

# Faculty of Health

## Sign Off Mentor Handbook

Return to Practice: Nursing  
Return to Practice: Midwifery

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# **1 Welcome**

On behalf of the Faculty and staff at Birmingham City University I am delighted to extend a warm welcome to you. I am pleased that you have chosen to undertake the role of Mentor for our health and social care students.

The University has strong collaborative links with Local Authorities, NHS Trusts, and private sector care providers where our students are placed for practical experience. Underpinning these links is a long-standing culture of ongoing support.

Thus, the Faculty of Health's Department of Practice Learning, and the relevant programme team(s) will support you in providing quality learning opportunities for our students whilst they are undertaking their practice placements.

I hope that you will find working with us as a Mentor a stimulating and rewarding experience, and I wish you every success.

Professor Ian Blair  
Executive Dean, Faculty of Health

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### **3 Birmingham City University Mission Statement**

#### **OUR MISSION**

To be a powerful force for learning, creativity and enterprise, promoting economic, social and cultural wellbeing.

#### **OUR VISION**

We will be recognised regionally, nationally and internationally as a university, which fosters intellectual, critical and creative endeavour, and, through continuous innovation:

- Provides an educational experience of the highest quality with a strong commitment to employability and to flexible and practice-based learning;
- Is an exemplar for engagement with business, the professions and the community;
- Promotes centres of excellence in research and investigative practice;
- Is a force for equality and inclusion.

#### **OUR APPROACH**

We will attain this reputation through:

- The value we place on our staff and the expectations we place on them for the highest standards of professionalism and performance;
- Active partnership with the Students' Union to ensure that together we meet students' educational and wider social, cultural, sporting, welfare and personal development needs;
- Innovative use of technology to promote effective student learning and efficient business delivery;
- Continuous development of our portfolio of activities to meet changing needs;
- The development of the estate to achieve a first-class environment;
- A marketing and communications strategy which enables us to engage effectively with staff, partners and the wider community, and to promote the University's capabilities;
- The promotion of sustainability in our policies and activities.

**For more information about the University's policies on equal opportunities and diversity see:** the University's internet site at <http://www.bcu.ac.uk/jaws>.

### **4 Introduction to the Sign-off Mentor Handbook**

A student's practice experience is widely acknowledged as being one of the most important parts of the educational preparation process to becoming a health or social care professional. Therefore this Handbook has been developed by a working party consisting of academic staff and practice partners to provide you with an understating of your role in supporting students whilst they are undertaking practice placements. This will enhance your confidence and competence in assuring they are fit for practice.

As a Mentor of students on a programme(s) provided by Birmingham City University, it is important that you know what policies and regulations which govern these programmes. Furthermore, it is important for you to understand how these impact upon the experience both of students and of yourself as a Mentor.

Throughout this Handbook we have therefore included important information about some of these policies and regulations, and how to access them. If you are unsure of the meaning of any of the

particularly academic language that is used in some of these, please contact your education link colleague.

#### **4.1 Department of Practice Learning (DPL)**

The Faculty of Health continues to place significant emphasis on the quality of placements through the creation of the DPL, which brings together placement provision across the Faculty. The relationship between DPL and placement providers is pivotal, in ensuring high quality professional placement provision which is offered to all students undertaking health and social care programmes.

DPL offers support for Mentors through the administration of protocols to provide parity and equity for students. Training for Mentors is also based on University and regulatory body requirements.

Mentors are supported through their initial training (Supporting Learning and Assessment in Practice) and then offered annual up-dates in conjunction with any employer. DPL also publish regular newsletters, and these are available on the website, which has a dedicated page for Mentors.

## **5 Return to Practice: Nursing Return to Practice: Midwifery**

### **5.1 Programme Overview**

These programmes form part of the Faculty of Health's Return to Practice framework, which also enables lapsed health visitors and operating department practitioners to renew their registration and return to practice. The Nursing and Midwifery Council's "Prep Handbook" (2008) sets specific standards to return to practice as a nurse or midwife. These standards require a course whose outcomes include:

- an understanding of the influence of health and social policy relevant to the practice of nursing and midwifery
- an understanding of the requirements of legislation, guidelines, codes of practice and policies relevant to the practice of nursing and midwifery
- an understanding of the current structure and organisation of care, nationally and locally
- an understanding of current issues in nursing and midwifery education and practice
- the use of relevant literature and research to inform the practice of nursing and midwifery
- the ability to identify and assess need, design and implement interventions and evaluate outcomes in
- all relevant areas of practice, including the effective delivery of appropriate emergency care
- the ability to use appropriate communications, teaching and learning skills the ability to function effectively in a team and participate in a multi-professional approach to people's care
- the ability to identify strengths and weaknesses, acknowledge limitations of competence, and recognise the importance of maintaining and developing professional competence.

A return to programme must be not less than five days. The length and nature of the programme is determined by the education provider and the particular individual. This will take into account registration history, previous levels of knowledge and experience, and any relevant experience undertaken while out of professional practice. For these programmes the length and nature are determined by a professional navigator (for midwifery this is done in consultation with the lead midwife for education).

For **Return to Practice: Nursing** the minimum duration of placement experience is determined to enable assessment of competence by a sign-off mentor. For **Return to Practice: Midwifery**

the minimum duration of placement experience is determined to enable a sign-off mentor to assess competence in antenatal, intrapartum, postnatal and community care.

## **5.2 Programme Philosophy**

### **Return to Practice: Nursing**

Students entering the Return to Practice: Nursing programme are a diverse group. Their commonality is they have all have lapsed professional registration and now wish to return to nursing. As individuals their professional experience varies in terms of the length of time since their initial registration, the academic level of their previous study, the length of time since their registration lapsed. As well as their previous professional experience they bring a variety of life and work experiences which will contribute to both their study and practice of nursing. The programme recognises these contributions by individual planning with each student the academic and practice experiences they need to meet the learning outcomes and demonstrate their fitness to return to practice. Although students enter the programme with extensive experience they look to the programme to build their confidence and assure their competence in returning to practice.

Competence is a requirement for registration as a nurse. It is a holistic concept that may be defined as the combination of skills, knowledge and attitudes, values and technical abilities that underpin safe and effective nursing practice and interventions. Competence in nursing is conceptualised in four domains of practice which are

- professional and ethical practice
- care delivery
- care management
- leadership, management and team working

Through the programme's practice learning opportunities and university based assessment the student will demonstrate that they have regained the competence necessary for returning to practice as a nurse.

The programme adopts a flexible and blended approach to learning. The length and content of the programme is determined individually according to previous experience, the length of time that registration has lapsed, and the number of hours per week that the return to practice student is able to spend in practice. Following successful completion of the programme the nurse will need to maintain and develop their professional competence through continuing professional development, preceptorship and clinical supervision. The process of identifying individual learning needs and identifying evidence of achievement will facilitate lifelong learning after the return to practice programme.

The return to practice programme is rooted in the integration of theory and practice, that learning enables the students to update knowledge and skills for safe practice. Reflection provides a tool to develop the integration of learning through practice. Each student's practice learning experience will differ but through these experiences the student demonstrates that they have the capacity for safe and effective practice sufficient to return to the register so the people in their care can trust them with their health and wellbeing.

### **Return to Practice: Midwifery**

Students entering the Return to Practice: Midwifery programme are a diverse group. Their commonality is they have all have lapsed professional registration and now wish to return to midwifery. As individuals their professional experience varies in terms of the length of time since their initial registration, the academic level of their previous study, the length of time since their registration lapsed. As well as their previous professional experience they bring a variety of life and work experiences which will contribute to both their study and practice of midwifery. The programme recognises these contributions by individual planning with each student the academic and practice experiences they need to meet the learning outcomes and demonstrate their fitness

to return to practice. Although students enter the programme with extensive experience they look to the programme to build their confidence and assure their competence in returning to practice.

Competence is a requirement for registration as a midwife. It is a holistic concept that may be defined as the combination of skills, knowledge and attitudes, values and technical abilities that underpin safe and effective midwifery practice and interventions. Competence in midwifery is conceptualised in four domains of practice which are

- effective midwifery practice
- professional and ethical practice
- developing the individual midwife and others
- achieving quality care through evaluation and research.

Through the programme's practice learning opportunities and university based assessment the student will demonstrate that they have regained the competence necessary for returning to practice as a midwife.

The programme adopts a flexible and blended approach to learning. The length and content of the programme is determined individually according to previous experience, the length of time that registration has lapsed, and the number of hours per week that the return to practice student is able to spend in practice. Following successful completion of the programme the midwife will need to maintain and develop their professional competence through continuing professional development, preceptorship and midwifery supervision. The process of identifying individual learning needs and identifying evidence of achievement will facilitate lifelong learning after the return to practice programme.

The return to practice programme is rooted in the integration of theory and practice, that learning enables the students to update knowledge and skills for safe practice. Reflection provides a tool to develop the integration of learning through practice. Each students' practice learning experience will differ but through these experiences student demonstrates that they have the capacity for safe and effective practice sufficient to return to the register so that the women and families in their care can trust them with their health and wellbeing.

All learning programmes in the Faculty of Health have a philosophy which underpins students' learning experience. The programme philosophy can be found in appendix 1.

### 5.3 Programme Aims

The aim of the **Return to Practice: Nursing** programme is to enable the student, whose registration as a nurse has lapsed, to renew their registration as a nurse and return to practice by meeting the Return to Practice outcomes specified in "The Prep Handbook" (NMC 2008). The aim of the **Return to Practice: Midwifery** programme is to enable the student, whose registration as a midwife has lapsed, to renew their registration as a midwife and return to practice by meeting the Return to Practice outcomes specified in "The Prep Handbook" (NMC 2008).

### 5.4 Programme Learning Outcomes

The learning outcomes for **Return to Practice Nursing** are

1. Achieve the outcomes for renewing NMC registration and returning to practice, as specified in "The Prep handbook" (NMC 2008)

- an understanding of the influence of health and social policy relevant to the practice of nursing
- an understanding of the requirements of legislation, guidelines, codes of practice and policies relevant to the practice of nursing
- an understanding of the current structure and organisation of care, nationally and locally
- an understanding of current issues in nursing education and practice
- the use of relevant literature and research to inform the practice of nursing



- the ability to identify and assess need, design and implement interventions and evaluate outcomes in
  - all relevant areas of practice, including the effective delivery of appropriate emergency care
  - the ability to use appropriate communications, teaching and learning skills the ability to function effectively in a team and participate in a multi-professional approach to people's care
  - the ability to identify strengths and weaknesses, acknowledge limitations of competence, and recognise the importance of maintaining and developing professional competence.
2. Demonstrate fitness to practice as a nurse, that is having the skills, knowledge, good health and character for safe and effective practice.
  3. Produce an up-to-date professional profile which can be used to demonstrate employability and fitness for purpose.

The learning outcomes for **Return to Practice Midwifery** are

1. Achieve the outcomes for renewing NMC registration and returning to practice, as specified in "The Prep handbook" (NMC 2008)
  - an understanding of the influence of health and social policy relevant to the practice of midwifery
  - an understanding of the requirements of legislation, guidelines, codes of practice and policies relevant to the practice of midwifery
  - an understanding of the current structure and organisation of care, nationally and locally
  - an understanding of current issues in midwifery education and practice
  - the use of relevant literature and research to inform the practice of midwifery
  - the ability to identify and assess need, design and implement interventions and evaluate outcomes in
  - all relevant areas of practice, including the effective delivery of appropriate emergency care
  - the ability to use appropriate communications, teaching and learning skills the ability to function effectively in a team and participate in a multi-professional approach to people's care
  - the ability to identify strengths and weaknesses, acknowledge limitations of competence, and recognise the importance of maintaining and developing professional competence.
2. Demonstrate fitness to practice as a midwife, that is having the skills, knowledge, good health and character for safe and effective practice.
3. Produce an up-to-date professional profile which can be used to demonstrate employability and fitness for purpose.

## 5.5 Programme Content

The programme content is determined individually with a professional navigator. Indicative content includes revision of professional regulation; nursing or midwifery in the political, national and local context; contemporary nursing or midwifery practice; midwifery in action; evidence to support practice; dealing with challenging situations, advocacy in difficult situations; legal issues; making an impact.

## 5.6 Standard University Assessment Regulations

Each programme, including assessment in practice, is governed by University Assessment Regulations, to which all staff must adhere. These regulations can be found at the link below:

<http://www.bcu.ac.uk/jaws>

## 5.7 Programme Structure

The programme consists of one module. Practice is assessed by a sign-off mentor as part of this module. The pattern of attendance is determined individually and may include both full- and part-time attendance: this pattern of attendance has been agreed the healthcare provider organisation

in which the returner is placed. The student will have a practice profile to complete which is the basis for assessment in their placement learning opportunities.

## **5.8 Inter-professional Learning**

The Faculty of Health is committed to preparing all students to work inter-professionally. All programmes of study actively encourage students to value the need for, and benefits of, working within an inter-professional framework to provide a holistic approach to person centred care.

Students need to develop the knowledge, skills, values, and attitudes needed to work in a team with other health and social care professionals for the best interests of patients / users. Though this process can be supported at University, the best place for students to develop inter-professional skills is in practice.

We need to ensure that students have the opportunity to participate in inter-professional and multi-agency approaches to health and social care, whilst recognising individual scopes of professional practice, and to encourage students to learn from this experience. Mentors play an important part in modelling this approach to learning and practice.

# **6 Role and Responsibilities of Sign-off Mentors**

## **6.1 Sign off Mentor**

A Mentor is a registrant who has met the outcomes of stage 2 of the Standards to Support Learning and Assessment in Practice (2008). They facilitate learning, and supervise and assess students in a practice setting. A Sign-Off Mentor is a registrant who makes judgements on whether a student has achieved the required standard for safe and effective practice, and can therefore have their qualification recorded on the relevant part of the NMC register. Becoming a "Sign Off Mentor" requires additional training to meet the criteria in "Standards to support learning and assessment in practice" (NMC 2008). Nurses and Midwives who make judgements about whether a student has achieved the required standards of competence for safe and effective practice must be on the same part or sub-part of the register as that which the student is intending to enter. Return to practice students must be assessed by a sign-off mentor.

Mentors have an important role in facilitating a student's ability to learn and apply learning to practice, which has a significant impact on delivering effective clinical and social care. A skilled and competent workforce ensures patient safety, and will recognise and respond to clinical need more appropriately. Therefore the working group has developed a Role Descriptor and Role Guidance for the role of Mentor. In brief, the role of the Mentor is to facilitate appropriate learning experiences for the student, to review progress and to assess achievement.

The full role guidelines for Mentors may be found in the appendix.

All students must be supervised at all times, either directly or indirectly by a Mentor or other suitably prepared registered professional. Being a Mentor requires commitment. Mentors should not normally support more than three students from any discipline at any point. Practice learning providers must ensure that the sign-off mentor is available to the student for at least 40% of the time during periods of practice learning.

Practice learning providers must ensure that students are supervised directly or indirectly at all times during practice learning by a Mentor, Practice Teacher or other suitably prepared registered professional.

## **6.2 Supervised Practice**

It is expected that students will also work with a range of staff in addition to their sign-off Mentors, in order to gain experience whilst on placement. At all times, students should be supervised by staff that are appropriately qualified for that practice learning area. It is acknowledged that not all staff involved will have received Mentor training, which means that they cannot sign summative assessment documentation. It is, however, desirable for students to gain experience of working within the wider professional team. Where non nurses are supervising students they will have been suitable prepared and supported in that role by DPL.

## **6.3 Mentor Accountability**

When negotiating activities with students the Mentor remains accountable for delegating any task or activity to the return to practice student and must be able to:

- i) Justify the decision to allow the student nurse to carry out care.
- ii) Appropriately supervise the student nurse during the execution of care.

## **6.4 Mentor Updating / Triennial Review**

The NMC requires all qualified mentors to maintain and develop their knowledge skills and competence through regular updating.

The Department of Practice Learning offers regular mentor updating sessions at the university, mentors can also access updating sessions within their own organisation. DPL works in partnership with our practice learning providers to ensure consistent information and advice is offered to mentors.

Mentors must participate in annual updating the purpose of which is to ensure that mentors:

- Have current knowledge of NMC approved changes.
- Are able to discuss the implications of changes to NMC requirements.
- Have an opportunity to discuss issues related to mentoring, assessment of competence and fitness for safe and effective practice.

Each Mentor should be reviewed every three years (Triennial Review) to ensure that only those who continue to meet the Mentor requirements remain on the local register. The nature of this review will be determined by your employer.

## **6.5 Local Register of Mentors**

It is the responsibility of every organisation / placement provider to maintain a local register of qualified Mentors and Sign off Mentors. Registers should include:

- Details of the original Mentor preparation programme.
- Dates of updates that have been undertaken.
- Date of triennial review

## **6.6 Preparing for the Student**

Return to practice students have already agreed their placement experience before commencing their programme. They have been required to attend your organisation's mandatory induction and training.

## **6.7 Developing Professional Attitudes**

Mentors, as registered professionals, are required by both their regulatory body and their employers to demonstrate attitudes and behaviours, which adhere to the relevant Codes and

promote a positive image of their profession and organisation. Students are expected to develop these attitudes and behaviours over the course of their studies by observing this positive role modelling provided by qualified practitioners. Where a Mentor has concerns about the attitudes and behaviours displayed by students, or about the health and fitness of students in terms of occupational health standards, they must discuss it with the student, record it, and report it appropriately, providing feedback to the student and participate in managing the situation through the Higher Education Institution and Trust policies and procedures.

## **6.8 Codes of Conduct, Performance and Ethics**

All Mentors must adhere to their Codes of Conduct, Performance and Ethics, and act as a role model for students. As students on this programme are returning to practice they must adhere to the same code.

[http://www.nmc-uk.org/Documents/Standards/nmcTheCodeStandardsofConductPerformanceAndEthicsForNursesAndMidwives\\_LargePrintVersion.PDF](http://www.nmc-uk.org/Documents/Standards/nmcTheCodeStandardsofConductPerformanceAndEthicsForNursesAndMidwives_LargePrintVersion.PDF)

# **7 Practice Learning Opportunities and Assessment**

## **7.1 Overview**

The NMC specify that an approved return to practice programme for nursing or midwifery will be not less than five days in length. The length and nature of the programme will be determined by the education provider and the particular individual. This will take into account your registration history, previous levels of knowledge and experience, and any relevant experience undertaken while you have been out of professional practice.

## **7.2 Monitoring Student Progress and Achievement**

Sign-off mentors should facilitate three progress interviews with their student during any practice learning experience.

As part of this process sign-off mentors should provide continuous written and verbal feedback on the student's performance; this may include both positive feedback and highlight areas for improvement.

You will meet formally with your student to review your progress at the following points:

1. Initial interview and induction to placement area
2. Interim interview and formative assessment of progress
3. Final interview and summative assessment

Sign-off mentors should be aware that assessing students' progress and performance in practice is a complex process that involves many different elements. These encompass the intended learning outcomes of the module and programme, assessment purposes, content and methods, criteria and standards. Given the complexity of assessment, it is crucial to strive for an integrated approach, bringing together various members of the team in practice. Mentors should therefore use appropriate strategies which need to:

- Monitor performance of the student over time
- Negotiate clear and achievable goals
- Directly observe student's practice.
- Challenge unacceptable or unsafe practice
- Evaluate student performance

Student nurses' practical ability must be assessed to ensure that they demonstrate the skills, knowledge and professional behaviour necessary to take part in practice without risk to the public.

By the end of the programme of study students must be able to demonstrate that they are fit for practice. This means that students are able to practise safely and effectively without supervision, and have met the standards return to practice contained in the Prep Handbook (NMC 2008). These standards have been mapped to the standards for competence and all other requirements for registration set out by the NMC Standards for Pre-registration Midwifery Education (2009) and the NMC Standards for Pre-registration Nursing Education (2010)

Students must meet the requirements in each practical assessment document in order to progress to subsequent parts and complete the programme.

### **7.3 Formative and Summative Assessment**

**Formative assessment** is concerned with the development of the student, identifying strengths and areas for development, and providing feedback on their progress through the learning experience. Formative assessment should involve the student in self-assessment as well as a collaborative review of progress with their Mentor. Formative assessment focuses on the learning needs of the particular student to achieve the performance descriptors / criteria for practice.

Formative assessment does not contribute to the summative mark / grade awarded to students. **Summative assessment** usually takes place at the end of a learning experience, and is used to evaluate a student's achievement of the learning outcomes and competencies. It is decision-making in nature and contributes to the marking / grading of a student. It may well be that summative assessment includes developmental feedback, which the student can use to improve their performance in the future.

### **7.4 Supernumerary Status**

Students undertaking return to practice programmes in nursing and midwifery have supernumerary status for the duration of their programme leading to renewal of registration. Supernumerary means that the student will not, as part of their programme of preparation, be contracted by any person or body to provide nursing care.

This means that the student is additional to workforce requirements and staffing figures. The student will make an evolving contribution to enable them to learn and meet professional standards and competence required in the programme of learning.

### **7.5 Students with Disclosed Disabilities**

The practice placement action plan must be completed in line with all reasonable adjustments to which students may be entitled if they have a diagnosed disability which has been disclosed, assessed and recognised by the University. The student will require evidence of such entitlement. The reasonable adjustments applied to student placement learning must not detract from the level of competence to be met in order to be successful. Please see initial interview pages of the assessment of practice documents for disability disclosure statements. Further advice is available from the Faculty of Health Disability Tutor in DPL.

### **7.6 Risk Assessments**

If students are pregnant a risk assessment must have been undertaken before they can attend any practice learning opportunity. If this has not been carried out DPL must be contacted immediately. Any adjustments or recommendations from the assessment can then be considered by your area prior to the student attending.

Students are also advised to disclose any illness or disability that may be a risk during the practice learning opportunity so that a risk assessment can be undertaken and adjustments recommended by any such assessment can be considered.

## **7.7 Student Attendance**

The minimum number of practice hours students are required to complete has been agreed individually. They must complete the “Record of Attendance” sheet at the back of the practice profile document. The mentor must sign this sheet to confirm the accuracy of the hours undertaken.

The number of hours practice which the student completes, and the pattern of attendance, must be agreed by the student and placement provider. These will need to reflect the sign-off mentor’s work patterns to ensure adequate opportunities for learning, effective supervision and assessment. Supernumerary status does not imply the right to change allocated duty at will, or always to have off-duty / leave requests honoured.

## **7.8 Evidence to support the achievement of practice competences**

This evidence is produced in practice profiles. The profiles contain detailed explanations of how the student should provide evidence and the sign-off mentor assess the evidence.

### Return to Practice: Nursing

The practice profiles were developed from the practice assessment documents approved for the pre-registration nursing programmes. Those practice assessment documents used statements of the required standard of practice, which had been derived from the competencies for each domain in the Standards of Proficiency for Pre-Registration Nursing Education (NMC 2004). The profile contains all the statements of required standards plus the medicines management assessment contained in year three documents for pre-registration programmes. The competences have been mapped to the NMC Prep Handbook outcomes for return to practice. The description of required level of performance is the same as required by a sign-off mentor for initial entry to the register as a nurse. Separate documents are provided for adult, child, learning disabilities and mental health nursing to reflect the field specific competencies in the NMC Standards. Producing the practice profile in this way ensures that it will be in a format familiar to sign-off mentors for nursing.

### Return to Practice: Midwifery

The practice profiles were developed from the practice assessment documents approved for the BSc (Hons) Midwifery programme in May 2009. The profile contains all the competencies for each domain in the Standards of proficiency for pre-registration midwifery education (NMC 2009), including evidence of medicines management. The competences have been mapped to the NMC Prep Handbook outcomes for return to practice. The description of required level of performance is the same as required by a sign-off mentor for initial entry to the register as a midwife. Producing the practice profile in this way ensures that it will be in a format familiar to sign-off mentors for midwifery.

## **7.9 Level of Supervision**

During this programme students must demonstrate that they will be able to work as autonomous practitioners by the point at which they return to the register. At the start of their placement learning they may require *Direct Supervision* under which the mentor is required to ensure they are directly supervised by a competent individual at all times. They will need to progress to *Indirect Supervision*, where they are supervised less obtrusively in order ascertain that they are capable of autonomous practice.

## **7.10 Level of Performance**

A full description of the Required Level of Performance can be found in the Practice Profile document. Students will have a maximum of 2 attempts at this practical assessment to achieve the required level of performance.

## **7.11 Placement Interviews with Students**

As a Mentor, you will be required to undertake formal interviews with your student(s) whilst they are undertaking placements. The timing of the interviews will depend on the programme of study that the student is taking.

For return to practice programmes Mentors should undertake an initial interview during the first week of placement. This should be followed by a mid point(interim) interview and a final interview during the last week of the placement. Guidance is detailed within the placement assessment document.

The interviews are a means of establishing the learning needs of your student, monitoring achievement or lack of achievement, providing feedback and confirming whether proficiencies, competences or standards have been met.

## **7.12 Service User Feedback**

### Return to Practice: Nursing

Service users' views must contribute to the assessment of student. In consulting with service users Mentors should be guided by the following:

- The service user will only be approached by the Mentor for comments
- Contribution by the service user will be entirely voluntary
- Mentors must be mindful of over surveying service users
- Verbal consent will be sought from the service user
- The identity of the service user will be anonymised wherever possible
- If anonymity is not possible the service user can choose not to participate
- Any lack of service user contribution will not prejudice the practical assessment of the student
- The Mentor will use professional judgement to evaluate the quality of answers

This means that Mentors will record in the student's assessment of practice document that service user experiences have been taken into account in assessing the students practice at both interim and final assessment points. The practice profile document clearly indicates where this feedback should be recorded.

### Return to Practice: Midwifery

The NMC Standards for Pre-registration Midwifery Education (2009) do not explicitly require that women's views contribute to the assessment of students. As those standards emphasise partnership and the trust women place in midwives sign-off mentors may consider it good practice to elicit women's views.

## **7.13 Principles of Giving Constructive Feedback**

Feedback that is accurate, meaningful and given to students in a sensitive way can help reduce any anxiety, increase students' job satisfaction, and motivation to learn and develop. Destructive feedback given in an unskilled manner can leave students feeling very negative and wondering

whether there is any point or anything for them to build on. There are some simple steps that Mentors can use to make it a planned and positive experience:

- Be clear about what you want to say in advance
- Ask the student how they feel they are getting on
- Start with positive - acknowledge what they are doing well
- Suggest measures they can take to develop areas in which they are not doing so well
- Encourage them to consolidate their strengths and address their limitations. With a positive approach you can help them learn from both positive and negative experiences
- Be clear, concise and specific. Avoid general comments that do not give enough detail to learn from
- Give alternatives- suggest what could have been done differently
- Encourage the student to own the feedback, be open to their point of view and use your listening skills to establish how what you are saying is affecting them
- Focus on behaviour rather than personality traits
- End the meeting ensuring the student knows what has been decided especially if there are any issues, and with a positive comment on something they do well.

Students are required to attend placement in order for the assessment of practice to be undertaken and there may be a professional or programme requirement for a minimum number of hours / days that a student must undertake in practice in order to be considered for the final assessment for a particular placement experience. The minimum number of hours/ days a student must undertake will be identified in the placement document and student programme handbook. Mentors should always sign student's attendance records to ensure that the record is completed and accurate. If students are absent from placement, Mentors should liaise with the Department of Practice Learning / Programme Director or the student's Personal Tutor.

#### **7.14 Supporting Students who are Failing to Achieve**

Effective support is facilitated by identifying failing students as early as possible, and taking appropriate action. This will include, where appropriate, seeking support from practice education and / or University staff. Whatever the specific situation, both students and Mentors need to feel supported, rather than feeling that they are being subjected to further pressure.

- Speak discretely with the student, and help him/her to accept the reality of the situation. Many students are anxious to deny that there is any problem. The student must recognise the problem and decide that s/he wants to resolve it in order for there to be real progress.
- Once the problem has been identified focus on listening to the student, and then be honest and direct in your responses. Offer respect and encouragement. Pay attention to what s/he says about course demands, personal / health problems, etc, and their confidence in working in placement. You may have only seen symptoms of the basic problem, but not have any idea of its source.
- Help the student to create a plan of action, from a reasonable starting place, and with realistic goals. You may obtain assistance from identified practice support staff. Make sure that the student adopts the plan as his/her own set of goals and responsibilities. Offer the student opportunities to make progress, and arrange for these opportunities to be provided. Do not guarantee a pass grade.
- Set regular times for a mutual review of the progress of the action plan. Take care to congratulate the student on progress. If a student is not progressing, or even regressing, be positive, but firm. It will be important to try to address any issues around maintaining the student's motivation. However, do not make negative comments in front of others.



- Do not lower your standards to accommodate a student who is "working hard." This is commendable in the student, but will not help him/her, the profession or the public. Do not give a student a pass grade for trying hard. It only takes her/him to a harder, more impossible level.
- Maintain a professional outlook. If you have followed these guidelines and acted in a genuinely supportive manner, you have done your best. The student is responsible for his/her success or failure.

### **7.15 Professional practice profile**

Students on the return to practice programmes are required to demonstrate their progress towards achieving competence/proficiency in the domains of practice.

At the end of the programme the student must provide evidence of all practical achievements to a Sign-off Mentor through their professional practice profile. In order to be able to return to registration as nurse or midwife with the NMC the student **MUST** be assessed and signed off as competent to practice by a sign off mentor.

The Sign-off Mentor is responsible and accountable for making the final sign off in practice in the practice profile document, confirming that the student has successfully completed all the practice requirements of the programme (i.e. sign the final declaration).

### **7.16 Record Keeping**

As a professional you maintain appropriate standards of record keeping when caring for or working with patients / users. The same standards apply to maintaining students' placement documents. Always adhere to the principles of record keeping. If there is any enquiry about a student's performance or behaviour in practice, you may be asked questions, and if matters have not been documented, then this will leave the situation open to interpretation. Records should:

- Be factual, consistent and accurate, written in a way that the meaning is clear;
- Be recorded as soon as possible after an event has occurred, providing current information;
- Be recorded clearly and in such a manner that the text cannot be erased or deleted without a record of change;
- Be recorded in such a manner that any justifiable alterations or additions are dated, timed and signed or clearly attributed to a named person in an identifiable role in such a way that the original entry can still be read clearly;
- Be accurately dated, timed and signed, with the signature printed alongside the first entry where this is a written record; Any corrections should not be deleted using correction fluid.
- Not include abbreviations, jargon, meaningless phrases, irrelevant speculation, offensive or subjective statements;
- Be readable when photocopied or scanned.

In addition, records should:

- be recorded, wherever possible, with student involvement and in terms that the student can understand;
- identify risks and/or problems that have arisen with a student and the action taken to rectify them;
- provide clear evidence of any actions planned and the decisions made with a student.

## **7.17 How to Avoid Material Error Claims**

Under the University regulations, students are entitled to appeal against academic and practice decisions where there is evidence to support one of the following:

- An administrative error in the conduct of the assessment;
- A misinterpretation of the assessment regulations;
- Any kind of irregularity in the assessment process that may have influenced the outcome of the assessment.

In practical terms, Mentors should ensure that the assessment process is carried out in accordance with procedures described in the practice documentation that the University issues. More often than not, successful appeals are based on the fact that the documentation was not completed correctly. Mentors need to ensure that action plans, reviews and final assessments have taken place at agreed times and places.

Other appeals commonly stem from issues of placement duration, where opportunities for assessment are limited. It is thought that this could jeopardise the opportunity for the student to complete their practice outcomes. Periods of re-assessment are also contested where students can prove that they did not work with their Mentor(s) for sufficient time. Mentors should also seek to ensure that they are aware of any reasonable adjustments that have been agreed between the student, University and the placement provider under the requirements of the Equality Act (2010), as failure to do so would be further grounds for appeal. Mentors should seek the advice and support of the designated practice co-ordinator or the University if they are at all concerned about the possibility of any such appeals.

## **8 Academic and Practice Coursework Deferral or Extension due to Exceptional Circumstances**

A student who is unable to attend an invigilated assessment or other form of assessment task or to meet a coursework deadline because of exceptional circumstances may make a request either:

- to defer the attempt at the assessment(s) to a later date i.e. to delay taking the assessment until the next scheduled opportunity. A different assessment task may be set for the deferred assessment;

Or

- for an extension to complete the coursework.

A student must select which of these two remedies he or she is seeking. A request cannot be made for both simultaneously.

Requests for the consideration of exceptional circumstances from students taking programmes offered by a Faculty are considered by the Senate Secretariat, a Division of the Academic Registry and members of the Register maintained by the Student Complaints, Appeals and Discipline Committee (SCAD).

No other body or individual member of staff has the authority to grant a deferral of assessment or an extension to a coursework deadline. Therefore, if a student approaches his / her Mentor with a request for either a deferral or an extension of work, the Mentor should contact the appropriate and named contact at the University for advice.

## **8.1 How Students Can Interrupt their Studies**

An Interruption of Studies is an approved leave of absence from all study for a defined period. A student who interrupts study must withdraw from all the modules that he or she is studying at the time. He or she cannot interrupt individual modules while continuing to study others. An interruption of studies may be taken for a number of reasons e.g. health, financial, academic or personal reasons.

The term 'interruption of studies' applies to approved absences of 15 working days or more and up to a maximum period of one academic year. An interruption of studies cannot commence fewer than 15 working days before the end of the normal study period for the modules for which the student is registered at the time. Where an interruption of studies is not permitted for this reason, the student should be advised to submit a claim for exceptional circumstances if s/he believes that the absence will/has adversely affected performance in an assessment or assessments.

From 2009/10 any period of interruption of studies will be included in the calculation of the student's maximum period of registration for any student whose programme is governed by version 4 of the Standard Undergraduate Assessment Regulations. (Interruptions of studies are discounted from the calculation under earlier versions of standard undergraduate level regulations and the Standard Postgraduate Assessment Regulations.) For absences of fewer than 15 working days, the student should be advised to inform his/her Programme Director and/or Personal Tutor of the proposed absence and to indicate the likely date of return. The student should also be advised to submit a claim for exceptional circumstances if s/he believes that the absence will adversely affect performance in an assessment or assessments.

## **8.2 Students Contemplating Withdrawal**

Withdrawal is the cessation of study with immediate effect from the date shown on the Student Withdrawal/Interruption of Study Form. A student who has formally withdrawn from his/her programme, or has been withdrawn by the University, is not eligible to attend teaching sessions or to take assessments unless s/he is re-admitted to the programme and re-enrols.

If a student is contemplating withdrawing, staff should make every effort to offer appropriate advice and to make enquiries about whether any additional assistance could be provided that would enable the student to continue on the programme. Students should be advised to:

- Consult their Personal Tutor / Programme Director before taking a decision to withdraw;
- Contact Student Services for advice about any further assistance that might be available, and about the financial implications of withdrawal or interruption of study.

If an international student is considering withdrawing, s/he must be advised about the implications for his or her visa. Only staff in the International Advice Service (IAS) are permitted to give this advice and so all queries of this nature must be directed to the IAS.

Students enrolled on a programme whose students are subject to Criminal Records Bureau (CRB) or Occupational Health checks should be informed in writing, by the Director of Faculty Administration, that if they take an interruption of studies of six months or more the University will undertake a new CRB / Occupational Health check, and they cannot resume study until this check has been completed.

## 9 Fitness for Practice and Disciplinary Procedures

### 9.1 Fitness for Practice

Mentors should be aware that the academic progress of students is governed by the University's standard assessment regulations. However, this programme prepares students for entry to a profession for which academic criteria is not sufficient to ensure suitability for practice. For this programme the University and NMC must also be confident that students are fit to practice their chosen career. For this reason, Mentors and other practice staff are integral to the process of assessing fitness for practice.

The Faculty has a Policy, complete with procedures, which applies to programmes where there are compulsory integral periods of professional placement, and for which there are behavioural and health requirements to ensure suitability to practice the profession. When there are concerns *at any time* about a student's personal / professional suitability to remain on their programme mentors must raise and escalate these concerns via their local practice education facilitator or DPL. This might happen, for example, when a student:

- Has physical or mental health problems which may put themselves or others at risk;
- Demonstrates unprofessional behaviour;
- Has committed an offence under the University's Student Disciplinary Procedure which raises doubts about professional suitability.

This list is not exhaustive and other behaviour may raise concerns about a student's fitness for practice.

Students may also approach their Mentors to request that they support them at a University Committee or Panel (e.g. Extenuating Circumstances Committees). It is perfectly acceptable for a Mentor to support their student in this way, providing there is no conflict of interest (i.e. if the Mentor is already involved in the issue concerned).

### 9.2 Module Examination Boards

The purpose of these Boards is to discuss, in an equitable, transparent and timely fashion, the progress of all students who have been removed, discontinued or referred from their placement. The overall remit of the committee will be to signpost the most appropriate action for the student. Where students have been removed from placement as a result of professional concerns in relation to the students fitness for practice, these issues will be recorded and discussed, and a decision taken as to whether or not the matter should be referred for further investigation to an Investigating Officer.

### 9.3 Disciplinary Procedures

Mentors should be aware that students and staff are expected to treat each other with respect and to behave in a manner that creates a harmonious and safe environment, in which everyone can work, study and live. This means acting courteously, complying with any rules and codes of conduct for behaviour, which are laid down, and not behaving in any way that adversely affects the reputation of the University. These requirements extend to times when students are not on the University's premises, such as when they are working in another institution on placement as part of their course or when representing the University at an off campus sporting event.

The University has a Disciplinary Procedure, and it may be accessed via this link:

<http://www.bcu.ac.uk/jaws>

Behaviour that will cause the formal disciplinary procedure to be invoked includes, but is not limited to:

- Violent, threatening, indecent, offensive or reckless behaviour;
- Undesignated possession of an offensive weapon on University premises;
- Fraud or deception;
- Damaging University property;
- Theft or misuse of University / placement property;
- Action likely to cause injury or impair safety on University premises;
- Cheating in an assessment;
- Breaching the Code of Conduct relating to Meetings on University Premises, (freedom of speech);
- Conduct which constitutes a criminal offence where that conduct takes place on university premises.

If students are found guilty of inappropriate behaviour, penalties include written warnings, recovery of the cost of repairing any damage caused, suspension and expulsion.

#### **9.4 Cheating**

Mentors should be aware that the University takes allegations of cheating, in examinations, coursework, or by the falsification of practice documents, very seriously. If there is any issue regarding a student's honesty or integrity, you may be asked questions, or required to provide documentation.

An attempt by a student to gain unfair advantage over other students in the completion of an assessment, or to assist someone else to gain an unfair advantage, is also a disciplinary offence. Mentors therefore need to be careful about the amount of help that they give to students.

#### **9.5 Confidentiality**

Confidentiality is an important principle in health and social care because it functions to impose a boundary on the amount of personal information and data that can be disclosed without permission and this principle applies to working with students.

However, confidentiality can be countered when there is a public interest in others being protected from harm. The Faculty of Health's policy on Confidentiality may be accessed via this link:

<http://www.bcu.ac.uk/jaws>

An example of guidance from a regulatory body on professional conduct for students, including the matter of confidentiality, can be accessed via this link:

<http://www.nmc-uk.org/aDisplayDocument.aspx?DocumentID=6572>.

## **10 Quality and Placements**

### **10.1 Quality Monitoring and Enhancement**

The Department of Practice Learning monitors the quality of the placement experiences, which include:

- Use of audit or update of placements
- Liaising with designated practice education facilitators who will advise on suitability of placements and capacity
- Ensuring placements meet educational standards
- Reviewing student's evaluations of placements

- Providing placements with feedback from students evaluations
- Awarding good practice awards to placements and Mentors (Annual Health and Social Awards / “assessors of excellence”)
- Supporting students who have a complaints relating to the practice learning environment
- Contributing to the liaison with professional, statutory and regulatory bodies who monitor and maintain standards

Ideally, each practice placement area will have a designated practice co-ordinator who is responsible for supporting Mentors to provide placements of suitable quality for students.

## **10.2 Audit**

All placement areas are audited on a regular basis, as required by the Professional Statutory Regulatory Bodies. This audit will require information such as the number of available assessors, the learning opportunities available and risk assessments. Mentors should familiarise themselves with the audit information for their placement area and be prepared to contribute to regular and authentic quality monitoring.

Quality, in placement provision, means the consistent achievement of a standard. In order for this to happen, Mentors need to know what the standard is.

<http://www.nmc-uk.org/Documents/Standards/nmcStandardsToSupportLearningAndAssessmentInPractice.pdf>

## **10.3 Evaluation of the Placement Area**

Students have the opportunity to complete formal evaluations on their placement experience. This may be provided online or in a printed format. Mentors can access a summary of this information from their designated practice co-ordinator. Best practice means that this information will be discussed by the team, and that future learning and action points will be agreed.

Encouraging students to complete these evaluations after their placement will allow placement areas to enhance the learning environment accordingly.

## **10.4 Practice Learning Area Information**

An important part of ongoing quality in placements is that students know what to expect before they come on placement. Mentors should be prepared to participate in regular review and updating of the information which is available to students about their placement area.

<https://icity.bcu.ac.uk/Health/Department-of-Practice-Learning>

## **10.5 Reliability of Assessments**

To be reliable, assessment decisions on students’ performance must be consistent as between all Mentors and for all students undertaking the same assessment task. In any assessment system, procedures have to be put in place to ensure this. The procedure that the Faculty of Health has in place is called moderation.

The Faculty’s policy on moderating student work can be accessed via this link:

<http://www.health.bcu.ac.uk/qualityoffice/root/academic> quality office documents/Faculty of Health policies and Procedures Revised Internal Moderation Policy March 2011.docx

## **10.6 Practicability of Assessments**

For assessments to be practicable (i.e. capable of being carried out both efficiently and cost-effectively) there has to be adequate resources and time. When assessing students, Mentors need to have the flexibility to meet the needs of individual candidates.

## **10.7 Role of External Examiners**

The University appoints External Examiners to all of its programmes in order to ensure that they are comparable to similar programmes in other Universities, and that the quality and standards of provision are maintained at an appropriate level. External Examiners **do not** second mark students work. They do, however, see the assessed work of a sample of students across the full range of attainment (including failed work) in order to check the consistency of standards and the marks / grades awarded. They should also meet students and engage with practice in order to find out the views of students and practice partners about the programme under scrutiny.

External Examiners are also required to write formal annual reports on modules and programmes of study that they monitor and they also attend the Examination Boards, where marks / grades are determined and confirmed. Programme teams are required to respond to any issues identified in the External Examiners' reports.

## **10.8 Raising and Escalating Concerns**

As mentors you have a duty to put the interests of the people in your care first and to act to protect them if you consider they may be at risk. It is therefore important that you know how to raise and escalate concerns appropriately. This is also the message given to student nurses during their programme of study and they are therefore encouraged to raise any concerns they have over the standard of care they witness with their Mentor, Practice Learning Area Manager, Practice Education Facilitator, Personal Tutor or the DPL. As mentors it is important that you support students if they raise issues with you so that they feel empowered to participate in this professional requirement.

The NMC guidance on Raising and Escalating concerns can be accessed at:

<http://www.nmc-uk.org/Documents/RaisingandEscalatingConcerns/Raising-and-escalating-concerns-guidance-A5.pdf>

Birmingham City University Faculty of Health has a Whistle blowing policy that is in the Student Handbook.

## **11 How Can Sign-off Mentors Contribute to the Development of a Programme?**

All of our programmes of study are constantly evolving and developing to meet the needs of the service, students and NMC. Changes and developments to programmes are always undertaken with consultation with our practice partners; however we are aware that Mentors may also wish to give feedback at other times. The Faculty of Health has a formal programme of quality assurance, which includes contributions from practice; details of this are given below.

If, at any time, Mentors wish to comment on the programme of study with which they are involved, they should contact the Programme Director of the relevant programme of study.

### **11.1 Boards of Studies**

Each programme has its own Board of Studies which meets at least twice a year. The membership of the Board includes the Programme Director, all teaching staff, at least one

student representative from each cohort, representatives from practice, including Mentors, and a representative from the library staff.

The purpose of the Board is to maintain the quality of the programme, develop policy to meet the needs of the programme in relation to, amongst other things, learning and teaching and assessment, and to maintain links with bodies, such as practice partners, relevant to the programme.

If Mentors wish to raise an issue at the Board of Studies, they should contact the Programme Director of the relevant programme who will be able to guide them through the process.

## **11.2 Quality Days**

Subject and Programme Quality Days were developed following the 2008 review within the Faculty's Process Redesign Project which noted that programmes and programme teams would benefit from protected time set aside from Examination Boards to discuss with students and practice partners module and programme quality monitoring and enhancement.

Subject Quality Coordinators (SQC) were identified to undertake the role of having overall responsibility for quality monitoring and enhancement of modules of study within the same subject area. The role of SQCs differs from Programme Directors (PDs) in this respect.

Mentors are regarded as playing a very important role in overseeing the quality of the student learning experience and the development of programmes to enhance knowledge and skills. Therefore you are encouraged to participate in these days whenever possible.

## **11.3 Healthcare Quality (Strategic) Group and Profession Specific Groups**

Currently NHS West Midlands Strategic Health Authority (SHA) receives funding directly from the Department of Health to fund educational provision across the West Midlands region. Education Commissioning for Quality (ECQ) is a process designed to ensure that the provision of healthcare education within NHS West Midlands is reviewed and quality assured, and is meeting the requirements of the SHA. Mechanisms are in place to improve and enhance the provision of all educational programmes, and also ensure exemplary best practice is shared.

The ECQ process is important, as it:

- Assures the SHA that we provide value for money;
- Highlights areas of concern with quality of education provision, and allows interventions to be put in place to ensure that all educational and placement providers are working towards agreed standards of provision;
- Demonstrates that the mechanisms are in place to improve and enhance the provision of all educational programmes;
- Allows for the formal identification of areas where educational provision can be enhanced beyond currently accepted minimum standards;
- Identifies areas of exemplary practice, and acts as a mechanism to capture and share this best practice.

### **11.3.1 Healthcare (Strategic) Quality Group (HQQ)**

Within this ECQ process, the strategic development and overarching operational management of the health and social care education provision given by Birmingham City University and its partners is the responsibility of the HQG. Membership is drawn from Faculty of Health staff, senior practice staff representing placement providers, and the SHA. The remit of the HQG is to develop on-going quality monitoring and enhancement systems and processes in order to implement policies for the advancement of the education and training of health and social care professionals, ensuring that students are Fit for Practice, Fit for Purpose and Fit for Award.



### **11.3.2 Profession Specific Groups (PSGs)**

In order to facilitate and ensure the attention to detail which is crucial in the ECQ process, the HQG established a structure whereby there are seven PSGs which meet regularly. The PSGs are comprised of Faculty of Health staff and practice partners. They feed the results of discussions and collaborations, as well as requests and decisions, into the agenda of the HQG. They also play a key role in disseminating concerns, good practice and quality monitoring tasks from the HQG to practice partners across professions and placement areas.

Key to the carrying out of this remit, commitment to the quality of training and support for Mentors is one of the major concerns of the HQG. Mentors can draw the attention of the HQG to any concerns, or other issues that they consider important, through their designated practice co-ordinator. Matters can be brought directly to the HQG or via the appropriate PSG.

### **11.4 Professional, Statutory and Regulatory Body Requirements**

This programme is governed by standards set by The Nursing and Midwifery Council (NMC) (2010). It is important that you are aware of the standards and circulars that relate to the programme of study where you are mentoring students.

## **12 What University Support and Guidance is Available to Students?**

### **12.1 Library and Learning Resources**

The University's libraries offer a range of printed and electronic resources and services to help students through their programme.

The Mary Seacole Library is one of the UK's largest specialist health education libraries. It is located at the City South campus and offers an extensive range of information and reference materials. Long opening hours mean that the library is available for use during the day, the evening and the weekend.

### **12.2 Student Services**

#### Counselling

This is a self-referral service that students can access, should they find themselves faced with personal problems or difficulties which threaten to affect their well-being or ability to study. Counsellors offer a one to one confidential service designed to help students to find ways of managing. There are occasional group sessions on issues such as anxiety management and self-help information and advice is available in the form of leaflets covering a wide range of problems such as stress, depression and eating disorders.

#### Mental Health Support

This is also a self-referral service that students can access. Our Faculty Mental Health Advisors focus on information giving and advice in relation to the assessment of academic support needs, and liaison within the University to ensure that these needs are met. They work closely with the Disability Advisors. Students can get help with practical support for a range of mental health issues.

#### Disability Support

Although students cannot be made to disclose any disabilities, at Birmingham City University we think it is important that students feel they can tell us about any disability they may have. We

regard disclosure of a disability as a positive thing, because once we are aware of a disability, we can try to support individual needs.

Disability Advisors are on hand to support any student with a disability and they are able to give specific guidance to teaching staff on alternative teaching methods and assessments if required. The personal assistance scheme recruits and trains students as non-medical support workers for disabled students, and can help students find professional support such as British Sign Language (BSL) Interpreters and Dyslexia Tutors.

The Faculty has produced a Dyslexia Tool Kit for use in placement. It can be accessed via this link:

<https://icity.bcu.ac.uk/Content/Document/Dyslexia-Toolkit>

### Health Care

There is a medical room at City South Campus and nurses are available without appointment to give advice on health related issues, immunisation, contraception and sexual health. They can also treat minor ailments and monitor existing conditions. Doctors hold surgeries at the medical rooms during term-time and appointments can be made at any Student Services Reception.

### Religious and Spiritual Support

The multi-faith Chaplaincy team is available 24 hours a day to offer welfare advice and support to students of all faiths or none. Mentors should be prepared to direct students to similar facilities in the placement area.

### Child Care

The University has one nursery, located at the City North Campus. They aim to provide a stimulating environment for children aged between 6 months and 5 years. The nursery offers a range of age-appropriate indoor and outdoor activities. The nursery operates during week days only, and is open from 7.30 am until 5.45 pm each day. The nursery is closed on Bank Holidays and for two weeks at the time of the Christmas break.

### Student Complaints Procedure

The University wants to know if students are unhappy about any aspect of their educational experience provided by Birmingham City University, and has procedures to use to raise issues when necessary. It is the policy of the University to resolve as quickly and fairly as possible any grievance a student may have about treatment by any staff member of the University or by the Students' Union.

If students are unhappy about any aspects of their experience provided by Birmingham City University, as a first step, they should raise the issues with their Personal Tutor. If the Personal Tutor is unable to resolve matters to their satisfaction, it may be appropriate to use the University's formal complaints procedure. Students can get details of the formal procedure from the Director of Faculty Administration. Before starting the formal process, they are strongly advised to contact the Advice Centre of the Students' Union who can discuss their case with them and advise on the processes involved in making a complaint.

## **13 Conclusion**

We hope that this Mentors Handbook has provided you with the opportunity to understand your role and responsibilities so that you can undertake your role confidently and competently.

We also hope that it has provided you with sufficient information about University and Faculty policies, guidelines and procedures to enable you to understand the impact that they have on placement issues and your role as a Mentor.

If you would like to discuss any further issues in relation to your role and responsibility please contact either the Programme Director or the Department of Practice Learning.

## Appendix 1



### Guidelines for “Mentor” Roles and Responsibilities

#### Introduction

There is no standardised terminology applied to mentoring because the definition depends upon why, where, and with whom it is being used. Professional, Statutory and Regulatory bodies (PSRBs) use terminology specific to each profession. However, what all professions have in common is the commitment to teach, support, coach, facilitate, assess, and supervise students in practice, providing professional role modelling to ensure that they are fit for practice. This is supported by models advocating self-directed, evidence-based and problem-based learning.

A multi-professional working group of academic staff and practice partners has considered the various definitions used, and has agreed that there needs to be a clear role descriptor and guidance, with an agreed title, applied to this role. Therefore the term “Mentor” will be used within the Faculty of Health unless there is a specific mandatory requirement from a PSRB.

A mentor is a registrant who has successfully completed an approved preparation course / programme that is required by their professional body and achieved the knowledge, skills and competence to undertake the assessment of a student’s fitness for practice. Mentors are accountable for the decisions made about a student’s competence and must have “due regard”.<sup>1</sup>

However, where the Mentor role is a standard set by a professional body, a Mentor who applies due regard must be on the same part or sub-part of a professional register and working in the same field of practice as the student and has ultimate responsibility for signing off proficiencies / standards / competencies.

It is important that Mentors are there to support students as well as to ensure professional standards are maintained and evidenced by students.

#### The conduct of meetings

Mentors and students should expect to be treated with courtesy and mutual respect.

- The Mentor and the student should ensure that any disruptions are minimal throughout any meeting (e.g. not answering phones or emails).
- Mentors should be compassionate, tactful, approachable and consistent in their dealings with students. Students should feel valued and it is important to remember that a student may have different requirements from one meeting to the next and also different requirements from those of their peers.

#### Confidentiality

Specific matters raised in a student-mentor meeting are confidential.

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<sup>1</sup> Due Regard: The Faculty of Health defines this to mean that the Mentor has the skills required to support the placement learning outcomes and assess the component skills related to those outcomes; has the experience and expertise to supervise and monitor the student’s progress throughout the placement period; and, where relevant, is from the same part of the register and field of practice as the student.

- Mentors must inform students that the confidential nature of the meeting may be breached if the student or the mentor wishes a third party to be present (i.e. if the student or the mentor needs additional support or advice from a university tutor, Placement Practice Manager (PPM), union representative or other individual). Third parties may attend the meeting only if agreed by both parties.
- Mentors must inform students that although they will always endeavour to place the best interests of the student first, there may be rare occasions when they believe that the content of the discussion is detrimental to the student's health and well being or public safety and should be taken beyond the meeting. In such circumstances, the mentor must make clear to the student the nature of any confidentiality being offered. If confidentiality must be breached, advice should be sought from the relevant staff in the placement and / or University.
- A record of all formal meetings, including telephone and electronic communication should be kept within the student's practice documentation. The student is entitled to request a copy of any record, if this is not already in their practice documentation.
- Enquiries from parents and other family members in relation to students need to be referred to the University.

### **Additional support, advice and guidance**

Mentors should be prepared to assist students in seeking guidance from the appropriate source(s) on a range of pastoral matters. These matters may include homesickness, loneliness, relationship issues, bullying, bereavement, health issues, concerns relating to academic ability, and financial issues.

Where the mentor considers it appropriate, they may advise that the student seeks additional support from individuals or support services more appropriate to the specific requirements of the student, which are available in the student handbook.

Students may approach their mentors to request that they support them at a University Committee or Panel (e.g. Extenuating Circumstances Committees). It is perfectly acceptable for a mentor to support their student in this way providing there is no conflict of interest (i.e. if the mentor is already involved in the issue concerned).

### **Professional Body Requirements**

Practitioners who undertake the role of Mentor for students on programmes approved by PSRBs (such as the Nursing and Midwifery Council, General Social Care Council and Health Professions Council) must fulfill the following criteria:

- Have developed their knowledge, skills and competence beyond registration, and be registered for a minimum of one year, or in accordance with their professional body requirements.
- Have the ability to select, support and assess a range of learning opportunities in their area of practice for students undertaking programmes approved by professional, statutory or regulatory bodies.
- Be able to support learning in inter-professional environments, selecting and supporting a range of learning opportunities for students from other professions, and supporting the assessment of other professionals who are under the overall supervision of an experienced assessor from that profession.
- Be able to make judgments about achieving competence / proficiency / standards by students undertaking a programme of study.
- Adhere to the requirements where a professional, statutory or regulatory body has approved a programme of study, and where there is a mandatory requirement for mentors to be on the same part of the register and in the same field of practice as that which the student intends to enter.

- Be accountable for making decisions about a student's fitness for practice in accordance with professional, statutory and regulatory body Codes of Practice and Conduct.

**NMC requirements and standards:** (<http://www.nmc-uk.org/>)

For some programmes there is a requirement for Mentors to sign off proficiency at the end of a programme confirming eligibility to enter the professional register (Sign off Mentor).

It is a Nursing and Midwifery Council requirement that all midwife Mentors must have met the additional criteria for Sign off Mentor. This also applies to Mentors who sign off the final placement document of a pre-registration student nurse. Practice Teachers have the responsibility for signing off Specialist Community Public Health Nurse Students. NMC Sign off Mentors must also satisfy the requirement for due regard.

### **Establishing effective working relationships**

Mentors will have effective professional and inter professional working relationships to support learning for students whose name will be entered on to a professional register or where placement learning is part of an academic programme.

Mentors will:

- Organise and coordinate students' day to day learning opportunities and activities in practice.
- Have knowledge and understanding of factors that influence how students integrate into practice settings, and provide ongoing and constructive support to facilitate transition from one learning environment to another.
- Supervise students in learning situations and provide them with constructive feedback on their achievements.
- Engage with students to apply and monitor the learning outcomes provided to the particular practice setting.
- Assess a student's total performance – including skills, knowledge applied to practice, values, attitudes and behaviours relevant to the stage of the programme.
- Liaise with others where relevant (e.g. Mentors, Sign-off Mentors, Practice Facilitators, Practice Placement Managers, Practice Teachers, Personal Tutors, Programme Directors and the Department of Practice Learning personnel) to provide feedback, identify any concerns about a student's performance and implement an agreed action plan as appropriate.

### **Facilitation of learning**

Mentors will facilitate students' learning in practice by:

- Using their knowledge of the student's stage of learning to select appropriate learning opportunities to meet their individual needs.
- Facilitating the selection of appropriate learning strategies to integrate learning from practice and academic experiences.
- Supporting students in critically reflecting upon their learning experiences in order to enhance future learning.

### **Assessment and Accountability**

Mentors will undertake assessment of students' practice and be accountable for the decisions made by:

- Having an in-depth knowledge and understanding of their accountability at every stage of a student's programme of learning. Be accountable to the Professional Body for the decision they must make to pass or fail a student when assessing proficiency / standards / competency requirements.

- Fostering professional growth, personal development and accountability through support of students in practice.
- Demonstrating a breadth of understanding of assessment strategies and the ability to contribute to the total assessment process as part of the learning and teaching team.
- Ensuring they meet with students as defined in the students' practice learning documents, which may be initial, midway and final assessments.
- Providing constructive feedback to students and assist them in identifying future learning needs and actions.
- Managing failing students according to due process (which may include the production of co-operative action planning with other team members) so that they may enhance their performance and capabilities for safe and effective practice or be able to understand their failure and the implications of this for their future practice.
- Being accountable for confirming that students have met, or not met, the professional body standards / competencies / proficiencies as required in practice.
- Maintaining contemporaneous and factual records of each student's achievements in practice and signing their practice assessment / attendance documentation to indicate that they have met the programme and professional body requirements and are fit for practice.

### Evaluation of learning

Mentors will:

- Contribute to the evaluation of student learning and assessment experiences – proposing any aspects for change resulting from the evaluation.
- Participate in self evaluation to facilitate their personal development, and contribute to the development of peers.

### Context of practice

In order for students to gain a breadth of experience whilst in practice, identified learning opportunities outside the immediate placement are encouraged so they may gain valuable insights into different aspects of voluntary, statutory and regulatory work as well as inter-professional learning opportunities.

The facilitation of such learning opportunities will be the responsibility of the Mentor, observing due regard where required.

To achieve this, Mentors will:

- Contribute to the development of a safe environment in which efficient care is achieved, an effective learning environment is maintained, and effective practice is fostered, implemented, evaluated and disseminated.
- Set and maintain professional boundaries that are sufficiently flexible to enable inter- professional care and pathways.
- Support students in identifying ways in which policy and legislation impacts upon practice.
- Cases of students reporting, or being reported for, sub-standard practice will be dealt with through the appropriate placement and University procedures. Mentors should be supportive of students throughout the process.

### Evidence-based practice

To contribute to the establishment and maintenance of evidence-based practice in the practice placement area, mentors will:

- Identify and apply research and evidence-based practice to their area of practice.
- Contribute to strategies to increase or review the evidence-base used to support practice.
- Support students in applying and using an evidence base to their own practice.

### **Continuing Professional Development**

Mentors are required to update their knowledge and skills annually where required by a professional body. This can be undertaken in a variety of ways but must meet the requirements of the relevant PSRB e.g. NMC registrants are required to have a face-to-face update annually.

- Group Update – by attending a planned session organized by the Department of Practice Learning
- Group Update – by attending a planned update session at work, organized by the PPM/Practice education support staff.
- Update via School of Professional Practice meetings, Programme Team meetings or Subject / Programme Quality Days.
- Using material from the Department of Practice Learning Newsletter to demonstrate updating.
- Update On Line.
- Update: one to one – For some staff, these updates may be preferable dependent on their needs and the needs of the placement. This can be discussed with the Practice Placement Manager or Practice education support staff.

The Faculty of Health, in agreement with practice partners, recommends face to face delivery on an annual basis, to ensure that Mentors are familiar with changes and developments in the programmes of study where they are supporting students.

Department of Practice Learning / Quality Office  
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