

## The role and responsibilities of the mentor/sign off mentor

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## **NMC Standards for mentors and sign-off mentors**

The Code: Standards of conduct, performance and ethics for nurses and midwives (NMC, 2008b) states that the registered nurse must work with others to protect and promote the health and wellbeing of those in their care, the families and carers, and the wider community. To enable achievement of this, the registered nurse must share information with colleagues including the facilitation of students and others to develop their competence (point 23, NMC 2008b).

In 2006 (revised in 2008) the NMC introduced mandatory standards indicating the knowledge and skills required of mentors, practice teachers and teachers in the support and assessment of student nurses and midwives in practice: [Standards to support learning and assessment in practice](#) (SLAiP) (NMC, 2008a).

Within this document the NMC (2008a) has identified the responsibility and accountability of mentors in relation to student learning and assessment in practice:

- Organising and co-ordinating student learning activities in practice.
- Supervising students in learning situations and providing them with constructive feedback on their achievements.
- Setting and monitoring achievement of realistic learning objectives.
- Assessing total performance – including skills, attitudes and behaviours.
- Providing evidence as required by programme providers of student achievement or lack of achievement.
- Liaising with others (e.g. mentors, sign-off mentors, practice facilitators, practice teachers, personal tutors, programme leaders) to provide feedback, identify any concerns about the student's performance and agree action as appropriate.
- Providing evidence for, or acting as, sign-off mentors with regard to making decisions about achievement of proficiency at the end of a programme.

Being a mentor is a very important role, in terms of ensuring that students who qualify as registered practitioners are competent for the role. Students are your future workforce, it is therefore, extremely important that they are fit for practice at the point of registration. Mentors are responsible and accountable for the decisions that they make at every assessment point. The decision to address a problem should never be left to the next mentor. Although sign-off mentors make the final decision regarding a student's fitness for practice, any assessment completed prior to sign-off will be taken into account and each individual mentor is responsible and accountable for that decision.

The SLAiP document identifies outcomes for mentors, practice teachers and teachers so that there is clear accountability for making decisions that lead to registration or a recordable qualification.

A Sign-off mentor is a nurse mentor who has met additional NMC requirements in order to be able to make judgements about whether a student has achieved the overall standards of competence required for entry to the register at the end of an NMC approved programme (NMC, 2008a). Sign-off mentors are required to:

- Be on the live register of mentors
- Have developed their own knowledge, skills and competence beyond registration i.e. been registered for at least one year, and has clinical currency and capability in the field of practice in which the student is being assessed.

- Have successfully completed an NMC approved mentor preparation programme (or equivalent accredited by a HEI, as meeting the NMC mentor requirements) and achieved and maintained the competencies set above.
- Be able to support other registrants in meeting CPD needs in accordance with The NMC Code: standards for conduct, ethics and performance (2008b).
- Have a working knowledge of current programme requirements, practice assessment strategies and relevant changes in education and practice for the student they are assessing.
- Have an understanding of the NMC registration requirements and the contribution they make to meeting these requirements.
- Have an in-depth understanding of their accountability to the NMC for the decision they make to pass or fail a student when assessing proficiency requirements at the end of a programme.

There are eight domains within the SLAiP framework, each with identified outcomes at the four developmental stages from registered nurse/midwife through to teacher. Mentors must demonstrate continued competence within these domains to remain on the live mentor register:

- Establishing effective working relationships
- Facilitation of learning
- Assessment and accountability
- Evaluation of learning
- Creating an environment for learning
- Context of practice
- Evidence-based practice
- Leadership

To support mentors in the achievement of the above SLAiP (NMC, 2008a) outcomes, the following tip sheet has been created:

<b>Tips for Mentors: providing an effective learning experience</b>	
Plan for the students arrival	<ul style="list-style-type: none"> <li>• Plan students off duty to match own (at least 40% of the time – this is an NMC requirement). Arrange for a deputy if you are not on duty</li> <li>• Find out about the student: what level are they, what do they need to know.</li> <li>• Familiarise yourself with their programme of study and assessment documentation.</li> <li>• Plan how you will support the student, and identify any support you need for yourself.</li> <li>• Be sure you know who to contact for support within practice and from the University</li> </ul>
Establish ways of working	<ul style="list-style-type: none"> <li>• Set times for preliminary, progress and final interviews in your placement.</li> <li>• Identify the learning outcomes to be achieved relevant to the period of study.</li> <li>• Review the student's practice learning plan in the practice assessment document</li> <li>• Discuss any special needs or support required</li> <li>• Share expectations</li> <li>• Establish how you will work with the student during placement</li> <li>• Provide orientation to the practice area as defined in the interview schedules</li> <li>• Identify learning opportunities</li> <li>• Be sure you know who the students personal tutor is and how to contact them</li> <li>• Be aware of your own influence through role modelling</li> </ul>
Facilitate learning	<ul style="list-style-type: none"> <li>• Allow some independence, move from direct to indirect forms of supervision, as the student becomes more experienced</li> <li>• Encourage critical thinking</li> <li>• Create opportunities for learning</li> <li>• Ask the right questions to assist students to solve their own problems</li> <li>• Share your reflections in action to give students insight into decision making and problem solving skills</li> <li>• Listen</li> </ul>
Continuously assess practice	<ul style="list-style-type: none"> <li>• Assess the student's capability early in the placement, rather than just at the end so that appropriate supervision is implemented and an action plan commenced early if deficits in performance are identified.</li> <li>• Observation</li> <li>• Questioning</li> <li>• Reflective discussion</li> <li>• Testing/reviewing evidence</li> </ul>
Review progress	<ul style="list-style-type: none"> <li>• Plan formal opportunities to provide feedback.</li> <li>• Informal feedback can also be given throughout the students placement</li> <li>• Regular contact with the practice/university links or the students own personal tutor is important to keep them updated of the students' progress</li> </ul>
Evaluate the placement experience	<ul style="list-style-type: none"> <li>• Reflect on your performance as a practice mentor. What did you do well? What could you do better next time? How did the student respond to you? Was support available when you needed it? Maintain your skills</li> </ul>

## Practice Assessment Record Keeping

When completing a student's practice assessment document the principles of good record keeping identified by the [NMC Record Keeping Guidance for Nurses and Midwives \(2009\)](#) should be adhered to by mentors at all times. These have been identified below specifically in relation to student assessment:

1. Handwriting should be legible.
2. All entries to records should be signed. The person's name and job title should be printed alongside the first entry. It is not acceptable to use a name stamp only but this can be used alongside a signature.
3. You should include the date and time on all records. This should be in real time and chronological order, and be as close to the actual time as possible.
4. Your records should be accurate and recorded in such a way that the meaning is clear.
5. Records should be factual and not include unnecessary abbreviations, jargon, meaningless phrases or irrelevant speculation.
6. You should use your professional judgement to decide what is relevant and what should be recorded.
7. Records should identify any risks or problems that have arisen and show the action taken to deal with them.
8. You must not alter or destroy any records without being authorised to do so.
9. In the unlikely event that you need to alter your own or another professional's records, you must give your name and job title, and sign and date the original documentation. You should make sure that the alterations you make, and the original record, are clear and auditable.
10. The language that you use should be easily understood by the student.
11. Records should be readable when photocopied or scanned.
12. You should not use coded expressions of sarcasm or humorous abbreviations to describe the student.
13. You should not falsify records; this includes the student's practice assessment documentation.

## Giving and receiving feedback

Mentors/supervisors should provide continuous verbal and written feedback to each student regarding performance; this may include positive feedback and identification of areas that require further development. Written feedback is an essential component of the assessment process and adds weight to the mentor's final assessment decision. It is particularly useful in decisions to fail a student because it demonstrates that the student was fully informed about their level of competence.

Tips for mentors: giving effective feedback to students	
Involve the student in assessment	Provide an opportunity for the student to self-assess first
Sensitivity	Not all the feedback you give will be positive. If you need to give negative feedback you should be aware of the language that you use, so that it is constructive. Feedback should be given in private.
Timely	Feedback needs to be given at an appropriate time. If feedback is related to a particular incident/area of concern feedback should be given as close to the time of the event as possible.
Objectivity	Feedback should focus on the students' performance avoiding personal bias.
Be clear and specific	You need to be able to comment on specific behaviours and achievements rather than giving general comments. For example, 'You seem to have a good knowledge of promoting a healthy diet, but when I observe you communicating with service users, I find you tend to tell them what to do, and never discuss the choices available, and when service users try to tell you what they want, you do not seem to listen, and still go along with what you want to do' rather than 'the way you communicate with service users is poor'.
Balanced and Constructive	Using the Action Plan pages in the practice assessment document, feedback should include a plan of how the student can develop to improve their performance. Concentrate on the positive as well as the negative. Try to end on a positive note
In an appropriate environment	Feedback should be provided in private, away from service users, staff and other students.
Supportive and challenging	Give a clear statement about what was good (support) and how the student can improve (challenge).
Own the feedback	'I find... I feel...' rather than 'you are... you didn't...'
Document feedback	Feedback should be documented. You may need to refer to this when making future judgments about performance. It might also be necessary to look back and see what advice has been given to a student. If the feedback is not documented it is very difficult to demonstrate that it was provided in the event of a student appeal against a practice decision.
Opportunity for student feedback	Time should be given for the student to respond to the feedback given.

## Using evidence to make judgements about competence

When making judgments about a student's performance the practice mentor must be clear about the evidence that informs decision making. There are multiple types of evidence that can be used as proof of claimed learning. It is both acts and omissions that constitute evidence to inform decisions about competence

It is important to consider the assessment in relation to the whole domain rather than each essential skills cluster so that a holistic assessment is undertaken. Some forms of evidence will demonstrate achievement of multiple essential skills clusters. One or two forms of evidence may demonstrate competence in a whole domain. It is not necessary to have one individual piece of written evidence for each separate essential skill.

### Observation

Direct observation is an important, convenient and immediate way of evaluating a student's performance. Observation will need to be combined with another method of evidence. For example, whilst observation of client documentation will give an indication of the standard of record keeping, this does not provide assurance that the student understands the legislation relating to record keeping and this aspect will need to be assessed by an alternative method.

### Questioning

Questioning may be used to test knowledge, attitudes, critical thinking and reasoning skills. Mentors need to consider the type and level of questions that are asked, and how these can be worded to test students at an appropriate level. The levels of performance in the practice assessment document should be applied to help construct questions to appropriately test the link between theory and practice. As students advance through training, mentors should try to stimulate higher level thinking that tests reasoning and decision making rather than lower level questions that just test factual knowledge.

### Simulation

Simulation should not be used for clinical activities that can be undertaken in the live setting. However, students do not always have the opportunity to experience all clinical activities for which they are prepared and in which they have to be assessed, for example basic life support. Simulation may be used to assess the student in these cases.

### Reflection

Reflective practice can be described as developing ways of learning from experience, which may help to modify and change approaches to practice.

Reflection is not just day-dreaming, it is exploring clinical experiences and objectively, formally or informally, analysing that experience and understanding what happened, why it happened and the consequences. It is the analysing of the thoughts, feelings and actions from which strategies are developed to inform practice. It requires self-awareness and enables professional judgements to be examined and enhanced.

Reflection can be facilitated by

- Asking students to explain their practice
- Setting aside time to reflect on practice experiences with the student
- Make a point of asking students about their portfolio
- Share experiences and reflections with students

Models of reflection can assist students in providing a structure to reflection and various models are available. The model to be used will depend upon student preference.



### Using Service user/carer's Comments

Service users'/carers' views must contribute to the assessment of student nurses, where possible. In consulting with service user/carers mentors should be guided by the following:

- ❖ The service user/carer will only be approached by the mentor for comments
- ❖ Contribution by the service user/carer will be entirely voluntary
- ❖ Verbal consent will be sought from the service user/carer
- ❖ The identity of the service user/carer will be anonymised wherever possible
- ❖ If anonymity is not possible the service user/carer can choose not to participate
- ❖ Any lack of service user/carer contribution will not prejudice the practical assessment of the student
- ❖ The mentor will use professional judgement to determine the quality, significance and meaning of the verbal accounts they receive.

Mentors will record in the student's practice assessment document that service user/carers experiences have been taken into account in assessing the student's practice at the Final Assessment point. The service-user/carer should not be required to write comments in the document.

### **Students with Disclosed Disabilities**

The practice assessment document must be completed in line with all reasonable adjustments to which students may be entitled if they have a diagnosed disability which has been disclosed, assessed and recognised by the University. The student will require evidence of such entitlement. The reasonable adjustments applied to student placement learning must not detract from the competences to be met in order to successfully complete the learning outcomes required of the placement. Please see initial interview pages in the practice assessment document for disability disclosure statements. Further guidance has been issued by the University and can be found within the resources section of the practice website.

## Managing and supporting the failing student

In 2004 [Duffy](#) carried out a qualitative study of the factors that influence the decisions regarding assessment of students' competence in practice. She identified a number of reasons for nursing students failing placement:

- Poor communication and interpersonal skills
- Lack of interest and failure to participate in practice learning
- Persistent lateness
- Lack of personal insight
- Lack of insight into professional boundaries

This study also identified that mentors find it difficult to fail students for various reasons. The most important role of any mentor is to be able to identify a student who is at risk of failing and being able to provide support and opportunities which enable the student to achieve, if this is possible. Many mentors and students find the term 'Action Plan' as harsh and see the commencement of an action plan as the last resort. However, action plans should be viewed more positively. They provide an opportunity to identify small problems and take action to correct them before they become much bigger problems.

The earlier that concerns are identified with students, the better chance the student has of meeting the final competence level required. When concerns are initially identified it is important not to jump to conclusions or make assumptions about the student's performance or behaviour. For example, a mentor may become frustrated by a seemingly uninterested student but after discussion with a student this may relate more to a lack of confidence than a lack of interest. This will still require support and management through an action plan but within a different context.

Speak to other members of the team to identify whether they have similar concerns but be mindful of maintaining student confidentiality. If you feel that you need support when speaking to the student you could ask one of your colleagues to be present or contact the university/practice support team for further advice.

Ensure that any meetings to discuss a student's performance are held in private and that the student knows who will be present. Start off by asking the student how well they think they are doing and whether they have any concerns/problems with the placement experience. This may identify some difficulties that the student is having that you are not aware of. This can sometimes become quite emotional, particularly if the student is having personal difficulties or is not able to acknowledge the concerns that you are raising. If this is the case, it is still important at this point that you do not give the student 'the benefit of the doubt' and fail to take any further action. The most effective way of supporting a student who is not working to the required standard is to commence an action plan, taking into account any personal circumstances if possible. Advice should be sought from the university if you are unsure what action to take in this situation.

Identify your concerns in a constructive way (refer to the section above on giving effective feedback) and commence an action plan. Encourage the student to identify how the action plan can be achieved. If the action plan is commenced and the student works hard to achieve it in a short space of time, the required outcome has been achieved. However, if the commencement of an action plan is delayed and the student's conduct/behaviour deteriorates further the situation may become more difficult to manage within a shorter time span.

When concerns have been identified, it is important that students understand that they are not currently working to the standard expected for the stage on the programme and that failure to meet

the required standard by the end of the placement will result in a fail grade being given. Appeals against assessment decisions have been upheld because students have indicated that they were not informed that failure to meet the action plan would result in a failed practice assessment. Documentation in student assessment documents is similar to patient documentation; if it has not been documented it is difficult to prove that it happened.

It is important for the mentor to write the action plan in partnership with the student so that ownership of the action plan is retained by the student and their mentor. The mentor must also document any reviews. Staff from the University/practice support teams must not write the student's action plan but may provide additional information or support related to review of the action plan.

It is important that the student fully understands the requirements of the action plan and knows what to do to be able to achieve it. Using a systematic approach may help with the implementation of an action plan:

- Assessment – what is the problem/concern. This should be related directly to the competency domains and the relevant Essential Skills Clusters so that it is clearly linked to the practice assessment.
- Planning – how can the student achieve the objective, what actions need to be undertaken and are there appropriate resources available to enable this
- Implementation - the student should be supported to implement the actions identified within the action plan.
- Evaluation – the action plan must be reviewed at regular intervals, at least weekly, and this must be documented.

To enable achievement of the action plan, aims and objectives should be written using the SMART criteria: specific, measurable, achievable, realistic and time specific.

Specific - Are the aim and objectives clear and precise? Ask the student to indicate their understanding of the objective and the actions identified so that you are clear that the student knows what must be achieved.

Measurable – indicate how you will decide whether or not the student has achieved the objective through the identification of specific actions that are measurable and ask the student to indicate what evidence they think would demonstrate achievement.

Achievable – consider whether it is possible for the student to achieve the objective within the timeframe set. Identify the resources available to enable this to happen.

Realistic – consider the stage of learning of the student and whether it is possible for the student to achieve the objectives within the timeframe set. If your practice area is a specialist area, consider whether what you are asking requires expertise as a qualified nurse or is it something that would be expected of all newly qualified nurses.

Time specific – ensure that you indicate when the student must achieve each of the objectives and indicate any review dates. Where there are several objectives to achieve it is useful to set different completion dates for each objective so that the student can work to achieve small chunks rather

than just aiming to achieve everything by the end of the placement. Consider whether it is possible to achieve everything by the deadline set. If not, contact the university/practice support staff to discuss this further. If review dates are set, ensure that the student's progress is reviewed on these dates and that this is recorded by the mentor in the practice assessment document.

If at any point in the assessment process you are unable to record your concerns, or the student's progress, because the student does not give you access to their practice assessment document, please contact the university/practice support staff immediately so that alternative documentation can be provided. You should not delay documenting information.

Students who fail at the first attempt in practice will usually be given a second attempt to retrieve the outcomes not met. To ensure that students who have failed at the first attempt have the best opportunity to succeed they will usually return to their hub placement and be allocated to the same mentor. On rare occasions the student may be allocated to a new placement but this would only occur where an irretrievable breakdown of the placement has occurred.

### Managing sickness and absence

To ensure the attendance requirements are met, the attendance record in the practice assessment document must be completed. Students are required to report all sickness and absence to the placement area and to the Practice Learning Unit in the University, as soon as it occurs. Any sickness exceeding 5 working days, must be accompanied by a medical note that should be sent to the Practice Learning Unit. Failure to attend clinical placement on shifts rostered without prior agreement will be classed as unauthorised absence.

As a mentor, you should notify the university/practice support staff or the Practice Learning Unit of any student sickness or absence. Students with sickness or absence on more than 3 occasions in any one year should meet with you to establish if there are health or personal problems affecting fitness to practise. There is a risk assessment in the practice assessment document for this purpose. Students do not have to disclose the details of any health problem, but if there are concerns, you may refer to the university/practice support team to ensure appropriate referral to occupational health or counselling services. Poor attendance and timekeeping without legitimate reason may result in failure of the placement and an action plan should be commenced.

Persistent sickness/absence during the practice learning period may lead to there being insufficient time for the mentor to confirm achievement of the placement learning outcomes. In these circumstances you should record 'not achieved' on the final assessment page in the practice assessment document and make a record of the reasons for this. Students should be advised to submit extenuating circumstances prior to the practice assessment submission date if this occurs.

### Managing professional conduct issues

Professional conduct issues should be linked to the relevant competency domains within the practice assessment document and an action plan commenced as soon as possible. An action plan will clearly identify to the student what the issues are and what the student needs to do to correct this. If the student fails to achieve the requirements of the action plan he/she will be awarded a fail grade for the placement.

Where there are serious professional conduct issues raised it may be appropriate to terminate or suspend a placement. The criteria for determining whether or not termination or suspension of placement is relevant are similar to employment policies and procedures for employed staff. For example:

- a. The student has taken advantage of their role or abused a person who uses services
- b. The work of the student has fallen well below the standard expected with serious or repeated mistakes
- c. The conduct of the student is subject to criminal charges or alleged offences which may affect the student's performance or calls into question their suitability to practise into question.
- d. It is considered that the practice of the student is bringing or has brought the placement provider or profession into disrepute.
- e. The practice of the student is damaging and or dangerous to patients, service users, or colleagues.

The termination or suspension of a placement requires the authorisation of the Associate Dean for Quality and Enhancement at the University in consultation with a senior representative from the Trust/Organisation. Following termination or suspension students will be referred to the University's Suitability Panel to consider their continuation on the programme.

## Appeals against assessment decisions

In relation to practice assessment, the University assessment regulations do not allow students to appeal against assessment decisions unless:

- The assessment process has been compromised, which may have affected the validity of the result. The most common reason for this occurs
  - where the initial, progress and/or final reviews have not been completed at the appropriate time
  - where an action plan has been commenced too late for a student to be able to improve their competence or correct their behaviour
  - where an action plan is unclear
  - or where there is insufficient evidence that the mentor has provided adequate feedback and/or support throughout the process.

Completion of the practice assessment documentation is, therefore, extremely important and should be viewed in the same way as patient/service user documentation i.e. if it is not written down there is no evidence that it occurred.

- Where the student's performance has been affected by exceptional factors. This usually relates to personal circumstances that the student may or may not have disclosed in practice. The University has specific criteria for consideration in relation to this.

Where an appeal is upheld, the student's previous attempt is discounted, as it is deemed to have been an unfair assessment, and the student is given a further attempt to achieve the outcomes.

If you have any queries or difficulties with the student documentation you are advised to contact a member the university/practice support team as soon as possible so that support can be provided. This will help to ensure that the assessment decision is robust.



**Test your knowledge and understanding of this section by answering the following questions:**

1. Who should write the action plan once a problem/concern is identified?
  - a) Mentor with student help
  - b) The university/practice support staff
  - c) Ward/unit manager
  - d) The student with the mentors help
  
2. In the final placement with the sign off mentor, what additional protected time per week must be spent with the student providing feedback and reviewing progress?
  - a) No extra time allowed
  - b) 1 hour
  - c) 2 hours
  - d) 3 hours
  
3. What is the name of the document published by the NMC indicating the mandatory standards for mentors?
  - a) Skills to support learning and assessment in practice
  - b) Standards to skills learning and assessment in practice
  - c) Standards to support learning and assessment in practice
  - d) Standards to support learning and assessment
  
4. When providing feedback to students you should:
  - a) Be constructive identifying both positive feedback and areas for concern
  - b) Be brutally honest
  - c) Be constructive and concentrate on the concerns identified
  - d) Be kind to the student and always give the student the benefit of the doubt
  
5. What is the purpose of an action plan?
  - a) To allow the student the opportunity to address any concerns and reach the competency required
  - b) To ensure that future placements are aware of any student concerns
  - c) To punish the student
  - d) To be utilised in extreme circumstances when all other avenues have been exhausted

Answers sheets can be found in the Mentor update pages.