

Guidance Document

ASSESSING AND SUPERVISING NMC STANDARDS OF PROFICIENCY (2018)

Pre-Registration Nursing Students in Student Wellbeing Hubs – Schools, Colleges, Further and Higher Education

NMC Proficiencies:- Year 3/4 students



UNIVERSITY OF
PLYMOUTH

Proficiency	Examples of skill acquisition	Suggested Evidence
Confidently assesses needs and plans person-centred care		
Utilises a range of strategies/resources to undertake a comprehensive whole body assessment to plan and prioritise evidence-based person-centred care	Holistic nursing assessment, clinical observations	Admission assessment Care planning Food and Fluid chart Statement from others E Learning Bowel chart Body Map Malnutrition scoring tool
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.	<ul style="list-style-type: none">• Mental capacity act• Learning disability• Mental Health Act• Consent and capacity with children and young people	Documentation Care plans Risk assessment Reflection Statement from others
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.	<ul style="list-style-type: none">• Attend and contribute towards MDT and multi-agency discussions• Able to identify treatment needs• through 1 to 1 sessions• Able to identify and implement appropriate psychosocial interventions.• Referrals to other services (IAPT, The Zone, GP)	Complete referrals to IAPT and other therapy services Patient documentation Care planning Discharge planning Statement from others
Accurately and legibly records care, with the use of available digital technologies where appropriate, in a timely manner.	<ul style="list-style-type: none">• 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
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 Working with carers and families.	documentation and care planning Direct observation and statement from others

Proficiency	Examples of skill acquisition	Suggested Evidence
<p>Manages a range of commonly encountered symptoms of increasing complexity including pain, distress, anxiety and confusion.</p>	<ul style="list-style-type: none"> • De – escalation techniques – dealing with conflict and distress. • Mindfulness, breathing techniques Individualised approach • Grounding techniques and CBT • skills use through groups and 1:1 	<p>Documentation Care planning Direct observation Statement from others Reflection</p>
<p>Uses skills of active listening, questioning, paraphrasing and reflection to support therapeutic interventions using a range of communication techniques as required</p>	<ul style="list-style-type: none"> • 1 -1 sessions with Students/serviceusers • Groupwork facilitation • Providing support and advice to teaching staff. 	<p>Documentation Reflection Direct observation Statement from others</p>
<p>Is able to support people distressed by hearing voices or experiencing distressing thoughts or perceptions</p>	<ul style="list-style-type: none"> • Individualised person-centred approach • Demonstration of knowledge of CBTand other evidence-based techniques • De-escalation techniques • Provides advice and psycho-education to students, families, carers and teaching staff. 	<p>Care planning Reflection Direct observation Statement from others</p>
<p>Confidently manages the procedures in assessing, providing and evaluating care</p>		
<p>Manages the care of people with specific nutrition and hydration needs demonstrating understanding of and the contributions of the multidisciplinary team</p>	<ul style="list-style-type: none"> • Regular Nutritional assessments and understanding of nutrition impact on mental health outcomes. • Making appropriate referrals to MDT members (disability, dietician), • Refer to GP or local EDS. • Health Promotion • Educating students and carers 	<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>Manages the care of people with specific elimination needs for example urinary and faecal incontinence and stoma care.</p>	<ul style="list-style-type: none"> • Complete appropriate assessments to determine need and refer to appropriate service • Link with disability service • Advocate for students with additional bathroom needs to promote dignity and privacy. 	<p>Clinical Skills evidence of completing Documentation Reflection Direct observation statement from others</p>

	<ul style="list-style-type: none"> • Pathway out/seek practice time with continence care teams and physical health 	
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.	<ul style="list-style-type: none"> • Use of handwashing • Understanding Appropriate use of PPE • Advising and advocating for members of the MDT, service user group and carers. • Provide health promotion and education of infection control. • Monitor government guidelines for COVID regulation in educational facilities. 	<p>Patients documentation Reflection Direct observation Statement from others Demonstrate understanding of policies and protocols around infection control</p>

Proficiency	Examples of skill acquisition	Suggested Evidence
Confidently leads and manages person-centred care and working in teams		
Understands roles, responsibilities and scope of practice of all members of the multidisciplinary team and interacts confidently when working with these members	<ul style="list-style-type: none"> • Lead duty shift, working with MDT members, and directing pathway out to specialist teams. • Lead MDT meetings 	<p>Documentation Reflection Direct observation Statement from others Ward round documentation</p>
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.	<ul style="list-style-type: none"> • Manage an individual or group of services users in placement area under supervision • Lead shift under supervision and coordinate care of service users and staff delegation of tasks • Lead groupwork and Potential projects • Act as mentor for junior students 	<p>Documentation Reflection Direct observation Statement from others</p>
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	<ul style="list-style-type: none"> - Work with manager and deputy manager of student wellbeing service - Work with student feedback to improve services - Complete audits 	<p>Documentation Reflection Direct observation Statement from others</p>
Confidently contributes to improving safety and quality of person-centred care		

Actively participates in audit activity and demonstrates understanding of appropriate quality improvement strategies	<ul style="list-style-type: none"> Participate in monthly Safety meetings Discussion of quality improvement with practice assessor 	Documentation Reflection Direct observation Statement from others Produce of work
Undertakes accurate risk assessments and demonstrates an understanding of relevant frameworks, legislation and regulations for managing and reporting risks	<ul style="list-style-type: none"> Complete risk assessments under supervision Participate in safety huddles and handovers Safety planning for service users 	Discussion and demonstration around understanding of frameworks and legislation Direct observation Documentation
Participates in appropriate decision making regarding safe staffing levels, appropriate skill mix and understands process for escalating concerns	<ul style="list-style-type: none"> Lead shift/day with delegation of work and tasks under supervision Time with team manager On duty responsibility under supervision Managing drop in and delegating tasks 	Direct observation Statement from others

Proficiency	Examples of skill acquisition	Suggested Evidence
Confidently coordinates person-centred care		
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.	<ul style="list-style-type: none"> Work within MDT and provide care for complex needs students, make referrals to other agencies Pathway out to specialist services 	Documentation Reflection Direct observation Statement from others
Evaluates the quality of peoples' experience of complex care, maintains optimal independence and avoids Unnecessary interventions and disruptions to their lifestyle	<ul style="list-style-type: none"> Care planning and MDT approach Understanding of person centred approach Understanding of positive risk taking, personal choice, consent and capacity. 	Documentation Reflection Direct observation Statement from others Referrals/ produce of work
Engages in difficult conversations including breaking bad news with compassion and sensitivity.	<ul style="list-style-type: none"> Fitness to study meetings, Meeting with families and carers. Potential MHA, MARAC meetings 	Documentation Reflection Direct observation Statement from others

Facilitates the safe discharge and transition of people with complex care needs advocating on their behalf when required	<ul style="list-style-type: none"> - Understand advocacy service and involvement - Working on endings in groups therapeutic relationships - Counselling services - Working with multi-agencies 	Documentation Reflection Direct observation Statement from others Referrals/produce of work
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If a student has been assessed as proficient but does not maintain proficiency in subsequent years, relevant plans can be drawn up and they can be reassessed. A Proficiency can be assessed by Practice Supervisors or Assessors, or anyone occupationally competent (such as phlebotomists). Practice Assessors will be verifying Proficiencies at the end of placement assessment.