



**CITY UNIVERSITY
LONDON**

School of Community and Health Sciences

Guidelines, Policies and Procedures for Practice Placements:

**Pre-Registration Midwifery and
Nursing Programmes**



Please note that in the interests of brevity throughout this document we have used the term 'patient' to indicate people who use health care services (whether they are a client, a service user or a child).

These Guidelines are not exhaustive and will be regularly reviewed and updated in response to national, statutory and local agendas. The latest version of these Guidelines will supersede all previous versions and will therefore apply to all students.

A copy of these Guidelines is also available on the City University website at:
<http://www.city.ac.uk/sonm/practice-education/>

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Welcome to this new edition of the Guidelines, Policies and Procedures for Midwifery and Nursing students in practice placements. They have been designed for students and practitioners to tell you about the policies and procedures governing each students' experience in practice. This is the fourth edition. The Guidelines are not exhaustive and so you may find some areas have yet to be addressed and you will also find some information that has been included since the earlier edition.

The aim of the Guidelines is to promote a closer working partnership between all the people involved in pre-registration students' education and preparation. So the Guidelines are focused on factors affecting students' placement experiences. Do skim read them when you first receive and then you will have a sense of the contents and so make it easier to find a particular section when you need additional information. You will also find a copy of this version of the Guidelines, Policies and Procedures on the Policies section of the Practice Education web site: www.city.ac.uk/sonm/practice-education

THE PLACEMENT EXPERIENCE

SECTION 1: The Placement Experience

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1. What is a Placement Experience?

Placement experiences constitute 50% of each student's programme. It is a vital element towards promoting understanding and development of professional craft knowledge and so helps you to meet the requirements of the professional statutory organisation, the Nursing and Midwifery Council. These are that you are Fit for Practice, Fit for Purpose and Fit for Award by the time you complete your programme. Learning is seen to be incremental and so your development takes place in stages over a period of time. Placements can be anywhere where patients, service users and your carers receive health care support and guidance. The aim of every placement in each student's programme is to provide an educationally sound and relevant professional experience in patient care delivery and management.

Many students enter their placement with trepidation and are anxious about what they will face, and how to relate to patients and their carers. Students are keen to become part of the clinical team and to contribute to the work. Your success in achieving this is related to the quality of partnership you and your mentor develop. Sponsorship to the practice environment is essential to your success and is largely within the mentor's control. Of course it is also essential that each of you takes responsibility for preparing for the placement and for being willing to become part of the team. The successful partnership between the mentor and you depends on your willingness to demonstrate interest and commitment in health care practice and education.

While you are supernumerary to the rostered workforce it is anticipated that you will always work and learn under the supervision of registered practitioners. This involves working alongside clinical colleagues to observe quality care and learning from experienced practitioners. Working together allows practitioners to monitor your progress, to identify, plan and respond to your learning needs on a day-by-day basis. For your part you must take responsibility for identifying the learning opportunities available, for evaluating your own progress and to monitor your learning needs and to seek appropriate help. Equally important is the recognition that you are both an adult and a learner and so face the challenge of having your performance evaluated and critiqued, which can be an uncomfortable experience.

Learning professional craft knowledge is not only through observation and practice; you need time to investigate your practice, to study your patients and your carers, to discuss your learning with experienced colleagues and to formulate and reformulate your understanding through writing, discussion and reading.

In summary, each placement provides you with educational opportunities to develop your professional craft knowledge through observing good practice, engaging in good practice alongside your mentor (and other practitioners) and practising under the more distant supervision of your mentor or another practitioner.

2. Policies and Procedures Relating to Placement Experiences

Calculations of future workforce needs influence the number of pre-registration students commissioned from the School of Community and Health Sciences by the NHS London through the Workforce Development Directive (WDD). Every year each Trust undertakes workforce planning assessments and forecasts. This information is then used in the 'Local Delivery Plan' to indicate the number of nurses and midwives required to ensure that the services provided can be maintained or developed. These workforce planning forecasts are then interpreted by the WDD to establish the numbers of student nurses and midwives individual Trusts will need to commission for training each year. These students will spend the majority of their placements in a small circuit of partnership health care providers known as Communities of Practice (CoP). These consist of, for example, placements in primary, secondary and tertiary care settings. The aim of these practice placements is to increase each student's sense of identity and familiarity with your Community of Practice and so make your placements less daunting and also to help students develop an understanding of a patient's health care pathway. Another aim of being attached to a Community of Practice is to help students think about where they wish to work once qualified and for the placement partners (NHS Trusts, independent and voluntary sector organisations) to feel a greater affiliation with their students. You can find more about these Communities of Practice by linking into www.city.ac.uk/sonm/practice_education

3. Communication Networks

Communication networks have been well established for most placements with a range of academic and placement-based staff charged with the responsibility for supporting you in practice. Placements normally have a link lecturer from the School of Community and Health Sciences who is in regular contact with the setting and has responsibility for supporting both the clinical staff and students from an academic perspective. In addition there are Lecturers in Practice for Nursing and Midwifery students with specific responsibility for monitoring placements and your experiences.

Most placement partners have a member of staff who has specific responsibility for supporting clinical staff and students in their placements and to ensure there are sufficient placements. Part of their role is to help with mentor preparation and support. They work in close liaison with the university staff. In NHS placements these key members of staff are known as Practice Education Facilitators (PEFs) or Practice Experience Managers (PEMs).

Each Community of Practice has a forum that provides an opportunity for all educators and practitioners from all health care disciplines to meet regularly and to manage the needs of mentors and students at a local level.

4. Seeking Support

Occasionally either students or mentors encounter unexpected problems and the generic Communication Network chart on the following pages provides a route map for obtaining help or advice. You will find a version of this Communication Network chart for your Community of Practice in your placement. Whether you are a student, a mentor or a practitioner you are encouraged to use this Communication Network chart as a guide to obtaining the help you need to resolve the problem at the earliest stage. Please also refer to your Community of Practice website for more information.

5. Student Support in Practice Communication Pathway

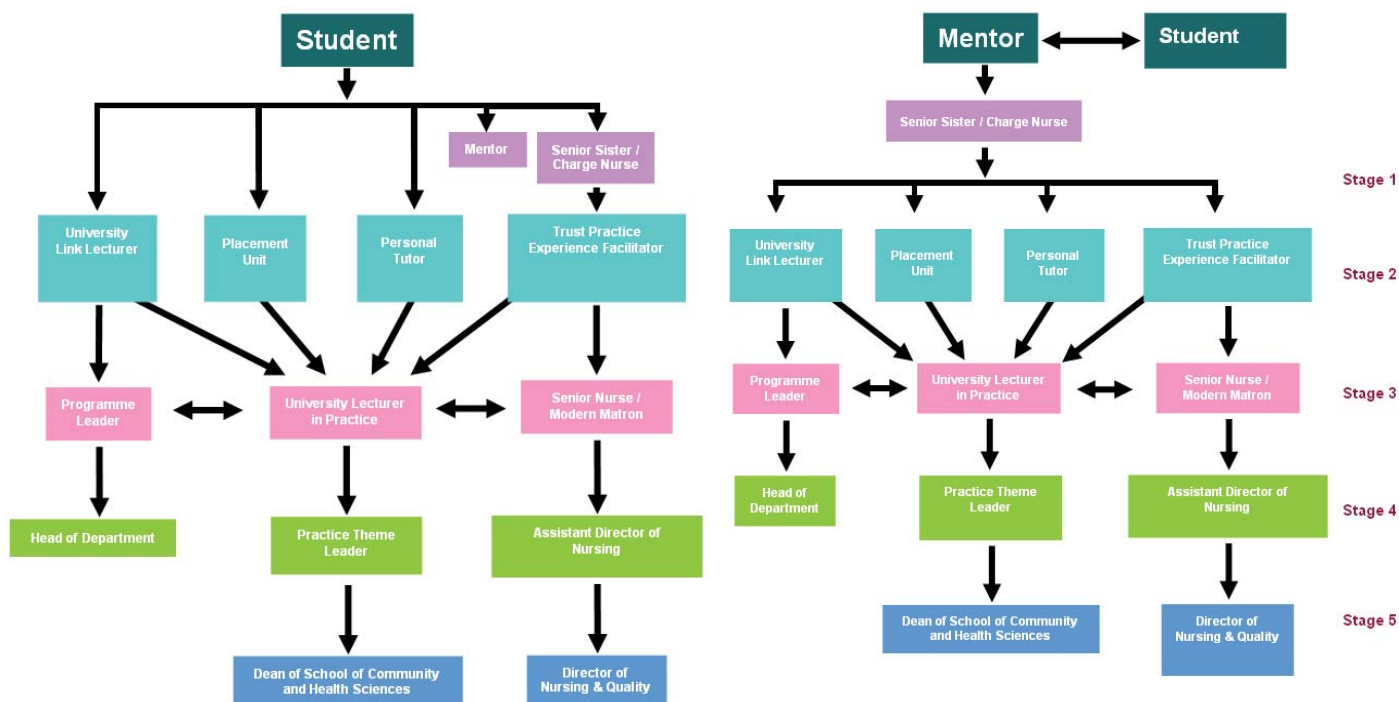
We are conscious that there may be times when either a student or their mentor needs additional support in order to resolve a difficulty arising from their work together. The number of people who are available can be confusing and this may lead to communication being lost or ineffectively dealt with. In order to help you find the best person to advise and support you, we have designed this communication pathway flow chart.

We strongly advise the student or the mentor to contact the practice area **Link Lecturer** in the first place. This person should be able to deal with your enquiry but if not, he or she will take further advice or pass your query to the person who can deal with it.

If the Link Lecturer is not available, then you should contact either the Practice Experience Facilitator for your Trust, a member of the Practice Education Team in the School of Community and Health Sciences, or the relevant Personal Tutor, depending upon the nature of your query.

The Communication Pathway identifies the stage at which people should be contacted

Communication Pathway if the Mentor identifies a problem with a student that he / she cannot resolve



SUPPORTING & FACILITATING LEARNING IN PRACTICE

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1. Supporting and Facilitating Learning in Practice – Being Supernumerary

This section describes what is meant by supernumerary status and the purpose of placement experiences. It provides guidance about the kinds of educational experiences you can expect in placements and how placements are selected. It also describes different educational roles that are available to provide support, and specifically the role of a mentor, the placement link lecturer and the Personal Tutor.

As a Midwifery or Nursing student you have to meet the requirements laid down by the European Union and endorsed by the Nursing and Midwifery Council of the United Kingdom. A key requirement is that you undertake 2300 hours of placement experience. This constitutes 50% of your pre-registration programme. Evidence of completing this requirement has to be provided when you apply for professional registration, and over the course of your programme you will have to ensure that your placement hours are accurately recorded in your Record of Achievement Portfolio. If you are unable to attend any part of your placement and so are unable to complete the required number of prescribed hours you will have to make up the lost hours at an agreed time. This may mean that your professional registration will be delayed until these hours of clinical experience have been completed successfully.

2. Supernumerary Status

Whilst in placement you have supernumerary status. This means that you will not be counted on the rota as part of the placement team and but will be considered as additional to the team. However, it is good practice for you to be included on the duty rota with your mentor or associate mentor. This helps placement staff to be aware of who the students are in the placement area and who is responsible for supervising your learning during each shift. It also provides a record of practitioners in the placement area.

Being supernumerary provides you with opportunities to observe good practice and negotiate learning experiences that match your identified needs. Learning to become effective practitioners necessitates direct participation in provision of health care to a wide range of patients in different settings. Your learning outcomes for each placement require you to provide patient care that is commensurate with your capability and your learning plan. In addition, a learning plan (or learning contract) will include visits to related areas that promote understanding of patient care needs and inter-professional team working. Supernumerary status enables you to engage in these experiences without compromising the workforce or patient care.

3. Assessing Capability and Planning Learning

The prime concern for every student's practice experience is to facilitate and maximise learning. Effective placement supervision through mentorship is the most helpful and one of the most educational resources for ensuring that you develop your professional knowledge. Good supervision is also essential for ensuring the safety of patients and your carers. Whilst you are in placement you become the professional responsibility of the clinical team and thus it is important that an accurate record of your progress is made regularly and that this record is based on observed assessments of your capability. Normally entries in your Record of Achievement Portfolio are made at the beginning, middle and end of each placement. But they may be made more frequently depending upon your observed capability and progress. On the basis of these observations of your capability, an action plan should be drawn up that reflects your identified and agreed learning needs. This action plan forms the basis for future supervision, assessment and learning support. To be effective you need to make sure that both you and your mentor regularly review and update your action plan, say every two weeks, so that it really does reflect your progress and the support that you need to complete your placement successfully. By closely monitoring and recording your progress in this way you can feel confident that you are developing your professional knowledge at an appropriate rate and that your capacity to provide effective and safe patient care is monitored and extended. It also ensures that if by any chance you are not making the expected progress, this is identified at an early stage and remedial action can be planned, documented and provided.

4. Learning and Working Together in Practice

Professional requirements (DoH/ENB 2001, DoH Skills for Health 2006, NMC 2006) include standards for the nature of your support in placements. This includes 'having a mentor/assessor who is an appropriately qualified and experienced member of staff to support each achievement of your learning outcomes for the programme and reflection on your practice' (NMC 2006). Placement providers should nominate one principal mentor to take responsibility for you. This person may be supported by one or more additional nominated members of the clinical team designated to provide supplementary mentorship.

Having a friendly and welcoming mentor who is willing to support you is absolutely crucial to your progress in your placement and affects your ability to settle into the clinical community of practitioners. When effective mentorship is lacking, students often feel alienated and any subsequent problems can frequently be attributed to this lack of sponsorship.



An important factor in effective mentor-student relationships is the social and professional opportunity to work alongside each other. Having shift patterns that match with your mentor or associate mentor, ensures effective supervision, safe patient care and ongoing assessment of your learning needs. The matched shifts must be for a minimum of 40% of your placement time or at least two shifts a week. All your other shift times must be planned so that you always have an identified associate mentor to provide you with professional and personal support and supervision.

You will read later on in these Guidelines, Policies and Procedures in Section 3, that we believe all students need some time to adapt to the shift patterns, to learn how to juggle working with learning and having a home life. We also believe it is essential that you have the opportunity to learn and work during the busiest times of your patients' day, so that you can develop the necessary professional knowledge. It is for this reason that the policy stipulates that only second and third year students can work night duty, and why only third year students can work long day shifts. As you are in your placement for educational reasons it is essential for you to observe and participate in supporting patients throughout your health care pathway. This must include:

- i) working alongside experienced practitioners so you can learn professional skills
- ii) having time to practise your learning by taking responsibility for managing and delivering care to an appropriate case load of patients under supervision
- iii) having opportunities to plan and review your work with the patient's key practitioner
- iv) undertaking visits away from the main placement setting to promote understanding of the patient and carer's experiences of health care provision
- v) observing and working alongside health and social care practitioners from a range of professional orientations
- vi) having time to plan your learning and working with support from your mentor or associate mentor and to debrief from your practice experiences.

These strategies are designed to ensure patient care has been conducted safely and effectively. They are also designed to support your professional development through assessment and teaching, and so help you to accommodate new knowledge and further identify your learning needs.

5. Developing Professional Knowledge

Your placement experiences are intended to help you learn how to:

- recognise the salience of your theoretical sessions and what you have learned from reading
- use both formal (theory) and practical knowledge when caring for people
- manage your time effectively
- become part of each inter-professional team of practitioners you meet during your placements.

The important role of each placement mentor and associate mentor is to help you with these learning activities. But you also have a responsibility to learn from practice by reading and reflecting on your activities, (see the Foundation Course Toolkit for some helpful activities).

At the beginning of your placement it is essential that you are assessed by your mentor and you discuss and agree an action plan for your learning. This is the basis for your placement experience. Your mentor always has the best interests of their patients in mind, indeed they are required by the Nursing and Midwifery Council Code of Professional Conduct, Performance and Ethics, to ensure that no harm comes to their patients. So do not feel upset if your mentor insists that you are supervised until s/he is satisfied that you are safe to work under distant supervision. Once assessed as safe to deliver the prescribed care, you can be allowed to care for an identified group of patients whose level of dependency matches your identified level of capability.

Learning in practice is therefore a mixture of collaborative working and learning followed by independent, supervised working and learning. Both kinds of activities must be supplemented by regular assessment, planning and evaluation. These sessions are designed to further enhance your understanding of professional practice and are also helpful as debriefing sessions, and provide an opportunity for you to demonstrate how much you have learned or to ask questions. The learning outcomes for each placement and for your programme provide a framework for identifying your required level of performance and achievement.

Midwifery programmes are designed as a continuous process and do not have the same kinds of milestones that are in the nursing programmes. The first year of the nursing pre-registration programme is designed to help students develop essential nursing skills. These skills are necessary to meet the NMC requirements for progression to the Branch programme and are known as Outcomes for entry to the Branch. The second and third year of the nursing (Branch) programme is designed to help students to develop the specific professional knowledge to become 'Fit for Practice' and 'Fit for Purpose' as registered mental health, children's or adult nurses, and 'Fit for the Award.' In the modules of 'Fundamental Aspects of Care' (FACT) you will have received both practical and theoretical preparation in conducting core skills such as communication, observation and assessment skills and practical skills such as moving and handling, taking physical observations and so on.

6. Student Progress through Practice Placements

As part of your preparation for each placement you are given module guidelines and practice-focused learning outcomes to achieve. You also have preparation for your placement in the Skills Laboratory where you can develop your technical knowledge in a safe environment (safe for you as well as the patient). Successful completion of your module learning outcomes permits you to progress through your course. When you are unsuccessful you are offered a second attempt and it is imperative that appropriate support is planned and provided to ensure you have a reasonable opportunity to be successful. On the rare occasion when this second attempt is unsuccessful you are normally discontinued from the programme. Your Personal Tutor, the module team and your Route Leader in collaboration with various administrative support systems carefully monitor your overall progress through your programme. Their actions and decisions are informed by policies developed by various committees within the School of Community and Health Sciences, and in turn these policies and decisions are subject to policies and procedures laid down by the University Senate, informed by local, national and European policies.

7. Personal Tutor

This is a member of academic staff whose role and responsibility is to track your academic and clinical progress, provide pastoral support and academic guidance.

8. Practice Experience Facilitator /Practice Experience Manager

This is a practitioner whose Trust-based post is normally funded by the Strategic Health Authority. This person is normally based in a trust setting and works collaboratively with the university academic and placement staff and practice mentors. Their role is to facilitate a positive learning environment for you; to provide appropriate support and guidance to your mentors as well as to identify suitable settings for placement experiences.

9. Placement Mentor

For the duration of your placement you will receive social and professional support in your placement from an experienced and qualified practitioner who has undertaken mentor/assessor preparation. This person is responsible for facilitating your learning, supervising and supporting your practice and implementing approved assessment procedures.

You will also receive support from one or more qualified practitioners who are designated as a co-mentor or associate mentor and their role is to provide professional and social support in the key mentor's absence.

9.1 Role and Responsibility of the Placement Mentor

During practice placements, your placement mentor:

- i) provides you with social and professional sponsorship to the community of practice and thus to the health care team. This sponsorship is the kind of support you would expect from a host, and entails introducing you to the different members of staff, ensuring that you have been introduced to the relevant policies and procedures of the placement and that you are familiar with the environment.
- ii) assesses your level of capability and risk liability
- iii) engages you in planning your learning
- iv) documents your progress and learning plans
- v) provides day to day support for you through collaborative working and coaching activities
- vi) acts as a role model whilst delivering and managing care
- vii) identifies and uses appropriate support for your progress.

9.2. Selection and Preparation of Practice Mentors

- i) Current professional policy states that mentors should have completed at least twelve months' full-time experience (or equivalent part-time) in the area of care delivery.
- ii) Mentors must have successfully completed a Preparation for Mentorship course or the equivalent (e.g. ENB 997/998: Teaching and Assessing in Practice, City and Guilds Course 730).
- iii) Mentors must attend an annual update/refresher course to ensure they are aware of your student programme, the assessments and current policies and practices.
- iv) Associate or co-mentors must undertake preparation for their role and have successfully completed a mentor preparation course within the last 18 months.
- v) 'Sign-off mentors' are required to have an hour a week to provide you with feedback on your progress.
- vi) 'Sign off mentors' must have undertaken additional preparation for their role.
- vii) A register of placement mentors within each service provider is held by the placement provider.

9.3 Achieving the Responsibilities of Mentoring

Your placement mentor is expected to:

- i) Meet you within 48 hours of starting your placement to discuss your learning needs both in relation to course learning outcomes and past experiences, outstanding learning outcomes or competencies to be achieved during the placement.
- ii) Ensure that you are aware of all safety aspects of the placement area and the local policies and procedures.
- iii) Conduct a risk assessment of your capability and learning needs.
- iv) Provide support for you in achieving broad and specific practice learning outcomes.
- v) Assist in planning and arranging visits to appropriate areas or to spend time with relevant members of the healthcare and social care team.
- vi) Review and discuss your progress and continuing learning needs during incidental sessions related to care delivery or care management activities such as preparing to provide patient care, after collaborative working, during coaching sessions and when you work under more distant supervision.
- vii) Assist you to develop skills, understanding and abilities through reflection on your practice
- viii) Formally assess your achievement of learning outcomes, your skill development and provide constructive feedback at previously agreed meeting dates and times. These times must be timetabled into the off-duty to give your mentor time to ensure that you are both working together for 40% of your placement and to allow time for your mentor to undertake these reviews. (At a minimum these will be at the mid-point and prior to the end of the placement.)

9.4 Key Policies and Procedures that You Need to Know in each Placement

Placement Welcome Booklets inform you where to obtain the following information:

1. Policies and procedures for the placement
2. Medications and other treatments
3. Information related to your patient/client's diagnosis
4. The role of other members of the multi-disciplinary team
5. Health and Safety policies
6. Emergency procedures and telephone numbers
7. Fire policy
8. Risk management procedures
9. Use of special equipment

9.5 Working with your Mentor

- i) You will work with your mentor for no less than 40% of your time in practice and the remainder of your time under the supervision of your designated co-/associate-mentors. The level of direct supervision offered by your mentor will be determined by your learning needs and your level of competence to work in the placement.
- ii) Mentors/assessors, but not co-/associate-mentors are responsible for documenting the final decision about your progress (summative assessment). This mentor must make sure that there is sufficient documented information to support the final decision about whether your overall performance merits a pass or a fail decision.
- iii) Mentors work in partnership with practice experience managers/facilitators, lecturers, nurses, health care staff and other colleagues within the multi-professional services to enable you to achieve your identified learning outcomes.
- iv) If you are in the final placement of your programme, you will be allocated to a senior mentor (a sign-off mentor) who has undertaken special preparation to take responsibility for assessing whether you are Fit for Practice and if you have met all your placement learning outcomes to sign you off as meeting the NMC Proficiencies in partial requirement for registration.

10. Practice Assessment

- i) If you are a mentor reading this document you will find more detailed information in the Mentor Information, in the Student's Record of Achievement Portfolio (Portfolio of Practice).
- ii) As a student taking your pre-registration programme you have a responsibility to make sure that all your assessment documents in your Record of Achievement Portfolio are completed prior to leaving your placement. To be confident that this happens you must make sure the documents are accessible to your mentor/associate mentor; you must also arrange with your mentor to complete these documents by booking suitable times and dates as part of your initial learning plan for your placement.
- iii) You must make sure that each item is signed fully as this is essential to validate your learning outcomes.
- iv) The School insists that your mentor does NOT initial your Record of Achievement Portfolio as this is not acceptable and will lead to a fail grade being given for your module assignment.

11. Inter-professional Learning in Practice Placements

Learning with and about other health care professionals is an essential part of your programme and is designed to create a better understanding between different health care groups. The importance of shared learning has been understood for many decades although it has taken a long time to be established. It is essential that different professionals, from health, social care and other public services are able to provide an effective service and have a good understanding of their different and complementary roles. Several public enquiries following disastrous events have all demonstrated the importance of good communication and understanding between the professions. As a result, the interprofessional learning experiences that are available to you whilst on practice placement will provide opportunities for you to meet with other health care professionals to discuss and learn about their contribution to client care. These opportunities are designed so that you:

- i) participate in, and share in teaching sessions from and alongside other health care professionals
- ii) engage in discussions in the practice setting relating to specific clients' needs or to specific aspects of care
- iii) benefit from exchanges and meetings with students from other disciplines
- iv) compare and contrast your different professional programmes and so gain an insight into how you each develop professionally
- v) observe and participate in multi-professional and inter-agency work
- vi) reflect on the complementary nature of your professional roles whilst providing suitable care packages for clients
- vii) develop a sound understanding of how the different roles of the inter-professional team can collaborate to ensure seamless patient care.

During your practice placements you will have opportunities to evaluate the nature of inter-professional team working and your own contribution to caring for patients in a multi-professional context.

12. Opportunities for Students to Gain Further Experience

An important part of your professional development is to understand fully your patients' experiences of health care provision. One helpful way to do this is by visiting departments and units or community settings that are related to the clinical speciality of your placement. Your practice placement mentor may be able to help you plan such visits or you can discuss the opportunities with the Practice Experience Facilitator of your placement.

Keeping a reflective record of your practice experiences is a good way of making links about patient care in the placement setting and also helps you to learn better.

You should make sure that you keep a record of the dates and times of such visits in your learning plan and your Record of Achievement Portfolio. You also need to make sure that your mentor keeps a record as well. This will enable your placement staff to support your experiences.



13. Quality Assurance of Placements

Every practice placement is quality assured for its suitability to take students. The standards for these educational audits are prescribed by the Nursing and Midwifery Council and by the Department of Health in collaboration with other professional statutory organisations and the Skills for Health Agency. The education audit tool that is used by The School of Community and Health Sciences reflects these standards and each placement is audited every two years with a yearly review and monitoring of any action plans.

a) Placement Profile and Educational Audit

A practice placement profile identifying the learning opportunities available in that specific learning environment is completed jointly by members of the placement staff with the link lecturer in the practice area.

- i) Educational audits are undertaken jointly by a placement representative and an academic representative
- ii) yearly reviews are conducted to identify excellent practice as well as areas requiring improvement.
- iii) An action plan is developed in partnership between educationalists and practitioners to ensure a constructive learning environment for all students

14. Student Placement Evaluation of their Practice Placements

Students are encouraged to contribute their views at the end of each placement on a special evaluation form. This information is electronically processed and the statistical and written information is returned to the placement area for discussion and action planning.

Your Community of Practice, practice experience facilitators /managers will provide an update on the outcome of your evaluations at the beginning of each new placement experience. You can also evaluate your placement experiences as part of your module experience and your overall programme experience. Information from these evaluations is processed centrally in the School and then distributed to module/programme teams. All these different student evaluation forms are fed into the annual quality assurance activities of the School.

15. Changing Placements for Educational Reasons

Sometimes it may be in your best interests to change your clinical placement during the normal time span for the allocation. Changes of this nature can be very disruptive and may delay your ability to complete the programme. These Guidelines outline the criteria and processes that must be observed when considering or carrying out arrangements to transfer students

15.a Criteria for transferring a student

- i) The student is unable to fulfil the programme learning outcomes
- ii) The student is at risk
- iii) The student is not being supervised by an appropriately qualified practitioner (normally this must be a first level Registered Nurse or Midwife)
- iv) Patients are considered to be at risk

15.b Process for transferring a student

If it is decided that it is in the best interests of the student to be transferred from their placement it must be:

- achieved with minimum disruption
- undertaken following careful consultation with the Link Lecturer, Lecturer in Practice, the student's Personal Tutor and the Programme team at West Smithfield
- documented fully
- treated as part of the practice placement's complaints procedure

Steps to be taken

Step 1: Concern about the practice placement may be raised by the student with any one of the people identified on the Communications Network Chart who will notify the most appropriate person.

Step 2: If appropriate, the concerns will be investigated by any one of the following within two working days:

- i) Link Lecturer
- ii) Clinical staff including Director of Nursing or Midwifery
- iii) Lecturer in Practice
- iv) Programme Director or nominee (e.g. Personal Tutor)
- v) Practice Experience Manager/Placement Facilitator

Step 3: If the investigation confirms the concerns, the result will be discussed with the relevant Lecturer in Practice

and the Practice Experience Manager/ Placement Facilitator.

- i) If it is agreed that the student(s) should be transferred from the clinical area, an alternative placement will be found immediately with the collaboration of the Practice Experience Manager/ Placement Facilitator.
- ii) If the student is on a long placement experience the student will, as far as possible, be re-located to a practice area within the same Community of Practice.
- iii) A written action plan will be developed and agreed by all the relevant people with the aim of supporting the developments needed to promote an effective learning environment at the earliest possible time.
- iv) Theme Leader for Practice, the Director of Nursing/Midwifery (or deputy), senior manager, senior nurse/midwifery manager, or GP Practice Manager and nominated Customer Care Manager will be informed in writing of the concerns and the action plan.

Step 4: The Lecturer in Practice, in discussion with the staff identified in (Step 2 above) will appoint an Investigating Officer who will identify the factors that have led to the removal of the student.

Step 5: A report from the investigating officer will be presented within 14 working days. The report will use the following framework:

- i) Summary of the report and signature of the investigating officer
- ii) Chronology of the events leading to the request to remove the student
- iii) The investigatory process
- iv) Names and role designation of the people contributing to the investigation
- v) Findings of the investigation
- vi) Conclusions of the investigator
- vii) Recommendations for action
- viii) Time frame in which the actions are to be completed

Step 6: A meeting of the relevant senior personnel will be convened by the Lecturer in Practice, the Investigating Officer and the Practice Experience Manager.

- i) The aim will be to discuss the report and agree the action plan and the time frame.
- ii) The placement representatives will be responsible for ensuring that the report is pursued by the Trust/GP Practice as part of its complaints procedure.

Step 7: The Lecturer in Practice (or nominated deputy), the Practice Experience Manager and the Director of Nursing or Midwifery/GP Practice representative will monitor the implementation of the action plan.

Step 8: The setting must be audited as meeting the required standards before it is used again as a student placement.

STUDENTS PLACEMENT ATTENDANCE

SECTION 3: Your Placement Attendance

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1. Practice Placement as an Essential Learning Experience

Practice placement experiences are an important part of learning to become a nurse or a midwife. They provide opportunities for you to refine and further develop the skills that you have learned in skills laboratories and the classroom by working in real life professional practice situations. Learning to develop your professional knowledge and to relate your reading whilst working and learning in your practice placement means that you need to make the most of every opportunity to work alongside experienced practitioners and to give care either under close supervision or, once your mentor has judged you to be safe, by working under their distant supervision.

As a student of City University London, School of Community and Health Sciences, you have permission to enter the practice placement setting by virtue of the allocation list which is a substitute for an honorary contract. As a result you receive indemnity insurance cover, but only providing, you act in accordance with the policies and procedures of the placement provider and City University London at all times.

Being classed as supernumerary to the regular staffing team of your placement means there are sufficient staff to deliver the required care for the shift. Your supervision and support is not normally calculated into the staffing levels and so the care activities that you are asked to undertake not only provide you with the experience and learning opportunities that you need but also frees your mentor to support you.

Preparing for your placement is essential if you are to get the best of the experience. Staff will expect you to have done some preliminary reading about the placement, the special aspects of care that are provided by the placement staff and that you have studied your related programme themes. You need to make sure that you have all your practice related documents with you when you start as they will enable your mentor to give you the support that you need.

Before you first start on your placement it is essential that you alert your mentor of any factors that may affect your ability to work and learn successfully. Some factors such as pregnancy, or a mental or physical disability or if you have any form of educational need such as dyslexia, may pose a health and safety risk to you and your patients. Your mentor will then make arrangements for any reasonable adjustments to be made.

Moving to a new placement, especially in the early stages of your programme can be both exciting and disorientating. Each time you will need to get know a different group of practitioners, their styles of working and communicating and their expectations of you. Additionally, you will be learning about the needs and health care delivery of a different client group. Undertaking your preliminary preparation will shorten this uncomfortable settling-in period. As you become more skilled you will find it gets quicker to adjust, and of course that depends upon you making the best of every learning opportunity. There are several tools to help you such as the City University Foundation Course Toolkit or the Branch Programme Toolkit that are available from the practice education website (www.city.ac.uk/sonm/practice-education/toolkits)

2. Professional Requirements for Practice Placements

The amount of time that you spend in practice has been specified by the professional statutory body, the Nursing and Midwifery Council, and your programme has been designed to ensure you meet these requirements. If you are taking a three year degree or a diploma pre-registration programme you are required to complete 2300 hours of practice experience. If you are taking a shorter programme then the number of practice hours will also be less. Another requirement is that during your practice placement experiences, you must have experience of the 24-hour care of patients as well as of the full range of care over a seven day week. This means that by your third year you will be expected to work morning, evening, night and weekend shifts, and we will be more specific about this further on.

Working a seven and half hour shift gives you the opportunity to learn the daily routines, to be involved in care delivery repetitively and to develop your professional skills and knowledge. Becoming a successful nurse or midwife depends upon you having this kind of repetitive exposure to practice and allows you to develop a repertoire of knowledge that you can use when delivering care to individual patients (Benner, Tanner et al 1996). Research indicates that when students have grasped the daily routines and activities they can then begin to see the relevance of their formal classroom knowledge and to use and expand it (Spouse 2003). This makes learning in and from practice a reality.

Interruptions to your programme

If you find that you need to interrupt your programme for any reason, you will not be able to apply for professional registration until you have made up all the required time. This can sometimes be longer than the amount of time that was outstanding when you took a break and is due to Nursing and Midwifery Council requirements.

Registration

Successful registration with the Nursing and Midwifery Council is dependant not only upon successful completion of assignments and learning outcomes but evidence that you are fit to practise and this includes health, personal conduct and completion of all your practice hours. This information is taken from your practice placement records for the whole of your programme.

3. Placement Attendance for Learning in Practice

The School of Community and Health Sciences and its placement partners work collaboratively to provide you with the best possible practice placement experiences and your duty times will be designed to facilitate these. During your practice placement you will be supervised by members of staff who have been trained to do so and you will be given their name when you first start your placement. You can find out more about your mentor's responsibilities in Section 2 of these Guidelines

We are conscious that many of our students have family responsibilities and we will do our best to support you to meet these. However we make the assumption that your priority is to become a registered midwife or nurse and that you have made the necessary arrangements for adequate support so that you can be punctual and reliable throughout your programme and particularly in your attendance at your practice placements.

3.1 In summary During your Placement Shifts you Will:

- i) work 40% of your shifts with your supervisor/ mentor or associate mentor
- ii) receive constant supervision and support from named, suitably qualified and experienced practitioners on each of your practice placement shifts
- iii) work over the 24 hour, seven day a week range of shifts (unless you are a first year student)
- iv) participate in the delivery and management of care provided to patients in the placement setting
- v) ensure that you have sufficient exposure to the normal every-day care of patients to meet the learning outcomes of your module placement
- vi) ensure that you complete the prescribed number of hours for your placement during your module placement allocation
- vii) ensure that your Placement Attendance Record is accurate and is signed by your Placement Mentor or Placement Manager by the last date of your placement and that this is handed in with your Record of Achievement Portfolio.

3.2 Exceptional Circumstances

If in an exceptional circumstance you have specific difficulties about attending a specific shift, you may be able to negotiate some flexibility providing you can meet the criteria in 3.1 and the following:

- i) the change of shift (time) has been agreed with your mentor and your placement manager and a signed statement confirming this is attached to your Portfolio of Practice
- ii) you adhere to this agreement

N.B. A copy of the agreement must be sent to your Route Leader and another copy to your Personal Tutor.

3.3 Placement Shift Hours

Your placement experience will normally consist of five days of 7.5 hours (i.e. 37.5 hours per week) and you will be notified of the total number of hours to be completed by the Programme Team at West Smithfield.

These practice hours are designed to meet the requirements identified in 3.1 and to:

- provide opportunities to attend practice placement related seminars and tutorials
- include one short tea/coffee break of 15 minutes

N.B. Your main meal break is not counted as practice hours. When undertaking longer shifts such as night duty your meal breaks will be calculated to reflect the difference.

3.3.1 Bank Holidays

Students do not receive extra duty payments if they choose to work a Bank Holiday. When a Bank Holiday falls during your placement time you are required to work the day or days or to take them as your normal day off for the relevant week. If your placement colleagues do not normally work at weekends or Bank Holidays then you will need to make up the hours during the allocation.

3.3.2 Working Long Day Shifts

Students may work long day shifts providing the following criteria can be met:

- i) if you, the student, are willing to work long day shifts
- ii) if long day shifts are a normal pattern of work for the placement staff
- iii) if you will receive supervision and mentored educational support
- iv) if you have the written agreement of your mentor and the placement manager for you to work the long shift/s and this has been signed off in your Record of Achievement Portfolio
- v) if you work the equivalent of 37.5 hours a week (150 hours/month) made up of no more than two long shifts in one week and no more than 75 hours in any two week period.

3.4 Weekend and Night Duty Arrangements

3.4.1 First year midwifery and nursing students

- i) As a first year nursing or midwifery student you may work one weekend (whole or part) in any single placement allocation where the service is open.
- ii) However, if you wish to gain a specific placement experience that only takes place at weekends you may work more than one weekend as part of your placement hours providing you will have effective educational support and that it does not compromise your ability to meet your learning outcomes for the placement.
- iii) As a first year student you will not work night duty as this is not appropriate experience for this stage in your programme.

3.4.2 Second and third year nursing and midwifery students

Over the second and third years of your programme you should plan to work a minimum of 6 night shifts and a maximum of 12 night shifts. If you work more night shifts than these it could prevent you from achieving your learning outcomes and thus becoming registered with the Nursing and Midwifery Council. You may only work night shifts if you are working alongside your mentor or under the supervision of a registered practitioner.

4. Undertaking Paid Employment

- i. If you are a bursaried student at City University you are permitted to undertake paid employment providing it does not amount to 20 hours or more in any 7 day period.
- ii. You are not permitted to precede or follow a period of paid employment with a programme practice placement shift (known as back to back working). If you are found to have worked in this manner you will be subject to disciplinary procedures, both by your employer and by the university.
- iii. European Working Time Directives

Under the terms of the European Working Time Directives you are not permitted to undertake any form of paid employment where the combination of your placement hours and your working hours amount to 48 hours or more over any seven (7) day period. If you are found to have breached this Directive you will be subject to disciplinary proceedings by both the university and by your employer.

5. Sickness or Negotiated Absence from Placements and your Programme

Your attendance on placements must be accurately monitored and recorded to meet the requirements of the Nursing and Midwifery Council for successful completion of your programme. Any kind of absence, including absence due to sickness or injury that occurs either during School-based activities, practice placements or annual leave must be recorded. The Allocations Team must be notified of any sickness/injury or absence immediately and relies upon your good communication skills.

It is important that you keep your own records in case of any discrepancy. Whilst on placement you must make sure that any absence caused by sickness or injury is accurately recorded on your practice placement Attendance Sheet (or in your Record of Achievement Portfolio) and signed. The placement staff may also wish to keep a record of any absence that you have during your allocation (sickness or otherwise).

Details of all your absence (due to sickness or otherwise) is logged in the appropriate page of your file at The School of Community and Health Sciences, and your Personal Tutor is able to access this data (dates and frequency only) through the networked database. This information is used for writing your reference or for making decisions about recommending you as Fit for Practice to the Nursing and Midwifery Council and thus your fitness for professional registration.

You must always discuss your sickness/injury or negotiated leave with your Personal Tutor so that you can agree plans for making up lost time from your programme. You need to be aware that if you receive a bursary, your payments may be affected by your absence/ certificated sick leave.

5.1 Sickness and Injury Affecting Attendance on Practice Placements

The following explains actions you need to take during periods of sickness/injury in order to ensure accurate records are made.

As soon as you know that you will be unable to attend for your duties you must:

- contact your placement manager
- contact the University sickness text line 07624 819 021. Giving your student number, name, cohort and dates of sickness.
- if you are receiving salary support (seconded) you must notify your employer immediately of any sickness or absence.

You must give the following information:

- i) your name, cohort and student number
- ii) the name of your placement and placement mentor
- iii) the estimated dates that you are taking sick leave
- iv) when you phone your placement you should try to speak to the registered midwife/nurse in charge or your mentor and take a note of the name of the person taking your message. Ask this person to record your message in the work diary/message book, and make sure that you check that they have the correct information.

You must also: make a record of the dates of sickness or absence in your own attendance record along with the date and time of notification and the name of the person you spoke to.

5.2 Returning to your Programme

When you are fit enough to return to your placement, you must notify the Programme Team and your Personal Tutor that you are now fit to return. If you would normally be attending a practice placement you must also contact your Placement Mentor to let them know that you are now fit to return to your placement and to discuss your shift times. The following exceptions apply:

If you are returning from sick leave, as a result of any of the following you must get advice and certified health clearance either from your GP or from City University London, Occupational Health Department. This may be discussed with your Personal Tutor or your Route Leader. If you have:

- i) suffered from diarrhoea and vomiting for more than 48 hours
- ii) been sick whilst overseas (especially in a tropical country)
- iii) sustained a significant musculo-skeletal injury, such as those from a road traffic accident or from back strain
- iv) a highly infectious skin conditions such as: scabies
- v) contact with an infectious disease e.g. chicken pox, rubella, TB
- vi) an allergic reaction to a substance or product, e.g. latex gloves
- vii) a long term condition (this is defined as more than four weeks and as a result of suffering from any condition, illness or injury)
- viii) frequent episodes of sickness/absence.



N.B. You are not permitted to undertake practice placements until you have received a clearance from the City University London, Occupational Health Department. You must always carry a copy of your Occupational Health Clearance form.

5.3 Sickness Certification

You are required to provide certification of your sickness or injury that covers the whole period of absence, including sickness/injury that occurred prior to or during annual leave. This certificate should be sent to:

Programme Officer,
School of Community and Health Sciences,
20 Bartholomew Close,
London
EC1A 7QN.

If you have been sick or injured requiring:

- i) a self-certificate covering up to four (4) consecutive days of absence
- ii) a medical certificate after eight (8) consecutive day of absence. This must be sent to the School within 6 days of completion of the earlier certificate.

6. Injury Whilst on Duty

If you have sustained an injury (e.g. sharps/splash) whilst on duty you must:

- i) inform the manager of your placement area. If this person is not available you must contact the Trust Occupational Health Department or the Accident and Emergency Department.
- ii) complete an incident form and follow the local Trust/organisation policy under the guidance of the manager or the person in charge of your placement location

7. Pregnancy

- i. If you become pregnant during your programme and you are undertaking practice placement experiences, you and your baby may be at risk, so it is essential that you notify your Route Leader as well as your Personal Tutor as soon as you are aware that you are pregnant. You will be advised to have an Occupational Health check to assess whether you need any reasonable adjustments to your practice experience (See the School Maternity Policy for more information www.city.ac.uk/sonm/practice-education/policy_docs).
- ii. You may attend ante-natal appointments during your placement hours, but you will have to make up the lost time. This must be negotiated with your mentor.
- iii. If you are pregnant or breast feeding and you are either going to or are on a placement you must inform your placement mentor immediately so that an appropriate risk assessment can be made. This is to ensure that your health and safety needs are met during your placement.
- iv. If the placement is considered to be too hazardous for you to continue your placement experience then either an alternative placement will be found or if this is not possible and no other reasonable option is available, you may have to commence your maternity break.
- v. When you know the likely date for you to return to your programme you must provide your Route Leader with no less than 6 weeks notice of your proposed return so that the necessary arrangements can be made, and you can be given the exact date of your return. This date will depend upon the availability of placements in your preferred Community of Practice and the stage in your programme. (see Maternity Policy for Pre Registration nursing and midwifery students).

8. Compassionate Leave and other Leave in Special or Exceptional Circumstances

8.1 Compassionate Leave

- i) You may apply to either your Personal Tutor or your placement mentor for compassionate leave if you are facing a situation such as bereavement of a close family member, partner or other situation causing serious distress. This time is added to any sickness or absence record and you will have to make up the time according to the agreement with your Route Leader.
- ii) You are normally allowed to take a maximum of three days compassionate leave.
- iii) If you require a longer period of compassionate leave you must contact either your Route Leader or in their absence the Programme Director. Only these people can grant a request for a longer period of compassionate leave.
- iv) You must make sure that you inform the Programme Team and your Route Leader as soon as you have permission to take this compassionate leave.

8.2 Negotiated Leave for any Other Purpose

- i. Absence for paternity leave or carer leave: you may apply to your Personal Tutor and your Route Leader for special paternity leave or carer's leave. This time will need to be made up to meet the requirements of your programme and the Nursing and Midwifery Council. This is because if you are taking a full time pre-registration programme it has to be completed within 5 years of the start date.
- ii. Attendance for Interviews: if you are a third year student in your final four months of training you may take negotiated time off from your duties to attend a maximum of two (2) interviews for post-registration staffing posts. You will need to produce evidence of the interview date/s and time/s in order to negotiate this absence.

If you wish to attend additional job interviews you will need to negotiate this time off with your mentor. You will have to make up the practice placement time.

N.B. Dentist/Doctors' appointments: You are expected to arrange these types of personal appointments during your off duty hours.

8.3 Making Up Lost Time

- i. If you have had up to 5 days absence from your placement you may negotiate with your mentor to make up the time during the allocation period.
- ii. If you have had 6 days absence or more from any one placement you need to discuss the situation with your Route Leader so arrangements can be made for you to make up the time, either at the end of the academic year or at the end of your programme.

Whilst academic and placement staff will do their best to accommodate students' requests for a specific return date to their programme or return to a placement this may not always be possible. Your return date will be based on the availability of a suitable placement and it may not be possible for you to return to the same geographical Community of Practice.

9. Non Compliance with the Attendance Policy

Unauthorised absence is defined as any form of non-attendance that is not due to sickness or injury or which has not previously been negotiated and agreed with your mentor or placement manager and documented in your Record of Achievement Portfolio (Portfolio) or on your Attendance Form. This includes:

- i) Persistent lateness/poor timekeeping
- ii) Absence from the placement that is not leave due to sickness/injury or negotiated in advance
- iii) A breach in any of the policies relating to your attendance (including reporting sickness/injury etc. and the European Working Time directives)

Unauthorised absence is considered to be unprofessional conduct and implies a lack of consideration and respect for other colleagues. Such behaviour is deemed unacceptable and will result in disciplinary action. This information will influence recommendations about your suitability for professional registration.

Your practice placement mentor is required to report your absence to the Programme Team immediately, and to the Practice Experience Manager/Practice Facilitator. It must also be documented on your attendance sheet in your Record of Achievement Portfolio.

STUDENTS' RESPONSABILITIES AND RIGHTS

SECTION 4: Students' Responsibilities and Rights

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1. Students' Responsibilities and Rights

This section describes the various mechanisms designed to safeguard your rights and to outline your responsibilities in relation to patient care, confidentiality and relationships with clients and staff. All students have the right to be treated in accordance with applicable legislation and in accordance with the Nursing and Midwifery Council Code of Professional Conduct.

2. Health and Safety

All students have the right to be placed in a safe learning environment in accordance with Health and Safety requirements. In the event of you having concerns regarding your safety you should immediately discuss your concerns with your Placement Experience Manager/Practice Facilitator or Practice Mentor. At the same time you must inform the Link Lecturer for that specific placement area.

In the event of you being involved in an incident or sustaining an injury whilst on placement, you must immediately report the incident to the Placement Manager (person in charge of the placement at the time of the incident). You will follow the Trust/Placement procedure in such an event. The Trust/Placement must ensure that a copy of the incident report is sent to the Allocations Team who will inform your Route Leader.

3. Confidentiality

Confidentiality is a requirement of all health care practitioners and you are expected to observe this requirement at all times. The Nursing and Midwifery Council, Code of Professional Conduct provides some guidelines (see www.nmc-uk.org for more information). You need to be clear as to what information should be given to whom e.g. what information should be given to other professionals, patients/clients and relatives.

- i) If you have any concerns about confidentiality you should seek advice from your mentor or link lecturer
- ii) You should never disclose the identity of patients/clients to unauthorised people outside of the placement area or the School of Community and Health Sciences
- iii) If you have concerns about the care delivery or care management in a practice setting you should discuss your concerns with your placement mentor or link lecturer immediately (or the most appropriate person as indicated by the Communication Network Chart).
- iv) If after consultation you wish to make a formal complaint you must seek advice and support from your Route Leader. (See Policy Relating to Students reporting incidents of unprofessional conduct observed during practice experience).
- v) If you are writing about a patient in any of your assignments you must make sure that both the identity of the patient and or the placement is anonymised to maintain confidentiality of staff, patients/clients placement areas.
- vi) You may wish to use documentation from your placement area for assignments. If you wish to use documents such as care plans, policies and procedures you must always obtain the permission from the relevant placement manager. Your placement manager must countersign a written record of this permission and you must keep the record. In the case of patient care plans, you must always gain permission directly from the patient or from their legal guardian. For further guidance see Nursing and Midwifery Council booklet: An NMC guide for students of Nursing and Midwifery (www.nmc-uk.org).
- vii) You must never remove any form of documentation from the practice placement area and you may only photocopy with permission from the clinical manager of the practice setting.
- viii) In the interests of your own protection you should carefully consider the nature of personal information you disclose to patients/clients i.e. where you live, who you live with etc.

4. Escorting and Accompanying Patients

In the interests of your own education and your safety and the safety of your patient, as a student, you may only escort a patient as part of a planned educational experience and with the full direct supervision of a qualified member of staff.

4.1 Accompanying Patients for Social or Educational Purposes

You may accompany patients under the following circumstances:

- i) when you have been assessed to be capable of doing so
- ii) when you feel confident in terms of both your own ability and the patient's mental/ physical state and with the permission of the Placement Manager
- iii) where you know the patient/client well and you feel confident to accompany him/her
- iv) you must not accompany the patient outside the hospital grounds
- v) in residential homes, if the nature of the placement and patient group means that you accompany residents in the community you should only do this when there is a qualified member of staff present.
- vi) Day trips and outings occur in some placement areas. You may join these if you feel the experience would be helpful to your learning and you have the direct guidance of your mentor or another qualified member of staff.
- vii) You may only accompany or escort a patient/s as an additional member of the team to the normal complement of staff. At no time should you be considered as part of the staffing numbers and at no time should you be left in a position of responsibility for these patients.

5. Responsibility for Patients

At no time must students be left alone with patients in a placement area with out supervision.

- i) An accountable member of staff who is both qualified and has managerial responsibility must always be present in the placement setting.
- ii) Students must never be asked to be responsible in those situations where there is no staff member present and they cannot be held accountable should a problem arise.
- iii) You must never be asked to undertake first level observations i.e. in mental health settings. This is not appropriate in terms of risk accountability (to staff or to patients), or your learning. However, you may find it helpful to accompany a qualified member of staff carrying out these duties.
- iv) You are not allowed to be directly involved in Control and Restraint (C&R) activity.

6. Administration of Medicines

- i) You must always follow guidance provided by the professional statutory body (NMC) on the administration of medicines and you must comply with the City University London, School of Community and Health Sciences written policy on drug administration.
- ii) You must never check or administer medicines on your own or without supervision of a qualified nurse, midwife or health visitor.

7. Student Relationships with Patients and Healthcare Staff

You have a responsibility to work collaboratively and in a professional manner with your practice placement provider and its employees, in accordance with local policies and procedures (including the School of Community and Health Sciences Student Learning Agreement and the Nursing and Midwifery Council Code of Professional Conduct).

7a. Your Relationship with Patients

The relationship between you and patients although friendly must always remain professional.

- i) You should never arrange to meet patients socially, either whilst still in placement or whilst the patient is receiving health care.
- ii) Sometimes patients may wish to express their appreciation of your work by leaving a gift for you. If a patient wishes to give you a gift you must always act in accordance of with the Nursing and Midwifery Council Guidelines, NMC Code of Professional Conduct, Performance and Ethics and the policies of the placement provider.
- iii) You should never conduct any form of sexual relationship with patients.
- iv) Sometimes patients, clients and visitors may appear to behave inappropriately through e.g.
 - verbal comments/abuse
 - sexual harassment
 - lack of inhibitions
 - physical aggression.

All placement providers have a policy of zero tolerance towards this kind of behaviour and it must be immediately reported to the placement mentor or the practitioner in charge.

- v) If you are personally attacked either verbally or physically the policy of your placement provider must be followed.
- vi) You must complete an incident form immediately and send a copy to your Personal Tutor for action.
- vii) The person in charge of your placement or your Mentor will be available to offer you support and direct you to an appropriate centre including counselling at the Student Services Department of the University
- viii) You may find it helpful to discuss your experience with the practice experience manager/facilitator, or your placement Link Lecturer and your Personal Tutor.
- ix) In situations where it is thought that you may be at risk, the placement staff, Link Lecturer will discuss this with you and will negotiate an alternative placement experience for you with the Programme Director and the Programme Team.

7.b Students whose Conduct is Unprofessional

- x) Where the practice mentor/clinical team believe that your conduct is inappropriate, your placement mentor will discuss this with you and when relevant, record the discussion in your Portfolio of Practice.
- xi) Using the Communication Flow Chart (see Section 1) your placement mentor may wish to discuss your conduct with your Personal Tutor and will notify the Link Lecturer or your Personal Tutor of their concerns.
- xii) If necessary the Link Lecturer will organise a meeting including all the relevant people to address the issue.
- xiii) If your conduct has breached the 'Student Learning Agreement' or the NMC Code of Professional Conduct, you will fail your placement and you will be removed from the placement. Your conduct will be reviewed by members of a disciplinary panel who will consider your future.

STUDENTS UNIFORM, DRESS AND APPEARANCE

SECTION 5: STUDENTS UNIFORM, DRESS AND APPEARANCE

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1. Your Dress and Appearance

You have the responsibility as a student at City University London undertaking a programme leading to a professional qualification to dress in a manner that maintains the good name of the profession and of the School of Community and Health Sciences. Your wearing of either the School uniform or your own clothes when on practice placement exposes you to the public gaze and should inspire confidence and respect from your patients/clients and your carers. Consequently it is essential that you always dress and act in a way that promotes public confidence in your personal and professional integrity. You have a duty of care to act strictly in accordance with the guidelines provided by the professional statutory body (the NMC) and the School. In practice placement areas a smart and professional appearance has a direct effect on practitioner/patient relationships and subsequent care. A professional approach to appearance and dress can also reduce the risk of cross infection and maintain not only your own safety, but also the safety of your patients and your colleagues.

By only wearing your uniform whilst on duty or in a campus learning environment helps to ensure that you are not exposed to being called upon to assist in a manner that exceeds your capability as a midwifery or nursing student. In this section you will find detailed guidance on meeting the minimum standards required by the Uniform and Dress Policy of the School and it is essential that you follow the Policy carefully.

The Purpose of the Policy is as follows

- To ensure you maintain a professional appearance at all times
- To ensure the protection of you and the public
- To ensure a consistent standard of dress whilst respecting where possible, current practices and cultural beliefs
- To minimise the risk of cross infection and to facilitate good and effective hand decontamination
- To ensure uniforms are compatible with safe moving and handling

1.1 Your School of Community and Health Sciences Uniform

1.1.1 Issuing of Uniforms

At the beginning of your midwifery or nursing programme you will be measured for a set of uniforms and it is a good idea to make sure that you get a size which will allow you to look and work professionally whilst undertaking any care delivery activities including moving and handling. This set of uniforms is provided free of charge and is intended to last you for the duration of your programme.

When you have completed your programme you will be expected to dispose of your uniform so that it can not be used by anyone else. This is to protect the name of the School of Community and Health Sciences, and thus your reputation as a graduate of the School.

1.1.2 Replacement Uniforms

If you need to replace your uniform because it has become damaged or because it is no longer the correct size, you will be expected to pay for the replacement uniforms

1.1.3 Laundering of Uniforms

To promote a professional image and to reduce the risk of cross infection you are expected to wear a clean and neatly pressed uniform every shift. You must make sure that you wash your own uniform at a temperature of 60 degrees Centigrade.

In some specialist placement areas such as in the labour ward, intensive care unit or operating department, special uniforms are provided by the placement provider. These are replaced daily and are laundered as part of the normal dirty linen procedure. You must make sure that you place such clothes in the designated dirty linen bin/store when you complete your shift and they will be collected by the linen team.



1.1.4 Travelling to and from Placement

When travelling to and from your placement, you must wear your own clothes and change into your uniform at your placement site. Wearing uniform outside the placement site or skills laboratories could place you at risk and incur infection. It is also a disciplinary offence.

1.1.5 Dress Code when on Community Placement

When you are on a community placement you are not normally required to wear your uniform, but in situations where it is necessary you must always be accompanied by a registered practitioner to provide you with supervision and protection.

1.1.6 Protective Clothing

There will be times during your practice experience when you may be required to wear protective clothing. This may be to protect either your patient or to protect you as the health care provider from unnecessary health and safety risks and serious accidents. In these situations it is essential to make sure that you understand and abide by the related policies and procedures for wearing the protective clothing.

You have the responsibility to ensure you are knowledgeable about these policies from your first day on each placement. Make sure that you always wear and discard any protective clothing safely and in a timely manner.

1.1.7 Plastic Aprons and Gloves

When you wear either plastic aprons or gloves you must always adhere to local policies and practices.

- Plastic aprons must be worn in areas of direct patient care and a different apron must be worn when nursing a different patient. You must make sure that you dispose of your apron safely and correctly. The apron creates an impermeable barrier between the patient and that area of the uniform which has the most patient contact. This aids the prevention of cross infection.
- Gloves should only be worn according to the local policies of the placement provider.



1.2 Personal Appearance

When people are sick or pregnant they often find strong or unfamiliar smells (such as cosmetics, after-shave or perfume, strong food smells or cigarette smoke) nauseating. As a nursing or midwifery student you will be engaged in providing nursing or midwifery care that includes close physical contact with your patients and clients, so it is essential that you make sure your personal hygiene and any perfume or other odours do not cause patients discomfort.

You must also make sure that your personal attire (and uniform) is clean and freshly pressed for each shift.

1.2.1 Fingernails

Make sure that your fingernails are always kept short and clean to prevent harm to patients through infection transfer or inadvertent scratching. Your hands and fingernails must at all times be:

- clean to avoid transferring bacteria on or under the nail
- short to prevent patients and staff being scratched
- free from nail varnish, nail decoration or any form of nail covering to prevent flakes of contamination. False nails or extensions are not permitted.

1.2.2 Hair

There is a possibility of hair carrying bacterial or parasitic infection such as staphylococcus aureus or head lice and these may be transmitted to patients. To promote your health and safety and that of your clients/patients, you must make sure that your hair is always kept clean and tidy. To achieve this it must be:

- clean, tidy and tied away from your face
- it should be off your face and shoulders and above the level of your uniform collar
- hair should be tied back with a simple dark hair band or ring, clips or hair pins
- free from any form of decoration or adornment such as: fastenings that have sharp points, beads, slides, decorated or plain bands, ribbons, scarves and hats, all of which are an infection risk
- if you are a male you must either be clean-shaven or have your beard and moustache kept clean and neatly trimmed

1.2.3 Footwear

Your shoes must be designed to provide good support to your feet and locomotor system so that these are protected from harm. Unless alternative footwear is provided by the placement provider for specialist areas of practice (such as labour ward, operating department), your shoes must be:

- plain
- black, leather (not suede)
- if lace-up with laces of the same colour as the shoe
- non slip soles
- low heeled
- firm fitting
- clean
- in a good state of repair

The wearing of trainers or open sandals/shoes are potentially dangerous to you as you do not provide sufficient protection to your feet and back and you may NOT wear them whilst wearing uniform.

1.2.4 Socks, Stockings and Tights

You should always wear suitable hosiery.

If you wear socks they must be:

- plain
- black

If you wear stockings or tights they must be:

- plain
- black 15 -30 denier

In extremely hot weather you may seek the permission of your placement manager to dispense with wearing socks, stockings or tights and you must receive this dispensation in writing.

1.2.5 Jewellery

Wearing jewellery of any kind whilst working in a health care setting can be hazardous, both for you and for your patients. This is because jewellery introduces a health and safety risk. Jewellery can potentially injure patients or be dangerous for you if you are caring for a confused or aggressive patient. Stones in jewellery often harbour micro-organisms, may become dislodged and can cause damage to patients. Therefore you must adhere to the following principles:

- i) rings – only a single plain band may be worn i.e. a wedding ring
- ii) ear rings – must not be worn (You may wear one plain ear stud in each ear)
- iii) bracelets – must not be worn
- iv) necklaces – hanging jewellery must not be worn
- v) wrist watches – must not to be worn – fob watches are favoured and must be pinned to fall inside a pocket. Wrist watches have been found to be a source of infection and prevent adequate hand washing and drying. A wrist watch may also injure a patient and must not be worn on the wrist
- vi) tattoos – you are discouraged from being tattooed in areas of your body that are visible to patients
- vii) body piercing – visible body piercing e.g. on the face must be removed whilst on duty. New piercings (including ear studs) will be treated as a new wound and must be covered with a surgical dressing and a blue plaster until the site has healed.

1.2.6 Badges/Identification

Your name and designation must always be visible as a matter of security and reassurance to your patients. Whilst on placement experience you must wear your university identity card at all times, and you will be refused admission to the placement area if you are unable to produce it on request. If this does happen it will be considered an absence from duty.

If you are a male student, whilst wearing your uniform you must wear your epaulettes at all times (as these are a means of identification as a student).

1.2.7 Additional Clothing

- a) Polo shirts/sweat shirts – if these are supplied as part of your uniform they are worn with trousers.
- b) Cardigans – at times when you are not engaged in nursing or midwifery activities you are permitted to wear a navy blue lightweight and easily washable cardigan that is clean and tidy.
- c) Uniforms for students with cultural/religious considerations

If for religious or cultural reasons you wish to wear a modified uniform, you should apply to the Student Services Team, during your orientation programme. This will be of the same colour and material as the standard School of Community and Health Sciences uniform and will have been adapted to meet standards that reflect health and safety legislation and requirements. Any such adaptations will meet the following standards:

- i) Headdress – Will be provided as part of the standard uniform and must be secured safely and tucked into your uniform collar.
- ii) Trousers – Trousers may be worn under a dress and will be the standard student uniform trousers.

- iii) Tunic/Dress – This is modified from the standard model, loose and shapeless. The tunic/dress will be no longer than mid calf length, with a split seam either side two inches below the knee. The tunic/dress will have long sleeves to the wrist. Whilst on duty sleeves must be rolled back and fixed in position at elbow level and the fore-arms must be bare. You must make sure that you observe this requirement as it is essential to prevent soiling and thus transmission of infection.

1.3 Non-Uniform Dress Policy

- i) Whilst you are on a practice placement you are an ambassador of the University and School of Community and Health Sciences. In practice areas such as community areas and mental health, you are working in a context where you likely to be more vulnerable.
- ii) Prior to commencing your placement you must establish the dress code requirement for your placement. Depending upon the policies of the placement provider, you may wear your own clothes in preference to wearing your uniform.
- iii) You are expected to wear clothes that are clean, conventionally smart and informal. At no times should you wear clothes that are tightly fitting, revealing/transparent or low necked as this is both unprofessional and can cause offence to some clients and could place you at risk.
- iv) Your hair should be clean, tidy and tied off the face; it should be free of adornment other than a simple hair band or ring;
- v) You may only wear a plain wedding ring
- vi) If you wish to wear a necktie it must be clip-on only. This is to prevent strangulation by for example, a confused patient. You should not wear a neck scarf for this reason.
- vii) Shoes should be comfortable, designed to support your feet and locomotor system and enable you to walk easily and undertake the required duties safely;
- viii) The following items may be worn at the discretion of the Practice Experience Facilitator/Manager:
- Jeans if clean and smart. There must be no fading or tears;
 - Knee length skirts or shorts may be acceptable, but you should seek advice from your mentor as in some circumstances this dress may be offensive to the client group.

1.4 Non-Compliance with Uniform and Dress Policy

If you are considered to be inappropriately dressed or you have not observed the requirements of the Uniform and Dress Policy, you will be given a verbal warning and will be sent off duty. This will be reported as an absence until you return dressed appropriately. The time associated with these absences will need to be made up. Following this first verbal warning any second incident of breach in following the Uniform and Dress Policy will be considered unprofessional conduct and as a result you will normally face disciplinary action.

PLANNING PLACEMENT EXPERIENCES

SECTION 6: Planning Placement Experiences

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1. Planning Placement Experiences

This section is concerned with the specific responsibilities of the Allocations Team to allocate students to their practice experiences according to their programme. It also describes the resources and services that staff in the Programme Team can offer to staff and you. The section includes advice on the conditions that must be observed when you wish to negotiate changes to your designated placement.

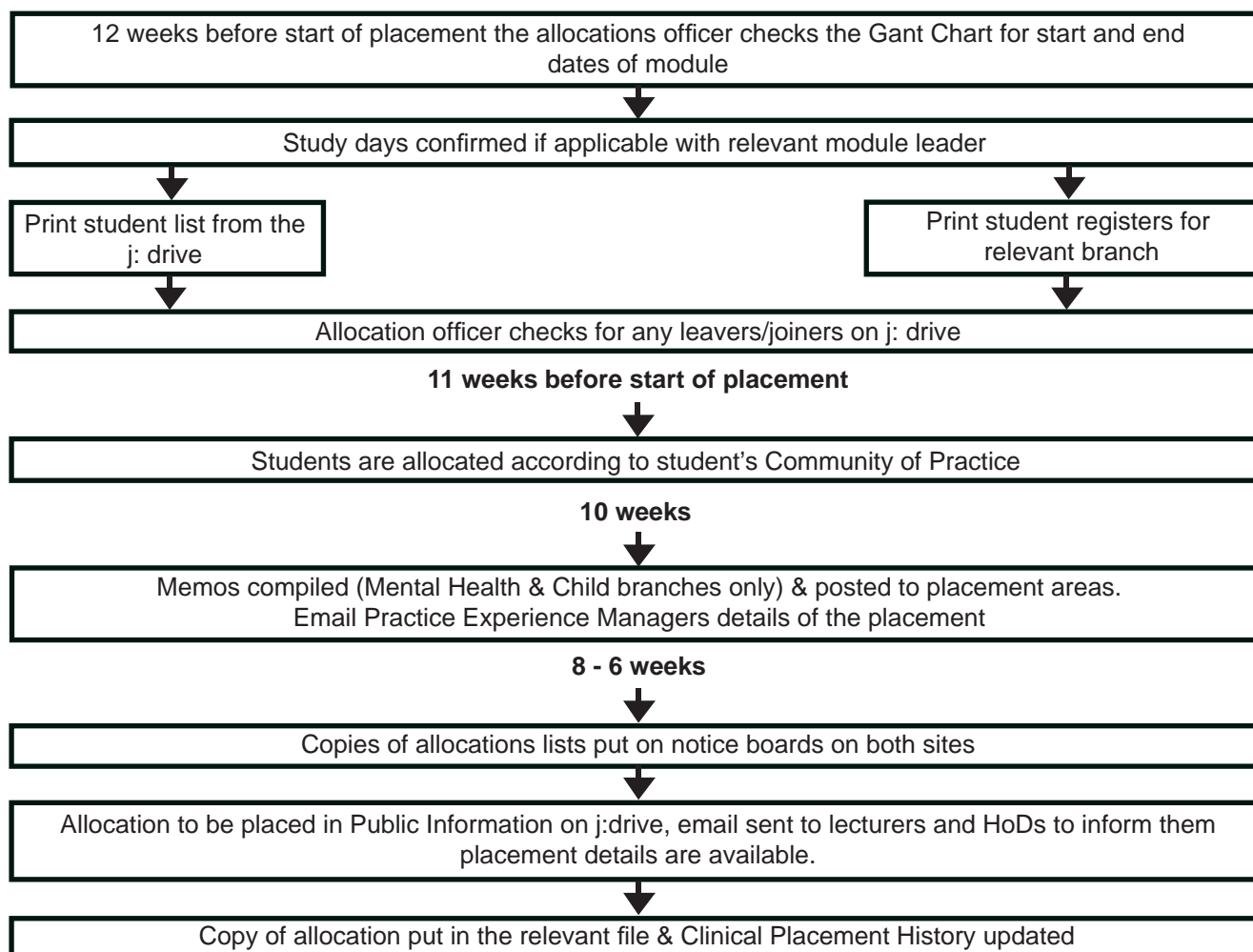
Normally planning a placement allocation takes place 12 weeks before the placement is due to start and you will find a flow chart that illustrates the different stages that this process requires. We have not included in this section a description of the subsequent work undertaken by the placement provider and the practice experience manager/facilitator after the allocation plan has been created. Included in this Section is further guidance about the procedures that you must follow if you are sick.



2. Placement Allocation

You are allocated to placement areas depending on which Community of Practice you are contracted to, i.e. the experience you need to acquire, and the availability of placements. Planning placements for students takes some considerable time and negotiation and normally begins 12 weeks before the placement is due to start. The following table illustrates the normal procedure and time scale that the Placements Team needs to set up a placement for you.

Flow Chart of the Allocation Process



3. Changing Placement Allocation

You may request specific placements that match your module and programme learning outcomes providing you make your request no later than 12 weeks before your placement is due to start. Your placement request must be within your Community of Practice.

- i) In such cases you must write to the relevant Lecturer in Practice for your Community of Practice and the Practice Experience Manager/Placement Facilitator if you want to change your placement.
- ii) You must make your request in writing no less than 12 weeks before the placement starts.
- iii) Any decisions to agree the change will be made following consultation with all the relevant people (e.g. Lecturer in Practice, Programme Director, Practice Experience Manager/Placement Facilitator, Personal Tutor and Programme Officers).
- iv) If the change in placement is agreed, you will receive a notification of the change from the Programme Team.
- v) Within 3 working days of receiving the notification from the relevant Lecturer in Practice and Practice Experience Manager/Placement Facilitator (or in your absence the relevant Programme Director) the Programme Team will notify the relevant Lecturer in Practice and the Practice Experience Manager of the agreed change.
- vi) Students wishing to exchange (swap) placements may do so providing the above criteria have been met and both students have signed a letter requesting the exchange. Such requests will only be considered on a basis of like-placement for like and if it matches the students' programme requirements.
- vii) In exceptional circumstances where the request is made less than 4 weeks before the start of the placement, it will ONLY be considered if there are health or safety reasons and the request is accompanied by a letter of support from your Route Leader.

4. Role of the Programme Team and its Staff

The Programme Team is managed by a Senior Programme Officer. Part of their role is to organise the booking of placements (according to Cohort, Community of Practice and Diploma/Degree and experience required) for the 1500 Nursing or Midwifery students who are studying in the School. To enable them to undertake this role effectively, they liaise with a wide range of placement providers (e.g. hospitals, health care settings, schools, clinics, nurseries and so on) that are located in the NHS, the independent and voluntary sectors. This work is to make sure each of you has a placement experience that is organised in advance of your placement starting date and which reflects your specific training needs.

The work of the Programme Team also includes recording your sickness/absence calls in order to record and monitor practice and theory hours. This information is used for official records that are required to enable you to qualify as a Registered Nurse or Midwife at the end of your training programme.

5. Enquiries

You can contact the member of the Programme Team with responsibility for you placements at specific times of the day (see below). Staff will be pleased to answer any questions regarding allocation of placements, the student names and dates of attendance. They can also answer queries about the organisation of placements.

Programme Team staff are not able to answer queries on subjects such as curriculum content or programme issues, including study days. If you have questions about these you will need to discuss curriculum content or programme issues with either your Link Lecturer, Personal Tutor or Module Leader.

Programme Team are happy to discuss placement issues between:
Monday to Friday between 10.00 am – 4.00 pm

Postal address:

Programme Team,
City University London, School of Community and Health Sciences,
20 Bartholomew Close,
London EC1A 7QN.

Actual location:

Programme Team (Room G05) Ground Floor,
City University London,
School of Community and Health Sciences,
20 Bartholomew Close,
London EC1A 7QN.

Branch Contact details:

Adult Nursing
Tel: 020 7040 3317
E-mail: Adultadmin@city.ac.uk

Mental Health
Graduate Entry Programme
Tel: 020 7040 3318
E-mail: MentalHealthPGDipadmin@city.ac.uk

Child
Midwifery
Tel: 020 7040 3316
E-mail: ChildMidwiferyadmin@city.ac.uk