School of Health and Social Care

COURSE GUIDE
Pre-Registration Nursing Programmes

PGDip Children’s Nursing
Course Code: 3980

Academic Year: 2016/17
# Contents

SECTION 1: INTRODUCTION .............................................................................................................. 1  
SECTION 2. OVERVIEW OF PRE-REGISTRATION NURSING COURSES .................................. 2  
SECTION 3: AIMS AND LEARNING OUTCOMES OF THE COURSE ........................................... 5  
SECTION 4: COURSE STRUCTURE ................................................................................................. 11  
SECTION 5: SUMMARY OF MODULES ............................................................................................. 15  
SECTION 6. LEARNING SUPPORT ................................................................................................. 19  
SECTION 7. LEARNING AND TEACHING STRATEGIES ............................................................... 28  
SECTION 8. PRACTICE LEARNING ............................................................................................... 40  
SECTION 9. CONTRIBUTING TO THE DEVELOPMENT OF YOUR COURSE ............................... 43  
SECTION 10. INTERPROFESSIONAL LEARNING .......................................................................... 44  
SECTION 11. MARKING .................................................................................................................. 45  
SECTION 12. APPENDICES ............................................................................................................ 55
SECTION 1: INTRODUCTION

All the staff in the Department of Children’s Nursing would like to welcome you to the PGDip Children’s Nursing course. We are all totally committed to supporting you for the next two years so that you are able to achieve your aim of becoming children’s nurses like ourselves. We are delighted that you have chosen to study at LSBU and are sure you will find the two years of your programme rewarding.

The LSBU Student Portal is your online hub for information and services, will give you access to general information that applies to London South Bank University students and permits you to view and update your personal information and tells you where to go for help and advice. The purpose of this Course Guide is to provide you with key information so you can make the most of the learning opportunities available within the University and within practice. It specifically identifies variations from the general information published through the Student Portal, including your course academic calendar.

In addition to your Course Guide, in due course you will have Practice Placement Guidelines (informing you about your practice placements), a Practice Assessment Document and as each module commences, a Module Guide.

The course you are undertaking is a demanding one. This is because in addition to being an academic course, it is also a professional course with commensurate expectations of students. The focus of the course is on developing your knowledge, skills, professional behaviours and understanding of caring for children, young people and their families in community and hospital settings. We hope you find this course stimulating, motivating and exciting so that at the completion you will be better able to meet the challenges of children’s health care through becoming independent, reflective, flexible, professional and creative practitioners.

The course is a shared responsibility between the University and our partner NHS Trusts and we work closely together to ensure that you are ready for practice when you take the important step of registering with the Nursing and Midwifery Council after successful completion.

It is your responsibility to ensure you are familiar with University regulations; these may be accessed through the University web site. Please be aware that some of the profession specific regulations take precedence over university regulations. This will be outlined later on in this document. Where there are direct web link these are indicated within this guide as underlined words or phrases. This guide will also be available electronically through the VLE and in that case the words and phrases are highlighted in blue, and when clicked on, will take you to the relevant document;

Please ensure that you are familiar with all of these documents. They will be available to you on your Course site on the VLE. From time to time the regulations and assessments applying to your course may be reviewed and revised. When this happens you will be informed via the Children’s Nursing Moodle course site.

We all hope that you thoroughly enjoy the next two years and achieve the success of qualification as a children’s nurse.

Best wishes,

Stuart Hibbins, Course Director Children’s Nursing
SECTION 2. OVERVIEW OF PRE-REGISTRATION NURSING COURSES

Background to the courses
It is vital that you as students preparing to practice as nurses are fully equipped to work both within and across a range of health and social care services following graduation. Liberating the NHS: Developing the Healthcare Workforce (2011), sets out the framework for developing the healthcare workforce. The framework is built on five key objectives to reshape workforce planning to deliver:

- A supply of the right people with the right skills in the right place at the right time
- Responsiveness to patient needs and changing service models
- High quality education and training that supports safe, high quality care and greater flexibility
- Value for money
- Widening participation

Within the framework the professions are earmarked for having a leading role on safety and quality issues. To lead change and improve health and health services to the communities they serve is a priority for all nurses. Leadership is a key part of clinicians’ and other healthcare professionals’ work regardless of discipline and setting. The Clinical Leadership Competency Framework (2011) recognizes that incorporating leadership competences into education and training for all clinical professions will help establish a stronger foundation for developing high-level leadership capability across health and social care and in delivering the changes needed to meet the challenges ahead.

The Francis Report (2013) recommends The NHS Constitution (2012) as the shared reference point for values for all staff. These values are applied to all aspects of professional roles and work to ensure that patients are put before staff and are protected from avoidable harm.

The NHS Constitution (2012) sets out seven key principles and values that guide the NHS in all that it does to improve the health and well-being of patients, the public and communities. The Constitution establishes principles, values and responsibilities to ensure that the NHS operates fairly and commits to a full and transparent debate with the public, patients and staff about its work.

The Five Year Forward View (NHS England, 2014) sets out the shared view on how services need to change and what models of care will be required in the future. Its key arguments are that much more attention should be given to prevention and public health; patients should have far greater control of their own care; and barriers in how care is provided should be broken down. This means putting in place new models of care in which care is much more integrated than at present.

Over the next five years, traditional barriers will be reduced between physical and mental health, and health and social care, with more integrated models developed. There will be more personalised and coordinated services that are integrated around the patient and services better organised to support people who have multiple health conditions rather than a single disease. These new care model programmes are now being rolled out (NHS England, 2015) and future health care professionals will need to have case management skills and be able to work interprofessionally and flexibly across public health, community and acute settings.

Nurses are considered essential for the delivery of effective integrated health and social care services and the development of sustainable clinical teams. The nursing contribution to...
services and teams, and their support staff, is highly valued. Empowering nurses to lead change and improve health and health services to the communities they serve is therefore a priority.

All courses within the Department are committed to the education and training of students to meet the highest standards of excellence, compassion, respect, dignity and professionalism in the provision of care to patients, families and carers.

Equality of Opportunity
The University’s Equal Opportunities Policy sets out ways in which the University seeks to provide equal treatment to all its students. The University is committed to ensure that no student in the process of admission, enrolment, teaching and assessment, receives less favourable treatment on grounds of sex, age, race, colour, nationality, ethnic or national origins, marital status, sexual orientation, home responsibility, trade union activity, political or religious belief; that applications from people with disabilities are welcome; that selection and assessment criteria and procedures are kept under review to ensure that individuals are selected and treated on the basis of relevant merits and abilities alone.

With its strong commitment to high quality and continuous improvement in all aspects of its work, the University seeks to offer an education that will satisfy all students including students with disabilities in an environment in which they are supported both academically and pastorally to achieve your prospects for employment and higher study. London South Bank University's commitment to equal opportunities and to facilitating higher education opportunities for people with disabilities is long established.

Course Philosophies
The courses are based on a belief that you have the capacity to achieve a level of competence that satisfies both the conditions for registration and achievement of an honours degree.

The courses aim to prepare you to work confidently as both independent practitioner and collaboratively as a member of multi-professional teams with the following expectations:

- **Shared Values**
  Your peers will be drawn from a wide variety of cultures and sharing of life and work experiences will be encouraged. In this way you will learn from each other and develop values, knowledge, skills and competencies to work with service users without discrimination and in a culturally sensitive way.

- **Patient Centred Care**
  “Patient centred care is central to the mission of healthcare; yet traditionally neither patients nor the public have had the power to shape the services they use and pay for” (Richards et al, 2015, p1). The need for person-centred care and shared decision making is championed by the World Health Organisation to improve the quality of care. Your courses have been shaped by input from service users and you will work with and alongside them throughout your learning experiences to develop the necessary communication skills and collaborative and digital competencies to be able to better understand what people need from their health and social care services.

- **Evidence-based Care**
  Evidence-based practice and practice effectiveness is as integral to course delivery as it is to service delivery and features strongly in the curriculum. You will gain an understanding of the evidence base of practice through:
- Lecturers drawing on research to underpin their sessions
- Students being required to draw upon research being undertaken in their workplace
- Incorporation of evidence based concepts into practice
- Experienced, active researchers contributing to course delivery
- Learning about the research process
- Skills of retrieval and critical appraisal of research literature

**Course Information**

This Course Guide is designed to help you to understand the Children’s Nursing course, to help you get the most out of the programme and to ensure that you are aware of the range of resources available to support you. It contains important information about the course, about who’s who in the Children’s Nursing course team, and what roles people undertake.

It is important that you familiarise yourself with the content of this Course Guide and keep it accessible for future reference. The answers to many of your questions are likely to be contained here, however, your Personal Tutor, Link Lecturers and Course Director will all be available to you throughout the course to answer your queries.

You should read this guide in conjunction with the 2016/17 LSBU Student Handbook in which you will find essential information including:
- Academic regulations which govern your course.
- Services to you as a student
- Financial support available
- Information about the student union
- University codes which you are required to work within as a student of the University
- Regulations related to plagiarism, cheating and other disciplinary matters

You are also advised to access documents relevant to your particular course via the Moodle site.

The course is modular and comprises 4,600 hours of theory and practice, as required by the Nursing and Midwifery Council (NMC) and a holiday requirement of seven weeks per year. The programme is organised as far as possible around university academic semesters and there are two semesters per year. The modules of learning span the two semesters and each module comprises 20 credits. The programme is designed to incorporate a balance (after annual leave) of 50% theory and 50% practice. There are normally no more than 45 programmed weeks in any one year. Practice and theory are equally valued.

The Nursing and Midwifery Council requires that once you have completed the course you will have 5 years in which to complete your registration on the NMC Professional Register.

**Practice Learning Guidelines (2016)**

These contain all the information you require for the time that you will be spending in practice. You can find all this publication on the Children’s Nursing Moodle site in the Course Information folder under Children’s Nursing Policies and Procedures. These publications are updated annually, and when this happens, you will be informed via the Children’s Nursing Moodle course site.

**Module Guides**

These are also located on Moodle and contain all the information you need to know about the modules you are studying. They include an indication of what you will be studying each week.
SECTION 3: AIMS AND LEARNING OUTCOMES OF THE COURSE

Nursing programmes involve integrated study of the knowledge, skills and values from a range of subject disciplines applied to the practice of nursing. Nursing competence requires the development of technical, cognitive and interpersonal skills and involves a variety of different ways of knowing and understanding. Technical skills are the most visible part of some fields of nursing while for other fields interpersonal skills are the primary focus. Interpersonal and interactive skills are needed to enable nurses to form appropriate professional relationships and for some fields the depth and breadth of interpersonal skills required is greater. Through their educational preparation nurses become equipped to understand, contribute to, and work within the context of their profession and to analyse, adapt to, manage and eventually lead the processes of change.

Children's Nursing

Nursing children and young people in contemporary society demands that children's nurses have the requisite skills and knowledge to understand the developing needs of children from infancy to young adulthood across a range of settings. The children's nurse must be able to apply a holistic approach to care, taking into consideration physical, psychological, cognitive and emotional needs across the age ranges whilst relating to developmental stages. Children's nursing is practised within a philosophy of child-focused and family-centred care recognising that, when possible, the child, parents and carers are equal partners in care. Children and young people have the right to be included and informed about decisions made about their care, appropriate to their age and stage of development. Children's nurses must therefore incorporate this in to the delivery of care. This partnership working enables children to reach their full potential and encourages the development of autonomy in care and decision making.

Ill children present with complex multi-dimensional needs, some being life limiting or life threatening, and many which persist through childhood into adult life. These needs may impact upon the child's development, choices and family life. It is essential, therefore, for children's nurses to work collaboratively with other health and social care professionals to promote health and minimise illness while protecting vulnerable children and their families.

Children's nurses care for children and young people in the hospital setting and within 'out of hospital' settings such as the child and young person’s own homes, in schools and within the voluntary sector. This reflects the need for children's nurses to be critical decision makers with the ability to develop a flexible approach to care. This involves the co-ordination of care and the use of refined interpersonal and communication skills with both children and adult carers, underpinned by knowledge of the factors that may affect behaviours and outcomes (such as social factors, social policy, politics, law and ethics).

This programme meets the NMC Standards for pre-registration nursing education (2010) and enables successful students to register as a nurse in their chosen field of practice in Children's nursing. Students, joining the programme, must register for practice within 5 years of completing the degree programme. The programme articulates with the vision of the child health nurse advocated by the Royal College of Nursing (2007) ensuring that registrants are equipped to care for children and young people in the community as well as in hospital. This is inclusive of physical or mental health needs and includes addressing the public health and health promotion agenda.

Distinctive features of the programme include:
- Enabling the children's nurse to qualify with a range of transferrable skills that can be adapted to care in any setting (in or out of hospital), recognising that children and young people have varying levels of dependency.
- Equipping students to care for children with physical and mental health needs as well as public health issues.
- Supporting students through the programme in collaboration with a range of experienced nurses, health care professionals and allied health professions.
- Supporting students to collaborate and work with other carers and co-workers while in the placement setting.
- Focus on integrating theory to practice through modules and practice that build on knowledge through the progression points.
- A taught programme which is complemented by blended learning support and interactive activities through digital learning and smaller group work sessions. This approach accommodates differing learning styles, providing students with a range of opportunities to achieve and reach their full potential.
- Opportunity for potential students to claim Accreditation of Prior Learning for suitably qualified and/or experienced applicants.

**Aims**

The aims of the programme are to:

- Ensure that the graduate nurse achieves the competencies for pre-registration nurse education specified in the NMC Standards (2010).
- Develop confident and competent practitioners who practise autonomously, compassionately, skilfully and safely while maintaining dignity and promoting health and wellbeing for children and young people with physical and mental health needs.
- Develop a graduate nurse who is a critical consumer of research and evidence based practice.
- Foster independence in learning and commitment to lifelong learning.
- Develop the qualities and transferable skills necessary for employment.

**Programme Outcomes**

**A. Students will acquire knowledge and understanding of:**

A1. The underpinning bioscience as applied to the health, ill health and disability relating to children and young people through the life span.

A2. Physical and mental health conditions that affect children and young people, including current treatments and management.

A3. The planning of care for children, young people and their families, taking into consideration the importance of negotiation of care, recognising personal belief systems and values.

A4. The upholding of the rights of children, young people and their families within the context of care, while safeguarding vulnerable individuals.

A5. Working in partnership, specifically with children and young people, families, carers and other health and social care workers and professionals.

A6. How children and young people with disability, chronic and complex care needs require care that is individualised, unique and delivered with appropriate, safe adjustments.

A7. How to translate research into practice and to use this evidence base to improve the quality of care provision for people with mental health issues.
A8. How evidence based practice and research processes can be used to improve the quality of nursing practice and standards of care.

A9. Approaches to leadership and management and the implications of these in the context of healthcare.

**Teaching and learning strategy**
The teaching strategy will include the provision of online material; pre-session activities and a variety of blended learning through the virtual learning environment. This includes:
- Role modelling – Practice learning environments
- For small group facilitation ‘the flipped classroom’ approach will encourage students to prepare for critical debate and discussion.
- Lectures will be used to introduce and provide new information and update existing knowledge.
- Seminars and discussions will allow the sharing of varied ideas amongst students.
- Group tutorials and formative assessments will be placed in all modules to ensure students can monitor their progress.
- The use of scenarios and incident analysis to encourage the integration of theory and practice.
- Structured reading/guided study with workbooks and on-line activities to develop and update knowledge and encourage independent learning.

**Assessment**
Assessment methods are specified in each module descriptor with details in the individual module guides are designed to cover the module and course learning outcomes. These are mapped to the professional standards as outlined in the NMC Standards for preregistration nursing education (2010) and will be assessed through either coursework and/or clinical competencies and essential skills.

Coursework can take many forms based on the practical or theoretical content of the modules and may include:
- Practice scenarios, OSCEs to provide a simulated experience in which knowledge and skills can be demonstrated.
- Achievement of identified competencies related to children’s nursing at designated level.
- Client/patient narrative, reflective essay to develop integration of theory and practice
- Care and case presentation, to develop skills in articulating knowledge and decision making processes.
- Examination to test underpinning knowledge.
- Oral presentation, to allow the student to demonstrate their ability to make practice focussed decisions based on their assessment and interpretation.

**B. Students will develop their intellectual skills such that they are able to:**

B1. Critically evaluate the impact the impact of social, cultural, spiritual, legal, political and economic factors on care and care delivery to children, young people and their families.

B2. Demonstrate the ability to engage with digital technology and recognise the role of this within contemporary health care settings, as well as the social impact and implications for communication.

B3. Demonstrate a critical understanding of contemporary research and evidence that underpins nursing practice in a variety of settings.
B4. Demonstrate independent thinking, critical thinking, critical reflection, problem solving and creativity as safe practitioners.

B5. Demonstrate communication skills which reflect the ability to understand appropriate use of terminology for children, young people, their families and other carers.

Teaching and learning strategy
Students can expect, as part of the teaching and learning strategy, to be proactive participants in the development of intellectual skills through discussion and peer presentation and subject reporting.

- Lectures will be used to introduce and provide new information and update existing knowledge, encouraging the students to engage in active debate. Content will be based on current available evidence.
- The virtual learning environment will be utilised for e-activities including discussion amongst students, quizzes, critique and literature searching.
- Tutorials will include the opportunity for students to develop their intellectual skills through discussion, questioning and synthesis. This will include reflection on practice based issues to develop problem solving skills.
- Structured reading/guided study will be given to support key lectures.

Assessment
Assessment methods are specified in each module descriptor with details in the individual module guides are designed to cover the module and course learning outcomes. These are mapped to the professional standards as outlined in the Standards for pre-registration nursing education (NMC, 2010) and will be assessed through coursework and/or clinical competencies and essential skills.

Coursework can take many forms based on the practical or theoretical content of the modules and may include:

- Intellectual skills assessed through written coursework and group or individual student presentations.
- Written assignments, such as an essay, case study, critical review and evidence based scenarios to examine selected aspects of care and suggest strategies for care enhancement.
- Literature search and review to examine the evidence for care delivery.

C. Students will acquire and develop practical skills such that they are able to:

C1. Practice to meet the requirements of The Code: Professional Standards of practice and behaviour for nurses and midwives (NMC, 2015) to meet public and professional expectations.

C2. Confidently meet the competencies for the Standards for Pre-Registration Education (NMC, 2010) to ensure delivery of safe nursing care.

C3. Act with professionalism and integrity, and work within agreed professional, ethical and legal frameworks and processes to maintain and improve standards.


C5. Practice in a compassionate, respectful way, maintaining dignity and well-being for children, young people and their families while communicating effectively using a wide range of strategies and interventions.
C6. Recognise when children and young people may be or in need of extra support and protection and take all reasonable steps to protect them.

C7. Develop skills of decision making within own practice in order to promote high quality care.

**Teaching and learning strategy**
Practical skills are normally developed through practice as well as skills based sessions and problem based approaches. This will also be achieved through role modelling in practice learning environments and engagement in practice workshops in both high and low fidelity simulation within the clinical skills laboratories. Lectures and seminars will focus on problem solving scenarios and seminars and mock clinical scenarios.

**Assessment**
Assessment methods are specified in each module descriptor with details in the individual module guides are designed to cover the module and course learning outcomes. These are mapped to the professional standards as outlined in the NMC Standards for pre-registration nursing education (2010) and will be assessed through coursework and/or clinical competencies and essential skills.

Coursework can take many forms based on the practical or theoretical content of the modules and may include:

- A variety of assessment methods are used to assess practical skills. These include OSCEs, evidence based student presentations, practice learning and assessment portfolio, care and case studies and problem based scenarios.
- The achievement of identified competencies can be assessed through assessments such as reflective care studies, client/patient narratives, case study approaches and scenario based coursework.

**D. Students will acquire and develop transferable skills such that they are able to:**

D1. Demonstrate self-awareness and recognise how their own values, principles and assumptions may affect their practice.

D2. Demonstrate competent, appropriate and adaptable communication skills both verbal and non-verbal using a variety of media.

D3. Demonstrate developing leadership skills to supervise and manage others and contribute to planning, designing, delivering and improving current care and future services.

D4. Maintain their own personal and professional development, learning from experience, through supervision, feedback, reflection and evaluation.

D5. Work effectively across professional and agency boundaries, and co-ordinate smooth effective transition within and between services and agencies.

**Teaching and learning**
The strategies for teaching and learning include role modelling and discussions both in classroom activity, online interactions and in clinical areas. Seminars and discussions will enable students to share ideas. This will include allied health care professionals involved in the care of children and young people. Individual and group tutorial sessions will enable critical thinking and reflection in collaborative care.
Assessment
Assessment will take place through:

- The practice learning and assessment portfolio (Pan London Document), achievement of identified competencies related to the field of practice at designated level.
- Continuous reflective practice using reflective accounts to build evidence that supports decisions making, including the use of supporting research.
- Regular feedback from service users (including children, young people, parents and their families).
SECTION 4: COURSE STRUCTURE

Children’s field students undertaking this course progress through different academic levels and years of the course. The PG Diploma progresses from academic Level 6 to academic Level 7. The student journey which is described below provides an insight into your next two years.

Year One
All students attend enrolment followed by an orientation programme of one week. Students are encouraged to take advantage of the Information technology support appropriate to their needs. All modules are supported by online learning materials and students will become acquainted with the Moodle virtual learning environment. All students will be introduced to their personal tutor, who will be a registered nurse from the same field of practice. The personal tutor will act as a role model and support the integration of theory and practice throughout the two years. Additionally, students will be alerted to student services and to the course and module teams.

Following enrolment and orientation students have 6 weeks of theory beginning the Applied anatomy and physiology for children and young people module, Fundamental concepts of caring for children and young people and their families, Building practice skills for children’s nursing and Improving quality, change management and leadership modules. These modules will be studied over two 6-week periods and will prepare students for their first practice learning opportunity in a children’s acute setting.

Students will receive Preparation for practice prior to practice learning and will meet with their personal tutor following each practice learning opportunity to reflect on their practice, review their practice learning portfolio and begin to plan their learning outcomes for the next practice experience. The first 12-week practice learning opportunity aims to set the standard for professional experience and provide a sound basis in practice skills and working with children, young people, their families and carers. Located with their host organisation students are provided with a coach who will link with them for the whole of their course. This is a senior nurse from the field of practice responsible for partnering students in a thought-provoking and creative process that inspires them to maximize their personal and professional potential.

Students will then have a practice learning experience based in a school for children and young people with learning disability. In this setting students will have 37.5 hours of practice learning per week for 6 weeks. Academic assessments will be submitted during assessments weeks and the practice portfolio will be submitted at the end of each placement. Students will be allocated 7 weeks annual leave in each year.

Following the assessment weeks the third practice learning opportunity in the first year is an 8-week practice learning opportunity. All practice learning opportunities utilise a ‘hub and spoke’ model in which the hub is the main focus of the practice learning in a hospital setting in which the mentor is based. The student will then gain further experiences with a variety of inter-professional ‘spokes’. An example of this might be that the hub is a general children’s ward and the spokes might be the dietician, diabetic nurse specialist, pharmacist, pathology laboratories, the outpatients’ clinic and the liaison health visitor.

At the end of year one all students who have successfully progressed are invited to complete their re-enrolment online in readiness for the start of year 2. Year 1 is consolidated and the preparation for year 2 commences in the first week of year 2.
Year Two
Entry to the second year is dependent on successful completion of year one. Students will continue to share modules with students from all fields of practice and will balance this with modules of study specific to the children’s nursing field. During year two students will continue to develop their practice skills across a range of community and acute settings, increasing their competence and becoming more confident in carrying out essential skills. Guidance will be given to support the transition to academic level 7.

Students undertake the field specific modules Care of the critically ill child and young person and Applied pharmacology and medicines optimisation in children’s nursing. The third module in year 2 is Research in health and social care. If students choose to complete the MSc in Children’s Nursing they will also have to complete a Dissertation module.

In semester one there is a practice learning opportunity known as the ‘Interface placement’ and it demonstrates the interface between the community and the hospital setting. The students spend 4 weeks based in each setting. The hub for the community setting is identified as a health visitor and with appropriate spokes selected. Examples of the spokes might be children’s centres, practice nurse, children’s community nurse, children’s dentist and a variety of clinics. A child study is undertaken to enable students to appreciate the services available and accessed by the majority of families. The hub for the hospital setting might be a children’s Accident and Emergency department and the spokes being the liaison Health Visitor, radiography and imaging, lead nurse for safeguarding, community children’s nurse.

In order to maximise practice learning opportunities students may undertake hub and spoke approaches in all practice settings. Students will also undertake a practice learning opportunities which address children and young people with complex and high dependency needs. The student continues to have scheduled Preparation for Practice prior to practice learning and their personal tutor continues to meet with the student on a one-to-one basis to support the integration of theory and practice as the student begins their transition to a professional.

The final practice learning opportunity is undertaken in the students Host Trust with identified sign-off mentors. At the successful conclusion of their journey through the programme, students will be eligible for registration in their chosen field and for the academic award of a Post-graduate Diploma in Children’s Nursing. The course provides the student with an excellent platform for practising in Children’s Nursing and for further professional development.
4.1 PGDip Children’s Nursing Year Plan

**YEAR 1**

- Building practice skills for Children’s Nursing 
  0 Credits
- Improving quality, change management and leadership 
  20 Credits
- Applied anatomy and physiology 
  20 credits
  For children and young people
- Fundamental concepts of caring 
  20 credits
  for children and young people 
  And their families

**YEAR 2**

- Enhancing practice skills in Children’s Nursing 
  0 Credits
- Care of the critically ill child 
  & young person 
  20 credits
- Applied Pharmacology and 
  Medicines optimisation 
  In children’s nursing 
  20 Credits
- Research in health 
  And social care 
  20 credits

Award: Care Certificate

Award: PGDip
### 4.2 Indicative Course Plan

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<tr>
<td>19/06/17</td>
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<tr>
<td>26/06/17</td>
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<td>03/07/17</td>
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<tr>
<td>10/07/17</td>
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<td>17/07/17</td>
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<tr>
<td>24/07/17</td>
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<tr>
<td>31/07/17</td>
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<tr>
<td>07/08/17</td>
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<tr>
<td>14/08/17</td>
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<tr>
<td>21/08/17</td>
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<tr>
<td>28/08/17</td>
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<tr>
<td>04/09/17</td>
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<tr>
<td>11/09/17</td>
</tr>
</tbody>
</table>

Study may be designated for skills updates or other activities – it is not holiday
Exceptional 3rd resits occur during 21.08.2017 only
# SECTION 5: SUMMARY OF MODULES

## Year 1 modules

<table>
<thead>
<tr>
<th>Module Title</th>
<th>Improving Quality, Change Management And Leadership</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Semester</strong></td>
<td>Year 1 – Semesters 1 and 2</td>
</tr>
<tr>
<td><strong>Ref No:</strong></td>
<td>HSC_6_008</td>
</tr>
</tbody>
</table>
| **Student Study hours** | Contact hours: 24  
Blenched learning hours: 30  
Student managed learning hours: 146  
Total hours: 200 |
| **Module Coordinator** | Liz Crighton                                    |
| **Description** | This module focuses on interprofessional learning and will explore leadership, quality improvement and change within organisations from an interprofessional perspective. The module will look at strategic, evidence based approaches to change management in a range of environments. It will integrate the perspectives of service users and take an interprofessional approach. |
| **Assessment** | **Formative assessment:**  
Small group discussion to identify and explore areas for improvement and ways in which change could be initiated. This will include consideration of observed leadership styles, team work practices and how feedback from the service is used to promote improvement and change.  
**Summative assessment:**  
**Written change proposal**  
Students will be required to submit a change proposal, to a given specification, and with reference to leadership, change management or quality improvement methods.  
Students will be required to demonstrate how feedback from service users, the team, data and other forms of evidence have been used systematically to question current practice.  
3,000 Words  
100% weighting  
50% pass mark |

<table>
<thead>
<tr>
<th>Module Title</th>
<th>Applied Anatomy and Physiology for Children and Young People</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Semester</strong></td>
<td>1</td>
</tr>
<tr>
<td><strong>Ref No.</strong></td>
<td>NCH_6_013</td>
</tr>
</tbody>
</table>
| **Student Study Hours** | Contact hours: 40  
Blenched learning hours: 10  
Student managed learning hours: 150  
Total hours: 200 |
| **Module Coordinator** | Cedar                                                      |
| **Description** | This module further develops the anatomy physiology themes from prior knowledge, with a specific emphasis on application to child health and children’s nursing. Pharmacokinetics and pharmacodynamics will be explored in relation to children and young people. |
| **Assessment** | **Formative Assessment:**  
Students will be given a practice scenario to consider in a workshop. In groups they will plan an assignment answer, considering revision and exam technique. There will also be a mock exam.  
**Summative assessment:**  
**2 hour unseen examination**  
Candidates must answer 20 multiple choice questions (Section A) and 2 out of 5 essay style questions (Section B).  
Section A: 25% Weighting  
Section B: 75% Weighting  
Overall Weighting 100%  
40% pass mark |
<table>
<thead>
<tr>
<th>Module Title</th>
<th>Semester</th>
<th>Ref No.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fundamental Concepts of Caring for Children, Young People and their Families</strong></td>
<td>Year 1 – Semester 2</td>
<td>NCH_7_013</td>
</tr>
<tr>
<td><strong>Student Study Hours</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact hours: 40</td>
<td>Blended learning hours: 15</td>
<td></td>
</tr>
<tr>
<td>Student managed learning hours: 145</td>
<td>Total Hours: 200</td>
<td></td>
</tr>
<tr>
<td><strong>Module coordinator</strong></td>
<td></td>
<td>Fiona Whitwham</td>
</tr>
<tr>
<td><strong>Description</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The purpose of this module is to give students the foundational knowledge that informs children’s nursing. It will provide a theoretical basis for developing core care skills whilst encouraging students to examine the role of the children’s nurse in contemporary society. Throughout the module students will explore how nurses facilitate active participation from children, young people and their families in decision making. Students will examine concepts of professional and legal responsibilities related to care delivery.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Assessment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Formative Assessment:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 minute PowerPoint presentation in small groups. A scenario will be provided and in groups students will be required to explore various patient stories with differing ages, gender, ethnicity, religion and medical conditions including acute, chronic, life-limiting, minor, and also with varying family configurations.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Summative Assessment:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Written assignment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Essay focusing on a holistic assessment of a child/young person and their family using a case study (child or young person they have encountered in practice). Student should utilise a range of appropriate literature to support their paper. Question: “Explain the process of nursing the…”</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3,000 Words</td>
<td></td>
<td></td>
</tr>
<tr>
<td>100% Weighting</td>
<td>50% Pass Mark</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Module Title</th>
<th>Semester</th>
<th>Ref No:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Building Practice Skills for Children’s Nursing</strong></td>
<td>Year 1- Semesters 1 &amp; 2</td>
<td>NCH_6_011</td>
</tr>
<tr>
<td><strong>Student Study Hours</strong></td>
<td>Contact Hours: 40</td>
<td>Blended Learning Hours: 15</td>
</tr>
<tr>
<td></td>
<td>Student Managed Learning Hours: 145</td>
<td>Total Hours:200</td>
</tr>
<tr>
<td><strong>Module coordinators</strong></td>
<td>Stuart Hibbins</td>
<td></td>
</tr>
<tr>
<td><strong>Description</strong></td>
<td>The purpose of this module is to build upon the student’s learning and enable them to develop their practice skills and knowledge. The students will continue to use safe, simulated environments, supervised placement experiences, and independent learning opportunities. The module will focus on the development and use of appropriate professional values with a stronger emphasis on students becoming more analytical and reflective in their problem solving skills. Additionally, students will be challenged to work towards developing effective clinical and communication skills to support practical care giving.</td>
<td></td>
</tr>
<tr>
<td><strong>Assessment</strong></td>
<td><strong>Formative Assessment:</strong></td>
<td></td>
</tr>
<tr>
<td>Students will be expected to undertake an Objective Structured Clinical Examination (OSCE) of a clinical skill practiced in the module.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Summative Assessment:</strong></td>
<td><strong>Pan London Practice Assessment Document</strong></td>
<td></td>
</tr>
<tr>
<td>This module will be assessed through summative achievement of the essential cluster skills and professional values within the Pan London Practice document. Assessment will take place by a recognised Mentor within the clinical practice area to which the student has been assigned.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>100% Weighting</td>
<td>Pass/Fail</td>
<td></td>
</tr>
</tbody>
</table>

PGDip Children’s Nursing Course Guide_ FINAL
### Year 2 modules

<table>
<thead>
<tr>
<th>Module Title</th>
<th>Care Of The Critically Ill Child and Young Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>Semester</td>
<td>Year 2 – Semester 1</td>
</tr>
<tr>
<td>Ref No:</td>
<td>NCH_7_015</td>
</tr>
</tbody>
</table>
| Student Study Hours | Contact hours: 40  
Blended learning hours: 15  
Student managed learning hours: 145  
Total hours: 200 |
| Module coordinator | Tamzin Dawson |
| Description | This module has been designed to integrate the application of theoretical and clinical knowledge, skills, attitudes and values required to underpin managing the caring of the critically ill child and young person and their families. The module will build upon a student’s knowledge and help develop a clinical reasoning approach to the care of a critically ill child or young person. It aims to examine the assessment, observation, close monitoring and intervention required to manage critically ill child or young person. |
| Assessment | **Formative Assessment:** Mock Objective Structured Clinical Examination (OSCE)**  
**Summative Assessment:** Objective Structured Clinical Examination (OSCE)  
The students will achieve the learning outcomes and competencies through the completion of an Objective Structured Clinical Examination (OSCE). The student will be given a mock clinical scenario in the skills laboratory and will be expected to perform a structured primary assessment and identify interventions for the ill child or young person. |

<table>
<thead>
<tr>
<th>Module Title</th>
<th>Applied Pharmacology and Medicines Optimisation in Children’s Nursing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Semester</td>
<td>Year 2 semester 2</td>
</tr>
<tr>
<td>Ref No:</td>
<td>NCH 7 016</td>
</tr>
</tbody>
</table>
| Student Study hours | Contact hours: 40  
Blended learning hours: 15  
Student managed learning hours: 145  
Total hours: 200 |
| Module Coordinator | Kate Davies |
| Description | This module aims to develop knowledge and understanding of the principles of pharmacology and medicines optimisation. Medicines optimisation focuses on encouraging all health care professionals to work collaboratively with each other and patients to optimise the effectiveness of pharmacological interventions (NICE 2015). This module will relate this to the care of children, young people and their families, with an emphasis on clinical application. It will explore and discuss the general principles of pharmacodynamics and the complexities of pharmacokinetics in relation to the child. Commonly used medications will be identified and explored in the context of a variety of care settings. This module will consider and evaluate the role and responsibilities of the nurse in relation to the safe administration of medication in clinical practice, including competency with drug calculations. |
| Assessment | **Formative assessment**  
Moodle pharmacology and numeracy quiz  
Group presentations – students will explore aspects of care that will help towards the final assessment.  
**Summative assessment**  
Written assignment  
Scenario based assignment that demonstrates principles of safe practice and application of gold standard principles.  
3,000 Words  
100% Weighting  
50% Pass Mark |
<table>
<thead>
<tr>
<th>Module Title</th>
<th>Enhancing Practice Skills for Children's Nursing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Semester</td>
<td>Year 2- Semester 1 and 2</td>
</tr>
<tr>
<td>Ref No:</td>
<td>NCH_7_014</td>
</tr>
<tr>
<td>Student Study Hours</td>
<td>Contact Hours: 40</td>
</tr>
<tr>
<td></td>
<td>Blended Learning Hours: 15</td>
</tr>
<tr>
<td></td>
<td>Student Managed Learning Hours: 145</td>
</tr>
<tr>
<td></td>
<td>Total Hours:200</td>
</tr>
<tr>
<td>Module coordinators</td>
<td>Stuart Hibbins</td>
</tr>
<tr>
<td>Description</td>
<td>The purpose of this module is to prepare the student to enhance their assessment and decision making skills whilst effectively managing care that promotes quality, health, safety, service user and staff wellbeing. Students will be able to appraise their own learning and development needs as they approach the transition from student to registered practitioner.</td>
</tr>
<tr>
<td>Assessment</td>
<td>Formative Assessment:</td>
</tr>
<tr>
<td></td>
<td>Students will be expected to undertake an Objective Structured Clinical Examination (OSCE) of a clinical skill practiced in the module.</td>
</tr>
<tr>
<td></td>
<td>Summative Assessment:</td>
</tr>
<tr>
<td></td>
<td>Pan London Practice Assessment Document</td>
</tr>
<tr>
<td></td>
<td>This module will be assessed through summative achievement of the essential cluster skills and professional values within the Pan London Practice document. Assessment will take place by a recognised Mentor within the clinical practice area to which the student has been assigned.</td>
</tr>
<tr>
<td></td>
<td>100% Weighting</td>
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<td></td>
<td>Pass/Fail</td>
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<table>
<thead>
<tr>
<th>Module Title</th>
<th>Research in Health and Social Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Semester</td>
<td>Semester 1</td>
</tr>
<tr>
<td>Ref No:</td>
<td>TAR_7_011</td>
</tr>
<tr>
<td>Student Study hours</td>
<td>Contact hours: 36</td>
</tr>
<tr>
<td></td>
<td>Blended learning hours: 30</td>
</tr>
<tr>
<td></td>
<td>Student managed learning hours: 164</td>
</tr>
<tr>
<td></td>
<td>Total hours:200</td>
</tr>
<tr>
<td>Module Coordinator</td>
<td>Dr Martin Benwell</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:benwelmj@lsbu.ac.uk">benwelmj@lsbu.ac.uk</a></td>
</tr>
<tr>
<td>Description</td>
<td>The purpose of this module is to consolidate and extend students' knowledge of research approaches and methods and enhance their ability to be critical users of research evidence. The module examines philosophical and theoretical perspectives underpinning health and social care research approaches including exploration of research design and key aspects of data gathering and interpretation of both qualitative and quantitative analyses. The module will develop practical skills for identifying, critical reviewing and synthesising research evidence relevant to professional practice.</td>
</tr>
<tr>
<td>Assessment</td>
<td>Summative assessment:</td>
</tr>
<tr>
<td></td>
<td>Written assignment</td>
</tr>
<tr>
<td></td>
<td>Students are to incorporate a detailed search strategy, a literature review and critical appraisal of the evidence.</td>
</tr>
<tr>
<td></td>
<td>3,000 Words</td>
</tr>
<tr>
<td></td>
<td>100% Weighting</td>
</tr>
<tr>
<td></td>
<td>50% Pass Mark</td>
</tr>
</tbody>
</table>
SECTION 6. LEARNING SUPPORT

Your wellbeing is important to us and there are many ways in which the University can help you. As well as providing social and work spaces, our purpose-built Student Life Centre has a wealth of knowledge on all non-academic issues that can affect you while you are at the University. They will be able to help with the services below plus careers and employability queries, appointments with student advisors and any questions you may have regarding fees and bursaries. If you are not sure where to go, it will be a great place to start as the staff will be very happy to help you find the right person to talk to.

Student Advice service provides a free and confidential service for all students, advice and guidance on financial and money management, and help with any personal, emotional or academic issue you may face.

Your wellbeing is important to us and there are many ways in which the University can help you if you find yourself in difficulty. As well as providing social and work spaces, our purpose-built Student Life Centre has a wealth of knowledge on all non-academic issues that can affect you while you are at the University. They will be able to help with the services below plus careers and employability queries, appointments with student advisors and any questions you may have regarding fees and bursaries. If you are not sure where to go, it will be a great place to start as the staff will be very happy to help you find the right person to talk to.

Student Advice service provided a free and confidential service for all students, advice and guidance on financial and money management, and help with any personal, emotional or academic issue you may face.

Disability & Dyslexia Support (DDS) service is specifically dedicated for students with a mental health condition or other medical condition, who are disabled or have specific learning difficulties (including dyslexia). You do not need to be registered to use DDS, but if you have a disability or dyslexia you may be entitled to some additional support to help you cope with any practical, academic or personal needs arising from your disability. The DDS offers a range of services and facilities that can be tailored to meet individual needs and that will enable you to get the most out of your time at London South Bank University.

If you are a student with a disability or dyslexia, or think you might need to be assessed for dyslexia, please contact the Disability and Dyslexia support service as soon as possible. The sooner any necessary arrangements are made, the better equipped you will be to succeed in your course.

Please remember that it is your responsibility to let the module leader know in advance of the assessment submission of any specific learning needs.

Student Mental Health & Wellbeing service offers short-term support and advice to all students who are experiencing personal difficulties, who may be struggling to cope at university or just need someone to talk to. The service is free and confidential and there are a range of appointment days and times available.

To assist your personal development and increase motivation, it is important that you develop self-awareness and belief in your abilities. You will be encouraged to share experiences with your peers throughout the course. Personal support will be offered by the provision of identified personnel with specific roles related to course delivery. The key roles are identified in this document.
Skills for Learning - Learning Support
The Skills for Learning Team is part of the Centre for Research Informed Teaching and provides a flexible service to all students enrolled at LSBU. The team supports you to develop your academic literacy, enhance your performance and achieve the grades you are aiming for so you can reach your full potential and go on to further study or employment. Academic Skills, English Language and Maths Workshops are taught in the Learning Resource Centre (LRC) at the Southwark Campus and in the Library at the Havering Campus.
What they offer:

- **Academic Skills Workshops** are timetabled sessions that cover a range of topics including critical thinking, essay and report writing and how to write in your own words. All workshops are bookable at [http://S4Lworkshops.eventbrite.com](http://S4Lworkshops.eventbrite.com)

- **Maths Development Workshops** cover different areas such as maths for engineering, maths for business and drug calculations. The workshops are timetabled and can be booked at [http://S4Lworkshops.eventbrite.com](http://S4Lworkshops.eventbrite.com)

- **One-2-One Appointments** are 30 minutes with a tutor who will provide you with the opportunity to discuss any aspect of your learning. One-to-many tutorials are also available (3 or more students for a 45 minutes appointment) [https://my.lsbu.ac.uk/S4L](https://my.lsbu.ac.uk/S4L)

- **Drop-in Sessions** are offered for both Maths and Academic Skills and are scheduled everyday from 11-00-1.00pm and Maths ONLY, everyday from 2.00-4.00pm. We will see you on a first come- first serve basis but you are welcome to drop-in and work on your assignments while you wait. We are happy to see you as an individual or as a group and the agenda is set by you. There is no need to book, just turn up at the scheduled time.

- **Embedded Sessions** are timetabled workshops embedded into the curriculum and are delivered by our Learning Development Advisers who work alongside the Course Director and/or Module Leaders to embedded learning development into your subject-specific discipline.

The team will be happy to support you in any aspect of your academic skills and maths development. Whether you are beginning a course or progressing onto another year, come and see us or access our online resource materials [https://vie.lsbu.ac.uk](https://vie.lsbu.ac.uk) to aid you in your progression. The team can be contacted on **Tel: 020 7815 6454**, by visiting the **Student Life Centre** or **Email** studyskills@lsbu.ac.uk or access the **Website** [https://my.lsbu.ac.uk/S4L](https://my.lsbu.ac.uk/S4L)

Student Administration
The way in which the programme is administered has been enhanced and the administrative processes follow the student journey. A dedicated and professional student administrative team support you undertaking the pre-registration nursing programme. Student Administration is based at Southwark and Havering and staff work across site. The Head of Student Administration has overall strategic responsibility for administrative support. Whilst the Student Administration and Campus Manager is responsible for ensuring that there is consistency and continuity for students’ experience across each site the Team Leader has operational responsibility to ensure the smooth operation on a day to day basis. Names and details can be found on the Children’s Nursing Moodle site.

Academic Support Systems for Students
Within the Department of Children’s Nursing there are many opportunities for support. A full list contact details for the pre-registration Children’s Nursing teaching team can be found in Appendix 1.

Peer Support
A system of peer support is in place for you (student mentors) in later years to help new students to integrate and for easy transition to life and study at the University. For the mentor, it gives the opportunity to support and as such will help personal development and can improve skills such as time management, organisational and communication skills. In
later years you will become mentors as you progress to year two.

**Personal Tutor**

You will be allocated a personal tutor for the duration of your course who will registered on the NMC register and with due regard. Your personal tutor is a member of the Department of Children’s Nursing academic team who will be responsible for monitoring your progress in the achievement of academic and practice related learning outcomes and competencies. The Personal Tutor will meet with you prior to and following each practice experience and will monitor your progress in the achievement of competencies and provide support and pastoral care to a group of Children’s Nursing students in your cohort. The tutor will be responsible for maintaining personal tutor records, including monitoring and offering support regarding sickness and absence and providing employer references.

The personal tutor system aims to facilitate the development of each student to enable you to reach your full potential as an individual and as a professional. You may be referred on to other University support services in an effort to meet your needs.

**Course Director**

Course Directors are responsible for the day-to-day delivery and co-ordination of each course within the Department. The Course Directors liaise with their profession specific teams, cohort leaders, module leaders, the Associate Professor for Pre-Registration Children’s Nursing, and the Head of Department if necessary, to ensure the courses are delivered as efficiently as possible and in accordance with validation documents. Responsibilities also include ensuring that all students have an appropriate personal tutor, and that attendance, sickness or statutory leave is monitored. Course Directors have a major role in annual Quality and Performance Monitoring for the University, the commissioners and the Professional and Statutory Bodies.

**Your Course Director is Stuart Hibbins**

**Cohort Leader**

Some groups of students will be allocated a cohort leader at the beginning of the course. The responsibility of the cohort leader is to facilitate a cohort of students throughout the two years of the course, focusing more on group and professional issues raised by the cohort, as well as keeping the cohort informed of developments within the University and in professional practice. The cohort leader will provide for continuity and identity with that student cohort.

**Module leader**

Module leaders are responsible for the management, delivery and evaluation of the module, ensuring it is delivered according to specification. They will produce the module guides, organise the teaching arrangements, assessment and update module content as required.

They will also provide a range of support to you relating to the specific module. This covers information regarding reading materials, IT support, advice relating to identified teaching session/s, providing advice on missed sessions, guidance regarding module assignments and offering further guidance and individual support should you fail the assessment.

**Link Lecturer**

The link lecturer is a member of academic staff responsible for liaising with identified practice areas. They liaise with these areas on a regular basis and are responsible for your support as well as ensuring that qualified staff in the areas are kept informed of curriculum developments that may impact on their role as mentors or assessors. The link lecturers promote working in partnership between educationalists and practitioners to ensure a constructive learning environment for all students.

**Course Representatives**
Course Representatives provide an important link between you, staff and the Students’ Union. They support fellow students through consultation with you and represent you at Pathway Boards, Committees of the University and other appropriate forums.

Student Ambassadors
Student Ambassadors have played an important part in the recruitment of students and in supporting new students within the Department for a number of years. Current AHS students who are motivated and enthusiastic about their course undertake the role of Student Ambassador. Student Ambassadors are involved in Open Days, ‘Fresher’s’ activities and the induction course to help introduce new students to the courses and the university.

The Student Union
Students of the School of Health and Social Care are automatically members of the London South Bank Students’ Union. LSBU Student Union typically provides support in relation to a wide range of issues around student welfare and in the provision of a sociable environment. LSBU Student Union encourages all AHS students to get to know the union and use it widely meeting students at the commencement of the course during induction and providing contact details.

Virtual Learning Environment (VLE)
The LSBU Virtual Learning Environment (Moodle) contains sites which will support your learning at LSBU. The VLE can be accessed at any time on and off campus using your username and login, and contains a number of links to resources to enable you to get the most from your course of study.

Electronic copies of the Scheme guide will be posted on the VLE and each module folder will contain a link to the relevant module guide. The way in which VLE is used for teaching and support will vary across the courses, between modules and even individual lecturers. You may be required to carry out some activity prior to your taught session, or you may find there is some post teaching work. Discussion boards may feature in some modules and it is really important that you actively engage in all of these activities. If a discussion board is set up as part of the teaching and learning for a module, your involvement is monitored in the same way as your attendance is monitored in the taught sessions.

Help sheets show you how to set up your LSBU IT account; how to log in to the VLE; how to access the VLE for modules and courses that you are registered onto and what to do if you have problems.

Information about the location of your lectures will be made available through the VLE; if it is necessary to change the venue, you will also be notified through the VLE. You are required to check the VLE and your LSBU email daily to see whether there are any notices for you.

Student Code of Practice
The Student Code of Practice sets out responsibilities placed on you as you undertake an LSBU award with regard to enrolment, attendance, conduct and adherence to University regulations, policies and procedures.

Attendance Requirements
Attendance on your course of study is integral to ensuring fitness for practice and meeting NMC Standards. It is a manifestation of professional responsibility towards fellow students, tutors, work colleagues and ultimately the patient or client.

Therefore attendance is MANDATORY for both academic and practice placement modules.
In the University, electronic monitoring of your attendance will be undertaken by ‘checking in’ using your ID card and a proximity card reader as you enter classrooms, skills labs and the library. Each time the card touches a reader, an audit log is created in a database which records which reader was touched by whom and the date and time. The system allows audit logs to be generated and matched against the timetable system to identify those present.
the teaching and learning for a module includes activity through the VLE, your participation in this will also form part of your attendance record.

In order to correctly notify your attendance you must ‘check in’ no earlier than 10 minutes before the start of a session. You can touch at any time during the session and have your attendance recorded. Please make sure to touch in for all timetabled sessions. This information is collected on your ID card and will need to be uploaded to the attendance monitoring system using the ‘Check Out Points’ located around the University. It is best to do this every day before leaving University.

Attendance in the practice environment will be monitored through the completion of the associated practice documentation.

The University may contact you for clarification regarding any non-attended sessions and Patterns of unexplained or non-approved absence may be investigated as part of the Professional Suitability / Fitness to Practice process.

**Absence from the university**
You should inform, through LSBU email, the relevant Course administrator and module leader if you are unable to attend planned academic sessions.

You should also provide a brief email to the university sickness and absence administrator: hsc-southwarkabsence@lsbu.ac.uk. This email should include your name, student number, course, all dates of absence and a brief outline of your reasons for absence (Sickness/Appointment/etc). You must also email the date of your return when known.

**Absence from the practice placement**
You are required to inform the practice educator, your own workplace (if applicable) as well as the university at the earliest opportunity. Any extended period of absence should also be reported to all parties as soon as possible.

You should also provide a brief email to the university sickness and absence administrator: hsc-southwarkabsence@lsbu.ac.uk. This email should include your name, student number, course, all dates of absence and a brief outline of your reasons for absence (Sickness/Appointment/etc). You must also email the date of your return when known.

Evidence of the reasons for the absence is required and must be presented with any extenuating circumstances should extenuating circumstances be requested for consideration.

In the event of sickness, you should also follow the procedure outline below.

**Sickness**
You are required to notify your practice educators and your own workplace (if applicable) as soon as possible in the event of sickness. University staff (normally School of Health Sickness and Absence Administrator/Course Administrator) must also be notified.

Sickness/Absence Administration team:
Telephone: 0207 815 8141
Fax Number: 020 7815 8099
Email: hsc-southwarkabsence@lsbu.ac.uk

Guidance as to sickness/absence reporting in practice may be located in your Practice Learning Guidelines.
If a period of sickness extends beyond six days a medical certificate will be required. Sickness or absences totalling more than seven days will be required to be made up to comply with Statutory Regulations.

**Pregnancy**
Being pregnant or a new mother does not prevent you from training and developing your career. However, it is extremely important from a health and safety point of view that you inform your Course Director and Cohort Leader if you are pregnant. The University recognises the importance of its obligations to comply with regulatory and legal requirements. The policy for New and Expectant Mothers for pre-registration students may be located in your Practice Placement document.

**Annual leave/holiday**
Your curriculum clearly identifies your annual leave / holidays. At all other times you are expected to be either in the academic environment, on identified study or in practice placements. The published dates for practice placements are part of the university academic calendar and cannot therefore be modified or changed except under exceptional circumstances.

**Study weeks** are primarily for study and assessment completion, these are not additional holiday weeks. Failure to attend a session scheduled in these weeks may result in being recorded as absent.

**Religious festivals**
Where you need to take time off during the placement for religious festivals you should negotiate this with your practice educator and Course Director well in advance to discuss if, and how, this can be accommodated. Time taken out for this purpose will not count as 'supervised hours' for professional qualification. Please refer to section 4.6 Practice Learning Guidelines.

**Fire, Health and Safety**
You are required to comply with fire, safety and health regulations based on the Health and Safety at Work Act 1974 in any environment in which you are undertaking academic or placement studies as part of the course. You must observe smoking policies in all environment in which you are undertaking practice-based learning as part of the course.

In the event of accidents, you are required to notify designated personnel promptly in accordance with the policy of the University or Authority in which you are undertaking practice based learning.

**Professional Suitability / Fitness to Practise**
**HSC Fitness to Practise Procedure** applies to all students following pre-registration programmes in the School of Health and Social Care leading to registration either with the Nursing and Midwifery Council (NMC), the British Acupuncture Council (BAcC) or the Health & Care Professions Council (HCPC).

Standards of Conduct, Performance and Ethics are set out by the HCPC and professional bodies who provide Guidance for the application of those standards in the educational setting. Those professional body documents define the standards which you must meet.

Where unacceptable behaviour has taken place outside University premises (for instance in a placement setting) and been considered under the process of another institution (such as the placement provider), the University retains the right to consider that behaviour under this process.

**Principles informing the procedure**
Whilst the precise standards vary between professions, in general fitness to practice has four elements:

- Suitable conduct;
- Suitable competence;
- Suitable character;
- Suitable health.

The University has an occupational health process, and therefore issues of health are not considered under this process. Students’ competencies are demonstrated through the satisfactory completion of academic work and placements, and are therefore not considered under this process. This process is used to review cases where students’ behaviour calls into question whether their conduct or character are suitable for the profession which they have entered or are seeking to enter.

The over-riding principle underpinning this procedure is that the safety of service users in placement settings cannot be put at risk. Subject to that principle, students are expected to learn and develop the appropriate standards of conduct whilst they are on the course. The normal approach to behaviour which is inconsistent with the standards of conduct, performance and ethics is therefore to warn the student and give him, or her, a chance to improve and develop. However, if conduct does not improve or develop, or if the safety of others is put at risk, students may be permanently excluded from the University.

Professional suitability
As individuals responsible for the safety and wellbeing of patients/clients/service users, it is necessary that students following programmes of professional study understand and comply with the standards and values of their future profession. This means that students must be able to not only demonstrate the achievement of practice and theoretical learning outcomes and also demonstrate that they are professionally suitable for their chosen career. Students are therefore expected to demonstrate these standards of behaviour at all times when in contact with patients/clients/service users, carers and other health and social care professionals.

Directional Statement of Conduct
You will be required to sign the School’s Directional Statement of Conduct Principles annually. The Directional Statement clarifies the expected behaviours of you and the process of annually signing up to them ensures that you are clear of the expectations on you. For the avoidance of doubt, it is the professional bodies which determine acceptable standards of conduct: the Directional Statement of Conduct should be understood only as guidance to the relevant Standards of Conduct, Performance and Ethics published by the HCPC or BAaC as appropriate.

The University’s Disciplinary Procedure
Behaviour which is covered under this Fitness to Practice Procedure cannot be considered under the University’s Student Disciplinary Procedure. The Fitness to Practice process will always take precedence over the Student Disciplinary Procedure, and if the Student Disciplinary Procedure is initiated with respect to behaviour which is subsequently seen to fall under this procedure, the disciplinary process will immediately be terminated and action under this procedure taken instead.

Context
The activities and behaviours that impact on professional suitability are those normally associated with the demonstration of commitment, understanding and competence in practice.

Therefore you must demonstrate:
1. Effective communication, both professionally and between students and the University.
2. Punctual time-keeping and attendance during practice placements and whilst attending the University.
3. A professional demeanour in public life (both appearance and behaviour towards patients/clients/service users, colleagues, lecturers and clinical staff) and in personal life; there are public expectations that attach to a health/social care professional and it is important to remember that members of the public may be encountered in a professional context at a future date.
4. Mutual respect with regard to the needs and priorities of the working environment, colleagues, lecturers and practice staff.

Expected behaviours
- All students must ensure that honesty, integrity and respect for themselves and other people forms part of their personal and professional ethos.
- All students must abide by the policies of the placement agency and should comply with the guidance given to them by their supervisor (this could include their Tutor, Mentor, Link Lecturer or other placement employees).
- All students are expected to acknowledge responsibility for the health and safety of themselves and other people with whom they may be in contact during their placement. Students should also acknowledge any limitations in their knowledge or expertise.
- All students are required to access their University email account and the Student Portal on a regular basis and respond to communication from the University in a timely manner.
- All students must ensure that all information relating to patients/clients/service users, colleagues and the affairs of the placement agency staff shall be kept confidential at all times.
- All students have a duty of care and have to declare in writing (to their Course Director) any cautions, criminal convictions, any situation where they are the focus of a criminal investigation or any pending child protection issues.
- All students have a professional duty of candour and the need to be open and honest when things go wrong.
- All students have a duty of care and have to declare any changes in their health status that occur during their course of study.
- All students must act without delay to report appropriately any concerns that they have observed, or risks that have been reported to them, which could adversely affect those in their care, students, staff or the overall standards of care or practice.

The above Directional Statement should be read in conjunction with LSBU Practice Learning Guidelines and requirements laid down by the relevant professional and regulatory bodies which are designed to ensure public protection.

Definitions of Unsuitable Behaviours
Professional unsuitability is demonstrated through any actions or omissions, which could be judged to endanger public safety or bring the student, the University or your profession into disrepute. The following list, though not exhaustive, sets out specific examples:
- Failure to comply with the Professional Conduct for Health and Care Professions Council and British Acupuncture Council.
- Poor attendance and timekeeping in the practice placement or University (the student is required to attend all scheduled teaching activities sessions).
- Consistent failure to communicate with the University or practice placement area in a manner which results in an impact on the associated service delivery.
- Failure to comply with professional guidelines, codes of practice, ethics and policies.
- Failure to exercise due consideration for the safety and welfare of service users/clients and colleagues.
• Failure to demonstrate consistent and safe application to the development of professional skills (through appropriate participation in the learning and practice assessment process)
• Unacceptable behaviour in any environment which may reflect badly on you and which may compromise the reputation of the University, the Trusts/Health Service and Independent/Voluntary Bodies and the profession and/or lead to a justified formal complaint from a service provider or a practice placement area
• Any action leading to a disciplinary procedure, either on the part of the University or a practice placement area

*You should note that you have a duty to report to the university, if you have been cautioned, charged or found guilty of a criminal offence during your studies.

Reference documents
• London South Bank University Course Guide for your specific course of study. (Handbooks are published annually within the School and provided at the commencement of each academic year)
• British Acupuncture Council (2012) Code of Professional Conduct
• Clinical and procedural policies provided in each health/social care agency within which students acquire clinical experience
• HCPC Guidance on Conduct and Ethics for Students
• London South Bank University Student Disciplinary Procedure
• LSBU Student Codes of Practice
SECTION 7. LEARNING AND TEACHING STRATEGIES

This necessarily reflects the University's aims in offering students a successful learning experience that is underpinned by commitment to equal opportunities.

The expectation throughout the course is that, as an adult learner, you **MUST** take responsibility for your own learning. This will require you to prepare for academic sessions in advance using the recommended reading and to follow up academic teaching by reflecting on it, with reference to theory and in its application in practice.

The following assumptions relating to learning and teaching processes are made:

- the course will encourage you to reflect on your own and other's experiences throughout the duration of your study
- the emphasis will be on co-operative learning where individuals share responsibility for your own and each other's learning, and where opportunities exist for everyone to make their own unique contribution to your courses. A variety of learning methods will be used with the main focus on student-centred learning activities
- assessment procedures used will also reflect the notion of learning as a process of self-discovery and on-going development whilst ensuring a sound knowledge base in the subject
- a major focus will be on the development of self-awareness linked to the ability to review, analyse and integrate material in order to apply such knowledge to practice within the context of professional education
- the use of client-centred scenarios aims to promote enquiry-based learning and inter-professional working

The learning and teaching strategies aim to create an environment that recognises the need for you, as an adult learner, to fully participate in your development and to be able to contribute to the learning process from your own unique background and experiences.

The role of the lecturer is mainly one of facilitation both in individual and group learning situations. It is our belief that adult learners should have a choice about the ways they learn best. The key to this process is the commitment of all staff in facilitating individual learning through the personal tutor system that provides individual student support (see Section 6 Student Support).

The learning and teaching strategy aims to utilise a combination of traditional, innovative and student-centred approaches. The nature and balance of the learning and teaching strategies will vary between modules and courses. The strategies used will be those considered to be the most appropriate for attainment of the aims of the individual modules and of the course as a whole whilst ensuring parity of experience for the pre-registration AHP students.

Practice education will provide opportunities for learning in the workplace and for reflecting on these experiences within the University setting. In addition, in-service students will be encouraged to draw upon and share your existing work-experiences to facilitate understanding of theoretical concepts and processes.

Facilitating learning in workplace and practice settings can be challenging but, as a learning experience, it offers you a rich opportunity to receive feedback on your performance and to develop the professional knowledge, skills, values, attitudes and behaviours required to work in partnership with patients, clients, carers and a variety of teams.
The pre-registration courses promote the concept of the reflective practitioner who engages in continual reflection upon practice, which requires you to think about what you are doing as you are doing it and also to reflect on events and experience. You will be using the reflective process throughout the course in both the practice and academic settings, drawing on a range of experiences to continuously review your development and performance. Engaging with the process aims to enable you to develop transferable skills such as self-awareness, critical analysis and the ability to set goals, which will subsequently enhance competence of you as a practitioner post qualification.

It is also recognised that all healthcare professionals need to have information skills. Informatics is the merging of IT and Information Management Skills relating to healthcare. Information Technology skills development begins in the induction period of your course and will continue throughout the course. Focusing on the use of evidence will help you to learn the skills necessary to identify and manage information. You will be required to present coursework that has been word processed and the use of PowerPoint to support seminars and presentations will be encouraged.

Blended learning is an intrinsic part of your academic teaching and learning experience. This may comprise a variety of forms, e-learning, use of VLE, blogs et cetera. The quantity of online interactivity will depend on the subject and style of the module; some having minimal e-learning to those which are delivered, assessed and supported predominantly electronically. The courses will follow the corporate outline for the main elements for VLE and you will be able to access module guides, timetables, module readers, and links to websites.

You will be enrolled into the VLE site as soon as you are fully enrolled into the course and you MUST access it and engage in the relevant activities on a regular basis.

Practice skills laboratories at London South Bank University provide a safe environment to practice both psychomotor and communication skills. The environment is such that it simulates real life events. Psychomotor skills are learned and you will be encouraged to transfer these skills to practice placements.

As part of the learning experience you are required to learn, develop and practice practical skills. In order to do these you will undertake activities both as a student practitioner and subject. You will be required to read and sign a consent form that indicates your willingness to undertake the necessary skills training. A copy of this form may be found in Appendix 6.

**Assessment Philosophy**

The courses are based on the following assumptions.

**Assessment:**
- is an integral part of the learning process of the curriculum;
- encourages you to develop a variety of skills and abilities and build on the strengths you already have;
- inclusive assessment supports you to demonstrate your ability to meet the learning outcomes.
- comprises formative assessment in order to provide you with feedback regarding your progress;
- will be intercalated through the semester in order that you receive feedback at the appropriate time before developing the next assignment. This is particularly important for the first semester of each year where you undergo transition to a higher academic level;
- provides constructive and detailed feedback to you to enable progression on the course;
- will promote the integration of theoretical perspectives to professional practice;
• will test the learning outcomes for each module;
• allows you to demonstrate an appropriate level of thinking;
• encourages you to demonstrate excellence;
• takes account of client/patient safety as a key professional body requirement for registration, in the design of the assessment profile;
• is relevant to all students in shared modules;
• enables you to become an effective and competent practitioner.

Formative assessment
Formative assessment is designed to guide you towards successful completion of summative assessment. Formative assessment will be intercalated through semesters in order that you receive feedback at the appropriate time before undertaking the next assignment.

Formative assessment feedback may be given in writing, verbally one-to-one or in a group, through the VLE or by your own self-assessment. The method of feedback will be determined by the assessment task but should help you to assess your own abilities, gain an understanding of your strengths and weaknesses and prepare you for the summative piece.

Summative assessment
Summative assessment may take the form of: written examination, oral presentations, clinical practice assessment, OSCEs or coursework. The type of assessment is designed as part of the validation of your course and has been approved by the University and Professional and Statutory body, the Health and Care Professions Council. Summative assessment is the task for which you will be given a mark, which will contribute towards your academic profile, and ultimately your award.

Examinations
All examination will be scheduled in the examination periods set out in the academic calendar.
Semester one – January - resit April
Semester two – June - resit July

You should be in attendance at least 10 minutes before the commencement of the examination. Rules for examination candidates will be published through MyLSBU.

Written examination will be invigilated by professional invigilators.

Clinical practice examinations / OSCE / presentations will be invigilated by the academic staff. These assessments may be video recorded for internal moderation and to ensure consistency of marking across student groups. Prior to the examination board the recordings will be made available to the external examiner for external verification.

You will find details of the assessment task, criteria against which you will be assessed and expected timeframe for feedback on your module Moodle site. Formal feedback will be available in writing in the timescale indicated in your module guide.

In preparation for summative coursework assignments you may wish to submit some draft material to the module leader for comment. The School policy, detailed below, was developed in response to HSC student comments about the inequity in amount of draft material viewed, and feedback provided, by academic staff prior to your submission of summative coursework.

Reading draft material - Policy
1. First submission – you may submit to the module leader or personal tutor or marker (as instructed by the module leader) either:
a. An outline of the broad structure of the intended assessment (no more than one page)
b. 500 words (maximum) from within the assessment (two sides of A4 in no less than 10pt font size).

2. Subsequent submissions – draft material will not be reviewed for second or third submissions – it is expected that the feedback from prior submission combined with a remedial tutorial should be sufficient.

3. You may not submit draft material within two weeks of the final submission date (or for DDS your extended date)

4. Staff will not give any indication of expected mark or outcome.

You are encouraged to make use of Communication Skills workshops provided by Student Services.

Assessment Methods and Levels
A variety of approaches will be used in order to balance the assessment methods and to promote different skills/abilities whilst reflecting the nature of the modules of learning. The main rationale for choosing the assessment method is to help you in the development of a wide range of professional knowledge and skills commensurate with your progress through the courses. Practice placement is assessed against specific practice learning outcomes.

The Frameworks for Higher Education Qualifications of UK Degree Awarding Bodies (2014) sets out five levels of awards: Certificate (4), Diploma (5) Honours (6), Masters (7) and Doctorate (8).

- At level 4 the emphasis in the assessments is to ensure that you have the appropriate foundation of factual knowledge and fundamental skills.
- At level 5 you will be expected in addition, to demonstrate that you have begun to develop the skills to undertake work that requires the ability to reflect constructively and critically upon the material presented.
- At level 6 you will be expected to demonstrate the ability to synthesise material from a number of areas and to take a critical and independent stance towards it.
- At level 7 you will be expected in addition, to demonstrate a mastery of complex knowledge and skills and demonstrate originality in tackling and solving problems.

The expectations for each level are set out below:

**Level 4** You should be able to demonstrate:
- appropriate foundational factual knowledge
- knowledge of the underlying concepts and principles associated with your area of study, and an ability to evaluate and interpret these within the context of that area of study
- an ability to present, evaluate and interpret qualitative and quantitative data, in order to develop lines of argument and make sound judgements in accordance with basic theories and concepts of your subject(s) of study

**Level 5** You should be able to demonstrate:
- that you have begun to develop the skills to undertake work that requires the ability to reflect constructively and critically upon the material presented
- knowledge and critical understanding of the principles of your area(s) of study, and of the way in which those principles have developed
- an ability to apply these concepts and principles to practice
- knowledge of the main methods of enquiry and ability to evaluate critically the appropriateness of different approaches to solving problems in the field of study
- an understanding of the limits of your knowledge, and how this influences analyses and interpretations based on that knowledge

**Level 6** You should be able to demonstrate:
- conceptual understanding that enables the student: - to devise and sustain arguments, and/or to solve problems, using ideas and techniques, some of which are at the
forefront of a discipline - to describe and comment upon particular aspects of current research, or equivalent advanced scholarship, in the discipline

- an ability to synthesise material from a number of areas and to take a critical and independent stance towards it
- an ability to deploy accurately established techniques of analysis and enquiry within a discipline
- conceptual understanding that enables you to devise and sustain arguments, and/or to solve problems
- an ability to describe and comment upon particular aspects of current research, or equivalent advanced scholarship, in the discipline
- an appreciation of the uncertainty, ambiguity and limits of knowledge
- the ability to manage their own learning, and to make use of scholarly reviews and primary sources (for example, refereed research articles and/or original materials appropriate to the discipline).

Level 7 You should be able to demonstrate:

- a systematic understanding of knowledge which is informed by innovations in professional practice
- originality in the application of knowledge, together with a practical understanding of how established techniques of research and enquiry are used to create and interpret knowledge in the discipline
- conceptual understanding that enables the student to evaluate critically current research and advanced scholarship in the discipline
- an ability to evaluate methodologies and develop critiques of them and, where appropriate, to propose new hypotheses.

Details of assessment schedules can be found in the profession specific sections (section C) of this document.

Regulations on Assessment and Progression

These regulations are specific to the courses and replace the Progression Regulations set out in the University’s Academic Regulations for Taught Courses. In other respects the University Regulations apply.

In accordance with the University’s regulations on assessment your achievement in each course module is assessed. Assessment will normally take place during the semester in which the module is delivered.

All modules will have to be passed in order for you to be eligible for professional registration with the Nursing and Midwifery Council.

If the assessment of a course module consists of more than one element of assessment, the final module mark is calculated as an aggregate of the marks for all of the elements, based on the weightings set out in the module Guide. If no weighting is stipulated, each element will carry equal weighting.

Where a module has both theoretical and practice components both elements will be assessed.

Pass Marks

Level 4, 5 and 6

The pass mark for course modules at level 4, 5 and 6 is 40%. Where there is more than one element of assessment you must normally achieve a minimum (threshold) mark of 35% in each element of assessment in order to pass the module.
There are some modules, in particular those where the elements of the assessment are theoretical and practical, where you must achieve a minimum mark of 40% in each element. Where elements are assessed on a pass or fail basis then the element must be passed in order to achieve a pass in the module.

**Level 7**
The pass mark for course modules at level 7 is 50%. Where there is more than one element of assessment you must normally achieve a minimum mark of 45% in each element of assessment in order to pass the module.

There are some modules, in particular those where the elements of the assessment are theoretical and practical, where you must achieve a minimum mark of 50% in each element. Where elements are assessed on a pass or fail basis then the element must be passed in order to achieve a pass in the module.

**First attempt at assessment**
The Module leader will ensure that the dates of coursework submission of coursework are published in Module Guides. The dates for examinations will be indicated as week beginning …….. The actual date for examinations will be published through the VLE.

**It is your responsibility to**
- Make yourself aware of these dates; and
- Attend examinations and submit work for assessment on the dates required.

You will be deemed to have made a first attempt at each assessment at the due date, **whether or not the attempt has been made**, unless a deferral has been agreed by the relevant Award and Progression Board.

**Coursework Submission**
You **MUST** submit coursework by the published deadline in accordance with the assessment briefing identified in the module guide.

Apart from Practice Portfolios **ALL** other coursework should be submitted electronically; the date of submission will be recorded by the system. In the case of physical submissions of Practice Assessment Documents to the School Help Desk, the date of submission will be that stamped on the physical coursework receipt.

The Module Guide will inform you of the format(s) that you are expected to use. It is your responsibility to ensure that you have back-up copies of any work submitted electronically. Failure of a computer, disk or printer will not be accepted by the Examination Board as a reason for non-submission or incomplete submission of an assessment.

**Late coursework submission** is not permitted in the School of Health & Social Care. As a registered professional you will be expected to meet deadlines, so part of your professional development will be for you to manage your time and commitments so that you can achieve this.

Please note the special instructions for students with DDS requirements. You will also need to identify that you are registered with DDS when you notify that you will be submitting your coursework late. Any other form of notification such as email is not acceptable.

**Extenuating Circumstances**
If you believe that your assessed work (coursework or examination) has been affected by circumstances outside your control, you may draw these circumstances to the attention of the Award and Progression Examination Board by submitting a claim for extenuating
circumstances in accordance with published procedures. Extenuating Circumstances Guidance is located on myLSBU

Claims for extenuating circumstances are likely to include:

- Serious personal illness which isn't a permanent medical condition
- The death or serious illness of a family member, or other person you had a close relationship with, before the date of the assessment
- Missing part of or all of an examination as a result of serious and unforeseeable disruption to public transport

If you claim on the grounds that you have family, work, financial or other general problems, you are unlikely to be successful. Delays in arriving at LSBU due to problems with private transport, such as congestion or breakdown, will also not be acceptable grounds for a claim.

If you have a permanent medical condition or disability, we provide support through our Disability and Dyslexia Support team. You may not claim extenuating circumstances on the grounds of a permanent condition unless that condition has flared up at the time of the assessment.

You may normally not claim extenuating circumstances in advance. The claim is made in relation to an assessment that you have taken.

Extenuating circumstances forms must be submitted NO LATER THAN 5 DAYS AFTER AN EXAMINATION OR THE SUBMISSION DATE OF AN ASSESSMENT. The form is to be accessed on-line

Examination Boards and Publication of Results
Examination Boards comprising External Examiners and members of the Academic staff make all decisions about the outcomes of student assessment. The University operates a two-tier examination board system comprising the Subject Area Board and Award and Progression Board. The Subject Area Board is responsible for agreeing the marks for each student in each module. The Award and Progression Board considers and decides the outcomes for each student at each level of study. External Examiners are appointed in accordance with the requirements of the NMC and the University regulations.

When the assessment has been marked, the module leader will publish provisional marks through Moodle, no later than 15 days after the assessment deadline.

Following the Subject Area examination board, and subject to external examiner scrutiny, the marks will be ratified (fixed) and feed into your academic profile. Once a year, following the Award and Progression Board you will receive confirmation of the results for the academic year through My.LSBU. At the end of your course you will receive a hard copy Transcript of your studies.

If you have undertaken assessment it is your responsibility to find out your results. If your results do not appear you MUST contact your Course Director.

Progression
Progression means that you may continue on an approved course of study, and may undertake work at a higher level than that previously undertaken.

A stage is a part of a course scheme following which an Award and Progression Board will make a decision regarding your progression or eligibility for an award. For a full-time pre-registration course a stage will normally consist of six standard modules (or equivalent).
All modules must be successfully completed before you will be allowed to progress to the next stage. Your progression to the next stage of the course occurs in September, at which point if you have been successful, you will pass into the new academic year.

In order to progress from one level to the next, you will be required to have achieved all practice learning outcomes including attendance in practice.

In the event of failing to satisfy the requirements of professional suitability in respect of your performance as a student, not otherwise covered in these regulations; you may be required to leave the course. Whilst in practice placement, you will be subject to the disciplinary procedures of the relevant Authority as well as the University.

**Provision for Students who have Failed Modules**

**Resit**
Resit means that you are permitted to redeem failure (retake an exam or resubmit coursework) at an assessment point before the beginning of the next academic year.

Dates by which resit module assessments must be completed are built into the course schedules and published in your Module Guide.

The Award and Progression Board shall decide, on the basis of your academic profile, whether you can progress to the next level of study.

If you have been deemed by the Award and Progression Examination Board to have passed a module after resit, you will be awarded an overall mark of no less than 40% (50% for level 7) for the module.

**Number of attempts at assessment**
You will normally not be permitted to have more than two attempts at assessment, including resits where granted.

**Compensated passes**
Compensated passes are not permitted for any pre-registration courses within nursing.

**Withdrawal from the Course**
If you are not given the opportunity to undertake repeat assessments, have exhausted the permitted number of attempts at assessment, and do not satisfy the Award and Progression Examination Board that there are valid and exceptional reasons for poor performance, you will be required to withdraw from the course. The Examination Board may recommend that an intermediate award within the regulations be conferred. You will receive a transcript detailing credits achieved.

**Provision for students who have failed practice assessments**
You will be given the opportunity to redeem an initial failure in a practice assessment within a time frame determined by the Award and Progression Examination Board. If you fail to meet the practice learning outcomes in the profession specific modules (including practice components in modules with both theoretical and practical components) on two separate occasions, you will normally be required by the Award and Progression Examination Board to withdraw from the course.

**Provision for students with extenuating circumstances affecting assessment**
If the Award and Progression Examination Board is satisfied that your absence from an assessment, failure to submit work at the correct time or poor performance in all or part of the assessment for a module or modules was due to valid and evidenced extenuating circumstances, the Award and Progression Examination Board may take one of the following actions:
**Deferral** means that you may be assessed as if for the first time in any or all of the affected assessments, at the next scheduled assessment point. If the affected assessments were referrals, you will be referred as if for the first time. The Award and Progression Examination Board will decide whether a student who is deferred must attend the modules for which a deferral has been given. Students who pass deferred assessments will be awarded the actual mark achieved, and may progress to the next stage of the course, or to the award for which they are candidates.

**Condonement**: Condoned passes are not permitted for any pre-registration courses within nursing.

**Assessment Marking and Publication of Results Process**

Following assessment, your work will be marked and **PROVISIONAL** results made available through the VLE within 15 working days, unless you have been notified of a particular reason why this cannot occur.

Subsequent to the release of provisional results, the assessment will be moderated internally by a member of the academic staff and externally by the appropriate external examiner. At this point marks may be raised or lowered. Following scrutiny of assignments (or a sample) by the external examiner, the module marks are reported to the Subject area examination board, at which point they are said to have been **RATIFIED** (fixed). These marks then are taken to the appropriate Award and Progression board, following which you will be informed of the final outcome through myLSBU.

The assessment for these courses has been scheduled to enable you to meet the learning outcomes of your modules of study, and predominantly occur towards the end of a semester, prior to an examination board. **Examination boards occur in February, July and September.**

Following the Award and Progression board the decision about your progress will also be available. Marks from the assessments will be available through your own personal page on My.LSBU.

It is your responsibility to access your results therefore you **MUST** check your results page after each examination board has met.

On graduation you will receive a hard copy transcript.

**UNDER NO CIRCUMSTANCES** will you be informed of your marks over the telephone.

The image below gives an example of what you might see in myLSBU (Undergraduate):

<table>
<thead>
<tr>
<th>AOS code</th>
<th>Module</th>
<th>Sess</th>
<th>C_W1</th>
<th>C_W2</th>
<th>C_W3</th>
<th>C_W4</th>
<th>C_W5</th>
<th>E_X1</th>
<th>E_X2</th>
<th>E_X3</th>
<th>E_X4</th>
<th>Agg</th>
<th>Rslt</th>
<th>Ex Circs</th>
</tr>
</thead>
<tbody>
<tr>
<td>***_4_001</td>
<td>Module 1</td>
<td>S1</td>
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</tr>
<tr>
<td>***_4_002</td>
<td>Module 2</td>
<td>S1</td>
<td></td>
<td></td>
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<td>***_4_003</td>
<td>Module 3</td>
<td>S1</td>
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<td>***_4_003</td>
<td>Module 3</td>
<td>R1</td>
<td></td>
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<td></td>
<td></td>
<td>40</td>
<td></td>
<td>R_P</td>
<td></td>
</tr>
</tbody>
</table>
### Code explanation

**AOS code**
- Module reference number

**Module**
- Module title

**Sess**
- Semester in which the module was delivered and assessed.

- **S1** – semester 1 (September – January)
- **R1** – semester 1 reassessment
- **S2** – semester 2 (February – May)
- **R2** – semester 2 reassessment
- **RS2** – August reassessment

**CW**
- In HSC there are normally one or two pieces of coursework. The module guide will inform you of the assessment style

**EX**
- In HSC there are normally no more than two examinations per module. The module guide will inform you of the assessment style.

**Agg**
- Your module assessment could comprise a piece of coursework and an exam, in which case, the overall module mark would be an aggregate of the two marks. **Agg** indicates the overall mark allocated to the module.

**Rslt**
- This indicates the status of your result.

- **P** – Pass. If your work is submitted after the deadline, without supported extenuation, the mark appearing in your profile may be capped at the pass mark.

- **RC** – Referred in coursework

- **RE** – Referred in examination

- **RP** – Passed after referral. The mark is capped at the pass mark

- **DE** – Deferred in exam – following supported extenuating circumstances claim

- **DP** – Passed after deferral. The mark is uncapped.

If you are unsure of what you have seen, please contact your Course Director, who will explain the outcome to you.

### Requirements for Awards

- **Cert HE**
  - In order to qualify for the award of Cert HE, you must have studied and passed all modules at stage 4 (120 credits).

- **Dip HE**
  - In order to qualify for the award of Dip HE, you must have studied and passed all modules at stages 4 and 5 (240 credits).

- **Degree with Honours**
  - In order to qualify for the award of an Honours degree, you must have studied and passed all modules at stages 4, 5 and 6 (360 credits).
**Honours Classification**
The University normally classifies all Bachelors’ degrees with Honours based on the following bands:

<table>
<thead>
<tr>
<th>Classification</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Class</td>
<td>70%+</td>
</tr>
<tr>
<td>2nd Class (Upper Division)</td>
<td>60 - 69%</td>
</tr>
<tr>
<td>2nd Class (Lower Division)</td>
<td>50 - 59%</td>
</tr>
<tr>
<td>3rd Class</td>
<td>40 - 49%</td>
</tr>
</tbody>
</table>

The classification is determined by a weighted average of rounded module marks at Levels 5 and 6. The weighted average is stipulated as all:

- Level 5 modules weighted at 20%,
- Level 6 modules weighted at 80%.

**PgDip**
In order to qualify for the award of a PgDip, you must have studied and passed all modules (120 credits).

**Masters**
In order to qualify for a Master’s Degree you must have passed all modules of the PgDip (120 credits) and the dissertation part of the MSc (a further 60 credits).

**Distinction for MSc/Pg. Diploma**
An award with distinction will require that a student achieve an average final mark of at least 70%.

In addition and common to all awards, you will be required to successfully meet the practice learning outcomes and/or hours stipulated (see PADs).

**Eligibility for Awards**
Students who successfully complete the prescribed course of study for professional registration will be eligible for award:

**Completion of the Course**
To be awarded the BSc (Hons) Children’s Nursing, a student studying on a full-time basis must have completed the academic and professional requirements of the named award within a period of registration of 6 years.

**Registration with Nursing and Midwifery Council (NMC)**
Following completion of the course, you must register your qualification with the NMC within 5 years.

The BSc (Hons), Pg. Diploma and MSc are pre-registration awards which confer eligibility to apply for registration with the NMC.

Students who do not complete successfully the prescribed course of study may be eligible for the following awards but **NOT** for professional registration:

<table>
<thead>
<tr>
<th>Award</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cert HE Health Studies</td>
<td>6 module passes at Level 4</td>
</tr>
<tr>
<td>Dip HE Health Studies</td>
<td>12 module passes including at least 6 at Level 4 and 6 at Level 5</td>
</tr>
<tr>
<td>BSc Health Studies</td>
<td>15 module passes including at least 6 at Level 4, 6 at Level 5 and at least 3 at Level 6</td>
</tr>
<tr>
<td>Pg. Cert Health Studies</td>
<td>3 module passes at level 7</td>
</tr>
</tbody>
</table>
Maximum Period of Registration
Academic and professional requirements of the named award must be completed within the following period of registration:

<table>
<thead>
<tr>
<th>Award</th>
<th>Duration</th>
<th>Maximum Registration Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>BSc(Hons)</td>
<td>3 year full time</td>
<td>6 years</td>
</tr>
<tr>
<td>MSc/PgDip</td>
<td>2 years full time</td>
<td>4 years</td>
</tr>
</tbody>
</table>

Student Complaints Procedure
You will have access to the University Student Complaints Procedure 2015

This procedure is intended to cover the situation where a student has a serious complaint relating to the conduct of a member of staff towards him or her. This normally cannot be resolved by informal and other formal processes or where there are reasons that make it inappropriate to invoke those other processes.

Types of complaints:
- Persistent failure to supervise a student in accordance with the requirements of the course.
- Persistent cancellation of scheduled classes
- Threatening behaviour
SECTION 8. PRACTICE LEARNING

Half of the course experience and course assessment is based in practice. Therefore practice placements are a fundamental component of the course and it is essential students make the most of the learning opportunities available. Your mentor within practice placements plays a vital role. Amongst the role of the Practice Mentor are to:

- act as a credible role model in the delivery of care
- safeguard the welfare of the student by ensuring that participation in care is to the student's individual level of competence
- provide support for the student in achieving broad and specific practice learning outcomes
- plan learning programmes with the student, specific to individual needs
- assist the student to develop skills, understanding and abilities through reflection on practice
- formally assess the student and provide constructive feedback
- provide support and assist the student in enlisting other support mechanisms

Practice Assessment Document

The Practice Assessment Document (PAD) is the one document that students carry between the university and practice learning areas on an ongoing basis for the duration of their programme of study. It provides practice and university staff with evidence of your previous and ongoing performance and is used to record all aspects of the learning and assessment in practice and the development of practice skills. This is in accordance with the Nursing and Midwifery Council's (NMC) Standards to support learning and assessment in practice (2008). This also follows the principles for sharing of personal information necessary to maintain continuity of assessment and to ensure safe and effective practice through the Ongoing Achievement Record.

Each practice learning opportunity is assessed and provides a cumulative record of your progress in practice. Each year, the relevant section of the PAD for that year will be distributed. For students to progress within the programme they must achieve all learning and practice outcomes.

At the end of the programme, your completed PAD will be submitted for sign off by your sign-off mentor.

The Practice Learning Guidelines set out the requirements for assessment of performance in practice ensuring all students are treated in an equitable and fair manner. A copy of this document can be found on the Practice Learning Moodle site.

The NMC (2008) requires that each of your Practice Learning mentors can see your previous practice achievements. It is your responsibility to keep this PAD safe and take it to each new practice area to show to your mentor.

NB. The PAD should be completed by hand in black pen by yourself and your Mentor. Any alterations in the document must be clearly signed and dated. The use of correcting fluid is not allowed.

Practice Assessment Documentation comprises of the following:

The Ongoing Achievement Record

- A record of practice learning opportunity locations, named mentors and the date of named mentors most recent up-date.
• Induction information to be carried out at the commencement of each practice learning opportunity.
• The assessment scoring scheme - outlines the scoring categories and related performance criteria. The Practice Learning Guidelines set out the criteria for the assessment of performance. A copy of this document can be found on the practice learning web pages.
• The level of achievement requirement for each year of the programme – this sets out the minimum level students are expected to perform at within each year of the programme.

Learning and Assessment records containing:
• Induction to practice
• Initial discussion and record of personal learning outcomes
• Mid-point assessment and discussion
• Final assessment of performance and discussion
• Additional information and action plans
• The Verification of Competency Form which enables sign-off mentors to confirm
• that students are competent in practice and eligible for entry to the NMC Professional Register.

The NMC Standards
Each practice learning opportunity is assessed through achievement of selected NMC Standards of competence.

Nursing Skills Record
The nursing skills record is a key component of the practice learning and assessment portfolio and is used by mentors to record and evidence the students’ achievement of the Essential Skills in practice. The Essential Skills Clusters are:
• Care, compassion and communication
• Organisational aspects of care
• Infection prevention and control
• Nutrition and fluid management
• Medicines management

Verification of Competency
At the end of the 3rd Year the verification of achievement of standards of competency form enables sign-off mentors to confirm students have, during the final Practice Learning Opportunity of the programme, achieved the required level of competency for eligibility for registration with the NMC.

Practice Hours
It is your responsibility to maintain a record of your practice experience hours in the programme. Please ensure that your practice mentor/manager signs this record on a daily and weekly basis. You must be able to provide evidence of your practice hours. A new practice record must be completed for each practice learning opportunity and must be kept up to date.

Post-Practice Discussion
Students are to make individual appointments to see their personal tutor to have their final interview in between the submission date and prior to their next clinical placement. This is your responsibility and failure to do so is considered a student conduct issue and could result in the cancellation of your next placement. You can make this appointment as far in advance as you wish.
You will be supported in the university and in practice settings to achieve the learning outcomes of the course. All Children’s Nursing students will have a period at the beginning of the course to allow familiarisation with their new environment and to be introduced to the course and the Trust sites of their Host Trusts.

**Mentor**
The mentor is registered nurse who, following successful completion of an NMC approved mentor preparation programme, is entered on a local register, and maintains their knowledge skills and competence, demonstrating this at a triennial review. The mentor has responsibility for monitoring and assessing students’ progress. They supervise, and support students to achieve their learning outcomes and competencies in the practice learning area and liaise with the link lecturer for the practice learning area, who offers them support and development.

**Sign-off Mentor**
A mentor who is a registered nurse who is already an experienced mentor and who has met additional NMC requirements, and is designated by the Trust/organisation 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. A sign-off mentor is assigned to every Children's Nursing student.
SECTION 9. CONTRIBUTING TO THE DEVELOPMENT OF YOUR COURSE

It is important that you provide feedback on learning and teaching through engagement in module, practice learning and course evaluations. Additionally, your student cohort representatives will be key members of Course Boards and contribute to a range of School committees.

The University Student Voice Committee provides a platform for promoting the student voice, and involving you in School matters. The School Student Affairs Committee brings together student representatives from all courses in the School.

Module evaluation
You will be required to complete an electronic module evaluation at the end of each module. This is a vital aspect of the on-going monitoring of courses giving you the opportunity to identify both positive and negative aspects of your experiences, enabling the academic team to refine learning opportunities.

The module evaluations are collated and included, along with external examiner comments and Module leader commentary, into an overall module review. Your feedback on a module and subsequent changes to the module are reported in the next module guide to ensure feedback is available. Additionally, module reviews, external examiner comments and student feedback and issues raised, are discussed at Course Boards and action is taken. Module review, external examiner reports and Pathway Board reports all inform the Annual Course Monitoring Report.

Placement evaluation
You will be asked to complete placement evaluations at the end of practice placement periods. This too, is vital in ensuring that practice placements are fulfilling their objectives and gives you the opportunity to identify positive and negative practice opportunities.

Course Board
A Course Board meeting, for each professional course will take place to enable staff, student representatives and practice representatives to discuss issues about the specific course. The boards occur once each semester (normally an afternoon in November and May). They are formal meetings with agendas and papers, and receive the Course Monitoring report on an annual basis.

You are required to nominate a representative (and an alternate) from within the cohort to represent you at these meetings. Your representative will need to take responsibility for communicating with the group in advance of the meetings to receive issues of note (these may be positive as well as negative), present the issues to the board and feed the responses back to the group. Training is provided by the university student union to assist student representative in this responsibility.

External Examiner Reports
External examiners reports identify good practice as well as issues for improvement. Course teams are required to provide a response and the report and response form part of Annual Course Monitoring.

Annual Course Monitoring
This is a formal process whereby all course developments and progression are reported to the University on an annual basis, enabling an overview of development and strategy. The Course monitoring report will be discussed at the first Course Board of the academic year and will be available to you through the VLE.
SECTION 10. INTERPROFESSIONAL LEARNING

All programmes within the School of Health and Social Care recognise the importance of developing interprofessional capabilities for future workforce and the fact that it is being introduced into community-based care (CAIPE, 2011). WHO (2010) promotes IPE collaboration to enhance mutual understanding between professions and to explore ways to improve service delivery, patient safety and the quality of care through combining expertise.

Across the SHSC there is a strong emphasis on the need to develop understanding of roles and competencies and how these impact team working, collaboration and service quality as well as the need to create opportunities for students to learn and work together to know the importance of working with, and as part of, the wider team. The overarching aim of IPE is to produce a health professional workforce capable of working collaboratively to improve patient care (Thistlethwaite et al., 2014). There are thus two inter-related potential outcomes: an interprofessional collaboration-ready workforce and enhanced patient care.

Being able to work collaboratively is an important attribute that employers seek in health and social care professionals. Interprofessional education (IPE) is seen as a way to support you to develop as collaborative workers to meet all the needs of individuals and provide a more effective, integrated and high quality service. Working collaboratively demands the use of effective communication and interpersonal skills that lead to the achievement of mutually agreed goals and shared decision-making.

The IPE modules aim to develop interprofessional and collaborative competencies. In total there are three 20 credit IPL modules that all undergraduate students are required to undertake.

**The modules are:**
- **Level 4 (20 credits)** - *Concepts of Interprofessional and Collaborative Practice*: delivered across all pre-registration SHSC courses.
- **Levels 5 & 7 - Interprofessional Learning in Practice**: The learning outcomes are achieved through professional practice placements.
- **Level 6 (20 credits)** - *Improving Quality, Change Management and Leadership*: delivered across all pre-registration HSC courses

**Curriculum Schedule and IPL**
All IPL modules have a clearly identified launch date and assessment schedule. The IPL modules will be delivered by key face-to-face sessions and blended learning and assessment reflects the learning style for each module.

Specifically, you will be required to undertake a range of interprofessional learning activities to achieve the stated formative learning outcomes. The summative assessment of IPL in Practice will be through achievement of profession specific competencies as required by PADs and through the completion of 2 reflective accounts.

However, it is **your responsibility** to ensure that you have addressed all formative learning outcomes in practice. These will inform and feed into campus based IPL study and activity at Level 6 (for undergraduate students only).

All University based modules use the same criteria for assessment grading and classification. Coursework submission and the format for written assignments (including referencing) will also be the same for all modules.
SECTION 11. MARKING
A variety of approaches to assessment are used in order to balance the assessment methods and to promote different skills/abilities whilst reflecting the nature of the modules of learning. The main rationale for choosing the assessment method is to help you in the development of a wide range of professional knowledge and skills commensurate with your progress through the programmes. Practice placement will be assessed against specific practice learning outcomes.

The Framework for Higher Education Qualifications (FHEQ) in England, Wales and Northern Ireland (2014) set out levels of awards: 4 to 7 all HEIs, irrespective of the subject area. London South Bank University, additionally, has identified what is expected at the various levels and specifically for Health & Social Care another dimension in relation to practice needs has been included. The FHEQ and LSBU sets of expectations are integrated below and their application to the marking process is detailed.

Marking Grid - Purpose:
- identifies common components across 4 levels
- assumption of common components which inform academic and professional performance
- value indicates the weighting attached to the criteria
- the marking bands reflect the honours classification
- transition across levels should reflect university expectations about academic performance within existing levels
- transparency of components for students
- marking grid affords standardised feedback across modules which seeks to enhance student’s academic and professional development
- marking grid demonstrates consistency/applicability of components across modules
- standardisation aims to minimise anxieties about inequality between markers on different modules
- acts as a resource tool which can be adapted in consultation with programme team and module learning outcomes
- adaptation means that specific criteria are selected which reflect subject specific assessment aims. For example, reflection may or may not be a required outcome of an assessment – if it is then the grid will include a criterion for reflection.

SHSC Marking Grid Framework
The SHSC generic framework for marking course work is identified below. Marking grids for each of the academic levels 4 – 7 will be built into the VLE. You will note that the major components appear at each level but the relative importance of the component in the work as a whole varies.

FHEQ Level 4
You should be able to demonstrate:
- appropriate foundational factual knowledge
- knowledge of the underlying concepts and principles associated with your area of study, and an ability to evaluate and interpret these within the context of that area of study
- an ability to present, evaluate and interpret qualitative and quantitative data, in order to develop lines of argument and make sound judgements in accordance with basic theories and concepts of their subject(s) of study

LSBU Level 4:
- Scope of students’ learning is within defined boundaries and uses specified range of standard techniques.
- Learners operate within defined guidelines with limited autonomy.
Marking grid Level 4
At level 4 the way in which you present or organise factual knowledge is more important than your ability to analyse it – the key criteria and the relative weighting of the total percentage available is as follows:

Expression, organisation and coherence - 30%.
Content and knowledge - 40%
Conclusion and application to practice - 30%

This means that in the first year of undergraduate study, what you know, how you present it and how you apply the information to practice are almost equally important.

FHEQ Level 5
You should be able to demonstrate:

- that you have begun to develop the skills to undertake work that requires the ability to reflect constructively and critically upon the material presented
- knowledge and critical understanding of the principles of your area(s) of study, and of the way in which those principles have developed
- an ability to apply these concepts and principles to practice
- knowledge of the main methods of enquiry and ability to evaluate critically the appropriateness of different approaches to solving problems in the field of study
- an understanding of the limits of their knowledge, and how this influences analyses and interpretations based on that knowledge

LSBU Level 5:

- The scope of students’ learning is simple and unpredictable, or complex and predictable, and demands application of a wide range of techniques.
- Learners are sufficiently organised in quality and quantity of discipline, knowledge and skills and academic opinion, evaluate their own work, report effectively and conduct straightforward tasks autonomously.
- They are ready to develop professional working relationships.

Marking grid Level 5
At level 5, factual knowledge is still important but you are developing your ability to analyse (break down) information and begin to synthesize (reconstruct in a different form). So the weighting of the grid reflect this shift of emphasis.

Expression, organisation and coherence - 20%.
Content - knowledge and use of literature - 40%
Analysis, synthesis, conclusion and application to practice - 40%

FHEQ Level 6
You should be able to demonstrate:

- a systematic and detailed understanding of your field of study which is informed by the professional practice developments
- an ability to synthesise material from a number of areas and to take a critical and independent stance towards it
- an ability to deploy accurately established techniques of analysis and enquiry within a discipline
- conceptual understanding that enables you to devise and sustain arguments, and/or to solve problems
• an ability to describe and comment upon particular aspects of current research, or equivalent advanced scholarship, in the discipline

**LSBU Level 6:**
• The scope of students’ learning is complex and unpredictable, demanding selection and application from a wide range of innovative or standard techniques using familiar and unfamiliar data.
• Learners have comprehensive and detailed knowledge of major discipline(s) with specialisation and depth in some areas. They are sufficiently organised to work with complex knowledge/skills towards a specified purpose and with limited guidance.
• They are reflective and have developed critical and evaluative skills. They engage effectively in professional behaviour.

<table>
<thead>
<tr>
<th>Marking grid Level 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>At level 6, factual knowledge remains important but your level of analysis, synthesis and application to practice become even more important and this is reflected in the relative weightings shown below.</td>
</tr>
<tr>
<td>Expression, organisation and coherence - 10%</td>
</tr>
<tr>
<td>Content - knowledge and use of literature - 40%</td>
</tr>
<tr>
<td>Analysis, synthesis, conclusion and application to practice - 50%</td>
</tr>
</tbody>
</table>

**FHEQ Level 7**
You should be able to demonstrate:
• a systematic understanding of knowledge which is informed by innovations in professional practice
• originality in the application of knowledge, together with a practical understanding of how established techniques of research and enquiry are used to create and interpret knowledge in the discipline
• conceptual understanding that enables the student to evaluate critically current research and advanced scholarship in the discipline
• an ability to evaluate methodologies and develop critiques of them and, where appropriate, to propose new hypotheses.

<table>
<thead>
<tr>
<th>Marking grid Level 7</th>
</tr>
</thead>
<tbody>
<tr>
<td>At level 7, critical thinking and application to practice are the most important aspects of your ability. This will require that you demonstrate your ability to critically evaluate a range of situations or tasks with reference to contemporary literature and that you are able to apply this to the clinical situation.</td>
</tr>
<tr>
<td>The marking grid for level 7 is constructed to reflect the change in emphasis in key criteria</td>
</tr>
<tr>
<td>Presentation, organisation and coherence - 10%</td>
</tr>
<tr>
<td>Content – comprehension and application to practice - 20%</td>
</tr>
<tr>
<td>Critical analysis of literature - 20%</td>
</tr>
<tr>
<td>Critical thinking, analysis, synthesis and evaluation - 50%</td>
</tr>
</tbody>
</table>

You will see that as you progress through the levels of study it becomes increasingly important to use literature, to develop skills of critical analysis and critical thinking, especially in relation to practice. As it is hoped that, ultimately, you might be thinking of writing for publication, presentation is a constant feature in all levels.
Other forms of assessment, for example presentations, will have additional criteria that will be identified within the individual module guide.

Students registered with DDS as having a specific learning difficulty (for example, dyslexia, dyspraxia, dyscalculia, ADHD) and who have support arrangements in place will have your work marked in accordance with the University’s DDS Marking Policy.

**Coursework Submission**

In the interests of equity and effective management, coursework **MUST** be submitted on time. It can then be marked and returned with the minimum delay. Coursework is an essential part of the assessment of each module so it is important that you do not fall behind. The procedures below are designed to prevent this happening.

You will be given the date for submission of each piece of coursework in the module guides. **Please note that the dead-line date is not the first day you may submit your work – it is the last day.** You may submit your work prior to the dead-line date if you wish.

Assessment instructions published within the module guide will clearly state a word count beyond which nothing will be marked. Maximum word count example - 3000 words +10%.

**What is included in the word count?**

Word count includes everything in the main body of the text (including headings, in-text citations, quotes, tables, lists, etc.).

List of references, appendices or footnotes are **NOT included in the word count.**

As students of the School of Health & Social Care you must:

- use the Harvard referencing system.
- keep appendices to a minimum and only contain reference materials illustrating and supporting arguments fully made in the main body of the work. Any other materials included in appendices, except where specifically requested in the coursework instructions, will not be marked.

**Penalty for exceeding the maximum word count**

There is no regulatory/mandatory penalty for exceeding the word limit but you should be aware that the marker will not mark any work after the maximum word limit has been reached. Therefore for a 3000 word assignment, staff will cease to mark any work in excess of 3300 words (word count + 10%).

**Electronic Submission**

1. You will be required to submit an electronic copy of the assignment to the assignment folder set up on Moodle which will automatically be checked for originality through TurnitinUK. Information and a demonstration of how to do this may be found on the VLE site.
2. TurnitinUK compares your work with electronic resources on the Web and highlights areas that are not original. This will allow you to check that your work is correctly referenced before its final submission. The following link may answer additional questions Understanding Turnitin originality reports.
3. The electronic copy should be submitted no later than 13:00 on the identified date.
4. Submission File Format:

   This will be identified within your module guide, for example PDF file only.
   Font - Times, size 11; Arial, size 11; Palatino, size 11; Geneva, size 11
   Predominant **letter style** to be Plain Text, using lower case with upper case for Initial Letters.
Practice Portfolios
1. These must be submitted to the School Office in K2 on the date of submission. Latest
time for submission is 16:00 hours:
2. You must fill in a front sheet (Appendix 8) and attach it to your work.
3. Receipt of the work will be recorded at the office. This will record receipt of the work
and will allow tracking of the work through the assessment process.
4. If you believe that your performance in an assessment, or your ability to submit
coursework on time, has been affected by external circumstances, such as illness, you
may submit an extenuating circumstances form, with the appropriate independent
evidence.

Referencing Guidelines
Using references accurately is important in the presentation of all written work.
The aim of referencing is to let the reader know from where you obtained the information and to
permit identification of areas of work included.
• start your referencing as soon as you start reading for your assignments.
• record all the details, in a format that is convenient to you, so that you do not need to
search for the information again.
• suggestions for recording references - loose leaf paper; record cards; on computer.
Whatever system you choose it must be one which will allow easy checking or addition to the
material.
• if you read something useful try to make a note of the page number on which it occurs.
By doing this consistently you get into the habit and your final referencing will be easier.

Do NOT copy a block of text from a publication and simply add a reference. This is
unacceptable practice and constitutes plagiarism

Please refer to the help sheets published by the Library. These may be found on the LSBU
web site at https://my.lsbu.ac.uk/page/referencing-your-work

When you submit the assignment you are agreeing to the following statement:

“By submitting your assignment electronically via Moodle you certify that: The work is your own
except where indicated: All sources are identified and quotations are marked; that the work
follows the faculty code on confidentiality, and does not contain identifiable information,
including:
• patients’ name, address, postcode, date of birth;
• pictures, photographs, videos, audio or other images of patients;
• NHS number or local patient identifiable codes;
• anything else that may be used to identify a patient directly or indirectly”

Academic Misconduct
Academic misconduct means any attempt by a student to gain improper advantage in any
assessment by infringement of rules for examination candidates or through deception or
fraudulent means, or any attempt to assist another student to gain improper advantage. A misdemeanour is where the assessment shows evidence of academic misconduct but the work as a whole is substantially the student’s own work and the marker is able to assess the merit of the assessment and award a mark. A misdemeanour would normally be a first allegation of academic misconduct.

**Academic Misconduct and process** sets out the University’s procedures for dealing with allegations of any type of academic misconduct for example suspected case of cheating, plagiarism or collusion.

**Confidentiality Policy**
This policy will apply to all academic work submitted by you as part of your course. Exceptions do exist and will vary according to the nature of the assignment.

This policy should be read in conjunction with the Department of Health Confidentiality NHS Code of Practice; November 2003 and Professional Codes of Conduct or Codes of Practice; such as the Nursing and Midwifery Council and the Health and Care Professions Council. This policy is applicable to all courses within the School of Health and Social Care portfolio. For the purpose of this document the term ‘patient’ is used to denote anyone who is in receipt of health and social care provision, for example client, service user, customer and carers.

**Statement on Confidentiality**
Ensuring confidentiality is not just about good practice, it is a right owed to all individuals. ‘Observing the principle of confidentiality means keeping information given by or about an individual in the course of a professional relationship secure and secret from others. This confidentiality is seen as central to the maintenance of trust between professional and service-user’. A key principle associated with confidentiality is that it affects everybody who works in health and social care and all levels of service users.

1. **Patients/clients**
The Department of Health Code of Practice (2003:7) states that ‘Patients entrust us with, or allow us to gather, sensitive information relating to their health and other matters as part of their seeking treatment. They do so in confidence and they have the legitimate expectation that staff will respect their privacy and act appropriately. In some circumstances patients may lack the competence to extend this trust, or may be unconscious, but this does not diminish the duty of confidence. It is essential, if the legal requirements are to be met and the trust of patients is to be retained, that the NHS provides, and is seen to provide, a confidential service’.

In keeping with the above principles, it is **required** that any written, or other such work such as photographs, videos, submitted by you as part of the requirements of a unit of study protect patient/client identity. This includes work submitted for assessment, seminar, and poster presentations. The Code of Practice states that key identifiable information includes:

- patient’s name, address, full post code, date of birth;
- pictures, photographs, videos, audio-tapes or other images of patients;
- NHS number and local patient identifiable codes;
- Anything else that may be used to identify a patient directly or indirectly. For example, rare diseases, drug treatments or statistical analyses which have very small numbers within a small population may allow individuals to be identified.

‘One consequence of this is that information that can identify individual patients, must not be used or disclosed for purposes other than healthcare without the individual’s explicit consent, some other legal basis, or where there is a robust public interest or legal justification to do so. In contrast, anonymised information is not confidential and may be used with relatively few constraints’. (DH 2003:7)
Anonymised information:
This is information which does not identify an individual directly, and which cannot reasonably be used to determine identity. Anonymisation requires the removal of name, address, full post code and any other detail or combination of details that might support identification. (DoH 2003:3)

Practical Hint:
When allocating an anonymous name to a patient letters unrelated to the patient’s first, middle or surname etc should be used rather than specific names. For example patient A, or Mr A, patient B or Mrs B.

Pseudonymised information:
This is like anonymised information in that in the possession of the holder it cannot reasonably be used by the holder to identify an individual. However it differs in that the original provider of the information may retain a means of identifying individuals. This will often be achieved by attaching codes or other unique references to information so that the data will only be identifiable to those who have access to the key or index. Pseudonymisation allows information about the same individual to be linked in a way that true anonymisation does not. (DoH 2003:3).

While this is acceptable in the clinical or research context in academic work no identifier should be used that would allow disclosure of the individual’s identity.

Exceptional assessment requirements:
In exceptional circumstances assessments may require, as part of external accreditation, written or recorded information provided by patients. The principle of informed consent should be adhered to in such circumstances and written consent obtained. Every effort should be made to anonymise the work and to this end it is suggested that the consent form is held separate to the submitted student work, and a statement confirming that consent has been obtained from the patient provided by the course leader.

Where an assessment requires the inclusion of written or recorded information from patients, the validation document and subsequent course documentation must state the reasons why such information must be included in the assessment process and provide a clear statement on how confidentiality will be maintained.

Penalties:
Students who breach confidentiality by clearly identifying patients/clients will be automatically awarded a mark of 0%.

Please note that in the case of modules with more than one element the deduction of marks will only apply to the element where the breach of confidentiality has taken place. For example a module with a presentation and coursework, penalty or breach of confidentiality in the coursework would only apply to coursework.

2. Staff
The principles of confidentiality set out in section 1 will also apply to any member of staff working within the health and social care sector. These may be individuals who have had direct contact with the student and/or are identified on documentation (written and visual) which may be accessed by the student for discussion as required by the assessment guidelines. These principles also apply to staff, both academic and administrative, working in further and higher education establishments. In all cases the identity of staff members identified above must be kept secret apart from the exceptions set out in section 4.1.
Penalties:
**Students who breach confidentiality by clearly identifying members of staff not covered by the exceptions listed in section 4 will have 10 marks deducted from the mark awarded.**

Please note that in the case of modules with more than one element the deduction of marks will only apply to the element where the breach of confidentiality has taken place. For example a module with a presentation and coursework, penalty or breach of confidentiality in the coursework would only apply to coursework.

3. Organisations
The use of the term ‘organisations’ within this policy includes the name of the organisation, and the use of organisational documentation or stationery from which the name of the organisation may be obtained, such as headed note paper, forms etc.

The direct naming of an organisation such as an NHS Trust or Primary Care Trust without specific permission will be deemed a breach of confidentiality apart from the exceptions set out in section 4.2.

Any organisational documentation included with assessments must clearly be available within the public domain. This means that material is readily accessible to the general public via the internet, or is publicly available within the student’s workplace, for example patient information leaflets. Any such documentation included within the student’s work, either as an appendix or citation must not be directly referenced to any confidential information that the student may have free or privileged access to.

The inclusion of any organisational material considered to be located within the public domain must be fully referenced within the students work.

Any organisational material available via an organisation’s internal intranet which is not automatically available within the ‘public domain’ and the inclusion of such material without prior permission from the organisation in question will be deemed as a breach of confidentiality

Penalties:
**Students who breach organisational confidentiality not covered by the exceptions listed in section 4 will have 10 marks deducted from the mark awarded.**

Please note that in the case of modules with more than one element the deduction of marks will only apply to the element where the breach of confidentiality has taken place. For example a module with a presentation and coursework, penalty or breach of confidentiality in the coursework would only apply to coursework.

4. Exceptions
a. The exception to section 2 (Staff) will apply where the completed document is integral to the assessment process required by the university to meet both academic and professional requirements. These may include written professional testimonies or objectives/competencies signed off by a mentor, facilitator, practice educator, preceptor etc.

b. The exception to section 3 (Organisations) will apply where the completed document is integral to the assessment process required by the university to meet both academic and professional requirements. This applies specifically to assessed work which requires the submission of a portfolio or work-based proposals and reports. Portfolios and work-based proposals and reports will require students to provide verification and testimonial statements related to the work submitted validating the work as that of the student. Such statements’ must be presented on headed paper of the organisation concerned.
c. Students should always endeavour to apply the principles of confidentiality to academic work whenever possible and should consult with module leaders if they need further clarification.

When you submit the assignment you are agreeing to the following statement:

"By submitting your assignment electronically via Moodle you certify that: The work is your own except where indicated; All sources are identified and quotations are marked; that the work follows the faculty code on confidentiality, and does not contain identifiable information, including:

- patients’ name, address, postcode, date of birth;
- pictures, photographs, videos, audio or other images of patients;
- NHS number or local patient identifiable codes;
- anything else that may be used to identify a patient directly or indirectly"
### 7.1 Children's Nursing Assessment Schedule
The Assessment Schedule provides you with an overview of the assessments you will be required to submit for first year of your course

<table>
<thead>
<tr>
<th>Field/ Generic</th>
<th>Year 1</th>
<th>Module Code</th>
<th>Submission Date</th>
<th>Results Available on Moodle</th>
<th>Exam Board</th>
<th>Resit/ Resubmit</th>
<th>Results Available on Moodle</th>
<th>3rd Attempt (Exceptions)</th>
<th>Exam Board</th>
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<td>SAB 29.06.17</td>
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<td>06.02.17</td>
<td>SAB March 2017</td>
<td>Exam in week of 10.04.17</td>
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<td>Week of 17.07.17</td>
<td>07.08.17</td>
<td>21.08.17</td>
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SECTION 12. APPENDICES

Appendix 1: Department of Children’s Nursing teaching team contact details

Appendix 2: Competencies for entry to the register (Children’s Nursing)
Appendix 1: Department of Children’s Nursing teaching team contact details

The contact details of the Children’s Nursing Field Teaching Team are provided:

<table>
<thead>
<tr>
<th>Academic Staff</th>
<th>Room</th>
<th>Email</th>
<th>Contact Number</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
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Appendix 2: Competencies for entry to the register (Children's Nursing)

Professional Values
All nurses must act first and foremost to care for and safeguard the public. They must practise autonomously and be responsible and accountable for safe, compassionate, person-centred, evidence-based nursing that respects and maintains dignity and human rights. They must show professionalism and integrity and work within recognised professional, ethical and legal frameworks. They must work in partnership with other health and social care professionals and agencies, service users, their carers and families in all settings, including the community, ensuring that decisions about care are shared.

Professional values that all nurses will demonstrate
All nurses must:
- Practise with confidence according to The Code: Professional standards of practice and behaviour for nurses and midwives (NMC, 2015), and within other recognised ethical and legal frameworks. They must be able to recognise and address ethical challenges relating to people's choices and decision-making about their care, and act within the law to help them and their families and carers find acceptable solutions.
- Practise in a holistic, non-judgmental, caring and sensitive manner that avoids assumptions, supports social inclusion; recognises and respects individual choice; and acknowledges diversity. Where necessary, they must challenge inequality, discrimination and exclusion from access to care.
- Support and promote the health, wellbeing, rights and dignity of people, groups, communities and populations. These include people whose lives are affected by ill health, disability, inability to engage, ageing or death. Nurses must act on their understanding of how these conditions influence public health.
- Work in partnership with service users, carers, groups, communities and organisations. They must manage risk, and promote health and wellbeing while aiming to empower choices that promote self-care and safety.
- Fully understand the nurse's various roles, responsibilities and functions, and adapt their practice to meet the changing needs of people, groups, communities and populations.
- Understand the roles and responsibilities of other health and social care professionals, and seek to work with them collaboratively for the benefit of all who need care.
- Be responsible and accountable for keeping their knowledge and skills up to date through continuing professional development. They must aim to improve their performance and enhance the safety and quality of care through evaluation, supervision and appraisal.
- Practise independently, recognising the limits of their competence and knowledge. They must reflect on these limits and seek advice from, or refer to, other professionals where necessary.
- Appreciate the value of evidence in practice, be able to understand and appraise research, apply relevant theory and research findings to their work, and identify areas for further investigation.

Leadership, management and team working

Leadership, management and team working competencies that all nurses will demonstrate
All nurses must be professionally accountable and use clinical governance processes to maintain and improve nursing practice and standards of healthcare. They must be able to respond autonomously and confidently to planned and uncertain situations, managing themselves and others effectively. They must create and maximise opportunities to improve
services. They must also demonstrate the potential to develop further management and leadership skills during their period of preceptorship and beyond.

All nurses must:

- Act as change agents and provide leadership through quality improvement and service development to enhance people’s wellbeing and experiences of healthcare.
- Systematically evaluate care and ensure that they and others use the findings to help improve people’s experience and care outcomes and too shape future services.
- Be able to identify priorities and manage time and resources effectively to ensure the quality of care is maintained or enhanced.
- Be self-aware and recognise how their own values, principles and assumptions may affect their practice. They must maintain their own personal and professional development, learning from experience, through supervision, feedback, reflection and evaluation.
- Facilitate nursing students and others to develop their competence, using a range of professional and personal development skills.
- Work independently as well as in teams. They must be able to take the lead in coordinating, delegating and supervising care safely, managing risk and remaining accountable for the care given.
- Work effectively across professional and agency boundaries, actively involving and respecting others’ contributions to integrated person-centred care. They must know when and how to communicate with and refer to other professionals and agencies in order to respect the choices of service users and others, promoting shared decision
- Making, to deliver positive outcomes and to coordinate smooth, effective transition within and between services and agencies.

**Nursing Practice and Decision Making**

All nurses must practise autonomously, compassionately, skilfully and safely, and must maintain dignity and promote health and wellbeing. They must assess and meet the full range of essential physical and mental health needs of people of all ages who come into their care. Where necessary they must be able to provide safe and effective immediate care to all people prior to accessing or referring to specialist services irrespective of their field of practice. All nurses must also meet more complex and coexisting needs for people in their own nursing field of practice, in any setting including hospital, community and at home. All practice should be informed by the best available evidence and comply with local and national guidelines. Decision-making must be shared with service users, carers, families and informed by critical analysis of a full range of possible interventions, including the use of up-to-date technology. All nurses must also understand how behaviour, culture, socioeconomic and other factors, in the care environment and its location, can affect health, illness, health outcomes and public health priorities and take this into account in planning and delivering care.

**Nursing practice and decision making competencies that all nurses will demonstrate**

All nurses must:

- Use up-to-date knowledge and evidence to assess, plan, deliver and evaluate care, communicate findings, influence change and promote health and best practice. They must make person-centred, evidence-based judgments and decisions, in partnership with others involved in the care process, to ensure high quality care. They must be able to recognise when the complexity of clinical decisions requires specialist knowledge and expertise, and consult or refer accordingly.
- Possess a broad knowledge of the structure and functions of the human body, and other relevant knowledge from the life, behavioural and social sciences as applied to health, ill health, disability, ageing and death. They must have an in-depth knowledge of common physical and mental health problems and treatments in their own field of practice, including co-morbidity and physiological and psychological vulnerability.
• Carry out comprehensive, systematic nursing assessments that take account of relevant physical, social, cultural, psychological, spiritual, genetic and environmental factors, in partnership with service users and others through interaction, observation and measurement.

• Ascertain and respond to the physical, social and psychological needs of people, groups and communities. They must then plan, deliver and evaluate safe, competent, person-centred care in partnership with them, paying special attention to changing health needs during different life stages, including progressive illness and death, loss and bereavement.

• Understand public health principles, priorities and practice in order to recognise and respond to the major causes and social determinants of health, illness and health inequalities. They must use a range of information and data to assess the needs of people, groups, communities and populations, and work to improve health, wellbeing and experiences of healthcare; secure equal access to health screening, health promotion and healthcare; and promote social inclusion.

• Practise safely by being aware of the correct use, limitations and hazards of common interventions, including nursing activities, treatments, and the use of medical devices and equipment. The nurse must be able to evaluate their use, report any concerns promptly through appropriate channels and modify care where necessary to maintain safety. They must contribute to the collection of local and national data and formulation of policy on risks, hazards and adverse outcomes.

• Be able to recognise and interpret signs of normal and deteriorating mental and physical health and respond promptly to maintain or improve the health and comfort of the service user, acting to keep them and others safe.

• Provide educational support, facilitation skills and therapeutic nursing interventions to optimise health and wellbeing. They must promote self-care and management whenever possible, helping people to make choices about their healthcare needs, involving families and carers where appropriate to maximise their ability to care for themselves.

• Be able to recognise when a person is at risk and in need of extra support and protection and take reasonable steps to protect them from abuse.

• Evaluate their care to improve clinical decision-making, quality and outcomes, using a range of methods, amending the plan of care, where necessary, and communicating changes to others.

Communication and Interpersonal Skills
All nurses must use excellent communication and interpersonal skills. Their communications must always be safe, effective, compassionate and respectful. They must communicate effectively using a wide range of strategies and interventions including the effective use of communication technologies. Where people have a disability, nurses must be able to work with service users and others to obtain the information needed to make reasonable adjustments that promote optimum health and enable equal access to services.

Communication and interpersonal skills competencies that all nurses will demonstrate
All nurses must:
• Build partnerships and therapeutic relationships through safe, effective and non-discriminatory communication. They must take account of individual differences, capabilities and needs.

• Use a range of communication skills and technologies to support person-centred care and enhance quality and safety. They must ensure people receive all the information they need in a language and manner that allows them to make informed choices and share decision making. They must recognise when language interpretation or other communication support is needed and know how to obtain it.
• Use the full range of communication methods, including verbal, non-verbal and written, to acquire, interpret and record their knowledge and understanding of people’s needs. They must be aware of their own values and beliefs and the impact this may have on their communication with others. They must take account of the many different ways in which people communicate and how these may be influenced by ill health, disability and other factors, and be able to recognise and respond effectively when a person finds it hard to communicate.

• Recognise when people are anxious or in distress and respond effectively, using therapeutic principles, to promote their wellbeing, manage personal safety and resolve conflict. They must use effective communication strategies and negotiation techniques to achieve best outcomes, respecting the dignity and human rights of all concerned. They must know when to consult a third party and how to make referrals for advocacy, mediation or arbitration.

• Use therapeutic principles to engage, maintain and, where appropriate, disengage from professional caring relationships, and must always respect professional boundaries.

• Take every opportunity to encourage health-promoting behaviour through education, role modelling and effective communication.

• Maintain accurate, clear and complete records, including the use of electronic formats, using appropriate and plain language.

• Respect individual rights to confidentiality and keep information secure and confidential in accordance with the law and relevant ethical and regulatory frameworks taking account of local protocols. They must also actively share personal information with others when the interests of safety and protection override the need for confidentiality.

Standards for competence that apply to specific fields of nursing: Children’s Nursing

Professional values competencies that children’s nurses will demonstrate
Children’s nurses must understand their role as an advocate for children, young people and their families, and work in partnership with them. They must deliver child and family-centred care; empower children and young people to express their views and preferences; and maintain and recognise their rights and best interests.

Children’s nurses must also:
• understand the laws relating to child and parental consent, including giving and refusing consent, withdrawal of treatment and legal capacity.
• recognise that all children and young people have the right to be safe, enjoy life and reach their potential. They must practise in a way that recognises respects and responds to the individuality of every child and young person.
• act as advocates for the right of all children and young people to lead full and independent lives.
• work in partnership with children, young people and their families to negotiate, plan and deliver child and family-centred care, education and support. They must recognise the parent’s or carer’s primary role in achieving and maintaining the child’s or young person’s health and wellbeing, and offer advice and support on parenting in health and illness.

Communication and interpersonal skills competencies that children’s nurses will demonstrate
Children’s nurses take account of each child and young person’s individuality, including their stage of development, ability to understand, culture, learning or communication difficulties and health status. They will be able to communicate effectively with them and parents and carers.
Children's nurses must also:

- work with the child, young person and others to ensure that they are actively involved in decision-making, in order to maintain their independence and take account of their ongoing intellectual, physical and emotional needs.
- understand all aspects of development from infancy to young adulthood, and identify each child or young person’s developmental stage, in order to communicate effectively with them. They must use play, distraction and communication tools appropriate to the child’s or young person’s stage of development, including for those with sensory or cognitive impairment.
- ensure that, where possible, children and young people understand their healthcare needs and can make or contribute to informed choices about all aspects of their care.

Nursing practice and decision-making competencies that children’s nurses will demonstrate

Children's nurses are able to care safely and effectively for children and young people in all settings, and safeguard them. Children's nurses will be able to deliver care to meet essential and complex physical and mental health needs informed by deep understanding of biological, psychological and social factors throughout infancy, childhood and adolescence.

Children's nurses must also:

- be able to recognise and respond to the essential needs of all people who come into their care including babies, pregnant and postnatal women, adults, people with mental health problems, people with physical disabilities, people with learning disabilities, and people with long term problems such as cognitive impairment.
- use recognised, evidence-based, child-centred frameworks to assess, plan, implement, evaluate and record care, and to underpin clinical judgments and decision-making. Care planning and delivery must be informed by knowledge of pharmacology, anatomy and physiology, pathology, psychology and sociology, from infancy to young adulthood.
- carry out comprehensive nursing assessments of children and young people, recognising the particular vulnerability of infants and young children to rapid physiological deterioration.
- include health promotion, and illness and injury prevention, in their nursing practice. They must promote early intervention to address the links between early life adversity and adult ill health, and the risks to the current and future physical, mental, emotional and sexual health of children and young people.
- have numeracy skills for medicines management, assessment, measuring, monitoring and recording which recognise the particular vulnerability of infants and young children in relation accurate medicines calculation.
- use negotiation skills to ensure the best interests of children and young people in all decisions, including the continuation or withdrawal of care. Negotiation must include the child or young person, their family and members of the multidisciplinary and interagency team where appropriate.
- understand their central role in preventing maltreatment, and safeguarding children and young people. They must work closely with relevant agencies and professionals, and know when and how to identify and refer those at risk or experiencing harm.

Leadership, management and team competencies that children’s nurses will demonstrate

Children’s nurses must listen and respond to the wishes of children and young people. They must influence the delivery of health and social care services to optimise the care of children and young people. They must work closely with other agencies and services to ensure seamless and well-supported transition to adult services.
Children's nurses must also:

- understand health and social care policies relating to the health and wellbeing of children and young people. They must, where possible, empower and enable children, young people, parents and carers to influence the quality of care and develop future policies and strategies.
- ensure that, wherever possible, care is delivered in the child or young person’s home, or in another environment that suits their age, needs and preferences.
- use effective clinical decision-making skills when managing complex and unpredictable situations, especially where the views of children or young people and their parents and carers differ. They must recognise when to seek extra help or advice to manage the situation safely.
- work effectively with young people who have continuing health needs, their families, the multidisciplinary team and other agencies to manage smooth and effective transition from children’s services to adult services, taking account of individual needs and preferences.

**Essential skills cluster**

Essential skills clusters support the achievement of the standards for competence. There are five essential skills clusters:

- care, compassion and communication
- organisational aspects of care
- infection prevention and control
- nutrition and fluid management
- medicines management

Each essential skill cluster provides further detail to assist the development of the nursing degree programme and further details can be found at essential skills clusters.