

# End-point assessment plan for registered nurse nonintegrated Degree apprenticeship standard

	Level of this end point assessment (EPA)	Integrated
ST0781	6	Non - integrated

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# Introduction and overview

Registered nurses are subject to statutory regulation by the Nursing and Midwifery Council (NMC). The NMC sets the standards of proficiency required for entry to the professional register and these are in effect the occupational standards for registered nurses. The NMC also has the statutory duty to set requirements of programmes necessary to support the achievement of the occupational standard. The end point Assessment assesses whether apprentices have also passed the apprenticeship, and is based on the same professional knowledge, skills and behaviours as the occupational standards.

This document sets out the requirements for end-point assessment (EPA) for the registered nurse apprenticeship standard. It is for end-point assessment organisations (EPAOs) who need to know how EPA for this apprenticeship must operate. It will also be of interest to registered nurse apprentices, their employers and training providers.

Apprentices will typically spend 48 months on-programme (before the gateway) working towards the occupational standard, although other approaches can be considered. Registered nurse apprentices are supernumerary for the duration of their apprenticeship.

The EPA period should only start, and the EPA be arranged, once the employer is satisfied that the apprentice is consistently working at or above the level set out in the occupational standard, all of the pre-requisite gateway requirements for EPA have been met and that they can be evidenced to an EPAO. It is expected that the gateway will be reached after the completion of the final Degree module and before the training provider's examination board. Where the EPAO is an NMC approved education institution they are permitted to manage the assessment process for their own apprentices in compliance with the EPA Plan. Where the EPAO is not an NMC approved education institution organisation, the HEI will work with the NMC approved education institution to facilitate the EPA.

For level 3 apprenticeships and above apprentices without English and mathematics at level 2 must achieve level 2 prior to taking their EPA.

The EPA must be completed within an EPA period lasting a maximum of 3 month(s), beginning when the apprentice has passed the EPA gateway.

The EPA consists of 2 discrete assessment methods.

The individual assessment will have the following grades:

Assessment method 1: Professional Discussion A

- Fail
- Pass

Assessment method 2: Professional Discussion B

- Fail
- Pass

Performance in the EPA will determine the overall apprenticeship standard and grades of:

- Fail
- Pass

# **EPA summary table**

<b>On-programme</b> (typically 48 months)	Training to develop the occupation standard's knowledge, skills and behaviours
End-point Assessment Gateway	<ul> <li>Employer is satisfied the apprentice is consistently working at the level of the occupational standard.</li> <li>English/mathematics Level 2.</li> <li>Completion of all modules of the Degree in Nursing or L7 qualification approved by the NMC where the apprentice already holds a Level 6 degree but before the training provider's examination board.</li> <li>Practice Assessment Document (PAD).</li> </ul>
End Point Assessment (which would typically take place with 3 months)	Assessment Method 1: Professional Discussion A With the following grades: • Fail • Pass Assessment Method 2: Professional Discussion B With the following grades: • Fail • Pass
Professional recognition	Aligns with registration with: Nursing and Midwifery Council

# Length of end-point assessment period:

The EPA must be completed within an EPA period lasting a maximum of 3 month(s), beginning when the apprentice has passed the EPA gateway.

## **Order of assessment methods**

The assessment methods can be delivered in any order.

## Gateway

The EPA period should only start once the employer is satisfied that the apprentice is consistently working at or above the level set out in the occupational standard, that is to say they are deemed to have achieved occupational competence. In making this decision, the employer will be advised by the Academic Assessor that the apprentice has achieved occupational competence in order for the decision to be made.

In addition to the employer's confirmation that the apprentice is working at or above the level in the occupational standard, the apprentice must have completed the following gateway requirements prior to beginning EPA:

• English and mathematics at level 2.

For those with an education, health and care plan or a legacy statement the apprenticeships English and mathematics minimum requirement is Entry Level 3 and British Sign Language qualification are an alternative to English qualifications for whom this is their primary language.

Apprentices must complete all modules of the following approved qualifications as mandated in the standard:

• Degree in Nursing or L7 qualification approved by the NMC where the apprentice already holds a Level 6 degree

The apprentice will also have completed a Practice Assessment Document (PAD) which can be used as a source of evidence for both professional discussions required by the apprenticeship.

For Professional Discussion A:

• no specific additional requirements

For Professional Discussion B:

• no specific additional requirements

# **Assessment methods**

#### **Overview**

Apprentices will undertake two assessments each being a professional discussion. While the method for each assessment is the same they are treated as separate assessments. Each assessment will test the apprentice's knowledge, skills and behaviours (KSBs) against specific domains. The domains are taken from the NMC Platforms for registered nurses. These are:

- 1. Being an accountable professional
- 2. Promoting health and preventing ill-health
- 3. Assessing needs and planning care
- 4. Providing and evaluating care
- 5. Leading and managing nursing care and working in teams
- 6. Improving safety and quality of care
- 7. Coordinating care

The apprentice will demonstrate a reasonable and meaningful sample of the KSBs assigned to the domains.

Each professional discussion will be undertaken by a panel consisting of:

- Independent Assessor (the Chair)
- Programme Practice Assessor
- Programme Academic Assessor

The Independent Assessor is responsible for the final grade given for the End Point Assessment but will make the decision taking into account the views of the Programme Practice and Academic Assessors.

The end-point assessment organisation will arrange for the professional discussions to take place, in consultation with the employer and in agreement with the NMC Approved Education Institution where this is not the EPAO in order to ensure the EPA takes place at the time specified in this plan. The two professional discussions must allow for an in-depth discussion that allows for a meaningful sample of KSBs across the domains to be explored and gives the apprentice the opportunity to present evidence that clearly demonstrates competence against the occupational standard. The two discussions combined should be between 80 – 140 minutes in duration, but long enough to ensure the domains are adequately assessed. The independent assessor may extend one or both by 10% if necessary to allow the apprentice to complete their final answer. Each professional discussion will not be split, other than to allow comfort breaks if necessary. A break is permitted between professional discussions.

#### Rationale

The rationale for the assessment methods is:

A professional discussion is not simply a question and answer session but a meaningful, in-depth twoway dialogue between the apprentice and the assessors. It allows the apprentice to use standardised questions and scenarios as a starting point to explore their own practice and experiences with the assessors to show how they demonstrate the occupation's KSBs and that they are occupationally comptetent. A professional discussion is a well-recognised method of checking knowledge, skills and behaviours and is widely used within the health sector.

#### **Delivery**

Before each assessment, apprentices must be provided with both written and verbal instructions on the assessment.

EPAOs will ensure an appropriate controlled environment is provided for the assessment and that the environment can facilitate the EPA.

The apprentice will have completed a Practice Assessment Document (PAD) prior to the gateway. The PAD is used to record learning and assessment that takes place throughout the apprenticeship and the apprentice will bring it with them on the day of the assessment. Appropriate consideration should be given to patient confidentiality, when using the PAD. The apprentice may draw on the contents of their PAD to underpin their professional discussions, selecting items on the day to inform and enhance the discussion. The independent assessor will not assess the Practice Assessment Document itself.

### **Assessment Method 1: Professional Discussion A**

Assessment 1 will assess the KSB in domains 1, 3, 4, 6. The assessors will ask 4 questions that will robustly cover the 4 domains mapped to this professional discussion. The questions can either be competency-based (e.g. asking for examples of...), enabling the apprentice to explain how KSBs were personally achieved in role or scenario-based (e.g. asking for their response in/to a certain professional situation - how would you deal with.... what would you do if...). The questions can be domain specific or be written in a way that allows the apprentice to demonstrate the KSBs from across the four domains. If scenarios are used these must be 200 – 250 words.

An example of a competency based question could be:

Describe an episode of care where you delegated to another member of the team and how you provided leadership ensuring that the care provided was evidence based, compassionate, safe, person-centred and of a consistently high standard

An example scenario could be:

200 - 250 words describing an individual with nursing needs in relation the apprentice's field of nursing. The independent assessor can select the scenario from a bank provided by the EPAO. The apprentice will be expected to describe the appropriate range of procedural skills required to meet that persons needs taken from Annex B: Nursing procedures in the NMC Standards for Proficiency 2018.

Examples of the procedural skills are:

- set up and manage routine electrocardiogram (ECG) investigations and interpret normal and commonly encountered abnormal traces
- · undertake chest auscultation and interpret findings
- administer basic mental health first aid
- · administer medications using a range of routes
- · use appropriate moving and handling equipment to support people with impaired mobility
- use aseptic techniques when managing wound and drainage processes

At the end of each professional discussion the independent assessor, practice assessor and academic assessor will have the opportunity to ask follow-up questions to elicit further evidence that the KSBs have been attained, or otherwise, and to enable accurate assessment against the pass criteria.

The examples in this plan are just for illustrative purposes, it is for the EPAO to develop a suitable 'bank of competency based questions and scenarios' to be used during the professional discussion.

The EPAO will provide a bank of questions and scenarios that assessors may use, or assessors may use the KSBs to construct their own. The assessors can ask follow-up questions that will help them determine that the KSBs have been demonstrated.

### **Assessment Method 2: Professional Discussion B**

Assessment 2 will assess the KSBs in domains 2, 5 & 7. The assessors will ask 3 questions that will robustly cover the 3 domains mapped to this professional discussion. The questions can either be competency-based enabling the apprentice to explain how KSBs were personally achieved in role or scenario-based. The assessors can ask follow-up questions for clarification - to elicit further evidence that the KSBs have been attained, or otherwise, and to enable accurate assessment against the pass criteria. The questions can be domain specific or be written in a way that allows the apprentice to demonstrate the KSBs from across both domains. If scenarios are used these must be 200 - 250 words.

An example competency based question could be:

Describe where you discussed with an individual making any reasonable adjustments, the impact on mental, physical and behavioural health and wellbeing, in the context of individual's circumstances, one of the following:

- smoking
- substance and alcohol use
- sexual behaviours
- diet and exercise

What were you aiming to do and what experiences and factors may have contributed to this individuals behavior and lifestyle choices?

An example scenario could be:

200 - 250 words describing where the apprentice has lead responsibility for the nursing care of a group of patients for a span of duty and has delegated responsibility for an individuals needs to a healthcare support worker with 6 months experience. The apprentice is asked how they would you ensure they provided the appropriate level of supervision and what action they may take if they had any concerns about the quality of care being provided?

### **Questions and resources development**

EPAOs will produce specifications to outline in detail how the professional discussion will operate, what it will cover and what should be looked for and how evidence will be recorded. It is recommended that this be done in consultation with representative employers. EPAOs should put measures and procedures in place to maintain the security and confidentiality of the parts of their specifications that could unfairly advantage apprentices if employers are consulted. Specifications must be standardised by the EPAO. EPAOs must also develop a 'bank' of competency based questions and scenarios of sufficient size to prevent predictability and review them regularly (and at least once a year) to ensure they, and the specifications they contain, are fit for purpose. The specifications must be varied yet allow

assessment of all the relevant domains. EPAOs will produce guidance for apprentices to explain how the professional discussions will operate.

## Weighting of assessment methods

All assessment methods are weighted equally in their contribution to the overall EPA grade.

## Grading

### **Assessment method 1: Professional Discussion A**

To pass this method, the apprentice will need to demonstrate competence against each grading descriptor. It is not necessary to cover-off every single KSB.

KSBs	Name of grade	Grade descriptor
K.1 K.2 K.3 K.4 K.5 K.6 K.7 K.8 K.14 K.15 K.16 K.17 K.18 K.19 K.20 K.21 K.22 K.23 K.24 K.25 K.26 K.27 K.28 K.29 K.30 K.31 K.32 K.33 K.34	Pass	Acts in the best interests of people, putting them first and providing nursing care that is person-centred, safe and compassionate in accordance with The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates. (S.1, S.5, S.8, S10, S.11, S.12, K.1, K.3, K.5, K.6, K.8, B1, B.2, B.3)
K.35 K.36 K.37 K.38 K.39 K.40 K.41 K.42 K.43		Acts professionally at all times and uses their knowledge and experience to make evidence-based decisions about care. (S.2, S.6, K.2)
S.1 S.2 S.3 S.4 S.5 S.6 S.7 S.8 S.9 S.10 S.11 S.12 S.13 S.22		Communicates effectively, is a role models for others, and is accountable for their actions. (S.3, S.7, S.9, S.13, K.7)
S.23 S.24 S.25 S.26 S.27 S.28 S.29 S.30 S.31 S.32 S.33 S.34 S.35 S.36 S.37 S.38		Demonstrates continual reflection on their practice and keeps abreast of new and emerging developments in nursing, health and care. (S.4, K.4)
S.35 S.36 S.37 S.38 S.39 S.40 S.41 S.42 S.43 S.44 S.45 S.46 S.47 S.48		Prioritises the needs of people when assessing and reviewing their mental, physical, cognitive, behavioural, social and spiritual needs. (S.23, S.24, S.26, K.14, K.15, K.16)
B1 B2 B3		Uses information obtained during assessments to identify the priorities and requirements for person- centred and evidence-based nursing interventions and support. (S.22, S.25, S.27, S.28, K.17, K.18, K.21)
		Works in partnership with people to develop person- centred care plans that take into account their circumstances, characteristics and preferences. (S.29, K.19, K.20)

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	Takes the lead in providing evidence based, compassionate and safe nursing intervention ensuring that care they provide and delegate is person-centred and of a consistently high standard. (S.32, S.33, S.34, S.35, S.36, S.37, S.38, S.39, S.40, K.22, K.23, K.24, K.25, K.26, K.27, K.29, K.30, K.31, K.32, K.33, K.34) Supports people of all ages in a range of care settings and works in partnership with people, families and carers to evaluate whether care is effective and the goals of care have been met in line with their wishes,
	Makes a key contribution to the continuous monitoring and quality improvement of care and treatment in order to enhance health outcomes and people's experience of nursing and related care. (S.41,S.46 S.47, K.41, K.42)
	Assesses risks to safety or experience and takes appropriate action to manage those, putting the best interests, needs and preferences of people first (S.42, S.43, S.44, S.45, S.48, K.35, K.36, K.37, K.38, K.39, K.40)
Fail	Does not meet the pass criteria

## **Assessment method 2: Professional Discussion B**

To pass this method, the apprentice will need to demonstrate competence against each grading descriptor. It is not necessary to cover-off every single KSB.

KSBs	Name of grade	Grade descriptor
K.9 K.10 K.11 K.12 K.13 K.43 K.44 K.45 K.46 K.47 K.48 K.49 K.50 K.51 K.52 K.53 K.54 K.55 K.56 K.57	Pass	Supports and enables people at all stages of life and in all care settings to make informed choices about how to manage health challenges in order to maximise their quality of life and improve health outcomes. (S.14, S.15, S.17, S.18, S.19, K.9, K.12, K.13)
K.58 S.14 S.15 S.16 S.17 S.18 S.19 S.20 S.21 S.49 S.50 S.51 S.52 S.53 S.54 S.55 S.56		Actively involved in the prevention of and protection against disease and ill health and engage in public health, community development and global health agendas, and in the reduction of health inequalities. (S.16, S.20, S.21, K.10, K.11)
S.57 S.58		Provides leadership by acting as a role model for best practice in the delivery of nursing care. (S.49, S.50, S.51, K.52, K.53, K.54)
		Takes responsibility for managing nursing care and is accountable for the appropriate delegation and supervision of care provided by others in the team including lay carers. (S.52, S.54, S.55, K.55)
		Demonstrates an active and equal role in the interdisciplinary team, collaborating and communicating effectively with a range of colleagues. (S.53, K.56, K.57)
		Provides a leadership role in coordinating and managing the complex nursing and integrated care needs of people at any stage of their lives, across a range of organisations and settings. (S.56, S.58, K.43, K.47, K.48, K.49, K.50, K.51)
		Contributes to processes of organisational change through an awareness of local and national policies (S.57, K.44, K.45, K.46, K.58)
	Fail	Does not meet the pass criteria

### **Overall EPA grading**

All EPA methods must be passed for the EPA to be passed overall.

Grades from individual assessment methods should be combined in the following way to determine the grade of the EPA as a whole:

Professional Discussion A	Professional Discussion B	Overall EPA grading
Fail	Fail	Fail
Fail	Pass	Fail
Pass	Fail	Fail
Pass	Pass	Pass

# **Roles and responsibilities**

Role	Responsibility
Apprentice	<ul> <li>complete the constituent parts of the programme successfully</li> <li>meet all gateway requirements when advised by the employer</li> <li>understand the purpose and importance of EPA and undertake EPA</li> </ul>
Employer	<ul> <li>select the EPAO</li> <li>support the apprentice to achieve the KSBs outlined in the standard to their best ability</li> <li>determine when the apprentice is working at or above the level of occupational competence outlined in the occupational standard and is ready for EPA, taking account of the advice of the Academic Assessor</li> <li>confirm all EPA gateway requirements have been met</li> <li>confirm arrangements with EPAO for the EPA (who, when, where) in a timely manner</li> <li>ensure the apprentice is well prepared for the EPA</li> </ul>
EPAO	<ul> <li>As a minimum EPAOs should:</li> <li>work with the HEI (if the EPAO is not itself the apprentice's NMC approved education institution)</li> <li>understand the occupational role</li> <li>appoint an independent assessor to deliver the EPA</li> <li>provide training and CPD to the independent assessors they employ to undertake the EPA</li> <li>provide adequate information, advice and guidance documentation to enable apprentices, employers and providers to prepare for the EPA</li> </ul>

	<ul> <li>deliver the end-point assessment outlined in this EPA plan in a timely manner after gateway</li> <li>prepare and provide all required material and resources required for</li> </ul>
	delivery of the EPA in-line with best practices
	<ul> <li>use appropriate assessment recording documentation to ensure a clear and auditable mechanism for providing assessment decision feedback to the apprentice and other stakeholders</li> </ul>
	<ul> <li>maintain robust internal quality assurance (IQA) procedures and processes, and conducts these on a regular basis</li> </ul>
	<ul> <li>conform to the requirements of the nominated external quality assurance body</li> </ul>
	<ul> <li>organise standardisation events and activities in accordance with this plan's IQA section</li> </ul>
	<ul> <li>provide training to the Academic and Practice Assessors necessary for them to understand and apply the requirements of the apprenticeship and the End Point Assessment process</li> </ul>
	<ul> <li>organise and conduct moderation of independent assessors' marking in accordance with this EPA plan</li> </ul>
	<ul> <li>have, and operate, an appeals process</li> </ul>
	arrange for certification
Independent assessor	As a minimum an Independent assessor should:
	<ul> <li>understand the standard and assessment plan</li> </ul>
	<ul> <li>deliver the end-point assessment in-line with the EPA plan</li> </ul>
	<ul> <li>comply to the IQA requirements of the EPAO</li> </ul>
	• be independent of the apprentice, or with staff from the employing organisation or education provider who are involved in delivering the apprenticeship
	<ul> <li>have had training from their EPAO in terms of good assessment practice, operating the assessment tools and grading</li> </ul>
	<ul> <li>have the capability to assess the apprentice at this level</li> </ul>
	• attend the required number of EPAO's standardisation and training
	events per year (as defined in the IQA section)
Programme Practice	As a minimum the Practice Assessor should:
Assessor	understand the standard and assessment plan
	<ul> <li>meet the NMC requirements for Practice assessors of registered nurses as set out in Standards for student supervision and assessment (NMC, 2018)</li> </ul>
	participate in the the end-point assessment in-line with the EPA plan
	undertake any training or reading provided by the EPAO necessary for
	them to understand and apply the requirements of the apprenticeship and the End Point Assessment process
Programme Academic	As a minimum the Academic Assessor should:
Assessor	<ul> <li>understand the standard and assessment plan</li> </ul>

	<ul> <li>meet the NMC requirements for Academic assessors of registered nurses as set out in Standards for student supervision and assessment (NMC, 2018)</li> <li>participate in the the end-point assessment in-line with the EPA plan</li> <li>undertake any training or reading provided by the EPAO necessary for them to understand and apply the requirements of the apprenticeship and the End Point Assessment process</li> </ul>
Training provider /NMC approved education institution	<ul> <li>As a minimum the training provider should:</li> <li>work with the employer to ensure that the apprentice is given the opportunities to develop the KSBs outlined in the standard and monitor their progress during the on-programme period</li> <li>advise the employer, upon request, on the apprentice's readiness for EPA prior to the gateway</li> <li>Coordinate with the EPAO where the EPAO is not the apprentice's NMC approved education institution</li> <li>provide the Academic and Practice Assessor</li> <li>independent assessors must be independent of the apprentice and their employer(s). Where the training provider is the EPAO (i.e HEI) there must be procedures in place to mitigate any conflict of interest which will be monitored by EQA activity</li> </ul>

# **Internal Quality Assurance (IQA)**

Internal quality assurance refers to the requirements that EPA organisations must have in place to ensure consistent (reliable) and accurate (valid) assessment decisions. EPA organisations for this EPA must:

- appoint independent assessors who are:
  - Nurses who are registered with the Nursing and Midwifery Council in the same field of practice as the apprentice
  - o competent to deliver the end-point assessment
  - the independent assessor must additionally have current knowledge of the Nursing and Midwifery Council:
    - Standards of proficiency for registered nurses
    - Standards framework for nursing and midwifery education
    - Standards for student supervision and assessment
    - Standards for pre-registration nursing programmes
- provide training for independent assessors in terms of good assessment practice, operating the assessment tools and grading
- provide training or reading for the Academic and Practice Assessors necessary for them to understand and apply the requirements of the apprenticeship and the End Point Assessment process
- have robust quality assurance systems and procedures that support fair, reliable and consistent assessment across the organisation and over time.
- operate induction training and standardisation events for independent assessors when they begin working for the EPAO on this standard and before they deliver an updated assessment method for the first time
- ensure that independent assessors attend standardisation meetings on this Standard on a regular basis and at least a minimum of one event annually.

# **External Quality Assurance (EQA)**

The external quality assurance provider for this assessment plan is the Institute for Apprenticeship and Technical Education

## **Re-sits and re-takes**

Apprentices who fail one or more EPA assessment method will be offered the opportunity to take a resit or a re-take. A re-sit does not require further learning, whereas a re-take does.

Apprentices should have a supportive action plan to prepare for the re-sit or a re-take. The apprentice's employer will need to agree that either a re-sit or re-take is an appropriate course of action.

An apprentice who fails an assessment method, and therefore the EPA in the first instance, will be required to re-sit or re-take any failed assessment methods only.

Any assessment method re-sit or re-take must be taken during the maximum EPA period, otherwise the entire EPA must be taken again, unless in the opinion of the EPAO exceptional circumstances apply outside the control of the apprentice or their employer.

## **Affordability**

Affordability of the EPA will be aided by using at least some of the following practice:

• using an employer's premises where possible

## **Professional body recognition**

This apprenticeship is based on the Nursing and Midwifery Council's standards of proficiency and education programme standards. This means that those who successfully complete the apprenticeship will be eligible to apply for registration with the NMC, and will go on to demonstrate that they meet the wider requirements for registration (good character, indemnity, etc).

## **Reasonable adjustments**

The EPAO must have in place clear and fair arrangements for making reasonable adjustments for this apprenticeship standard. This should include how an apprentice qualifies for Reasonable Adjustment and what Reasonable Adjustments will be made. The adjustments must maintain the validity, reliability and integrity of the assessment methods outlined in this assessment plan.

# Mapping of KSBs

## Assessment method 1: Professional Discussion A

Knowledge
<b>K1</b> Understand the Code (2018): Professional standards of practice and behaviour for nurses, midwives and nursing associates and how to fulfil all registration requirements
<b>K2</b> Understand the demands of professional practice and demonstrate how to recognise signs of vulnerability in themselves or their colleagues and the action required to minimise risks to health
<b>K3</b> Understand the professional responsibility to adopt a healthy lifestyle to maintain the level of personal fitness and wellbeing required to meet people's needs for mental and physical care
<b>K4</b> Understand research methods, ethics and governance in order to critically analyse, safely use, share and apply research findings to promote and inform best nursing practice
<b>K5</b> Understand the need to base all decisions regarding care and interventions on people's needs and preferences, recognising and addressing any personal and external factors that may unduly influence their decisions
<b>K6</b> Understand and apply relevant legal, regulatory and governance requirements, policies, and ethical frameworks, including any mandatory reporting duties, to all areas of practice, differentiating where appropriate between the devolved legislatures of the United Kingdom
K7 Understand the principles of courage, transparency and the professional duty of candour
K8 Understand how discriminatory behaviour is exhibited
<b>K14</b> Apply knowledge of human development from conception to death when undertaking full and accurate person-centred nursing assessments and developing appropriate care plans
<b>K15</b> Apply knowledge of body systems and homeostasis, human anatomy and physiology, biology, genomics, pharmacology and social and behavioural sciences when undertaking full and accurate person-centred nursing assessments and developing appropriate care plans
<b>K16</b> Apply knowledge of all commonly encountered mental, physical, behavioural and cognitive health conditions, medication usage and treatments when undertaking full and accurate assessments of nursing care needs and when developing, prioritising and reviewing person centred care plan
<b>K17</b> Understand and apply a person-centred approach to nursing care, demonstrating shared assessment, planning, decision making and goal setting when working with people, their families, communities and populations of all ages
K18 Understand and apply the principles and processes for making reasonable adjustments
<b>K19</b> Understand and apply the relevant laws about mental capacity for the country in which you are practising when making decisions in relation to people who do not have capacity

**K20** Understand co-morbidities and the demands of meeting people's complex nursing and social care needs when prioritising care plans

**K21** Know when and how to refer people safely to other professionals or services for clinical intervention or support

**K22** Understand what is important to people and how to use this knowledge to ensure their needs for safety, dignity, privacy, comfort and sleep can be met, acting as a role model for others in providing evidence based person-centred care

**K23** Know and understand how to support people with commonly encountered mental health, behavioural, cognitive and learning challenges, and act as a role model for others in providing high quality nursing interventions to meet people's needs

**K24** Know and understand how to support people with commonly encountered physical health conditions, their medication usage and treatments, and act as a role model for others in providing high quality nursing interventions when meeting people's needs

**K25** Know how to act as a role model for others in providing evidence-based nursing care to meet people's needs related to nutrition, hydration and bladder and bowel health

**K26** Know how to act as a role model for others in providing evidence-based, person-centred nursing care to meet people's needs related to mobility, hygiene, oral care, wound care and skin integrity

**K27** Know how to identify and initiate appropriate interventions to support people with commonly encountered symptoms including anxiety, confusion, discomfort and pain

**K28** Understand what is important to people and their families when providing evidence-based person-centred nursing care at end of life including the care of people who are dying, families, the deceased and the bereaved

**K29** Know the signs of deterioration or distress in mental, physical, cognitive and behavioural health and use this knowledge to make sound clinical decisions

**K30** Understand how to initiate and evaluate appropriate interventions to support people who show signs of self-harm and/or suicidal ideation

**K31** Understand the principles of safe and effective administration and optimisation of medicines in accordance with local and national policies and demonstrate proficiency and accuracy when calculating dosages of prescribed medicines

**K32** Understand the principles of pharmacology and recognise the effects of medicines, allergies, drug sensitivities, side effects, contraindications, incompatibilities, adverse reactions, prescribing errors and the impact of polypharmacy and over the counter medication usage

**K33** Know and understand how prescriptions can be generated, the role of generic, unlicensed, and off-label prescribing and an understanding of the potential risks associated with these approaches to prescribing

**K34** Apply knowledge of pharmacology to the care of people, demonstrating the ability to progress to a prescribing qualification following registration

**K35** Understand the principles of health and safety legislation and regulations

**K36** Understand the relationship between safe staffing levels, appropriate skill mix, safety and quality of care

**K37** Understand how to identify, report and critically reflect on near misses, critical incidents, major incidents and serious adverse events in order to learn from them and influence their future practice

**K38** Understand the differences between risk aversion and risk management and how to avoid compromising quality of care and health outcomes

**K39** Understand and accept the need to accept and manage uncertainty, and demonstrate an understanding of strategies that develop resilience in self and others

**K40** Understand the role of registered nurses and other health and care professionals at different levels of experience and seniority when managing and prioritising actions and care in the event of a major incident

**K41** Understand the principles of quality improvement methodologies

**K42** Understand how the quality and effectiveness of nursing care can be evaluated in practice, work with people, their families, carers and colleagues to develop effective improvement strategies for quality and safety

#### Skills

**S1** Act in accordance with the Code (2015): Professional standards of practice and behaviour for nurses and midwives, and fulfil all registration requirements

**S2** Think critically when applying evidence and drawing on experience to make evidence informed decisions in all situations

**S3** Use resilience and emotional intelligence and is capable of explaining the rationale that influences judgments and decisions in routine, complex and challenging situations

**S4** Take responsibility for continuous self-reflection, seeking and responding to support and feedback to develop their professional knowledge and skills

**S5** Safely demonstrate evidence-based practice in all skills and procedures required for entry to the register

**S6** Acts as an ambassador, upholding the reputation of their profession and promoting public confidence in nursing, health and care services

**S7** Communicate effectively using a range of skills and strategies with colleagues and people at all stages of life and with a range of mental, physical, cognitive and behavioural health challenges

**S8** Support people at all stages of life who are emotionally or physically vulnerable

**S9** Develop, manage and maintain appropriate relationships with people, their families, carers and colleagues

**S10** Provide and promote non-discriminatory, person centred and sensitive care at all times, reflecting on people's values and beliefs, diverse backgrounds, cultural characteristics, language requirements, needs and preferences, taking account of any need for adjustments

**S11** Report any situations, behaviours or errors that could result in poor care outcomes

S12 Identify and challenge discriminatory behaviour

**S13** Contribute effectively and proactively in an interdisciplinary team

**S22** Accurately process all information gathered during the assessment process to identify needs for individualised nursing care and develop person-centred evidence-based plans for nursing interventions with agreed goals

**S23** Effectively assess a person's capacity to make decisions about their own care and to give or withhold consent

**S24** Recognise and assess people at risk of harm and the situations that may put them at risk, ensuring prompt action is taken to safeguard those who are vulnerable

**S25** Demonstrate the skills and abilities required to recognise and assess people who show signs of self-harm and/or suicidal ideation

S26 Undertake routine investigations, interpreting and sharing findings as appropriate

**S27** Interpret results from routine investigations, taking prompt action when required by implementing appropriate interventions, requesting additional investigations or escalating to others

**S28** Identify and assess the needs of people and families for care at the end of life, including requirements for palliative care and decision making related to their treatment and care preferences

**S29** Work in partnership with people, families and carers to continuously monitor, evaluate and reassess the effectiveness of all agreed nursing care plans and care, sharing decision making and readjusting agreed goals, documenting progress and decisions made

**S30** Support people with commonly encountered mental health, behavioural, cognitive and learning challenges, and act as a role model for others in providing high quality nursing interventions to meet people's needs

**S31** Support people with commonly encountered physical health conditions, their medication usage and treatments, and act as a role model for others in providing high quality nursing interventions when meeting people's needs

**S32** Act as a role model for others in providing evidence-based nursing care to meet people's needs related to nutrition, hydration and bladder and bowel health

**S33** Act as a role model for others in providing evidence-based, person-centred nursing care to meet people's needs related to mobility, hygiene, oral care, wound care and skin integrity

**S34** Identify and initiate appropriate interventions to support people with commonly encountered symptoms including anxiety, confusion, discomfort and pain

**S35** Prioritise what is important to people and their families when providing evidence-based personcentred nursing care at end of life including the care of people who are dying, families, the deceased and the bereaved

**S36** Respond proactively and promptly to signs of deterioration or distress in mental, physical, cognitive and behavioural health and use this knowledge to make sound clinical decisions

**S37** Manage commonly encountered devices and confidently carry out related nursing procedures to meet people's needs for evidence based, person-centred care

S38 Provide first aid procedures and basic life support

**S39** Demonstrate numeracy, literacy, digital and technological skills to meet the needs of people receiving nursing care to ensure safe and effective nursing practice

**S40** Co-ordinate and undertake the processes and procedures involved in routine planning and management of safe discharge home or transfer of people between care settings

S41 Maintain safe work and care environments

**S42** Comply with local and national frameworks, legislation and regulations for assessing, managing and reporting risks, ensuring the appropriate action is taken

S43 Recognise risks to public protection and quality of care, escalating concerns appropriately

**S44** Accurately undertake risk assessments in a range of care settings, using a range of contemporary assessment and improvement tools

**S45** Identify the need to make improvements and proactively respond to potential hazards that may affect the safety of people

**S46** Participate in all stages of audit activity and identify appropriate quality improvement strategies

S47 Use service delivery evaluation and audit findings to bring about continuous improvement

**S48** Share feedback and learning from positive outcomes and experiences, mistakes and adverse outcomes and experiences

#### **Behaviours**

**B1** Treat people with dignity, respecting individual's diversity, beliefs, culture, needs, values, privacy and preferences

**B2** Show respect and empathy for those you work with, have the courage to challenge areas of concern and work to evidence based best practice

**B3** Be adaptable, reliable and consistent, show discretion, resilience and self-awareness and demonstrate leadership

### **Assessment method 2: Professional Discussion B**

#### Knowledge

**K9** Understand the aims and principles of health promotion, protection and improvement and the prevention of ill health when engaging with people

**K10** Understand epidemiology, demography, genomics and the wider determinants of health, illness and wellbeing and apply this to an understanding of global patterns of health and wellbeing outcomes

K11 Understand the factors that may lead to inequalities in health outcomes

**K12** Understand the importance of early years and childhood experiences and the possible impact on life choices, mental, physical and behavioural health and wellbeing

**K13** Understand the contribution of social influences, health literacy, individual circumstances, behaviours and lifestyle choices to mental, physical and behavioural health outcomes

**K43:** Understand the principles of partnership, collaboration and interagency working across all relevant sectors

**K44** Understand health legislation and current health and social care policies, and the mechanisms involved in influencing policy development and change, differentiating where appropriate between the devolved legislatures of the United Kingdom

**K45** Understand the principles of health economics and their relevance to resource allocation in health and social care organisations and other agencies

**K46** Understand how current health policy and future policy changes for nursing and other professions and understand the impact of policy changes on the delivery and coordination of care

**K47** Understand and recognise the need to respond to the challenges of providing safe, effective and person-centred nursing care for people who have co-morbidities and complex care needs

**K48** Understand the complexities of providing mental, cognitive, behavioural and physical care services across a wide range of integrated care settings

K49 Understand how to monitor and evaluate the quality of people's experience of complex care

**K50** Understand the principles and processes involved in supporting people and families with a range of care needs to maintain optimal independence and avoid unnecessary interventions and disruptions to their lives

**K51** Understand the principles and processes involved in planning and facilitating the safe discharge and transition of people between caseloads, settings and services

**K52** Understand the processes involved in developing a basic business case for additional care funding by applying knowledge of finance, resources and safe staffing levels

**K53** Understand the importance of exercising political awareness throughout their career, to maximise the influence and effect of registered nursing on quality of care, patient safety and cost effectiveness

**K54** Understand the principles of effective leadership, management, group and organisational dynamics and culture and apply these to team working and decision-making

**K55** Understand the principles and application of processes for performance management and how these apply to the nursing team

**K56** Understand the roles, responsibilities and scope of practice of all members of the nursing and interdisciplinary team and how to make best use of the contributions of others involved in providing care

**K57** Understand and apply the principles of human factors, environmental factors and strengthbased approaches when working in teams

**K58** Understand the mechanisms that can be used to influence organisational change and public policy, demonstrating the development of political awareness and skills

### Skills

**S14** Apply the principles of health promotion, protection and improvement and the prevention of ill health when engaging with people

**S15** Use all appropriate opportunities, making reasonable adjustments when required, to discuss the impact of smoking, substance and alcohol use, sexual behaviours, diet and exercise on mental, physical and behavioural health and wellbeing, in the context of people's individual circumstances

**S16** Promote and improve mental, physical, behavioural and other health related outcomes by understanding and explaining the principles, practice and evidence-base for health screening programmes

**S17** Use up to date approaches to behaviour change to enable people to use their strengths and expertise and make informed choices when managing their own health and making lifestyle adjustments

**S18** Use appropriate communication skills and strength based approaches to support and enable people to make informed choices about their care to manage health challenges in order to have satisfying and fulfilling lives within the limitations caused by reduced capability, ill health and disability

**S19** Provide information in accessible ways to help people understand and make decisions about their health, life choices, illness and care

**S20** Promote health and prevent ill health by understanding and explaining to people the principles of pathogenesis, immunology and the evidence-base for immunisation, vaccination and herd immunity

**S21** Protect health through understanding and applying the principles of infection prevention and control, including communicable disease surveillance and antimicrobial stewardship and resistance

S49 Facilitate equitable access to healthcare for people who are vulnerable or have a disability

**S50** Advocate on behalf of people who are vulnerable or have a disability when required, and make necessary reasonable adjustments to the assessment, planning and delivery of their care

**S51** Identify and manage risks and take proactive measures to improve the quality of care and services when needed

**S52** Safely and effectively lead and manage the nursing care of a group of people, demonstrating appropriate prioritisation, delegation and assignment of care responsibilities to others involved in providing care

**S53** Guide, support and motivate individuals and interact confidently with other members of the care team

S54 Monitor and evaluate the quality of care delivered by others in the team and lay carers

**S55** Support and supervise students in the delivery of nursing care, promoting reflection and providing constructive feedback, and evaluating and documenting their performance

**S56** Challenge and provide feedback about care delivered by others in the team, and support them to identify and agree individual learning needs

**S57** Contributes to supervision and team reflection activities to promote improvements in practice and services

**S58** Use a range of digital technologies to access, input, share and apply information and data within teams and between agencies