FACILITATING STUDENTS’ LEARNING IN PRACTICE

A MENTOR HANDBOOK

Developed by Lothian & Borders Practice Education Facilitator Mentorship Steering Group in collaboration with the Lothian and Borders Practice Education Facilitators

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CONTRIBUTORS

Members of the Working Group
(representing Lothian and Borders Practice Education Facilitators)

Lynsey McMillan  Practice Education Facilitator
NHS Lothian

Anne Moffat  Practice Education Facilitator
NHS Lothian

Lucie Page  Practice Education Facilitator
NHS Borders

Jennie King  Practice Education Facilitator
NHS Lothian

Avril Stobbart  Practice Education Facilitator,
NHS Lothian

Jennifer Traynor  Practice Education Facilitator
NHS Lothian

Acknowledgements

Adapted from original document produced by Susan Key - Lecturer Teaching Fellow, Napier University.
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**INTRODUCTION**

This Handbook has been created by the Lothian and Borders Practice Education Facilitators. It is a resource that will assist and support you in your role as a mentor. Your support, teaching and guidance as a mentor is a valuable part of the students learning experience.

**MENTORSHIP**

The NHS Education for Scotland (NES) report on the Development of Quality Standards for Practice Placements (2003) states ‘mentors/practice assessors have a key role in the support, supervision and assessment of students during clinical placement learning’. This report also emphasises the importance of mentors being supported within their working environment in order to fulfil their role.

**Practice Education Facilitator**

‘Practice Education Facilitator’ (PEF) is a role throughout Scotland which aims to support mentors and mentorship in the clinical areas, helping develop and promote those areas as learning environments. The PEF will provide practical advice and support for mentors and improve communication to and from Higher/Further Education Institutions regarding all aspects of nursing and midwifery training and support (Lothian and Borders Practice Placement Standards Handbook (L&BPPSH), 2004). Throughout Lothian and Borders each Practice Placement has a PEF whose contact details should be posted within the practice placement area.

**Advisory requirements to mentor - Nursing and Midwifery Council (2002):**

- 12 months full time post registration clinical experience or equivalent part time.
- Current NMC registration.
- Same branch/part of the register to the student they are assessing.
- Be prepared for the role of the mentor and have adequate support for the role.
THE ROLE OF THE MENTOR

The NMC (2005) states that a mentor is a nurse, midwife or specialist community public health nurse who facilitates learning and supervises and assesses students in a practice setting. The role of the mentor forms a critical element in ensuring that the student gains the optimum experience from the clinical learning environment. Bennett (2005) highlights that the responsibilities of a mentor are to:

- Foster a relationship that is conducive to nursing.
- Contribute to a supportive learning environment.
- Be aware of how students learn best.
- Ensure that the learning experience is planned.
- Evaluate the clinical learning environment and the student’s performance.

The role will differ depending on the course and the student’s experience, but it is important that the components remain the same. The RCN (2005) recognises that a mentor is a positive role model who is knowledgeable and skilled. In order to be effective, they suggest that the mentor:

- Helps students develop skills and confidence.
- Promotes a professional relationship with students.
- Provides the appropriate level of supervision.
- Assists with planned learning experiences.
- Offers honest and constructive feedback.

The roles of the mentor are to act as:

- An assessor of clinical practice.
- A coach.
- A facilitator of learning.
An assessor of clinical practice

- Supervise students developing clinical competence.
- Document student progression and discussions with the student in their assessment / competency book.
- Undertake a minimum of 3 formal meetings with the student during the placement (Initial, Mid and Final meeting).

A Coach

- Act as a professional role model for the student.
- Discuss learning opportunities available and encourage the student to participate in a range of activities in the practice placement area.
- Promote learning through regular feedback with the student.
- Work alongside the student. Remember they learn from the mentors’ practice.
- Enhance the students learning by discussing the reasons, actions and decisions taken in the delivery of care.
- Ask the student to suggest topics for discussion, to meet their learning needs and outcomes.

A Facilitator of Learning (NES, 2003)

- Welcome the student to the clinical area. Remember first impressions are lasting, so try to introduce the student to the staff and orientate them to the clinical area.
- Orientate yourself with the learning outcomes and competencies the student is expected to achieve during the placement. (Your Practice Education Facilitator can provide assistance with this).
- At an early stage get to know your student and review their clinical experience.
- Work with your Practice Education Facilitator / Education Co-ordinator to develop speciality specific information and orientation packs for your area.
Mentors are responsible for the formative and summative assessment of the student learning in practice (an explanation of the differences between formative and summative assessment is given on pages 11-12). They work closely with the student, Link Lecturer, Education Co-ordinator (where in post), Practice Education Facilitator and other colleagues within the multi-professional service, to enable students to achieve identified learning outcomes. Mentors need continued contact and support to share learning and develop competence.

Benefits of being a Mentor

Although mentorship provides a vast number of challenges, it can also offer many benefits and rewards. These may include:

- Increased professional satisfaction that comes from coaching, facilitating and helping students to grow and develop, personally and professionally.
- The opportunity to develop your Personal Development Plan indicating personal learning achievement and development.
- Providing an opportunity to influence the delivery of patient care now and in the future through student learning.
- The development of teaching, assessing and evaluation skills.
- Students emulating your professional practice.
- Senior colleagues rewarding your achievements, by making opportunities for you to develop your skills, for example through courses and conferences.
- Providing you with evidence of professional development for the Knowledge and Skills Framework (KSF) Core Dimension 2: Personal and People Development.
- Providing tools to support newly qualified staff during the 1st year development programme, known as ‘Flying Start’.
THE STUDENT

Supernumerary Status

It is recognised that students do not form part of the established workforce within a clinical area and therefore have no contractual agreement with the organisation that is providing this supervised placement. Whilst on duty the student should not be included in the staffing numbers. It is important to recognise that experience in the clinical area plays a vital role in both assisting student learning, linking theory to practice and allows the assessment of student capabilities (L&BPPSH, 2004). Therefore, an active part of the mentorship role is in the supervision and the encouragement of the student to participate in the “hands on” delivery of care.

Student – Practice Placement Standards (L&BPPSH, 2004)

Whilst on placement students will have the following expectations:

- Have a named mentor/co mentor.
- To be welcomed to the placement and provided with information and an induction programme.
- Have access to local quality standards for the clinical learning environment.
- Freedom and support to learn and achieve their outcomes.
- Access to a range of teaching and learning resources.
- A team approach to their support.
- Regular and consistent feedback that contributes to the achievement of their learning outcomes.
- To have in place, effective communication and support between the university and the clinical area.
- An overview of learning opportunities available to them to achieve their competencies.
Recommendations for the student and mentor to get the best from the placement.

- The student needs to develop a collaborative approach to working with their mentor and needs to be aware of other learners within the clinical area and their educational needs e.g. trainee clinical support workers, medical students and return to practice nurses.
- The mentor should bring to the attention of their student / Link Lecturer / Practice Education Facilitator any problems and issues affecting their learning (please refer to Appendix One for a ‘Mentors Guide - How to deal with a Student Issue (L&BPPSH, 2004).
- The mentor should bring to the attention of the Link Lecturer / Practice Education Facilitator any concerns that they have with the student falsifying signatures (please refer to Appendix Two – Falsification of Signatures Statement (Napier, 2004).
- It is mandatory that students maintain a record of clinical experience in accordance with NMC / EU directives.
- Both the student and mentor need to familiarise themselves with the assessment documentation. Remembering that support is available from Practice Education Facilitators and Link Lecturers.
- When there are unresolved problems/issues between the student and the mentor the Practice Education Facilitator and Link Lecturer for the area should be informed.
- The clinical attendance record must be maintained and signed by the mentor/co-mentor.
- Students have a responsibility to provide an evaluation of their placement experience. This evaluation is anonymous and the collated information of all students on placement in each area is presented at the annual Practice Placement Audit. (Should you wish to see a copy of the student evaluation form, there is a reference copy in the Lothian and Borders Practice Placement Standards Handbook, 2004).
ASSESSMENTS

Students are required to demonstrate achievement of specific competencies as outlined in the student’s Practice Placement / Proficiency Booklet. These proficiencies are set at a target level, which is the minimum level that must be achieved by the student. Within the Practice Placement Proficiency Book there are two types of assessment, formative and summative.

Mid-Way Placement Discussion – Formative

Formative assessment is an ongoing part of the students’ learning experience and is concerned with the development of the student. Stuart (2002) suggests asking the following questions prior to completing the formative (mid placement discussion) assessment:

- Is the student achieving statutory competencies?
- Is there a demonstration of a growing level of skill?
- Is performance consistent?
- Is there a demonstration of a growing understanding of the rationale underpinning practice?
- Is there a demonstration of development of attitudes and values appropriate to professional practice?
- Is there a demonstration of a developing ability to engage in evidence based and reflective practice?

Please be aware that many factors can affect a student’s progress, if problems can be identified early then appropriate action can be taken.

Final Discussion – Summative

This is the final discussion, which occurs at the end of the practice placement.

- Used to determine the students level of competence.
- Influences the student’s continuation on the programme.
- Must be completed and signed by the mentor.
In addition to the practice placement proficiency booklet, Napier University students also have a second component to the assessment of their clinical practice, a clinical skills record. The purpose of the Clinical Skills Record is:

- To increase the student’s ability to identify learning needs and development of their skills.
- To provide the mentor with information of when the theory related to the skill is taught during the pre-registration programme. This does not mean that the student cannot learn a skill prior to receiving theory input, but the responsibility lies with the mentor to prepare the student for the skill prior to the student performing it.

Problems Associated with assessments

If you feel a student is experiencing difficulties in achieving their competencies you should:

- Initiate a discussion with the student and make a note of the discussion and action taken. *Early intervention is important.*
- Formulate and document an action plan to facilitate meeting the learning outcomes with clear objectives discussed with the student.
- If the problem persists contact the Practice Education Facilitator, Link Lecturer or the student’s personal tutor to discuss the situation.
ATTENDANCE IN PRACTICE PLACEMENT

Individual Universities have established student nurse off duty agreements that govern the shifts that student may work. Off duty should reflect the 24/7 nature of healthcare. All students (according to the individual university agreements) must be rostered to work so called “unsocial” hours at weekends and on night duty.

Napier University (Degree and Diploma programmes)

- Undertake a 37.5 hr week.
- Should experience a full range of shifts (including early, late, 12 hour shifts and weekends).
- Year 1 students should work the first two weeks core shifts. Students are then able to negotiate 12 hour shifts if appropriate to their learning needs and facilitates working with their mentor (Adult Branch only).
- Night duty compulsory in year 2 and year 3 and a recommendation to work one weekend in 3 (Adult Branch only).
- Time sheets must not be signed by mentors in advance of hours worked.

University of Edinburgh (Degree programme)

- Undertake a 37.5 hr week.
- Recommend doing the same shift patterns as mentors where possible.
- Students have their first clinical experience at the end of their first year and can do 12.5hr shifts if educationally appropriate.
Queen Margaret University College (Degree programme)

- Undertake a 37.5 hr week
- WBL = Work Based Learning

**NU1** – students will work the normal day time hours (09.00-17.00hrs) as negotiated with their Public Health Nurse (Health Visitor) mentors.

**NU2 (WBL 4)** - negotiate either core day shifts or 12 hour day shift with mentor. No night duty. 12 hour shift are permitted ONLY IF working with mentor on the same shifts. A combination of options may be appropriate depending on the learning outcomes at different stages of the placement.

**NU2 (WBL 5)** – work the normal day shift pattern of the unit (this placement is usually in out-patient units – 12 shifts and night duty will not be appropriate)

**NU2 (WBL 6)** - work either core or 12 hour day shifts and some night duty. 12 hour shift are permitted ONLY IF working with mentor on the same shifts. Their must be a sound educational reason for working night duty and students MUST be working with their mentor on the same shifts. It is expected that the majority of shifts worked over the duration of the placement would be on day duty. A combination of options may be appropriate depending on the learning outcomes at different stages of the placement.

**NU3** - work either core or 12 hour day shifts and some night duty. 12 hour shift are permitted ONLY IF working with mentor on the same shifts. Their must be a sound educational reason for working night duty and students MUST be working with their mentor on the same shifts. It is expected that the majority of shifts worked over the duration of the placement would be on day duty. A combination of options may be appropriate depending on the learning outcomes at different stages of the placement.

**NU4** - work either core or 12 hour day shifts and some night duty. 12 hour shift are permitted ONLY IF working with mentor on the same shifts. A combination of options may be appropriate depending on the learning outcomes at different stages of the placement.

Prefer only 1 weekend in 5 (but open to negotiation).
REPORTING SICKNESS OR ABSENCE

NAPIER UNIVERSITY - School of Nursing, Midwifery and Social Care

Adult Branch

Students who are unable to attend practice due to illness or any other reason **MUST** inform the person in charge of the placement area before the shift is due to commence and thereafter keep the placement informed of when he/she may return.

If students are unable to make contact with their placement, they must ensure that a friend or relative informs the clinical placement of their absence before the shift is due to commence.

Contacting the placement late in the day or days later is **NOT** acceptable and will result in students failing the professional competencies.

Clinical Staff reporting student absence

It is essential that the university are informed of students’ absence/non appearance in clinical placement, so the university can quickly follow up and take the appropriate action. Guidance regarding student absence reporting is as follows:

**NON - APPEARANCE** of student at the start of a placement. Please inform university immediately.

**ABSENT 1 day** – an isolated day of absence should be recorded in the student’s record of hours card. The university does **NOT** need to be informed.

**ABSENT 1 day on several occasions forming a pattern of absence.** Please record in student’s record of hours card and inform the university.

**ABSENT 3 days +.** Please record in student’s record of hours card and inform the university immediately.

Please leave a message at Napier University; Canaan Lane Reception and this will be forwarded to the appropriate person.

Phone: 0131 455 5636

Email: cl.reception@napier.ac.uk
**Midwifery**

Napier University student midwives should contact the placement area and notify the staff at the earliest opportunity of their absence and keep the placement informed of when they may return. They are required to contact the practice’s link teacher and inform them of any absences during a placement. The student must then follow up the absence with an email stating their name, intake, placement area and date/s of absence, including the type of shift. Further information (particularly for the clinical areas on the documentation of midwifery students absences’) can be found in the ‘Protocol for Student Midwives Absences’ (Napier, 2005).

**Learning Disability & Mental Health**

Napier University Learning Disability & Mental Health students should contact the placement area and notify the staff at the earliest opportunity of their absence and keep the placement informed of when they may return. They are required to contact the university on telephone number 0131 455 5364 and leave a message with the Comely Bank receptionist stating their name and programme leader. The receptionist will forward the information to the programme leader.

**Child Health**

Napier University Child Health students should contact the placement area and notify the staff at the earliest opportunity of their absence and keep the placement informed of when they may return. If the placement is at the RHSC the Clinical Co-ordinator must be contacted via the RHSC main switchboard on 0131 536 0000. They will pass the message on to placement area. Students are also required to contact the University on 0131 455 5364 and leave a message with the Comely Bank receptionist stating their name and programme leader/personal tutor. The receptionist will forward the information to the relevant lecturer.
EDINBURGH UNIVERSITY

In the event of sickness/absence, students should contact the placement area and notify the staff at the earliest opportunity and keep the placement informed of when they may return. They are required to telephone the Department of Nursing general office on 0131 650 3889. The secretary will make a note of the absence and put it into the student’s academic record.

QUEEN MARGARET UNIVERSITY COLLEGE

Students have been instructed that if they are off sick and unable to attend placement they must notify the placement staff at the earliest opportunity and the Department of Health and Nursing at QMUC on 0131 317 3573.
FREQUENTLY ASKED QUESTIONS

WHEN CAN I BECOME A MENTOR?
In order to become a mentor a registered nurse/midwife should have a minimum of one year's post qualification experience, before taking on the role. It is recommended that you experience the role as a co-mentor during the last 6 months of this year. It is also recommended that a recognised mentor preparation course is undertaken prior to mentoring students. Contact Napier University for further information.

ARE THERE LOCAL MENTOR UPDATE COURSES I CAN ATTEND?
Yes. The PEF’s and Napier University provide mentorship updates preparation free to all registered nurses/midwives across Lothian and Borders. For further information contact your Practice Education Facilitator (details are in your Practice Placement Area).

WHAT DO I DO IF I HAVE A PROBLEM WITH A STUDENT I AM MENTORING?
If you require any help with mentoring students, you can contact your Practice Education Facilitator, Link Lecturer or the student’s Personal Tutor.
Please remember that your Practice Education Facilitator will provide guidance and support and will assist you in contacting the appropriate person from any of the Universities (Edinburgh University, Queen Margaret University College and Napier University).

WHAT UNIFORM SHOULD THE STUDENT BE WEARING IN PRACTICE?
Napier University students should adhere to the Napier University Uniform Policy at all times. A copy of this is in Appendix Three.

WHEN DOES A STUDENT HAVE HOLIDAYS?
Napier University student holidays are set by the university and it is very difficult for these to be altered. Please refer to university guidance in Appendix Four (Students’ Non-Scheduled Holiday Leave).
APPENDIX ONE

MENTOR GUIDE- How to deal with a Student Issue

Student Issue

Discuss with person in charge of the placement/Link Lecturer/Practice Education Facilitator

Solved

Not Solved

Discuss with Practice Module Leader/(Details in student assessment book)
Student’s Personal Teacher

Solved

Not Solved

Discuss with Programme Leader

Solved

Write a formal letter to the Head of School

(Adapted from Lothian and Borders Practice Placement Standards Handbook, 2004)
APPENDIX TWO

NAPIER UNIVERSITY
FACULTY OF HEALTH & LIFE SCIENCES

School of Acute & Continuing Care Nursing

Falsification of Signatures

9 November 2004

Dear Mentor

Due to a recent unfortunate incident, we would ask for extra vigilance from mentors and co-mentors. This incident involved falsification of mentor signature in a clinical assessment booklet and record of hours worked card.

May we ask that you check the record of hours entered by the student, and sign it each week? The problem arose because the card had not been signed each week, nor had the hours been checked for accuracy.

It would also be helpful if you contact the University if a student has left the placement without completion of the assessment book.

The charge nurse or mentor may contact the link teacher or programme leader, Helen Sheard at Canaan Lane Campus on 0131-455-5636.

Your co-operation is much appreciated.

Yours sincerely

Veronica Leadbeater
Academic Conduct Officer
APPENDIX THREE

Uniform Policy

AIM

The aim of this policy is to ensure that all students in practice placements project a professional image. Ensuring that clothing is compatible with safe handling and moving and is appropriate to the area of work undertaken, minimising the risk of infection transfer, whilst maintaining staff and patient safety.

A professional appearance is reassuring to patients, relatives and visitors to the hospitals.

Repeated disregard of this policy will be considered as misconduct and the Napier University Student Disciplinary regulations will be invoked.

Table 5- Criteria and Rationale for Student Uniform Policy

<table>
<thead>
<tr>
<th>CRITERIA</th>
<th>RATIONALE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Uniform:</strong> student nurse uniform is provided by Napier University. In trimester 1 of first year, each student is allocated an appointment to be measured up for uniform in the uniform room in the Royal Infirmary, Edinburgh (RIE). Approximately 6 weeks later you will be given notification to collect your uniforms from the RIE.</td>
<td>RIE uniform room has limited storage space.</td>
</tr>
<tr>
<td><strong>NB: Uniforms not collected within 4 weeks of notification will be returned to the manufacturer</strong></td>
<td></td>
</tr>
<tr>
<td>Uniforms should be taken to the RIE sewing room for alterations and repairs as soon as necessary.</td>
<td>Maintenance of good appearance.</td>
</tr>
<tr>
<td>The appropriate year/programme leader must agree replacement of uniforms and notify the uniform room, RIE</td>
<td>To contain cost and minimise the risk of uniforms being used by non-Napier students.</td>
</tr>
<tr>
<td>On completion of the nursing programme or withdrawal from programme, students must return clean uniforms to the RIE sewing room.</td>
<td>To contain cost and minimise the risk of uniforms being used by non-Napier students.</td>
</tr>
<tr>
<td>Uniforms must not be worn outside practice placements, unless on a specific activity and permission has been granted by your mentor/charge nurse. Students MUST wear their own clothes when travelling to and from the hospital.</td>
<td>To minimise transfer of infection.</td>
</tr>
<tr>
<td>Where cardigans/sweatshirts are worn for warmth they should be either navy or black and should be in a good state of repair. This article of clothing should be removed when carrying out any clinical procedure.</td>
<td>To minimise risk of infection and ensure professional appearance.</td>
</tr>
<tr>
<td>CRITERIA</td>
<td>RATIONALE</td>
</tr>
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<td>----------------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>HEADSCARVES:</td>
<td>Where a scarf or a veil is worn, as part of religious observance, students must ensure that the flow of the garment does not interfere with work practice.</td>
</tr>
<tr>
<td>HAIR:</td>
<td>Must be clean, neat, off the face and collar even as a ponytail.</td>
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<tr>
<td></td>
<td>Hair fastenings should be discreet, without adornment</td>
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<tr>
<td></td>
<td>Where hair has been coloured it should be of a subdued tone.</td>
</tr>
<tr>
<td>Male staff should be clean-shaven or beards neatly trimmed.</td>
<td>Minimise infection transfer</td>
</tr>
<tr>
<td></td>
<td>Where as part of religious observation, the cutting or trimming of hair is disallowed or restricted, students are asked to comply with minimising infection transfer risk.</td>
</tr>
<tr>
<td>Scalp Lesions should be medically treated. (Ayliffe et al 1990)</td>
<td>Minimise infection transfer</td>
</tr>
<tr>
<td>FINGERNAILS:</td>
<td>Must be clean, short, neatly manicured without nail varnish.</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>PERFUME/AFTERSHAVE:</td>
<td>Must be discreet.</td>
</tr>
<tr>
<td>JEWELLERY:</td>
<td>Is not permitted except:</td>
</tr>
<tr>
<td></td>
<td>a) wedding ring</td>
</tr>
<tr>
<td></td>
<td>b) one smooth metal stud earring per lobe.</td>
</tr>
<tr>
<td></td>
<td>c) as part of religious observance, jewellery may worn but must be discrete e.g. the wearing of a bangle, a necklace or a ring.</td>
</tr>
<tr>
<td></td>
<td>For staff providing direct clinical care or in the preparation of food the ring MUST BE a plain band.</td>
</tr>
<tr>
<td>WATCHES:</td>
<td>Wristwatches MUST NOT be worn by students providing direct clinical care.</td>
</tr>
<tr>
<td>PIERCING:</td>
<td>Visible body jewellery must always be removed or covered with a blue plaster (with the exception of smooth stud earrings).</td>
</tr>
<tr>
<td>CRITERIA</td>
<td>RATIONALE</td>
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</tr>
<tr>
<td>BADGES: the name badge supplied by Napier University MUST be worn. One other badge may be worn if issued by institution of nursing and midwifery.</td>
<td>Patients have the right to know who is looking after them.</td>
</tr>
<tr>
<td>Staff involved in the direct care of babies and small children should not wear badges in such a way that they may cause injury.</td>
<td>Minimise risk of patient injury.</td>
</tr>
<tr>
<td>FOOTWEAR: shoes must be black or navy, soft soled with enclosed toes and heels, be clean and in a good state of repair. Slip on shoes, such as mules and trainers are NOT acceptable. Students placed in theatre should be guided by the Operating Dept Policy</td>
<td>Footwear in a poor state of repair or poorly fitting are a safety risk. To minimise noise. It is acknowledged that clogs continue to be the shoe of choice in operating theatres.</td>
</tr>
<tr>
<td>UNIFORMS: Must be clean and where students are providing direct patient care they should be changed daily.</td>
<td>Reduce the risk of cross infection.</td>
</tr>
<tr>
<td>DESIGNATED CHANGING FACILITIES: Students are required to make use of the designated changing facilities and must not change in public/staff toilets.</td>
<td>Minimise the risk of infection.</td>
</tr>
</tbody>
</table>

**TRAVELLING IN UNIFORM**

The wearing of uniform outside the hospital premises is **NOT PERMITTED** unless on specific activity and permission has been granted by your mentor/charge nurse. This recommendation is made for the safety and security of all staff and to minimise the risk of cross infection.

Where students, are escorting patients for on-going care and are required to return by public transport, suitable arrangements prior to departure should be made to enable them to return in appropriate clothing.

Requests to wear uniform out with practice placements for formal occasions or where promoting the university must be authorised by the Head of School.
PROTECTIVE CLOTHING

Personal protective equipment consists of items of clothing (e.g. impermeable gloves, shoes with protective, toe-caps or non-slip soles, aprons) or other items worn on the person (e.g. respirators) and are required to protect the wearer from a hazard. The need for personal protective equipment is determined by departmental risk assessment, with the assistance of a health and safety adviser if required. Where the need for personal protective equipment has been recognised in risk assessment, its use must be made compulsory by the department manager and monitored. Details should be recorded in the Health and Safety Manual.

LAUNDERING OF UNIFORM

1. The care and cleanliness of uniforms is the responsibility of the student.

2. Uniforms should be laundered according to the manufacturer’s instruction- refer to labels inside tunic and trousers. To avoid fading it is advised that the trousers are laundered inside out using non-biological powder.

1. Uniforms are made of polyester material and must not be boil washed.

The risk of uniforms being contaminated with blood or body fluids is very dependent on the tasks performed by the healthcare worker. Such contamination carries an inherent risk (low) of transmission of disease, therefore any uniforms which are (visibly) soiled with blood or body fluids must be sent to the central laundry for processing. Where it is known within the clinical area that there is an infection outbreak then uniforms must be sent to the central laundry.

STUDENTS ON COMMUNITY PLACEMENTS/EDUCATIONAL VISITS

Whilst on community placements/educational visits, students may be allowed to wear their own clothes instead of uniform. However, if students are wearing their own clothes in a practice placement, students’ clothing must be clean, neat and appropriate. Students should be guided by their mentors as to the local policy for appropriate dress code. Any student, who in the view of the person in charge of the practice placement, is dressed in a manner considered to distracting or not befitting a student, may be asked to leave the area.
APPENDIX FOUR

SCHOOL OF ACUTE AND CONTINUING CARE NURSING
DIPLOMA IN HIGHER EDUCATION/BACHELOR OF NURSING (ADULT)

STUDENTS’ NON-SCHEDULED HOLIDAY LEAVE

As a result of the increasing difficulty in placing students in practice areas, it is no longer possible to accommodate any student request to alter annual leave. In the past this school has been prepared to negotiate annual leave to accommodate special circumstances such as a practice elective being undertaken abroad; ‘surprise’ holidays and holidays won in competitions, but this will no longer be the case. It is the student’s responsibility to make friends and families aware of this to avoid unnecessary expense and disappointment.

Students are reminded that clinical staff are not authorised to sanction changes to those weeks where a student may or may not attend placement, and should not be approached on this account.

If a student takes a leave of absence to accommodate a holiday or other event, an automatic fail will be assigned to the module. The penalties that accrue from placement failure can be found in the current programme handbook.

This applies equally to all years of the programme and is effective immediately, but any negotiated change that has been confirmed in writing by the year or programme leader will be honoured.

20th July 2005
REFERENCES


SUGGESTED FURTHER READING


SUGGESTED WEB LINKS

Flying Start:
www.flyingstart.scot.nhs.uk

NHS Education for Scotland:
www.nes.scot.nhs.uk

RCN Guidance for mentors of students and midwives:

RCN Helping Students get the best from their practice placements:

Making Practice Based Learning Work:
www.practicebasedlearning.org
MENTOR TOOLKIT

- Lothian and Borders Practice Placement Standards Handbook (Napier University, 2004). Please refer directly to this resource for information on the following:
  - Mentor Guide – How to deal with a student issue - page 69
  - Supernumerary Status - page 28

- Facilitating Students’ Learning in Practice: A Mentor Handbook (Lothian and Borders Practice Education Facilitators, 2006). Please refer directly to this resource for information on the following:
  - Absence/Sickness Guidance – page 14
  - Falsification of Signatures Statement (Napier University, 2004) – page 19
  - Uniform Policy (Napier University) – page 20
  - Students’ Non-Scheduled Holidays – page 24

- Mentor Checklist

- Copies of clinical assessment / competency booklets relevant to practice placement area.

- Napier University, Queen Margaret University and Edinburgh University Course Breakdowns.

- Supernumerary Status – Your Questions Answered (Napier University, 2004).
- The Development of Quality Standards for Practice Placements (NES, 2003) – Leaflet.
- Guidance for mentors of student nurses and midwives (RCN, 2005).
- Helping students get the best from their practice placements (RCN, 2004).
- Failing to Fail Students (NMC News, July 2004) - summary of work carried out by Kathleen Duffy.

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