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| Sheffield Hallam University, College of Health, Wellbeing and Life Sciences logo**Return to Practice**Health Visiting**Portfolio of Evidence to be presented to the NMC by the student**

|  |  |
| --- | --- |
| **Student Name** |  |
| **Student Number** |  |
| **Placement Details / Address** |  |
|  |  |
| **Name (print)** |  |
| **Date of last update** |  |
| **I confirm that I am a Practice Assessor** **Date** |  |
| **Contact details of Practice Assessor** |  |
| **Learning Environment Manager Name** |  |
| **Contact details** |  |
| **Personal Tutor** | Michaela Brown/Janet McAleavy |
| **Contact details** |  |
| **Placement Dates**  | From |  | To |  |
|  |  |

 |

**Practice Assessment Process**

The overall aim of the practical assessment process is to ensure that students can demonstrate that they are fit to practice. In order to do this, students must achieve NMC proficiencies and outcomes and demonstrate;

* + Critical awareness
	+ Reflective practice
	+ Rational decision making
	+ Clinical judgement

#### Interview Sheets

Self-assessment is an important part of this process; students should complete the relevant self-assessment sections in this document and the portfolio before each interview with the Practice Supervisor/Practice Assessor. PS/PA

Initial Assessment Identify learning needs

(Start point) Identify learning opportunities that the placement offers health visiting skills available for practice

Intermediate Assessment Review the student’s progress

(Mid point) Identify areas where the student has achieved and where support is needed

Final Assessment Discuss the student’s overall performance

 Award Pass/Fail

**Assessment of Practice**

The student will meet with the Practice Teacher/ Sign off Mentor to document competencies.

1. The Practice Teacher/ Sign off Mentor completes the skills cluster statement sections of the booklet using the following abbreviations.

**P** = Progressing towards. The student is progressing towards but has not achieved the skill. (Intermediate assessment)

**NP** = Not Progressing. The student is not progressing towards the skill. (Intermediate assessment)

**A** = Achieved – Student is achieving or has achieved the skill. (Final assessment)

**N** = Not Achieved - Student is not achieving or has not achieved the skill (final assessment)

**Level of practice**

|  |  |  |  |
| --- | --- | --- | --- |
| Level of Supervision/ Support | Level of Practice | For students to be graded as 'Achieving' they will | For students to be graded as 'Not Achieving' they will |
| Ps/PA provides minimal to indirect supervision | Student actively participates; planning all activities and leading most | Not require prompting Demonstrate performance that is organised and efficient Critique evidence-based practice and its implementation  | Require prompting Be unable to organise care Does not consider evidence-based practice |

**Testimonies**

These can be completed by staff the student has worked with. The aim is to give a fuller assessment of the students learning and performance. Testimonies can also be completed by patients/ clients/ carers as long as the PS/PA agree this is suitable, the patient / client/ carer agree, and their anonymity is ensured.

**Time sheets**

**Minimum hours 187.5**

**Health Visitor**

**To be signed by PS/PA each shift worked.**

**Professional Values**

The following values are essential components of practice. Although there are many ways in which values can be demonstrated the following examples would demonstrate good practice and provide evidence of achievement. Practice Teachers and students may wish to present other examples to demonstrate values, which can be recorded in the space provided.

|  |  |  |  |
| --- | --- | --- | --- |
| **Core Practice Values** | **Examples of Good Practice** | **Consistently demonstrated good practice (Please enter Yes/No for each statement)** | **Practice Assessor** |
| Respect for the patient, carers and other members of the team  | * Always consulting the patient/client and respecting their wishes
* Giving the patient/client the opportunity to discuss their care and achieve concordance
* Respecting an individual's culture, race, sexuality, age, religion, and disability and how it impacts on their health and social care needs.
 |  |  |
| Awareness that the individual has a right to exercise choice. | * Acknowledges and support the rights of individuals and groups.
* Giving information when appropriate, to facilitate informed choice.
* Can recognise when their own personal view could influence the patient's/client's choice.
 |  |  |
| Maintenance of dignity and privacy. | * Ensuring privacy when carrying out personal care.
* Facilitating privacy when discussing intimate or personal information.
* Not using labels, which stigmatise people e.g. not defining people by a condition/diagnosis.
 |  |  |
| Maintenance of confidentiality. | * Understands and practices in accordance with NMC guidelines for professional practice/local policies.
* Is able to discuss issues in relation to confidentiality.
* Understands and communicates to patients/clients the student's role in relation to confidentiality.
 |  |  |
| Recognising and respecting the uniqueness and dignity of individuals, e.g. differences of race, culture, religion, sexuality, gender, disability and age.  | * Is able to discuss their own beliefs and values.
* Is able to recognise their own prejudices and assumptions and is open to being challenged by others.
* Has an understanding of and works in accordance with the equal opportunities policies of the practice area.
* Is able to discuss ways in which discrimination can be countered.
 |  |  |
| Development of a professional approach to nursing. | * Recognise the limitations of own knowledge and skills and to seek advice appropriately.
* Developing a questioning approach.
* Demonstrates consistent punctuality and timekeeping.
* Maintains a professional attitude through personal appearance and presentation.
* Communicates clinical information to the appropriate team member(s).
 |  |  |
| **Please list other examples to demonstrate values** |  |  |  |

|  |
| --- |
| **RECORD OF INITIAL INTERVIEW**Please use and enclose additional pieces of paper if required. Please make sure that each additional piece of paper is dated and signed by PS/PA  |
|

|  |
| --- |
| **Student’s own learning objectives**  |

 |
|

|  |
| --- |
| **Learning objectives agreed with PS/PA** |

|  |
| --- |
| **Action Plan** (please detail how the student will be assessed e.g. direct observation, reflective questioning or discussion). |

**The student has identified the procedures to be adopted in the event of:*** **Cardiac Arrest**
* **Fire**
* **Violence and Aggression**
* **Health & Safety hazards**
 |
| **Please list SHU mandatory training attended below.****Subject Date attended Verified by****Student Signature …………………………………………………………. Date****PS/PA ……………………………………………………..Date**  |

|  |
| --- |
| **RECORD OF INTERMEDIATE INTERVIEW**Please use and enclose an additional piece of paper if required. Please make sure that each additional piece of paper is dated, signed by Practice Assessor  |
|

|  |
| --- |
| **Student’s own learning objectives & self assessment of progress.** |

 |
|

|  |
| --- |
| **Review of achievement of Learning objectives at intermediate interview.**  |

|  |
| --- |
| **Action Plan for further learning objectives following intermediate review.** (please detail how the student will be assessed e.g. direct observation, reflective questioning or discussion) |

 |
| Student Signature …………………………………………………………. DatePractice Assessor Signature………………………………………………………………………………..Date  |
|  |

**CONCERNS ABOUT STUDENT PROGRESS**

The Practice Teacher/ Sign off Mentor & student should formally meet to discuss any concerns expressed about the student’s progress as soon as these arise. The Practice Assessor should inform the Learning Environment Manager and Course Leaders at Sheffield Hallam University as soon as possible so that additional support may be offered. Students should also contact their Personal Tutor or the Link Lecturer for additional support and guidance.

The Practice Assessor should write an action plan on this page which details:

a) The issue(s) of concern & evidence supporting this

b) The help, support and advice that the student will be given

c) The expected outcome(s)

d) The length of time needed for development and

e) Date(s) to review progress in resolving the issue(s) of concern.

|  |  |
| --- | --- |
| Student Signature: ……………………………………  | Date: …………………………………………  |
| Practice Assessor Signature……………………………………  | Date: …………………………………………  |
| The following people have been informed by the Practice Teacher/Sign off mentor that concerns have arisen:  |
| The Learning Environment Manager  | Yes / No  | Sign & date |  |
| The Link Lecturer (Where Appropriate)The Course Leader Yes / No  | Yes / No  | Sign & dateSign & Date |  |

**ACTION PLAN AS A RESULT OF CONCERNS ABOUT STUDENT PROGRESS**

|  |
| --- |
| **Areas of concern** |

|  |
| --- |
| **Support and advice to be offered** |

|  |
| --- |
| **Expected outcomes** |

|  |
| --- |
| **Time required for each area of concern** |

**Review date…………………………………………………………………………………………….**

|  |  |
| --- | --- |
| Student Signature: ……………………………………  | Date: …………………………………………  |
| Practice Assessor Signature: …………………………………… Action plan seen by personal tutor or course tutorSignature: ……………………………………  | Date: ………………………………………… Date: ………………………………………… |

|  |
| --- |
| **RECORD OF FINAL INTERVIEW** Please use and enclose an additional piece of paper if required. Please make sure that each additional piece of paper is dated, signed by Practice Assessor  |
|

|  |
| --- |
| **Student’s own learning objectives & self assessment of achievement** |

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|  |
| --- |
| **Review of achievement of Learning objectives at final interview agreed with Practice Assessor** |

|  |
| --- |
| **General comments on student's achievements and future developments identified.** |

 |
| Student Signature …………………………………………………………. DatePractice Assessor Signature: …………………………………………………………………… Date  |
|  |

**Health Visiting Competencies**

**NMC STANDARDS OF PROFICIENCY**

Aiming for progression to higher level practice and specialist public health practice, these NMC (2004) Standards of proficiency are distributed throughout the four stages of your programme.

|  |  |
| --- | --- |
| Domain | **Outcomes to be achieved** |
| **Search for health needs** | 1. Collect and structure data and information on the health and well-being and related needs of a defined population
 |
| 1. Analyse, interpret and communicate data and information on the health and wellbeing and related needs of a defined population
 |
| 1. Develop and sustain relationships with groups and individuals with the aim of improving health and social wellbeing
 |
| 1. Identify individuals, families and groups who are at risk and in need of further support
 |
| 1. Undertake screening of individuals and populations and respond appropriately to findings
 |
| **Stimulation of awareness of health needs** | 1. Raise awareness about health and social wellbeing and related factors, services and resources
 |
| 1. Develop, sustain and evaluate collaborative work
 |
| 1. Communicate with individuals, groups and communities about promoting their health and wellbeing
 |
| 1. Raise awareness about the actions that groups and individuals can take to improve their health and social wellbeing
 |
| 1. Develop capacity and confidence of individuals and groups, including families and communities, to influence and use available services, information and skills, acting as advocate where appropriate
 |
| 1. Work with others to protect the public’s health and wellbeing from specific risks
 |
| **Influence on policies affecting health** | 1. Work with others to plan, implement and evaluate programmes and projects to improve health and wellbeing
 |
| 1. Identify and evaluate service provision and support networks for individuals, families and groups in the local area or setting
 |
| 1. Appraise policies and recommend changes to improve health and wellbeing
 |
| 1. Interpret and apply health and safety legislation and approved codes of practice with regard for the environment, wellbeing and protection of those who work with the wider community
 |
| 1. Contribute to policy development
 |
| 1. Influence policies affecting health
 |
| 1. Develop, implement, evaluate and improve practice on the basis of research, evidence and evaluation
 |
| **Facilitation of health** **enhancing activities** | 1. Work in partnership with others to prevent the occurrence of needs and risks related to health and wellbeing
 |
| 1. Work in partnership with others to protect the public’s health and wellbeing from specific risks
 |
| 1. Prevent, identify and minimise risk of interpersonal abuse or violence, safeguarding children and other vulnerable people, initiating the management of cases involving actual or potential abuse or violence where needed
 |
| 1. Apply leadership skills and manage projects to improve health and wellbeing
 |
| 1. Plan, deliver and evaluate programmes to improve the health and wellbeing of individuals and groups
 |
| 1. Manage teams, individuals and resources ethically and effectively
 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Search for health needs** | **Surveillance and assessment of the population’s health and wellbeing** | **Progressing** | **Achieving** |
| 1. Collect and structure data and information on the health and well-being and related needs of a defined population  |  |  |
| 2. Analyse, interpret and communicate data and information on the health and wellbeing and related needs of a defined population  |  |  |
| 3. Develop and sustain relationships with groups and individuals with the aim of improving health and social wellbeing  |  |  |
| 4. Identify individuals, families and groups who are at risk and in need of further support  |  |  |
| 5. Undertake screening of individuals and populations and respond appropriately to findings  |  |  |

|  |
| --- |
| Student reflection surveillance and assessment of the populations health and wellbeing (What knowledge and understanding have you gained? How do you plan to continue to develop your practice in this area?) |
|  |
| Practice Assessor signature and date |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Collaborative working for health and well being** | **Progressing** | **Achieving** |
| 6. Raise awareness about health and social wellbeing and related factors, services and resources |  |  |
| 7.Develop, sustain and evaluate collaborative work |  |  |
| Working with and for, communities to improve health and wellbeing |  |  |
| 8. Communicate with individuals, groups and communities about promoting their health and wellbeing  |  |  |
| 9. Raise awareness about the actions that groups and individuals can take to improve their health and social wellbeing  |  |  |
| 10. Develop capacity and confidence of individuals and groups, including families and communities, to influence and use available services, information and skills, acting as advocate where appropriate  |  |  |
| 11. Work with others to protect the public’s health and wellbeing from specific risks  |  |  |
|  |
| Student reflection Collaborative working for health and well being (What knowledge and understanding have you gained? How do you plan to continue to develop your practice in this area?) |
|  |
| Practice Assessor signature and date |
| **Influence on policies affecting health** | **Developing health programmes and services and reducing inequalities** | **Progressing** | **Achieving** |
| 12. Work with others to plan, implement and evaluate programmes and projects to improve health and wellbeing  |  |  |
| 13. Identify and evaluate service provision and support networks for individuals, families and groups in the local area or setting  |  |  |
| Policy and strategy development and implementation to improve health and wellbeing |  |  |
| 14. Appraise policies and recommend changes to improve health and wellbeing  |
| 15. Interpret and apply health and safety legislation and approved codes of practice with regard for the environment, wellbeing and protection of those who work with the wider community  |  |  |
| 16. Contribute to policy development  |  |  |
| 17. Influence policies affecting health  |  |  |
| **Research and development to improve health and wellbeing** |  |  |
| 18. Develop, implement, evaluate and improve practice on the basis of research, evidence and evaluation |  |  |

|  |
| --- |
| Student reflection Developing health programmes and services and reducing inequalities. Research and development to improve health and wellbeing  (What knowledge and understanding have you gained? How do you plan to continue to develop your practice in this area?) |
|  |
| Practice Assessor signature and date |

|  |  |  |
| --- | --- | --- |
| **Promoting and protecting the population’s health and wellbeing** | **Progressing** | **Achieving** |
| 19. Work in partnership with others to prevent the occurrence of needs and risks related to health and wellbeing  |  |  |
| 20. Work in partnership with others to protect the public’s health and wellbeing from specific risks  |  |  |
| **Developing quality and risk management within an evaluative culture** |  |  |
| 21. Prevent, identify and minimise risk of interpersonal abuse or violence, safeguarding children and other vulnerable people, initiating the management of cases involving actual or potential abuse or violence where needed  |
| **Strategic leadership for health and wellbeing** |  |  |
| 22. Apply leadership skills and manage projects to improve health and wellbeing  |
| 23. Plan, deliver and evaluate programmes to improve the health and wellbeing of individuals and groups  |  |  |
| 24. Manage teams, individuals and resources ethically and effectively |  |  |

|  |
| --- |
| Student reflection Promoting and protecting the population’s health and wellbeing, Developing quality and risk management within an evaluative culture, Strategic leadership for health and wellbeing (What knowledge and understanding have you gained? How do you plan to continue to develop your practice in this area?) |
|  |
| Practice Assessor signature and date |

|  |  |
| --- | --- |
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| --- |
| **Testimony**  |

 |
| **Date** | **Signature** |

|  |  |
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| --- |
| **Testimony**  |

 |
| **Date** | **Signature** |

|  |  |
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|

|  |
| --- |
| **Testimony**  |

 |
| **Date** | **Signature** |

#### SERVICE USER TESTIMONIES

This space provides an opportunity for service users and carers with whom the student has worked to comment on their progress. Permission MUST be sought from PA/PS before seeking testimony from any service user or carer. Service users and carers should NOT sign their entries (for reasons of confidentiality).

|  |
| --- |
| ***Please use the following questions to help guide the testimony:*** |
| 1. Was the student courteous and helpful? |  |
| 2. Did the student respect your privacy and dignity? |  |
| 3. Was the student responsive to your requests? |  |
| 4. Was the student caring and compassionate? |  |
| 5. Was the student good at delivering care? |  |
| *Please use this space for any further comments:* |
|  |
| **Date** | **P/S P/A** |

#### SERVICE USER TESTIMONIES

|  |
| --- |
| ***Please use the following questions to help guide the testimony:*** |
| 1. Was the student courteous and helpful? |  |
| 2. Did the student respect your privacy and dignity? |  |
| 3. Was the student responsive to your requests? |  |
| 4. Was the student caring and compassionate? |  |
| 5. Was the student good at delivering care? |  |
| *Please use this space for any further comments:* |
|  |
| **Date** | **PS/PA**  |

**RECORD OF PLACEMENT OUTCOME**

**The student has passed the competencies as stated on the learning agreement AND has met the professional requirements for entry to the NMC register for Adult Nursing/Health visiting (delete as appropriate)**

**Signed ……………………………………………………………………………………..**

**Date………………………………………………………………………………………..**

**Please print name………………………………………………..……………………..**

**Status Practice Assessor……………….……………………..**

**The student has not passed the competencies as stated on the learning agreement AND does not meet the professional requirements for entry to the NMC register for Adult Nursing/Health visiting (delete as appropriate)**

**Signed ……………………………………………………………………………………..**

**Date………………………………………………………………………………………..**

**Please print name………………………………………………..……………………..**

**Status Practice Assessor……………….……………………..**

**Checked and signed by personal tutor**

**Date………………………………………………………………………………………..**

**Please print name & sign………………………………………………..……………..**

**RECORD OF COMPETENCIES NOT ACHIEVED (FAIL)**

|  |  |
| --- | --- |
| **Outcome Number**  | **Please state why the student has been Referred**  |
|  |  |
|  |  |
|  |  |

**RECORD OF COMPETENCIES NOT ACHIEVED DUE TO THE LACK OF OPPORTUNITY (and where simulation is inappropriate)**

|  |  |  |
| --- | --- | --- |
| **Outcome number** | **Outcome not achieved** | **Practice Assessor Signature** |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| **Action Plan (please continue on a separate page if necessary)** |
|  |

**RECORD OF OUTCOMES ACHIEVED THROUGH SIMULATION**

|  |  |  |
| --- | --- | --- |
| **Outcome number** | **Outcome** | **Practice Assessor signature** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |