

Livewell Southwest

**Mentorship Standards and Placement
Guidance for Learners and Students: Clinical
Education**

Version No.1.1
Review: September 2017

Notice to staff using a paper copy of this guidance

The policies and procedures page of LSW intranet holds the most recent version of this document and staff must ensure that they are using the most recent guidance.

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Asset Number: 13

Reader Information

Title	Mentorship Standards and Placement Guidance for Learners and Students: Clinical Education.
Asset number	13
Rights of access	Public
Type of paper	Policy
Category	Clinical
Document purpose/summary	<p>Guidance for clinical staff responsible for mentoring and supervising learners and students.</p> <p>This guidance outlines the framework for mentoring in practice and defines the knowledge and skills required by registrants.</p>
Author	Placement and Development Manager
Ratification date and group	15 th September 2015. Policy Ratification Group.
Publication date	16 th September 2015.
Review date and frequency (one, two or three years based on risk assessment)	2 years after publication, or earlier if there is a change in evidence.
Disposal date	The PRG will retain an e-signed copy for the archive in accordance with the Retention and Disposal Schedule, all copies must be destroyed when replaced by a new version or withdrawn from circulation.
Job title	Placement & Development Manager
Target audience	All Livewell Southwest registered nursing and allied health staff.
Circulation	<p>Electronic: LSW intranet and website (if applicable)</p> <p>Written: Upon request to the PRG Secretary on ☎ 01752 435104.</p> <p>Please contact the author if you require this document in an alternative format.</p>
Consultation process	Circulated to Deputy Director Professional Practice Quality & Safety, nursing and AHP leads & matrons for dissemination.
Equality analysis checklist completed	Yes

References/sources of information	<p>Department of Health (2004) The Knowledge and Skills Framework and the development review process. http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4090843</p> <p>Health Professions Council. (2009) Standards to support education and training http://www.hpc-uk.org/publications/standards/index.asp?id=183</p> <p>Health Professions Council (2006) your guide to our standards for Continual Professional Development. http://www.hpc-uk.org/publications/standards/index.asp?id=101</p> <p>NMC (2006) The Prep Handbook. http://www.nmc-uk.org/Publications/Standards/</p> <p>NMC. (2008) Standards to Support learning and Assessment in Practice. http://www.nmc-uk.org/Publications/Standards/</p> <p>The Health and Care Professions Council (2011) Information for Professionals Returning to the Register http://www.hpc-uk.org/assets/documents/10001364Returning_to_practice.pdf</p>
Associated documentation	<p>Health & Safety Policy</p> <p>Incident Reporting & Investigation</p> <p>Lone Working Policy</p> <p>Security Policy</p> <p>Honorary Contracts, Visitors Declarations & Contracts for Services</p> <p>Preceptorship Policy</p> <p>LSW & Plymouth University Workplace Agreement 2012</p> <p>LSW & University West of England Workplace Agreement 2013</p> <p>LSW & South West Ambulance Service Trust Workplace Agreement (2013)</p>
Supersedes document	<p>V.1.</p>
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Document review history

Version no.	Type of change	Date	Originator of change	Description of change
0.1		April 2010	Placement and Development Manager	New document
0.2	Revision	October 2012	Placement and Development Manager	Revision of existing draft with amalgamation of this policy with Placement Learning Guidance V 0.6.
0.3	Revision	June 2013	Placement Manager	Revision of above draft following consultation
1	Ratified	July 2013	Policy Ratification Group	Ratified.
1.1	Minor changes	August 2015	Placement and Development Manager	Minor changes to reflect changes in some student processes

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Mentorship Standards and Placement Guidance for Learners and Students: Clinical Education.

1. Introduction

- 1.1 Livewell Southwest (LSW) has a commitment to staff development through Personal Development and supported learning. Livewell Southwest supports learning through professional bodies such as the Nursing and Midwifery Council and the Health and Care Professions Council. The scope of this policy is to provide guidance to all staff in clinical areas with responsibility for learners. This will encompass all health professions and nursing staff in clinical placements, including new staff under Preceptorship. This guidance has been designed to be inclusive to as many staff groups as possible, and as such may include aspects that are not applicable to all. Always use the latest version of this guidance, available on Intranet. It is important that all mentors and placement managers are familiar with the guidance and use it where appropriate with all learners allocated to their practice areas.
- 1.2 Health Professional Bodies set the standards and development frameworks in relation to the quality, and nature, of support, learning and assessment in practice. Standards define and describe the knowledge and skills that registrants need to apply in practice when supporting students who are undertaking programmes approved by professional bodies, and which lead to registration on a professional register.

2. Purpose

- 2.1 To ensure the highest standard of clinical education, training and support for learners across Livewell Southwest.
- 2.2 To outline placement & learner expectations.
- 2.3 To ensure that local and national agreements and mandatory requirements to support learners in practice are met.
- 2.4 To ensure that there is sufficient supply of mentors/practice educators within the organisation to support the numbers of pre-registration learners.
- 2.5 To ensure a comprehensive effective communication system between practice areas and any HEI with responsibility for learners.
- 2.6 The effective implementation of this policy will contribute to the safe delivery of care to all service users.
- 2.7 To outline the guidance/standards set by professional bodies.
- 2.8 To assist practice teams to meet placement & mentoring standards.

3. Definitions

- a) **Higher Education Institution (HEI)** – University or other academic institution that provides programme of education.

- b) **Workplace Agreement** – an agreed document and contract between an organisation/placement provider and the HEI. Usually in place where clinical placements are frequent and regular. The agreement negates the need for additional references, DBS, and honorary contracts to be in place on behalf of the placement provider.
- c) **Registrant** - Health professional (i.e. physiotherapist; podiatrist), nurse or specialist community public health nurse currently entered on the HCPC or NMC register. Registrants have a responsibility to facilitate learners to develop their competence. This is part of the registrant's role and should be evidenced within annual performance development reviews and personal development plans (PDP's).
- d) **Student/Learner** - A person undertaking a programme of learning, requiring the development and acquisition of skills and competencies, and the assessment of learning.
- e) Students and learners may include Trainee Assistant Practitioners, post-registration staff undertaking further education, and any health student following an undergraduate/pre-registration programme through a HEI.
- f) **Clinical Educator or Placement Educator** – a term usually applied to those allied health registrants who support and supervise allied health students/learners.
- g) **Co-mentor** – a team member who supports learners under the supervision of the named mentor. No formal teaching/assessing qualification has been obtained.
- h) **Mentor** – a term usually associated with those registrants who support nursing students. However, may be applied to all health professionals. Nursing mentors hold a recognised teaching/assessing qualification.
- i) **Sign-off mentor** – a mentor who has met additional NMC criteria and are required for final placement third year nursing students and return to practice nursing students to confirm student is capable of safe and effective practice.
- j) **Practice Teacher** - a registrant who has met additional NMC criteria to become practice teachers within the practice setting. A requirement for mentors of students following specialist practice programmes such as Health Visiting and specialist public health & community nursing programmes (SCPHN).
- k) **Placement Development Team (PDT)** – comprises of the practice lead, academic lead and the wider PDT team. The PDT concept applies to Plymouth University only. **However,**
- l) **The Practice Lead – also known as the Placement & Development Manager**, links with other HEIs as appropriate, such as the Open University or University of west of England (UWE), and as such is a means to support any learner within a LSW placement area. The practice lead will monitor, review and update Livewell Southwest's live mentor register, provide mentor updates and preparation, as well as monitor and

improve the quality of practice placements to develop high quality placements for learners. The practice lead undertakes strategic planning to increase the number of placements in response to changes in service provision and increasing numbers of students.

- m) **Academic Lead** – an individual allocated to LSW from Plymouth University to assist with mentor updates and problems encountered during placement.
- n) **Wider PDT team** – a group of academic personnel who are allocated to LSW for one day per month to assist with pre-registration queries as appropriate.
- o) **Allocation Officer** – person within the programme administration team at Plymouth University who allocates students to clinical areas.
- p) **ARC** – a web-based system available via any computer with internet connection. The ARC system consists of 2 distinct areas, Practice Environment Profile (PEP) and Placements on the Web (POW). Training available on request to Placement & Development Manager.
- q) **PEP** – Practice Environment Profile details the placement learning environment and provides information to students, accessible via POW. Requires username and password to access/read allocations and edit placement profile.
- r) **NMC** – Nursing & Midwifery Council.
- s) **HCPC** – Health & Care Professions Council.

4. Duties & Responsibilities

- 4.1 **The Chief Executive** is ultimately responsible for the content of all policies and their implementation.
- 4.2 **Directors** are responsible for identifying, producing and for implementing Livewell Southwest policies relevant to their area.
- 4.3 **The Director Professional Practice Quality & Safety** has Board level responsibility for patient safety and quality, and will make recommendations to the Commissioning Governance Committee for ratification of policies, where appropriate. In addition, the relevant Director/Deputy will be responsible for ensuring that all staff conforms to the standards set out in this policy

5. Mentorship Standards

5.1 Workplace Agreements

- Livewell Southwest (LSW) supports students from a number of HEIs, including the Open University (OU), Plymouth University (PU) and the University of the West of England (UWE), College of St Mark & St John (Marjon).
- The placement charter details the placement expectations from all perspectives (see appendix A).

- LSW has an established workplace agreement with PU. This negates the need for LSW to issue honorary contracts and initiate DBS checks and staff health and well-being checks for all students under the Faculty of Health, Education & Society, including nursing, physiotherapy, occupational therapy, paramedicine, podiatry, dietetics, social care and psychology (clinical and undergraduate). Students from any other faculty are not covered by the workplace agreement.
- LSW also has workplace agreements with SWAST for paramedic students following the OU programme of paramedicine, UWE for the learning disability programme, and Marjon for Speech & Language students.
- If placement areas are in any doubt, then advice should be sought from the recruitment and workforce team and/or placement manager/practice lead.
- All requests for student placements outside of PU should be made to the Placement & Development Manager in the first instance to ensure all the necessary checks and safety measures are in force prior to placement, and that additional students can be accommodated within LSW.

5.2 Programme Resources

Plymouth Online Practice Placement Information (POPPI) is an online resource for all PU mentoring information and can be accessed, without a username and password, at <https://www.plymouth.ac.uk/student-life/your-studies/academic-services/placements-and-workbased-learning/poppi/health>

- The resource includes mentor resources, programme handbooks, codes of conduct, useful websites, PEP user guides, contact information for academic programmes and a mentor resource where an online mentor update is available.
- All other HEIs will provide documentation and information as student placements are agreed.

5.3 ARC & PEPs (Plymouth University Students only)

- Practice Environment Profiles provide each placement area with access to information about their placement via the ARC system.
- All placement areas will provide a profile of their learning environment which students can access (via POW).
- PEP requires authorised access and users must have a username & password to access the system, either edit user access or read only.
- Each placement area will take ownership of the information contained on their PEP, with the ability to update their profile through edit-user access.
- All placement areas can see live information about student allocation and access reports on specific placement information, such as placement evaluation.

5.4 Allocation of Students

- In negotiation with the Placement Manager the allocation of students to

placement areas, where learning outcomes can be met, will be undertaken by the placement team within PU, or other appropriate HEI.

- The allocation of all PU students following a programme under the Faculty of Health, Education & Society will be listed on the PEP, and will be in accordance with the capacity stated by each area within their placement audit.
- It is the responsibility of all placement areas to regularly check their PEP for allocations, which are released approximately 6-8 weeks before placement commences.
- It is the responsibility of the placement areas to ensure they have the necessary access to their PEP, and additional team members can be issued with PEP access on request to the Placement & Development Manager.
- Placement areas must notify the Placement & Development Manager immediately should they be unable to accommodate an allocated student(s), or have any concerns about their allocation.

5.5 Student Induction

- All learners should have an induction to the allocated placement area by following the student induction checklist (appendix B).
- Additional induction materials relevant to the practice within the placement area may also be used as an adjunct to the checklist.
- All undergraduate students from PU under the workplace agreement will have attended mandatory training and annual updates in fire, basic life support, infection control, moving & handling & safeguarding adults and children.
- It is the responsibility of the placement area to check the student has recorded evidence of attendance within their ongoing achievement record (OAR), or seen the students record held within the allocations section on POPPI.
- All students must attend conflict resolution and breakaway training and any other induction considered relevant to LSW and/or placement.

5.6 Health Professions

Professional Bodies expect those who support students/learners to be appropriately prepared for the role (HCPC, 2009; NMC, 2008). All Health Professional staff will follow and implement their professional bodies' guidance on preparing as a mentor, student placement and mentorship standards.

NMC– Nursing and Midwifery Council <http://www.nmc-uk.org/>

HCPC – Health and Care Professions Council <http://www.hpc-uk.org/>

RCSLT - Royal College of Speech & Language Therapists -
<http://www.rcslt.org/>

CSP- Chartered Society of Physiotherapy - <http://www.csp.org.uk>

COT – College of Occupational Therapy – <http://www.cot.org.uk>

SCPOD – The Society of Chiropractors and Podiatrists - www.scpod.org

BPS – British Psychology Society <http://www.bps.org.uk/>

BAPO – British Association of Prosthetists and Orthotists <http://www.bapo.com/>

College of Paramedicine - <https://www.collegeofparamedics.co.uk/home/>

5.7 Pre-Registration Nursing Students

5.7.1 Co-Mentors & Mentors

- All pre-registration nursing students, regardless of HEI/programme, will be allocated a named mentor.
- A named mentor must hold an approved teaching/assessing qualification (see appendix C).
- It is only a named mentor who can complete/sign summative assessments and documentation.
- The NMC recommends that one mentor does not support more than three students at one time.
- Mentors must spend a minimum time of 40% (equivalent to 2 shifts or 15 hours per week) with their student(s) – see protected time protocol (appendix D).
- Named mentors must be on the same part, or sub-part, of the register as the students they are supporting, and must have clinical currency.
- All those involved in mentoring students without an approved NMC teaching/assessing qualification will be known as co-mentors.
- It is good practice for students to be allocated a co-mentor along side a named mentor to support and contribute the supervision and assessment process.
- Where co-mentors are completing student documentation, they must have this co-signed by the named mentor.
- On occasions, where placement areas do not have sufficient mentors, students may be mentored by co-mentors with tripartite assessment from mentors in other areas or HEI staff where professional registration has been maintained.

5.7.2 Sign-off mentors

- A sign off mentor must be on same part of the register as that of the student.
- Sign off mentors have the responsibility of confirming (and signing-off) a student's practice proficiency in the final clinical placement of an NMC approved programme, and therefore, are required for all third year final placements and return to practice students.
- Sign off mentors must hold an NMC approved teaching/assessing qualification and must have met additional criteria to that of a mentor (Appendix E).

- The mentor and sign off mentor may be one registrant fulfilling both roles simultaneously, or may be two different individuals.
- Sign off mentors must spend a minimum of one hour per week with their student. This is in addition to the minimum of 40% time if they are also acting as mentor.
- Where sign off mentors are unavailable in a placement area, it is possible for students and mentors to be supervised by a sign off mentor based in another area where there are clear communication channels, and the sign off mentor has the opportunity to meet one hour per week.
- It is not recommended for sign off mentors to oversee more than two students/mentors at one time.
- It is recommended that all placement areas have at least one sign off mentor to facilitate 3rd year students in all learning environments.
- Within larger teams, where the student capacity is greater than two students, it is advocated that there are at least two sign off mentors.

5.7.3 NMC Standards

- All levels of nursing mentors must adhere to the NMC Standards to Support Learning and Assessment in Practice (2008).
- All levels of mentors must attend annual mentor updates and be recorded on the LSW “live” mentor register.
- Annual mentor updating can be achieved face to face with the PDT and /or Placement Manager, or by completing the online mentor update and quiz available at <https://open.plymouth.ac.uk/login/index.php>
- Once the update quiz has been completed a copy of the certificate should be sent to the Placement & Development Manager in order for the mentor register to be updated.
- There is a requirement for face to face updating every three years to participate in peer discussion.
- In addition to the above, and as a requirement of the Triennial Review, all levels of mentors must mentor at least two students/learners within a three year period to remain current.
- Only those mentors who are up to date with both mentor update and triennial review will be recorded as active or “live” on the register.
- Education providers have the right to remove students from a placement area until “deactivated” mentors can demonstrate their currency.

5.8 Pre-registration Allied Health Professionals

The Health and Care Professions Council (HCPC) refers to mentors as ‘practice placement educators’ in its literature, and states the following:

- All practice placement educators must undertake appropriate training.
- All practice placement educators must have relevant skills, knowledge and experience.
- There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.
- Practice placement educators must be appropriately registered, unless other arrangements are agreed.
- Practice placement educators must be fully prepared for placement which will include information about an understanding of:
 - the learning outcomes to be achieved;
 - the timings and the duration of any placement experience and associated records to be maintained;
 - expectations of professional conduct;
 - the assessment procedures including the implications of, and any action to be taken in the case of, failure to progress; and
 - communication and lines of responsibility
- Learning, teaching and supervision must encourage safe and effective practice, independent learning and professional conduct with reference to the core standards of the individual profession.
- A range of learning and teaching methods that respect the rights and needs of service users and colleagues must be in place throughout practice placements.

Taken from [http://www.hpc-uk.org/assets/documents/10002C0EHPCStandardsofeducation\(A5\)\(final\).pdf](http://www.hpc-uk.org/assets/documents/10002C0EHPCStandardsofeducation(A5)(final).pdf)

- Each individual Professional Body for Allied Health Professions presents its own guidance on supporting students on placement. Each mentor must acquaint themselves with this prior to supporting a student placement.

5.9 Health Visiting & School Nursing

- Health visitors (HVs) and school nurses can mentor both adult (usually 1st year) and child pre-registration students and those registered staff pursuing the health visiting/school nursing course (SCPHN).
- Health visitors and school nurses must have an approved NMC mentorship qualification (sometimes obtained simultaneously within a SCPHN programme) to act as a mentor of undergraduate students.
- Health visiting and school nursing students who are undertaking a specialist community public health (SCPHN) qualification must be signed off staff who possess the mentorship level of practice teacher.
- Health visitor and school nurse students, as employees of LSW, do not need cover from a workplace agreement.

- The current SCPHN programme is provided by UWE, and does not include mentorship, therefore staff following this programme are required to undertake an additional mentorship qualification.
- Health visitor and school nurse students may act as mentors to pre-registration nursing students if an approved NMC teaching/assessing qualification has been previously obtained.
- Without an approved NMC qualification, HV and school nurse students can act as co-mentors and must have student documentation countersigned.

5.10 Return to Practice Students

- Return to Practice (RtP) students are those registrants who are returning to practice following a period of absence.
- RtP students follow an NMC approved programme via a HEI and for PU students RtP students come under the Faculty of Health, Education & Society.
- RtP students are now employed by individual organisations and are no longer covered by the workplace agreement.
- RtP students now undergo the same recruitment process as for all other new employees i.e., contract, DBS check, staff health and well-being screening etc.
- RtP students in adult or mental health nursing must complete a minimum of 100 practice hours and will require a sign off mentor.
- Allied Health Professions RtP students will have differing requirements depending on the length of their absence from practice.
- 2-5 years absence: will require 30 days of updating of which a minimum 50% must be supervised practice.
- 5 years absence or more: will require 60 days of updating, of which a minimum 50% must be supervised practice.
- The AHP RtP Supervisor must be on the relevant part of the HCPC register, have been in regulated practice for at least the previous three years and not be subject to any fitness to practise proceedings or orders.
- Learning needs for AHP RtP students are individually negotiated between student and supervisor.
- The AHP RtP student will require a signatory who can confirm the time spent updating.
- RtP HVs must complete a minimum of 100 practice hours and require sign off by a practice teacher.
- RtP HVs are trained by UWE and require the necessary recruitment checks and an honorary contract.

5.11 (Trainee) Assistant Practitioners (T)APs

- These staff have been identified as suitable to progress towards and work as band 4 within their current places of work.
- As (T)APs they will be working towards a foundation degree via an approved HEI, and it is a requirement of LSW that these students are mentored to the same standards as pre-registration students as stated by the NMC (2008).
- On successful completion of the foundation degree, and subsequent employment as a band 4, all APs will undertake a four month period of Preceptorship (please refer to the Preceptorship Policy).

5.12 Students of Psychology

5.12.1 Clinical Psychology

- Clinical psychology students are covered by the workplace agreement under the aegis of the Faculty of Health, Education and Society and the University is required to ensure that students have had an enhanced DBS clearance and all appropriate staff health and well-being screening before they commence placement. These checks are completed by Taunton and Somerset NHS Foundation Trust (Musgrove Park).
- These students are usually on long placements of three years and will have received basic mandatory training. However, they will need to be added to the mandatory training update calendar for the duration of their placement. Arrangements to access appropriate aspects of induction should be made by the manager of the placement area.

5.12.2 BSc Psychology

- BSc Psychology students have a year-long placement, for which placement opportunities are advertised and students apply.
- Interviews are undertaken by the relevant psychology team.
- These students are now under the Faculty of Health, Education & Society and therefore now covered by the PU workplace agreement; which negates the need for an honorary contract and means PU will initiate DBS and staff health and well-being checks before the placement commences.
- Students should issue a copy of their DBS outcome to the employing psychologist and the recruitment team for audit purposes.
- Mandatory training and induction will be required, which psychologists can book direct via Professional Training.
- LSW is not obliged to host these students but will be accommodated when capacity allows.

5.13 Supervision of Students/Learners

- It is imperative that all students/learners adhere to the relevant LSW policies and specifically the sections relating to students.

- All students/learners have supernumerary status where they should not be included in the workforce numbers.
- However, students may carry a small caseload and/or carry out unaccompanied home visits and/or escorting of service users/clients without direct supervision providing it is considered integral to the students learning objectives, and deemed safe to do so within the students' level of competence.
- The checks listed within the student induction checklist (Appendix B) will need to be completed by the mentor and the student prior to the student undertaking unaccompanied home visits and/or escorting patients/clients.
- When a student is practicing without direct supervision, the student and mentor will need to be clear what the scope and purpose of the 'lone' activity is and that the student has explicit and clear understanding of:
 - the current care plan for the patient.
 - the purpose of the activity.
 - planned action in the event of a crisis or untoward event.
 - how to contact the base, mentor and key workers.
- The placement area/mentor should use their own clinical judgement pertaining to the appropriateness of the student undertaking tasks/visits alone, and must take into account the ability and experience of the student, the nature of the visit and the level of responsibility required.
- Students must not participate in any procedure for which they have not been fully prepared, nor administer any prescribed medication or substance without direct supervision of LSW staff.
- Before making unaccompanied visits, the student should experience home/community visits with placement staff/mentor, and discuss and explore anticipated issues to ensure students are aware of the required level of responsibility.
- Placement areas must ensure students are conversant with the LSW Lone Working and Health and Safety and Risk policies, as well as understanding when and who to ask for assistance.
- Placement areas/mentor must also ensure that patients agree to receive care from a student without direct supervision.
- The placement area/mentor must have the contact number of a working mobile carried by the student, and students must always carry the departmental telephone number with them in case of breakdown and emergencies. The student should leave their mobile phone on at all times when working alone.
- If using their own transport, students must confirm that they have current motor insurance to cover this purpose i.e. business insurance.
- Under no circumstances must a student carry clients/patients or their relatives in their vehicle unless a comprehensive risk assessment has been carried out with

the placement area/mentor. It is preferable that students do not carry clients/patients at all but exceptional circumstances and local policies may require that they do this in order to complete an intervention process.

- Students must always notify the placement area/mentor when going out on a visit in their vehicle, where they are going to, and when they expect to return.

5.14 Delegation to students/Learners

- The delegation of certain care activity may be delegated to students/learners if considered appropriate providing the following principles are adhered to:-
 - Mentor/registered supervisor cannot delegate their accountability.
 - Delegation to students must always be in the best interests of the individual patient and based on an assessment of their care need and on the mentor's professional judgement.
 - Every delegation has to be safe with the primary motivation being to meet the patient's needs and is relevant to students learning outcomes.
 - Delegation of care activity must be within scope of students skill, experience and competence.
 - Students can decline to accept the delegated activity if they feel it is beyond their level of skill, experience or competence.
 - Mentor/registered supervisor, or a member of the care team, has a responsibility to intervene if they consider the student/activity to be unsafe.
 - Patients should consent to the students carrying out delegated activity.

5.15 Incidents involving Students

- Should a student be involved in any incident or near miss the placement area must complete an incident form and ensure a copy of the incident form or details of the incident are sent to the placement & development manager.
- It is the placement manager's responsibility to liaise with the HEI and the students' personal tutor.

5.16 Concerns Regarding Students Progress

- Mentors should involve the PDT at the earliest opportunity where they have any concern or issue with regards to a student's practice, competence, progress, behaviour or attitude.
- Involving the PDT enables the mentors and students to ensure that both parties, and the placement area, receive the necessary support and that action plans may be put into practice to ensure fair and equitable assessment.
- If a student's practice and/or professional behaviour is considered unsafe, the HEI will be asked to suspend placement until a fitness to practice investigation has been conducted.

5.17 Witnessing Poor Practice

- Occasionally mentors and healthcare students on placement may witness what they perceive to be poor practice or practice they believe to be below an expected standard. This may include unprofessional behaviour or unsafe systems of work and both LSW and HEIs have an obligation to follow this up effectively.
- Practice that should raise concerns includes (but not limited to) poor or unsafe clinical practice, professional misconduct, bullying or health and safety risks to clients/patients, visitors and staff, drug or alcohol abuse, verbal, mental, physical or sexual abuse, damage to the environment, and conduct that is an offence or breach of the law.
- Students or mentors are required to report any witnessed incident immediately so that an appropriate response can occur.
- Students and mentors should immediately report witnessed incidents and their concerns, in the first instance, to the senior person in the practice area and to a faculty member of the relevant HEI, such as personal tutor or academic lead.
- The staff member to whom the concern has been raised will be required to communicate promptly with the PDT team, who will inform the Director/Deputy of Professional Practice Quality and Safety.
- On notification of a concern the Director/Deputy of Professional Practice Quality and Safety in liaison with the Head of School/Placement Quality Division will consider the best possible course of action.
- The actions will depend on the severity of the concerns, and may include removal of student(s) or suspension of the area as a placement area.
- The full procedure and actions following a report of perceived poor practice can be found on the websites of the individual HEIs, i.e. for PU students please refer to POPPI.

5.18 Preceptorship of Staff

- All newly registered staff, those undertaking new roles, such as band AP roles, and those who are new to LSW should follow a period of Preceptorship. Please refer to the LSW Preceptorship Policy, which is available via Intranet.

6. Training

- All nursing mentors must have a minimum of one year post registration experience prior to undertaking an NMC mentorship preparation programme.
- It is recommended that mentorship qualification is at degree level (NMC, 2008). Those staff who hold a Diploma level teaching/assessing qualification may consider APEL. However, it is acceptable for those registrants who possess diploma level teaching qualifications to mentor without APEL if a (post-registration) degree is also held.

- All staff aspiring to pursue mentorship qualifications and/or APEL should discuss this with the education co-ordinator.
- All nursing mentors must undertake an annual update – see section 5.7.3.
- There is no specified minimum for post-registration experience for AHPs. The HCPC does require that all mentors are sufficiently skilled and experienced with their area of practice to support a student. AHPs should consult their Professional Bodies for profession-specific guidance.

7. Monitoring Compliance and Effectiveness

- The placement and development manager has the responsibility of maintaining the “live” mentor register, which is a requirement of the NMC.
- The register lists dates of mentor updates and triennial review, teaching/assessing qualifications and mentor status of each LSW employee who acts as a mentor at any level.
- The register, therefore, acts a resource for monitoring compliance and helps identify training needs within placement areas where additional mentors/sign off mentors are required.
- Where appropriate, the Placement & Development Manager should be notified by the mentor of their team/base changes within LSW.
- All health visitors and school nurse students will complete mentor training in their Preceptorship period.

7.1 Triennial review

- All levels of nursing mentors must provide evidence to their line managers that they have met the NMC standards in order to remain on the live register and are subject to triennial review (NMC, 2008).
- Triennial review is conducted every 3rd year at time of appraisal. However, it would be good practice to discuss mentorship activity annually.
- It is the lines managers’ responsibility to ensure that all mentors within the placement/team have met the NMC standards and required standard of mentorship activity (see appendix F).
- It is the mentor’s responsibility to collate evidence of their mentorship activity (see appendix F) on an ongoing basis.
- Evidence may relate to any learner/staff member not just undergraduate students.
- All triennial review documentation, which states the line manager’s verification, should be sent to placement & development manager to enable updating of the mentor register.

7.2 Placement Audit

- All placement areas are required to have a biennial educational audit, which will be undertaken by the placement area or ward manager in conjunction with either the Placement and Development manager or audit team from the respective HEI.
- Audits may be shared across HEIs to avoid unnecessary duplication.

7.3 Placement Evaluation

- All students are obliged to complete the HEI evaluation on completion of a placement.
- Placement feedback can be accessed via PEP (PU students) and by HEI links for other HEIs.
- Placement areas should respond to feedback, which should be addressed through the placement audit process.

All policies are required to be electronically signed by the Lead Director. Proof of the electronic signature is stored in the policies database.

The Lead Director approves this document and any attached appendices. For operational policies this will be the Locality Manager.

The Executive signature is subject to the understanding that the policy owner has followed the organisation process for policy Ratification.

Signed: Director of Professional Practice Safety & Quality

Date: 17th September 2015.

Appendix A

Placement Charter & Expectations

The following charter details the expectations of all those involved with mentorship/learning in order to create a positive learning experience.

By following these expectations, it is anticipated that learning will be enhanced to the benefit of all, including patients/clients and service users to whom all care is directed.

Learners (L) have the right to expect: -

- L1. To be treated with courtesy and respect and as an integral member of the practice team.
- L2. A safe and healthy working environment.
- L3. A placement that has no more than the optimum number of learners as stated within the placement audit or at the manager's discretion.
- L4. Induction to the placement including access to an induction pack, which details the placement and the services it provides.
- L5. Equity of access to relevant learning opportunities.
- L6. A placement where it is possible to meet the required level of competency to achieve practice learning outcomes/objectives.
- L7. Positive considerations to be given in relation to special learning requirements to enable learning needs to be met.
- L8. An appropriately prepared and experienced mentor.
- L9. Regular contact time with a mentor who will provide support, guidance and timely feedback.
- L10. To agree a shift pattern with their mentor which suits their individual learning needs, and takes into account the supernumerary status of pre-registration students.
- L11. Learning resources to be available, or accessible, from the placement area, including IT accounts to access policies and procedures.
- L12. Access to the placement manager/PDT academic lead who will act as links between the practice placement and the education provider.
- L13. The opportunity to evaluate their placement as part of the quality monitoring process; with appropriate and transparent action being taken in response to their feedback.

Placement staff (S) have the right to expect: -

- S1. Courtesy and respect from learners towards patients/clients/carers and practice staff.

- S2. Learners to make an appropriate contribution to patient/client care.
- S3. Learners to conduct themselves in a professional manner as defined by LSW policies and as explained within guidance from professional bodies.
- S4. Learners to undertake their responsibilities as a learner by adhering to LSW and University policy.
- S5. Advanced notification from HEIs of all allocation details.
- S6. Learners to report sickness absence immediately to the placement and the HEI.
- S7. To be made aware of any special requirements that learners may have to ensure positive consideration can be given in meeting their needs.
- S8. Learners to contact their allocated placement area at least two weeks prior to the start of their placement.
- S9. Learners to provide the appropriate assessment of practice documentation relating to the placement allocation.
- S10. Learners to be flexible in regards to working arrangements to maximise access to learning opportunities.
- S11. Placement Manager/PDT to actively support mentors and learners in accordance with local and national standards.
- S12. Annual mentor updates provided by Placement Manager/PDT to prepare them for the mentor role.
- S13. Learners to complete the HEI placement evaluation as part of the quality monitoring process.
- S14. To engage in annual quality monitoring of the placement to ensure it is fit for purpose.

Placement Manager/Placement Development Team (PDT) has the right to expect: -

- PDT1. Courtesy and respect from placement staff and learners in practice placements.
- PDT2. Placement areas to provide the necessary learning opportunities to enable learners to meet their practice outcomes/objectives.
- PDT3. Placement staff to recognise and welcome the contribution of Placement Manager/PDT and consider them as integral members of the practice team.
- PDT4. Placement staff to liaise with PDT if there are concerns regarding the conduct or progress of learners whilst on placement.
- PDT5. Advanced notification of learners' placement allocations so that placements can be prepared for their arrival.

PDT6. To be made aware of any special requirements the learner may have so that positive consideration can be given in meeting their needs, and support can be offered to the placement area.

PDT7. Learners to abide by the policies and procedures of the LSW and HEI.

PDT8. Mentors and/or learners to notify the Placement Manager/PDT if experiencing problems whilst on placement.

PDT9. Mentors who have been appropriately prepared for their role.

PDT10. Sickness/absence to be reported by the learner to the HEI and placement in a timely manner.

PDT11. Opportunities to work/engage with placement staff and to discuss educational issues around clinical practice.

PDT12. To work in partnership with placement areas as part of the quality monitoring process to ensure placements are fit for purpose.

PDT13. To have immediate notification of sickness/absence of mentors so that alternative arrangements can be made.

PDT14. Mentors engage with annual updates and triennial review process.

PDT15. Mentors to follow a fair and equitable assessment processes for all learners.

Appendix B

Student Induction Checklist

Name of Student: _____
Name of Placement Area: _____
Date Placement Commenced : _____
Date induction completed: _____
Mentor(s): _____

To provide assurance that Students are inducted appropriately into their role, a copy of this checklist should also be sent to Helen Sykes, Placement & Development Manager/PDT Practice Lead at Professional Training Dept, Top Floor, Beauchamp Centre, Mount Gould Hospital. PL4 7QD

Essential Organisational Requirements

It is the responsibility of the placement/mentor to ensure students have evidence within their ongoing achievement record (OAR) of mandatory training below (provided by University). Details of mandatory training can also be found on POPPI under the student's allocation.

Manual Handling

Signed by Mentor _____ Date: _____

Fire Awareness

Signed by Mentor _____ Date: _____

Basic Life Support

Signed by Mentor _____ Date: _____

Infection Control

Signed by Mentor _____ Date: _____

Safeguarding Vulnerable People

Signed by Mentor _____ Date: _____

It is the responsibility of the placement/mentor to ensure that the student has attended the following organisational requirements and training (provided by LSW):-

Conflict Resolution & Breakaway

Date attended _____ Signed _____ Date _____

SystemOne Training

Date attended _____ Signed _____ Date _____

Other relevant/LSW Induction

Date Attended _____ Signed _____ Date _____

IT registration: RA01 or basic network application completed

Signed _____ Date _____ **YES/NO/NA**

IT account activated Yes/No Smartcard Yes/No

Signed _____ Date _____

Smartcard or username & password issued

Signed _____ Date _____

Additional Training

Students may book on to other training which is provided by LSW provided it is relevant to the practice experience. However, failure to attend training, without prior cancellation, will result in the Placement Manager informing Mentors/placements and requesting a record of non-attendance within the student's Ongoing Achievement Record. Further details on courses can be obtained from the Professional Training and Development department based at Beauchamp Centre, Mount Gould (01752 434150).

Placement Specific Information

In keeping with good employment practice, it is essential that every student attending placement within Livewell Southwest is appropriately inducted. This will help and support the individual to become familiar with ways of working, expectations and the general running of the department.

The Placement area/mentor is responsible for ensuring the induction process is completed satisfactorily. The student also has a responsibility to ask for further clarity or information where there are queries or doubts regarding particular aspects of working in Livewell Southwest or the specific department.

	Date Discussed	Signature of Mentor/Team Manager	Signature of Student
The Department & Team <ul style="list-style-type: none"> • Has information been accessed on Poppi prior to arriving in placement? • Departmental Structure • Locality • Roles and responsibilities of team/service • The structure of Livewell Southwest 			
Day to day Practicalities <ul style="list-style-type: none"> • Entry and exit to the building • Has swipe card been issued? • Keys/Security codes • Alarm systems • ID badge issued (provided by university) • Rest facilities • Changing facilities/toilets • Security of personal items • Parking • Use of 'phones at work • Site map • First Aid facilities 			

	Date Discussed	Signature of Mentor/Team Manager	Signature of Student
Communication <ul style="list-style-type: none"> • Meetings (Staff briefing) • Notice Boards • LSW • Useful contact numbers • Computer & Email access 			
Fire Safety <ul style="list-style-type: none"> • Fire alarms • Fire extinguishers • Fire exits & Procedures to follow 			
Working hours and rules <ul style="list-style-type: none"> • Start and finish times • Rest breaks • Working time directive • Maximum working hours • Secondary employment rules (does student work for NHS P?) • Flexible working arrangements • Hospitality & acceptance of gifts 			
Sickness Absence <ul style="list-style-type: none"> • Reporting arrangements • Monitoring • Policy 			
Staff Support arrangements <ul style="list-style-type: none"> • Who to discuss problems with • Work/Life balance • Supervision arrangements • Placement Development Team 			
Appearance <ul style="list-style-type: none"> • ID badge • Uniform Policy • Dress Code 			
Policies and Conduct <ul style="list-style-type: none"> • General attitude & Behaviour • Confidentiality/Information Governance • Health & Safety • Whistleblowing Policy • Tobacco Policy • Substance Misuse Policy • Compliments, concerns & complaints • Infection Control • Incident Reporting • Lone Working 			

Student Lone working (Please complete if deemed appropriate for student)

Driving Licence seen and checked – Yes/No/NA: delete as appropriate

Appropriate car insurance Yes/No/NA: delete as appropriate

Mentor Signature: _____ Date: _____

Student Signature: _____ Date: _____

Checklist for Practice/Mentors and Students for Lone Working

(To be used in conjunction with policies: Mentorship Standards and Placement Guidance for Learners and Students & Lone Working).

	Date	Signature of Responsible Mentor/Supervisor
Valid Business Insurance for vehicle to be used checked		
Risk Assessment completed – is visit appropriate for student? Is student familiar with lone worker policy?		
Discussion with student of understanding of patient(s) care plans and purpose of visit/activity – Has student been assessed as competent to carry out lone visit/activity? Has discussion taken place with patient/consent obtained?		
Student provided with contact details of base and responsible supervisor		
Responsible supervisor provided with student’s contact details including mobile ‘phone number		

Student _____
Signed _____
Date _____

Practice Mentor/Supervisor _____
Signed _____
Date _____

Appendix C

NMC Approved Teaching & Assessing Qualifications

The following courses and qualifications are recognised and approved by the NMC, and therefore enable staff to act and fulfil their role as a named mentor.

Details of an individual's qualification will be held on the "live" mentor register.

- HEA369, HEA370, HEA379, HEA380 (or equivalent from another HEI)
- MET 601, MET 602, MET 603 (or equivalent from another HEI)
- D32/33, TDLB award or A1 assessors
- ENB 997/998
- City & Guilds 7306/7
- Cert Ed
- B. Ed
- Community Health Care Nursing
- BSc Community Childrens Nursing
- BSc Community Learning Disability Nursing
- BSc General Practice Nursing
- BSc Health Visiting
- BSc Occupational Health Nursing
- Post Grad Cert in Clinical Education
- M. Ed
- PTLs (Preparing to teach in the Lifelong Sector)

Appendix D

Protected Time Protocol

To meet Professional, Education and Service Provider requirements in respect of supporting learning and assessment in practice the following 'protected time' practices are recommended: -

- 1) Within the first two weeks of a placement experience 'protected time' should be set aside to enable a development plan to be agreed between a learner and their mentor.
- 2) Each week of a placement experience 'protected time' should be set aside to enable a learner and their mentor to review the learner's progress. It is recommended that this be a minimum of 1 hour per week.
- 3) Approximately midpoint of the placement, 'protected time' should be set aside to enable a mentor to undertake a 'formative' assessment of a learner's progress and update the development plan if necessary.
- 4) Within the final 2 weeks of a placement, 'protected time' should be set aside to enable a mentor to complete a 'summative' assessment of a learner's progress and update as required the learning contract.
- 5) For third year final placement pre-registration nursing students, one hour per week 'protected time' should be spent with their 'sign-off' mentor. This is in addition to the 40% which they are required to spend with their mentor.
- 6) 'Protected time' agreed between a mentor and learner should also be agreed with the line manager and written in the staffing diary/off duty.
- 7) Should urgent and/or unexpected clinical matters arise which means 'protected time' cannot be honoured then re-arrangements should occur as soon as possible.
- 8) To aid team working, and to ensure placements and educational experiences are valued, team members should, where possible, cover the clinical workload of colleagues when 'protected time' has been booked and agreed.
- 9) A quiet area, free from interruptions, should be identified to allow for 'protected time' for learner/mentor meetings. Where possible pagers, mobile phones and any telephones in the room should be 'turned off' or diverted.

Appendix E
Guidelines for Sign-Off Mentor Preparation



**Guidance to developing mentors to
meet the**

**Nursing and Midwifery Council Criteria
for 'Sign off Mentor'**

**NHS South West
Placement Development Teams**

1. Introduction

A mentor is a mandatory requirement for pre-registration, return to practice, overseas nursing and midwifery students, those studying for specialist or advancing practice qualifications. Mentors are responsible for co-ordinating student learning activities, ensuring that the practice learning environment is one which facilitates and supports the student in achieving the required professional standards for practice and are accountable for making assessment decisions that lead to entry to the register. The NMC requires mentors be prepared for their role and to update annually to maintain competence (NMC, 2008).

2. Those aspiring to become Sign Off Mentors (SOM) will:

Require a 'sign off' mentor/ practice teacher to support their development and supervise them confirming proficiency of practice of a pre-registration student for entry onto the NMC Register (or midwifery progression) on a minimum of 1 occasion which must be the final episode in preparation of the sign off mentor.

Have access to nursing or midwifery learners who require confirmation that they have met the required proficiencies for entry to the NMC register, or a progression point in midwifery.

Be required to produce the following evidence in the portfolio:

1. Mentorship Qualification.
2. Attend a 'Sign Off Mentor' Preparation Workshop which includes group activity exploring validity and reliability of judgements made when assessing practice in challenging circumstances –evidence attendance certificate.
3. Be supervised by an annotated sign-off mentor in supporting and signing off the final assessment of practice to confirm that a pre-registration / return to practice / overseas student has met the required proficiencies for entry to the NMC register, or a progression point in midwifery.

2.2 'Sign Off Mentors' responsibilities

Individual practicing professionals have a responsibility to:

- Undertake CPD to ensure currency of knowledge skills and competence
- Meet all requirements to remain on their local register
- Supervise a minimum of two students within three year period
- Participate in annual updating
- Explore as a group activity validity and reliability of judgements made when assessing practice in challenging circumstances
- Receive a triennial review

3. Placement provider responsibilities

The placement provider responsibility is to:

- Identify suitable staff to become sign off mentors.

- Ensure those who are preparing to become sign off mentors are allocated a 3rd year final placement student to support.
- Maintain an up-to-date local register of current mentors and annotate those who are designated sign-off mentors.
- Review each sign off mentor every three years (triennial review).

3.1 Role of Placement Development Teams (PDT)

The placement development team will:

- Provide 'sign off' mentor preparation sessions as required by the Trust
- Help identify suitable staff to become sign off mentors
- Guide and support individuals undertaking this process
- Help identify a sign off mentor to support those undertaking the process.
- Provide assessment support for confirming sign off mentor status.

4. The role of the supervising sign off mentor

An annotated 'sign off' mentor / practice teacher is required to support, facilitate and assess mentoring activities and to sign the final confirmation document (Appendix 2)

Sign off mentors/ Practice Teachers will:

- Be live on the local register of mentors and be annotated as sign-off mentors in nursing or midwifery).
- Have undertaken a mentorship or practice teacher programme approved by the NMC.
- Be experienced and active in mentoring learners, up to date with current programmes/ courses and practice assessment strategies related to the learners in your clinical environment.
- Be conversant with Nursing and Midwifery Council standards or guidelines relating to mentorship.

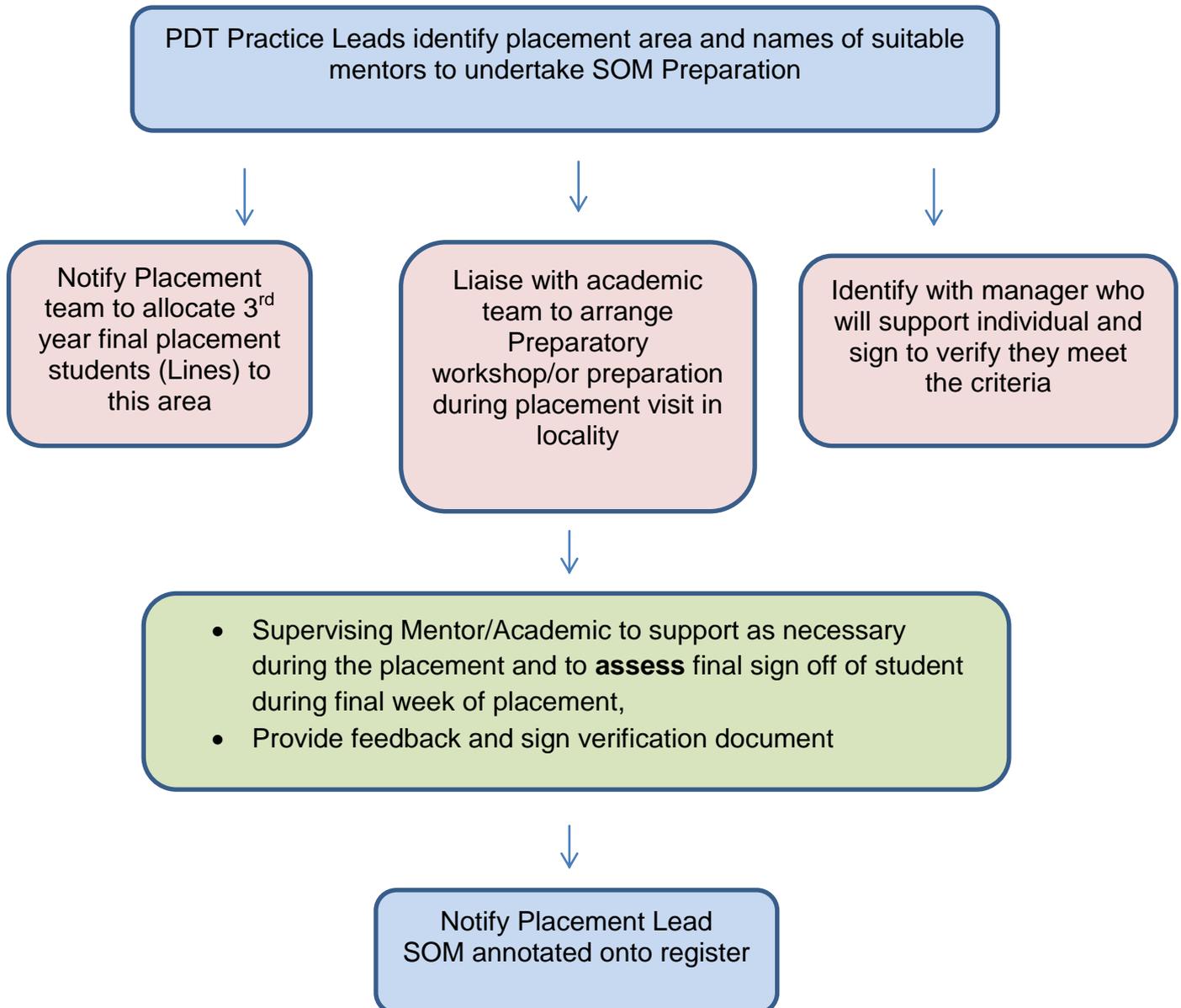
Until individuals are annotated onto their employer's register of mentors as sign off mentor; their signatures must be countersigned for assessment of nursing students in their final placement by an annotated sign off mentor. In midwifery, all students will require countersignature until the individual undertaking the process of preparation achieves sign off status (NMC, 2008)
References:

Nursing and Midwifery Council (2008) Standards to support Learning and Assessment in Practice. NMC Standards for mentors, practice teachers and teachers. (www.NMC-uk.org)

Nursing and Midwifery Council (2010) Sign Off Mentor Criteria. NMC Circular 05/2010 (www.NMC-uk.org)

Appendix 1 Record of SOM activity for Triennial Review

School of Nursing and Midwifery SIGN off Mentor Development Pathway



EVIDENCE OF SIGN OFF MENTOR PREPARATION (Nurses and Midwives)

Evidence	Confirmed
<p>Stage 1 Evidence Attending Mentorship course Completion of Sign off mentor preparation Quiz as part of Mentorship course (2013 onwards).</p>	
<p>Evidence of stage 2 activities: <i>one</i> of the following:</p> <ul style="list-style-type: none"> a) Attendance certificate: 'Sign Off Mentor' workshop or Annual Update b) Peer review feedback: observation of a summative assessment of a ^{2nd} or ^{3rd} year student by a sign off mentor. c) Participate in clinical assessments (OSCE) 	
<p>Stage 3 Copy of summative assessment of final placement/overseas/return to practice student and 'sign off document' (OARP) (countersigned by your assessor).</p>	
<p>Statement of Consent from student. I agree for copies of my summative assessment and Ongoing Achievement Record to be included in this Portfolio for the purpose of my mentors assessment as a 'Sign off Mentor'. Name Signed:..... cohort.....</p>	



Record of Mentor/Practice Placement Educator

Activity

Triennial Review

Name

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2. Evidence of supporting learners	5
3. Learner's statement of consent	7
4. Record of supporting learners	8
5. Record of Annual Updating	9
6. Review of Mentor/ Educator activities	10

1. INTRODUCTION

- 1.1 This document provides evidence of achieving the Nursing and Midwifery Council (NMC) or Health Professional Council (HPC) requirements for Mentors, 'Sign Off' Mentors or Practice Placement Educators (PPE).
- 1.2 In order to maintain your status of Mentor / 'Sign Off' Mentor or PPE the NMC (2008) and HPC (2006) require you to keep an up to date continual professional development (CPD) portfolio to demonstrate that you are developing your knowledge, skills and competence beyond registration and maintaining the professional competencies required in your area of practice within the Knowledge and Skills Framework (KSF). Evidence of your experiences specific to supporting learners will be reviewed as part of your regular Appraisal to help to inform your Personal Development Plan for the following year. Nurses and Midwives are required to have their mentoring activity to be reviewed triennially in order to remain on the Live Mentor Register as a Mentor, Sign off Mentor, (NMC, 2008).
- 1.3 Nurses and Midwives are expected to be conversant with and comply with NMC Standards to support learning and assessment in practice (NMC 2008)
Allied Health professionals are expected to be conversant and comply with HPC Standards of Education and Training (HPC, 2009) (Appendix 1).
- 1.4 Following **appraisal**, the appraiser verifies the mentor/ educator meets the NMC / HPC standards to remain on the mentor register; the record of verification needs shown to the Placement Development Team to be recorded on the mentor register.

TRIENNIAL REVIEW – FOR NURSES AND MIDWIVES ONLY

Mentors must provide evidence of their mentoring activities **every 3 years** as part of their regular appraisal process, to show they have:

1. Mentored at least two learners in the last three years.
2. Participated in annual update
3. continued to develop their practice to meet the NMC Standards (NMC, 2008)

1.5 The Specific Professional Standards mentors are expected to meet are:

For Nurses and Midwives

Standards to support learning and assessment in practice NMC (2008)

<http://www.nmc-uk.org/Publications/Standards/>

- | | |
|---|--|
| <ol style="list-style-type: none">1. Establishing effective working relationships.2. Facilitation of learning:3. Assessment and Accountability.4. Evaluation of Learning.5. Creating an environment for learning.6. Context of practice.7. Evidence-based practice8. Leadership. | <p>Criteria for Sign Off Mentors</p> <ul style="list-style-type: none">• Clinical currency and capability in the field in which the student is being assessed.• A working knowledge of the current programme requirements, practice assessment strategies and relevant changes in education and practice for the student they are assessing.• An understanding of the NMC registration requirements and the contribution they make to the achievement of the these requirements• An in-depth understanding of their accountability to the NMC for the decisions they must make to pass or fail a student when assessing proficiency.• Been supervised on at least three occasions for signing off proficiency by an existing sign-off mentor. |
|---|--|

For Allied Health Professions

Standards of Education and Training (HCPC, 2009): *Specific to mentoring is Section 5*

Practice Placement: <http://www.hpc-uk.org/publications/standards/index.asp?id=183>

- 5.3 The practice placement settings must provide a safe and supportive environment.
- 5.6 There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.
- 5.7 Practice placement educators must have relevant knowledge, skills and experience.
- 5.8 Practice placement educators must undertake appropriate practice placement educator training.
- 5.9 Practice placement educators must be appropriately registered, unless other arrangements are agreed.
- 5.12 Learning, teaching and supervision must encourage safe and effective practice, independent learning and professional conduct.

EVIDENCE OF SUPPORTING LEARNERS

Evidence can be collected from a variety of sources. It is important if you are using student's documents you gain their permission especially copies summative assessment documents or Ongoing Achievement Record (OAR).

Suggested evidence which could be mapped to, NMC and HPC outcomes (see *italics*)

Please note that you need to reflect on your mentoring activities to support revalidation

<http://www.nmc.org.uk/standards/revalidation/>

<p>Evidence of planning a learner's experience:</p> <ul style="list-style-type: none"> • Learning contracts, formative assessments or testimony from the learner. • Action Plan or PDP you have facilitated. • Teaching plan. • Testimony <p>Meets NMC: outcomes1 - 8 HPC standards: 5.3,5.7,5.12</p>	<p>Evidence of facilitating a learner's experience:</p> <ul style="list-style-type: none"> • Formative assessment. • Halfway review of action plan. • Testimony. <p>*Reflection on supporting the learner (To meet revalidation requirements)</p> <p>Meets NMC: outcomes1 - 8. HPC standards: 5.3,5.7,5.12</p>	<p>Evidence of assessing learner:</p> <ul style="list-style-type: none"> • Assessment documentation. • Testimony from learner or line manager. • Personal reflection on the experience. • Entries into a student's OAR <p>Meets NMC: outcomes1 - 8. HPC standards: 5.3,5.7,5.12</p>
<p>Evidence of annual updating:</p> <ul style="list-style-type: none"> • Annual update certificate • Annual Update workbook • Activities undertaken during workshop. • A reflection on learning from update. <p>Meets NMC: outcomes1 - 8 HPC standards: 5.3,5.7 5.8, ,5.12</p>	<p>Additional evidence you may include:</p> <ul style="list-style-type: none"> •Evidence of undertaking a mentor/educator preparation course. •Meetings with Placement Development Team or a student's personal tutor. •Participating in Educational Audit •Any contribution you have made to the development of student resources in your area or information provided for POPPI (Plymouth online practice placement information). <p>Meets NMC: outcomes1 - 8 HPC standard 5.3,5.7 5.8, ,5.12</p>	<p>Sign off mentor activities:</p> <ul style="list-style-type: none"> • Portfolio for achieving sign off mentor status • Copy of Statement of fitness to register (OAR) • Supporting colleagues undertaking mentorship qualification. <p>Meets NMC: outcomes1 - 8</p>

Please Insert Evidence Reflections Here, Indicating Which Standard(S) The Evidence Relates to.

2. LEARNERS STATEMENT OF CONSENT.

I give permission for copies of my learning and assessment documentation to be used in this portfolio as evidence of meeting the NMC Standards for Mentors (NMC, 2008)- HPC Educators (2009).

Name	Role
Signature	Date

Name	Role
Signature	Date

Name	Role
Signature	Date

Name	Role
Signature	Date

Name	Role
Signature	Date

Name	Role
Signature	Date

Name	Role
Signature	Date

Please copy this page before use for subsequent Appraisals

4. RECORD OF ANNUAL UPDATING

To ensure the individual:

- Has knowledge of the Programme
- Understands implications of their professional bodies' changes in relation to pre-registration mentoring.
- Understand issues related to supporting learners
- Had opportunity to meet with other mentors to ensure assessment is valid and reliable.
Specifically group activities relating to the validity and reliability of judgement made when assessing practice in challenging circumstances.

Face to Face/ On Line/ other	Topics covered	Date

Annual updating can be achieved in the workplace at session run by Placement Development Teams or additional updating material available via The Mentor Centre at <https://www.plymouth.ac.uk/student-life/your-studies/academic-services/placements-and-workbased-learning/popp/>

*Please copy this page before use for subsequent Appraisals
Insert you evidence after this page*

5. REVIEW OF MENTOR/ EDUCATOR ACTIVITIES

To be reviewed annually/ triennially by line manager at appraisal - who will confirm the following practitioner is eligible to remain on the Live Mentor register.

<p>Date of completion of Mentorship Qualification or Educator Preparation (AHPs)</p>	
<p>Date of completion of 'Sign Off Mentor' Preparation/ Assessment</p>	
<p style="text-align: center;">Record of Triennial Review</p> <p>I declare that I meet the NMC or HPC standards for supporting learners in providing evidence of:</p> <ul style="list-style-type: none"> • Mentoring at least two learners in the last three years • Participation in annual updating • Continual development of my mentoring practice <p style="text-align: center;">Date.....</p> <p>NameSignature.....</p> <p style="text-align: center;">Verified at appraisal:</p> <p>NameSignature.....</p> <p style="text-align: center;">Date.....</p>	
<p>I declare that I meet the NMC or HPC standards for supporting learners in providing evidence of:</p> <ul style="list-style-type: none"> • Mentoring at least two learners in the last three years • Participation in annual updating • Continual development of my mentoring practice <p style="text-align: center;">Date.....</p>	

NameSignature.....

Verified at appraisal:

NameSignature.....

Date.....

I declare that I meet the NMC or HPC standards for supporting learners in providing evidence of:

- Mentoring at least two learners in the last three years
- Participation in annual updating
- Continual development of my mentoring practice

Date.....

NameSignature.....

Verified at appraisal:

NameSignature.....

Date.....

I declare that I meet the NMC or HPC standards for supporting learners in providing evidence of:

- Mentoring at least two learners in the last three years
- Participation in annual updating
- Continual development of my mentoring practice

Date.....

NameSignature.....

Verified at appraisal:

NameSignature.....

Date.....

I declare that I meet the NMC or HPC standards for supporting learners in providing evidence of:

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Date.....

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NameSignature.....

Date.....

Please notify your Placement Development Team/ Education Lead when Triennial review is complete failure to do so will result in you being removed from the Live Mentor Register.