FACULTY OF HEALTH AND LIFE SCIENCES
PRACTICE EDUCATION UNIT

INTERPROFESSIONAL PLACEMENT QUALITY ASSURANCE (QA) GUIDANCE FOR HEALTH
AND SOCIAL CARE PLACEMENTS FOR PRE-REGISTRATION PROGRAMMES.

Contents

1. Introduction to Placement Quality Assurance ................................................................. 2
   A. Placement Profile ........................................................................................................... 2
   B. Placement Learning Environment Audit Tool (PLEAT) for health care placements and Higher
      Education Institute Quality Assurance for Placement Learning (HEI QAPL) for social work
      placements ...................................................................................................................... 2
      Bi How to complete PLEAT ..................................................................................... 3
      Bii. How to complete HEI QAPL ............................................................................... 5
   C. Placement Evaluation ................................................................................................... 5
      i. Student Placement Evaluation .................................................................................. 5
         a. Health care student placement evaluation ......................................................... 5
         b. Social care student placement evaluations ......................................................... 5
      ii. Practice Assessor placement evaluation ................................................................. 5
         a. Health care practice assessor placement evaluation ........................................... 5
         b. Social care practice assessor placement evaluation ........................................... 6
   D. Capacity planning for Nursing and Midwifery placement allocation .......................... 6

2. Guidance for opening a new health care placement outside of the NHS (including Nursing and /or
   Care Homes, Private Hospitals and other placement providers) ...................................... 6

Appendix 1: PROCESS FOR NEW HEALTH CARE PLACEMENT SELECTION AND DEVELOPMENT
AND QUALITY ASSURANCE ......................................................................................... 7
1. **Introduction to Placement Quality Assurance**

This guidance outlines the principles and processes associated with placement quality assurance. Placement Quality Assurance within the Faculty comprises of four parts:

A. Placement Profile

B. An audit: (either i or ii below)
   i. Placement Learning Environment Audit Tool (PLEAT) for health care placements
   ii. Higher Education Institute Quality Assurance for Placement Learning (HEI QAPL) for social work placements

C. Student placement evaluations and Practice assessor's placement evaluations

In addition:

D. placement capacity informs decisions at more frequent stages than at the time of audit, and so the process for determining this is included in this guidance for completeness.

**A. Placement Profile**

The placement profile is used to inform the student about the placement. It is completed by the link lecturer and placement colleagues.

It includes information about

- who to contact,
- travel information,
- the dress and appearance code
- work patterns/hours
- who the patient/service users are and their main issues/needs.

Importantly, it can inform the student what the area’s expertise is, what its future plans are and what opportunities are available. Some profiles may advise a student about preparation needed for the placement, examples of good practice and quality initiatives (e.g. nominations for Placement of the Year Award) and feedback received.

Individual practice placement learning environment profiles are formally documented and updated to take account of any changes to service reconfiguration or approved programme placement allocations (NMC 2013).

**B. Placement Learning Environment Audit Tool (PLEAT) for health care placements and Higher Education Institute Quality Assurance for Placement Learning (HEI QAPL) for social work placements**

**Statutory Professional Regulatory Body requirements:**

The Nursing and Midwifery Council (NMC 2013) quality assurance framework expects that educational audit:

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1 Practice assessor means the person qualified to support the student in practice. The name given to this role varies across professions and includes the following: mentor, clinical educator, practice educator, practice teacher, clinical mentor, off site supervisor.
• Informs the maintenance or improvements to the student practice placement experience and highlights areas of potential concerns.
• Demonstrates partnerships between education and practice learning.
• Is informed by student, mentor and service user feedback as relevant.
• Is undertaken at least once every two years, except where placements are used for supervised practice for overseas nurses seeking UK registration where annual auditing is required.
• Takes account of all types of learners that use individual practice placements.
• Is reviewed promptly by practice placement partners when adverse incidents may impact on safe and effective learning in order that timely alerts to AEIs take place.

The Health and Care Professions Council (HCPC) require all placements to be audited every 5 years (i.e. 20% of all placements require an audit annually so that in 5 years 100% of placements will have been audited).

These requirements are met following an audit cycle which consists of systematic stages working towards best practice.

“Audit and feedback is widely used as a strategy to improve professional practice either on its own or as a component of multifaceted quality improvement interventions” (Ivers et al 2012:5)

Audit is one tool that aims to maintain and achieve quality in a given area. It consists of reviewing and monitoring current practice (against professional standards), It is not only reviewing what is in place, but also what can be developed further as good practice.

Key considerations are:
  a) the impact of any findings arising from External Quality Review: (e.g. Care Quality Commission reports)
  b) the evaluation of the student placement learning experience
  c) learning environment resources –Such as staff experience, client / service user input, policies and protocols around best practice as well as traditional learning tools such as journals, and internet access/online learning resources/ (including Practice Education Unit (PEU) webpages and Practice Education Management System (PEMS).
  d) student induction and exit processes i.e. how placement areas familiarise a student with the placement area, its clients / users, staff and care approach. Equally importantly it asks placements areas how they help students bring a placement to an appropriate close, for example handing over responsibilities to the placement team.

Bi How to complete PLEAT

NB: A PLEAT is only needed for placements that are:
• Longer than 4 weeks in duration
  OR
• Require assessment of competencies by a practice assessor(s) whilst the student is in practice.

Quality assurance of placements that do not fit the above (e.g. placements of shorter duration, or competencies are assessed elsewhere) is achieved by the placement profile and the student and practice assessor placement evaluations.
N.B. For PLEAT to be approved as ‘current’ you will need to have the following completed on Practice Education Management System (PEMS):

<table>
<thead>
<tr>
<th>Checklist</th>
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<tbody>
<tr>
<td>PLEAT and Action Plan</td>
</tr>
<tr>
<td>Programme specific checklist (competency checklist for Nursing, Midwifery &amp; Operation Department Practitioner (ODP))</td>
</tr>
<tr>
<td>For Private, Voluntary and Independent sector (PVI) placements only:</td>
</tr>
<tr>
<td>• confirmation of health and safety status in practice placements and</td>
</tr>
<tr>
<td>• update the live register of practice assessors: (please contact PEU for help with this)</td>
</tr>
</tbody>
</table>

PLEAT has been developed in partnership with placement providers and is designed to be easy to use and to focus on learning environments consisting of a single or group of placement profiles. It has been designed, so that Faculty and placement staff may complete jointly, as they hold joint accountability for confirming quality of placements.

It is important that key evidence is identified when undertaking the PLEAT, (e.g. student placement evaluations, guidance and policy sources). Joint decisions will determine the RAG² (rating for each response, and an action plan item should be generated and agreed, for all amber or red ratings. Each action plan should be recorded in the form of a measurable SMART objectives:

- Specific
- Measurable
- Action-orientated
- Responsibility for action agreed and realistic
- Time limited with deadlines and updated at least every year

Action plans should reflect the goals of the placement in continuously improving the practice education it offers. The on line PLEAT has an ‘in built’ action plan functionality, which develops an action plan automatically from all actions identified. The dates for review can be set specifically for each item, depending upon the severity of the issue. PEU and the Head of Practice Education monitor all PLEATs that have red or amber action plan items, and is currently developing reporting formats, for PEMS to alert PEU, Head of Practice Education and the respective Link Lecturers for any action plan item that is not reviewed by the set date.

Previous audits that have been completed on PEMS, can be accessed in advance of audit expiration date (e.g. 3 months in advance for routine audit completion requirements), and are therefore used to review level of improvement or to assess action required for arising concerns.

As PLEATs are normally completed online using PEMS, please refer to PEMS Guidance on the document store on: [https://shsc-int.brookes.ac.uk/documents/browse.php?fFolderId=836](https://shsc-int.brookes.ac.uk/documents/browse.php?fFolderId=836).

If you have any additional questions about PLEAT please contact the Placement Lead for your programme or the Practice Education Unit on [peu@brookes.ac.uk](mailto:peu@brookes.ac.uk) or 01865 48 5254.

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² RAG means Red, Amber, Green rating. Red: needs speedy action, Amber: needs action in the short term, Green: Satisfactory, no action required.
Designated placement providers (e.g. Learning Environment Leads and Placement Coordinators) have ‘real time’ access to audits that are current, and those in progress. In addition, reports are available from PEU upon request (and will also shortly be available online).

Bii. How to complete HEI QAPL

For social work placements, the HEI QAPL is part of the Practice Learning Agreement (PLA) form which is completed by the Link Lecturer at the allocated student’s Practice Learning Agreement meeting which takes place in advance of the student starting the placement. The completed PLA is returned to the PEU.

C. Placement Evaluation

Placement evaluation needs to be timely and respond to need so that all feedback may be addressed in an appropriate way to the placement provider. There are agreed placement evaluation forms which are utilised for all health and social care pre-qualifying programmes within the Faculty.

i. Student Placement Evaluation

a. Health care student placement evaluation

Notification to complete student evaluation is sent out by PEMS upon the end date of the placement allocation for the placement. Students can therefore complete this online. Student placement evaluation is accessible in real time via PEMS. The authorised person in the placement area will have access to this data. Agreed designated placement colleagues will have access to the evaluation reports for their own organisation/area. Placement Leads are able to access reports of all placement evaluations to present to Subject Committees in the relevant module evaluation reports. These then feed into the usual Annual Review process. N.B. Placement colleagues will require a secure and approved login to PEMS to be able to access student evaluations for their placement areas.

b. Social care student placement evaluations

For social work students it is a requirement for them to complete a placement evaluation as part of their PAD. Once a student has notified PEU they have completed their placement, PEU send them a link to the placement evaluation form. Once this has been completed the student receives a confirmation email for the PEU which they then print off and put into their PAD.

ii. Practice Assessor placement evaluation

a. Health care practice assessor placement evaluation

PEU, Link Lecturers, and placement providers are able to enter the contact details of all practice assessors into PEMS. This will be a continuous process as this population may be very mobile, and the information may not be known at placement start. Link Lecturers are able to assign the
specific practice assessor to the student for a specified placement slot (i.e. the allocated placement area), AND the duration from placement (start to end date). They can amend this name up to the day before the placement is due to end. PEMS is then able to send out a request to the practice assessor to complete a placement evaluation online via PEMS.

Placement evaluation is accessible in real time via PEMS. The authorised person(s) in the placement provider organisation will have access to this data, once they have been provided with a secure log in.

b. Social care practice assessor placement evaluation

For social work placements it is a requirement for payment that the placement completes a placement evaluation. Once PEU is notified a student has completed their placement, PEU sends the Practice Educator a link to the placement evaluation form. Once this has been completed the agencies invoice can be passed for payment.

D. Capacity planning for Nursing and Midwifery placement allocation

Placement capacity is very variable, and is managed by the Learning Environment Lead and placement providers in partnership with the Practice Education Unit and placement teams. Capacity is not recorded in the PLEAT as this is only completed every two years. Placement providers, including the Oxford University Hospital NHS Trust, and Oxford Health NHS Foundation Trust and the Great Western Hospital have processes in place to assess real time capacity at each placement allocation stage. These processes take account of HEI, NMC, HCPC, student requirements, learning outcomes, staff, student, and patient safety, skill mix, available learning resources, staffing and vacancy factor, Learning Beyond Registration students and multiple HEIs and professions who access each practice learning environment.

The partnership working approach outlined above is responsive to providing effective and safe and supportive learning experiences and ensures that allocations take account of fluctuations in capacity. There internal placement provider processes co-ordinated by the pivotal role of the Learning Environment Lead. It is only when capacity has been confirmed (termed as confirming ‘offers’) by placement providers, for each student allocation workflow, that students are allocated by the Practice Education Unit.

Evidence of this process can be found in a wide number of documented records, including:

- Placement capacity Management Groups (PCMG)
- Oxford Adult Nursing Placement group (OAP)
- Clinical Health in Practice (CHiP) group
- Practice Assessors Group (PAG)

N.B. For further information, please contact the Practice Education Unit

2. Guidance for opening a new health care placement outside of the NHS (including Nursing and/or Care Homes, Private Hospitals and other placement providers)

Identify the star rating Care Quality Commission (CQC).

All CQC reports for the proposed placement area must be looked at before making any approach to staff within the organisation. A minimum of a 2 Star rating is required before a placement may be considered. (Unless a new placement provider, where star rating not yet in
Identify if there are other external quality assurance reports available for the organisation.

If there are any misgivings about the potential appropriateness of the potential placement then these must be recorded and discussed fully with the manager of the potential placement provider, ideally at the time, or within 2 University working days.

Seek information/agreement about the provision of qualified mentors within the placement area. N.B. Each placement provider is considered on a case by case basis (after discussion with the Head of Practice Education) i.e.

- how mentor updates will be achieved for qualified mentors.
- how introductions to mentoring may be offered to other staff as support to the qualified mentors.
- how the Quid Pro Quo policy may be implemented. N.B. Each placement provider is considered on a case by case basis (after discussion with the Head of Practice Education, Practice Education Unit).

**Process:**

- Placement profile and PLEAT tool to be completed in partnership with the relevant placement provider manager (or equivalent)
- Confirmation of Health & Safety status to be confirmed in writing by the placement provider and recorded in PEMS (including the person receiving the confirmation)
- Mentor quality assurance information to be recorded (using the live register ‘housed’ by Brookes, according to Supporting Learning and Assessing in Practice (SLAiP) Standards NMC 2008).
- Staff turnover information should be assessed so that a general picture of stability of support can be determined.

**References:-**


Appendix 1: PROCESS FOR NEW HEALTH CARE PLACEMENT SELECTION AND DEVELOPMENT AND QUALITY ASSURANCE

Potential new placement area identified (e.g. by one of the following:
Potential placement provider, Member of Faculty staff,
Senior placement staff member (e.g. Learning Environment Lead [LEL])

Practice Education Unit (PEU)

Informs Programme/ Placement Lead

Identifies Link Lecturer to complete placement quality assurance (i.e. Placement profile and PLEAT) in conjunction with the placement provider through PEMS

Link Lecturer informs PEU, Placement/Programme Lead (and LEL) that placement ready to start supporting students.