



King's College Hospital 
NHS Foundation Trust

Profile of Learning Opportunities (PoLO) *for nursing and midwifery students in practice*



Practice Placement ward: S1 (Darwin 1) PRUH



**London South Bank
University**

Introduction to the Ward / Unit

Welcome to: S1 Darwin Unit, Princess Royal University Hospital (PRUH), Kings College Hospital NHS Foundation Trust, and part of the Trauma, Emergency and Acute Medicine Division.

Darwin 1 is a 20 bedded acute medical ward specialising in Dementia and Parkinson disease. We provide care, support and services for patients over 65 years of age including rehabilitation and recovery, complex discharge planning, and end of life care.

As a multidisciplinary team (MDT) we promote a friendly environment for patients and their families. Fundamental to the care we provide is our belief in delivering individualised patient centred care, acting as a person's advocate where needed, ensuring patient inclusion in decision making, and promoting a positive quality of life for the patient.

Location

We are located: Level 2 North Wing, PRUH, Farnborough Common, Kent

Ward / Unit telephone: 01689 864630/1

Welcome to the team

Ward / Unit Manager is: Natalie Burling Natalie.burling@nhs.net

Modern Matron is: Philip Quarcoo philip.quarcoo@nhs.net

Student co-ordinator is: Norelynn Maranan n.maranan@nhs.net

Practice Development Nurse is: Carol Coleman carol.coleman@nhs.net

The ward team consists of:

- Registered Nurses
- Health Care Assistants
- Volunteers
- Chaplaincy
- Domestic / Housekeeper
- Medical team/Gerontologist / Consultants and F1 and F2 doctors
- Physiotherapists
- Occupational therapists
- Dieticians
- Social workers
- Speech and language therapists

- Clinical nurse specialists for example:
 - Continence
 - Diabetes
 - Falls team
 - Discharge co-ordinator
 - Tissue viability
 - Dementia
 - Parkinson disease

Darwin 1 Philosophy

In providing individualised patient-centred care we believe that:

Knowing that feelings matter is the starting point

Accepting a person's reality makes sense

Effective communication is fundamental

Building relationships with family and carers is at the heart

Decisions are made with the patient and their family

We will act as the patient's advocate when necessary

Developing dementia care is all important

Being a 'star' in dementia care works

Facing the truth requires real leadership

Coaching skills lead to action

Supporting staff emotionally produces strength

Shift pattern students may follow

5 day week 7 day week Weekends

12 hour shift: Early start 07.00 to 19.30hrs
 Night shift 19.30hrs to 07.00hrs

Staffing establishment

Registered Nurses – Early shift = 3 (+ward manager Mon to Fri) Night shift = 3

Health care assistants – Early shift = 3 Night shift = 1

Meal breaks

You are permitted a 60 minute break on a 12 hour shift

To contact colleagues:

Bleeping:

Dial 14 followed by the bleep number and the extension you wish to be called back on. Wait for the long tone and replace the receiver

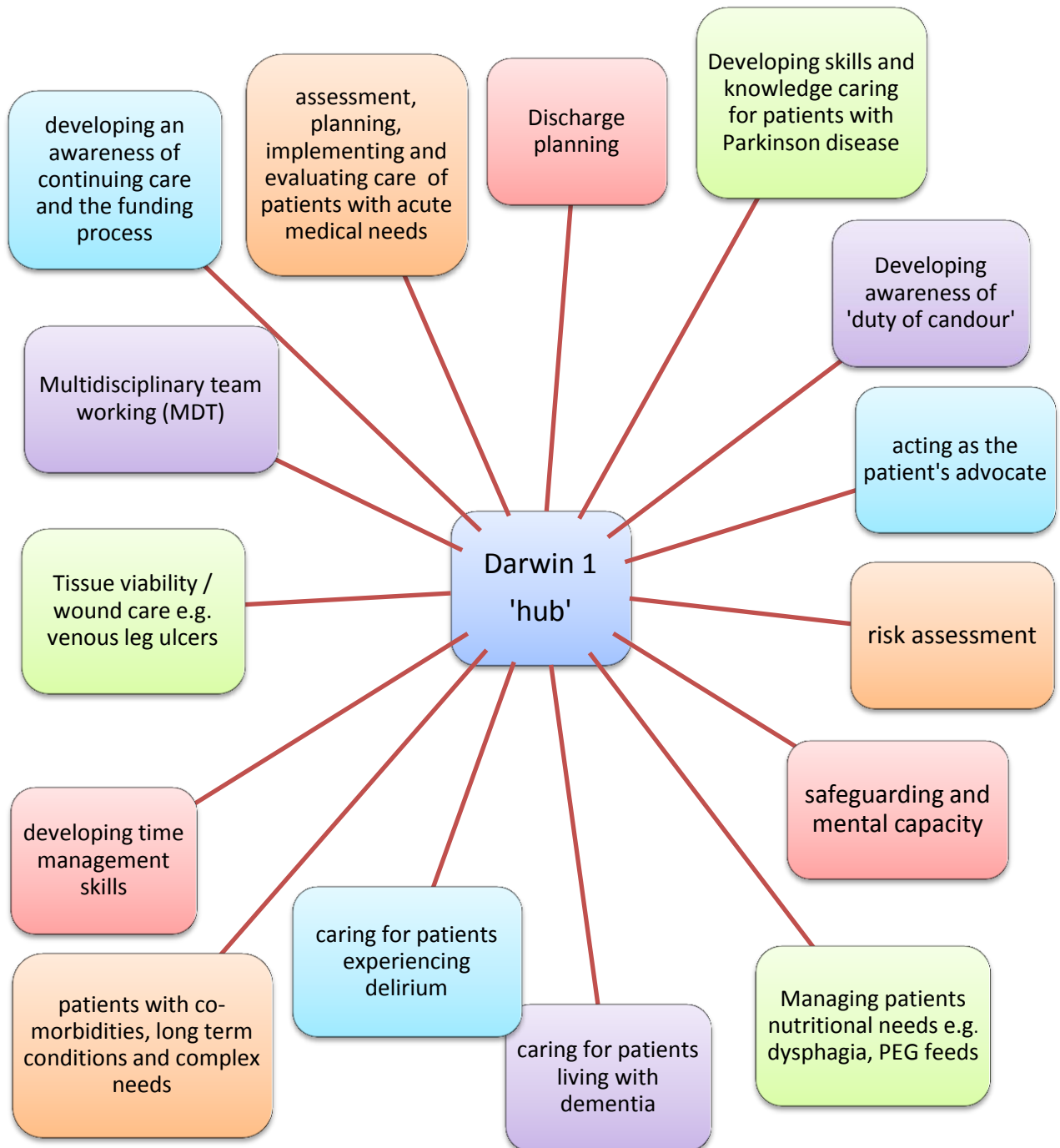
Air calling and Paging:

Dial 737* - the operator will ask for your 'call sign' (i.e. page number e.g. KH 6789) and your message. This is then sent to the person you are trying to contact

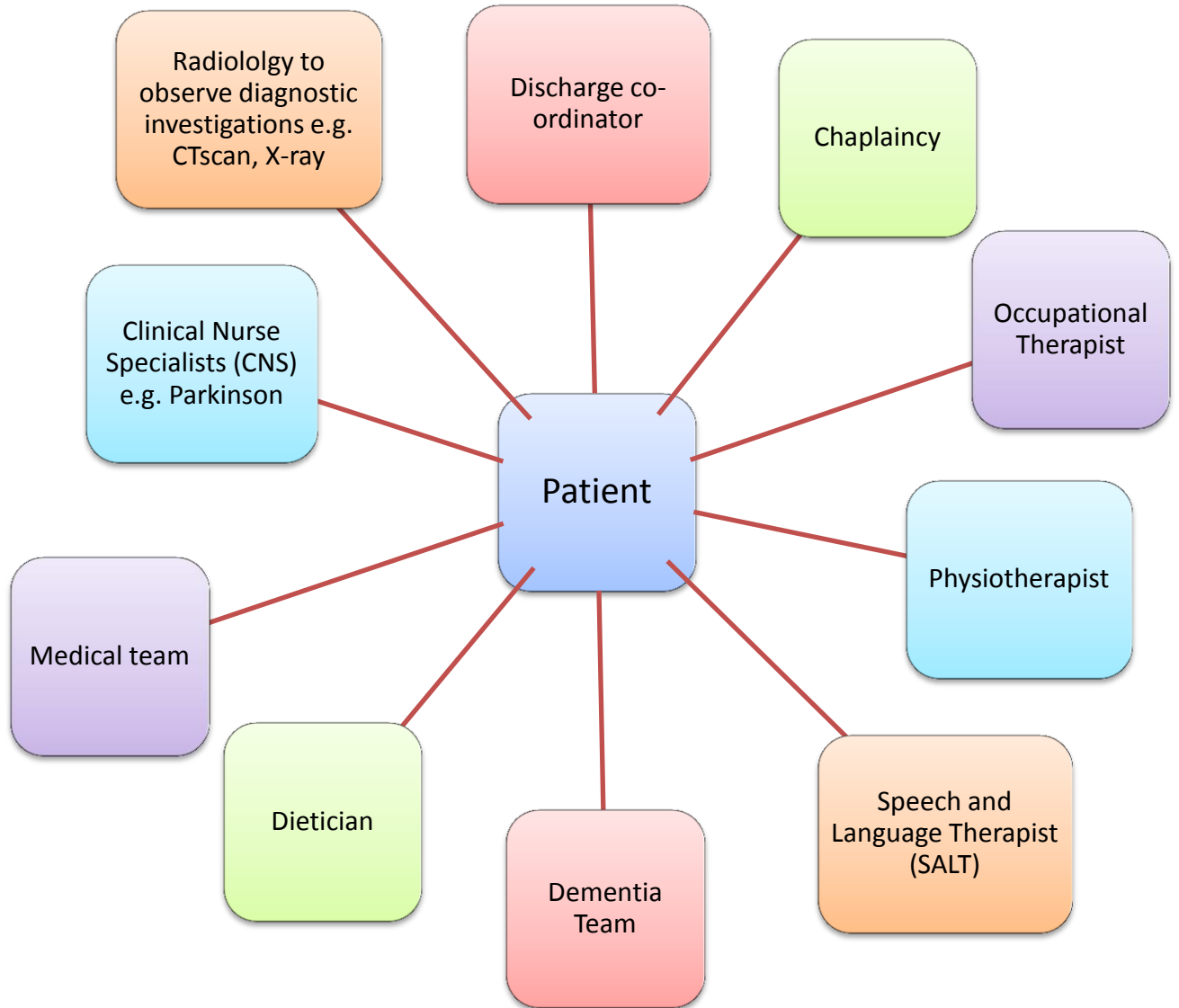
Useful numbers

Cardiac arrest	2222
Fire	2222
Security	65909
Senior Nurse Medicine	Bleep 426
Clinical Site Practitioner	Bleep 224

Hub and Spokes for Darwin 1 ward



Hub and Spokes following the patient journey



Core Learning Opportunities (Under Supervision): ward/unit based

Participate in the assessment of individuals with a range of medical conditions / long term conditions for example:

- ❖ Parkinson's disease
- ❖ Dementia

You may participate in (with context related examples):

- Applying relevant knowledge / measuring & interpreting clinical observations e.g. temperature, pulse, blood pressure, NEWS score, behaviour chart, normal limits for older people (temperature and pyrexia)
- Developing skills in the use of related equipment under supervision e.g. dynamap
- Observing diagnostic procedures e.g. CT scan, X-ray, venepuncture
- Communication e.g. enhancing listening skills, non-verbal, MDT
- Obtaining specific specimens as required e.g. urinalysis, mid-stream urine (MSU), stool
- Documentation e.g. as communication tool for MDT working
- Risk Assessment e.g. falls, need for 'specialing'
- Discharge planning e.g. liaise with family
- Identifying the patient's health & social care needs
- Observing medication review

The learning opportunities above are mapped against the Professional Values, Essential Skills and Practice Assessments in your PLPAD and presented in the box below. This will assist you to identify and plan for what you could achieve.

Adult Programme and Part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome Number
BSc Part 1 and PGDip Part 1	1, 2, 4, 5, 6, 8-10, 12, 13	1-4, 6-9, 12, 13, 19, 20, 21, 22, 25-27, 30 Part 1 Practice Assessment 'Episode of Care'
BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 11, 12, 13	1, 3, 4, 5, 7, 9, 10, 11, 18, 22, and Part 2 Practice Assessment 'Episode of Care'
BSc Part 3 and PGDip Part3	1, 2, 4, 6, 7, 9, 10, 13, 14	1, 2, 13, 16, 17, 18, 23, 24, 27, 29, 43, 49, 52, 53, 54, 55, 62, 66, 69 Part 3 Practice Assessment 'Episode of Care' and 'Medicines Management'

Core Learning Opportunities (Under Supervision): ward / unit based

Participate in the assessment of patients with complex needs – for example:

- ❖ Co-morbidities
- ❖ End of life care
- ❖ Palliative care
- ❖ Complex social needs

You may participate in (with context related examples):

- Developing / enhancing observational skills e.g. normal limits for older people
- Applying / measuring & interpreting clinical observations e.g. implications for older people
- Developing / enhancing communication skills e.g. time to communicate, ensuring understanding, patients with sensory/cognitive impairment
- Analysing situations e.g. deteriorating patient
- Prioritising patient need e.g. acute/longer term
- Decision making e.g. patient inclusion, ‘best interest’ decisions
- Risk assessment e.g. mobility / pressure ulcer
- Identifying the patient’s health & social care needs

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BSc Part 1 and PGDip Part 1	1, 2, 4, 5, 6, 8-10, 12, 13	1-4, 6-9, 12, 13, 19, 20, 21, 22, 25-27, 30
BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 11, 12, 13	1, 3, 4, 5, 7, 9, 10, 11, 18, 22, and Part 2 Practice Assessment ‘Episode of Care’
BSc Part 3 and PGDip part 3	1, 2, 4, 6, 7, 9, 10, 13, 14	1, 2, 13, 16, 17, 18, 23, 24, 27, 29, 43, 49, 52, 53, 54, 55, 62, 66, 69 and Part 3 Practice Assessment ‘Episode of Care’ and ‘Medicines Management’

Core learning Opportunities (Under Supervision): ward based

Participate in the planning of individualised patient centred care for example

- ❖ Patient with advanced dementia
- ❖ Patient with newly diagnosed dementia
- ❖ Patient unable to meet daily living activities independently

You may participate in (with context related examples)

- Prioritisation of patient need e.g. acute care
- Decision making e.g. analgesia prescribed and indications for older patients
- Patient inclusion e.g. informed consent / mental capacity
- Patient centred care e.g. determine patient's priorities / preferences
- Documentation e.g. 'this is me' document
- Multi-disciplinary working e.g. role boundaries
- Communication e.g. listening to patient / family
- Discharge / care transfer planning
- Developing care plans e.g. falls prevention, meeting nutritional needs

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Adult Programme and Part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome Number
BSc Part 1 and PGDip Part 1	1, 2, 4, 5, 6, 8-10, 12, 13	1, 2, 3, 4, 6, 7, 8, 9, 11, 12 and Part 1 Practice Assessment 'Episode of Care'
BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 11, 12, 13	1, 3, 4, 5, 16, 17, 18, 22, 43, and Part 2 practice Assessment 'Episode of Care'
BSc Part 3 and PGDip Part 3	1, 2, 4, 6, 7, 9, 10, 13, 14	2, 8, 11, 13, 16, 17, 23, 24, 28, 41, 53, 67, 70 and Part 3 Practice Assessment 'Episode of Care'

Core learning Opportunities: (Under Supervision) – ward based

Participate in implementing patient centred care and nursing interventions, promoting identity & inclusion for example:

You may participate in /observe/recognise (with context related examples)

- Maintaining functional needs e.g. positioning, transfer, sitting
- Meeting hygiene needs e.g. mouth care, teeth/denture care
- Meeting elimination needs e.g. preventing constipation, privacy and dignity
- Meeting mobility needs e.g. safe footwear
- Meeting psychological and spiritual needs e.g. active listening, chaplaincy referral
- Meeting nutritional needs e.g. assisting with meals, alternative feeding regimes, PEG
- Maintaining fluid balance e.g. monitoring fluid intake and output, assist to drink
- Care specific to identified risk e.g. falls
- Care evaluation, re-assessment & review e.g. acute / recovery /rehabilitation with patient and family/carer/MDT
- Communication with patient, family, MDT e.g. SALT
- Documentation and record keeping e.g. devising care plans
- End of life care e.g. symptom control
- Safeguarding e.g. DOLS, 'specialing'
- Infection prevention and control e.g. handwashing technique, waste disposal
- Aseptic Non Touch techniques (ANTT) e.g. leg ulcer, pressure ulcer care
- Medicines management/administration

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BSc Part 1 and PGDip Part 1	1, 2, 4, 5, 6, 8-10, 12, 13	1, 2, 3, 4, 6, 7, 8, 9, 10, 11, 12, 13, 21, 22, 23, 25, 26-33, 35, 37, Part 1 Practice Assessment 'Episode of Care'
BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 11, 12, 13	1, 3, 5- 7, 9, 10, 12, 13, 16- 18, 22, 27, 28, 32-36, 38, 41, 42- 43, 49, 50, 51 and Part 2 Practice Assessment 'Episode of Care'
BSc Part 3 and PGDip Part 3	1, 2, 4, 6, 7, 9, 10, 13, 14	1, 2, 3, 7, 8, 13, 14, 16-18, 20-22, 24, 25, 27, 29, 43, 46, 47, 49, 52, 53, 56, 59, 60, 62, 67, 70, 71, 76-78, 84, 82, 84, 87-89 and Part 3 Practice Assessment 'Episode of Care' and 'Medicines Management'

Core Learning Opportunities (Under Supervision) – ward based:

Under supervision, participating in the administration of prescribed medication using a variety of routes.

You may participate in administering/observing (with context related examples)

- Preparation to undertake medicine administration
- Oral in various forms e.g. tablets/liquid
- Percutaneous endoscopic gastrostomy (PEG)
- Naso-gastric (NG) tube
- 'Best Interest' covert administration'
- Medication dose calculations
- Policy and procedure e.g. '5 rights'
- Observation only of IV drug administration
- Observe use of infusion pumps/syringe driver
- Accessing available resources e.g. British National Formulary (BNF)
- Patient education/explanation of medication

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Adult Programme and Part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome Number
BSc Part 1 and PGDip Part 1	1, 2, 5- 10, 12, 13	35, 36, 37
BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 12, 13	49, 50, 51
BSc Part 3 and PGDip Part 3	1, 2, 4, 5- 14	78, 79, 82, 83, 84, 87, 88 and Practice Assessment Part 3 'Medicines Management'

Core Learning Opportunities (Under Supervision) – ward based:

Participate in the assessment of patient risk for example:

You may participate in /observe (with context related examples)

- Tissue viability e.g. Waterlow score and prevent pressure ulcers
- Deteriorating patient e.g. NEWS score
- Falls e.g. visual impairment, safe footwear, effect of medical condition on balance
- Nutrition / Hydration e.g. dysphagia
- Mobility e.g. sensory impairment
- Continence e.g. mobility
- Manual Handling
- Infection control
- Disability
- Safe guarding
- Mental capacity
- Health & Safety
- Medicine management

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Adult Programme and Part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome Number
BSc Part 1 and PGDip Part 1	1, 2, 4, 5, 6, 8-10, 12, 13	1, 6, 12, 13, 14, 17, 19, 20, 21, 24, 31, 34
BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 11, 12, 13	4, 7, 10, 13, 22, 37, 41, 44, 48
BSc Part 3 and PGDip Part 3	1, 2, 4, 6, 7, 9, 10, 13, 14	5, 23, 29, 42, 43, 46, 47, 53, 55, 62, 66, 69, 73, 76, 90

Core Learning Opportunities (Under Supervision) – ward / unit based

Participate in preparing for patient discharge /care transfer /handover for example:

- ❖ Patient admitted/transferred to the ward
- ❖ Patient requiring continuing nursing care

You may participate in /observe (with context related examples)

- preparing the bed area to receive a patient
- management of complex discharge
- effective handover at shift change
- transfer to and from another clinical area
- communication e.g. transfer of patient information
- documentation process
- discharge process e.g. liaise with discharge co-ordinator
- MDT & other agencies working
- OT home visit
- Discharge co-ordinator
- Patient / Family support / involvement
- Social services

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Adult Programme and part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome Number
BSc Part 1 and PGDip Part 1	1, 2, 5, 8, 9, 12,13,	1, 2, 4, 6, 8, 9, 19,
BSc Part 2 and PGDip Part 2	1,8, 9, 12, 13	1, 3, 4, 5, 16, 17, 18,
BSc Part 3 and PGDip Part 3	1, 2, 6, 9, 10, 13, 14	1, 2, 3, 7, 8, 9, 10, 11, 13, 16, 17, 24 and Part 3 Practice Assessment 'Episode of Care'

Specific Learning Opportunities (Under Supervision) ward based:

Skills / strategies to communicate with patients with cognitive, and / or sensory impairment

You may participate in /observe (with context related examples):

- Patients with short term memory challenges
- Sensory impairment e.g. visual, auditory
- Developing/enhancing non-verbal communication skills
- Alternative forms of communication e.g. using technology, pictures
- Liaising with occupational Therapist
- Non-English speaker e.g. interpretation service
- Distraction therapy
- Reminiscence therapy
- Liaising with SALT
- Applying patient's hearing aid
- Applying patient's glasses
- Ensuring call bell to hand

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Adult Programme and Part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome
BSc Part 1 and PGDip Part 1	1, 2, 5, 6, 8, 9, 12, 13	1, 2, 3, 4, 7, 8
BSc Part 2 and PGDip Part 2	1, 2, 5, 6, 8, 9, 12, 13	1, 5
BSc Part 3 and PGDip Part 3	1, 2, 6, 7, 9, 10, 13, 14	1, 2, 3, 13, 14, 16, 18, 19, 24

Specific Learning Opportunities (Under Supervision) ward based:

Participate in care of the patient / family during end of life

You may participate in /observe (with context related examples):

- Providing psychological support
- Inter-professional liaison & working
- Developing an awareness of family needs / preferences e.g. preferred place of death
- Dealing with sensitive issues
- Cultural /religious /spiritual needs / chaplaincy e.g. procedure to be followed prior to and after death
- Symptom control e.g. pain management
- Observing syringe driver
- Palliative care team liaison
- End of life care e.g. providing total personal care, pressure ulcer prevention
- Care after death e.g. procedure to follow

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Adult Programme and Part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome
BSc Part 1 and PGDip Part 1	1, 2, 4-13	1-4, 6—12, 14-17, 19-29, (30& 34) as appropriate 31-33, 35-37
BSc Part 2 and PGDip Part 2	1, 2, 4-13	1, 3-7, 10, 18, 22, 27,33, (34, 37, 41 as appropriate), 49-51, 54
BSc Part 3 and PGDip Part 3	1, 2, 4-14	1- 3,(5-9 as appropriate)10-14, 16-25, 27-32, 35, 36, 38, 39, 49, 51-60, 62 63, 64, 66-77 as appropriate) , 78, 81, 83, 84

Specific Learning Opportunities (Under Supervision) ward based

Care and management of a patient's wound for example.

- ❖ Venous leg ulcer
- ❖ Pressure ulcer

You may participate in / observe / recognise (with context related examples):

- Wound assessment and monitoring/evaluation
- Aseptic Non Touch Technique (ANNT)
- Pain assessment / management
- Wound swab if required
- Wound care formulary
- Selection/choice of dressings
- Observe assessment by Tissue Viability Nurse (TVN)

The learning opportunities above are mapped against the Professional Values and Essential Skills in your PLPAD and presented in the box below. This will assist you to identify and plan for what you could achieve.

Adult Programme and Part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome
BSc Part 1 and PGDip Part 1	1, 2, 4-12	1, 4, 6, 25-29
BSc Part 2 and PGDip Part 2	1, 2, 4-12	6, 9, 10, 11, 12, 27, 32, 33
BSc Part 3 and PGDip Part 3	1, 2, 4-14	1, 2, 13, 52, 59, 60, 62, 78, 82, 84

Core Learning Opportunities (Under Supervision) – ward based

Participate in working within a multi-disciplinary team for example

You may participate in (with context related examples)

- Working alongside colleagues during patient interventions
- Multidisciplinary Team (MDT) meetings
- Patient case conferences
- Ward rounds
- Board rounds (daily)
- 'Best Interest' meetings

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BSc Part 1 and PGDip Part 1	1, 2, 5, 4, 6, 12, 13	1, 8, 14
BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 12, 13	1, 5, 18,
BSc Part 3 and PG Dip Part 3	1, 2, 4, 5, 6, 7, 9, 11, 13, 14	1, 2, 3, 16, 17, 20, 24, 35, 43

Specific Learning Opportunities (Under Supervision) ward / unit based:

Observing the role of the Occupational Therapist and Physiotherapist

You may participate in and observe the practitioner (with context related examples):

- Undertaking ward based activities– e.g. functional skills
- Joint patient assessment for home based or ward based rehabilitation
- Selection and use of appropriate equipment e.g. hoist/slings

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Adult Programme and Part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome
BSc Part 1 and PGDip Part 1	1, 2, 5, 6, 8, 9, 12, 13	1, 4, 8
BSc Part 2 and PGDip Part 2	1, 2, 5, 6, 8, 9, 12, 13	1, 3, 4, 16, 18
BSc Part 3 and PGDip Part 3	1, 2, 5, 6, 7, 9, 13, 14	1, 2, 16, 17, 20, 24

Specific Learning Opportunities ward / unit based:

'Shadowing' to observe the role of other health & social care professionals within the context of individual patient need:

You may participate in / observe activities undertaken by (with context related examples):

- Contenance CNS
- Tissue Viability CNS
- Diabetes CNS
- Falls Prevention team
- Social Worker
- Physiotherapist
- Occupational Therapist
- Dietician
- Chaplaincy
- Fracture clinic if appropriate

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Adult Programme and Part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome
BSc Part 1 and PGDip Part 1	N/A	N/A for part 1 students
BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 12, 13	1, 18
BSc Part 3 and PGDip Part 3	1, 2, 4, 5, 6, 7, 9, 10, 12, 14	1, 2, 16, 24

Specific Learning Opportunities (Under Supervision) ward based:

Management of a group of patients under supervision: including assessing, planning, implementing and evaluating care.

- ❖ Part 2 students the opportunity to develop/enhance skills
- ❖ Part 3 students the opportunity to enhance skills and contribute to Part 3 Practice Assessment Episode of Care

You may participate in and develop/enhance skills in (with context related examples):

- Prioritisation of patient needs
- Participating in implementing patient care
- Problem solving
- Decision making
- Communication e.g. handover of patients for the episode of care
- Team working e.g. role limitation
- Leadership e.g. raising concerns
- Delegation as appropriate

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Adult Programme and Part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome
BSc Part 1 and PGDip Part 1	N/A	N/A
BSc Part 2 and PGDip Part 2	1-13	1, 3, 4-13, 16-19, 22, 26, 27, 28, 33, 34-37, 38- 44, 49-51
BSc Part 3 and PGDip Part 3	1-14	1, 2, 7-14, 16-25, 27, 31, 34, 35, 39 - 41, 53, 56-59, 63, 64, 66-73, 75-78, 81, 82-84, 88, 89

Specific Learning Opportunities (Under Supervision) ward based:

Participating in co-ordinating the ward / patients need for a shift – developing / enhancing skills in:

You may participate in and develop/enhance skills in (with context related examples):

- Participating in implementing patient care
- Analysing situation
- Prioritisation
- Problem solving
- Decision making
- Communication e.g. telephone enquiries
- Handover/transfer of patient information for shift (6 hours)
- Team working e.g. MDT working
- Leadership e.g. raising concerns
- Delegation as appropriate
- Participating in clinical audit
- Supervising others e.g. staff rest time

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BSc Part 1 and PGDip Part 1	N/A	N/A
BSc Part 2 and PGDip Part 2	N/A	N/A
BSc Part 3 and PGDip Part 3	1-14	1, 2, 12, 17, 19 ,28, 29, 34-42, 45, 48, 56, 57, 79, 80, 85, 86 and Part 3 Practice Assessment 'Episode of Care'

Reflective learning log

This reflective learning log may be used (**optional**) by you to record learning activity undertaken during a spoke visit / learning opportunity. It provides you with additional evidence on which to focus discussion with your mentor as part of formative feedback. Additionally it serves as a reminder for your personal reflection.

Spoke learning opportunity: _____

Date / time: _____

Learning opportunities identified:

Comments / feed forward from practitioner in area:

Practitioner's signature: _____

Student Reflection Comments:

Student name / signature: _____

Student Placement Evaluation

Please provide the practice team with feedback on your learning experience by answering the questions below, and make any comments you wish to be considered. Please give this to your mentor/ward manager/PDN/CPF or PDM/MPF before you leave. Thank you.

Domain 1 - Establishing effective working relationships (NMC 2008)

Did you receive an orientation to the practice placement?

Domain 2 – Facilitation of learning (NMC 2008)

How did you identify and select appropriate learning opportunities?

Domain 3 – Assessment and accountability (NMC 2008)

How were you provided with feedback on your development and progress?

Domain 4 – Evaluation of learning (NMC 2008)

Were you allocated a mentor and how much time did you spend with them?

Domain 5 – Create an environment for learning (NMC 2008)

How did your mentor and the practice team facilitate your learning?

Domain 6 – Context of practice (NMC 2008)

What did you learn about the specific nature of care provided in the placement?

Domain 7 – Evidence-based practice (NMC 2008)

How were you supported in applying an evidence base to your practice learning?

Domain 8 – Leadership (NMC 2008)

How well were your learning needs met?

How could we enhance your learning experience?

Please make any further comments in the box below.

Thank you for taking the time to complete this evaluation

Reference: Nursing and Midwifery Council (2008). *Standards to support learning and assessment in practice*. Online available from www.nmc-uk.org

Suggested reading:

Blackhall, A., Hawkes, D., Hingley, D. and Wood, S. (2011) VERA framework: communicating with people who have dementia. *Nursing Standard*. 26, 10, 35-39.

Getliffe, K. and Dolam, M. (2007) *Promoting Continence A Clinical and Research Resource* 3rd edition. Elsevier: Philadelphia

Heath, H. and Phair, L. (2011) Frailty and its significance in older people's nursing. *Nursing Standard*. 26, 3, 50-55.

Lapham, R. and Agar, H. (2009) *Drug Calculations For Nurses* (3rd Edition). Hodder and Arnold: London

Ouldred, E. (2007) Common forms of dementia and their management. *British Journal of Nursing* Vol1 04 31-34

Ouldred, E. (2007) Dementia: caring for patients and supporting carers. *British Journal of Nursing* Vol1 04 172-175

Royal College of Nursing (2007) *Helping students get the best from their practice placements*. Online available from www.rcn.org.uk/publications/pdf

Turner, G. and Clegg, A. (2014) Best practice guidelines for the management of frailty: a British Geriatrics Society, Age UK and Royal College of General Practitioners report. *Age and Ageing* 43: 744-747. Online available from <http://ageing.oxfordjournals.org/>

Useful sites:

www.age.uk.org.uk

www.bupa.co.uk/understanddementia for 'How to keep communicating with a loved one as dementia progresses' Talking Toolkit

www.nice.org.uk search for 'Older people'

