

Frequently asked questions and answers for those supervising and assessing preregistration nursing and midwifery students in community teams in primary and integrated care during the COVID-19 period

Introduction

This frequently asked questions guidance has been developed with Board partners to support those supervising and assessing pre-registration nursing and midwifery students in community or integrated care placements. We are grateful to NHS Boards who have shared their resources. As well as national guidance that is available and signposted in this document, please also refer to any local guidance applicable within your practice learning environment.

Q1. During this COVID-19 period are there any Nursing and Midwifery (NMC) regulatory changes that I should be aware of?

In response to the COVID-19 pandemic, the NMC developed a set of emergency standards for nursing and midwifery education. They are phasing out the majority of these emergency standards on 30 September 2020, but some will be retained as recovery standards. The Recovery programme standards are available at:

<https://www.nmc.org.uk/globalassets/sitedocuments/education-standards/recovery-programme-standards.pdf>

The Recovery programme standards state that placement providers and universities in partnership, “Ensure placement allocations take account of current, relevant public health guidelines with due regard to the health and wellbeing of individual students. Institutions and their practice learning partners will need to continue to work with their students to find appropriate placements, ensuring appropriate risk assessments are carried out.” Any student you are supporting, supervising and assessing will have completed a COVID-19 Occupational Risk Assessment in line with the ‘Nursing, Midwifery and Allied Health Professions Students’ Return to Supernumerary Practice Learning Experiences – applying the COVID-19 Occupational Risk Assessment Guidance.’ This document is available at:

<http://www.knowledge.scot.nhs.uk/media/CLT/ResourceUploads/4100413/d11fd983-84e4-4639-85be-06fa7667a70e.pdf>

The recovery programme standards also detail that “All students will receive support, supervision and assessments in line with the Standards for student supervision and assessment (SSSA, 2018). The SSSA can be accessed at:

<https://www.nmc.org.uk/standards-for-education-and-training/standards-for-student-supervision-and-assessment/> There is a ‘Practice Learning Handbook: for Practice Supervisors and Practice Assessors’ in Scotland which is available at:

<https://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/practice-education/scottish-future-nurse-and-midwife-programme-board/national-framework-for-sssa.aspx>

Q2. Can students have their own delegated caseload?

Yes, this should be possible. Students should work within the scope of their practice under direct and indirect supervision by the registered nurse. This would be agreed on an individual basis and will be dependent on the student's previous experience, level of proficiency, confidence and the learning outcomes and proficiencies contained within the practice assessment documentation that the student requires to achieve.

Some individuals within your caseload may be feeling more anxious about having different professionals visiting them during this COVID-19 pandemic. It would be advisable to forewarn individuals about any change of personnel who may be visiting them.

Q3. Within my current caseload I have care home residents. Are care home visits appropriate for students at this time?

Yes, where you as a registered professional deem this to be appropriate the student could be delegated visits or a caseload to manage in line with the advice provided in Q2. If visiting a nursing or residential home, please ensure the student is familiar with the HPS COVID-19 information and guidance for social, community care and residential settings available at <https://www.hps.scot.nhs.uk/web-resources-container/covid-19-information-and-guidance-for-social-or-community-care-and-residential-settings/>.

Q4. An individual has expressed a concern about a student accompanying me on a home visit. How should I manage this situation?

This scenario is not unique to the COVID-19 pandemic. Individuals can refuse entry of any health or care professional to their home, but this situation may arise more often as individuals are feeling more anxious about the amount of people visiting their homes and the potential spread of COVID-19 at this time. It may be helpful to discuss this potential issue with your student at the beginning of each shift and, if you feel it is appropriate, contact can be made beforehand with the individuals you and the student intend to visit to alert them to the student's presence. This would allow the individual to discuss how they feel about a student visiting and give you, as the practice supervisor, the opportunity to reassure them about the infection control measures that both you and the student will adhere to when conducting home visits. Therefore, allowing them to make an informed choice.

Q5. How can I maintain social distancing when I require to travel with a student or other practitioners in a car to provide care?

The aim of social distancing measures is to reduce the transmission of COVID-19. Up to date information can be found on the [NHS Inform](#) website and the [Health Protection Scotland](#) (HPS) website. It is clear that there are real challenges in delivering health and care services in the community settings while simultaneously adhering to social distancing guidance. We all, as health and care professionals, have to reach informed, practical and reasonable decisions.

In line with national guidance, individuals should follow general infection prevention and control measures, including practicing good hand hygiene, follow social distancing advice

(i.e. maintaining 2m social distancing) wherever possible and use of appropriate personal protective equipment (PPE) when delivering care.

Where maintaining 2m social distancing in a car with someone is difficult, alternative travel arrangements should be made if at all possible, to allow social distancing to be maintained:

- Consider travel in larger vehicles where possible or use vehicles with cab screens, if available.
- Ask the student/health and social care professional to consider using their own car, reminding them they require the appropriate insurance cover in line with the local travel policy
- Explore access to local pool cars, subject to availability
- Consider the geographical distribution of planned visits and where possible consider if these could be carried out on foot or by bike.

Recognising that making alternative travel arrangements will not always be possible. On occasions when you are travelling with another practitioner/student:

- Limit the number of passengers
- Try and share with the same people each time
- Keep your distance and take care entering and exiting the vehicle
- Sit as far apart as possible in the vehicle, avoiding face-to-face
- Maintain good ventilation by keeping the car windows open
- Wear a face-covering, unless you are exempt.

The following general infection prevention and control measures should always be followed:

- Hand hygiene - use handwashing facilities or, IF NOT available, alcohol-based hand rub before and after journeys
- Catch coughs and sneezes in tissues or cover mouth and nose with sleeve or elbow (not hands), dispose of the tissue into a bin and wash hands immediately
- Clean vehicles between different drivers or passengers as appropriate and before entering and after leaving the vehicle, in particular cleaning the door handles and other areas that people touch.

Advice on travelling in a vehicle with others is available at:

<https://www.transport.gov.scot/coronavirus-covid-19/transport-transition-plan/advice-on-how-to-travel-safely/#section-63888> Further information on work related travel is available at: <https://www.gov.scot/publications/coronavirus-covid-19-general-guidance-for-safer-workplaces/pages/operational-guide-and-checklist/#traveltowork>

Q6. How can we maintain social distancing in the office?

The current situation requires health and care practitioners to work flexibly and may require changes to usual working practices or shift patterns to support the observance of social distancing measures. As a team consider any modifications that could be made to ensure not all staff require to access the office at the same time. Consider how technology could be utilised to reduce the need to work in the office.

Q7. I have read about ‘virtual’ placements. What are these?

In order to increase the learning opportunities available during times of service redesign due to COVID-19, it may be helpful to consider other alternative or innovative approaches such as virtual placements. A virtual/digitally enhanced placement is one in which the student is able to use digital platforms to engage with patients, practitioners, or their named supervisor in the practice setting. These placements may take a variety of formats: they may be observational, where the student accesses a virtual consultation between a practitioner and a patient to observe the interaction and intervention. Alternatively, it may consist of the student undertaking a virtual consultation with a patient via a digital platform such as Near Me with or without a registered practitioner being present digitally throughout the consultation, depending on the stage of student learning. Guidance around virtual placements for nursing, midwifery and allied health professions students can be found here:

<http://www.knowledge.scot.nhs.uk/media/CLT/ResourceUploads/4100402/9d18bb79-63ec-4757-be7b-e1b28b42ffb5.pdf>

Q8. What COVID-19 community setting specific guidance can I refer students to?

Health Protection Scotland continues to publish a collection of resources that give information and advice on Coronavirus (COVID-19). This includes guidance relating to a number of health and care settings and learning resources. As this pandemic is a rapidly evolving response practitioners must ensure they visit the website regularly to ensure they are accessing the most current guidance at <https://www.hps.scot.nhs.uk/a-to-z-of-topics/covid-19/>

COVID-19 guidance for primary care can be accessed through this link:

<https://www.hps.scot.nhs.uk/web-resources-container/covid-19-guidance-for-primary-care/>

COVID-19 guidance for social, community and residential settings can be accessed through this link:

<https://www.hps.scot.nhs.uk/web-resources-container/covid-19-information-and-guidance-for-social-or-community-care-and-residential-settings/>

COVID-19 Information and guidance for care home settings can be accessed through this link: <https://www.hps.scot.nhs.uk/web-resources-container/covid-19-information-and-guidance-for-care-home-settings/>

National Clinical Guidance for Nursing and AHP Community Health Staff during COVID-19

Pandemic can be accessed through this link:

<https://www.gov.scot/publications/coronavirus-covid-19-nursing-and-community-health-staff-guidance/>

COVID-19 specific publications from the Scottish Government Health and Social Care Directorates available at <https://www.sehd.scot.nhs.uk/>

Coronavirus (COVID-19): supplementary national child protection guidance available at: <https://www.gov.scot/publications/coronavirus-covid-19-supplementary-national-child-protection-guidance/>

Coronavirus (COVID-19) infection and pregnancy available at: <https://www.rcog.org.uk/en/guidelines-research-services/guidelines/coronavirus-pregnancy/>

National guidance for NHS Scotland workforce staff and managers on Coronavirus is available at <https://www.staffgovernance.scot.nhs.uk/coronavirus-covid-19/guidance/>

N.B. As more information becomes available regarding COVID-19 guidance changes according to best available evidence. For the most up-to-date information you should regularly revisit the Health Protection Scotland website at:

<https://www.hps.scot.nhs.uk/>