










**North West Placement Development Network**  
**Think Placements, Think Network**

## NWPDN Toolkit

-  **NAME OF ORGANISATION :**
-  **NAME OF PLACEMENT AREA:**
-  **ADDRESS:**
-  **POSTCODE:**
-  **CONTACT INFORMATION (to include e-mail and telephone number):**
-  **LINK LECTURER:**
-  **PRACTICE EDUCATION FACILITATOR:**

**PLACEMENT DEVELOPMENT MANAGER:**

**NWPDN PLACEMENT DATABASE ID NUMBER:**

**PLSS No. (If applicable):**



## **INTRODUCTION TO PLACEMENT DEVELOPMENT TOOLKIT**

This Placement Development Toolkit and related Placement Information Pack have been developed by the North West Placement Development Network (NWPDN). The Toolkit will be utilised as a holistic tool to assess the learning opportunities and experiences that can be achieved within your service for a range of health and social care learners. Information obtained utilising this assessment tool will ensure the NWPDN are assessing and developing quality placements for Health Education North West (HENW) supported learners across the North West.








A copy of this completed Toolkit will be given/sent to you for your records. You may wish to share the Toolkit with your Practice Education Facilitator and/or the Higher Education Institution but please note, this will not be circulated by the NWPDN.



<b>Date of referral into the NWPDN:</b>			
<b>Date of 1<sup>ST</sup> Visit/Contact:</b>			
<b>Date of 2<sup>nd</sup> Visit/Contact:</b>			
<b>Additional visits if applicable:</b>			
<b>Current capacity:</b>		<b>Capacity agreed:</b>	
<b>Date placement opened:</b>		<b>Date placement reviewed:</b>	
<b>Unable to proceed at this time due to:</b>	<b>Reason:</b>		
<b>Review Date:</b>			
<b>COMMUNICATION RECORD</b>			
<b>Date</b>	<b>Record of Meeting / Action Points</b>	<b>PDM/PDL initials</b>	



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## PLACEMENT DEVELOPMENT TOOL TO ASSESS THE INTER PROFESSIONAL LEARNING OPPORTUNITIES WITHIN A HEALTH CARE ENVIRONMENT

### Patient Journey

Consider the journey a patient would follow within your practice placement area. The patient journey will be from when the patient starts to access your service until completion. The history and future care/support needs of the patient will need to be taken into account.

Use the patient journey through the health care system as a way of looking at the different services involved. Consider how health care delivery will change in the future and what key initiatives / changes are occurring at present on a national and local level and how these will impact on the individual services and the future health care delivery.

<b>Points to consider as a placement provider:-</b>	
<b>1. Use a holistic approach when analysing the patient journey</b>	<ul style="list-style-type: none"><li>• What services are involved</li><li>• What professionals are involved (multi professional) or work within those services.</li><li>• How do the members of the multi professional team work as one</li><li>• How effective is this for quality of patient care and experience.</li><li>• What key drivers are behind this inter professional approach to working and learning together.</li><li>• Consider services both in and outside of the NHS (Independent and Voluntary sector)</li></ul>
<b>2. What governance initiatives are in place within your service</b>	<ul style="list-style-type: none"><li>• Evidence Based Practice</li><li>• Clinical Governance (Measuring the quality)</li><li>• What local policy and procedures need to be followed</li><li>• Patient experience</li></ul>
<b>3. National and local initiatives / changes that impact on the future of the services that you have identified in the patient journey.</b>	<ul style="list-style-type: none"><li>• DOH Guidance and recommendations</li><li>• CQC and other regulators</li><li>• Guidance and recommendations from professional body. (New Standards and recent publications)</li><li>• NHS Reforms</li><li>• NICE Guidelines</li></ul>
<b>This tool is to be utilised in partnership with the organisation to ensure all relevant information is explored and captured</b>	



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## Practice Placement Profile

<b>Placement Description</b>	
<b>Patient Group</b>	
<b>Care Provision Offered</b>	
<b>Working Patterns (to include agile working if applicable)</b>	
<b>Accessibility</b>	
<b>Clinical and non clinical skills and activities</b>	
<b>Partnerships: Who the organisation works with to support service delivery</b>	



Opportunities applicable to all health and social care learners	Descriptor
Communication	
Professional relationships (i.e. Multi Disciplinary Team)	
Knowledge and skills that can be achieved	
Raising concerns and safeguarding	
Establish and maintain a safe practice environment	
Assure quality of practice	



<b>Public Health:-</b> <ul style="list-style-type: none"><li>- understanding public health</li><li>- wider determinants of health</li><li>- health improvement</li><li>- health protection</li><li>- healthcare public health</li><li>- health wellbeing and independence</li><li>- lifecourse</li></ul>	
Leadership skills and knowledge within your placement area and provide examples	
<b>Additional Information</b>	
<b>Learner information i.e. what type of learner would be able to access this placement area?</b>	

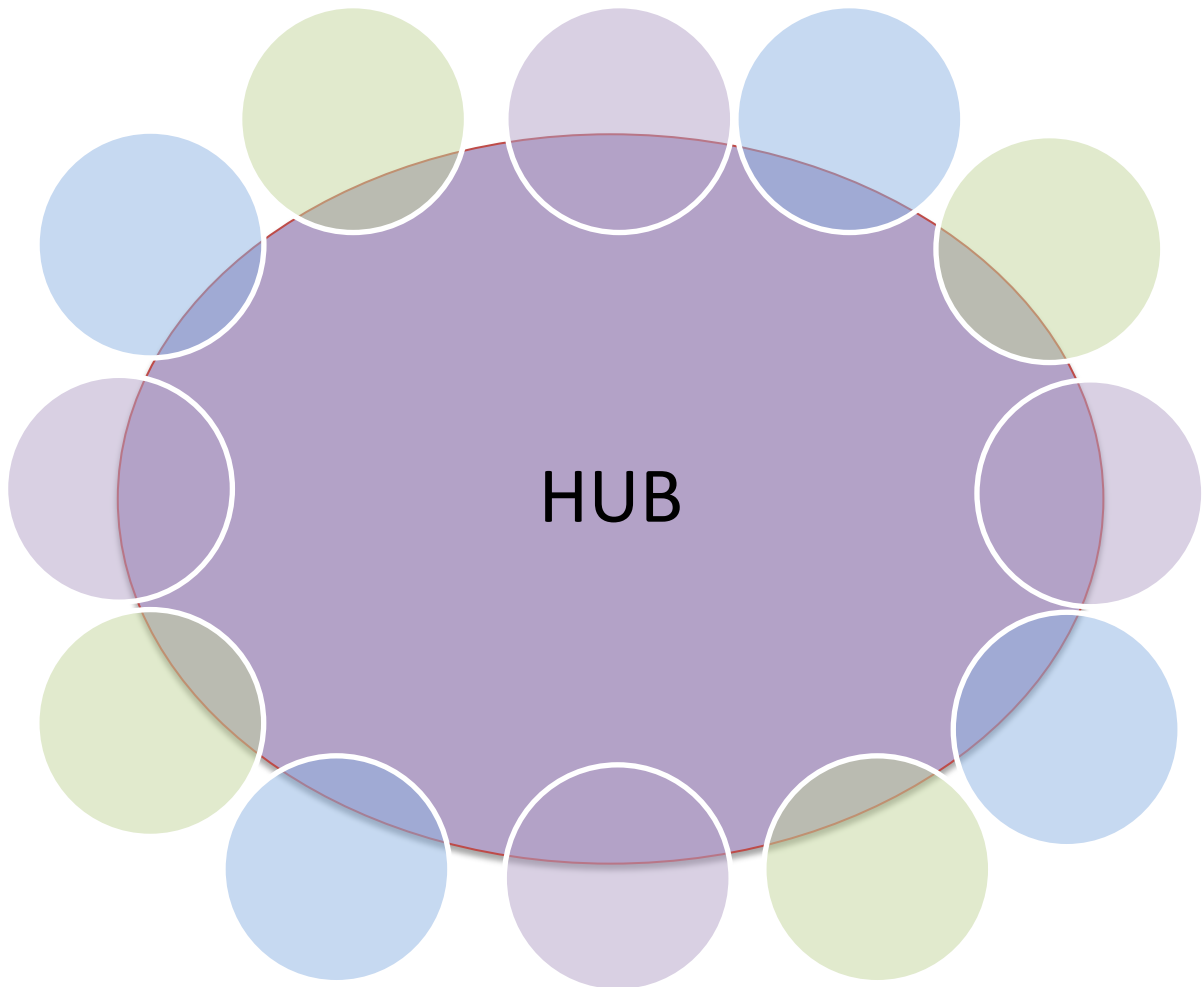
These are guidelines and are not meant to restrict practice or be used for grading purposes.

**Patient Journey Case Study can be utilised for collecting evidence of all of the above and linked to learning outcomes and clinical skills.**

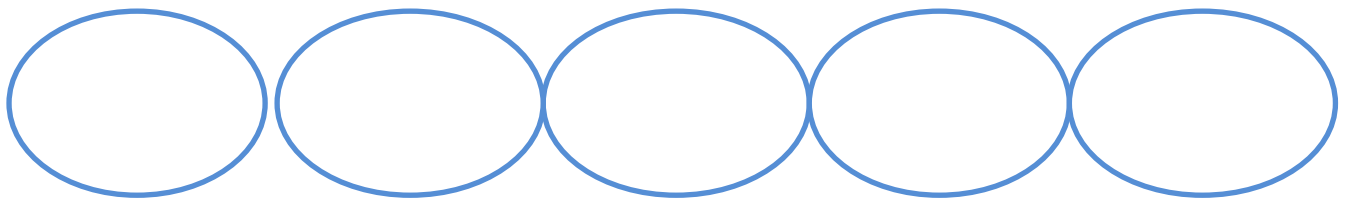




### HUB AND SPOKE MODEL



### SPOKES OUTSIDE OF THE HUB



**PATIENT JOURNEY CASE STUDY CAN BE UTILISED TO SUPPORT THE HUB AND SPOKE MODEL.**

**Contact details and length of spokes to be included in telephone directory.**

**Copy of patient journey hub and spoke to be left within Placement Portfolio**

**Please note, this is an example of the spoke opportunities as this can be adapted to the learners and the learning outcomes at the initial meeting with the Mentor/Educator.**



**DIRECTORY FOR PLACEMENT SPOKE VISITS LINKED TO THE PATIENT JOURNEY**

Directory information		Details of opportunities available within placement				
Service/centre/ professional	Contact name and number / PLSS number	Shadow experience (with other health care professional)	Spoke Short Visit	Length of time offered	Training Session	Length of time offered
			Yes/No		Yes/No	
			Yes/No		Yes/No	
			Yes/No		Yes/No	
			Yes/No		Yes/No	
			Yes/No		Yes/No	
			Yes/No		Yes/No	
			Yes/No		Yes/No	

**Directory to be continued in conjunction with Patient Journey Tool with learners in practice and copy left within placement profile  
 NB Learners on placements with Allied Health Professionals may only be able to complete shadow experience or short visit**



### Profession - Check List

Profession within Placement Area	Number of Mentors / Educators	WTE	Sign off Mentors	LEARNERS			
				discussed with placement area and agreed suitability for :- (please tick whether hub or spoke or both)			
				Hub	Spoke	Hub/Spoke	Comments
<b>Nursing and Midwifery</b>							
Adult							
Child							
Learning Disability							
Mental Health							
Midwifery							
<b>Integrated programmes</b>							
Learning Disability with Child							
Learning Disability and Social Work							
<b>Allied Health Professionals</b>							
Clinical Psychology							
Dental Therapy							
Dietetics							
Improved Access to Psychological Therapies							
Occupational Therapy							
Operating Department Practitioners							
Orthoptics							
Paramedics							
Pharmacy							
Physiotherapy							
Podiatry							
Prosthetics and Orthotics							
Radiography							
- therapeutic							
- diagnostic							
SaLT							
Social Work							
Sonography							
Undergraduate medicine							
<b>Health Care Science (HCS)</b>							
Physiological Science - Cardiac Physiology							
Physiological Science - Respiratory and Sleep Physiology							



Physiological Science - Respiratory Physiology							
Neurosensory Sciences - Audiology							
Neurosensory Sciences - Neurophysiology							
Neurosensory Sciences – Ophthalmic & Vision Sciences							
Life Science - Blood Diagnostics							
Life Science - Infection Diagnostics							
Life Science - Tissue & Cellular Diagnostics							
Life Science - Genetics Technology							
<b>Community Specialist Practitioners</b>							
Health Visiting							
School Nurses							
District Nurses							
Practice Nurses							
<b>Other Programmes</b>							
Advanced Practitioners							
Trainee Assistant Practitioners							
Cadets							
Work Experience							
<b>Trainee Assistant Practitioners (TAPS) - Work Based Education Facilitator (WBEF) network</b>							
<a href="mailto:WBEFnetwork@UHSM.NHS.UK">WBEFnetwork@UHSM.NHS.UK</a>						<u>Discussed</u>	<u>Outcome</u>
<b>Cadets – Health and Social Care – Skills for Health Academy North West</b>							
Judith Jones Cadet Development Lead Cheshire and Merseyside & Greater Manchester Skills for Health Academy North West Direct Dial: 0151 482 5579 Mobile: 07899060961 <a href="mailto:Judith.jones@skillsforhealth.org.uk">Judith.jones@skillsforhealth.org.uk</a>						<u>Discussed</u>	<u>Outcome</u>
<b>PDM</b>						<b>DATE</b>	
Name							
Signature:							



Name of Placement:

PDM/PDL:

Placement ID Number:

PLSS Number (if applicable):

### Placement Development Checklist

1. Quality Learning Environment	Date completed	Information given: Sent by email or Discussed	PDM/PDL Initials
Date of latest CQC/OFSTED/NHS England Inspection:...../...../.....			
Outcome of latest CQC/OFSTED/NHS England inspection			
Placement Information Pack Given			
NWPDN Tool kit completed and Placement Portfolio commenced			
Date Essential Reading List given			
Placement has clarified insurance arrangements with the HEI			
	Number	Start date(s)	PDM/PDL Initials
Number of Staff Applying for CPD Mentorship (MSLAP)			
	Number	Date Referred	PDM/PDL Initials
Number of Staff referred for Mentor Update			
Number of Staff referred for SLiP Training/suitably prepared/mentor mapping			
2. Key Personnel	Date completed	Information given: Sent by email or Discussed	PDM/PDL Initials
PEF Informed of development			
Link Lecturer informed of development			



3. Multi professional Educational Audit	Date completed	Information given: Sent by email or Discussed	PDM/PDL Initials
Agreed date of Multi professional Educational Audit meeting ...../...../.....			
Multi professional Educational Audit signed off for Formative Placement until MSLAP course commenced (if appropriate) ...../...../.....			
Multi professional Educational Audit signed off ...../...../.....			
4. Other	Date completed	Information given: Sent by email or Discussed	PDM/PDL Initials
Practice Assessment Record & Evaluation (P@RE) discussed			
<i>Cumbria &amp; Lancashire only</i>			
Healthcare partnership Agreement (UoC non NHS)			

Any additional information:

I have received all of the above information (to be signed at final audit meeting)

Placement manager name:

Placement manager signature:.....Date...../...../.....

PDM/PDL signature: .....Date:...../...../.....

NWPDN use only –

Formal Placement Development Handover Date...../...../.....



## Formal Placement Development Handover

<b>Placement Details</b>	<b>Placement Contact Details</b>
Name: Address:  Postcode: NHS/ NON NHS (please delete as required)	Contact Name:  Tel No:  Email:
<b>PDM details</b>	<b>PEF details</b>
Name: Telephone number: Email::	Name: Telephone number: Email:
<b>Link Lecturer details</b>	<b>University</b>
Name: Telephone number: Email:	
<b>Professions to be allocated</b>	Hub  Spoke
<b>Mentorship</b>	MSLAP details:  SLiP/suitably prepared details:  Mentor update details:
<b>Other Networks Referred</b>	
<b>Date Audit Completed:</b>	
<b>Date of Handover</b>	
<b>Name and designation of person sent to</b>	



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