



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



Practice Placement ward: M5 and HASU (PRUH)



Introduction to the Ward / Unit

Welcome to: The Stroke Unit at the Princess Royal University Hospital, part of King's College NHS Foundation Trust, which provides specialist treatment for people admitted with a stroke. The Unit is part of the Neurosciences Care Group which sits within the Network Care Division and consists of a Hyper Acute Stroke Unit (HASU) and Medical 5 'step down'. There are 40 beds of which 14 are for acute stroke care and 26 are for rehabilitation and assisted living care.

With easy access to the emergency department, neuro imaging and other clinical diagnostic facilities, and close partnership working with the London Ambulance Service (LAS) and paramedic teams, this Integrated Stroke Unit provides the patient and their family with seamless care in a specially adapted and fully functional unit.

We work closely with our colleagues at Friend's Stroke Unit, Denmark Hill and Frank Cooksey Rehabilitation Unit, Orpington Hospital sharing expertise and best practice.

Research undertaken within the unit and the activity of the research team, is pivotal to improving the care and treatment for patients with stroke. They are involved with the patient from admission via the emergency department, to the stroke unit and into the community following discharge.

Close working partnerships with the community therapy teams also means patients and their families are provided with specialist neuro rehabilitation care / services under the 'London Specialist Neuro Rehabilitation Consortium'.

As a partner in the 'South East London Stroke Network' this ensures the Stroke Unit team meet with other stakeholders to review stroke care in order improve stroke care services around: stroke prevention, hospital stroke care, and stroke rehabilitation.

Location

We are located: North Wing, level O, Princess Royal University Hospital (PRUH), Bromley, Kent

Ward / Unit telephone: HASU 01689 863356 and M5 01689 863363

Welcome to the team

Ward / Unit Manager is: Eliamma Koshy (HASU) eliamma.koshy@nhs.net and Karen Elliott (M5) karenelliott1@nhs.net

Modern Matron is: Annie Kabatooro annie.kabatooro@nhs.net

Student co-ordinator is: Eliamma Koshy and Karen Elliott (ward managers)

Practice Development Nurse is: Stephanie Banfield Stephanie.banfield@nhs.net

Stroke CNS: Chandra Basyal cbasyal@nhs.net

The ward team consists of:

- Registered Nurses (adult)
- Health Care Assistants
- Activities co-ordinator and volunteers
- Chaplaincy
- Domestic / Housekeeper
- Stroke Team
- Stroke Nurse Consultant
- Physiotherapists – ward based
- Occupational therapists – ward based
- Dieticians – ward based
- Social workers
- Speech and language therapists – ward based
- Clinical nurse specialists for example:
 - Stroke
 - Continence
 - Falls team
 - Diabetes
 - Discharge co-ordinator
 - Palliative care

M5 and HASU Philosophy

We are committed to providing high standards of care on Medical 5 Stroke Unit.

Our competent, doctors, nurses and healthcare professionals will work as a team which aims to give you the best service and patient experience.

We will treat you with compassion and protect your dignity at all times.

We will communicate with you clearly regarding your plan for treatment and manage your medical records with diligence and involve you in all aspects of your care.

We will encourage you, promote your independence and care for you at all times

We will stand up for you rights and we are committed to striving for excellence in the delivery of your care

Shift pattern students may follow

5 day week 7 day week Weekends

12 hour shift: Early start 07.30 to 20.00hrs Night shift 20.00 to 07.30hrs

7 ½ hr shift (option) Early 07.30 to 15.30hrs and Late 12.30 to 20.30hrs

Staffing establishment HASU

Registered Nurses – Early shift = 6 Night shift = 6

Health care assistants – Early shift = 2 Night shift = 2

Staffing establishment M5

Registered Nurses – Early shift = 4 Night shift = 4

Health care assistants – Early shift = 3 Night shift = 2

Meal breaks

You are permitted a 60 minute break on a 12 hour shift or 30 minutes on a 7 ½ hr shift

To contact colleagues:

Bleeping:

Dial 141 followed by the bleep number and the extension you wish to be called back on. Wait for the long tone and replace the receiver

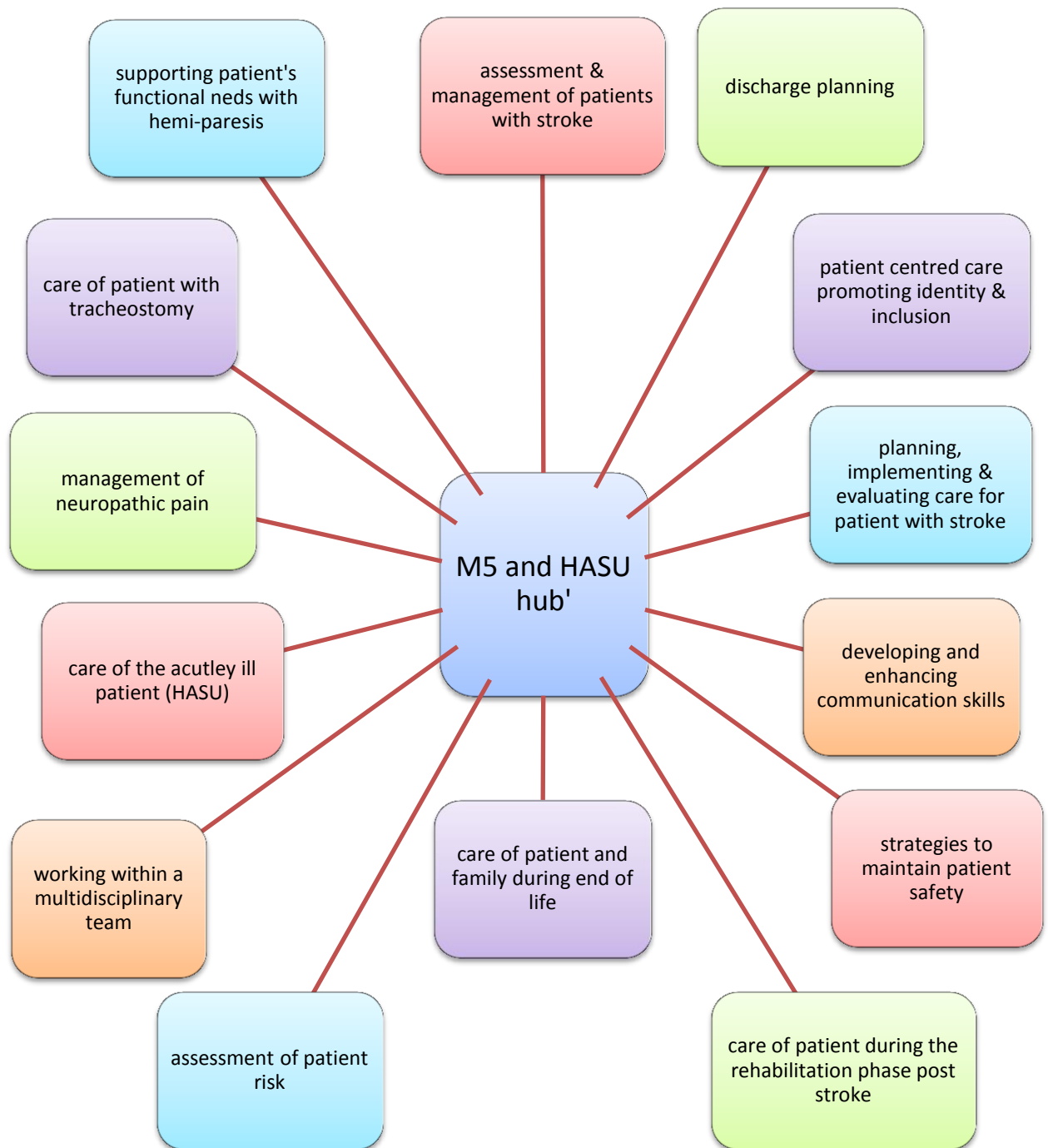
Air calling and Paging:

Dial 100 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

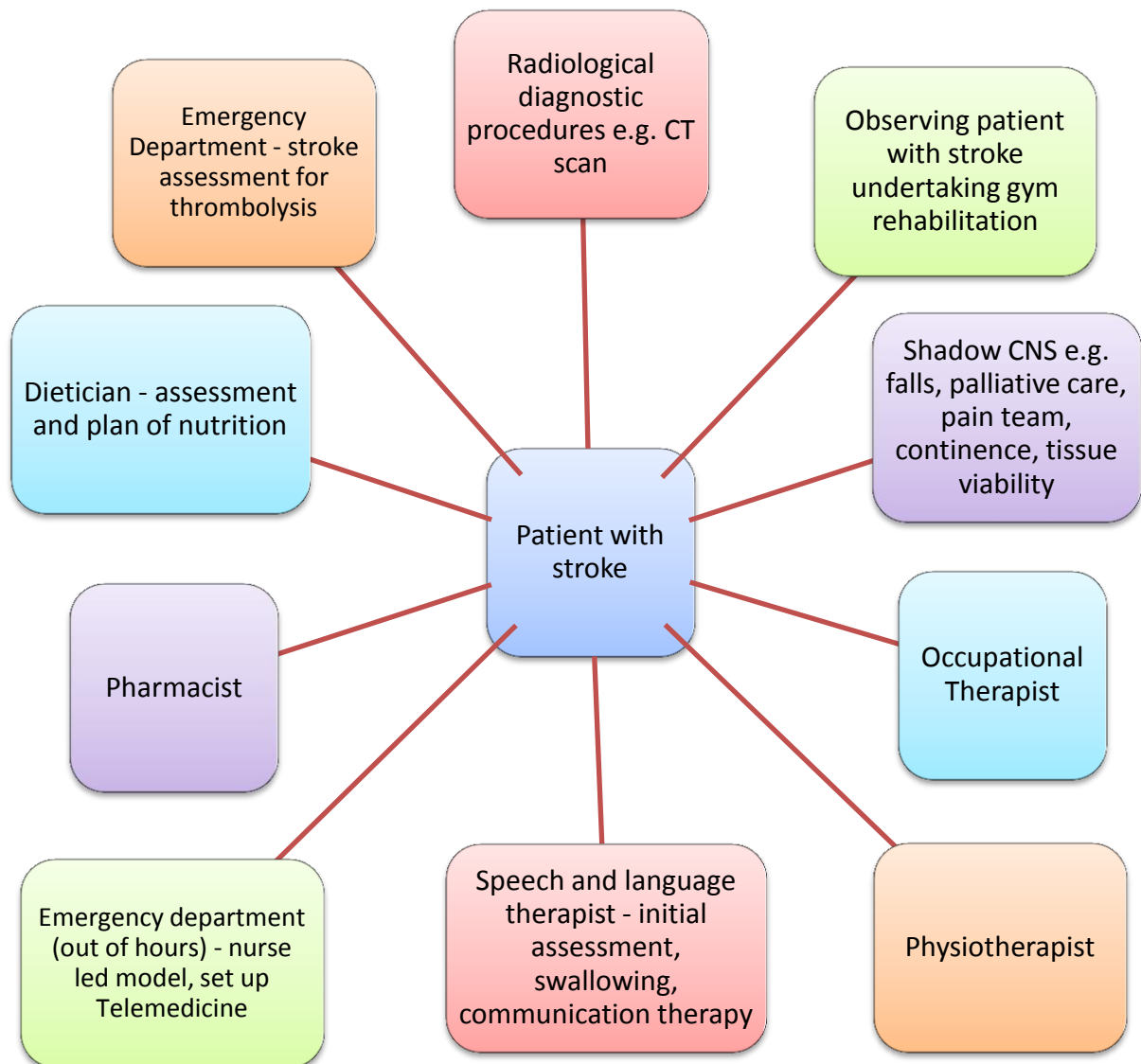
Useful numbers

Cardiac arrest	2222
Fire	2222
Security	phone 65909
Senior Nurse Medicine	Bleep 733

Hub and Spokes for M5 and HASU ward



Hub and Spokes following the patient journey



Core Learning Opportunities (Under Supervision): ward and HASU based

Participate in the assessment of individuals with stroke

- ❖ Using the stroke care pathway

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

- Applying relevant knowledge / measuring and interpreting clinical observations e.g. deteriorating patient, acutely ill patient, neurological observations, Glasgow Coma score (GCS)
- Developing skills in the use of related equipment under supervision
- Observing diagnostic procedures e.g. MRI, ECG and CT scan
- Communication e.g. patients with dysphasia, enhancing listening skills
- Obtaining specific specimens as required e.g. urine (MSU and CSU), blood glucose
- Documentation e.g. as communication tool for MDT working
- Risk Assessment e.g. falls or infection control
- Continence e.g. bladder and bowel
- Psychological e.g. mood assessment
- Discharge planning
- Observe swallowing assessment e.g. dysphagia, refer to SALT
- Identifying the patient's health and social care needs
- Telemedicine

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' and Medicines Management'
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 Part 3 Practice Assessment 'Episode of Care' and 'Medicines Management'

Core Learning Opportunities (Under Supervision): ward and HASU based

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

- ❖ Patients with co-morbidities e.g. diabetes

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

- Developing / enhancing observational skills
- Applying / measuring and interpreting clinical observations e.g. Glasgow Coma Score (GCS), blood glucose
- Developing / enhancing communication skills e.g. non-verbal
- Analysing situations
- Prioritising patient need e.g. deteriorating patient e.g. NEWS and escalation process
- Decision making with MDT
- Risk assessment e.g. mobility / pressure ulcer/waterlow score
- Identifying the patient's health and social care needs
- Discharge planning e.g. CNS and discharge co-ordinator liaison

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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' and 'Medicines Management'
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 and HASU based

Participate in the planning of individualised patient centred care for example

- ❖ Acutely ill patient (HASU)
- ❖ Patient requiring rehabilitation/assisted living (M5)

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

- Prioritisation of patient need e.g. immediate/longer term
- Decision making e.g. MDT working, patient's informed choice
- Patient inclusion e.g. informed consent
- Patient centred care e.g. determine patient's priorities / preferences
- Documentation e.g. stroke pathway, individualised care plan
- Multi-disciplinary working e.g. role boundaries, collaborative working
- Developing/enhancing communication skills e.g. listening to patient, dysphasia and alternative forms of communication, non-verbal, compensatory
- Discharge / care transfer planning e.g. home or nursing home
- Environmental planning e.g. equipment, preparing bed space

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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 and HASU based

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

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

- Functional needs e.g. positioning, transfer, sitting and communication
- Meeting hygiene needs e.g. promoting independence, providing full personal care
- Airway management e.g. observing suctioning, changing airway, mouth care
- Meeting elimination needs e.g. bowel and bladder care, catheter care
- Meeting mobility needs e.g. hemiplegia/paresis
- Meeting psychological needs e.g. dysphasia, change of body image, mood
- Meeting nutritional needs e.g. dysphagia, assisting with meals, managing Nasogastric (NG) and Percutaneous Endoscopic Gastrostomy (PEG) feeds, food supplements
- Maintaining fluid balance e.g. observing IV infusion and accurately recording fluid intake and output
- Care specific to identified risk e.g. falls assessment, pressure ulcer prevention, swallowing
- Care evaluation, re-assessment & review e.g. acute/rehabilitation with patients/family
- Communication e.g. dysphasia, non-verbal, picture/word cards, raising concern
- Documentation and record keeping e.g. writing care plan
- End of life care e.g. symptom control
- Infection prevention and control e.g. practising handwashing technique, PPE
- Medicines management e.g. for neuropathic pain and monitoring

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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 - 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 and unit based:

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

You may participate in administering (with context related examples)

- Oral
- Rectal route
- Percutaneous endoscopic gastrostomy (PEG)
- Naso-gastric (NG) tube
- Patient with 'bridle' nasal loop
- Injections subcutaneous & intra-muscular
- Medication dose calculations
- Observation only of IV drug administration
- Observe related equipment e.g. infusion pumps
- Access available resources e.g. British National Formulary (BNF)

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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 and Practice Assessment Part 2 'Medicines Management'
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 and unit based:

Participate in the assessment of patient risk for example:

- ❖ During the rehabilitative phase of care (M5)
- ❖ During acute stage of illness (HASU)

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

- Tissue viability e.g. equipment to prevent pressure ulcers, decreased GCS
- Deteriorating patient e.g. NEWS score
- Falls e.g. hemi-paresis, hemianopia
- Nutrition / Hydration e.g. dysphagia
- Mobility e.g. hemi-paresis, sensory impairment
- Continence e.g. mobility, type of stroke
- Manual Handling e.g. equipment required
- Infection control e.g. barrier nursing/reverse barrier nursing
- Disability
- Safe guarding
- Health & Safety
- Medicine management e.g. dysphagia, allergies

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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

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

Developing / enhancing skills and strategies to communicate with patients who have cognitive/ sensory /expressive impairment

You may participate in nursing interventions for /observe / identify (with context related examples):

- Patients with dysphasia
- Different types of dysphasia
- Sensory impairment e.g. visual, auditory
- Liaising/observing SALT
- Liaising with Occupational Therapist
- Non-English speaker/interpretation service
- Alternative forms of communication e.g. non-verbal
- Maintaining communication in the unresponsive patient

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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

Core Learning Opportunities (Under Supervision) ward and unit based

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

You may participate in (with context related examples)

- management of complex discharge e.g. liaising with community teams
- effective handover at shift change e.g. correct process for sharing information
- transfer to and from another clinical area
- documentation process e.g. confidentiality
- discharge process e.g. involving patient and family
- MDT and other agencies working
- Discharge co-ordinator
- Family support / involvement
- Social services liaison/referral

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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'

Core Learning Opportunities (Under Supervision) ward and HASU based

Participate in working within a multi-disciplinary team for example with:

- ❖ Patients requiring assisted living care
- ❖ Patients who need acute stroke care

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

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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 PGDip 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/HASU/other units based:

Preparing a patient for and observing diagnostic procedures

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

- Procedure for preparing patient e.g. checklist, providing information to the patient, and transferring care of the patient to the relevant team
- MRI scan
- Video fluroscopy
- Carotid duplex
- CTA (angiogram)
- CT scan head
- Electrocardiogram (ECG) (24 hour)
- Echocardiogram

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BSc Part 1 and PGDip Part 1	1, 2, 5, 6, 8, 9, 12, 13	1, 4, 7, 8, 12, 21, 23, 25
BSc Part 2 and PGDip Part 2	1, 2, 5, 6, 8, 9, 12, 13	1, 6, 12, 16, 17, 18
BSc Part 3 and PGDip Part 3	1, 2, 6, 7, 8, 9, 10, 13, 14	1, 2, 7, 20, 24

Specific Learning Opportunities (Under Supervision) ward 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
- Undertaking Gym based (rehabilitation)

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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 (Under Supervision) ward and HASU based:

Participate in the assessment and management of neuropathic pain for example:

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

- Pain team liaison/referral
- Observing physical assessment of neuropathic pain by e.g. medical /nursing team/physiotherapist
- Recognising specific analgesia for neuropathic pain
- Pain assessment tool
- Administering prescribed analgesia
- Monitoring effectiveness of intervention for pain management

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BSc Part 1 and PGDip Part 1	1, 2, 5, 6, 8, 9, 12, 13	1, 3, 4, 6, 8, 12,
BSc Part 2 and PGDip Part 2	1, 2, 5, 6, 8, 9, 12, 13	5, 10, 11, 12, 49, 50, 51
BSc Part 3 and PGDip Part 3	1, 2, 6, 7, 9, 10, 13, 14	1, 2, 11, 13, 14, 16 -18, 20, 23 - 25, 27, 29, 43, 78, 81 - 84

Specific Learning Opportunities: ward and HASU

'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
- Speech and language therapist
- Tissue Viability CNS
- Diabetes CNS
- Falls prevention team
- Social Worker
- Physiotherapist
- Occupational Therapist
- Dietician
- Chaplaincy
- Pain team

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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 and Part 2 Practice Assessment Episode of Care
- ❖ 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 and patients' needs
- Problem identification / problem solving
- Decision making
- Communication e.g. MDT
- Team working e.g. role limitation/role boundaries
- Leadership e.g. raising concerns
- Delegation
- Participating in clinical audit e.g. safety thermometer
- Supervising others
- Observing the nurse co-ordinator

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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 and HASU based:

Strategies for maintaining patient safety post stroke for example:

You may participate in assisting / undertaking / observing (with context related examples):

- Patient with sensory impairment e.g. visual, touch
- Mobilisation techniques e.g. transferring from bed to chair
- Observing physiotherapist
- Communication strategies e.g. picture/word boards
- Equipment / aids assessment e.g. footwear
- Nutritional needs e.g. aids to promote safety, Dietician for nutritional plan
- Risk assessment e.g. swallow assessment with SALT
- Monitoring effect of medication e.g. neuropathic pain

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BSc Part 2 and PGDip Part 2	1, 2, 5, 6, 8, 9, 12, 13	5, 10, 20, 36, 37, 38, 41-44
BSc Part 3 and PGDip Part 3	1, 2, 4, 5, 6, 7, 9, 10, 12, 14	1, 2, 13, 14, 16, 17, 19, 23, 24, 27, 46, 57, 71, 73, 84

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:

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

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

Meddings, J., Saint, S., Fowler, K., Gaies, E. and Hickner, A., Krein, S. and Bernstein, S.J. (2015) *The Ann Arbor Criteria for Appropriate Urinary Catheter Use in Hospitalized Medical Patients: Results Obtained by Using the RAND/UCLA Appropriateness Method*. Online available from <http://annals.org>

Royal College of Nursing (2012) *Catheter Care RCN Guidance for nurses*. 2nd edition. Online available from <http://www.rcn.org.uk>

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Useful sites:

www.glasgowcomascale.org for the Glasgow Coma Scale

www.stroke.org.uk/

www.who.int/topics/cerebrovascularaccident

