



**The Leicester School of Nursing and Midwifery
Faculty of Health and Life Sciences**

Learning Environment Assurance Protocol for Practice Placements (LEAP)

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The following Universities are each credited with originating elements of the processes within this document and have granted permission for them to be replicated here: Birmingham City University; University of Lincoln; Staffordshire University and University of Wolverhampton.

Section 1. Introduction to LEAP

This document explains the assurance process initiated when triggers are identified that may affect the educational suitability of a practice placement area. These triggers need to be referred to The Leicester School of Nursing and Midwifery, De Montfort University by our placement providers or relevant staff and students so that concerns can be assessed and, when necessary, managed. This framework includes the opportunity to explore and learn from these events and feedback to the students and staff who have been involved.

1.1 Purpose of the Learning Environment Assurance Protocol for Practice Placements

The purpose of the LEAP framework is to:

- Provide guidelines to ensure that triggers arising from hard and/or soft intelligence are referred to DMU;
- Provide examples of the triggers that may lead to a review of the educational suitability of the placement area;
- Ensure partnership decisions are made about how to manage identified concerns;
- Clarify roles and responsibilities;
- Provide information on actions and timescales;
- Learn from the event and provide feedback to students and staff;
- Support openness, trust and continuous learning.

The LEAP framework explains how a concern trigger should be managed in partnership with the practice placement provider. The LEAP framework provides a protocol for:

- identifying and raising concerns about placement areas based on a triangulated process
- managing concerns about practice placements and learning environments in partnership with practice partner placement providers
- reviewing whether placement of students in an area of concern is currently appropriate and removing students where necessary.

1.2 Hierarchy of Concern Triggers

Triggers may be single or multiple, may emerge from a variety of sources and in some instances may form part of an emerging pattern. The concerns identified may affect the educational suitability of a practice placement area and hence may also directly affect students currently attending the placement. The triggers are quantified via the hierarchy of concerns, identified in Figure 1., to ensure processes are followed which effect timely and apposite responses.



Figure 1. Hierarchy of Concerns

1.3 Examples of Triggers that may affect the Placement Suitability

These are examples of the triggers arising from soft and/or hard intelligence; they may be single or multiple and/or may be part of an emerging pattern:

Soft intelligence:

- Adverse student verbal and / or written feedback;
- Informal comments from external agencies;
- Adverse impressions gathered from academic staff when undertaking placement visits;
- Adverse comments from practice supervisors, practice assessors, academic assessors, mentors or placement staff;
- Adverse service user feedback;
- Adverse comment from a member of the public;
- Adverse media coverage or public concern about the organisation or the wider NHS.

Hard intelligence:

- Adverse student comments from formal evaluation process;
- Health and Safety Executive investigation, initial report and recommendations;
- Care Quality Commission / Ofsted inspection visit, initial report and recommendations;
- External Quality Assurance Bodies, initial report and recommendations;
- Clinical Governance Inspection, initial report and recommendations;
- Significant change of service provision (operational/strategic);
- Manager/leader of the placement area leaves and is not permanently replaced for 12 weeks or more;
- Reports of a significant event involving a student;
- Reports of three untoward incidents involving different students in one placement over a 6 month period;
- One of the core set of 'Never Events.'

Section 2. LEAP Mechanisms for identifying and raising concerns

Triggers that affect placement suitability may be identified via a variety of routes (See section 1.2 and 1.3). Some are via formal processes and some via more informal routes. The LEAP framework uses triangulation methods to identify emerging patterns of concerns drawn from a variety of sources.

2.1 Placement Audit

Educational audit of practice placement areas is routinely conducted biennially to monitor the quality of the practice learning environment, student support and the assessment of practice. Lead Link Lectures monitor and oversee the process for their designated practice areas. The information gathered at audit assists in:

- Providing students with appropriate educational opportunities
- Maintaining/improving the students practice placement experience
- Recognition and sharing of good practice in placement learning environments
- Identifying those areas in which staff need help and support to maintain, improve and develop the quality of the learning environment
- Taking action to improve the quality of the practice learning environments

An interim review of the educational suitability of a placement area may become necessary in response to triggers arising from hard and/or soft intelligence. If the trigger is considered a safeguarding allegation, an immediate referral will be made in accordance with local policy and procedures (see section 3.1).

The auditor/s must review the practice provision and make a decision as to whether or not each education standard has been met.

If any standard is partially met or unmet, an action plan must be drawn up to rectify the situation, which the lead auditor is responsible for overseeing.

Issues that are identified may relate to any of the education standards. A judgement should be made by the auditor/s about which level of the hierarchy of concerns the risk falls into. If the auditor/s are in doubt, they must discuss with the Director of Practice.

Actions should be taken in accordance with the processes set out in Section 3 depending on the seriousness of the concern identified.

Action plans for the placement area need to be formally documented identifying actions to be taken, those responsible for these actions and a timeline for achieving resolution.

If the timescale for follow-up is exceeded, a subsequent meeting between the clinical placement manager, practice lead/auditor and matron/senior nurse will take place to

discuss the delay and revise the action plan, timescales and role/responsibilities. This should be reported as part of the audit action plan.

The Practice Lead/auditor for Practice Learning will escalate all serious concerns if not completed in an agreed timeframe. The senior executives will plan a solution to complete the audit to a satisfactory conclusion, or decision made to not utilise the practice environment.

2.2 Placement Evaluation

Students' evaluation of practice placements makes a significant contribution to the quality assurance of placement learning, and is undertaken as part of the ongoing process of monitoring and enhancement of healthcare programmes. It is important that students are given the opportunity to evaluate placements in a non-threatening environment, and given the findings of the Francis Report (2013) it is important that students are able to give honest feedback without fear of repercussions. This framework embraces the Council of Deans (2016) recommendations for supporting students to raise concerns. Within the University procedures for students wishing to raise concerns about an external organisation, for example a placement provider, are covered in the Health and Safety for placements policy and the DMU student whistle blowing policy.

There is an expectation of students that evaluations are constructive and written in a professional manner. If students give unprofessional or inappropriate feedback it is possible to identify the student and the Academic Assessor will discuss their feedback with them on an individual basis.

Students are expected to evaluate each practice placement and in the course of this are asked to identify if they have any serious concerns about the practice area. The Placement Evaluations Officer screens all evaluation forms for indication of serious concerns and these are escalated to the Practice Lead responsible for the placement area. A judgement should be made by the Practice Lead about which level of the hierarchy of concerns the risk falls into. The Practice Lead may request a meeting with the student to discuss the concerns they have raised in more detail (if required) in order to determine the most appropriate course of action. If they are in doubt, they must discuss with the Director of Practice.

Actions should be taken in accordance with the processes set out in Section 3 depending on the seriousness of the concern identified.

Evaluations are not anonymous but are confidential, which means that they can be traced to an individual student if further information is required. However, this will only be accessed in exceptional circumstances and the student's permission will be sought before their identity is released to practice partners. In exceptional circumstance where students have declined permission to release their identity a request will be made for the student to participate in a confidential meeting with a Clinical Placement facilitator and their Academic

Assessor which they are also at liberty to decline or agree to. It is recognised that where areas have students infrequently, or have few students, it may be possible to identify the student.

Information obtained from placement evaluations may also contribute to placement provider internal quality assurance processes and be used to improve standards of care, and the patient experience, and therefore anonymised reports will be shared with all key stakeholders at varying levels within the organisation as required.

2.3 CQC and Ofsted reviews and reports

CQC and Ofsted reports related to specific practice learning environments are reviewed upon publication by the relevant Practice Lead. Identification of concerns which may impact on the quality of learning environments will trigger a review of the suitability of the placement area/s. Contact will be made, within 48 hours, between a Practice Lead and a Senior Manager of the Practice Partner Organisation or designated person(s). This communication/discussion will assess if the concern identified may affect the learning environment for learners. A meeting will be organised and members will have access to information to decide on the actions that need to be taken by the practice placement provider, university and potential external agencies to support or withdraw the learning environment. This may include exception reporting to the relevant professional body.

2.4 Direct Reporting to LEAP of Organisational Concerns

The LEAP referral form (see next page) can be used to directly refer organisational concerns to the School Leicester of Nursing and Midwifery at DMU. It may be completed by a Chief Nurse, Senior Manager of a placement area, Clinical Placement Facilitator, Mentor/Assessor, Practice Assessor/ Academic Assessor / Practice Supervisor, DMU placement team, DMU academic staff or a student with support from a Clinical Placement Facilitator/Personal Tutor/Academic Assessor.

Following receipt and logging of a referral form the receiving administrator will forward it to the Director of Practice for review and where necessary a concern form will be raised. Contact will be made, within a maximum of 72 hours, between a DMU representative and a Senior Manager of the Practice Partner Organisation or designated person(s). This communication will assess if the trigger may affect the learning environment. A meeting will be organised and members will have access to information to decide on the actions that need to be taken by the practice placement provider, university and potential external agencies. This may include exception reporting to the relevant professional bodies.

LEAP: Referral of Organisational Concerns in to DMU

Date:	
Name and role of person making the referral:	
Referrer Phone number/s:	
Referrer Email:	
Name of Placement Area:	
Name of Organisation:	

Do you give consent for your name to be released to the placement area you are referring?

Yes/No

Please indicate your reason for the referral and attach evidence if available:

(This list is not exhaustive)

Concerns identified that may affect the educational suitability of a placement area:	Please tick
One of the core set of 'Never Events.' (NHS, 2018)	
Reports of a significant event involving a student	
Reports of an untoward incident involving a student	
Health and Safety Executive investigation, initial report and recommendations	
Care Quality Commission / Ofsted inspection visit, initial report and recommendations	
Significant Change of Service Provision (operational/strategic)	
External Quality Assurance Bodies	
Clinical Governance inspection and initial report and recommendations	
Reports of three untoward incidents involving different students in one placement over a 6 month period	
Adverse media coverage or public concern about the organisation or the wider NHS	
Other (please provide details)	

Detail of Referral

Signature:

This completed form should be forwarded to: hlsplacements@dmu.ac.uk

2.5 Practice Learning Committee

Quarterly meetings of the Practice Learning Committee (PLC) are held between the Leicester School of Nursing and Midwifery (DMU), practice partners, students and service users to monitor and enhance practice learning environments. PLC facilitates collaborative reporting and discussion regarding the quality and suitability of practice learning environments for DMU students. Members have access to information to assist with the triangulation of soft and hard intelligence that may identify emerging patterns and trends about placement areas. Where necessary sub-groups are convened to: review and discuss sensitive information about specific placements and/or organisations; review the suitability of learners remaining in specific placement areas or organisations; escalate concerns within organisations. Where serious concerns have been raised about a practice area, monitoring of progress and actions taken is reported at the PLC.

The PLC reports to the Programme Management Board (PMB) and the Placement Innovation in Nursing and Midwifery Group (PINMG). This reporting enables quality overview to occur through monitoring of identified trends/themes and the follow up actions which have been taken. The PLC notes and action logs are also circulated to Senior Nurses responsible for education at partner organisations.

PLC Membership:

Chair – Director of Practice

Deputy Chair - Practice Placement Lead Lecturer

DMU Student Representation

DMU Service User Representation

Clinical Placement Facilitator (CPF) Representation from Practice Partners – UHL, LPT and PIVO

Faculty Placements Manager or representative

Placement Evaluations Administrator

Practice Leads (DMU)

Academic Subject Leads/Programme Leads (Nursing, Midwifery, Paramedicine)

Lead Midwife for Education

2.6 Reporting and Escalation to the NMC

The Leicester School of Nursing and Midwifery is responsible for managing the delivery of educational programmes in accordance with the NMC Standards for Education. When risks emerge it is our responsibility as an AEI to respond swiftly to manage and control risks appropriately. The NMC Quality Framework Exceptional reporting version 2:2018 outlines the process for reporting risk outside of routine reporting times.

The NMC will be informed and an exceptional report will be completed in the event of:

- an immediate or impending risk to the safety of students, members of the public or patients;

- an unexpected or unexplained death occurring;
- a major incident occurring;
- a placement partner organisation being rated as inadequate by the CQC;
- significant concerns being raised by a member of the public;
- students raising concerns that result in an internal investigation;
- significant public interest in an incident.

Where a risk to a practice learning environment is identified the DMU official correspondent/s to the NMC (Head of School and Associate Head of School) will provide a timely report identifying both the nature of the risk and the mitigation that has been put in place.

2.7 Supporting those who raise concerns

A national change in reporting culture is actively being encouraged; a duty of candour has been implemented for providers and individuals to be open and transparent. Registered healthcare professionals have a professional duty to report and act on concerns and this duty also extends to students on healthcare programmes who spend up to 50% of their course in a practice learning environment. DMU is keen to promote “Speaking up safely” and is committed to the principles of the Freedom to Speak review and its vision (NHS England and NHS Improvement, April 2016). It is important that anyone raising a concern with a practice partner or DMU about a practice learning environment is treated with respect and is not disadvantaged in any way, receives guidance on how to raise the concern appropriately, has their concern listened to and is provided with feedback about actions taken.

DMU expects practice partners to encourage a culture in which concerns being raised about any practice learning environments are “accepted, with insight and without being defensive” (Francis, 2015, p.139) and DMU likewise undertakes to embed these values and skills in DMU undergraduate and post-graduate curricula.

Students who have raised concerns can be supported at DMU by their personal tutor/Academic Assessor and Student Support Services

<https://www.dmu.ac.uk/study/support/index.aspx>

Within the University procedures for students wishing to raise concerns about an external organisation, for example a placement provider, are covered in the Health and Safety for placements policy and the DMU student whistle blowing policy. Students are made aware of how to raise and escalate concerns during placement preparation/induction and debriefing sessions, meetings with their Academic Assessors, on programme blackboard shells and via organisational policies and processes in practice areas.

DMU and our practice partners have comprehensive, time-lined processes in place to ensure that students and other stakeholders are able to raise concerns or complaints. There are whistleblowing policies in place in the University and practice whereby students and staff can raise genuine and legitimate concerns internally without fear of victimisation or being placed in a moral dilemma with the route of public disclosure as the sole means of

action. It provides an opportunity for those concerns to be investigated and for appropriate action to be taken to ensure that the matter is resolved effectively wherever possible. These policies are in addition to the existing student complaints and academic appeals procedures, which are outlined in the academic regulations. The Student Gateway web pages signpost all University policies that relate to students. The complaints policy, including timelines, is detailed in the Student gateway, an online resource for students. The DMU and Trust complaints procedures recognise the importance of effective complaints management as both a tool and a source of information for service improvement. The University and practice welcomes feedback from all our students and recognises the right of students or alumni to raise issues of concern, which may affect the quality of their student experience or quality of care. The University complaints procedure is available to all students and Alumni of the university to enable them to raise any concerns about service provision, including matters relating to discrimination in any form. Our practice partners have various mechanisms available for students and staff to raise to raise concerns. The Freedom to Speak Up policy supports students and staff to speak up about unsafe patient care, unsafe working conditions, inadequate induction/training, lack of/or poor response to a patient incident, a bullying culture (across a team rather than individual instance of bullying). Within the University procedures for student wishing to raise concerns about an external organisation for example a placement provider, are covered in the health and safety for placements policy and the DMU student whistle blowing policy (sections 13 and 14). The Leicester School of Nursing and Midwifery also has guidance and a process for DMU staff about how they can respond to potential safeguarding concerns raised by pre-registration students.

Section 3. Quantifying Risks and Concerns

In all events where a risk/concern is identified, via any of the processes identified in section 2, a concern form will be opened (see appendix 1). This will be assessed to identify the level of concern as identified in the Hierarchy of Concerns outlined in section 1 of this document.

Timelines for raising concerns relate to the level of concern.

1. Safeguarding concerns must be raised and onwardly reported within 24hours as per flow chart in section 3.1;
2. Poor practice and professional conduct concerns should be raised within 48 hours as per flow chart in section 3.2;
3. Early reporting of concerns about the learning environment/support is encouraged and serious concerns must be referred on within 72hours as per flow chart in section 3.3.

Where serious concerns about student and/or patient safety are raised, students attending placement will be temporarily withdrawn, with immediate effect, whilst the risk is assessed.

Flow charts outlining the processes to be followed in managing each level of concern are set out in this section of the framework. Following discussion and review of the concern between relevant DMU staff and the lead nurse/senior manager for the practice area one of the following decisions will be made by the Head of School, Associate Head of School or Director of Practice regarding placement of students in the area:

1. Student/s remains in the placement area, details of concerns raised will be recorded on a placement monitoring form to track if an identifiable theme emerges in relation to this placement area over the course of 12 months.
2. Student/s remains in the placement area with support and monitoring, either an Action Plan to address the concerns identified with regards to the placement area will be implemented or details of concerns raised will be recorded on a placement monitoring form dependent on the severity of the concerns raised.
3. Student/s allocated to alternative placement area for an interim period whilst remedial action is undertaken; an Action Plan to address the concerns identified with regards to the placement area will be implemented.
4. All students withdrawn from placement area, an Action Plan to address the concerns identified with regards to the placement area will be implemented.

3.1 Safeguarding Concerns

The Leicester School of Nursing and Midwifery at DMU recognises it has a duty is to ensure the safety, well-being and protection of children, young people and adults at risk of abuse or neglect. All of our staff and students have a responsibility to act on any suspicion, disclosure or evidence of abuse or neglect wherever it occurs. Within our organisation and across our practice partners we expect policies and procedures to be in place to protect people of all ages who may need safeguarding. These procedures ensure that the relevant agencies and services work together to prevent abuse and to protect the most vulnerable people in our society.

It is the student's responsibility to report a safeguarding concern to a member of practice staff (usually their practice supervisor) and a member of academic staff (usually the Academic Assessor) within 24 hours. The DMU safeguarding lead must raise any concern with the relevant Adult or Child Safeguarding Team, Board or Partnership within 24 hours. Students are reminded that they can contact the local authority adult or children safeguarding team or board directly to report a concern without first informing DMU or the practice organisation.

On receipt of any report of a concern relating to safeguarding, a concern form will be raised and logged on the DMU placement records and updated as the case progresses towards resolution. The outcome will be fed-back to the student and those staff who were involved. Below is the policy developed between DMU and practice partner organisations.

Guidance for DMU Staff Responding to Potential Safeguarding Concerns Raised by Pre-Registration Nursing and Midwifery Students

This guidance has been developed in partnership between DMU, and practice partners to assist university staff in dealing with concerns raised by students in relation to concerns they have about practice. It provides the process to be followed and details of key staff involvement. This guidance is relevant for all nursing, midwifery and paramedic lecturers.

All staff coming into contact with children and their families have a responsibility to safeguard and promote their welfare and should know what to do if they have concerns about a child. This responsibility also applies to staff working primarily with adults who have dependent children that may be at risk because of their parent/care or behaviours.

Adults should be in control of their care and their consent is needed for decisions and actions designed to protect them. There must be clear justification where action is taken without consent such as lack of capacity or other legal or public interest justification. Where a person is not able to control the decision, they will still be included in decisions to the extent that they are able. Decisions made must respect the person's age, culture, beliefs and lifestyle

If a student (or any member of staff) has any suspicion or concern in regard to allegation of abuse concerning a child, young person a vulnerable adult they have a responsibility to follow the Leicester, Leicestershire and Rutland Safeguarding Children or Adult Procedures. These are available at:

Leicester Safeguarding Children Board: www.lcitylscb.org

Leicester Safeguarding Adult Board: <https://www.leicester.gov.uk/health-and-social-care/adult-social-care/what-support-do-you-need/safeguarding-adults-board/>

Leicestershire and Rutland Safeguarding Children Partnership and Safeguarding Adults Board: <http://lrsb.org.uk/>

The student and university staff must keep a clear written record of the concern and any steps that they have taken to resolve it, including who the concern was raised with, on what date, and an outline of the concern. Whilst they should also keep a record of any written or verbal communication that they send or receive from placement staff and be aware of the need to protect confidentiality.

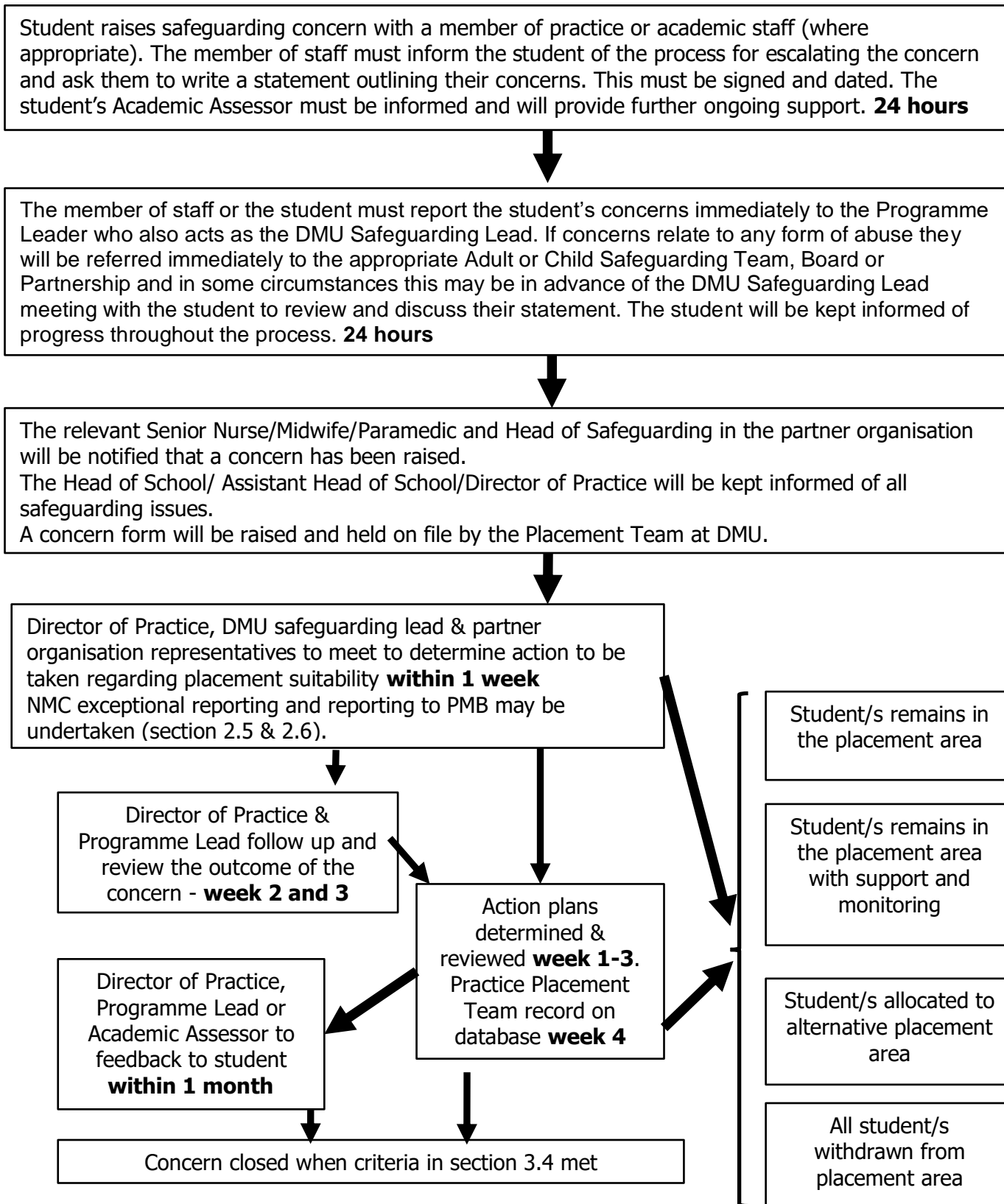
Lecturers should make sure that:

- The concerns raised are reported to the Head of School or to the Associate Head of School/Director of Practice in their absence in case a formal investigation is required. In the School of Nursing and Midwifery, the Safeguarding Lead is the Programme lead and they may also be contacted directly.
- The student understands that the concerns are taken seriously, even if they are later seen to be unfounded
- They inform the student who raised the concern how they propose to handle the concern, and state a timeframe in which they will feedback to the student verbally and in writing, this must be within a maximum of 1 month and preferably sooner.
- The Safeguarding Lead keeps the student who raised the concern advised of progress; this will give them and others confidence in the system
- Action to resolve a concern is taken, recorded and monitored
- Students who raise concerns are protected from unwarranted criticism or actions

At every stage of the process, it is essential that a written record is kept of every discussion, contact, investigation and decision with regards to suspected or actual abuse. This is equally important whether a decision is made to follow up the suspicion/allegation or to do nothing. If a decision not to take any action is made then it must be clear as to why this is. If any further incidence occurs in the future these records will contribute to decisions made at that time.

Flow Chart 1 demonstrates DMU processes for managing the learning environment in such circumstances.

Flowchart 1 Reporting Safeguarding Issues



3.2 Concerns about Poor Practice or Professional Conduct

All students must be aware of their role in keeping the public safe at all times, and must work within their code of conduct. If they have concerns about the way service users are cared for they have a duty to report this.

In the first instance, wherever possible, students should seek to raise their concern about poor practice or professional conduct with practice staff or the manager of the placement as soon as possible. If the student is unable to raise their concern to staff within the placement area, they must contact their Academic Assessor or another member of academic staff for support and advice.

On receipt of any report of a concern relating to poor practice or professional conduct, a concern form will be raised and logged on the DMU placement records and updated as the case progresses towards resolution. Flow Chart 2 demonstrates DMU processes for managing the learning environment in such circumstances.

Once a concern about a practice experience has been identified via any of the routes indicated in section 2 of this document, it is important that relevant staff are alerted to ensure it is addressed. The form will be forwarded to the relevant Practice Lead who will review the concern and, where this relates to poor practice or professional conduct, the matter will be referred on to the relevant placement representative within 48 hours of receipt.

Working towards resolution of issues will occur in partnership between the University and the practice placement area and their organisation (NHS Trust or Private Sector Company/Organisation). The concern will be reviewed immediately to consider if students should remain in the practice area. If students need to be removed prior to the investigation this will be escalated to the Head of School, Chief Nurse/Senior Manager within the Organisation. NMC exceptional reporting will be undertaken (see section 2.6) as will reporting to DMU PLC (see section 2.5), to enable ongoing internal quality overview. If the placement is considered able to maintain a safe and supportive environment for students whilst a concern is investigated the area will be closely monitored whilst students remain in the placement, a maintenance support strategy will be commenced, and students will also be reminded of the external support available to them.

Where necessary an action plan will be developed by designated staff from DMU and the practice partner and will be disseminated for implementation into respective organisations. The practice partner organisation will report progress in investigating and managing the concern back to DMU via an updated concern form. Progress towards resolution will be monitored by the Practice Lead and logged by the Placement Team on the DMU database.

Practice Lead may contact students who have raised concerns to seek further information. Where students are unwilling to reveal their identity to the placement area they may be offered the opportunity to meet, in confidence, with a practice representative and their Academic Assessor or Practice Lead to provide more context to their concern. The student is at liberty to accept or decline this invitation.

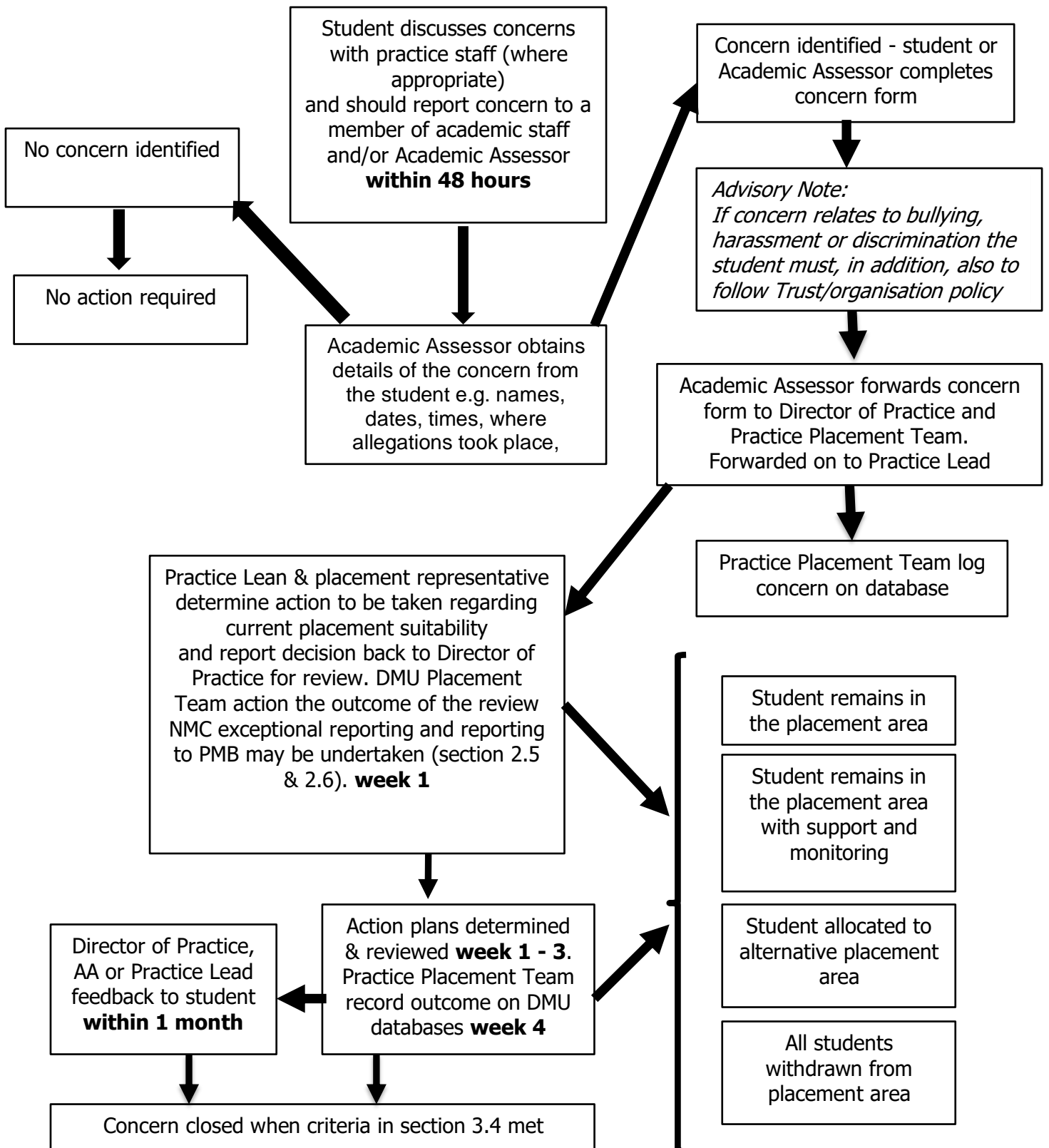
Where concerns relate to claims of bullying, harassment or discrimination the student must be supported to report these via the practice organisation's policies and procedures and should be supported in doing this by their personal tutor or Academic Assessor.

If at any stage of the process it is felt concerns are not being resolved, are not being taken seriously or acted upon, the concern should be escalated.

The outcome will be fed-back to the student and DMU staff who were involved.

If students from other universities access the same practice experiences and there are serious concerns that result in removing students from a placement, the relevant university will be notified immediately that the placement has been withdrawn.

Flowchart 2
Reporting Concerns Relating to Poor Practice or Professional Conduct



3.3 Concerns about Learning Support and Learning Experiences

The culture within an effective learning environment values learning, and all people within the learning environment should understand their role in enabling learning. Students should have opportunities to learn from a range of relevant people in practice learning environments, including service users, registered and non-registered individuals, and other students as appropriate. An effective learning experience should also take account of any equality and diversity considerations, or reasonable adjustments that need to be made to student learning and assessment. Learning must happen in a way that preserves public safety, enables the student to meet their learning outcomes, and facilitates a fair and evidenced based assessment.

DMU expect that all placements will:

- have the capacity, facilities and resources in place to deliver safe and effective learning opportunities and practical experiences for students as required by their programme learning outcomes
- provide suitable support and supervision when students are providing direct care
- be compliant with the relevant professional body standards for practical learning and assessment
- have suitable systems, processes, resources and individuals in place to ensure safe and effective coordination of learning within practice learning environments

All individuals involved in the delivery of a learning experience or within a learning environment have a responsibility to raise any concerns about that environment and student learning. All learning environments must have in place clear processes for raising concerns and should signpost students, and all relevant people, to these.

Concerns regarding none compliance must be escalated via the process set out in Flow chart 3.

In the first instance, wherever possible, students should seek to raise their concern about learning support and the learning experience with practice staff or the manager of the placement as soon as possible. If the student is unable to raise their concern to staff within the placement area, they must contact their Academic Assessor or another member of academic staff for support and advice.

On receipt of any report of a concern relating to the placement learning experience, a concern form will be raised and logged on the DMU placement records and updated as the case progresses towards resolution. Flow Chart 3 demonstrates DMU processes for managing the learning environment in such circumstances.

Once a concern about a practice experience has been identified via any of the routes indicated in section 2 of this document, it is important that relevant staff are alerted to ensure it is addressed. The form will be forwarded to the relevant Practice Lead who will

review the concern and RAG rate it based on the learning support and experiences concerns escalation categories (Appendix 2), where this relates to a serious or substantial concern about the learning environment, the matter will be referred on to the relevant placement representative within 72 hours where possible.

Working towards resolution of issues will occur in partnership between the University and the practice placement area and their organisation (NHS Trust or Private Sector Company/Organisation). The concern will be reviewed to consider if students should remain in the practice area. NMC exceptional reporting will be undertaken (see section 2.6) as will reporting to DMU PLC (see section 2.5), to enable ongoing internal quality overview. If students need to be removed prior to the investigation this will be escalate to the Head of School, Chief Nurse/Senior Manager within the Organisation. If the placement is considered able to maintain a safe and supportive environment for students whilst a concern is investigated the area will be closely monitored whilst students remain in the placement, a maintenance support strategy will be commenced, and students will also be reminded of the external support available to them.

Where necessary an action plan will be developed by designated staff from DMU and the practice partner and will be disseminated for implementation into respective organisations. The practice partner organisation will report progress in investigating and managing the concern back to DMU via an updated concern form. Progress towards resolution will be monitored by the Practice Lead and logged by the Placement Team on the DMU database.

Practice Lead may contact students who have raised concerns to seek further information. Where students are unwilling to reveal their identity to the placement area they may be offered the opportunity to meet, in confidence, with a practice representative and their Academic Assessor or Practice Lead to provide more context to their concern. The student is at liberty to accept or decline this invitation.

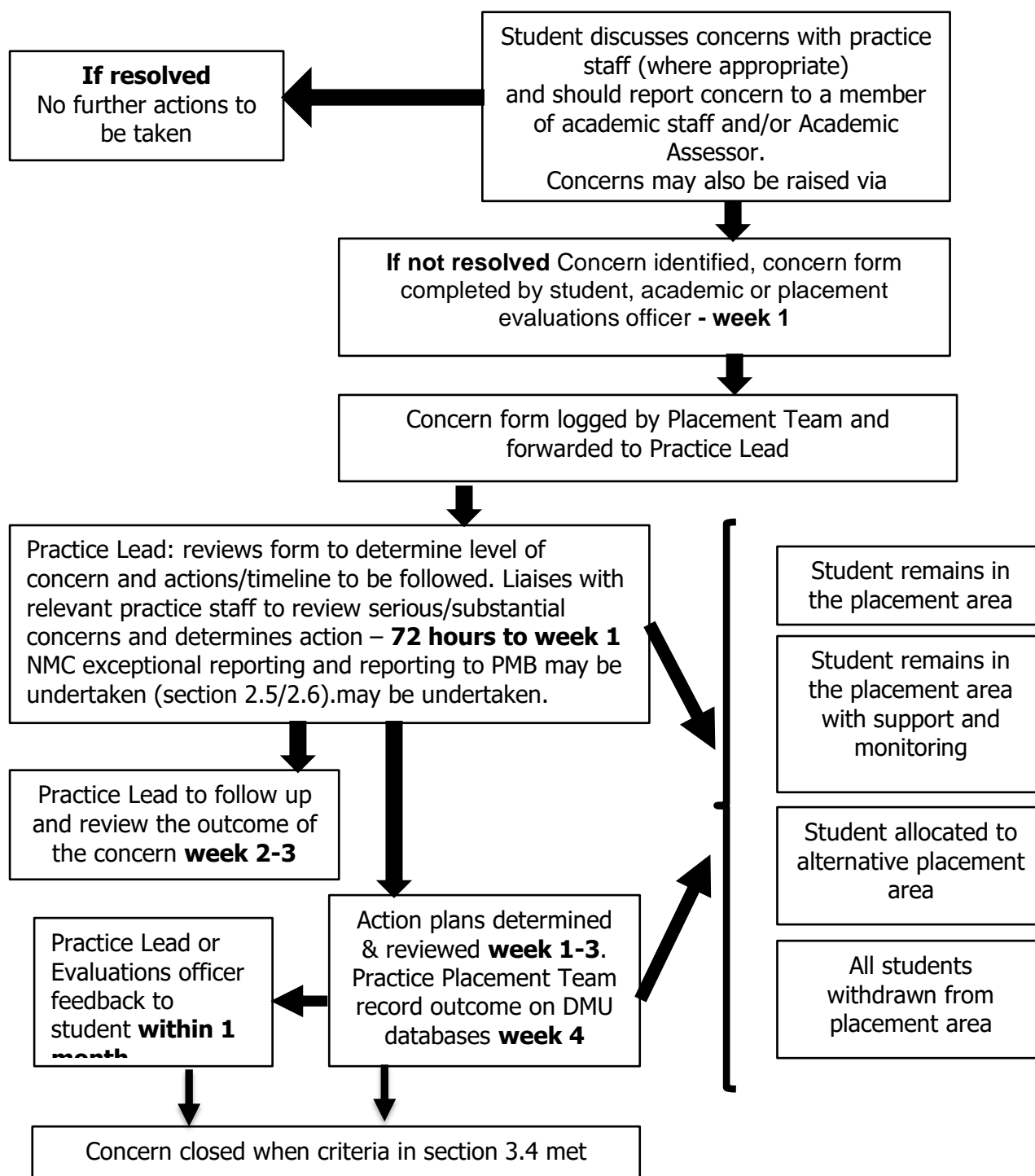
If at any stage of the process it is felt concerns are not being resolved, are not being taken seriously or acted upon, the concern should be escalated.

The outcome will be fed-back to the student and DMU staff who were involved.

If students from other universities access the same practice experiences and there are serious concerns that result in removing students from a placement, the relevant university will be notified immediately that the placement has been withdrawn

Flowchart 3 Reporting Concerns Relating to the Quality of the Practice Learning Experience

It is in the best interest of all concerned if issues can be resolved informally at source. Students should discuss their concerns initially with relevant practice staff. However, in some circumstances, this may be difficult, inappropriate or the student may not be able to do so. In these circumstances, students should contact the relevant academic staff e.g. Academic Assessor.

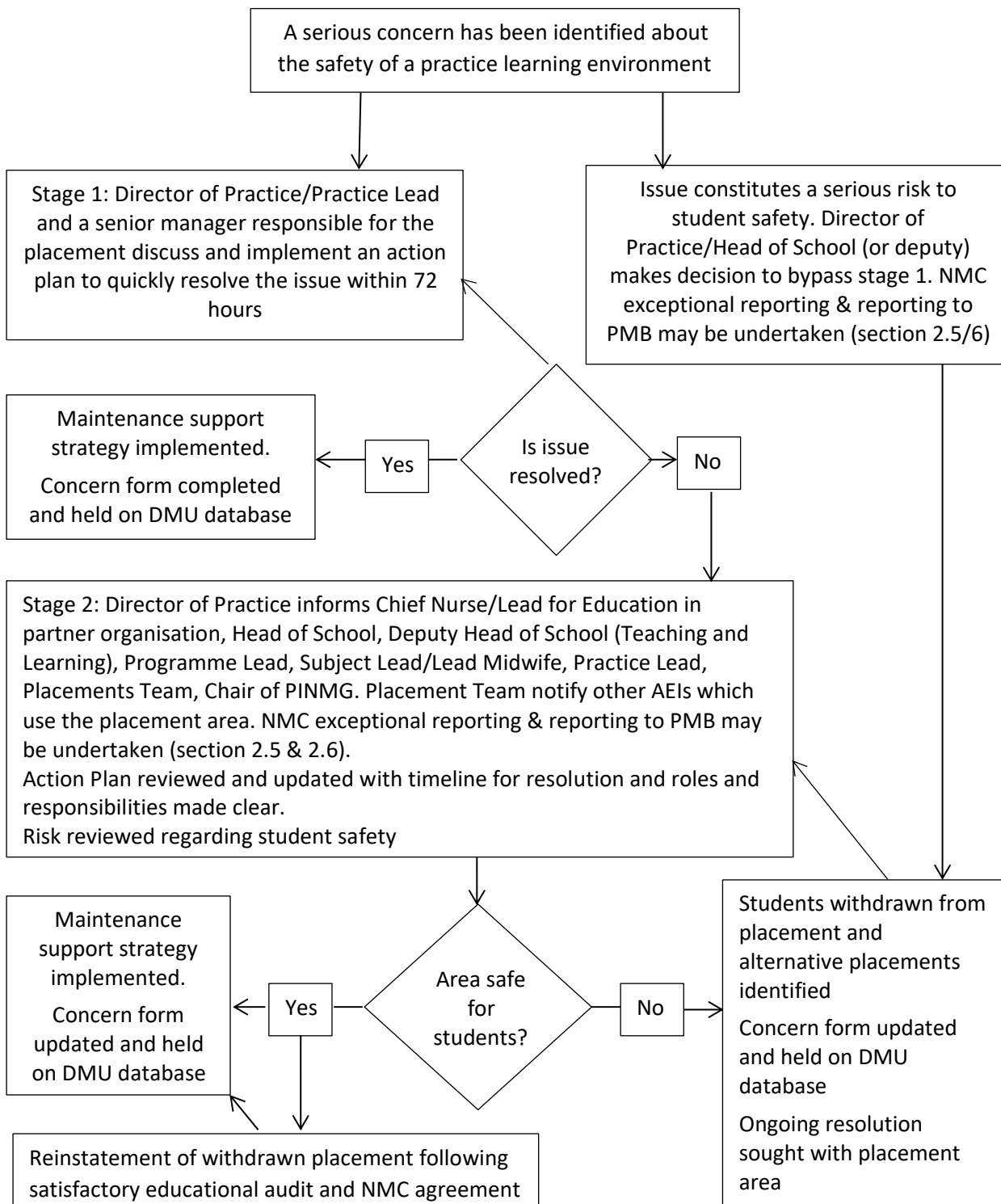


3.4 Withdrawal and Reinstatement of Placements

Withdrawal of students from a placement area

Withdrawal of a placement area from the placement circuit will be undertaken where a serious concern has been identified about risk to student safety which cannot currently be managed effectively. The process is set out in the flow chart 4.

Flowchart 4. Escalation Flowchart for Removal of Students from a Placement



Reinstatement of placement area

If a placement learning environment has been suspended from the placement circuit the following must occur prior to the reintroduction of students to the area:

- Confirmation that all concerns on the plan of action have been managed and closed.
- Educational audit conducted and approved.
- NMC have reviewed the evidence and determined that there is no longer a risk to patient safety or the student learning environment and that NMC Standards are being met.

A record of all items & outcomes discussed will be written and regularly presented to the Head of School and Director of Nursing or Senior Manager within the organisation.

Following the reinstatement of a placement area DMU may initiate a maintenance support strategy (MSS) in partnership with the placement provider if this is deemed helpful. The Practice Lead and/or Clinical Placement Facilitator will in such cases make two weekly contact with the lead for the practice placement and with all students attending the area to assess and provide additional support as required.

Sharing information

Withdrawal and reinstatement of placements will be reported to the Practice Learning Committee and onward to the Placement Innovation in Nursing and Midwifery Group (PINMG) as it directly affects shared placement capacity between all local AEIs.

3.5 Process for managing concerns which do not require formal escalation but do require monitoring.

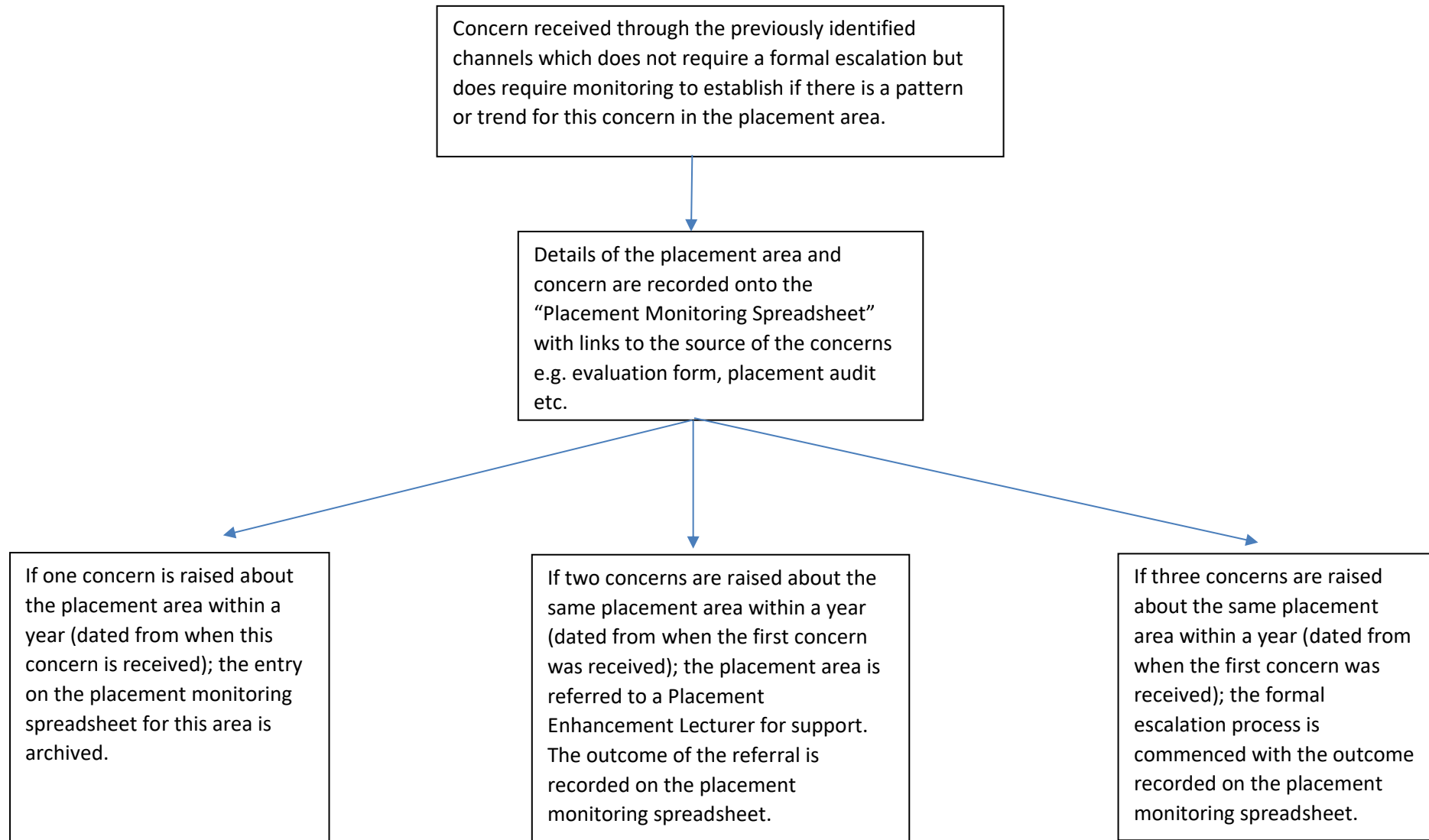
Concerns may be received through the channels and mechanisms previously identified that do not warrant a formal escalation of concerns or an action plan but do require monitoring in order to identify if there is a trend and/or theme to concerns raised about a particular placement area over time. These concerns may include but are not limited to:

- Concerns around inductions the students receive to the placement area;
- Practice Supervisors and/or Practice Assessors not appearing secure in their role;
- Student's not feeling like they are "part of a team";
- A placement area feeling unsure about how to contact the University for support etc.

These concerns will be documented onto a Placement Monitoring Spreadsheet and monitored for 12 months from when the first concern is received. If no further concern is received for the identified placement area the record will be archived. If two concerns are received (within 12 months of receipt of the first concern) the placement will be referred to the Placement Enhancement Lecturer for support and guidance. If three concerns are received (within 12 months of receipt of the first concern) then the formal escalation processes and procedures outlined within this document will be commenced. In all cases

the outcomes will be documented on the Placement Monitoring Spreadsheet. This process has been outlined in Flowchart 5.

Flowchart 5 Management of concerns which do not trigger the formal escalation process.



Section 4. Dissemination of Learning and Feedback

A dissemination of learning strategy must be developed between DMU and the placement provider in preparation for when students return to the placement area. This will include supporting openness, trust and continuous learning from significant events between DMU and the placement provider.

4.1 Feedback to student/staff following a LEAP referral

Students and staff will be updated about the progress of any concern they have raised and the eventual outcome. Where relevant, in partnership, the placement provider and DMU will ensure the student/staff member will be invited to lessons learnt events and receive feedback.

Type of Feedback/Communication	Person Responsible for informing student / Staff member	Date student/staff informed
Student/DMU Staff member invited to organisation's 'Lesson Learnt Event'		
Formal feedback		
Support strategies available		
Personal Tutor/Academic Assessor/Line manager informed		

Students and staff are encouraged to reflect on the episode and use it as a learning experience for future practice. Academic Assessors should support students' reflections as part of their portfolio of practice. Staff may reflect on the event as part of their revalidation processes and undertake a reflective discussion with a colleague or line manager.

4.2 Storage of Information

Referral information, action plans and audit documents will be stored on a secure central share point site on the De Montfort University, Faculty of Health, Life Sciences IT system which is managed by the Placement Team in accordance with data sharing agreements with practice partners.



The Leicester School of Nursing and Midwifery, Faculty of Health and Life Sciences

APPENDIX 1: Practice Placement Escalation of Concerns Form

Section 1: Raising a Concern

Placement Name				
Placement Location				
Date/s of Concern				
Nature of Concern		Tick which apply ↓	Timeline for reporting	
	Safeguarding		<i>Raise concern within 24 hours</i>	
	Poor Practice or Professional Conduct		<i>Raise concern within 48 hours</i>	
	Learning Environment or Support		<i>Raise serious concern within 72 Hours</i>	
Description of concern/issue being raised:				
Student Name:			P number:	
Nursing/Nursing Associate/ Midwifery/Paramedic?		Cohort:		Date Concern raised:

<p>Does the student agree to their name being disclosed to the placement area? Do they agree to participate in a confidential discussion with the Clinical Placement Facilitator/Practice Learning Facilitator about their concerns?</p>	<p>YES/NO YES/NO</p>
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Section 2: Escalation, Investigation and Management of Concern

<p>Concern received by <i>(DMU/Practice staff member name/role):</i></p>		<p>Date received:</p>	
<p>Concern referred to <i>(DMU staff member name/role):</i></p>		<p>Date referred:</p>	
<p>Concern reviewed/ escalation decision <i>(delete as appropriate *)</i></p>	<p>No further action* – close concern Rationale for decision:</p>		
	<p>Escalate to Practice Partner Organisation* Rationale for decision:</p>		
	<p>Escalate to NMC (if required) Rationale for decision:</p>		
	<p>Refer to: Organisational Safeguarding Team/CQC/Ofsted/Local Safeguarding Boards – see page 13 <i>(delete as appropriate *) if required</i> Rationale for decision:</p>		
<p>Escalation of concerns: <i>(Include the contact names; role and contact details for each agency the concerns have been escalated to)</i></p>		<p>Date escalated to each agency:</p>	
<p>Outcome of investigations:</p>			
<p>Action plan to resolve concern (where applicable):</p>	<p>Action</p>	<p>Roles/ Responsibilities</p>	<p>Timeline</p>

<i>(use continuation sheets as necessary)</i>			
Is Placement safe for students? →	YES ↓	NO ↓	
Decision regarding placement of students <i>(delete as appropriate):</i> <i>To be taken in partnership with DMU and reported to PLC and PINMG</i>	<ul style="list-style-type: none"> • Student/s remains in the placement area • Student/s remains in the placement area with support and monitoring 	<ul style="list-style-type: none"> • Student/s allocated to alternative placement area for an interim period • All students withdrawn from placement area 	

Section 3. Resolution and Feedback

Action Plan outcomes reviewed by: <i>(staff name and role)</i>	Practice Representative:	DMU Representative:
Date:		
Can students remain/return to placement area?	YES/NO Rationale:	
Maintenance Support Strategy required?	YES/NO	
Details of Maintenance Support Strategy (where applicable) <i>Must include actions, roles/responsibilities and timeline</i>		

Reinstatement of Placement (where applicable)	Action Plan Achieved?	YES/NO	Date:
	Educational Audit Approved?	YES/NO	Date:
Feedback to student/staff	Type of Feedback/Communication	Person Responsible for informing student / Staff member	Date student/staff informed
	Student/DMU Staff member invited to organisation's 'Lesson Learnt Event'		
	Formal feedback		
	Support strategies available		
	Academic Assessor/Personal Tutor/Line manager informed-as appropriate to the programme.		
Outcome reviewed by: (DMU Staff name/role)		Date:	
Comments:			
Concern Closed by:		Date closed	

APPENDIX 2: Concerns Escalation Categories: learning support and experiences

The items listed here are not exhaustive. Any issue may be escalated to the next level, particularly if this is repeatedly raised in student evaluations or concerns forms.

<u>EXTREME CONCERN</u>	<u>SERIOUS CONCERN</u>	<u>SUBSTANTIAL CONCERN</u>	<u>LOW LEVEL CONCERN</u>
Refer on usually within 24 hours	Refer on usually within 48 hours	Refer on usually within 72 hours	Refer on usually within 1 week
<p>All Safeguarding concerns</p> <p>Abuse or cruelty</p> <p>Physical - such as hitting, slapping, rough handling, misuse of medication, misuse of restraint.</p> <p>Sexual - making someone carry out a sexual act they have not or cannot consent to.</p> <p>Psychological - such as threats or humiliation.</p> <p>Financial - such as theft of money / possessions, misuse of someone's benefits.</p> <p>Neglect - such as a carer not meeting a person's care or health needs.</p> <p>Discriminatory - Any form of abuse based on discrimination because of a person's race, gender, age, disability, sexual orientation etc.</p> <p>Institutional - abuse or poor practice throughout an organisation.</p>	<p>Reporting of a "Never Event" listed by NHS Improvement (2018) – i.e adverse events that are serious, largely preventable, and of concern to both the public and health care providers for the purpose of public accountability</p> <p>The safety, well-being or confidentiality of patients/students has been highly/repeatedly compromised</p> <p>Patients/students are endangered by poor practice, for example significant safety breaches of process such as infection control, medicines administration, especially when these have happened repeatedly.</p> <p>The conduct of staff demonstrates lack of commitment to professional standards, such as discriminatory behaviour, bullying or harassment or any illegal activities (some of these may be constitute</p>	<p>Poor care or professional conduct which compromises the well-being of, or breaches the confidentiality of, patients and/or students</p> <p>Staff demonstrate lack of commitment to high standards of care and conduct including poor interpersonal skills so that patients/members of the public/students/colleagues do not receive dignified and thoughtful attention.</p> <p>Non-compliance with professional body standards for practical learning and assessment including lack of suitable systems, processes, resources and individuals in place to ensure safe and effective coordination of learning within a practice learning environment</p> <p>Lack of supervision, reasonable adjustments, facilities and resources to provide adequate standards of care</p>	<p>House-keeping concerns such as lack of provision of lockers, car parking facilities, etc</p> <p>Personality clashes and minor disagreements with specific members of staff</p> <p>Upset regarding issues such as working weekends, duty rotas or travel time</p> <p>General distain for issues which cannot be prevented or managed at operational levels, such as: general short staffing across the NHS or occasionally performing care which is perceived to be a HCA role.</p>

	safeguarding concerns in which case treat as extreme concerns). Expectations that the student will work outside their scope of practice	Supernumerary status or protected learning time not observed	
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APPENDIX 3: Evaluation Process: Agreed process to obtain and export data.

Introduction

Administrators within the HLS Placements team, are responsible for the administration of data collection for the purposes of placement evaluations, overseen by the Practice Lead for Learning Environment and Assurance and ultimately the Director of Practice. This process has been developed to ensure that all placement areas are compliant with NMC Standards for Student Supervision and Assessment (SSSA 2018). This process will monitor each placement setting and support the agreed Learning Environment Assurance Process.

Contacting Cohort

For the process to be successful, a questionnaire has been created on MyGateway that allows for students to provide feedback on their most recent placement experience. This was created after consultation with the Director of Practice in order to meet guidelines set by The Nursing and Midwifery Council in their SSSA (2018).

Each cohort will need to be contacted at a different time depending on when their placement will be ending. Three emails are sent to remind the students to complete their questionnaire. These are sent:

1. The Monday of the last week of the placement
2. The Monday following the end of the placement
3. The Monday of the following fortnight from the end of the placement

The PAS (Placement Administration System) is used to pull the most recent list of students for the cohort and then transfer them into a group on My Gateway, a group email is then sent to the cohort. This is done every time to ensure that students who may have joined or left the cohort since the last placement are sent the correct information. Over the 3-week period, students will fill in the questionnaire. A system is in place that ensures that if a safeguarding issue arises, the relevant parties are alerted, and the process of escalation begins.

Exporting data

At the end of the 3-week period, the data is extracted from MyGateway and compiled on:

1. A master spreadsheet containing all responses from this placement period
2. A spreadsheet of responses for each trust
3. A report for each placement location which contains all responses relevant to them

Once these have been created, it is the job of the administrator to ensure these documents are sent to the relevant individuals within practice and to the programme and practice lead's for each course