



## NMC (2018): Realising professionalism: Standards for education and training



## Educational Audit of the Practice Learning Environment

**Realising professionalism: Nursing and Midwifery Council Standards for education and training (NMC 2018 updated 2023)**

**Part 1 Standards Framework for Nursing and Midwifery Education**

**Part 2 Standards for Student Supervision and Assessment**

**Part 3: Programme standards**



*Trawsnewid y gweithlu ar gyfer Cymru iachach  
Transforming the workforce for a healthier Wales*

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## 1. Introduction

The Nursing and Midwifery Council (NMC) (2018) *Realising professionalism: Part 1: Standards framework for nursing and midwifery education and Part 2: Standards for student supervision and assessment* – identify the standards and requirements that need to be in place to deliver safe and effective learning experiences for nursing and midwifery students in practice. Part 2 of these standards also describe the principles of student supervision and assessment in the practice environment, and the role of the practice supervisor, practice assessor and academic assessor.

The audit is undertaken to assess that these standards and requirements are being met by the practice learning environment and therefore the environment is suitable to support effective learning and to support the supervision and assessment of students. This relates to all students undertaking an NMC approved programme.

A partnership approach is undertaken in the assessment of the suitability of a practice environment and the audit is undertaken collaboratively by the individual with designated responsibility to oversee student support and learning from the Practice Learning Environment (PLE) and the named link lecturer / tutor from the Approved Educational Institution (AEI).

Although the audit is undertaken every two years, this may be undertaken more frequently if at any point concerns are raised which may indicate a risk to the safety and effectiveness of the learning environment. This includes any improvement measures required following external body review for example by Health Inspectorate Wales.

## 2. Prior to the audit

The link tutor / lecturer will arrange a suitable time with the PLE for the audit to take place and will send the audit document in electronic format to the PLE six weeks prior to conducting the audit. During this six-week period the PLE will have the opportunity to prepare for the audit and ensure all relevant supporting evidence is available. The previous audit document must be available on the day of the audit together with the student evaluations covering the current audit period.

The audit will be undertaken by the PLE nominated person and the AEI Link Lecturer / tutor who will jointly assess and agree if the standards and requirements are being met to ensure a safe and effective learning environment. The Practice Facilitator (or equivalent) may also contribute to and be part of the audit process. If these are met in full then the area continues to be approved or for new areas becomes approved to support students for a period of two years or sooner if any risks to the safe and effective learning environment are identified.

If the standards are not being met in full but it is still considered to be an appropriate environment then an action plan is agreed, implemented and monitored to ensure any risk is managed. If the audit identifies that the area is not meeting the standards in full and is not considered a safe and effective learning environment, then the area will not be permitted to support any students until agreed actions have been implemented. The PLE and AEI will work together in implementing these actions.

If the area subsequently receives a requirement for any improvement plan as a result of an external body audit, for example Health Inspectorate Wales or Care Inspectorate

Wales, the Practice Learning Environment manager and link lecturer / tutor must assess the suitability of the learning environment and take any action as required. This may require a temporary suspension as a practice learning environment. Where a Practice Learning Environment is shared with other AEIs – comprehensive information and immediate updates must be communicated to all AEIs sharing the placement if there are any perceived risks or change to the practice learning environment. This is the responsibility of the AEI who identifies the risk or need to suspend or escalate a practice area.

### 3. Practice Learning Environment details

<b>Audit of Practice Learning Environment</b>	
Area of practice	
Date of audit	
<b>Practice Learning Environment designated contact</b>	
Name	
Address	
Email	
Direct Telephone number:	
<b>Nominated person to actively support students and address student concerns</b>	
Name	
Email	
Direct Telephone number	
<b>Approved Educational Institution link contact</b>	
Name:	
Address:	
Email:	
Direct Telephone number:	
<b>Practice Facilitator (or equivalent)</b>	
Name:	
Address:	
Email:	
Direct Telephone number:	
<b>Other details:</b>	
Detail of other AEIs using the area for student placements	
Uniform policy	
Hours of Duty:	

#### 4. Audit recommendation

Audit Recommendation		Please tick appropriate box	
Approved to support students for a period of two years or sooner if any risks to the safe and effective learning environment are identified.			
Approved to support students but with review in accordance with the action plan.			
Not approved to support students at this current time until agreed actions have been implemented. The PLE and AEI will work together in implementing these actions.			
<b>Practice Learning Environment designated contact</b> ( <i>Please type name or add electronic signature</i> )			
<b>Signature</b>		<b>Date</b>	
<b>Approved Educational Institution link contact</b> ( <i>Please type name or add electronic signature</i> )			
<b>Signature</b>		<b>Date</b>	

A copy of the audit must be retained by the practice learning provider and the Approved Educational Institution (AEI). Where Practice Learning Environments are shared by more than one AEI, the AEI undertaking the audit must provide a copy to the other AEIs using the PLE. This should be emailed via the Practice Learning Environment / Allocation Office of the relevant AEI.

#### 5. Overview of Practice Learning Environment

Overview of the Practice Learning Environment
<p>Please provide a brief introduction to the Practice Learning Environment (PLE) and an overview of the person/client/service user profile and services offered.</p> <p>Include any other information that the PLE would like the student to consider prior to the placement</p>
<i>Please expand</i>

## 6. Review of Practice Learning Environment student capacity

The review is an assessment of the practice learning environment capacity to support students on the following NMC approved programmes. Please identify the total number of students and which NMC approved programme the environment is able to support.

Programme	Year 1	Year 2	Year 3	Total
Pre-registration Nursing - Adult				
Pre-registration Nursing - Child				
Pre-registration Nursing - Learning Disabilities				
Pre-registration Nursing - Mental Health				
Pre-registration Midwifery				
Return to Practice - Nursing				
Return to Practice - Midwifery				
Return to Practice - SCPHN HV or SN				
Specialist Community Public Health Nursing (SCPHN) - Health Visiting				
SCPHN - School Nursing				
SCPHN - Occupational Health Nursing				
Specialist Practitioner Qualification (SPQ) - Community Childrens Nursing				
SPQ - District Nursing				
SPQ - General Practice Nursing				
SPQ - Community Learning Disabilities Nursing				
SPQ - Community Mental Health Nursing				
Prescribing - V100 /V150				
Prescribing - V300				
Other - please state				
Other - please state				
<b>Total Number at any one time</b>				

## 7. Availability of learning opportunities

### Learning Experiences

All students are provided with safe, effective and inclusive learning experiences. Please identify the learning experiences available.

These should enable the students to:

- a) meet the proficiencies relevant to the programme(s)
- b) develop competence in undertaking specific skills within the scope of practice of the learning environment (Please complete pages 15-20 if the area accommodates pre-registration nursing students)
- c) become more independent in the delivery of person centred care commensurate with the students stage of learning
- d) collaborate and learn with and from other professionals
- e) develop supervision and leadership skills commensurate with the students stage of learning
- f) develop resilience and take responsibility for their learning
- g) make use of supported learning time when in practice
- h) understand and comply with relevant local and national governance processes and policies
- i) feel their diverse needs are met and in compliance with equalities and human rights legislation

Please confirm that all students studying an NMC approved programme will have protected supported learning time and supernumerary status when fulfilling their role as a student.

### Narrative and Evidence:

## 8. Wider learning opportunities

### Opportunities for wider learning experiences

*Including experiences with other Registered Health Care and Social Care Professionals and non-registered health or social care workers i.e. nursery nurses, teachers, care workers, senior care workers and those working with voluntary groups.*

Effective learning experiences must enable students to have opportunities to learn from a range of relevant people in practice learning environments, including service users, registered and non-registered professionals, and other students as appropriate. These experiences must be commensurate with students' stage of the programme and the relevance to the programme learning. It is the responsibility of the nominated Practice Supervisor to oversee these experiences.

Please identify the opportunities available for wider learning experiences and inter-professional learning, if appropriate:

## 9. Client safety

### Client Safety:

The learning environment prioritises the safety of people, including carers, students and educators, and enables the values of The Code (2018) to be upheld. Please identify evidence and provide narrative that the learning environment:

- a) Demonstrates that the safety and well-being of people is a primary consideration
- b) Supports and supervises students in an open and honest way in accordance with the professional duty of candour
- c) Ensures people have the opportunity to give and if required, withdraw, their informed consent to students being involved in their care
- d) Ensures any concerns or complaints affecting the safety or well-being of people are investigated and dealt with effectively
- e) Ensures mistakes and incidents are fully investigated and that actions are recorded, reflected on and disseminated to ensure lessons learnt are implemented.
- f) Ensures students understand how to raise concerns or complaints and are encouraged and supported to do so in line with local and national policies without fear of adverse consequences.

### Narrative and Evidence

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## 10. Supervision and assessment

### Supervision and Assessment of Students

There is evidence that all students are supervised and assessed in accordance with the NMC (2018) Standards for student supervision and assessment.

Please provide narrative and relevant evidence that the following criteria are met:

1. All students on an NMC approved programme are supervised in practice by NMC registered nurses and midwives, and other registered health and social care professionals.
2. Practice supervision ensures safe and effective learning experiences that uphold public protection and the safety of people.
3. There are a sufficient number of suitably prepared and supported Practice Supervisors to offer continuity of support and supervision of students to ensure safe and effective learning experiences.
4. Practice Supervisors have sufficient opportunities to engage with Practice Assessors and Academic Assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising.
5. Practice Supervisors receive ongoing support to prepare, reflect and develop for effective supervision and contribution to, student learning and assessment.
6. There are a sufficient number of suitably prepared and supported Practice Assessors to enable objective assessments of students on NMC approved programmes – (Please ensure the specific programmes the area is able to support are detail. Detail of the numbers of Practice Assessors should correspond to the Practice Providers Database).
7. Practice Assessors have sufficient opportunities to engage with Practice Supervisors and Academic Assessors to ensure a variety of evidence and feedback is considered when undertaking assessments.
8. Practice Assessors receive ongoing support to prepare, reflect and develop to enable them to conduct effective assessments to confirm student achievement of proficiencies and programme outcomes for practice learning.
9. Practice Supervisors and Practice Assessors know how and are supported in raising and responding to concerns regarding student conduct, competence and achievement.
10. There are robust, effective, fair, impartial and lawful fitness for practise procedures in place to swiftly address concerns about the conduct of students that might compromise public safety.
11. Practice Assessors are enabled to maintain current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing.
12. There are sufficient opportunities for the Practice Assessors to periodically observe the student across environments in order to inform decisions for assessment and progression

**Note:** Practice Assessors and Practice Supervisors for students on NMC approved prescribing programmes support and assess learning in line with the NMC (2018) Standards for prescribing.

## Narrative and Evidence:

## 11. Model of supervision and assessment

### Model Of Supervision and assessment

In accordance with *The Code* (2018) all nurses and midwives contribute to practice learning and support students and colleagues to develop their professional competence and confidence.

Practice Learning Environments can use different models of supervision providing they continue to adhere to the NMC (2018) Standards for student supervision and assessment.

#### **Student supervision and assessment**

All students must have a designated Practice Supervisor for each practice learning experience. However, a practice area could employ a buddy system with a prime and secondary supervisor or lead supervisor and other registrants contributing to a 1:1 model which may be more reflective of lone community workers. Please indicate the model of supervision and assessment the practice learning environment has implemented.

## 12. Student evaluations

### **Summary from student evaluations** *(not required for first audit).*

Summary of student evaluations of Practice Learning Environment since previous audit. These should be reviewed by both the practice learning environment and the Link Lecturer/Tutor.

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### 13. Audit Action Plan format

<b>Action Plan (if required)</b>			
To be completed at the time of the audit and signed by auditors. Please list in order of priority (additional action plans can be added or amended following a review).			
	<b>Action</b>	<b>Individuals responsible</b>	<b>Review date</b>
1.			
2.			
3.			

## 14. Glossary of terms:

**Approved education institutions (AEIs):** the status awarded to an institution, or part of an institution, or combination of institutions that works in partnership with practice placement and work placed learning providers. AEIs will have provided us with assurance that they are accountable and capable of delivering NMC approved education programmes.

**Educators:** in the context of the NMC Standards for education and training are those who deliver, support, supervise and assess theory, practice or work placed learning.

**Learning environments:** includes any environment in terms of physical location where learning takes place as well as the system of shared values, beliefs and behaviours within these places.

**Practice Assessors:** NMC registered nurses or midwives who have been prepared and receive on-going support to perform their role

**Practice Supervisor:** any health or social care professional who has been suitable prepared and is supported in an ongoing way to supervise and support student learning

**Practice Learning Partners:** organisations that provide practice learning necessary for supporting pre-registration and post-registration students in meeting proficiencies and programme outcomes.

**Student:** any individual enrolled onto an NMC-approved programme at pre-registration or post-registration level, whether full time or less than full time.

**Supported learning time:** time to facilitate learning. This may include supernumerary status that enables students to be supported in safely and effectively achieving proficiency. Supernumerary status applies to pre-registration students; students in practice or work placed learning must be supported to learn without being counted as part of the staffing required for safe and effective care in that setting.

## 15. Annexe A&B Practice Learning Environment Mapping Tool

(For areas that support pre-registration nursing students)

This mapping tool is to identify opportunities within the particular practice setting being audited whereby students are able to gain exposure in relation to skills and procedures contained within Annexe A&B of Nursing and Midwifery *Future nurse: Standards of proficiency for registered nurses* (NMC 2018).

The mapping will indicate the following:

**No exposure:** This skill/procedure would never routinely occur in this setting.

**Some exposure:** This skill/procedure occasionally occurs in this setting.

**Frequent exposure:** This skill/procedure routinely occurs in this setting.

The tool is not a measure of the practice learning environment and it does not matter if the environment does not offer exposure to these skills/procedures. The tool is to help students identify what they may be able to achieve in each environment, in addition to the wider learning opportunities the practice learning environment offers. This information is relevant to the Approved Education Institution also in terms of allocating student nurses to a variety of experiences throughout their programme.

Please note there are other skills identified in the annexes – the list below focusses the skills that may not be available in every practice learning environment.

<b>Annexe A: Communication and relationship management skills</b>			
<b>Skill/procedure</b>	<b>No exposure</b>	<b>Some exposure</b>	<b>Frequent exposure</b>
3.1 motivational interview techniques			
3.2 solution focused therapies			
3.3 reminiscence therapies			
3.4 talking therapies			
3.6 cognitive behavioural therapy techniques			
3.7 play therapy			
3.8 distraction and diversion strategies			
3.9 positive behaviour support approaches			
<b>Annexe B Nursing procedures</b>			
<b>Skill/procedure</b>	<b>No exposure</b>	<b>Some exposure</b>	<b>Frequent exposure</b>
2.1 take, record and interpret vital signs manually and via technological devices			
2.2 undertake venepuncture and cannulation and blood sampling, interpreting normal and common abnormal blood profiles and venous blood gases			
2.3 set up and manage routine electrocardiogram (ECG) investigations and interpret normal and commonly encountered abnormal traces			

Skill/procedure	No exposure	Some exposure	Frequent exposure
2.4 manage and monitor blood component transfusions			
2.5 manage and interpret:			
- Cardiac monitors			
- Infusion pumps			
- Blood glucose monitors			
- other monitoring devices			
2.6 accurately measure weight and height, calculate body mass index and recognise healthy ranges and clinically significant low/high readings			
2.7 undertake a whole body systems assessment including respiratory, circulatory, neurological, musculoskeletal, cardiovascular and skin status			
2.8 undertake chest auscultation and interpret findings			
2.9 collect and observe sputum, urine, stool and vomit specimens, undertaking routine analysis and interpreting findings			
2.10 measure and interpret blood glucose levels			
2.12 undertake, respond to and interpret neurological observations and assessments			
2.13 identify and respond to signs of deterioration and sepsis			
2.14 administer basic mental health first aid			
2.15 administer basic physical first aid			
2.16 recognise and manage seizures, choking and anaphylaxis, providing appropriate basic life support			
2.17 recognise and respond appropriately to challenging behaviour in accordance with local policies			

Skill/procedure	No exposure	Some exposure	Frequent exposure
3.1 observe and assess comfort and pain levels and rest and sleep patterns			
3.2 use appropriate bed-making techniques including those required for people who are unconscious or who have limited mobility			
3.3 use appropriate positioning and pressure-relieving techniques			
3.4 take appropriate action to ensure privacy and dignity at all times			
3.5 take appropriate action to reduce or minimise pain or discomfort			
3.6 take appropriate action to reduce fatigue, minimise insomnia and support improved rest and sleep hygiene			
4.1 observe, assess and optimise skin and hygiene status and determine the need for support and intervention			
4.2 use contemporary approaches to the assessment of skin integrity and use appropriate products to prevent or manage skin breakdown			
4.3 assess needs for and provide appropriate assistance with washing, bathing, shaving and dressing			
4.4 identify and manage skin irritations and rashes			
4.5 assess needs for and provide appropriate oral, dental, eye and nail care and decide when an onward referral is needed			
4.6 use aseptic techniques when undertaking wound care including dressings, pressure bandaging, suture removal, and vacuum closures			
4.7 use aseptic techniques when managing wound and drainage processes			
4.8 assess, respond and effectively manage pyrexia and hypothermia			

Skill/procedure	No exposure	Some exposure	Frequent exposure
5.1 observe, assess and optimise nutrition and hydration status and determine the need for intervention and support			
5.2 use contemporary nutritional assessment tools			
5.3 assist with feeding and drinking and use appropriate feeding and drinking aids			
5.4 record fluid intake and output and identify, respond to and manage dehydration or fluid retention			
5.5 identify, respond to and manage nausea and vomiting			
5.6 insert, manage and remove oral/nasal/gastric tubes			
5.7 manage artificial nutrition and hydration using oral, enteral and parenteral routes			
5.8 manage the administration of IV fluids			
5.9 manage fluid and nutritional infusion pumps and devices.			
6.1 observe and assess level of urinary and bowel continence to determine the need for support and intervention assisting with toileting, maintaining dignity and privacy and managing the use of appropriate aids			
6.2 select and use appropriate continence products; insert, manage and remove catheters for all genders; and assist with self-catheterisation when required			
6.3 manage bladder drainage			

Skill/procedure	No exposure	Some exposure	Frequent exposure
6.4 assess bladder and bowel patterns to identify and respond to constipation, diarrhoea and urinary and faecal retention			
6.5 administer enemas and suppositories and undertake rectal examination and manual evacuation when appropriate			
6.6 undertake stoma care identifying and using appropriate products and approaches.			
7.1 observe and use evidence-based risk assessment tools to determine need for support and intervention to optimise mobility and safety, and to identify and manage risk of falls using best practice risk assessment approaches			
7.2 use a range of contemporary moving and handling techniques and mobility aids			
7.3 use appropriate moving and handling equipment to support people with impaired mobility			
7.4 use appropriate safety techniques and devices.			
8.1 observe and assess the need for intervention and respond to restlessness, agitation and breathlessness using appropriate interventions			
8.2 manage the administration of oxygen using a range of routes and best practice approaches			
8.3 take and interpret peak flow and oximetry measurements			
8.4 use appropriate nasal and oral suctioning techniques			

Skill/procedure	No exposure	Some exposure	Frequent exposure
8.5 manage inhalation, humidifier and nebuliser devices			
8.6 manage airway and respiratory processes and equipment.			
9.1 observe, assess and respond rapidly to potential infection risks using best practice guidelines			
9.2 use standard precautions protocols			
9.3 use effective aseptic, non-touch techniques			
9.4 use appropriate personal protection equipment			
9.5 implement isolation procedures			
9.6 use evidence-based hand hygiene techniques			
9.7 safely decontaminate equipment and environment			
9.8 safely use and dispose of waste, laundry and sharps			
9.9 safely assess and manage invasive medical devices and lines.			
10.1 observe, and assess the need for intervention for people, families and carers, identify, assess and respond appropriately to uncontrolled symptoms and signs of distress including pain, nausea, thirst, constipation, restlessness, agitation, anxiety and depression			
10.2 manage and monitor effectiveness of symptom relief medication, infusion pumps and other devices			

Skill/procedure	No exposure	Some exposure	Frequent exposure
10.3 assess and review preferences and care priorities of the dying person and their family and carers			
10.4 understand and apply organ and tissue donation protocols, advanced planning decisions, living wills and health and lasting powers of attorney for health			
10.5 understand and apply DNACPR (do not attempt cardiopulmonary resuscitation) decisions and verification of expected death			
10.6 provide care for the deceased person and the bereaved respecting cultural requirements and protocols			
11.1 carry out initial and continued assessments of people receiving care and their ability to self-administer their own medications			
11.2 recognise the various procedural routes under which medicines can be prescribed, supplied, dispensed and administered; and the laws, policies, regulations and guidance that underpin them			
11.3 use the principles of safe remote prescribing and directions to administer medicines			
11.4 undertake accurate drug calculations for a range of medications			
11.5 undertake accurate checks, including transcription and titration, of any direction to supply or administer a medicinal product			
11.6 exercise professional accountability in ensuring the safe administration of medicines to those receiving care			
11.7 administer injections using intramuscular, subcutaneous, intradermal and intravenous routes and manage injection equipment			

Skill/procedure	No exposure	Some exposure	Frequent exposure
11.8 administer medications using a range of routes			
11.9 administer and monitor medications using vascular access devices and enteral equipment			
11.10 recognise and respond to adverse or abnormal reactions to medications			
11.11 undertake safe storage, transportation and disposal of medicinal products			