

Practice Assessor: Self-declaration Form

Full name:		Job Title:	
Placement or base name:		Line manager name:	
Email:		Line manager email:	

By completing this form, you are making a professional declaration that you are able to evidence your ability to meet the NMC (2018) standards for student supervision and assessment (SSSA) listed below.

PRE-REQUISITES FOR PRACTICE ASSESSOR ROLE ON DIFFERENT NMC PROGRAMMES		
NMC programme	Required practice assessors qualifications for programme:	Evidence (state qualifications / experience)
Nursing associate	Registered nursing associate or a registered nurse	<input type="checkbox"/>
Pre-registration nursing and RTP.	Registered nurse with appropriate equivalent experience for the student's field of practice	<input type="checkbox"/>
Pre & post - registration midwifery	Registered midwife	<input type="checkbox"/>
SCPHN	Registered SCPHNs with appropriate equivalent experience for the student's field of practice	<input type="checkbox"/>
Prescribing programmes (V100/V150/V300)	Registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking	Please state prescribing qualification: V100 <input type="checkbox"/> V150 <input type="checkbox"/> V300 <input type="checkbox"/>
Post-registration programmes (DN, GPN).	Registered nurse with specialist practitioner qualification (NB: programme standards currently under review).	<input type="checkbox"/>

ROLE AND RESPONSIBILITIES.

All practice assessors must be able to meet the NMC criteria below. Those with experience of supervising and assessing students are likely to have evidence of competence from previous students, reviews, revalidation or reflective diaries.

Practitioners with experience in assessing students are required to fully understand the roles, responsibilities and processes relating to the implementation of the new NMC (2018) SSSA standards. This can be achieved in a range of ways: a workshop / PARE resources / individual support / factsheets.

Standard	Criteria	By ticking the box below you are stating you can evidence your compliance
4.3 (part1)	Have undertaken equality and diversity training	<input type="checkbox"/>

6.8, 7.1,7.2	Conduct assessments to confirm student achievement of proficiencies and programme outcomes for practice learning, informed by feedback sought and received from practice supervisors. Raise and respond to concerns about student conduct, competence and achievement, with support.	<input type="checkbox"/>
7.3	Make and record objective, evidenced based assessments on conduct, proficiency and achievement, drawing on student records, direct observations, student self-reflection, and other resources	<input type="checkbox"/>
7.4	Maintain current knowledge and expertise relevant for the proficiencies and programme outcomes they are assessing	<input type="checkbox"/>
7.5, 7.7	Gather and coordinate feedback, and work in partnership with the nominated academic assessor to evaluate and recommend the student for progression for each part of the programme.	<input type="checkbox"/>
7.8	Have an understanding of the student's learning and achievement in theory.	<input type="checkbox"/>
8.4	Have an understanding of the proficiencies and programme outcomes that the student they assess is aiming to achieve. Understand the NMC (2018) requirements for supernumerary status and protected learning time.	<input type="checkbox"/>
SCPHN/SPQ	Has have undertaken a period of preceptorship in line with the NMC principles for preceptorship as SCPHN or community nursing SPQ qualified professionals	<input type="checkbox"/>

- Completion of this form on PARE is your evidence / record of the date you declare you meet the NMC outcomes.
- The records are part of the organisation quality monitoring process. It is therefore imperative that your details are complete and up to date. If you would like to check if your record is correct you can access this through your organisations systems.

By signing below I declare that I meet the NMC requirements for a Practice Assessor as outlined above and therefore also meet the requirements of Practice Supervisor. I have evidence of this and agree to the audit of this evidence as requested. I understand that as a Practice Assessor I need to keep continually up to date with developments in practice learning, assessment and programme curriculum.

Signature:

Date: