

Guidance Document

ASSESSING AND SUPERVISING NMC STANDARDS OF PROFICIENCY (2018)

Pre-Registration Nursing Students in Mental Health Placements

NMC Proficiencies:- Year 3/4 students



UNIVERSITY OF
PLYMOUTH

Proficiency	Examples of skill acquisition	Suggested Evidence
Confidently assessment needs and plans person-centered care		
1. Utilises a range of strategies/resources (including relevant diagnostic equipment) to undertake a comprehensive whole body assessment to plan and prioritise evidence-based person-centered care	Holistic nursing assessment, clinical observations, urine analysis, observe ECGs, BMs,	Admission assessment RIO entry Care planning NEWS chart Food and Fluid chart Statement from others E Learning Bowel chart Body Map Malnutrition scoring tool
2. Assesses a persons' capacity to make best interest decisions about their own care and applies processes for making reasonable adjustments when a person does not have capacity.	Admission process Demonstrate knowledge of MHA, DOLS, capacity assessments in adults, older adults, dementia and LD	Patient documentation Care plans Risk assessment Reflection Statement from others
3 Actively participates in the safe referral of people to other professionals or services such as cognitive behavioural therapy or talking therapies across health and social care as appropriate.	Attend and contribute towards MDT discussions Ward rounds Team meetings Able to identify treatment needs through team discussions and 1 to 1 sessions	Complete referrals to IAPT and other therapy services Patient documentation Care planning Discharge planning Statement from others
5. Accurately and legibly records care, with the use of available digital technologies where appropriate, in a timely manner.	Documents care through electronic systems used by host organisations, takes responsibility in ensuring access to these systems. Completes appropriate assessments processes using a range of tools.	Sample documentation and assessments Statement and observation from others
6. Works in partnership with people, families and carers using therapeutic use of self to support shared decision making in managing their own care	Evidence based, person centred approach in assessment and care planning Understanding of positive risk taking Understanding of advocacy	Patient documentation and care planning Direct observation and statement from others
Proficiency	Examples of skill acquisition	Suggested Evidence

<p>7. Manages a range of commonly encountered symptoms of increasing complexity including pain, distress, anxiety and confusion.</p>	<p>Understanding of Therapeutic Observation policy De – escalation techniques Mindfulness, breathing techniques Individualised approach Awareness of use of PRN medication Grounding techniques and CBT skills use</p>	<p>Patient documentation Care planning Direct observation Statement from others Reflection</p>
<p>8. Uses skills of active listening, questioning, paraphrasing and reflection to support therapeutic interventions using a range of communication techniques as required</p>	<p>1 -1 sessions with patients/service users Groupwork facilitation Care plan reviews Therapeutic observations</p>	<p>Patients documentation Reflection Direct observation Statement from others</p>
<p>9. Is able to support people distressed by hearing voices or experiencing distressing thoughts or perceptions</p>	<p>Therapeutic observation Individualised person centred approach Demonstration of knowledge of CBT and other evidence based techniques De escalation techniques</p>	<p>Care planning Reflection Direct observation Statement from others</p>
<p>Confidently manages the procedures in assessing, providing and evaluating care</p>		
<p>10. Manages all aspects of personal hygiene, promotes independence and makes appropriate referrals to other healthcare professionals as needed (e.g. dentist, optician, audiologist)</p>	<p>Assist patients with all personal hygiene needs, including bed bath, showering, shaving, dressing, oral care, assisting with toileting, referrals to dentist, optician, chiropody etc</p>	<p>Patient documentation Reflection Direct observation Statement from others</p>
<p>11. Manages the care of people with specific nutrition and hydration needs demonstrating understanding of and the contributions of the multidisciplinary team</p>	<p>Manages patients with chronic diseases e.g. diabetes on sliding scales, BM's, dietary needs, swallowing difficulties. Cultural/religious needs</p>	<p>Clinical Skills evidence of completing MUST Care Planning Referral to dietician Referrals to Physical health link nurses Patients documentation Food and Fluid charts Reflection Direct observation/statement from others</p>
<p>12. Manages the care of people who are receiving IV fluids and accurately records fluid intake and output, demonstrating</p>	<p>Seek practice time with teams who provide care in relation fluid intake Monitoring fluid intake will be encountered in elderly care wards</p>	<p>Clinical Skills evidence of completing</p>

understanding of potential complications	and physical health wards	
Proficiency	Examples of skill acquisition	Suggested Evidence
13. Manages the care of people who receiving fluid and nutrition via infusion pumps and devices including the administration of medicines where required	Pathway out/seek practice time who provide services of IV administration	Clinical Skills evidence of completing E learning Workbooks
14 Manage and monitor the effectiveness of symptom relief medication, with the use of infusion pumps and over devices	Pathway out/seek practice time who provide services of IV administration Community nursing teams for syringe driver administration	Clinical Skills evidence of completing E learning Workbooks
15. Manages the care of people with specific elimination needs for example urinary and faecal incontinence and stoma care.	Pathway out/seek practice time with continence care teams, elderly care and physical health wards	Clinical Skills evidence of completing Patients documentation Reflection Direct observation statement from others
16. Demonstrates an understanding of the need to administer enemas and suppositories and undertake rectal examination and digital rectal evacuation as appropriate.	Pathway out/seek practice time with continence care teams, elderly care, physical health and community nursing teams.	Clinical Skills evidence of completing E learning
17. Demonstrates the ability to respond and manage risks in relation to infection prevention and control and undertake proactive measures to protect public health e.g. immunisation and vaccination policies.	Manage patients who require isolation due to infection risks. e.g. new admissions for COVID risk, norovirus, any other infection risk Demonstrate aseptic technique	Patients documentation Reflection Direct observation Statement from others Demonstrate understanding of policies and protocols around infection control

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Confidently leads and manages person-centered care and working in teams		
18. Understands roles, responsibilities and scope of practice of all members of the multidisciplinary team and interacts confidently when working with these members	Lead ward round, admissions, work with MDT members, pathway out to specialist teams	Patients documentation Reflection Direct observation Statement from others Ward round documentation
19. Effectively manages and prioritises the care needs of a group of people demonstrating appropriate communication and leadership skills to delegate responsibility for care to others in the team as required.	Manage a patient or group of patients in placement area under supervision Lead shift under supervision and co ordinate care of patients and staff delegation of tasks Lead on home visits and groupwork	Patients documentation Reflection Direct observation Statement from others
20 Monitors and evaluates the quality of care delivery by all members of the team to promote improvements in practice and understand the process for performance management of staff	Monitor tasks/procedures on ward/unit and feedback to others. Monitor documentation/audits/care plans etc. Work with ward manager/deputy manager of ward team	Patients documentation Reflection Direct observation Statement from others
Confidently contributes to improving safety and quality of person-centered care		
21. Actively participates in audit activity and demonstrates understanding of appropriate quality improvement strategies	Participate in monthly Safety Thermometer, clinical room audits etc Discussion of quality improvement	Patients documentation Reflection Direct observation Statement from others Produce of work
22. Undertakes accurate risk assessments and demonstrates an understanding of relevant frameworks, legislation and regulations for managing and reporting risks	Complete patient risk assessments under supervision Participate in safety huddles and handovers Safety planning	Discussion and demonstration around understanding of frameworks and legislation Direct observation Patient documentation
23. Participates in appropriate decision making regarding safe staffing levels, appropriate skill mix and understands process for escalating concerns	Lead shift/day with delegation of work and tasks under supervision Time with team manager	Direct observation Statement from others

Proficiency	Examples of skill acquisition	Suggested Evidence
Confidently coordinates person-centered care		
25. Co-ordinates the care for people with complex co-morbidities and understands the principles of partnership collaboration and inter-agency working in managing multiple care needs.	Work within MDT and provide care for complex needs patients, make referrals to other agencies Pathway out to specialist services	Patients documentation Reflection Direct observation Statement from others
26. Evaluates the quality of peoples' experience of complex care, maintains optimal independence and avoids Unnecessary interventions and disruptions to their lifestyle	Care planning and MDT approach Understanding of person centred approach Understanding of positive risk taking, personal choice, consent and capacity.	Patients documentation Reflection Direct observation Statement from others Referrals/ produce of work
27. Engages in difficult conversations including breaking bad news with compassion and sensitivity.	Participate in ward rounds. Understanding of MHA and applications – reading of rights and section 17 leave	Patients documentation Reflection Direct observation Statement from others
28. Facilitates the safe discharge and transition of people with complex care needs advocating on their behalf when required	Lead on discharge of complex care patients under supervision with patient/carer involvement Understand advocacy service and involvement	Patients documentation Reflection Direct observation Statement from others Referrals/produce of work
29. Assess and reviews the individual care needs and preferences of people and their families and carers at the end of life, respecting cultural Requirements and preferences.	Understanding of TEP policy and plans Pathway out to work with onward care team.	Patients documentation Reflection Direct observation Statement from others E learning