

The Episode of Care Guide



BSc (Hons) Nursing MSc Nursing Return to Practice RNDA

Faculty of Health and Social Sciences

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Support for placement

There is a range of support available for you, your practice supervisors and practice assessors.

Opal support Contact: <u>opalsupport@bournemouth.ac.uk</u> For user access issues and system queries OPALBU.com The user guides for the portfolio are accessible via the home page. <u>User Guides</u>	Practice Education Teams/ Student Link NHS and some of the private providers have practice education teams to support learning in practice. They are led by practice education leads In smaller organisations they have a student link.
University Practice Learning Adviser (UPLA) Team* A university-based practice education team who can advise about placement supervision and assessment. Contact: <u>UPLA@bournemouth.ac.uk</u>	Personal Tutor They can support the academic assessor and student when welfare needs may impact upon the practice element of the programme.
Student support services There are a range of <u>support services</u> that can support a student during their programme. Students should be encouraged to speak to their Personal Tutor who can also support them to access services. <u>Askbu@bournemouth.ac.uk</u> 01202 969696	Additional support The placements team can assist with timesheets and contact placement areas if needed. <u>HSSplacements@bournemouth.ac.uk</u> Organisations provide regular student forums to help support and offer additional learning opportunities Freedom to speak up guardians and champions Placement manager

Glossary

OPAL2

This is the second generation of the Bournemouth University Nursing Portfolio.

Part

The practice portfolio is divided into parts which may not be concurrent with the year of the programme.

Programme Length of programme			Drvt 2	OPAL2 Part 3
MastersThis is a 2-year programme. Students have met the programme entry requirements to commence at PART 2.		N/A	Year 1	Year 2
BSc (Hons) This is a 3-year programme combining theory and practice		Year 1	Year 2	Year 3
Registered Nurse DegreeThis is a 3.5-year programme combining theory, practiceApprentice (RNDA)and work-based experience.		Year 1	Year 2	Year 3/4

Formative

In part 1, there is an opportunity to provide you with feedback and feedforward to support your practice learning. **Summative**

Your episodes of care are summative assessments that must be completed in full by your practice assessor **Fail**

The outcome when a summative element of OPAL2 has not been achieved/passed. Ordinarily, and if appropriate, one further attempt to successfully retrieve the referral will be offered.

Extension

The completed portfolio must be achieved by the submission date as per the assessment schedule. If there is a concern that this will not be achieved, you *must* apply for an extension in accordance with the policy.

Submission

The point at which an assessment must be submitted as per the assessment schedule.

Non-submission

Non-submission and/or incomplete submission of any summative element is a failure of the part, thus requiring a retrieval placement.

Assessment board

This is a university process where assessments are presented to the Chair of the Board and outcomes ratified. In the case of failure, they will confirm the opportunity for resubmission and/or repeating of units as appropriate.

Resubmission

Following a 'fail' of the part, the assessment will be moderated and presented to the assessment board. Students are ordinarily offered one resubmission opportunity for the part, and this will be completed in a retrieval placement

Reflective practice hours

This time, allocated by the university, is to help you complete your portfolio and is added to your student account on Placements on the Web (POW) after placement completion.

Frequently asked questions

I completed my reflection, but my practice assessor wants more information. Can they ask for this?

In short, yes. Your reflection needs to illustrate your understanding of the proficiencies your practice assessor will use to complete the assessment. It should illustrate your key learning. An example is provided in the guide.

I have filled in the reflection, but my practice assessor is insisting that they need to observe a planned episode. Why do I have to repeat it?

Unlike your proficiencies, which you can complete as the year progresses, your episode of care is a planned assessment that your practice assessor needs to directly observe. The episode of care enables them to assess your level of proficiency by direct observation, discussion, and review of your reflective account.

My practice assessor has accidentally referred my assessment, what should I do?

Ask your practice assessor to contact <u>OPAL Support</u> and they will unlock the assessment. OPAL support are a dedicated team that support the management of the OPAL system. As a student, you cannot request amendments to assessment decisions.

My practice assessor / practice supervisor has forgotten their username and /or password.

Ask them to email opalsupport by clicking on this link or from the www.opalbu.com log-in area.

My practice assessor has gone on long term leave, what should I do?

Speak to one of your practice supervisors and ask them to help you identify another practice assessor. If there is a concern that this may not be achievable contact the practice education team for support. If still not resolved contact your academic assessor and the UPLA team

Can I fail the episode of care?

Your practice assessor needs to be confident that you have met the proficiencies. They use the assessment criteria to help them make their decision. If you have been proactive in your preparation, able to respond to any questions, are informed about the assessment and have supported it with a reflection that illustrates your understanding and key learning then you are planning for success.

The reasons for referral are usually due to not organising the assessment in time. Your practice assessor will not know if you want to have the assessment completed unless you discuss this with them.

I can't see my previous placement and last episode of care assessment. What do I do?

Your portfolio is an 'ongoing record of achievement.' You can review your whole portfolio by clicking on the 'view/print' button. You can also download your portfolio at any time and save it as a pdf.

Introduction to the episodes of care

Unlike your proficiencies, which you can complete over the course of the year, your episode of care assessment is a planned event. An episode of care is an assessment that occurs at an agreed time under the direct observation of your practice assessor. This guide is provided to help you plan for the assessments. In each part (Year), you will complete different assessments: -

Programme	Year	Part	Episode of care assessment
RNDA/ BSC	1	1	1 – Providing direct care meeting the needs of a person receiving care.
MSc	1	2	 1 – Caring for a group of people receiving care or individuals with complex care needs. 2 – Caring for a group of people receiving care with increasingly complex health and social care needs.
RNDA/ BSC	2	2	 1 – Caring for a group of people receiving care or individuals with complex care needs. 2 – Caring for a group of people receiving care with increasingly complex health and social care needs.
MSc	2	3	 Supervising and teaching a junior learner in practice, based on the delivery of direct person-centred care. Organisation and management of care for a group/caseload of people with complex care covering all seven platforms.
RNDA/ BSC	3	3	 1 - Supervising and teaching a junior learner in practice, based on the delivery of direct person-centred care. 2 - Organisation and management of care for a group/caseload of people with complex care covering all seven platforms.

A quick guide to the episode of care



This 4 minute <u>presentation</u> describes the episode of care, including roles and responsibilities.

Who assesses the episode of care?



Practice assessor - Your episode of care assessment(s) must be completed by your practice assessor.

Practice supervisor - Can help you prepare for the assessment by offering feedback and opportunities to practice.

Academic assessor - Confirms that your assessment has been completed. Here is the <u>link</u> to the presentation you viewed as part of 'Preparation for Practice.' Roles and responsibilities

When preparing for the assessment you need to be prepared. This is where the interviews can be very useful

	Student	Practice Supervisor (PS)	Practice Assessor (PA)
Pre- placement	 Review the opportunities to complete the episode(s) of care. Confirm submission date Complete orientation section Complete initial interview 		
Initial interview	 Discuss opportunities Agree date for assessment 	 Confirms assessment date with you and your practice assessor 	 Agrees date
Ongoing	 Complete preparation Ask for relevant opportunities to practice 	 Provides feedback to you Provides feedback to the PA 	 Confirms assessment date and time Observes episode of care
Following Assessment	 Complete reflection of key learning Arrange with your practice assessor to complete the written assessment 		 Reviews reflection Complete assessment following discussion

Your academic assessor (AA) confirms the assessment at the end of your placement.

Assessment criteria

The assessment is based upon 'platforms of proficiency'. When you log into OPAL and start your 'episode of care' assessment, you will see that there is additional guidance at the top to help you and your practice assessor. If you click on the '+' sign you will see the assessment criteria that is used to assess your level of practice. The episodes of care are not graded. They are marked as a 'Pass / Fail'.



What is a relevant opportunity for an episode of care?

Over the course of your programme, you will complete a range of placements. Take time to read the assessment and discuss the possible opportunities for assessment when you start placement.

The assessment will differ in accordance with your field of practice.



Practice	Agree opportunities with your practice supervisor Get feedback Review any areas for further development				
Proficiency	 Demonstrate your knowledge, skills, and professional values by: - Being proactive Practicing in accordance with The Code (NMC 2018) Illustrating your key learning in the reflection Providing any additional evidence as required Consider asking your practice assessor to approach for service user feedback 				

Mapping the episode of care to your proficiencies

It can be daunting to look at the list of proficiencies. The episode of care provided substantive evidence to support the proficiencies. Identify the ones that are relevant so that you can complete these at the same time.

Part 1	Part 2	Part 2	Part 3	Part 3
Providing direct care meeting the needs of a person receiving care.	Caring for a group of people receiving care or individual with complex care needs.	Caring for group of people receiving care with increasingly complex health and social care needs	Supervising and teaching a junior learner in practice, based on the delivery of direct person-centred care	Organisation and management of care for a group/caseload of people with complex care covering all seven platforms
Proficiencies 1-5,8,10-12, 14,18- 20,24-26,28,29	Proficiencies 1-3,5-8, 11, 13, 16,21,22,29,30,32	Proficiencies 1-9,11,13,16-18, 21,22,29,30-33	Proficiencies 6,8,18-20, 22,23	Proficiencies 1-11,17-20, 22-29

Considerations for planning your assessment opportunities

Placements occur in a range of environments. Be guided by your practice assessor, the assessments are applicable to all fields of practice and can be applied flexibly. For example, Part 1:

- Mental Health supporting someone to have an IM injection, supporting someone living with dementia
- Adult Providing personal care, providing wound care
- Child and Young Persons Supporting parents to manage a medication regime, caring for a child in hospital or in the school setting, contributing to a baby clinic

In part 2 you are required to be assessed in providing complex care for a group of patients. You make consider that this can only be achieved in ward areas only. As a registered nurse, you need to be able to prioritise and plan effectively.

Examples,

- Mental Health coordinating a caseload on a community placement, leading an assessment clinic
- Adult leading an outpatient clinic, providing care for individuals on 2 occasions in critical care and reflecting how this has helped you to develop your assessment and prioritisation skills.
- Child and Young Persons planning caseload priorities in a health visiting placement, caring for children in the school setting.

Managing your nerves

Observed, structured assessment can cause added anxiety.

What can you do to manage those nerves? Remember we were all students once and we want you to succeed.

Your assessment may not go according to plan, but this is part of the whole process. You will be able to show problem-solving skills, therefore demonstrating flexibility and critical thinking. To help you avoid the nerves, there are several things you can do: -

Clarify	Ask	Rest	Evaluate
Clarify what helps you to manage potentially stressful situations. Discuss these with your practice supervisors and apply them to your practice opportunities.	Ask your practice assessor for guidance What do they expect? Tell them you are apprehensive or nervous.	Rest, eat well and keep hydrated. This may seem obvious, but hunger, thirst and tiredness affect our performance and ability to problem solve.	Evaluate the challenges. Talk to your practice assessor. It is good to know what you can do in the event of the unexpected

Completing the reflections

So that your practice assessor can complete the assessment, following the observation, you will need to complete a reflection. Your portfolio has reflective templates for you to follow. These develop as you progress in your programme so that you can demonstrate an increasing ability to analyse and problem solve.

You can use different approaches to completing the reflections

- 1. What happened, what did I learn, what would I do differently and how it will help my future practice?
- 2. Use the proficiency headings to help guide you. Write a brief description of what happened, Identify your key learning under each of the proficiency headings. Identify the implications for future practice.
- 3. Use the 4 quadrant approach.

Start with a brief description.What would you continue?

- What could you begin to do or do more of?
- What could you consider?
- What could you do less of or stop?

There is no need to: -

- Include references, unless you feel it is appropriate
- Write an essay
- Include descriptions of equipment, medications, the environment. Focus on your care and how you achieved the assessment

Example of a reflection using the proficiency headings

Within your reflection, describe the episode of care and how you assessed, delivered and evaluated care.

During my last week of placement, I cared for a 68-year-old gentleman who was admitted following a fall. He had a past medical history of memory impairment. He had a temperature and elevated heart rate and was diagnosed with a chest infection. Under supervision, I completed his assessment and care plan that included a referral to the physiotherapist, falls risk, pressure area and dietetic needs assessment.

What did you do well?

Assessing needs and planning care – I used open ended questions to gather more information from the gentleman's wife but used simple questions for him to answer in brief responses as he was breathless, and I did not want to tire him. As he was breathing through his mouth, I provided regular mouthcare for his comfort. I was able to explain to my practice assessor why I had identified his personal care needs and prevention of pressure sores

Providing and evaluating care – by providing care in small amounts. It helped him to be less anxious as he was not as short of breath. We provided pressure relieving equipment so that he did not have to change his position as often. I reassessed his pressure area needs as the shift progressed. I monitored his temperature after the paracetamol was given.

Promoting health and preventing illness – I explained the reason for the oxygen therapy. I made sure the team were aware of his anxiety. I provided regular reassurance and explanation as the gentleman would forget where he was.

Improving safety and quality of care – By completing the assessment in detail I was able to let the team know his care needs and we could start the discharge planning process. I made sure that I checked with my practice assessor when unsure.

Coordinating Care - I made sure that the team knew about his memory issues and introduced themselves to him before giving care as he was very anxious. I reported the increase in temperature to my practice assessor and they helped me to alert the medical team. I then assisted with the administration of antibiotics and paracetamol. **What would you have done differently?**

I could have completed a full set of observations and checked his medication chart to see if he had had anti-pyretics previously. I could also have asked his wife if he had had chest infection before. This would have helped me to present a fuller picture for the medical team. My practice assessor went through the use of SBAR with me and has encouraged me to use this in preparing handovers. I realise that I do not really understand oxygen therapy and have spent time revising this area. I have also arranged a spoke with the memory assessment clinic.

You will need to ensure: -

- Confidentiality is upheld
- That the assessment is completed by your practice assessor before you complete the final interview
- That you complete the assessment(s) by the submission date
- That you have proofed your work and checked that your key learning is clearly explained.

What If I don't pass the episode of care assessment?

Reasons why the assessment is not successfully completed: -

- It is forgotten and the submission day passes
- It is not planned, and the practice assessor is asked to complete as an afterthought at the final interview
- That opportunities to practice and clarify expectations have not been utilised
- That there is no evidence of preparation, and rationale for care is not provided

If you are not successful, take your time. We do not always get everything right the first time. Arrange a tutorial with your academic assessor to review the feedback and make a plan. The exam board will confirm an opportunity, if appropriate, to resubmit the assessment at a later point. The exam board makes this decision based upon your programme achievements across the part you are completing. This will not stop you continuing your programme or placements. You will have the opportunity to practice the assessment in readiness.

Assessment checklist

Submission date:

Episode of care			
Have I reviewed the episode of care assessment?			
Have I reviewed the learning opportunities and discussed the opportunity to complete the assessment in this placement?			
Have I clarified with my practice assessor their expectations for the assessment?			
Have we identified a date and time for the assessment?			
Have I discussed the plan with my practice supervisor so that I can practice in advance of the assessment?			
Have I completed relevant reading?			
Have I provided my practice supervisor(s) and practice assessor access to my portfolio?			
Following the assessment, have I completed the reflection in enough detail?			
Before we complete the final interview, have I checked that the assessment has been fully completed?			
If I have a concern or query, do I know what to do and who to speak to?	Name: -		
If I had a concern about the assessment, have I sought support promptly?	Date: -		

Part 1 - Episode of direct care meeting the needs of a person receiving care.

Achieved	Knowledge	Skills	Attitude and values
YES	Is able to identify the appropriate knowledge base required to deliver safe, person-centred care under with some guidance.	In commonly encountered situations, is able to utilise appropriate skills in the delivery of person-centred care with some guidance.	Is able to demonstrate a professional attitude in delivering person centred care. Demonstrates positive engagement with own learning.
NO	Is not able to demonstrate an adequate knowledge base and has significant gaps in understanding, leading to poor practice.	Under direct supervision is not able to demonstrate safe practice in delivering care despite repeated guidance and prompting in familiar tasks.	Inconsistent professional attitude towards others and lacks self- awareness. Is not asking questions nor engaging with own learning needs.

Standard of proficiency	Hints and Tips
Assessing needs and planning care Takes an accurate history and undertakes a person-centred assessment in order to plan effective care.	 Review relevant documents Discuss any areas you are not sure of with your practice supervisor Identify opportunities to practice and obtain feedback
Providing and evaluating care Provides person-centred, evidence-based care in managing dignity, comfort, hygiene, and mobility needs of the individual.	 Ensure you have obtained consent Undertake additional reading, you can have the notes to hand By prepared to explain why you are providing care
Promoting health and preventing illness Applies the principles of health promotion and improvement as appropriate when caring for the individual and their families.	 Think about how you can promote self-care Observe your practice supervisors No need to think big. The little things mean a lot. e.g., foot care, injection site care, handwashing
Improving safety and quality of care Undertakes relevant risk assessments (e.g., falls, skin integrity, mental capacity) that may be required and demonstrates an understanding of the difference between risk aversion and risk management.	 Practice completing the risk assessment and ask for feedback Review previous assessments, what do they tell you? Again, simple is best, e.g., explaining why you are using PPE for infection control
Coordinating Care Utilises a range of communication skills to effectively engage with the person receiving care, their family/carers and members of the multidisciplinary team in the provision and evaluation of care.	 Keep confirming consent Explain what you are doing Think about how you use therapeutic communication skills Document the effect of your care Ensure the team are kept informed, as needed

Part 2 – Episode 1: Caring for a group of people receiving care or individuals with complex care needs.

Achieved	Knowledge	Skills	Attitude and Values
YES	Has a sound knowledge base to support safe and effective practice and provide the rationale to support decision making.	Utilises a range of skills to deliver safe, person centred and evidence-based care with increased confidence and in a range of contexts.	Demonstrates an understanding of professional roles and responsibilities within the multidisciplinary team. Maximises opportunities to extend own knowledge.
NO	Has a superficial knowledge base and is unable to provide a rationale for care, demonstrating unsafe practice	With supervision is not able to demonstrate safe practice and is unable to perform the activity and/or follow instructions despite repeated guidance.	Demonstrates lack of self- awareness and understanding of professional role and responsibilities. Is not asking appropriate questions nor engaged with their own learning.

Standard of proficiency	Hints and Tips
Promoting health Applies knowledge of healthy lifestyle choices in relation to the person/persons physical health, mental health and wellbeing. e.g., smoking cessation.	 Complete reading on health promotion resources Discuss approaches with your practice supervisors
Assessing needs and planning care Accurately undertakes a comprehensive assessment and identifies need and plans care for a range of health needs.	 Familiarise yourself with the documentation system Ensure that you have completed ICT training so that electronic records can be accessed when you start placement Request feedback on your assessments
Providing and evaluating care Demonstrates safe, compassionate, person- centred, evidence-based care that respects and maintains the person/persons' dignity and human rights when managing a range of commonly encountered presentations e.g., anxiety, pain, restlessness, confusion.	 Ensure consent is obtained Explain care clearly and appropriately Identify different approaches that could be considered Gain feedback from your practice supervisors regarding your rationale for care Remember to explain to your practice assessor your rationale for care decisions
Improving safety and quality of care Accurately undertakes risks assessments and demonstrates an understanding of local and national frameworks for managing and reporting risks.	 Familiarise yourself with the assessments Reviews policies Complete additional reading You can bring notes with you to help act as prompts
Leading nursing care and working in teams Uses effective communication skills to manage the care of a small group of people/individuals with complex care needs, demonstrating the ability to prioritise care recognising when and whom to refer/delegate to as appropriate.	 Ask for opportunities to take the coordinator role Ask for feedback Talk to the team, what are their views about 'good delegation'?

Part 2 – Episode 2: Caring for a group of people receiving care with increasingly complex health and social care needs.

Achieved	Knowledge	Skills	Attitude and Values
YES	Has a sound knowledge base to support safe and effective practice and provide the rationale to support decision making.	Utilises a range of skills to deliver safe, person centred and evidence-based care with increased confidence and in a range of contexts.	Demonstrates an understanding of professional roles and responsibilities within the multidisciplinary team. Maximises opportunities to extend own knowledge.
NO	Has a superficial knowledge base and is unable to provide a rationale for care, demonstrating unsafe practice	With supervision is not able to demonstrate safe practice and is unable to perform the activity and/or follow instructions despite repeated guidance.	Demonstrates lack of self- awareness and understanding of professional role and responsibilities. Is not asking appropriate questions, nor engaged with their own learning.

Standard of proficiency	Hints and Tips
Promoting health Discusses the possible influences on the person's / group of people's mental health and physical health and can highlight a range of factors impacting on them and the wider community.	 Reflect on the wider influences that can influence health and well being Discuss with your practice supervisors how these factors can impact upon care and nursing practice
Assessing needs and planning care Utilises relevant knowledge and skills to undertake a comprehensive assessment, continually monitoring a person's condition, interpret signs of deterioration or distress and escalate appropriately.	 Undertake wider reading around care of the deteriorating patient, review your theory units Review care pathways Familiarise yourself with placement assessment tools e.g., MEWS, ABCDE
Providing and evaluating care Applies relevant knowledge and skills in the provision of more complex person-centred, evidence-based care demonstrating effective communication skills and the ability to document effectively.	 Develop your handover skills, consider using SBAR (Situation, Background, Assessment, Recommendation) Discuss prioritisation of care with your practice supervisors
Improving safety and quality of care Undertakes relevant risk assessments, discusses risk management, and can propose improvements to enhance the quality of care.	 Seek out opportunities to develop wider understanding e.g., clinical governance teams Ask to take the lead in assessments
Coordinating and leading nursing care Supports the person/persons receiving care and their families in maintaining independence and minimising disruption to their lifestyle, demonstrating understanding of the need for multi- agency working.	 Ask to take the lead in coordinating care Present at case reviews Talk to patients, service users, carers, and families about what is important to them. Complete learning opportunities with different members of the multi-disciplinary team

Part 3 – Episode 1: Supervising and teaching a junior learner in practice, based on the delivery of direct person-centred care.

Achieved	Knowledge	Skills	Attitude and Values
YES	Has a comprehensive knowledge- base to support safe and effective practice and can critically justify decisions and actions using an appropriate evidence-base.	Is able to safely, confidently and competently manage person centred care in both predictable and less well recognised situations, demonstrating appropriate evidence-based skills.	Acts as an accountable practitioner in responding proactively and flexibly to a range of situations. Takes responsibility for own learning and the learning of others.
NO	Is only able to identify the essential knowledge-base with poor understanding of rationale for care. Is unable to justify decisions made leading to unsafe practice.	With minimal supervision is not able to demonstrate safe practice despite guidance.	Demonstrates lack of self- awareness and professionalism. Does not take responsibility for their own learning.

Standard of proficiency	Hints and Tips
Assessing, planning, providing and evaluating care Chooses an appropriate care activity for the junior learner/peer to engage in and considers the learner's needs and their current level of knowledge and skills.	 You can approach any learner in the placement area Ask them to share their portfolio with you They may have a proforma that you can use to offer them feedback Identify a relevant opportunity to practice, to help you prepare
Leading nursing care and working in teams Effectively prepares the junior learner/peer and provides them with clear instructions and explanations about the care activity they are to engage in.	 Clarify the activity prior to the start of the observed supervision Clarify what will be expected from you and the learner Let your practice assessor know your plan
Improving safety and quality of care The student undertakes a risk assessment to ensure that the person(s) receiving care is not at risk from the learner/care activity. Continuous supervision and support is provided to the junior learner/peer throughout the care activity.	 Clarify that the learner is able to undertake the care under supervision Ensure that consent is obtained Agree how prompting and guidance is best provided prior to the supervised care episode Ask for feedback from the learner
Co-ordinating care: Effectively communicates throughout the care activity, evaluates the care given and provides the junior learner / peer with constructive verbal and written feedback.	 Review coaching techniques provided in theory units Use a feedback framework such as 4 Quadrant/ Feedback/ Feedforward

Part 3 – Episode 2: Organisation and management of care for a group/caseload of people with complex care covering all seven platforms.

Achieved	Knowledge	Skills	Attitude and Values
YES	Has a comprehensive knowledge- base to support safe and effective practice and can critically justify decisions and actions using an appropriate evidence-base.	Is able to safely, confidently and competently manage person centred care in both predictable and less well recognised situations, demonstrating appropriate evidence-based skills.	Acts as an accountable practitioner in responding proactively and flexibly to a range of situations. Takes responsibility for own learning and the learning of others.
NO	Is only able to identify the essential knowledge-base with poor understanding of rationale for care. Is unable to justify decisions made leading to unsafe practice.	With minimal supervision is not able to demonstrate safe practice despite guidance.	Demonstrates lack of self- awareness and professionalism. Does not take responsibility for their own learning.

Standard of proficiency	Hints and Tips
Assessing needs and planning care Demonstrates the ability to assess the needs to develop and deliver person-centred, evidence-based care with agreed goals.	 Ask to take the lead from the outset of placement Review the evidence-based tools used in the placement area Review your theory units
Providing and evaluating care Safely and effectively leads and manages care demonstrating appropriate decision-making, prioritisation and delegation to others involved in giving care. Evaluates and reassesses effectiveness of planned care and readjusts agreed goals.	 Review your portfolio. Are there areas that you have been encouraged to develop further? Ask for relevant opportunities Ask your practice supervisor for opportunities to discuss care decisions and your evidence-base
Communication and interpersonal skills Demonstrates effective communication and interpersonal skills with patients/service users/carers. Communicates with the multi-disciplinary team and staff when delegating care, giving clear instructions, and providing accurate and comprehensive written and verbal reports.	 Ensure consent is obtained Talk to the team, what do they find helpful? Ask to present at case reviews and handovers Practice delegation, ask colleagues the delegation styles they find helpful Gain feedback on your documentation skills
Leading nursing care and working in teams Exhibits leadership potential by demonstrating an ability to manage, support and motivate individuals and interact confidently with other members of the care team. Uses effective management skills to organise work efficiently.	 You do not need to lead a whole department Think about how you work within the team Do you notice when others need help? Do you agree a plan of priorities and review this regularly? Do you ensure that you have organised relevant resources?
Improving safety and quality of care Identifies the risks to patient safety and can articulate processes to escalate concerns appropriately	 Do you know how and when to raise a concern? What is the placement process? How do you use The Code to evaluate when to raise a concern? Are you able to identify how to manage a situation?