

## BNurs, MNurs & MSc Practice / Placement Assessment Guide

**This document is a brief guide to the assessment of students out in practice and is to support students, Academic Assessors, Advisors and practice partners.**

### Overview

- Practice assessment is equally weighted with academic assessment (NMC requirement).
- Students must pass **all** practice assessments to progress and qualify.
- Students have **two** attempts to pass each practice assessment (as with academic work).
- The programme is divided into 3 parts (Part 1, 2, 3).
- **BNurs:** each part = one academic year
- **MNurs:** Part 3 begins at the start of Year 3 and continues to the end
- **MSc:** each part is approximately 8 months

### Placement Assessment Structure BNurs

- All BNurs placements are summative.
- Academic credit is awarded for completing required placement elements.
- All required documentation must be signed off by the **final day** of the placement (usually the last Sunday of the placement block) .
- **Failure to get the PAD completed and signed by the final day of placement will result in placement fail.**

### Placement Assessment Structure MSc Adult Nursing

All placements are summative

All required documentation must be signed off by the final day of the placement (usually the last Sunday of the placement block) .

- **Failure to get the PAD completed and signed by the final day of placement will result in placement fail.**

### Professional Values

- Students **must demonstrate professional values** (listed in PARE) on **every** placement.
- Practice Assessors must sign these as achieved or not achieved at the end of each placement.

### **Placement Evaluation**

Students must complete placement evaluations.

### **Check & Submit Page**

This page must be signed by the student, the Practice Assessor and the Academic Assessor in order to confirm that the student has passed.

### **Assessment of Proficiencies**

- Each part has a set of proficiencies that must be achieved at least once.
- These reflect what the NMC requires at the point of registration.
- If a proficiency cannot be assessed or is not relevant to the placement area, leave it blank.
- Do not mark it as “not achieved” unless it has been assessed.

### **High-Risk / Invasive Procedures**

The agreement across Greater Manchester is for students to experience exposure to the following invasive procedures via simulation **before** any attempt to carry this out in practice. Students can expect this during **part 2** of the programme:

- **Nasogastric tube insertion and management**
- **Insertion and management of urinary catheters**
- **Venepuncture and cannulation**

Because of this:

- Placement providers vary in what students may do under supervision.
- Students must read and follow local policy for each placement area.
- Always check with the Practice Assessor or PEF about what is permitted.

These proficiencies can be achieved in Part 2 or Part 3:

- **Not achieving them in Part 2 does not stop progression.**

- They must be achieved by the end of Part 3.

**High-Risk / Invasive Proficiencies are within PARE as below:**

<b>High risk / invasive proficiencies</b>	<b>Proficiency number</b>
Recognise people at risk of self-harm and/or suicidal ideation and demonstrates the knowledge and skills required to support person-centred evidence-based practice using appropriate risk assessment tools as needed.	32
Demonstrates an understanding of the needs of people and families for care at the end of life and contributes to the decision-making relating to treatment and care preferences.	33
Utilises aseptic techniques when understanding wound care and in managing wound and drainage processes (including management of sutures and vacuum removal where appropriate).	39
Demonstrates understanding of artificial nutrition and hydration and is able to insert, manage and remove oral/nasal gastric tubes where appropriate	41
Insert, manage and remove urinary catheters for all genders and assist with clean, intermittent self-catheterisation where appropriate. Manages bladder drainage where appropriate	43
Undertakes, responds to and interpret neurological observations and assessments and can recognise and manage seizures (where appropriate)	44
Undertakes a comprehensive respiratory assessment including chest auscultation, e.g. peak flow and pulse oximetry (where appropriate) and manages the administration of oxygen using a range of routes.	48
Uses best practice approaches to undertake nasal and oral suctioning techniques.	49
Undertakes an effective cardiac assessment and demonstrates the ability to undertake an ECG and interpret findings	53
Demonstrates knowledge and skills related to safe and effective venepuncture and can interpret normal and abnormal blood profiles.	54
Demonstrates knowledge and skills related to safe and effective cannulation in line with local policy.	55
Manage and monitor blood component transfusions in line with local policy and evidence based practice.	56
Can identify signs and symptoms of deterioration and sepsis and initiate appropriate interventions as required.	57

**Episodes of Care & Medicines Management**

In each part, students must complete:

- Two episodes of care
- One medication management assessment

Each is a separate assessment and must be completed in full.

**Further Guidance**

Students can find more detailed information in:

- SHS SharePoint Placements Guide: [SHS Sharepoint placements](#)
- PARE documentation