University of Surrey - School of Health and Social Care and
Surrey and West Sussex
Practice Placement Providers

Practice Placement Education Audit Guidelines

A step by step guide to the Practice Placement Education Audit Process

July 2013
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INTRODUCTION:

Practice placement education audits are required for all National Health Service (NHS) placements and other placements where students gain experience of inter-professional working in health and social care. For the majority of the placements audits are completed annually.

This documentation and the audit process have been developed in partnership between the Higher Education Institution (HEI) and the Practice Placement Provider organisations.

Practice experience is of prime importance in the educational preparation of all students of health and social care. The provision of high quality practice placements is seen as a partnership responsibility between providers of care and the HEI. This is achieved through a collaborative approach to auditing the practice placements using the principles, standards and benchmarks provided by the professional regulatory bodies. The process has been informed by the Skills for Health Enhancing Quality in Partnership (EQuiP) standards, the Nursing and Midwifery Council (NMC) and the Health and Care Professions Council (HCPC). This document was developed in discussion with commissioners, practice placement providers, higher educational organisations, learners, service users and other key stakeholders.

The audit is a self assessment process at both placement and organisational level and is quality assured through ongoing monitoring to ensure validity.

One copy of the document should remain within the placement area and a second copy should be forwarded to the Educational Lead/Learning Environment Lead/Practice Learning Facilitator within the provider organisation to inform the Organisation Audit process.

NB: The audit documentation will be sent to you electronically. You are encouraged to complete the audit document electronically as this will enable you to amend the document from year to year rather than starting from scratch, which may save valuable staff time.

SCOPE:

This guidance will support the audit process for the following organisations:

- Ashford and St Peters Hospitals NHS Foundation Trust
- Central Surrey Health
- First Community Health and Care
- Frimley Park Hospital NHS Foundation Trust
- Royal Surrey County Hospital NHS Foundation Trust
- South East Coast Ambulance Service NHS Foundation Trust
- Surrey and Borders Partnership NHS Foundation Trust
- Surrey and Sussex Healthcare NHS Trust
- Sussex Community NHS Trust
- Sussex Partnership NHS Foundation Trust
- Virgin Care
- Western Sussex Hospitals NHS Trust
- Other providers of placements within Surrey and West Sussex e.g. Nursing Homes, Hospices and GP premises
AIM:

The aim of this guidance is to assist and support the individual placement areas to complete the educational audit process and identify appropriate forms of evidence for the self assessment.

GLOSSARY OF TERMS:

Mentor – Throughout this document the term Mentor is used to describe a practitioner who has undertaken a recognised period of education and training to enable them to support a learner through a programme of study or period of professional preparation. This is a title generally used in nursing and midwifery.

Practice Placement Educator, Clinical Educator and Practice Educator - refers to professionals in similar roles within Allied Health Professionals

Practice Liaison Teacher/Link Tutor - a member of the University staff who has a specific responsibility for a number of areas where students are in placement. Their primary responsibility is to establish and maintain a relationship with colleagues in the practice learning environment and ensure clear lines of communication in respect of any student issues.

Learning Environment Lead/Facilitator / Placement Learning Facilitator - (LEL/LEF, PLF) - the role of the LEL/LEF /PLF is to work with the HEI and the provider organisations to ensure the quality of practice placements for all learners. He/she maintains a database of information on mentors and educators.

ROLES and RESPONSIBILITIES:

Roles and responsibilities of the University:

- Forward audit documentation to the Educational Lead and Learning Environment Lead/Practice Learning Facilitator within each provider organisation
- Convene a meeting within the provider organisation in November/December to discuss the audit outcomes and agree a development plan
- Consider the outcome of the audit process in collaboration with the provider organisation.

Roles and responsibilities of the Educational Leads within Provider Organisations:

- Ensure that individual Practice Placement Audit document is distributed to the placement areas in a timely manner
- Ensure that the documentation is completed at ward/ placement level. (This process may be supported by the LEL/PLF)
- Review the documentation from the placements, summarise the main themes and identify any areas of development for the organisation with the Learning Environment Lead/Practice Learning Facilitator
- Complete the Organisation Audit tool
- Contribute to the organisational meeting in November/December and jointly agree audit outcomes and development plan.
Roles and responsibilities of team leaders/ward managers or nominated individuals:

- Ensure that the self assessment Practice Placement Audit is completed annually and returned to the Learning Environment Lead/Practice Learning Facilitator within the time stated – *this should be done electronically*
- Ensure that evidence of achievement of standards is available e.g. placement orientation pack, guide to learning opportunities, off duty rotas, student evaluations
- Have available information regarding active mentors, sign off mentors and practice teachers

Roles and responsibilities of the Learning Environment Lead / Practice Learning Facilitator:

- Support the audit process where required
- Work with mentors/managers/the University to identify development needs highlighted through the audit process and effect improvements in quality, capacity and capability within the practice learning environment
- Maintain an active database of mentors, sign off mentors and practice teachers within their organisation.

Roles and responsibilities of the student:

- Complete practice evaluations of the placements as part of the module evaluation process to inform the audit.

GENERAL GUIDANCE FOR COMPLETION OF PRACTICE PLACEMENT AUDIT DOCUMENT

SECTION A: This section provides the essential information for the University placements database and refers to the focus of the service delivery. It will guide the placements officers in the allocation of placements for students to ensure a varied experience.

Maximum number of students - this maximum number of students includes all students undertaking placement experience as part of an approved professional programme provided by a HEI. This will include professional preparation students and those undertaking Return to Practice and Overseas Nurses programmes.

NB. ANY PROPOSED CHANGES TO STUDENT NUMBERS FROM THE PREVIOUS AUDIT MUST BE DISCUSSED WITH THE LEARNING ENVIRONMENT/EDUCATION LEAD FOR THE ORGANISATION.

SECTION B: Access to the learning environment - this section provides a more accurate picture of the learners and assessment activity within the practice area. It distinguishes between learners who access the environment for observation only and those who must be assessed.

SECTION C: Review of previous development plan – this section should indicate the areas that were highlighted as requiring development in the last audit or during the year and the actions undertaken.
SECTION D: CORE STANDARDS

The following seven sections have been mapped against the NMC, HCPC and EQuIP standards as indicated by the numbers in brackets.

You need to be confident that you are able to access the evidence that you identify if required and that it demonstrates your ability to meet the standard.

You are required to rate each section using the “red, amber, green” (RAG) traffic light system.

1. **VALUES:**
   There will be evidence to show a commitment to safety of the patients, service users, carers, staff and students and a commitment to promoting diversity, inclusion and equality of opportunity for all.

   The range of evidence to support this standard might include:
   - Policies
   - Essence of Care activity
   - Models of care
   - Care and management plans demonstrating individualised care
   - Records of up to date mandatory training
   - Orientation pack to include fire safety
   - Access to appropriate support systems e.g. link tutor
   - Directory of resources
   - Risk assessment documentation
   - Incident reporting mechanisms
   - National Health Service Litigation Authority (HSLA) standards & ratings
   - Health and Safety Executive inspection reports
   - Examples of managing pregnancy or allergies in the workplace
   - Evidence of learning through untoward incident
   - Access to procedure manuals
   - Audit reports, home inspection reports

2. **EVALUATING, MAINTAINING AND IMPROVING QUALITY:**
   There will need to be evidence here to support the declaration of quality in placement.

   The range of evidence to support this standard might include:
   - Student evaluations – this form an integral part of the ongoing evaluation process and should be provided x3 times per year
   - A development plan with a record of actions taken following a clinical audit.
   - How audit outcomes are disseminated to teams e.g. minutes of meetings
   - Student evaluations demonstrating whole systems learning

3. **MANAGEMENT, ORGANISATION AND USE OF RESOURCES:**
   This section requires evidence that programmes are effectively planned and managed with adequate resources so that learning is maximised, governance arrangements are transparent and the integrity of learners and resources is established and maintained.
The range of evidence to support this standard might include:
- Evidence of staff CPD activity and learning opportunities available to them.
- Prepared teaching and learning materials
- Lists of activities for the student to engage in
- Information about treatments and care delivered/care pathways in the work environment
- Examples of mentors having time to carry out teaching and assessing during practice time
- Access to up to date research and books etc.
- Access to a quiet area for students to study
- Mentor portfolios and evidence current NMC registration

4. **LEARNING AND TEACHING:**
This section will require evidence of supporting processes and learning, assessment and teaching methods.

The range of evidence to support this standard might include:
- Up to date placement profile
- Learning opportunities which reflect student learning outcomes e.g. interprofessional learning - records of case conferences, multi disciplinary meeting notes,
- Induction package and orientation plan
- Duty rotas reflecting protected learning time and time working with mentor

5. **STUDENT PROGRESSION AND ACHIEVEMENT:**
This section is to show that students are selected appropriately and the programme of learning supports student selection, progression and achievements to meet the needs of commissioners, employers and individual funders and that outputs

The range of evidence to support this standard might include:
- Action plans demonstrating management of poorly performing students.
- A list of current mentors that meet the regulatory body requirements
- Knowledge and skills outlines for staff members
- Current and past lists of students and their named mentors

6. **STUDENT/LEARNER SUPPORT:**
This section requires evidence that the learning experience meets the needs of the student/learner in all settings.

The range of evidence to support this standard might include:
- Placement profile identifying learning opportunities
- Duty rota showing named mentor working patterns
- Prepared teaching materials for students
- Documentation regarding formative and summative assessment of students.
- Student evaluations and informal and formal feedback e.g. plaudits
- Feedback from HEI
7. **ASSESSMENT:**
This section requires that assessment processes are transparent, equitable and reliable so that successful completion of a programme ensures fitness for purpose in terms of national workforce competencies, fitness for practice in terms of regulatory body requirements and fitness for award.

The range of evidence to support this standard might include:
- Documentation of team approach to student assessment /programme of learning
- Protected time for student to reflect on own practice
- Evidence of action plan or process when student failing to meet assessment criteria
- Identifiable assessment points for students and mentors during the period of placement
- Guidance for mentors and sign-off mentors

**SECTION E: RECOMMENDATIONS AND AREAS FOR DEVELOPMENT**
The areas for development are those identified as requiring attention at the time of the audit or at any time during the year. This constitutes a plan of action.

***remember this is a living document and may be added to or amended at anytime during the audit cycle

Examples of good practice: This section gives space for examples of good practice to be documented. This might include specialist or unusual practice that would provide a good insight opportunity for learners.

**SECTION F: GENERAL COMMENTS**
This is an opportunity for general comments to be documented; this could be about the practice area itself.
**LIST OF CONTACTS:**

The following is a list of Learning Environment Leads/Facilitators that can be contacted if you have any queries.

<table>
<thead>
<tr>
<th>Name</th>
<th>Trust</th>
<th>Contact Details</th>
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<tbody>
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Thank you for your support and contribution to this work.

Please see the flow chart on the following page which outlines the placement education audit process.
1. University sends Practice Audit documentation to Educational Lead/LEL/PLF of the Placement Provider Organisation 3rd July 2013

2. Educational Lead/LEL/PLF distributes individual placement documentation. Completion of documentation is co-ordinated by Educational Lead. Process will vary across different placement provider organisations

3. Individual Practice Placement Audit document completed at ward manager/team leader level. Process may be supported by LEL/PLF or nominated individual

4. Each individual placement area returns completed document to Educational Lead/ LEL/PLF. Any proposed variation in students’ numbers from previous audit MUST be discussed with LEL/PLF or Educational Lead.

5. Educational Lead summarises main themes identified and any areas for development, then completes the Organisation Audit document

6. Organisation Audit Meeting (November/December 2013) to include: Educational Lead Learning Environment Lead (LEL) or Practice Learning Facilitator (PLF) Representation from individual placements University representatives

7. Overarching strategy developed to reflect emerging themes from audit process for organisation. Action plan jointly agreed to support capacity and capability of the organisation, to support student learning and meet professional standards

8. Organisation Audit document presented to Trust/Organisation Board. Practice Audit meeting may be held end March 2014 within the placement provider organisation to review progress against the Development Plan

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