

BNurs practice assessment

Practice assessment

The NMC places equal weighting on practice and academic assessments. Students must pass all required practice assessments to progress and register as a nurse. As with academic assessments, students have two attempts to pass practice assessments, barring mitigating circumstances. Nursing programmes are split into 3 parts (Parts 1, 2 & 3). For the BNurs each part aligns to a year on the programme. For the MNurs programme, part 3 begins at the start of year 3 and extends to the end of the programme.

All but one placement on the BNurs programme involves summative assessments and submissions. Placement 6 is the only formative placement, but even here students must maintain the professional values and can be referred to Fitness to Practice if they do not do so.

Academic credit is given for achievement of the elements of practice placement listed below. Therefore they must be signed off by the submission date (last day of the relevant placement) in the same way as any other academic assignment. It is the student's responsibility to ensure this happens as failure to submit may result in a fail of the placement.

Professional values

Students must demonstrate the professional values (listed in PARE) on every placement. The Practice Assessor must sign these as 'achieved' or 'not achieved' at the end of every placement.

Placements 3, 5 & 9 (10 for MNurs)

The last placements in each part of the programme (3, 5 & 9 for the BNurs – 3, 5 & 10 for the MNurs) are also the summative submission points for the assessment of proficiencies, episodes of care and medication management for that part.

Assessment of proficiencies – pp157-159

In each part, students have a set of proficiencies to achieve at least once, which must be maintained during your programme as they reflect what the NMC requires a registered nurse to be able to perform at the point of registration. These proficiencies "*apply to all registered nurses, but the level of expertise and knowledge required will vary depending on the chosen field(s) of practice*" (NMC, 2018, p22, 26). Further information about the proficiencies, and assessment, can be found in your PARE documents.

If any proficiency cannot be assessed or is not applicable to a placement area, it should be left blank. Marking it as 'not achieved' implies the student has been assessed.

High risk/invasive procedures – p158

There are several high risk/invasive procedures within the Part 2 and 3 proficiencies - they are high risk as they have been associated with serious incidents known as 'Never Events' that are wholly preventable. Placement providers vary in terms of what they allow learners to participate in under supervision for this reason. There is also variation in what Trusts/placement providers may define as high risk.

To prevent a serious incident from occurring and to be clear on what students are allowed to participate in under supervision and when, read and understand the policy for each placement area. Please check with the Practice Assessor and/or the PEF for the placement, to know what students are allowed to participate in under supervision and when.

High risk / invasive proficiencies can be achieved in either **Part 2 or Part 3**. This allows time for you to attend scheduled simulation sessions beforehand, as well as flexibility to achieve them within different placements across years 2-3/4. If you do not achieve these proficiencies in 2nd year, it will not prevent you from progressing to part 3, however they must be achieved in Part 3 (signed off on p158) in order to complete the programme.

High risk / invasive proficiencies See page 158	Proficiency number
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 & Medication management

Students must achieve two episodes of care and a medication management assessment in **each part** of the programme. Each is a distinct assessment that must be attempted and assessed as a whole.

Further information

Students can find more guidance and information in the [SHS Sharepoint placements](#) guide and PARE.