Quality of placement experience

1. All staff training is monitored in line with Trust policies and monthly ESR data. ESR data is monitored by the training and compliance team, both line managers and Clinical educators monitor the electronic system, data is also fed to the workforce committee.
2. This is a new learning environment that is being set up, all registered staff are required to complete the following: - Trust Education awareness to all staff supporting our learners (all unregistered staff also need to complete this training) Practice Assessment Record and Evaluation Collaborative Learning in Practice Submit their self-declaration for NMC Standards for Student Supervision and Assessment (SSSA) Any staff requiring training on the SSSA need to complete e-learning for health SSSA training https://portal.e-lfh.org.uk
3. Learning environment has create a handbook and has submit this to pes@lthtr.nhs.uk Learning environment needs the followings:- Learner board and posters are in situ Learner file, containing off duty (LK to provide resources for RD)
4. All Lancashire teaching hospital learners are provided with a trust Induction and there is a standardised learning environment orientation. Orientation is to be done by an regular staff member, learners are given the orientation paper work during Introductions and Inductions and learners are informed of the process. Copy and paste orientation paperwork (LK to provide copy for RD)

Support

1 As part of the 'Trust Education awareness for all staff who support our learners' training they are taught about the importance of timely constructive feedback. Our learners are also taught about the importance of requesting this feedback and documenting it of their HEI documentation, the Trust has also implemented learning logs to break down some of the barriers to digital documentation. Within the learner resource file their is guidance on the HEI/PARE documentation, and what is required during each assessment stage. Their is also raising concerns flow chart that our staff can follow. (Add evidence from e-learning). Practice Supervisors also understand their responsibilities of discussing the learners progress with their Practice Assessor

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3. Staff are aware of their responsibilities and the importance of raising timely concerns to the Education teams and HEI's, there is a flow chart for the staff to follow should they require any difficulties

4. We use both HEI and internal data collection; data is shared on a quarterly basis to the Divisions as part of their Education Quality and compliance report.

5. The Education Governance team reviews data on a monthly basis and this is discussed in the monthly NWAHP review meeting with the Clinical Education teams. Appropriate action plans are implemented and reviewed and as a process is in place to escalate serious concerns to the right managers to deal with in a timely manner. The Clinical Placement Support team also visits learning environments and will have these discussions in person, the lead for this team will also communicate to the relevant HEI as appropriate.

6. The Student Trainee and Placement support team has two clinical teams, the clinical placement support team are made up of 10 multi-disciplinary clinical staff who support learning environment and learners/trainees in practice. Placement Expansion team has four clinical staff members who work within the Practice Development facilitator role and CLiP role, they provide direct support to clinical areas and work with both the environments and the learners/trainees in practice within the Adult, Paediatric and Midwifery areas. A full review of staff training and Practice status has been concluded, current Practice Assessors will be assigned to the learners by the LEMs and a plan is in place to identify more Practice Assessors and their training requirements. Enough Practice Assessor and Practice Supervisors to meet the learner numbers, this is recorded on the Trust Dashboard.

Experience

1. Clinical Placement Support team will provide them with support with any learner/trainee should they require any additional support. The learner support team will also provide additional support as well. Staff are to request to review the reasonable adjustment plans/ILPs, the Learner Support team will also support any learner and placement. Mandatory training includes Diversity and Inclusion.

2. It is both the role of the Educators/Supervisors along with all staff's roles to provide a contusive learning environment. Within the learning handbook, learning opportunities are identified along with information on resources that the learner can access to support with their knowledge of their proficiencies.

3. Lancashire Teaching Hospital facilitates a programme of IPL sessions that all our learners can book onto to enhance their current clinical learning environment, there is a clear process in place for this and the learners are informed of this during their trust Induction. This ward works within the full MDT members, some of these will be:-

Dietitian

Diabetic Specialist Nurse

Physiotherapy

OT

Pharmacy

Medics

This is a CLiP ward and their learners will have access to work along side these professionals

5. 4.NMC requirement for the use of reflection and reflective practice and learners are encouraged to work under this model.
6. 5. Learners are encouraged to contact the learning environments prior to commencing placement. Within the handbooks the working patterns are discussed, the ward aims to provide 6 weeks of off duty at any one time.
7. 6. Ward managers to ensure opportunities are in place are equal and that IPLs/RAPs are taking into account, this is inline with Trust/HEE/HIE.
8. 7. Learners are encourage to become part of the team and to take part in the ward huddles and share their ideas. The ward values the orientation process and the importance of first impressions
9. 8. The standardised learner board will display this data, both learners and staff are aware to look at this to stay updated. Should a problem arise with their Educators then the chain of command or LEM needs to be informed and appropriate action taken. the LEM takes responsibility to assign the Assessor to the learners.

Resources

1. This is done at the Induction stage to the Trust and all learners have access prior to commencing their placements, should a problem arise then the allocations@lthrt.nhs.uk will address this issue.

Others

1 Team leader/LEM/Ward manager on Cureden Ward adheres to the process of ensures that the learners receive the standardised orientation as agreed at the LEM forums. The orientation process has been standardised across trust and learners are expected to arrange pre-visits and has clear guidance as to what is expected on first day and by end of first week. This process is discussed at Trust Inductions with the learners and is monitored my the Education Governance team and any issues will be discussed with the area with the support of clinical placement support team.

Complaints and incident reporting

1. Learning environment is encouraged to raise any concerns directly with the STAPs team who will escalate this according. Poster information provided from HEIs stored in the resource file in learning environment.

2. Learning environment is aware that to request any of these or to raise a concern then can go directly to the HEI (Academic Assessor) or to the STAPs team who will support in this process

Audit Reasons

1. This is a new learning environment being opened to learners.
2. Request HEI review audit 05.12.22