Mentorship of Pre-registration Nurses (learning and assessment in clinical practice) Policy

<table>
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<tr>
<th>Version Number:</th>
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<tr>
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<td>Practice Education Facilitator – 0161 277 1238</td>
</tr>
<tr>
<td>Name of responsible committee:</td>
<td>Clinical Governance Committee</td>
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<tr>
<td>Name of executive lead:</td>
<td>Chief Nurse and Director of Quality Assurance</td>
</tr>
<tr>
<td>Date V1 issued:</td>
<td>November 2008</td>
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<tr>
<td>Last Reviewed:</td>
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# Document Control Sheet

**Document Title / Ref:** Mentorship of Pre-registration Nurses (learning and assessment in clinical practice) Policy

**Lead Executive Director:** Director of Nursing and Therapies

**Author and Contact Number:** Practice Education Facilitator – 0161 277 1238

**Type of Document**  |  Policy  | **Broad Category**  |  Clinical

**Document Purpose:** To ensure the highest standards of clinical education, training and support for pre-registration student nurses

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**Consultation:** Clinical Governance and Professional Mentors

**Approving Committee:** Clinical Governance Committee

<table>
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<th>Approval Date</th>
<th>25 February 2014</th>
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**Ratification and Date:** Lead Executive Approval

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<th>Lead Executive Approval</th>
<th>March 2014</th>
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**V1 Valid from Date:** November 2008

**Current version is valid from approval date**

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<th>January 2016</th>
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**Procedural Documents to be read in conjunction with this document:** None

**Training Needs Analysis Impact:** There are Training requirements for this procedural document. All qualified mentors to attend annual mentor updates – sign off mentor sessions

**Financial Resource Impact:** There are Financial resource impacts

**Click here to enter text. Financial Impacts for Training and Development**

## Document Change History

**Changes to this document in different versions must be detailed below. Rationale for the change should also be given**

<table>
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<th>Version Number</th>
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<td>Review</td>
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<td>Review</td>
<td>April 2013</td>
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<td>Full review</td>
<td>January 2014</td>
<td>Fully reviewed and minor changes made.</td>
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**External references used in the creation of this document:**

If these include monitoring duties upon the Trust for this policy the specific details should be recorded on the **Monitoring and Compliance Requirements sheet**
| Privacy Impact Assessment submitted | N/a | Any issues? | Choose an item. |
| Fraud Proofing submitted | N/a | Any issues? | Choose an item. |

If not relevant to this procedural document give rationale:

Policy authors are asked to consider each of the nine protected characteristics under the Equality Act 2010. We expect you to demonstrate that throughout the policy process you have had regard to the aims of the Equality Duty:

1. Eliminate unlawful discrimination, harassment and victimisation and any other conduct prohibited by the Act;
2. Advance equality of opportunity between people who share a protected characteristic and people who do not share it; and
3. Foster good relations between people who share a protected characteristic and people who do not share it.

Please provide a brief account of how you have done this, further work to be completed and any support you have had in considering the aims and working in compliance with the Equality Duty.

If you are unclear on how to do this or would like further advice and support then you may contact quality.admin@mhsc.nhs.uk.

It is the responsibility of the approving group to ensure this statement reflects the Trusts objectives and position with compliance as set out within the NHS Equality Delivery System.

This policy is broad and the scope is Trust-Wide so complies with the Trust’s Equality Delivery System.

In line with the Trust values we may publish this document on our External Website. Is there any reason you would prefer this is not done?  | No – availability on Intranet and Internet

It is the Authors responsibility to ensure all procedural documents comply with the Trust values

If you are unclear on any of the requirements in the document control sheet then please email quality.admin@mhsc.nhs.uk before proceeding.
Monitoring and Compliance Requirements Sheet

For audit, Registration and NHSLA purposes all procedural documents must have monitoring requirements or key performance indicators set by the authors, Committees or Lead Directors. This allows the Trust to routinely monitor the effectiveness and impact of their procedural documents on a regular basis.

<table>
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<td>Is this an NHSLA Document?</td>
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<td>Which Criterion</td>
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If other Monitoring requirements are necessary i.e. Health & Safety Act and you should include them here and record them in the External References section

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<th>Specify where the requirement originates</th>
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NB: If you have selected audit you should complete the required audit registration form and standards document and submit these with your expected timescales for completing the audit to quality.admin@mhsc.nhs.uk as soon as possible and no later than 4 weeks prior to the audit commencing.

The Group / Committee should also ensure the monitoring work is added to their yearly schedule of monitoring and action logs as appropriate.
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Have you considered using a flowchart in your document to provide easy reference for staff? If you need support in developing a flowchart contact quality.admin@mhsc.nhs.uk
Mentorship of Pre-Registration Nurses (learning and assessment in clinical practice) Policy

1 Introduction

The Nursing and Midwifery Council (NMC) has introduced the document, Standards to Support Learning and Assessment in Practice (NMC 2006 www.nmc-uk.org), which lays out the standards and developmental framework in relation to the quality and nature of support and learning and assessment in practice. It defines and describes the knowledge and skills that registrants and mentors need to apply in practice when they support and assess students undertaking NMC approved programmes that lead to registration on the NMC register. This is to ensure that there is clear accountability for making decisions that lead to an individual’s entry onto the register. This policy describes how the NMC standards will be implemented within Manchester Mental Health and Social Care (NHS) Trust (MMHSCT), whilst also taking account of the requirements set out in the local learning and development agreement with Health Education Northwest (HENW). This agreement outlines the need for service providers to maintain their student population by providing an adequate supply of placements whilst also encompassing an infrastructure to support and develop mentors.

In order to comply with the requirements laid out in the NMC standards the Trust must ensure that every placement area where 3rd year final placement student nurses are supported prior to being eligible to apply for nurse registration has an identified ‘sign off’ mentor to support and assess that student. The Trust recognises the importance of final placement students experiencing opportunities where they can facilitate teamwork in a team setting. These areas have been identified within the Trust as:

- all in patient wards
- SAFIRE
- Anson Road
- Phoenix Assessment Unit
- Crisis Resolution and Home Treatment teams
- Station Road
- Brian Hore Unit
- Bridges Day Unit
- Early Interventions Service

This is not a definitive list and it is hoped that other areas, where a final placement student has the opportunity to meet their unit learning outcomes, will be supported and developed by the Practice Education Facilitator (PEF).

The above processes involve the use of 8 forms and 2 flowcharts (attached as appendices).

Since the local Approved Education Institutions (AEIs) have now complied with the NMCs national requirement for “all degree” nursing programmes it is imperative for all mentors and registrants who support students to ensure that they are up to date with evidence
based practice in their field of practice. It is the duty of the Trust to support registrants and mentors in achieving this and for line managers to identify any learning requirements/shortfalls. The student curriculum holds theory and practice of equal importance and therefore the pre-registration course is divided equally into a weighting of 50% theory (2300 hours) and 50% practice (2300 hours).

2 Purpose

- To ensure the highest standards of clinical education, training and support for pre-registration student nurses.
- To ensure that there is sufficient supply and evidence of competency of mentors/‘sign off’ mentors within the organisation to support the numbers of pre-registration learners.
- To ensure that local and national agreements/mandatory requirements for mentorship and support of learners in clinical practice are met
- To ensure a comprehensive, reliable and effective communication system between the practice areas and the AEI (Approved Education Institutions).
- To ensure that ‘sign off’ mentors are given 1 hour protected time per week whilst supporting final placement students in Year 3 to meet the NMC requirements.
- The effective implementation of this policy will contribute to the safe delivery of care to all service users and to the protection of the public by ensuring that appropriate standards are applied in practice.

3 Duties

3.1 Duties within the organisation

3.1.1 Registrant

A nurse, midwife or specialist community public health nurse currently entered on the NMC register. NMC (2004b) states that registered nurses ‘have a duty to facilitate students of nursing, midwifery and health visiting and others to develop their competence’. This part of a registrant’s role should be evidenced within annual performance development reviews (PDR) and personal development plans (PDP).

Team leaders and managers of each placement area should ensure that registrants are encouraged, supported in the application process and completing the Preparation for Mentorship, post registration, module in order to become a mentor.

The status ‘Associate Mentor’ is no longer recognised by the NMC and for this reason there is no formal training for such a role. However, any registrant with a minimum of six months post registration experience and on completion of preceptorship, should be considered by their line manager, whether suitable or not, to support a student’s nominated mentor during the student’s experience in practice.

The registrant will be involved in the student’s developmental needs, be able to support the student during times when the mentor may not be available and liaise closely with the mentor as a means of strengthening the student’s support system. It is good practice for every student to have an identified registrant that will support each mentor. Registrants’ signatures must be countersigned by a mentor on the student’s Practice Assessment Document (PAD).
All registrants must have a minimum of one year post-registration experience prior to undertaking a mentorship preparation programme.

### 3.1.2 Mentor
A registrant who has successfully completed an NMC approved mentor preparation programme and has the knowledge, skills and competence required to meet the 8 NMC domains (see Form B). The mentor must be on the same part and sub-part of the NMC register as final year students they are supporting and must have clinical currency. It is the duty of the mentor to facilitate learning, supervise and assess students in a practice setting. All mentors must undertake a self assessment of their current competencies and provide evidence to their line manager that they have met the NMC standards in order to remain on the live register. This will be undertaken by the annual PDR process and forms A and B should be completed and discussed with the mentor’s line manager. For mentors wishing to become ‘sign off’ mentors Form H should be completed (see Appendices for appropriate forms to be used).

A mentorship qualification will be required by all registered nurses within the Trust working in a clinical area that supports students. All Clinical Practice Leads (CPLs must undertake the mentorship course and this should be reflected in their job description.

The mentor must be available to the student for a minimum of 40% of the student’s time during periods of practice learning. Mentors must attend annual mentor updates. A mentor can act in the role of ‘associate/support mentor’ but if they are to sign any of the student’s learning outcomes whilst in this role it must be made clear on the front sheet of the student nurse’s PAD that they also hold mentor status. The reason for this is that only mentors’ signatures are valid on the PAD.

All mentors on the ‘live register’ are expected to maintain a current, personal portfolio of evidence specific to mentorship and must submit self verification forms (see appendices) every three years in line with the NMC required triennial review. It is the responsibility of the mentor to ensure timely feedback to the PEF if there are any concerns regarding an individual student or identified shortfalls in providing a supportive learning environment such as long term sickness/Maternity leave of a mentor on the team, mentors leaving the team, environmental changes etc.

### 3.1.3 ‘Sign off’ mentor
Mentors who are required to meet specified additional criteria from that of a mentor, in order to be able to sign-off a student’s practice proficiency in the final clinical placement of an NMC approved programme. The ‘sign off’ mentor must meet the requirements of a mentor as well as their additional duties. All ‘sign off’ mentors must provide evidence of meeting NMC standards to their line manager in order to remain on the Trust’s ‘live register’. This will include undertaking a self assessment, Form H, and then during the annual PDR process forms E and G should be completed with the line manager and sent to the PEF so that ‘sign off’ status can be annotated on the ‘live register’.

‘Sign off’ mentors must hold an NMC recognised mentorship qualification and meet the additional criteria, namely:

- Have clinical competency and currency within the field of practice that the student is being assessed (Mental Health)
• Understand their accountability
• Have knowledge of the student's programme requirements
• Understand the NMC requirements

Most local AEIs now incorporate 2 discussion/role play scenarios within their Preparation for Mentorship modules. These count towards evidence of becoming a 'sign off' mentor with just 1 observed experience required to fully complete the requirements. This observed experience must be an existing 'sign off' mentor observing the mentor acting in the role of a 'sign off' mentor with an eligible, 3rd year final placement student. When all 3 scenarios (this includes the 2 undertaken by the AEI) have been completed the new 'sign off' mentor will complete Form E (see Appendices) and send to the PEF.

If a mentor has undertaken an AEI Preparation for Mentorship module that has not included the 2 discussion/role play scenarios the PEF will facilitate a role play/scenario session on an 'as required' basis to aid progression into 'sign off' mentor status. This will fulfil the requirement outlined by the NMC.

The Trust expects that all current mentors working within the role for over six months should be able to demonstrate the additional criteria expected by a 'sign-off mentor' within areas that take final placement students (as identified in Section 1, page 4).

The 'sign off' mentor is to spend one hour per week with the student over and above the minimum of 40% of time required to be available to the student whilst they are learning in practice. This extra time will be protected.

It is a requirement of the NMC that the student's final, 3rd year, placement is signed in the Ongoing Achievement Record, OAR, (see Glossary), by a 'sign off' mentor.

The final assessment of proficiency draws on evidence of assessment over the three-year period and is verification of whether the student is deemed fit/unfit (from practice's assessment) to enter the NMC register. In order to make this assessment the 'sign off' mentor scrutinises evidence in the current PAD, PADs from previous placements and the OAR. The ‘sign off’ mentor must ascertain whether the minimum standards of proficiency have been achieved by the student by the end of the programme.

### 3.1.4 Practice Education Facilitator

The Practice Education Facilitator (PEF) is a practitioner who is educated to Masters level and holds a teaching qualification that is recorded on the NMC register. Within MMHSCT the PEF holds and maintains the Trust's 'live register'. The PEF will ensure that the process for mentorship is followed and adhered to and this will be audited on a 3 monthly basis to ensure that it is fit for purpose and effective. The PEF will receive all the paperwork completed by mentors and their managers and after scrutiny will then update the 'live register' accordingly.

The PEF will:

• Provide a link with practice and the AEIs.
• Work with the AEI to deliver regular mentor updates.
• With the support of team leaders, s, Modern Matrons, Head of Nursing and mentors to maximise the quality of the student experience.
• The PEF will provide support and guidance for managers and mentors in dealing with ‘failing’ students and act as a resource for any clinical placement learning issues which involve students or mentors.
• Make sufficient provision for annual updating of mentors in collaboration with the local AEIs.
• To support both students and mentors, alike, within the clinical area.
• Will organise and deliver study sessions preparing the ‘sign off’ mentors for their role.
• Will develop and maintain an intranet web page for mentors to use as a reference point for all things related to supporting student nurses.
• Maximise the quality of the student experience and facilitate inter-professional learning activities.
• Ensure all student entries in the electronic clinical notes are countersigned by a qualified professional thus ensuring that the entries are accurate and of a high standard. This is done by monthly generated reports from the Amigos system.

3.1.5 Placement Development Manager
A Placement Development Manager (PDM) is part of the North West Placement Development Network and works closely with the PEF to develop high quality placements for all students. The PDM undertakes strategic planning to increase the number of clinical placements in response to student numbers. The mapping of the current placement circuit will identify opportunities for development and change. The allocation of students to placements that are suitable to meet their clinical learning outcomes will be achieved with the assistance of the allocations officer within the AEI.

3.1.6 Pre-registration nursing students
All students must complete, with the assistance of their mentor, the induction checklist at the front of the PAD each and every time they commence at a new placement. This induction checklist must specifically incorporate local arrangements and requirements pertaining to that placement.

The student will work with their allocated mentor for a minimum of 2 shifts a week (40% of the week). It is the duty of the student to provide their Practice Assessment Document to the mentor at the start of their placement.

It is the responsibility of the student to maintain their individual ongoing record of their achievement/progression the period of their training. The document must be made available to the named mentor at the beginning of each placement and be signed off by the mentor at the end of each placement experience during the final interview with their mentor.

Attendance hours must be recorded within the student PAD after each shift worked and absence must be reported to the AEI by both student and mentor.

Any incidents involving students that are reportable must be recorded as per Trust policy using the DATIX system. The word “student” must be included within the DATIX report to ensure that the PEF receives the report. On receipt of the DATIX the PEF will contact the student and mentor to ensure that the correct support is in place. The PEF will then submit a summary of the incident to the AEI.
3.1.7 The Chief Nurse & Director of Quality Assurance
The Chief Nurse & Director of Quality Assurance will oversee the mentorship process.

3.1.8 Line managers
Line managers will ensure that the policy is being followed and promote and support the clinical staff to undertake the mentorship courses provided by the AEI. It is the duty of the mentor’s line manager to recommend mentors (Form C) /’sign off’ mentors (Form G) for entry onto the live register. This will be done through the existing annual PDR and EKSF review system.

Line managers will be informed by the PEF if mentors within their team have not maintained the requirements for remaining on the ‘live register’ and those managers must take prompt remedial/supportive action to reinstate the individual’s mentor status.

All managers of placement areas will receive by email student allocation lists 6 weeks prior to the date that students are meant to start in their area. The email will be sent by the Allocations Officer from the AEI. It is the duty of the manager to inform their team members when the student is due to start, which cohort they are in and their names. The manager will identify a named mentor for each student and ‘sign off’ mentor if appropriate contacting the PEF if any concerns are identified. This should be done as soon as possible from the date of receiving the allocation list from the AEI to allow time for any changes to be made so as not to cause uncertainty and concern for the students.

3.1.9 Modern Matrons
It is the duty of the Modern Matrons to ensure that
- the Mentorship policy is being followed
- promote and support the clinical staff to undertake the mentorship courses provided by the AEIs
- support staff to ensure timely audits are carried out in conjunction with the requirements of the AEIs
- along with other senior staff within the Trust, to act as a ‘Spoke’ for students. It is expected that the student can experience the role of individuals who act as leaders and senior role models

3.1.10 Learning and Development Department
The learning and development department will ensure, in consultation with the PEF, that there are sufficient places reserved in the Service Level Agreement for registrants to undertake an approved NMC mentorship course provided by the local AEIs.

3.1.11 Human Resources Department
The Human Resources Department will ensure that all job descriptions for Band 5 (second gateway) registrants include the need for a mentorship qualification. The job description for all Clinical Practice Lead posts includes an NMC approved mentorship qualification.

3.2 Consultation and communication with stakeholders
The policy will be disseminated through the following forums:

- MMHSCT Professional Nurse Forum
- Trust and AEI group
- Chief Nurse & Director of Quality Assurance
- Head of Nursing
- Director of Human Resources
- Learning and Development
- All qualified mentors
- Matrons

3.3 Approval of procedural documents
It will be the responsibility of the Chief Nurse & Director of Quality Assurance to oversee the review of this document.

4 Style & format of procedural documents

4.1 Style
The style of this policy is as per Trust and NHS guidance

4.2 Format
This policy has been formatted as per Trust and NHS guidance

5 Definitions of Terms (See Glossary)

6 The development of organisation wide procedural documents

6.1 Prioritisation of work
This document was developed to ensure that the Trust RMNs meet the requirements for NMC Standards to support learning and assessment in practice (NMC, 2006)

6.2 Identification of stakeholders
The following people have been identified as stakeholders:

- Registrants
- Chief Nurse & Director of Quality Assurance
- Learning and Development Manager
- Pre registration nursing students
- Placement Development
- Practice Education Facilitator
- Mentors
- Head of Nursing
- Matrons
- Line managers
6.3 Responsibility for document development
The Practice Education Facilitator developed this policy

6.4 Equality Impact Assessment
'The organisation aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. The Equality Impact Assessment tool is designed to help you consider the needs and assess the impact of your policy.'

With regards to pre-registration nurses:
An individual has a right **not** to disclose their disability. Students are at liberty to disclose at any point during their placement. However, students are required to complete a medical questionnaire for the AEI's Occupational Health Department. A medical or mental health condition must be disclosed in this way.

Students may be concerned about possible discrimination, particularly if a disability is recently acquired or diagnosed. Information on disability is regarded as sensitive personal information under the Equality Act (2010). The issue of non disclosure can raise ethical and professional dilemmas which must be dealt with on an individual level. The consequences of non-disclosure will likely result in student support not being put in place and may affect the quality of student support that can be provided.

It is the duty of the mentor to ask each new starter at their induction meeting whether the student has any disabilities and offer the opportunity for the student to disclose. If the PEF has been informed of any disabilities this information will be relayed to the Team Manager on a 'needs to know' basis.

All students that have disclosed that they have a disability will have been referred to the University Disability Support Office and a list of support recommendations will have been provided for circulation to the relevant personnel, subject to the student’s consent. It is advisable that mentors look at this.

7 Consultation, Approval and Ratification process

7.1 Consultation process
The following people have been consulted regarding the development of this policy:

- MMHSCT Learning and Development Department
- The University of Manchester, School of Nursing, Midwifery and Social Work
- Operational Directorate.

The document will be circulated to members of the Service governance committee for further consultation. Following this consultation the document will progress through both the meetings of the Joint Negotiating Committee and the Executive Management Team prior to ratification and acceptance by the Trust Board

7.2 Policy approval process
This policy will be approved as per Trust guidelines and procedure.
7.3 Ratification process
This policy will be ratified as per Trust guidelines and procedure

8 Review and revision arrangements including version control

8.1 Process for reviewing a procedural document
This policy will be reviewed every two years or if there are any changes made to the NMC National Standards. The review will be lead by the PEF reporting to the Chief Nurse & Director of Quality Assurance

8.2 Version control
This policy will be subject to the Trust’s version control process.

9 Dissemination and implementation

9.1 Dissemination
This policy replaces the current policy, Version 2. The ratified policy will be circulated electronically to inpatient and community mental health team managers. Such managers will ensure dissemination and implementation within their teams. The policy will be copied to the Chief Nurse & Director of Quality Assurance, the Director of Operations, the Head of Nursing, and all Service Directors.

9.2 Implementation of procedural documents
It is the responsibility of the team managers to ensure the implementation of this policy at team level. It is the responsibility of the PEF with the assistance of the Learning & Development department to review and audit the implementation of the policy.

10 Document control including archiving arrangements

10.1 Register/library of procedural documents
As per Trust procedure

10.2 Archiving arrangements
As per Trust procedure

10.3 Process for retrieving archived documents
As per Trust procedure

11 Monitoring compliance with and the effectiveness of procedural documents

11.1 Process for monitoring compliance and effectiveness
The Chief Nurse & Director of Quality Assurance will be responsible for the review of the policy.
The PEF will report to the Chief Nurse & Director of Quality Assurance on the implementation of this policy.

11.2 Standards/key performance indicators
To ensure that all registrants engaged in mentorship are aware of the standards and competencies expected by the NMC and local policy.
• Compliance with process
• Maintenance of live register
• Mentor update evaluations
• Student placement evaluations
• Mentor evaluations

12 References

• NIPEC Project (2007) Guidance and Mapping Tools for Mentors and Sign-off Mentors for Transfer to the Local Register
• Nursing and Midwifery Council (2006) Standards to support learning and assessment in practice – NMC standards for mentors, practice teachers and teachers
• Equality Act (2010)

13 Associated documentation and acknowledgements

See appendices A-J

14 Glossary

14.1 Ensuring Competency of mentors
The NMC (2006) has defined standards for mentors that must be achieved to assess and support students undertaking NMC approved pre-registration nursing, specialist practice and advanced nursing practice programmes.

14.2 Live Register
The placement provider (MMHSCT) is responsible for holding a register of all current mentors, including sign-off mentors demonstrating that they have met the NMC requirements for these roles to remain on the live register.

14.3 Triennial Review
The NMC Standards to Support Learning and Assessment in Practice (2006) require that mentors review their mentorship skills. In order to do this the NMC rules that mentors undertake this review every 3 years with their line manager. This is to be evidenced by submitting the appropriate forms (see Appendices) to the PEF. All appendices should be returned to the PEF by each mentor every 3 years. If a mentor’s status should change eg. they become a ‘sign off’ mentor then the appropriate appendix should be completed accordingly and submitted as near to the change in status as possible so that the PEF can annotate the live register.

To remain on the live register each individual mentor must have evidence of:

• Mentoring at least two students with due regard within a three year period.
• Participation in an annual update.
• Mapping ongoing development in their role against the current NMC mentor standards.
• Being deemed to have met all the requirements needed to be maintained on the local live register as a mentor, ‘sign off’ mentor.
• Explore validity and reliability of judgements when assessing students in practice as part of a group activity/discussion. This can be achieved within a ‘face to face’ mentor annual update or a formal/informal group of 3 or more mentors.

Mentors who do not meet the above listed requirements will be removed from the live register and will not be able to act in the role of mentor or sign students’ PAD until they resolve their status and be reinstated onto the ‘live register’.

14.4 Mentorship Preparation Course (Multiprofessional Support for Learning and Assessment in Practice (MSLAP))

An NMC approved preparation for mentorship course for registered nurses and other qualified healthcare professionals who wish to gain a qualification in supporting students in practice. It is a mandatory requirement for any registered nurse undertaking the role of a mentor for pre-registration students nurses (NMC, 2006) and must be of minimal academic level 5.

The Learning Outcomes of the course are:

Knowledge and Understanding

• support students who have a disability
• demonstrate professional accountability while supporting learning and assessing student achievement

Intellectual Skills

• assist students in the practice setting to identify current learning needs
• develop and evaluate the placement learning environment

Practical Skills

• facilitate and evaluate learning and teaching in practice
• assess students’ practical ability and evaluate assessment processes

Transferable Skills

• establish effective relationships based on mutual trust and respect
• develop self-awareness in order to be a role model
• identify, apply and disseminate research findings within the area of practice
• develop leadership skills and strategies to assist integration of theory and Practice

14.5 Annual Mentor updates

These are known locally as Practice Education Updates. It is a requirement of the NMC that all mentors attend an annual update and map their ongoing development against the eight mandatory domains (Appendix B).

The current ways of meeting the annual update requirements are:

• Mentor update workshop, held on a monthly basis run by the PEF in conjunction with the AEI. Places can be booked through the Learning and Development Department.
• E learning (online) programmes provided by host Universities. However, to meet NMC requirements the mentor is required to engage in a live interaction relating to issues of mentorship practice

The traditional form of mentor update workshop automatically provides face to face activity but it can also be met locally and may involve an informal meeting between
three or more mentors within the practice learning environment. The PEF can facilitate
the meeting if this is the preferred style of face to face contact.

Each mentor should have protected time agreed by their line manager to attend. Updates can also be achieved by an online method bookable through the AEI.

14.6 **Action Plan**
An Action plan should be written and will be devised between the mentor (Form D)/sign-off mentor (Form F) and the line manager if there is a requirement to achieve some of the objectives to be met in order to fulfil all the requirements to progress to the next stage of mentorship. The action plan should be explicit with objectives, actions required to meet those objectives and a stated time that the objectives will be met.

14.7 **Ongoing Achievement Record (OAR)**
All students, from all the local AEIs, engaging in pre-registration nursing studies are issued with a Placement Assessment Document (PAD) which will incorporate an Ongoing Achievement Record sheet (previously described as a student passport or Ongoing Record of Achievement).

14.8 **Educational Audit**
As evidence that each placement within the Trust meets the requirements for a quality learning environment it is required that an educational audit is carried out every 2 years. The placement is informed by the AEI when the audit is due and sent a copy of the documentation to be completed. It is the responsibility of the team manager to ensure that the audit is completed on time. A university lecturer then arranges to visit the placement to scrutinise the evidence against the audit requirements. If sufficient evidence is not provided the university lecturer will draw up an action plan to be completed within a set time limit.

As from January 2014 the educational audit will be a multi-Professional audit document to give assurance that the placement is suitable for all professional disciplines of healthcare students.

Audits which require renewal are identified on a quarterly basis and require completion prior to the end of the relevant audit quarter:

- January – March
- April - June
- July – September
- September - December

Failure to complete the audit in time will result in the placement being put ‘on hold’ by the AEI and students being unable to attend that placement. This cannot be seen as an option.

14.9 **Hub & Spoke Placement Model**
The Hub & Spoke Placement Model is used to maximise learning opportunities as a means of broadening the student experience whilst out in placement and facilitating the achievement of their learning outcomes. Spoke placements must be appropriate to the hub and contribute to the student achieving the relevant NMC competencies. If a spoke experience is part of a planned learning experience then the spoke placement is non-negotiable by the student.
The student is allocated to their Mentor (Hub) and allocated by that mentor to other areas (Spoke) to ensure the student achieves a variety of experiences and skills that allows them to achieve the NMC Standards of Proficiency. Spoke placements that are used regularly to support a hub should be identified on the placement’s Educational Audit. It is important to evaluate the relevance of the spoke placement to the student learning and this can be aided with the use of a Spoke Placement Evaluation Form (Appendix K).

14.10 Evaluations
Evaluations are an effective means of determining how students value their overall learning experience with our Trust. Whether the result of the evaluation is negative or positive, it offers opportunities for improvement.

14.10.1 Student Placement Evaluations
In order for the Trust to understand the strengths and weaknesses of its responsibility in supporting students’ learning in practice it is imperative that we recognise the importance of the students’ judgement of their experience whilst in clinical practice. The AEI’s request that their students complete and evaluation form which is submitted to the AEI and collated 3 times a year. The report is then sent to the PEF who ensures that the Managers, Team Leaders, Chief Nurse and Director of Quality Assurance and Medical Director receive a copy of the evaluations for their individual areas.

For placements where it has been identified by the students to have some aspects of weakness the PEF will meet with the Manager/Team Leader to discuss and formulate an action plan for improvement. This will then be submitted to the AEI.

14.10.2 Mentor Evaluations
It is also important that the experience of the mentors is understood and acknowledged. This information is collected by the PEF and reported to the Head of Nursing 3 times a year.
Mentor self – verification form (Form A)

On completion of the self assessment (Form B) mentors should confirm that they have demonstrated achievement of all 8 of the NMC domains and meet the competency requirements of the NMC standards to support learning and assessment in practice.

I declare that I meet the NMC mentor requirements   Yes  No  (please circle)

Mentor name (print) …………………………………………

Placement area ……………………………………………

Mentor signature ………………………………………… Date ………………………

Please send completed form to:
Hilary Stratton-Powell (Practice Educator)
Laureate House
Wythenshawe Hospital
Southmoor Road
Wythenshawe
Manchester
M23 9LT
NMC Domains and Outcomes (Form B)

These are the NMC (2006) domains and outcomes for all mentors to achieve as part of their mentorship practice. Read these and consider how you achieve these in your practice as a mentor.

<table>
<thead>
<tr>
<th>Domain and Outcomes for Mentors</th>
<th>Achieved? Yes / No</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1 Establish effective working relationships</strong></td>
<td></td>
</tr>
<tr>
<td>Develop effective working relationships based on mutual trust &amp; respect</td>
<td></td>
</tr>
<tr>
<td>Demonstrate an understanding of factors that influence how students integrate into practice</td>
<td></td>
</tr>
<tr>
<td>Provide ongoing and constructive support to facilitate transition from one learning environment to another</td>
<td></td>
</tr>
<tr>
<td><strong>2 Facilitation of learning</strong></td>
<td></td>
</tr>
<tr>
<td>Use knowledge of the student's stage of learning to select appropriate learning opportunities to meet their individual needs</td>
<td></td>
</tr>
<tr>
<td>Facilitate selection of appropriate learning strategies to integrate learning from practice and academic experiences</td>
<td></td>
</tr>
<tr>
<td>Support students in critically reflecting upon their learning experiences in order to enhance future learning</td>
<td></td>
</tr>
<tr>
<td><strong>3 Assessment and accountability</strong></td>
<td></td>
</tr>
<tr>
<td>Foster professional growth, personal development and accountability through support of students in practice</td>
<td></td>
</tr>
<tr>
<td>Demonstrate a breadth of understanding of assessment strategies and the ability to contribute to the total assessment process as part of the teaching team</td>
<td></td>
</tr>
<tr>
<td>Provide constructive feedback to students and assist them in identifying future learning needs and actions.</td>
<td></td>
</tr>
<tr>
<td>Manage failing students so they may either enhance their performance and capabilities for safe and effective practice or be able to understand their failure and the implications of this for their future</td>
<td></td>
</tr>
<tr>
<td>Be accountable for confirming that students have met, or not met, the NMC competencies in practice. As a signoff mentor confirm that students have met, or not met, the NMC standards of proficiency in practice and are capable of safe and effective practice</td>
<td></td>
</tr>
<tr>
<td><strong>4 Evaluation of learning</strong></td>
<td></td>
</tr>
<tr>
<td>Contribute to evaluation of student learning and assessment experiences –proposing aspects for change as a result of such</td>
<td></td>
</tr>
</tbody>
</table>
Participate in self and peer evaluation to facilitate personal development, and contribute to the development of others

### 5 Creating an environment for learning

- Support students to identify both learning needs and experiences that are appropriate to their level of learning
- Use a range of learning experiences, involving patients, clients, carers and the professional team, to meet the defined learning needs
- Identify aspects of the learning environment, which could be enhanced by negotiating with others to make appropriate changes
- Act as a resource to facilitate personal and professional developments of others

### 6 Context of practice

- Contribute to the development of an environment in which effective practice is fostered, implemented, evaluated and disseminated
- Set and maintain professional boundaries that are sufficiently flexible for providing inter-professional care
- Initiate and respond to practice developments to ensure safe and effective care is achieved and an effective learning environment is maintained

### 7 Evidence – based practice

- Identify and apply research and evidence-based practice to their area of practice
- Contribute to strategies to increase or review the evidence – base used to support practice
- Support students in applying an evidence base to their practice area

### 8 Leadership

- Plan a series of learning experiences that will meet students defined learning needs
- Be an advocate for students to support them accessing learning opportunities that meet their individuals needs – involving a range of other professionals, patients, clients and carers
- Prioritise work to accommodate support of students within their practice roles
- Provide feedback about the effectiveness of learning and assessment in practice

If there are outcomes which you do not feel that you meet, contact your line manager to discuss what action can be taken in order to meet the identified outcomes. All mentors including ‘sign off’ mentors are expected to meet these outcomes. An action plan for achievement should be identified as part of the Professional Development Review.
**Line manager recommendation for mentors (Form C)**

I have read the mentor’s self assessment (Form B) and have held a follow up discussion with the mentor.

As the mentor’s line manager I confirm that I am / am not (please delete as appropriate) satisfied that he / she meets the 8 NMC competence domains required to support students on placement. This includes annual mentor updating (undertaken within the last year).

I am recommending / not recommending (please delete as appropriate) the mentor for entry on to the Trust’s ‘live register of mentors’.

Mentor’s name (print) .................................................................

Placement area .................................................................

Line manager’s name (print) .................................................................

Signature of Line manager ......................... Date .........................

Please send completed form to:

Hilary Stratton-Powell (Practice Educator)
Laureate House
Wythenshawe Hospital
Southmoor Road
Wythenshawe
Manchester, M23 9LT

Appendix C
Mentor's Action Plan (Form D)

Mentor and line manager to identify which mentor competency domains require further development and how and when they are to be achieved.

<table>
<thead>
<tr>
<th>NMC Domain</th>
<th>Action required to achieve competency</th>
<th>Date to be achieved</th>
</tr>
</thead>
</table>
‘Sign off’ mentor self verification form (Form E)

On completion of the self assessment (Form H) mentors should confirm that they have demonstrated achievement of all 8 of the NMC domains and meet the competency requirements of the NMC standards to support learning and assessment in practice.

I declare that I meet the NMC ‘sign off’ mentor requirements

Yes   No   (please circle)

including

any one of the options below:

• 3 observed occasions ‘signing off’ a student by a current ‘sign-off’ mentor on three occasions
• 2 scenarios undertaken at an AEI plus 1 observed occasion ‘signing off’ a student by a current ‘sign-off’ mentor
• 2 scenarios undertaken with session provided by PEF plus 1 observed occasion ‘signing off’ a student by a current ‘sign off’ mentor

1. Date of observed ‘sign off’
   or AEI scenario
   Name of observer/ AEI evidence

2. Date of observed ‘sign off’
   or AEI scenario
   Name of observer/ AEI evidence

3. Date of observed ‘sign off’
   Name of observer

Mentor name (print) ………………………………………

Placement area …………………………………………

Mentor signature ……………………………………… Date …………………

Line manager’s signature …………………………… Date …………………

Please send completed form to:
Hilary Stratton-Powell (Practice Educator),
Laureate House, Wythenshawe Hospital, Southmoor Road, Manchester, M23 9LT
**‘Sign off’ mentor’s Action Plan (Form F)**

‘Sign off’ mentor and line manager to identify which competency domains require further development to become a sign-off mentor stating how and when they are to be achieved.

<table>
<thead>
<tr>
<th>NMC Domain</th>
<th>Action required to achieve competency</th>
<th>Date to be achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Line manager recommendation for 'sign off' mentors**

(Form G)

I have read the 'sign off' mentor's self assessment (Form B) and have held a follow up discussion with the mentor.

As the mentor's line manager I confirm that I am / am not (please delete as appropriate) satisfied that he / she meets the competence domains required to be entered onto the Trust's 'live register for mentors' as a 'sign off' mentor.

I am recommending / not recommending (please delete as appropriate) the mentor for entry on to the Trust's 'live register of mentors' as a 'sign off' mentor.

'Sign off' mentor's name (print) .................................................................

Placement area ........................................................................................

Line manager's name (print) .................................................................

Signature of line manager ........................................Date ......................

Please send completed form to:
Hilary Stratton-Powell (Practice Educator)
Laureate House
Wythenshawe Hospital
Southmoor Road
Wythenshawe
Manchester M23 9LT
<table>
<thead>
<tr>
<th>Criteria</th>
<th>Please sign if achieved</th>
<th>Please give examples of how these have been achieved in your role as a mentor</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have mentored at least 2 students in the last 3 years.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have knowledge and understanding of the course/programme undertaken by student nurses and have clinical currency and capability in my field of practice.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have experience of working with student nurses and currently confirm their capability for safe and effective practice.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have the ability to manage students with competency difficulties to enable them to improve their performance and capabilities for safe and effective practice.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have had ongoing professional development to meet the needs of the role of a ‘sign off’ mentor.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I understand the NMC registration requirements and my contribution, as a mentor, to meet these requirements.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I understand my professional accountability in relation to my decision whether a student has passed or failed when I have been assessing their proficiency at the end of their programme.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have knowledge and understanding of the support available for sign-off mentors in making these decisions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have knowledge of the support available to students in relation to decisions made about their proficiency.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Flowchart to map entry on to the Trust’s ‘live register’ of mentors for existing mentors

1. Currently working as a trained mentor in a student placement area
   - No: Undertake mentorship training. Discuss with line manager
   - Yes: Obtain mentor self assessment form (Form B) from line manager (also available from PEF) and work towards completing

2. Meet with line manager and discuss & agree self assessment (Form B). Demonstrates competencies to meet new NMC standards as a mentor?
   - No: Develop Action Plan with line manager (Form D)
   - Yes: Form A & Form C & copy of Form B to be completed and sent to PEF

3. PEF enters individual onto Trust’s ‘live register’ of mentors

Appendix I
Flowchart to map entry on to the Trust’s ‘live register’ of mentors with annotation of ‘sign off’ status for existing mentors

Currently working as a trained mentor in a student ‘sign off’/management placement area?  

Discuss individual development needs with line manager  

Yes

Obtain ‘sign off’ mentor self assessment form (Form H) from line manager (also available from PEF. Undertake and complete self assessment.

Agree verification process with line manager (Form E)? Supervised & observed signing off a student by an existing ‘sign off’ mentor on at least 3 occasions or once if undertaken AEI/PEF scenario sessions?

No

Develop Action Plan with line manager (Form F)  

No

Yes

Forms E & G to be signed by line manager and sent to PEF.

PEF annotates mentor on Trust’s ‘live register’ of ‘sign off’ mentors

Appendix J
Spoke placement evaluation form

The opportunity to learn is a two way process and we are eager to hear what your experiences have been with the team therefore I would be grateful if you would complete this evaluation form. 
Please return the form to ............................................................................................

Many thanks

Date of spoke experience.........................................................................................

Duration of spoke experience..................................................................................

<table>
<thead>
<tr>
<th>1. What did you hope to gain from your spoke placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) .........................................................................................................................</td>
</tr>
<tr>
<td>b) .........................................................................................................................</td>
</tr>
<tr>
<td>c) .........................................................................................................................</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Please give details of what you found to be most useful during the placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) .........................................................................................................................</td>
</tr>
<tr>
<td>b) .........................................................................................................................</td>
</tr>
<tr>
<td>c) .........................................................................................................................</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Please give details of anything you thought was not useful during the placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>..........................................................................................................................</td>
</tr>
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<th>4. Please give details of anything you would have liked more of during the placement</th>
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5. What will be the main thing that you take away with you as a result of your spoke placement?
   a) .................................................................................................................................
   b) .................................................................................................................................
   c) .................................................................................................................................

6. Do you have any further comments that you would like to make?
   ........................................................................................................................................
   ........................................................................................................................................
   ........................................................................................................................................

7) Did you have a lead worker for the duration of the spoke placement?  Yes No

8) Did you find their input useful? Yes No  Who was this lead?.....................................................

9) Did you find the lead worker/team knowledgeable about the 6C's?  Yes No

10) Would you want to return to this Spoke placement?  Yes No