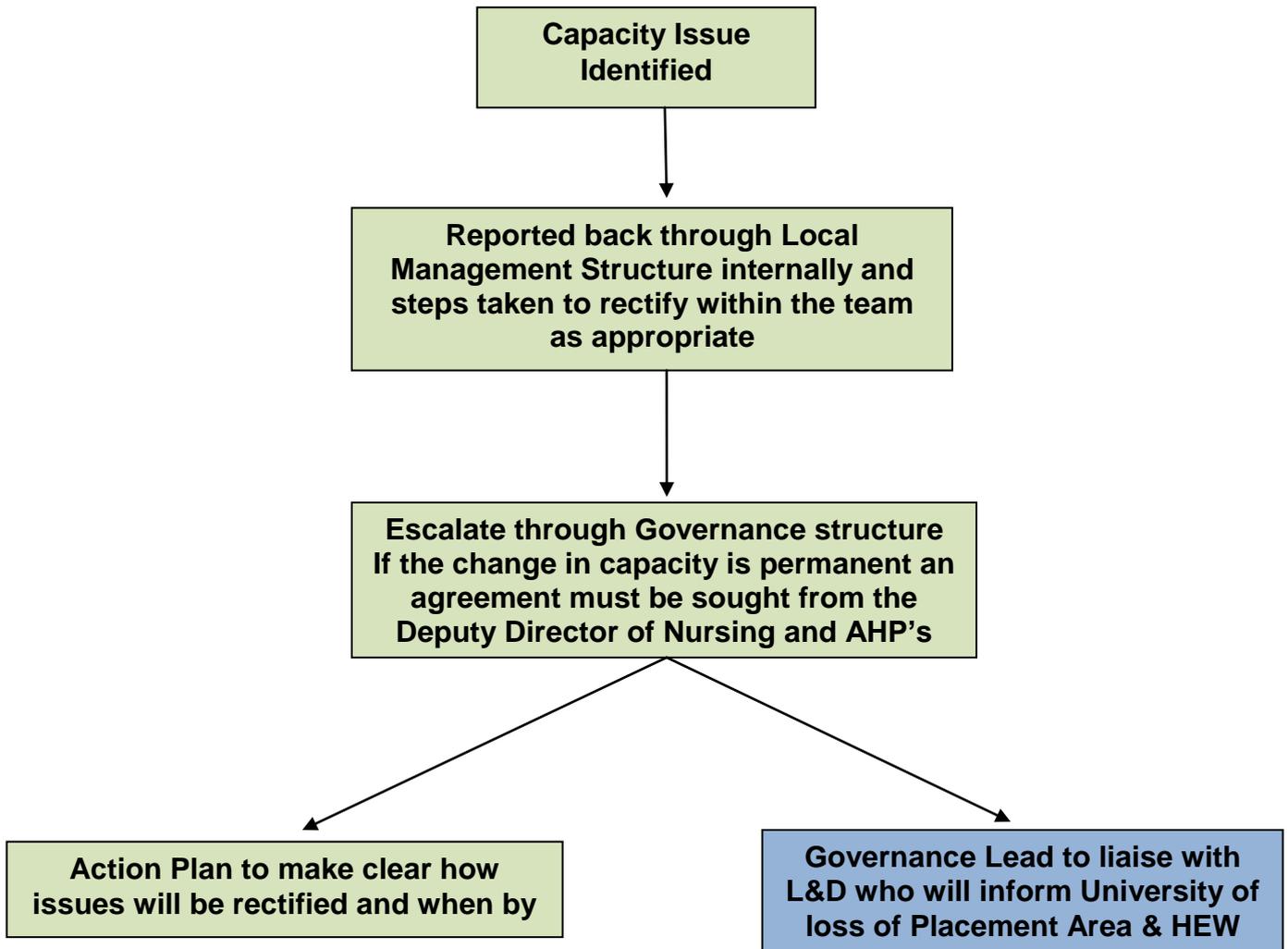
Signed.....Date.....

For office use only:

Agreed units for completion of award.	
Documents in file:	
Signed Application Form	Yes/no
Job Description	Yes/no
Contract	Yes/no
Non-compliance fee charged yes/no (If yes, please state for which aspect of course)	

Appendix 3

Process for Reporting Capacity Issues to Learning and Development Team For All Non-Medical Learners



Appendix 4 - Nursing and Mentorship

General information to support the adherence to the Mentorship Policy and NMC requirements

- All nursing students must be assigned, as a minimum requirement, a qualified mentor (this is a member of staff who has attended, submitted and passed a University accredited programme)
- Staff without an accredited qualification can act in the “buddy” or Associate mentor role. These staff can sign individual proficiencies or essential skills but all entries **MUST** be countersigned by a qualified mentor.
- At the progression points (usually at end of Placement 2 and 4) a qualified mentor will complete the final interview and signs to say that the student is fit to progress to the next year. Best practice is for qualified mentors who are designated sign off mentor to sign the Assessment of Practice Document at these points.
- At the point of registration (Usually placement 6) a qualified mentor who must be on the same PART of the register as the student and who is designated as a ‘sign off’ mentor **MUST** complete the documentation, having worked with the student and been allocated 1 hour protected time each week the student is in placement.
- All qualified / sign off mentors must have their current information on the organisations live register of mentors, this is the professional responsibility of each individual member of staff.
- All Open University students must have qualified mentors who is or will be working towards sign off mentor status in their home base.

Mentorship Programmes

- All staff who attend a University Mentorship programme must ensure their manager and education lead are informed of completion and complete a database update form which will enable the live register to be updated.

Protected Time

- All staff who attend a mentorship programme **MUST** be allocated 5 protected days in addition to contact time with the university, when the trainee mentor works with their allocated student. Trust guidance is available to support this. All mentorship students must sign their portfolio advising that they have had 5 protected days. This will be negotiated at the start of the module between managers and the member of staff.

Sign Off Status

- All staff commencing a mentorship programme after APRIL 2008 (once they have passed their assignment) will be required to progress to Sign off status. Therefore a new mentor will need to sign off nursing students three times one of which must a final placement usually P6. A member of staff who is already a sign off mentor will be allocated to support this process.
- Whilst there are progression points over the NMC approved programme, a final placement is signed off to confirm a student is fit for practice and purpose, therefore able to register onto the NMC register.

Keeping Up-to-date

- All NMC registered staff must demonstrate they have been updated on a yearly basis. This can be documented in the Mentorship/Triennial Review workbook record and updated on the Trust NMC Database. There are a number of routes by which this can be achieved including:
 - Facilitated Face-to-face session every year

- Discussions with link lecturers/ Practice Academics regarding practice / students issues
 - Working with the link lecturer to support a challenging student
 - Accessing the ALPS website and working through the E learning package
 - Application of new learning to practice with learner involvement
 - Testimonies
 - Attendance at Conferences which have a learner component
- Attendance is recorded onto the live Trust NMC Database register of mentors
 - A review of an individuals' mentorship role, **MUST** be discussed on a yearly basis with their manager at appraisal, with the mentor demonstrating continued competence and adherence to the NMC requirements (i.e. the mentoring of 2 students over a 3 year period). This is supported by the Supporting Learning in Practice Booklet
 - Every three years the mentor **MUST** complete the Triennial Review process and documentation with their manager at Appraisal and return to the Learning & Development Department for recording on the mentorship database.

Members of staff who do not comply with their governing body requirements in this case the NMC will be removed from the Trust NMC database and will only be reinstated when they have met all the requirements.

As recommendations /standards alter from the NMC the appendix for this guidance will be updated.

Appendix 5 – Student Learning Contract Action Plan

Student Learning Contract Action Plan To support and / or manage progression	
Student Name:	
University/ Course:	
Placement/Service Area:	
Mentor Name:	
Date:	
Progression issue identified:	
Action agreed: (Inc. measurement identified)	
Target date agreed and comments :	
Date achieved:	
Mentor signature:	
Student signature:	

Appendix 6

Medical Student Placement Supervision

- Placement Supervisors
- Clinical Supervisors
- Student responsibilities

1. Placement supervisors

Supervisor training

- Medical student supervisors and tutors must have prepared themselves adequately for the role and have an understanding of educational theory, practical educational techniques and the new assessment tools. They should ensure that they maintain their skills and update their knowledge by attending appropriate courses
- The Medical School provides training (MEDUSA) accessible by those undertaking these roles

Job Plans

- Teaching responsibilities are negotiated with the relevant teaching teams and at individual job planning meetings. Agreed activity is allocated in SPA time (supported professional activity) this is funded through the undergraduate tariff calculated on student placement weeks

Placement supervisors must:

- Meet with the student at the beginning of each placement to agree how the learning objectives for this period of training will be met and confirm how formative feedback and summative judgements will be made
- Offer a level of supervision and review learning needs appropriate to the curriculum requirements for the student
- Liaise, where appropriate, with clinical supervisors with reference to the student's capabilities and learning needs in relation to clinical duties
- Help students by reviewing their learning needs in the light of achieved goals
- Be responsible for ensuring systems are in place to provide fair and non-discriminatory feedback from clinical supervisors and the collation of such evidence
- Carry out and/or collate assessments from clinical supervisors, trainers and other assessors who have worked with the student
- Review and provide feedback on the student's learning portfolio or learning e-portfolio
- Meet with the student to assess if necessary outcomes have been met and complete an end of placement review form if applicable for the placement
- Support the student through any placement related difficulties

- If a student is involved in any incident giving rise to patient safety concerns, concerns about their performance or a patient complaint, or there are concerns regarding the student's probity, their placement supervisor and care group lead, the director of medical education and the School of Medicine must be informed
- If a student is involved in a Serious Untoward Incident that has resulted in actual patient harm or is likely to result in restricted practice or exclusion from the Trust the Medical Director should be informed
- Ensure that all placement opportunities meet the requirements of equality and diversity legislation
- Give appropriate feedback to the medical school with the trainee's/student's knowledge

2. Clinical Supervisors

Clinical supervisors must:

- Be fully trained in the area of clinical care and understand their responsibilities for patient safety
- Ideally be trained in clinical supervision and have an understanding of the standards of performance expected of medical students in their area of clinical practice
- Ensure a medical student only works under direct supervision
- Offer a level of supervision of clinical activity appropriate to the competence and experience of the individual medical student ensuring that the student is never put in a situation where they are asked to work beyond their competence without appropriate support and supervision. **Patient safety must be paramount at all times**
- At all times be aware of their direct responsibilities for the safety of patients in their care
- Delegate thoughtfully, responsibly, and in appropriate circumstances, some supervision to colleague consultants / general practitioners or appropriately experienced non-consultant career grade doctors. **However, for every patient and each clinical setting it needs to be clear where responsibility for clinical supervision lies**
- Work with the undergraduate leads and Clinical supervisors for each clinical area, to guarantee suitable local induction to the ward/department practice and be aware of all Trust policies and standards relevant to their post
- Meet with the student group assigned to them at the beginning of each placement to discuss what is expected in the placement, what learning opportunities are available and the student's learning needs and make sure that the placement faculty is known to the student
- Ensure that the clinical experience available is appropriate and properly supervised
- Ensure that all training opportunities meet the requirements of equality and diversity legislation
- Monitor, support and assess the student's learning

- Allow the student to give feedback on the experience, quality of training and supervision provided
- Discuss serious concerns with the student supervisor/tutor about the student's performance, health or conduct. The teaching team may then **contact the medical school, specialty undergraduate education leads, Director of Medical Education, Medical Director should the performance of any individual student or trainee/ junior career grade doctor give rise for concerns (dependant on nature of issue)**

3. Medical Students

Students' responsibility

- Every medical student commencing a Community Placement / Attachment / Rotation will attend and educational induction to make sure they understand the curriculum and how their placements fit within the programme
- It is the students' responsibility to ensure a meeting takes place with their placement supervisor/tutor
- Students must have a means of feeding back their concerns and views in confidence about their training and education

Appendix 7

AHP Practice Placement Education

The following principles have been established as a guide for AHP students, practice educators and managers as to their role and responsibilities during practice placements at Solent NHS Trust

Roles and Responsibilities

Managers

- To identify the need for practice educators within their department and enable staff to access the training required
- To support trained staff in supervising a minimum of 1 student per year in order to maintain their competency. If this lapses, re-training can be accessed by the member of staff where there is a need for them to continue to support students
- To allocate all staff who supervise a student protected time in order to provide appropriate supervision and feedback on a regular basis and complete marking/grading activities

Practice Educators

- To ensure staff complete a briefing session before being able to support an AHP student in practice
- To ensure staff are annotated on the Trust AHP practice educator / supervisor register
- To regularly work along-side their student in order to assess their level of competency and facilitate learning, delegating tasks when the student has demonstrated the appropriate competency and safe practice
- To negotiate and prioritise identified learning experiences to meet learning needs, including appreciation of roles within the multi-disciplinary team
- To tailor the level and style of supervision according to the individual student needs / requirements
- To plan regular supervision and feedback sessions in conjunction with the student
- To ensure the student's notes are counter-signed by a qualified member of staff
- To receive constructive feedback at regular intervals
- To attend an update workshop every 3 years

Students

- To commit to learning and development and actively seek out learning opportunities
- To observe accurate timekeeping and inform the clinical area and the education provider if they are unable to attend for any reason.
- To work alongside a practice educator and, where relevant, experience 24hr patient care
- To inform the practice educator of any learning needs and any reasonable adjustments that are required at the earliest possible time prior to the start of placement
- To speak with their practice educator at the earliest convenience if any deviation from this charter has occurred or if they have any concerns whilst on placement
- To evaluate their placements so that good practice can be disseminated and corrective action taken to improve the placement experience
- To actively seek learning with other professions and teams of staff who they are working with

Appendix 8

CQC Inspections in Learning Environments where students are in practice

All Learning Environments are open to inspection to monitor quality of patient care by the Care Quality Commission (CQC). This is a normal part of the Governance process and should not cause concern.

A CQC visit is an opportunity for Learning Environments to celebrate and share good practice as well as make improvements where appropriate.

Sometimes, after a CQC visit, actions taken by the organisation provide an excellent learning opportunity for Students in practice. The importance of this process should not be underestimated in forming part of the development and knowledge of future health professionals.

However, on occasion it may be necessary to take action to both support the student and the learning environment and the attached flowchart shows how Solent NHS Trust will respond to ensure the wellbeing of learners on placement within its Learning Environments.

Glossary of Terms

CQC – Care Quality Commission

HEI – Health Education Institution i.e. Universities

HEW – Health Education Wessex – education commissioner

Future Workforce Team – who along with mentors/supervisors/educators are responsible within Solent NHS quality of Student Experience and Learning Environments

EIP – Educators in Practice who along with mentors/supervisors/educators are responsible for ensuring the quality of the student experience and learning environments

Learning Environments – Practice Area with Solent NHS Trust that supports learners

PAC – Practice Academic Co-Ordinator within HEI's

Student – A learner undertaken a programme of education at a HEI which requires a clinical experience within Solent NHS Trust

L&D – Learning and Development

Flowchart



Appendix 9

Bands 1-4 Principles for Supporting Work Based Learning

The following principles have been established to assist band 1–4 students and their mentor/supervisors/ assessors and managers in the completion of any unit which has a work based learning component within it

Principle

The following principle has been identified to support the development of Band 1–4 staff (including Foundation Degree and apprenticeships)

- **Enable Band 1-4 students to practice the skills that have been identified to support their development into new or existing roles**

Roles and Responsibilities

Managers

The following roles and responsibilities are considered to be central to the achievement of the student undertaking role development at Band 1-4:

- Be up-to-date with the required curriculum
- Link the required learning outcomes with workforce development within the department
- Allocated a “qualified” mentor/supervisor/assessor to the Band 1–4 student (see guidance on what constitutes “qualified”)
- Link with Mentors/Supervisors/assessor on a regular basis to ensure the work based learning unit is progressing within set timeframes
- Work with the ward/ department team on their understanding of the Band 1–4 training and its links with workforce.
- Ensure the Band 1–4 students is a “student” in line with the agreement signed on application.
- Undertake the impact evaluations at the beginning, middle and end of the work based learning units
- Enable students to practice the skills required to ensure completion of programme and acquisition of competencies

Mentors / Supervisors / Assessors

The following roles and responsibilities are considered to be core to the successful development of a supportive and educational relationship between the mentor /supervisor/ assessor and the Band 1-4 student:

- have a planned work pattern and work alongside their mentor / supervisor / assessor regularly to enable effective learning and assessment
- Have interviews / reviews planned and undertaken within the timeframes required by the curriculum.
- receive constructive feedback on progress at regular intervals
- negotiate and prioritise identified learning experiences to meet learning needs
- have all documentation completed in partnership within the required timelines
- be encouraged to take part in learning with other professions throughout the placement

Students

Learners have responsibility:

- commit to learning and development and actively seek out learning opportunities
- observe accurate timekeeping and inform the clinical area and the education provider if unable to attend for any reason
- make their Occupational standards assessment document available every shift and ensure that it is completed at intervals throughout the placement
- work alongside a mentor / supervisor / assessor / centre co-ordinator and where relevant, experience 24 hour patient care
- speak with their mentor / supervisor / assessor / centre co-ordinator or appropriate manager at the earliest convenience if any deviation from this charter has occurred or if they have any concerns whilst on placement / learning experience
- evaluate their placements to enable good practice to be disseminated and corrective action taken to improve the placement experience
- actively seek learning with other professions and teams of staff who they are working with

Return to Practice Information

Enquiries regarding RTP can come from both inside and outside of the Organisation. Also sometimes opportunities will be advertised.

Internal enquiries from Solent NHS Trust employees:

If an employee is supported by their manager to apply for RTP funding they are able to apply and be interviewed. If successful they can expect to be fully supported by an experienced mentor within their service and helped to achieve competencies for becoming re-registered as a professional.

External enquiries:

The Organisation will explore the possibility of finding a service area who will be willing to support an external applicant through the RTP course.

Overview:

The Organisations expectation is that the applicant is able to demonstrate how they have kept up to date since their registration lapsed and that they can commit to the requirements of the University course.

The organisation does not contribute towards the cost of the course and the applicant is not paid for clinical hours worked as a RTP student. In addition, we do not guarantee any employment on successful completion of the course. However, should a vacancy arise the person would be in a strong position to apply.

There are two intakes at the University of Southampton January and September. Please note that other Universities will be considered and we would ask you to contact us directly for more information regarding closing dates for applications.

For further enquiries at this stage please do contact us for assistance.

Appendix 11 Glossary

Abbreviation	In Full
GMC	General Medical Council
HCPC	Health Care Professional Council
HEW	Health Education Wessex
HEE	Health Education England
HR	Human Resources
L&D	Learning and Development
LDA	Learning and Development Agreement
NMC	Nursing and Midwifery Council
P6	Placement 6
TNA	Training Needs Analysis
WBL	Work Based Learning

Appendix 12 - Equality & Human Rights and MCA Impact Assessment

Step 1 – Scoping; identify the policies aims	Answer		
1. What are the main aims and objectives of the document?	To outline the process for creating, reviewing and ratifying policies and standard operating procedures within Solent NHS Trust		
2. Who will be affected by it?	All staff who are supporting students		
3. What are the existing performance indicators/measures for this? What are the outcomes you want to achieve?	N/A		
4. What information do you already have on the equality impact of this document?	None		
5. Are there demographic changes or trends locally to be considered?	N/A		
6. What other information do you need?	N/A		
Step 2 - Assessing the Impact; consider the data and research	Yes	No	Answer (Evidence)
1. Could the document unlawfully against any group?		x	
2. Can any group benefit or be excluded?		x	Applies to all staff groups
3. Can any group be denied fair & equal access to or treatment as a result of this document?		X	N/A
4. Can this actively promote good relations with and between different groups?		X	N/A
5. Have you carried out any consultation internally/externally with relevant individual groups?	X		Current Policy Steering Group members consulted and wider groups TED group, DME, EIP, Associate Director Workforce & Development, Deputy Director of Nursing
6. Have you used a variety of different methods of consultation/involvement	X		Via email and face to face
Mental Capacity Act implications			
7. Will this document require a decision to be made by or about a service user? (Refer to the Mental Capacity Act document for further information)	X		Does not apply to patients
External considerations			
8. What external factors have been considered in the development of this policy?			Guidance from the Department of Health Health Education England Learner Charter (Wessex) Promoting Excellence: standards for medical education and training

9. Are there any external implications in relation to this policy?			External learning experiences are sought from other NHS Trusts, Approved Education Institutes, Private Healthcare Providers and overseas learners.
10. Which external groups may be affected positively or adversely as a consequence of this policy being implemented?			The policy is designed to be inclusive to all learners. Provision made for overseas learners. Further clarification regarding reasonable adjustments for disabilities in learning environments will be available in the revised document. This is currently within human resources policy.

If there is no negative impact – end the Impact Assessment here	
Step 3 - Recommendations and Action Plans	Answer
1. Is the impact low, medium or high?	
2. What action/modification needs to be taken to minimise or eliminate the negative impact?	
3. Are there likely to be different outcomes with any modifications? Explain these?	
Step 4 - Implementation, Monitoring and Review	Answer
1. What are the implementation and monitoring arrangements, including timescales?	
2. Who within the Department/Team will be responsible for monitoring and regular review of the document?	
Step 5 - Publishing the Results	Answer

How will the results of this assessment be published and where? (It is essential that there is documented evidence of why decisions were made).	
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****Retain a copy and also include as an appendix to the document****

Appendix 13 - Non Compliance Form

Please complete this form to notify the organisation of non-compliance with approved Solent NHS Trust policy, where the policy requirements cannot be applied to the specific set of circumstances experienced by the service.

Policy name:	Supporting Learning in Practice Policy
Policy reference number:	
Policy Document Manager:	
Date of non-compliance:	
Service:	
Site:	
Concerning (staff name, if appropriate)	
Please state the section(s) of the policy which cannot be applied and detail the policy requirements.	

Please detail the reason(s) why compliance cannot be achieved in this instance		
Is this likely to happen again?	YES	NO
In your opinion, does the policy need to be reconsidered to meet the specific circumstances of your service?	YES	NO
Please detail the risk posed by non-compliance, any action taken in this instance (including completion of an Incident form) and any steps to minimise risk from non-compliance in the future.		
Incident form reference:		
Alternative course of action authorised by:		
Please sign:		
Please print name:		
Please print designation:		
Form completed by:		
Please sign:		
Please print name:		
Please print designation:		
Please date:		

Please send copies of this form to the Policy Document Manager and to the Policy Steering Group Administrator at Solent NHS Trust Headquarters, Highpoint Venue, Bursledon Rd, Southampton, SO19 8BR.