

Education and Mentor Bulletin 2018

Welcome to the 2018 edition of the education and mentor bulletin.

In this edition, we have inspirational stories of practice learning demonstrated within a wide range of settings. As well as contributions from the nursing and midwifery context this year we are delighted to have welcomed our colleagues from allied health professions to share their experiences.

We have provided links to relevant resources within the articles and there is a further section highlighting useful web-based resources for practice learning.

This bulletin provides a wonderful opportunity to share innovative practices and experiences across Scotland. We hope you enjoy reading the many stories and articles within.

Themes in this edition:

Student experience

Supporting lifelong learning in practice

Innovation in practice



Calling all mentors – Have your say

The NES Annual Nursing and Midwifery Pre-registration Education survey is live between the 8th January until Friday 27th of April 2018.

The survey gathers the views of final placement student nurses and midwives, their mentors and charge nurses, team leaders, care home managers and midwifery team leaders.

Please use the survey links below (there are two links because of the firewalls within the NHS Boards) and have your say on the strengths and challenges of the current pre-registration nursing and midwifery programmes.

<https://response.questback.com/nhseducationforscotland/c8tv4kbbcq>



Mentor & Charge Nurse Survey 2018

We really value your input into this survey and thank you in advance for your help. Should you need further help then please contact e-mail:

N&MPerformanceManagement@nes.scot.nhs.uk

A programme of change for education – Nursing and Midwifery Council proposals

The Nursing and Midwifery Council (NMC) are currently in the middle of a major review of the standards for education and training of nurses and midwives. This is to ensure that nurses and midwives are equipped with the skills and knowledge they need to practice both now and in the future.

Nursing and midwifery practice is continually evolving and the NMC want to make sure that practitioners continue to deliver high quality care. The education and training that they receive is seen as a key factor in achieving this. Standards set out how student nurses and midwives are educated, as well as the skills and knowledge

they require in order to join the register.

A consultation on the proposed changes for nursing took place last year with more than 1000 people and many organisations submitting feedback and comments. These responses are currently being collated and reviewed to shape the development of the final standards documentation. The NMC hope to gain approval for the new standards in April of this year. It is anticipated that all the approved education institutions will adopt the new standards of proficiency for registered nurses by September 2019.



This means that there may be changes in how learning is supported and assessed in practice. The NMC in their consultation proposed three roles to support learning and assessment in practice namely,

- **Practice supervisor**
- **Practice Assessor**
- **Academic Assessor**

Further information on the progress of the programme of change for education can be found on the NMC website or by clicking [here](#) The midwifery standards formal consultation

is due to take place in 2019. Meantime the NMC are looking for your views and want to hear what you think about the role of midwives and how the standards of proficiency need to change in order to meet the challenges ahead. Have your say on “Reshaping the future of midwifery education in the UK”.

Keith Dow

Nursing and Midwifery Practice Educator,
NHS Education for Scotland.

Student experience – preparing the future professional

Alzheimer Scotland as a spoke experience for pre-registration nurses

Alzheimer Scotland, University of the West of Scotland and NHS Dumfries and Galloway worked in collaboration to develop a spoke practice learning experience (PLE) for student nurses currently working in acute adult and mental health areas. The spoke experience consisted of one week out with their allocated PLE to spend at Alzheimer Scotland. This allowed students to gain insight into the development of strategies to better care for people with dementia who access in-patient NHS services.

Feedback received from student nurses identified the unique opportunity this experience provided; in understanding how people with dementia are supported to live well

in the community; and subsequently transfer of some of these skills to acute PLEs.

The success of this experience was shared at a national conference by one of the students. The feedback received from Alzheimer Scotland highlighted this experience as a great opportunity to influence the future nursing workforce, as well as updating their own knowledge.

We feel this is an excellent experience and are considering which further spokes could be developed within the third sector to provide opportunity for other students within PLEs that provide care to patients with complex conditions.

Christine Loy

Practice Education Facilitator,
NHS Dumfries and Galloway

Donna Craig

Practice Education Facilitator/Care Home Education Facilitator,
NHS Dumfries and Galloway





Introducing second year school pupils to Allied Health Professions

In preparation for their future career path school pupils begin to choose subjects they will study in years four to six during their second year of high school. In order to encourage consideration of a career within Allied Health Professions (AHP), I arranged an information event to enable 15 second year pupils to meet practitioners and explore the various roles within AHP.

I initiated the selection process by attending a school assembly and inviting interested pupils to complete a questionnaire. As a result of this, and in consultation with teaching staff, 15 pupils were selected to attend the local acute hospital for a day.

The day incorporated an introduction to the hospital and an opportunity for the pupils to spend time with AHP staff from: occupational therapy, physiotherapy, speech and language therapy, radiography, dietetics and podiatry. Information given included the variety of clinical areas covered by the professions, type of interventions provided by the various roles, and the subjects required for entry into the individual courses.

Feedback obtained from the pupils was positive and comments reflected the broad spectrum of holistic skills required within the roles such as communication, team working and creative thinking. The positivity of staff was also noted and this helped to encourage the students to consider working within a profession they had not previously contemplated.

On reflection, I also gained a lot from the experience. Through organising the event my knowledge in project management developed and increased my understanding of governance processes required for working with school children. Adjusting our style of teaching and facilitation for this audience made us reflect on our education theory and how the information could be best delivered to engage the pupils.

We are excited that future events are now being planned with more schools being targeted and greater representation from AHP colleagues within NHS Fife.

Mig Braid

Allied Health Professions
Practice Education Lead, **NHS Fife**



A local mentor forum

The Whytemans Brae mentor group was developed in 2008 and is a joint venture between staff from a partner university, mental health nursing in Whytemans Brae hospital in Kirkcaldy and the local practice education facilitator. Our initial remit in providing a forum for clinical staff was two-fold. Firstly, to provide the opportunity for peer support with any mentoring issues, and secondly to facilitate the dissemination of current drivers and changes affecting clinical staff within their mentor role. The group's remit has extended over the intervening years and we have welcomed further partner university representatives, staff from learning disability and community nursing services, the local care home education facilitator alongside other guest speakers. The forum has always been well supported by our nursing management and attended by our senior nurse, underlining the importance of the forum.

From inception the group has endeavoured to ensure it remains active and mentor led, and we are proud to have achieved this. While there have been occasions where attendance has dwindled, often due to clinical commitments, we have experimented with different approaches to sustain the group, such as arranging meeting times in the evening to encourage mentors working night shift to participate. Through seeking regular feedback from attendees, we have made positive changes which have been beneficial in maintaining attendance over the years.

Forums are arranged several times a year and minutes are disseminated to all previous attendees to keep staff, unable to attend a particular forum, up-to-date and encourage ongoing interest. Evaluations show that the group is a valued forum for staff, providing direct contact with educational staff as well as giving the opportunity for sharing evidence based practice and discussing and resolving mentor issues in a supportive, non-judgemental environment.

Carey McCabe
Staff Nurse, NHS Fife





A collaborative placement for an occupational therapy student working with the Fire Service

I was the lucky occupational therapy student who was chosen for a collaborative practice learning experience. It was the first partnership between Queen Margaret University, NHS Fife (over 65 mental health service) and the Scottish Fire Service.

With minimal knowledge of mental health and fire services, I was nervous and excited about the experience. Early on I noted that both services aimed for similar outcomes such as: reducing the risk of falls, fire, and hospital admissions therefore allowing people to remain in their own homes safely. I completed home visits with both services, gaining insight into their different approaches. One of the benefits of a collaborative approach is each team member plays to their strengths.

Visits with the fire service allowed me to use my skills and training to contribute to positive outcomes. For example, on one occasion I was able to use my occupational therapy training to contribute to the assessment process and completion of the relevant health information required for a safe evacuation in the event of a fire. The knowledge I gained from the fire service has enhanced my perspective on fire prevention and how I complete assessments. This experience allowed me to work in new and innovative ways across different sectors, and see health and social care integration in action.

Lorraine Davie

Occupational Therapy Student/
Occupational Therapy Clinical
Support Worker

Queen Margaret University



Chief nurse forums - chief nurses empower student nurses to have a voice

As chief nurse for one of three acute hospitals in NHS Lanarkshire, I am continually striving to improve standards of care for our patients. As an NHS Board we promote a culture of being open and honest, and recognise that any person entering our care areas has the potential to offer valuable feedback.

Francis (2013) recommended that providers of education should adopt a proactive approach

to encouraging openness on the part of their trainees. As a result the chief nurses across NHS Lanarkshire and the practice education facilitators (PEFs) decided to create a forum to engage with pre-registration nursing students who were currently on their practice learning experience (PLE). This ensures they have a forum to express any concerns and share their experiences.

The forums are bi-annual, open to all pre-registration students and attendance is voluntary. The session opens with an overview of the hospital in terms of size, services delivered, as well as current and future developments. I also update on patient safety initiatives and patient feedback. I continue by opening the floor for a question and answer session, encouraging the student nurses to be open regarding their practice learning experiences as well as the support and mentorship received. Additionally, students are encouraged to offer suggestions on how to improve patient care and the quality of their experience. Recognising some students may not feel confident to speak up, feedback is also facilitated by the use of a comments box and the option of one-to-one meetings. I relay all feedback from the forum to the relevant teams.

Personally, I find this a very enjoyable and rewarding experience. It gives me the opportunity to introduce myself and set the standards expected of students. It also allows me to meet with the nurses of the future, influence their professionalism and discuss my expectations of the care they will deliver to the patients.

Ruth Thompson
Chief Nurse,
University Hospital Monklands,
NHS Lanarkshire



Supporting second year medical students to integrate into clinical environment

I would like to share my experience as a healthcare support worker (HCSW) in the dermatology and rheumatology unit within NHS Lothian and my involvement with a pilot project, supporting second year medical students to integrate into the clinical environment. This pilot was a new and inspiring experience for myself and colleagues, enabling us to work collaboratively with junior medical students at the beginning of their programme.

It involved medical students working within a busy specialised unit alongside and supported by a HCSW for a two-week period. The medical students undertook 12.5 hour shifts across a seven-day week rota. This project gave students an opportunity to join the HCSWs in their everyday practice; providing insight to our role within the nursing team while enabling them to engage with the patient on a more personal level through the provision of hands on personal care.

When first approached to assist in this project, I wondered what I could contribute to the medical students' learning. However, I quickly realised I was able to share my experience and skills from my HCSW role, to demonstrate collaborative team working. Overall feedback from the students was positive. The experience was described as beneficial and alleviated their anxieties around working with a team and that they appreciated the opportunity to deliver hands on care relating to nutrition, hydration and communication. The students' feedback also indicated they appreciated and recognised that good communication skills are required by all team members when providing person centred care.

Rhona McVay
Healthcare Support Worker,
NHS Lothian



Offering an alternative practice learning experience within a remote and rural area

Working as a district nurse (DN) and practice teacher within the remote and rural Shetland Islands, I feel very privileged to work in such a lovely environment with supportive, enthusiastic colleagues. I want to share my journey and the unique experience Island district nursing offers with other DN students from out with Shetland. DN students working towards the specialist practitioner qualification can experience a week with the team during their practice learning experience.

The aim of offering this opportunity is to explore ways of working on a remote island and gain an understanding of the challenges we face as district nurses coordinating care throughout the islands. This allows DN students to gain direct experience and knowledge of remote and rural community nursing.

The experience offers insight into island life and how resilient nursing teams need to be due to the remoteness of some of our visits. This enables reflection and comparison of working experiences from a busy city to a remote island, while supporting shared learning and practice development.

I would encourage and welcome student district nurses to Shetland who wish to experience working life within a remote and rural setting.

Michelle Wilkinson

District Nurse, **NHS Shetland**







Public health training for student nurses within Renfrewshire

Nursing students from the University of the West of Scotland in Paisley are placed with Renfrewshire's children and families' teams three times a year. Historically student nurses have been given an opportunity to hear about the work of the local health improvement team while in the practice learning environment (PLE). This year we were asked if we could offer additional input to support achieving students' learning outcomes within practice.

We developed and piloted a public health training programme with the cohort of student nurses in the PLE in early 2017. The aim of the training programme was to provide students with knowledge of the main public health priorities and key information on these topic areas. We hoped that they would use the knowledge gained on the programme to influence their practice going forward.

The training was delivered over three days. They initially attended health behaviour change training, and in supporting practice learning objectives covered the following topics:

- cancer prevention
- second hand smoke
- understanding mental health
- alcohol awareness
- drug awareness
- sexual health
- oral health
- sun awareness
- infant feeding
- Play@home

17 student nurses completed a three day pilot training programme. The evaluation of the programme was extremely positive. They reported having a better understanding of the scale of public health and the main public health priorities. They also felt more confident going forward to discuss these issues with patients, having clarified many misunderstandings based on the myths that surround areas of public health. Many reported that they would actively encourage early interventions and would be able to signpost people to local services for additional support.

Based on the student's feedback we will make improvements to future programmes. The training sessions will be shorter but more frequent and early years specific training will be delivered at the start of their PLE.

Following the success of the initial programme all students on PLEs with the children and families' teams will participate in the public health training programme. In the future, we hope that this training will be extended to all nursing students on PLEs within Renfrewshire.

This collaboration between health improvement and children's services has enhanced the experience of student nurses within Renfrewshire. It has supported their development by broadening their understanding of the wider public health agenda and the importance of early intervention and prevention services. Mentors and practice teachers may be interested in adopting a similar model in their area.

Lindsay Jack
Health Improvement Lead,
NHS Greater Glasgow and Clyde



Supporting life-long learning in practice

Utilising Effective Practitioner to support registered nurses employed on the nurse bank with continuing professional development

To support the continuing professional development (CPD) of registered nurses on the nurse bank the practice education facilitator (PEF) team undertook a project utilising the Effective Practitioner resource. Our aim for this project was to ensure these nurses felt supported, were receiving CPD opportunities, had an awareness of new documentation around person-centred care and had knowledge of the Nursing and Midwifery Council (NMC) Revalidation requirements.

We delivered a number of sessions each having around 15 attendees. These sessions support the 2020 Workforce Vision (Scottish Government 2016) of regular CPD to support nurses to deliver a high standard of person-centred care. Each session focused on the benefits of using the Effective Practitioner resource. To maximise engagement with staff we used a variety of delivery methods such as PowerPoint, videos, podcasts and activities. Topics that were incorporated into each session were:

- NHS Dumfries and Galloway CORE values – compassion, openness, respect and excellence
- person-centred care
- What Matters To You?
- five 'Must Do With Me' principles of care
- Nursing and Midwifery ePortfolio
- NMC Revalidation

During delivery of these sessions bank nurses acknowledged that they can find it challenging to access resources for CPD and know who to contact for support. Questionnaires were completed prior to and at the end of each session. Feedback from these highlighted that the bank nurses attending found these sessions very informative and would like more. They also identified an increase in their knowledge of NMC Revalidation and they developed an awareness of where to find resources. Due to the positive responses following the sessions, we hope to continue delivery of further sessions in the future.

Julie Carruthers

Practice Education Facilitator,
NHS Dumfries and Galloway

Karen Stitt

Practice Education Facilitator,
NHS Dumfries and Galloway

Christine Loy

Practice Education Facilitator,
NHS Dumfries and Galloway



A flying start to continuing professional development

As a newly qualified nurse at the beginning of my career, the transition from being a student to a newly registered practitioner appeared daunting. The pressures of starting a new post, adapting to a new environment and the necessity to record evidence for personal and professional development all seemed quite challenging.

Being introduced to Flying Start NHS® my initial reaction was, 'How is this online programme going to support my professional development?' Exploring the programme, I realised it provided a framework for learning, highlighting specific targets and goals on topics such as: team working, communication and safe practice. The programme enabled me to add to my continuing professional development (CPD) portfolio and it provided a focus for discussion with my facilitator regarding areas for my development and progression.

Another benefit was my relationship with my facilitator which has been fundamental to the success of the programme. Their support and encouragement has contributed greatly to my professional development and confidence in my practice.

Flying Start NHS® allowed me to reflect on my journey and progress in all aspects of my role. Being able to keep an accurate record of my CPD in line with eKSF and for future revalidation is proving beneficial.

Nicola Baxter

Staff Nurse,
NHS Greater Glasgow and Clyde





Shirley's story

As a healthcare support worker, I work with vulnerable patients and contribute to looking after their everyday needs. I am required to know the theory behind my practice and ensure I am appropriately trained and competent in my post.

Every day I carry out my duties around an agreed plan of care for patients whilst considering issues of consent and confidentiality. I work alongside a registered nurse who is responsible for the overall care of my patients. I work with integrity and show compassion and care towards patients.

As part of my continuing professional development, I utilised a locally developed competency portfolio specifically devised for healthcare support workers. The aim of this tool is to increase staff knowledge around core and role specific skills. The Competency Portfolio is a work based programme developed to support the role of the nursing health care support worker (HCSW) in NHS Greater Glasgow and Clyde Acute Services.

The portfolio:

- provides clear understanding of the nursing HCSW role
- evidences competency
- links directly with personal development review
- offers opportunity to grow and develop
- provides introduction to further study

The portfolio has been mapped to the Mandatory Induction Standards (Scottish Government, 2009a) and the Code of Conduct for Healthcare Support Workers (Scottish Government, 2009b). It also links to NHS Education for Scotland's guide to Health Care Support Worker Education and Role

Development (NES, 2010) and the NHS Knowledge Skills Framework (Department of Health, 2004). The portfolio competencies reinforce good practice through reflection, building upon the mandatory standards.

When I first started my portfolio the thought of completing it was daunting. I was initially anxious but realised as I worked through this tool that it was work based learning. Completing the portfolio made me feel more confident in my delivery of better care for patients. Although challenging, I loved undertaking this programme and I feel it has made a significant positive impact on the way in which I carry out my role. One memorable moment was when a patient's relative took the time to thank me for undertaking care that included doing her mum's hair. She felt that it had made her mum look like her mum again. It is extremely rewarding to receive positive feedback from patients and their families.

I would recommend this type of development programme to other healthcare support workers working within NHS Greater Glasgow and Clyde as it has enhanced my clinical skills and my job satisfaction. I would also encourage all healthcare support workers to engage in continuing professional development.



Shirley Breckenridge
Healthcare Support Worker,
NHS Greater Glasgow and Clyde



Constructive appraisal: local review of documentation for physiotherapists

To increase physiotherapy staff engagement with appraisal documentation within NHS Grampian we decided to review our paperwork. The aim was to provide a straightforward link to the appraisal system, avoid repetition and be of value to staff. Building on work already started with colleagues, we collaborated with staff to initiate several improvements to the documentation. As part of this review, we updated the existing objectives for each clinical area. Specific roles were also included, such as weekend duties and brief interventions. The reviewed documentation for band 5 physiotherapy staff maps to Flying Start NHS® learning units and the Knowledge and Skills Framework (KSF) dimensions (Department of Health 2004). The documentation for senior physiotherapists links to the appropriate NHS Education for Scotland [Effective Practitioner resource](#) pillar of practice as well as KSF.

Senior band 5 and band 6 physiotherapy staff are required to complete the Effective

Practitioner self-assessment tool prior to appraisal. Completing the appraisal documentation electronically allows the content to be copied into e-KSF, Flying Start NHS® or Effective Practitioner recording forms. The document also has prompts for mandatory training, supervision, absence management and annual leave planning.

Staff started using the new appraisal paperwork in May 2017 and feedback they provide will be used to evaluate the paperwork with a focus on its perceived value and ease of use. We anticipate that the new documentation will allow staff to link their continuing professional development and learning opportunities to existing national systems. The documentation should also provide both appraiser and appraisee with a structure that promotes constructive appraisals within acute physiotherapy.

Jackie Burnett

Senior Physiotherapist Acute Care,
NHS Grampian

Karin Massie

Senior Physiotherapist Acute Care,
NHS Grampian







Innovation in practice – learning across Scotland

Supporting values based person-centred practice in care homes

The care home education facilitators (CHEF) from NHS Dumfries and Galloway piloted the “NHS Education for Scotland (NES) Essential Shared Capabilities: Supporting person-centred approaches resource” within a local care home. Having secured a small amount of funding towards the pilot, the team worked in partnership with the care home staff to utilise this resource and further embed values based practice with this setting.

A health care support worker and deputy manager were designated to lead on the project, supported by the CHEF team. They worked through the resource and identified key areas where improvement and change could be made which could impact positively for residents, staff and student nurses.

This has resulted in several changes in practice occurring within the home including:

- Changes to the format of staff handovers, resulting in freeing up time now used for care delivery.
- Review and development of personalised values based care plans involving residents and families.
- Implementation of a mobile shop that residents not only access on a regular basis but also have input as to the stock available.
- Implementation of education that supports practitioners in the principles of reablement, allowing people to live as independently as possible.

The project was positively evaluated by residents and staff and an inspection by the Care Inspectorate highlighted the reablement training as good practice. It is hoped that all staff will have the opportunity to complete the resource as part of their professional development.

Donna Craig

Practice Education Facilitator/
Care Home Education Facilitator,
NHS Dumfries and Galloway

Julie Carruthers

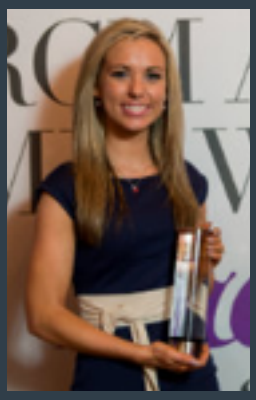
Practice Education Facilitator,
NHS Dumfries and Galloway

Lynn McCourtney

Practice Education Facilitator,
NHS Dumfries and Galloway



Supporting mothering in the neonatal unit



Wishaw general hospital has a co-located maternity and neonatal unit. Babies admitted include very preterm and seriously ill infants with complex needs. In November 2015, I took up the post as a breastfeeding support service assistant (BSSA).

I am a BSSA for the neonatal unit working within a multi-disciplinary team supporting mothers emotionally and physically with their breastfeeding and expressing needs. My role is to provide additional support within the neonatal team under the direction of midwives and nurses. We work together to enable the very best care to all patients. Due to my own experience, I acknowledge the importance of support and guidance for mothers who wish to breastfeed their babies. I became a peer support volunteer with the community mothers peer support programme in 2007, moving on to become a BSSA in the maternity ward.

As with any new role there were challenges implementing and embedding change. Supporting the mothers to express milk

within six hours from birth was an area the team highlighted may be challenging due to mothers and babies being separated after delivery. Drawing on education materials and established evidence common obstacles were identified. In my role of BSSA I was able to assist the team to overcome the barriers in supporting the early expression of milk.

When implemented, mothers had an increased breast milk supply and babies were receiving breast milk for longer durations. Due to the successful changes and excess milk supply, many mothers chose to donate their breast milk to the donor bank.

The feedback from patients has been positive, it allows them to feel empowered to provide breast milk for their baby knowing the benefits. Colleagues quickly realised the positive impact this change has had on mother and babies.

I feel very fortunate to support mothers and families through challenging times and hope to continue to empower others.

Leigh-Ann Johnstone

Breastfeeding Support Service Assistant,
NHS Lanarkshire





Clinical supervision for midwives - facilitating the change from statutory to employer led

Following the Kirkup (2015) report on the Morecambe Bay investigation and subsequent [UK Health Ombudsman review](#), statutory supervision of midwives was removed in March 2017. The change mean that supervision is no longer linked to regulation enabling each of the four countries of the UK to take forward their own plans for new models of supervision that are led by employers. Each country within the UK is now developing their own alternative model.

After extensive consultation and research Scotland's approach for clinical supervision of midwives is to commence in January 2018. Midwives in Scotland will participate in clinical supervision at least once a year, either 1:1 or in a group facilitated by a clinical supervisor. The focus is on the restorative element of supervision, following the Proctor (2011) model. This aims to explore the individual's emotional responses to work, help to foster resilience, enhance morale and relationships and empower the midwife to advocate for women.

NHS Education for Scotland (NES) have developed a programme of education for the new clinical supervisors which includes [four online learning units](#) and a two-day skill development workshop. These offer participants the chance to practise facilitating group supervision to support, encourage and develop their colleagues. [One of the online units](#) is designed for both the supervisees and supervisors, outlining their respective roles and to help obtain the full benefit from supervision.

Within NHS Lothian the chief midwife requested that the women's services education team

provide a programme of awareness sessions to explain the history of the change and detail the new direction. During these sessions open discussion was facilitated obtaining feedback on the perceived value for midwives: how this approach could help them to reflect and develop their practice whilst enhancing the care of women and their families. The themes from the groups were fed back both to NES and the chief midwife. The consultation showed that while midwives had some concerns about the dynamics of clinical supervision in groups, they were excited and interested by the proposed change.

Clinical supervisors have been appointed and are being supported by NES to develop their skills through completion of the online learning units and skill development workshop. There are ongoing discussions as to how the practice can be effectively embedded within NHS Lothian. With continued collaborative working between the clinical education team, NES, managers and staff it is hoped that this clinical supervision approach will work well in midwifery and potentially in other fields of practice in the future.

Helen McGregor
Practice Education Facilitator,
NHS Lothian





My experiences of mentoring foundation apprentices

The foundation apprenticeship in health and social care qualification is designed to support young people in the senior phase at school develop an awareness of careers within health and social care. I work as a generic therapy assistant practitioner within the community rehabilitation team who provide care for people under the age of 65. I have played a role in supporting many apprentices, when they are on placement within the team, to develop their skills in applying physiotherapy, occupational therapy and speech and language therapy as part of the patient recovery process. Never having had the opportunity to be the named mentor, I volunteered for this role with foundation apprentices in social services and healthcare.

I was responsible for supervising three apprentices and planning one afternoon a week for six weeks for each of them. In consultation with selected patients I identified individuals for the apprentices to follow through the recovery process and this allowed me to show the range of activities involved in the generic therapy assistant practitioner role, which extends over several professions.

In my role as named mentor I felt the added responsibility and had some anxieties about my ability to plan and teach. Also, whether it would be a worthwhile experience for the apprentices. My concerns soon faded once the experience started. I discovered I really enjoyed teaching and helping the apprentices understand how therapy supports people recovering from conditions such as stroke, through rehabilitation and exercises.

Evaluations from the apprentices were positive, indicating they enjoyed the experience, developing their knowledge and understanding of what it is like to work in a care environment. The apprentices engaged well with both myself and the patients. They were keen to hear the patients' stories and learn about the conditions they were presenting with.

The experience was also very positive for me. The feedback I received from the apprentices helped to increase confidence in my ability to create a positive student experience.

Stuart Wilson

Therapy Assistant Practitioner,
NHS Forth Valley





Development of NHS Fife primary care emergency service as a practice learning environment

NHS Fife primary care emergency service (PCES) is the main provider of urgent care to the population of Fife. Care is available when a patient's GP practice is closed on evenings, weekends and public holidays. The service is delivered by a team of GPs, advanced nurse practitioners (ANPs) and urgent care practitioners (UCPs) who provide the community with safe, patient centred and effective care. I provide professional leadership for the team in my role as lead nurse.

Following a national review of urgent care services in Scotland by Professor Lewis Ritchie and subsequent publication of the Ritchie Report (Scottish Government, 2015) specific recommendations for transforming care delivery within urgent care were made. This led to the creation of a PCES action plan with specific objectives including the development of the service as a professional clinical learning environment. This would ensure ongoing development of the nursing workforce whilst promoting excellence in care. Creative thinking in respect of these objectives led to the introduction of nursing students to the service allowing them the opportunity to benefit from the diverse learning opportunities this setting provides.

To establish the PCES as a practice learning environment we worked in collaboration with the practice education facilitator and an ANP. This allowed the team to review and realise the full range of learning experiences provided. Learning opportunities were identified for pre-registration nursing students and other learners accessing the service. These include:

- Observation of structured, evidence based clinical nurse consultation.
- Application and navigation of PCES specific quality assured clinical algorithms.
- Participation in reflective discussion and clinical supervision to support professional development.
- Observation of patient group directive management supporting evidence based care with regard to safe management of medicines.
- Observation of non-medical prescribing in line with local formulary and Nursing and Midwifery Council professional standards.
- Involvement in all PCES clinical governance activities and their positive impact on quality care delivery.
- Development of knowledge and skills in management of public protection both with children and adults at potential risk of harm.
- Working within the multidisciplinary team to provide safe, patient centred, effective care within the centre or the patient's home environment.
- Observe PCES supporting NHS Fife to achieve the objectives of the clinical strategy and the overall NHSScotland 2020 workforce vision (Scottish Government 2016).

PCES are excited by this development and the role they can perform in supporting students in their transition to becoming safe, accountable, knowledgeable and professional nurses.

Lisa Cooper
Lead Nurse,
NHS Fife



How Releasing Time to Learn has supported improvement in our practice learning environment

Utilising the NHS Education for Scotland Releasing Time to Learn module, we explored our learning environment to identify available learning and teaching opportunities. On gathering this information, we collated our ideas and discussed them with our practice education facilitator and senior charge nurse, who both provided us with positive support.

The first improvement within our learning environment was to make it more welcoming for staff and student nurses by improving our information board and keeping resources together. This would ensure all relevant information was easily accessible. We then looked at how we could deliver learning opportunities in our environment to all staff, patients and relatives. Using the modules 'at a glance' principle we selected a theme of

the month to display on a board in the main corridor. In discussion with colleagues we decided on the best options for the themes each month. These included acute kidney injury, pressure area care, delirium and Alzheimer's disease amongst others. Staff were encouraged to regularly engage with the theme of the month and the relevant activities on the board.

After a period of three months we gathered feedback from staff, all of which was positive. We have found this a worthwhile experience and a great way to refresh everyone's knowledge on the various chosen themes.

Kirsty Armstrong

Acting Charge Nurse,
NHS Dumfries & Galloway

Arna Marshall

Healthcare Support Worker,
NHS Dumfries & Galloway





Flying Start NHS

Flying Start NHS® has been completely revised to take account of the changing health and social care landscape, and the different environments that nurses, midwives and allied health professionals find themselves working in. The new programme was launched in September 2017.



What's new?

- **More practical** - focuses on what is most beneficial to learn in the workplace
- **Simplified content** - 4 new units organised around 4 Pillars of Practice with 2 learning outcomes per unit



- **Example learning activities** are included, but practitioners can devise own to suit local context to enhance integration into work place setting
- **Renamed 'Flying Start NHS® Mentor'** to 'Flying Start NHS® Facilitator' to better reflect the role of guide and supporter
- **New and simplified guidance** for NQPs/ Flying Start NHS® Facilitators and anyone who wants to find out more about the programme



- Up to three months to register to allow time to settle in to new role
- Hosted on Turas learn the new NES digital learning management system

Watch this [animation](#) to find out more.

The new programme can be found by clicking [here](#)

Communications

Clinical Skills

Teamwork

Safe Practice

Research for Practice

Equality and Diversity

Policy

Reflective Practice

CPD

Careers



Asking our student nurses, ‘What Matters to You?’

In NHS Dumfries and Galloway, a pilot project was carried out to test if asking the question ‘What Matters to You?’ made an impact on the student experience. A questionnaire was developed to be completed by mentors with their students, at the beginning and end of the practice learning experience (PLE). The pilot initially involved part three students and was then repeated with part one.

Overall, students appreciated their mentors asking this question and fed back this helped them feel more comfortable, less apprehensive and well supported. Mentors also felt asking the question helped tailor the students experience and help build their relationship. To embed this in practice we are encouraging our mentors to ask, all students ‘What Matters to You?’ at the beginning of a practice learning experience.

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Practice Education Facilitator,
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Practice Education Facilitator,
NHS Dumfries and Galloway

Clinical supervision: a refreshed approach

The removal of statutory supervision for midwives by the Nursing and Midwifery Council in March 2017, created an exciting opportunity to review and refresh the approach in practice to help realise the recommendations for clinical supervision, outlined in key strategic documents (Scottish Government 2017, Care Quality Commission 2013, Scottish Government 2013).

In response, NHS Education for Scotland developed the online education resource, [Clinical Supervision for Midwives](#) which is available on the NES website. It has been designed to inform practitioners what is involved in participating in a restorative form of supervision. While models of supervision incorporating the restorative component have been utilised in other professions such as mental health, this aspect being embraced throughout Scotland within midwifery is new.

Suzanne Lake

Nursing and Midwifery Practice Educator,
NHS Education for Scotland



Now hosted on the TURAS platform this improved version allows access to all the functions of the older version as well as some new elements via a single page dashboard.

ePortfolio continues to allow practitioners to store evidence on continued professional development such as learning activities; reflections, development journeys and feedback. It is completely mobile device friendly and can be logged into securely from any system.

It also contains mandatory Nursing and Midwifery Council (NMC) council forms required for Revalidation including the reflective account and confirmers forms.

It's an easy, user-friendly way to store and share evidence of your ongoing development in a secure, central and accessible way.

Nursing and Midwifery ePortfolio

Have you tried out the new version of the nursing and midwifery ePortfolio yet?

NHS Education for Scotland provides an ePortfolio free to nurses and midwives in Scotland. The ePortfolio is a valuable means of evidencing your professional development for NMC revalidation, performance review (e.g. KSF), and career development.

Keith Dow

Nursing and Midwifery Practice Educator,
NHS Education for Scotland

Nursing & Midwifery Career Long ePortfolio





Useful practice learning resources

Career Development Framework for Nurses, Midwives and AHPs - <http://www.careerframework.nes.scot.nhs.uk/>

Health Care Support Worker toolkit - <http://www.hcswtoolkit.nes.scot.nhs.uk/>

The Knowledge Network - <http://www.knowledge.scot.nhs.uk/home.aspx>

Quality management for practice learning environment (QMPLE) - [http://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/quality-management-of-the-practice-learning-environment-\(qmple\).aspx](http://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/quality-management-of-the-practice-learning-environment-(qmple).aspx)

AHP Practice Education Community - <http://www.knowledge.scot.nhs.uk/ahppe/national-programme/student-placements-preregistration.aspx>

Nursing and Midwifery – <http://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery.aspx>

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The views represented in this bulletin are those of individuals / NHS Boards and do not necessarily represent that of NHS Education for Scotland.

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