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# **Making sense of the NMC Emergency Standards for Nursing and Midwifery Education for the Deployment of Student Nurses- a Practical Guide when providing Protected Learning Time, Supervision and Delegation**

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## **Abstract**

The Nursing and Midwifery Council (NMC) recognises the important contribution that nursing students are making to the national response to the COVID-19 pandemic. This article reports on the Greater Manchester Supervision and Delegation Framework, providing practical guidance for students and practice staff (practice supervisor/practice assessor and registered nurse) on how to support student nurses who have opted into a paid (deployed) healthcare role. The framework operationalises NMC emergency standards for Nursing and Midwifery education, enabling students to complete their pre-registration undergraduate or postgraduate nursing programme while also supporting the healthcare workforce (NMC, 2020).

## **Introduction**

The nursing profession globally is facing unprecedented times due to the coronavirus outbreak (Covid-19) (Leigh et al. 2020) that has been labelled a pandemic by the World Health Organization (WHO). A pandemic describes an infectious disease where we see significant and ongoing person-to-person spread in multiple countries around the world at the same time.

The Nursing and Midwifery Council (NMC) recognise the important contribution that nursing students are making to the national response to the Covid-19 pandemic and the impact that the pandemic is having on those who are studying. They have therefore produced an emergency set of education standards enabling students to complete their pre-registration undergraduate or postgraduate nursing programme whilst also supporting the healthcare workforce. Supporting the workforce includes students opting into a paid or deployed role in clinical practice whilst being appropriately supported and supervised and having protected learning time. These NMC standards are temporary and will no longer apply after the emergency period.

The authors of this paper are educational leaders working across four Greater Manchester (GM) Universities and its partner healthcare organisations and of whom have created a Greater Manchester Supervision and Delegation Framework. The framework provides practical guidance for students and practice staff (Practice Supervisor/Practice Assessor and registered nurse) on how to support student nurses who have opted into a paid (deployed) healthcare role. The practical guidance operationalises NMC Emergency Standards, Health Education England, NHS Employers and The NHS Staff Council guidance. Guidance includes information provided to employers regarding job description and banding for the deployed student (The NHS Staff Council 2020). The principles underpinning the framework are transferable to Trainee Nursing Associate and student midwives however the proficiencies referred to in this article relate to pre-registration undergraduate or postgraduate nursing programmes.

## **NMC Emergency Standards for Nursing and Midwifery Education**

Presented first in tables 1-4 is key information taken from the NMC Emergency Standards for Nursing and Midwifery Education (NMC 2020). The standards are next explored in terms of the implications for deployed students, considering and operationalising Health Education England, NHS Employers and The NHS Staff Council guidance on the job description and banding for the paid placements.

### **KEY POINTS**

- The Nursing and Midwifery Council (NMC) recognises the important contribution that nursing students are making to the national response to the COVID-19 pandemic and the impact that the pandemic is having on those who are studying
- The NMC has produced an emergency set of education standards enabling students to complete their pre-registration undergraduate or postgraduate nursing programme while also supporting the healthcare workforce
- The importance of supervision and effective delegation for deployed students cannot be underestimated, with the requirement for clarity when implementing protected learning time being key
- The Greater Manchester Supervision and Delegation Framework provides practical guidance for students and practice staff (practice supervisor/ practice assessor and registered nurse) on how to support student nurses who have opted into a paid (deployed) healthcare roles

### **CPD reflective questions**

- Consider how the NMC Emergency Standards for Nursing and Midwifery Education will impact undergraduate student supervision, assessment and delegation
- Plan with your colleagues (university and healthcare organisations) ways in which students will continue to receive adequate supervision and assessment while working in the deployed role

■ How can you apply the Greater Manchester Supervision and Delegation

Framework to ensure that students are delegated to effectively and appropriately?

■ Think about how you will co-create a clinical learning environment that ensures that students receive protected learning time. Who will you involve?

■ Reflect on your practice when working alongside a deployed student during the current COVID-19 crisis. How did you support the student's clinical decision making during this time? What were the benefits of working with students in this capacity?

**Table 1. Implications of the NMC Standards to Students in the final six months of their pre-registration undergraduate or postgraduate nursing programmes, also considering Health Education England, NHS Employers and NHS Staff Council guidance**

<b>NMC Emergency Standard</b>	<b>Rationale</b>	<b>The NHS Staff Council Job Banding and Job Description</b>
Standard E1: Students in the final six months of their pre-registration undergraduate or postgraduate nursing or midwifery programmes may complete their programmes in clinical placements, while ensuring all learning outcomes are met	Removed is the requirement that programmes have a fifty percent split between practice and theory. All programme outcomes need to be met.	Grade Band 4 Aspirant nurse –preparing to join the temporary register *or completing education programme in preparation for joining the full register as a registered nurse
E1.2 Students finishing their programme in placements under standard E1 will be provided with protected learning time. The level of supervision a student needs is based on the professional judgement of their supervisors, taking into account any associated risks and the students’ knowledge, proficiency and confidence.	Supernumerary status of students is removed. Students must still get the support and supervision they need to learn; protected learning time must be provided.	Students undertaking this role will be expected to: <ul style="list-style-type: none"> <li>• Implement care packages under the supervision of a registered nurse</li> <li>• Carry out nursing care programmes</li> <li>• Actively pursue all opportunities and use protected learning time to develop competencies to enable successful application to theNMC for future registration</li> </ul>

To summarise, this group of students who opt in to becoming part of the workforce are employed full time, with no supernumerary status provided. Whilst working under contract of a healthcare organisation, they remain students, requiring supervision and assessment, enabling all NMC pre-registration undergraduate or postgraduate nursing programmes learning outcomes to be met. Table 1. Provides The NHS Staff Council information regarding the grade banding and guidance of what should be included in job descriptions, with individual healthcare organisations adapting to meet local needs. Local contacts are issued to students. The NHS terms and conditions of service handbook contains the national agreements on pay and conditions of service for NHS staff under the NHS terms and conditions of service (Agenda for Change).

The NHS Staff Council also provides guidance of what should be included in a job description for the third- year student (final six months, on temporary register). They call this a band 5 pre-graduate nurse.

\*Up to the date of writing of this article the NMC have not put third year students on the temporary register.

**Table 2. Implications of the NMC Standards to Second year students, third and/or final year students on their first six months of study and first year postgraduate students, also considering Health Education England, NHS Employers and NHS Staff Council guidance**

NMC Emergency Standard	Rationale	The NHS Staff Council Job Banding and Job Description
E2. Students may spend no more than 80 percent of their hours in clinical placements and 20 percent of their hours in theoretical learning	Students continue their studies on a programme that offers flexibility for the workforce. Programme providers continue to provide theoretical learning to students and supported reflective learning opportunities.	Band 2 or 3 Clinical support worker: Job description requirements for these student roles: <ul style="list-style-type: none"> <li>• Must be clearly labelled as for use with nursing students not in their final six months</li> <li>• Must be based on a suitable existing support worker job description with the correct banding to reflect what the student will be doing in clinical practice.</li> <li>• Must have additional elements to reflect the worker’s status as a student engaged in continuing practice education and training.</li> <li>• Refer to NHS Council document that distinguishes between band 2 and 3.</li> </ul>
E.2.1 Students continuing their programme in placements under standard E2 will be provided with protected learning time.	Continue to have theoretical learning for 20 percent of their programme	

To summarise, this group of students who opt in to becoming part of the workforce are employed part-time (up to 80% practice/ minimum 20% academic), with no supernumerary status provided. Whilst working under contract of a healthcare organisation, they remain students, requiring supervision and assessment, enabling all NMC pre-registration undergraduate or postgraduate nursing programme learning outcomes to be met. Table 2. Provides NHS Staff Council information regarding the grade banding and guidance of what should be included in job descriptions, with individual healthcare organisations adapting to meet local needs. Local contacts are issued to students. The NHS terms and conditions of service handbook contains the national agreements on pay and conditions of service for NHS staff under the NHS terms and conditions of service (Agenda for Change).

**Table 3. Implications of the NMC Standards to students in the first year of pre-registration undergraduate programmes, also considering Health Education England, NHS Employers and NHS Staff Council guidance.**

<b>NMC Emergency Standard</b>	<b>Rationale</b>	<b>The NHS Staff Council Job Banding and Job Description</b>
E3. Students may spend 100 percent of their programme in theory/academic learning.	Clinical placements can be paused for the duration of the state of emergency. Encourage students to continue with their studies, focusing on the theoretical aspect of their learning.	None. Remain on their education programme. This may be subject to change in response to the current situation. Students may, as now, work on bank contracts in healthcare support roles separate from their programme

**Table 4. Other Key NMC Emergency Standard information relevant to all students and programmes**

<b>NMC Emergency Standard</b>	<b>Rationale</b>
E5. All students will receive support, supervision and assessments in line with the Standards for Student Supervision and Assessment (SSSA, 2018).	All of those programmes which have not yet moved to the Standards for Student Supervision and Assessment (SSSA) will need to immediately adopt these standards, allowing greater flexibility, by allowing any registered health or social care professional to supervise students.
E5.1 Exceptionally, the same person may fulfil the role of practice supervisor and practice assessor during this emergency period. The assessment is to be conducted by a registered nurse, midwife or nursing associate with suitable equivalent qualifications for the programme the student is undertaking, and who is not on a temporary register.	NMC exceptionally allowing a practice supervisor to also fulfil the role of practice assessor.
E6. Theoretical instruction can be replaced with distance learning, where appropriate to support student learning, which meets the required theoretical hours and learning outcomes.	This standard reinforces that institutions may undertake theoretical instruction through distance learning where appropriate

## Greater Manchester Supervision and Delegation Framework

The aim of the Greater Manchester Supervision and Delegation Framework is to provide clear guidance for students and practice staff working within Greater Manchester healthcare organisations regarding the supervision, assessment, safe delegation and how to support Protected Learning Time for deployed student nurses. The framework operationalises Health Education England Standard Operating Procedure for the Deployment of Nursing and Midwifery Students in the North West of England (HEE 2020). Exemplar documents include practical ways that students can demonstrate progress towards meeting their NMC pre-registration undergraduate or postgraduate nursing programme. Whilst North West centric, the principles of the framework are transferable across universities and healthcare organisations.

### Protected Learning Time

When considering this important area, it is necessary to be clear on what Protected Learning Time might be. Creating a working definition minimises any ambiguity and provides the Practice Supervisor/Practice Assessor with the consistency of terminology, ultimately supporting student's timely completion of their pre-registration undergraduate or postgraduate nursing programme. This also empowers the student to manage their own learning and assessment requirements. Greater Manchester definition of Protected Learning Time is offered below, adapted from the Greater Manchester Trainee Nursing Associate Working group:

Protected Learning Time is when the student has a clearly identified Practice Supervisor/Practice Assessor during all or part of an identified shift. At other times whilst on duty, the student will work under the supervision of a registered nurse. During Protected Learning Time the student and Practice Supervisor/Practice Assessor will identify appropriate learning needs/goal(s) that support timely completion of the practice learning requirements thus enabling the student to continue their student journey.

Health Education England report that 779 nursing students have been confirmed as deployed across the North West of England (figure correct 19th April 2020). Not to overwhelm the Practice Supervisor/Practice Assessor, Greater Manchester have not attached a period of time to their protected learning time definition, such as 3 hours per week, although some healthcare organisations have chosen to do so. Greater Manchester encourage the Practice Supervisor/Practice Assessor and student to think creatively and flexibly, especially around the assessment process.

Examples of creative and flexible approaches to the assessment include providing and facilitating opportunities for students to practise skills such as medicine administration and injection technique. Sharing knowledge with the student, demonstrating how to put that knowledge into practice, for example through discussion after handover is a different approach to take. Observations can be used as an effective method, with the Practice Supervisor/Practice Assessor providing constructive feedback on student performance in the Practice Assessment Document. Supporting students to reflect on learning is a further assessment approach that can be applied.

During the Protected Learning Time, the Practice Supervisor/Practice Assessor should facilitate opportunities to achieve that learning need/goal, providing timely feedback. Students should also provide evidence to the Practice Supervisor/Practice Assessor of what they have learned, collating and documenting evidence from the range of healthcare professionals and staff that they have worked with.

By the end of the identified Protected Learning Time allocated, students should ask the Practice Supervisor/Practice Assessor to sign either via the electronic practice assessment document or using a paper-based feedback sheet, when they have observed the student undertaking an episode of care. Table 5. provides practical examples of how students can demonstrate what they have learned and what protected learning time may look like- applying the creative assessment approaches previously discussed. Advised is that an electronic blank template of table 5 is created so that students can use this in times when the electronic practice assessment document is unavailable or inaccessible to the Practice Supervisor/Practice Assessor.



**Table 5**

**Feedback sheet example**

This feedback sheet supports the student in collating evidence from the staff they have worked with, they should ask the Practice Supervisor/Practice Assessor to complete this when they have observed the student undertaking an episode of care whilst undertaking protected learning time.

**Name of student** \_\_\_\_\_

<b>Overview of care delivery observed</b>	<b>Comment on student performance (e.g. Motivation, teamwork, communication and actions for development)</b>	<b>Print Name; Signature and designation</b>	<b>Date</b>
Worked alongside for 12hr shift – Caring for a team of 8 patients, handover, multidisciplinary team meeting, medications	Was extremely confident and capable in the delivery of care and managing elements of the team. Great communication skills, however, needs to work on prioritisation elements when doing medications	Staff Nurse Nightingale	01/05/2020
Documentation of care	Used the Electronic Patient Record system well in a correct manner, following correct procedures	Staff Nurse Smith	02/05/2020
Administration of medicines under direct supervision for 4 patients	Articulated and followed policy and five rights, knew how to use British National Formulary however, lacks knowledge around common medications, which needs to concentrate on	Staff Nurse Nightingale	02/05/2020
Professional standards	Professional, on time, caring nature and adhering to Uniform policy	Staff nurse Nightingale	03/05/2020
Managed safe discharge of patient back to nursing home	Safely followed all procedures correctly for checking of prescription, communicated well to appropriate multidisciplinary team meeting, needs further direction on booking of transport and ensuring relatives aware	Staff Nurse Jones	04/05/2020

## Supervision for Deployed Students

Advised is that practice staff are clear of NMC expectations for deployed student's supervision during the emergency period. For example, the NMC expect students to be supported to learn, with the decision on the level of supervision agreed between each student and the Practice Supervisor/Practice Assessor (NMC 2020). The level of supervision can decrease with the student's increasing proficiency and confidence. Complying with NMC Emergency Standard 5.1, the practice supervisor can also fulfil the role of practice assessor.

The exact nature of the practice-based role or activity to be undertaken and the level of direct or indirect supervision required will be dependent on the individual student's experience (timing in their NMC programme and practice learning experiences). Provided are Greater Manchester working definitions of direct and indirect supervision:

**DIRECT SUPERVISION:** In the immediate presence and under the constant observation of a registered practitioner who is proficient within the skill themselves and can assess student ability and performance. The registered practitioner must always be able to stop the student at any point if deemed necessary. The Practice Supervisor/Practice Assessor retains accountability for assessing an individual student's knowledge, attitude and proficiency and where there is any doubt should clarify with the pre-registration team or academic assessor.

**INDIRECT SUPERVISION:** Indirect supervision means that the student is within the Practice Supervisor/Practice Assessor overall direction and control, but the Practice Supervisor/Practice Assessor presence is not required during the delivery of care if the student has been deemed proficient. The Practice Supervisor/Practice Assessor retains accountability for assessing an individual student's knowledge, attitude and proficiency.

The students focus and aim should be on building their confidence in managing groups of patients, utilising efficiently the electronic systems for factually accurate, clear and concise documentation, delegation skills, leadership skills, strong multidisciplinary team working, good communication skills, time management, whilst seeking opportunities to build on clinical skills where possible, and only if they have received the necessary theoretical programme components.

Despite being employed, all practice hours need to be recorded in the Practice Assessment Document and it is the students' responsibility to ensure that this occurs. If a second year student, third and/or final year student on their first six months of study and first year postgraduate student chooses to work less than 30 hours per week, only the hours worked clinically should be recorded.

## Assessment for Deployed Students

Assessment for deployed students is explored next with guidance and top tips for the Practice Supervisor/Practice Assessor and practice staff to follow is summarised in box 1. Experience from across Greater Manchester is how providing as much guidance and help to practice staff, positively supports the student assessment.

### Box 1 Guidance and top tips for student assessment

- Students should work towards their overall NMC programme proficiencies, recognising that the assessment process may not be the same as usual with planned initial, mid-point and final assessments.
- As a minimum requirement the Practice Supervisor/Practice Assessor should complete the induction and final interview student practice assessment documentation
- For students to graduate on time and register with the NMC, it is imperative that the third year final six- month student complete all NMC programme practice learning outcomes

- Students should demonstrate proficiency to staff and gather evidence, see table 5 as an example of how this could be done
- The role of the Academic Assessor should provide continuity of assessment, both for theory and practice, informing student development and progression
- The Academic Assessor will also be a source of support for the Practice Supervisor/Practice Assessor-communication should be timely at agreed relevant points throughout the student's deployment
- The support and communication between Academic Assessor and Practice Supervisor/Practice Assessor is particularly important for any student who is struggling to progress
- Recommendations for progression should be undertaken collaboratively between the Academic Assessor and Practice Supervisor/Practice Assessor, reflecting the student's performance during their deployment

## Delegating to Deployed Students

Created and adopted across Greater Manchester are principles for registered nurses to consider when delegating roles, activities or tasks to deployed students. Principles for students to following when considering accepting a delegated task are also offered. Both sets of principles form part of the Greater Manchester Supervision and Delegation Framework.

The NMC define delegation as *“the transfer to a competent individual, of the authority to perform a specific task in a specified situation”* (NMC 2019:3). The key message in the delegation part of the framework is how the registered professional is accountable for all aspects of their practice, including accountability for what they choose to delegate.

The NMC define accountability as *“the principle that individuals and organisations are responsible for their actions and may be required to explain them to others”* (NMC 2019:3).

It is essential that that students are delegated roles or activities by the registered nurse that they feel proficient and confident to carry out, always remaining within their scope of practice. Provided in Box 2 are principles that the registered nurse when delegating a task or activity to the student must take account of.

### Box 2. Principles that the registered nurse when delegating a task or activity to the student must take account of

- Ensure that the primary motivation for delegation is to serve the interests and needs of the patient.
- Assess the degree of risk involved in the delegation
- Ensure that the delegation is appropriate, referring to the definitions and philosophies of nursing.
- Consider the level of experience, proficiency, role and scope of practice of the student taking on the delegated task
- Do not delegate tasks and responsibilities that are beyond the student's proficiency to perform
- Ensure appropriate student assessment, planning, implementation, monitoring and evaluation of the delegated role/ task or activity
- Communicate to the student the details of the role/ task or activity in a clear, understandable way.
- Decide on the level of student supervision and feedback required
- Ensure that the practice setting supports the delegation of the role/ task or activity
- Delegation of the task should be consistent with organisational policies and procedures

Equally, each student should consider all the options before accepting a role or activity delegated to them by the registered nurse. Student delegation principles include considering if the role, activity or task is within their current scope of practice. If the delegated role, activity or task is beyond their current scope of practice, the student should question the appropriateness of this delegation with the registered nurse. The student should acknowledge any limitations of proficiency with reference to the role, task or activity to be performed and provide appropriate feedback to the delegator. Useful is to refer to the following resources to support safe delegation:

<https://www.rcn.org.uk/professional-development/accountability-and-delegation>

<https://www.nmc.org.uk/globalassets/sitedocuments/nmc-publications/delegation-and-accountability-supplementary-information-to-the-nmc-code.pdf>

For students to meet their nursing programme outcomes and register with the NMC, it is useful for the Practice Supervisor/Practice Assessor and student to consider the types of learning activities that the student may need to achieve. This information can then be used to inform the delegation decision making process. Provided in table 6 are examples of pre-registration undergraduate or postgraduate nursing programme knowledge and skills that students may already have gained, are maintaining or are working towards. The examples are taken from the four Greater Manchester universities student electronic practice assessment documents. Proficiency and confidence should be assessed on an individual basis prior to delegation and should reflect the level of direct or indirect supervision required. The Practice Supervisor/Practice Assessor are advised to ensure adequate questioning, review of student's feedback and observation for each student.

**Table 6. Example of pre-registration undergraduate or postgraduate nursing programme knowledge and skills that students may already have gained, are maintaining, or are working towards**

<b>Year 2 Knowledge and Skills (dependant on University attended)</b>	<b>Useful Delegation Questions</b>	<b>Year 3 Knowledge and skills (dependant on University attended)</b>
Consent and capacity	<ul style="list-style-type: none"> <li>• What is your experience of...?</li> <li>• What it is that I am asking you to undertake?</li> </ul>	Whole body assessment and person-centred care, respecting culture and diversity
Self-Harm		Consent and capacity
End of Life care	<ul style="list-style-type: none"> <li>• What is your understanding of this?</li> </ul>	Record keeping
Communicating care and treatment		Working in partnership with people families and carers
Care planning and record keeping		Communication skills to support therapeutic interventions
Skin integrity and wound care	<ul style="list-style-type: none"> <li>• What is your responsibility?</li> </ul>	Recognises signs of deterioration in physical and mental health
Nutrition	<ul style="list-style-type: none"> <li>• How will you escalate concerns?</li> </ul>	End of Life care
Neurological observations/seizure management	<ul style="list-style-type: none"> <li>• Give me an example when/ where you have undertaken this?</li> </ul>	Specific nutrition and hydration needs
Management of falls		Specific elimination needs
Respiratory assessment, airway management		Manages procedures in assessing, providing and evaluating care
Venepuncture and cannulation		Communicating care and treatment
Sepsis	<ul style="list-style-type: none"> <li>• Tell me when/ where you were deemed proficient in this?</li> </ul>	Self-care
Positive risk taking		Medicines management
Inserting, managing and removal of urinary catheters		Working within scope of practice

Cardiac assessment	<ul style="list-style-type: none"> <li>• Where do you think your gaps are in relation to skills/ knowledge?</li> <li>• What support do you need?</li> <li>• How will you keep me up to date/ feedback to me?</li> <li>• How confident do you feel in undertaking/ being responsible for this on a scale of 1-10 (1 being not confident)?</li> <li>• What education have you had and where was the education?</li> <li>• How does this align to your programme requirements?</li> </ul>	Understanding members of the multidisciplinary team and scope
Resilience		Quality improvement
Discharge planning and transfer		Accurate risk assessments and escalation processes
Anxiety and de-escalation		Evaluates quality of people's complex care applying appropriate interventions if/when necessary
Medicines management		Breaking bad news and difficult conversations
Manage and monitor blood component transfusions		Safe discharge and transition of people with complex care needs acting as advocate where appropriate
Management of parenteral devices (under direct supervision)		

## Conclusion

In conclusion, this article has provided practical guidance for practice staff (Practice Supervisor/Practice Assessor and registered nurse) on how to support student nurses who have opted into a paid (deployed) healthcare role. Creating a Protected Learning Time working definition removes any ambiguity and provides the Practice Supervisor/Practice Assessor with the consistency of terminology and practical and consistent local application. Advised is that practice staff are clear of NMC expectations for deployed student's supervision during the emergency period and that the level of direct or indirect supervision will change depending on the student's proficiency and confidence. Providing as much guidance and help to practice staff positively supports the student assessment. Finally, the key messages around delegation is how the registered professional is accountable for all aspects of their practice, including accountability for what they choose to delegate. It is essential therefore that students are delegated roles, activities or tasks by the registered nurse that they feel proficient and confident to carry out, always remaining within their scope of practice.

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