



# Practice Placement Policy

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## Trust Policy Foreword

South Western Ambulance Service NHS Foundation Trust (SWASFT) has a number of specific corporate responsibilities and obligations relating to patient safety and staff wellbeing. All Trust policies need to appropriately include these.

**Health and Safety** - SWASFT will, so far as is reasonably practicable, act in accordance with the Health and Safety at Work etc. Act 1974, the Management of Health and Safety at Work Regulations 1999 and associated legislation and approved codes of practice. It will provide and maintain, so far as is reasonable, a working environment for employees which is safe, without risks to health, with adequate facilities and arrangements for health at work. SWASFT employees are expected to observe Trust policy and support the maintenance of a safe and healthy workplace.

**Risk Management** - SWASFT will maintain good risk management arrangements by all managers and staff by encouraging the active identification of risks, and eliminating those risks or reducing them to the lowest level that is reasonably practicable People and Culture appropriate control mechanisms. This is to ensure harm, damage and potential losses are avoided or minimized, and the continuing provision of high quality services to patients, stakeholders, employees and the public. SWASFT employees are expected to support the identification of risk by reporting adverse incidents or near misses on People and Culture the Trust web-based incident reporting system.

**Equality Act 2010 and the Public Sector Equality Duty** - SWASFT will act in accordance with the Equality Act 2010, which bans unfair treatment and helps achieve equal opportunities in the workplace. The Equality Duty has People and Culture aims, requiring public bodies to have due regard to: eliminating unlawful discrimination, harassment, victimization and any other conduct prohibited by the Act; advancing equality of opportunity between people who share a protected characteristic and people who do not share it; and fostering good relations between people who share a protected characteristic and people who do not share it. SWASFT employees are expected to observe Trust policy and the maintenance of a fair and equitable workplace.

**NHS Constitution** - SWASFT will adhere to the principles within the NHS Constitution including: the rights to which patients, public and staff are entitled; the pledges which the NHS is committed to uphold; and the duties which public, patients and staff owe to one another to ensure the NHS operates fairly and effectively. SWASFT employees are expected to understand and uphold the duties set out in the Constitution.

**Code of Conduct and Conflict of Interest Policy** - The Trust Code of Conduct for Staff and its Conflict of Interest and Anti-Bribery policies set out the expectations of the Trust in respect of behaviour. SWASFT employees are expected to observe the principles of the Code of Conduct and these policies by declaring any gifts received or potential conflicts of interest in a timely manner, and upholding the Trust zero-tolerance to bribery.

**Information Governance** - SWASFT recognises that its records and information must be managed, handled and protected in accordance with the requirements of the Data Protection Act 1998 and other legislation, not only to serve its business needs, but also to support the provision of highest quality patient care and ensure individual's rights in respect of their personal data are observed. SWASFT employees are expected to respect their contact with personal or sensitive information and protect it in line with Trust policy.

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## 1. Purpose

1.1 South Western Ambulance Service NHS Trust acknowledges the benefit of providing individuals, both within and outside of the ambulance service, the opportunity of gaining an insight into the function and work of the Ambulance Service-

1.2 This policy gives guidance on the provision of practice placement education for under-graduate students on partner University academic programmes to gain registration.

1.3 Inclusions

- Students at local Universities and Colleges that come under the Health Education England (HEE) Partnership Agreements for the provision of learning experiences in urgent and emergency care.
- Learners who require placements with us outside the Health Education England (HEE) Partnership Agreements, who would be charged for the placement provision in pay back shifts or at a cost levied dependent on the time of the placement requirement.
- Research: academics, and other research staff undertaking approved research activity in conjunction with the Trust who are seeking a greater understanding of Trust activities. These activities maybe the subject of appropriate ethics activities and compliance with trust research governance procedures.

1.4 Exclusions

- Students on a one or two shift observation placement without learning outcomes. These students will fall under the observer policy.

## 2. Scope

2.1 This policy describes the objectives of the Learning and Development department with regards to placements on the front line and departments within the Trust including the Clinical Hub that offer placement. In addition, it sets out processes for: -

- a) The protection of patients and those who use our service;
- b) Effective management, and accountability processes for all placement opportunities;
- c) Ensuring those undertaking and supporting placements are appropriately guided, supported and supervised;
- d) Progressing requests for placements following a structured pathway; to ensure both Users, Trust and Trust staff are protected;
- e) The introduction and induction of all learners ensuring a structured and documented process;
- f) Evaluation of the learning experience and monitoring of that experience against the Learning and Development Agreement (HEE South West)).

### 3. Definitions

- **Placement:** a placement with the Trust where the individual is allocated to an RRV or a front line ambulance; and departments within the Trust including the Clinical Hub that offer placement experience. This could be as part of the normal crew, or in addition to the normal crew on a vehicle (supernumerary). Any placement with the Trust exceeding 4 weeks will require an honorary contract with the Trust.
- **Trust Practice Placement Coordinator:** a named member of the Learning and Development team who has responsibility for ensuring quality of placements, Practice Educator support and supporting the student scheduling officer with growing Practice Educator capacity.
- **Trust student scheduling Officer:** a named member of the ROC who has responsibility for ensuring the student on placement has shifts allocated alongside their Practice Educator on the Global Rostering System (GRS)
- **Practice Educator:** a registered healthcare professional with at least 1 year of post registration experience who contributes to the student's development, facilitating learning, supervising and participating in formative assessment. Practice Educators need not have a mentoring qualification, but should be encouraged to obtain these.
- **Quality Standards:** refers to those standards designated by the relevant professional, statutory and regulatory bodies and any local standards agreed between the Authority and the Provider.
- **Regulatory Body:** means a body which sets, monitors and maintains standards for the relevant profession.
- **Student:** refers to a person receiving a placement within South Western Ambulance NHS foundation Trust (SWASfT) who needs to comply with trust policies and procedures.

### 4. Duties, Responsibilities and Reporting

#### 4.1 HEE South and HEE Wessex

The HEE South and Wessex regions will carry out their responsibilities as per their Learning and Development Agreement (2018)

#### 4.2 Trust Board

The Trust recognises its corporate responsibility as an employer to:-

- a) Carry out its responsibilities under the most recent Learning and Development Agreement with both HEE South and HEE Wessex to manage all non-conformance;
- b) Receive assurance from the Governance Committee that the policy is being implemented appropriately.

### **4.3 Head of Education and Professional Development**

The Head of Education and Professional Development will: -

- a) Have responsibility for the development, monitoring and implementation of this policy; undertaking an annual review of its fitness for purpose;
- b) Lead all education and development across the Trust for individuals within and outside of the ambulance service in accordance with the HHE South West Learning and Development Agreement (2018) and the Training and Education Policy as regards to placements.

### **4.4 People and Culture**

The People and Culture Department will:-

- a) Advise on matters related to human resources and associated legislation.
- b) Support the formulation of an honorary contract (Appendix A) to support placements over 4 weeks

### **4.5 Placement Coordinators**

Placement Coordinator will:-

- a) Carry out duties as per the most recent HEE Learning and Development Agreement
- b) Responsible for ensuring placement audits by the academic teams take place and updated in line with academic regulations
- c) In collaboration with the academic programme leads ensure that student placement feedback, collated by the academic programmes is responded to, particularly when areas for improvement have been identified, and acted upon by the head of department to address any concerns
- d) Ensure all student feedback for placement settings are summarised and fed back the heads of departments, local management team and mentors
- e) In collaboration with the head of departments and risk team ensure all placement environments have a risk assessment for students entering and working within or where appropriate students are identified within current risk assessments held
- f) Work in collaboration with the Trust in any disciplinary proceedings taken in connection with a learner in the practice setting
- g) Be responsible for ensuring student placement environments provide opportunity to support the learning outcomes and practice competencies

- h) Be responsible for maximizing placement capacity across the trust in collaboration with the student resourcing scheduler, local management teams and staff
- i) In collaboration with heads of departments open up environments that will achieve learning outcomes away from the front line ambulance environment to promote a varied and enriching student experience for wider awareness of the NHS system
- j) Be responsible for ensuring Practice Educators are prepared, updated and supported in collaboration with the SWASfT CPD team and academic program leads
- k) Ensure Practice Educators are appropriately trained and updated with records detailed on the Practice Educator database in liaison with the student scheduling officer
- l) Be responsible for ensuring students are adequately prepared for placement within SWASfT as detailed within the workplace agreements with HEI's
- m) Be responsible for coordinating student inductions into placement, both class room based and placement area in collaboration with heads of placement area, ROC, People and Culture and the Learning and Development teams
- n) Be responsible for ensuring students are not permitted into a placement area without satisfying pre-placement checks such as DBS and manual handling assessments. Where manual handling assessments are not passed, an audit trail must be maintained and the relevant Practice Educator made aware.
- o) Be responsible for ensuring all induction competencies are signed and sent to People and Culture for saving on p file
- p) Ensure adequate arrangements are made for individuals within and outside of the ambulance service accessing placements in the Trust as per the observer policy

#### **4.6 Trust Student Scheduling Officer**

- a) Responsibility for ensuring the student on placement has shifts allocated alongside their Practice Educator on Global Rostering System (GRS)
- b) Work with Human Resources and Practice placement coordinator (PPC) to ensure all students have personal information accessible on GRS
- c) Receive sickness calls from students and inform Operations Officers (OO). Should the sickness period of the student exceed 7 days, PPC's must be made aware to ensure appropriate and adequate support is being provided.
- d) Collate data with PPC regarding the number of available Practice Educators
- e) Liaise with the PPC and County Business Managers (CBM) regarding any issues that may affect the Practice Educators being able to fulfil their mentoring role.

- f) Work with University placement and ARC Teams to confirm available Practice Educators in each placement setting ahead of students being allocated their placement block
- g) Signpost any student concerns unable to be resolved regarding shifts to CBM's
- h) Signpost any student concerns regarding their academic program to the University placement office or assigned academic tutor
- i) Escalate any student welfare concerns to local management team as per staff processes. Ensure student placement Office and academic tutor are notified of student absences/welfare concerns
- j) In collaboration with the Practice Placement Coordinator ensure the central Practice Educator database is up to date with regards to active Practice Educators, available Practice Educators, and Practice Educator qualifications held

#### **4.7 All Line Managers**

All line managers have responsibility to: -

- a) Pass all requests for observer placements to the Trust's Placement Coordinator for processing;
- b) Ensure that the health and safety of the individual and Trust staff/employees is not compromised, including not exposing him/her to avoidable risks;
- c) Ensure that in the event of any accident or injury to the individual, that a DATIX is completed and they are examined by an appropriate health care professional. In addition the relevant university must be notified at the earliest opportunity;
- d) Maintain the standards of service and patient care expected by the Trust ensuring that they are not adversely affected by accommodating the placement. Any problems, or inappropriate behaviour, should be referred to the Line Manager, or Duty Officer immediately;
- e) Manage any concerns regarding the students' performance or behavior as per trust policies and procedures notifying the relevant University at the earliest opportunity.
- f) Participate in the process of quality assessment and subsequent monitoring.
- g) Ensure that students have access to all facilities available to staff as per the HEE learning agreement 2018 and work place agreements held with partner universities
- h) In collaboration with the PPC ensure students have a local orientation and induction as per new joiners to the trust and this is recorded and sent to the practice placement coordinator for central recording.



- i) Ensure a student, whose Practice Educator may be absent at short notice for a planned shift, is accommodated with an alternative in liaison with the student scheduling officer to ensure GRS is updated accordingly. Long term Practice Educator absences should be escalated to the practice placement coordinators and student resourcing officer for alternative arrangements to be made.
- j) In collaboration with the PPC ensure all students entering into placement have completed all the pre-requisites required and refusing placement if this cannot be confirmed
- k) Issuing any necessary personal protective equipment;
- l) Advising the student of arrangements such as refreshment facilities and emergency contact arrangements

#### **4.8 All Individual Employees**

Each employee has a responsibility to:-

- a) Pass all requests for observer placements to the Trust's Placement Coordinator for processing;
- b) Act in a safe and responsible manner ensuring that the health and safety of themselves and their colleagues is not compromised, including not exposing him/her to avoidable risks;
- c) Maintain the standards of service and patient care expected by the Trust ensuring that they are not adversely affected when supporting a placement;
- d) Report any concerns regarding the trainee or students' conduct/welfare to the line manager.
- e) Participate in the process of quality assessment and subsequent monitoring when requested to do so by the PPC/local management or academic teams.

#### **4.9 Student**

- a) Must complete the placement pre-requisites, as agreed within the work place agreements held between SWASfT and the University.
- b) Must hold an honorary contract if placement exceeds 4 weeks
- c) Must attend a classroom and local placement induction
- d) Must adhere to SWASfT policies and procedures,
- e) Must only participate in activities they have been signed off to be competent in and can demonstrate within portfolio.
- f) Students must not partake in Manual Handling (MH) unless successfully passed a MH Assessment to trust standards.

- g) Students must attend all placement shifts allocated and contact the sickness absence reporting line for any non-attendance to promote their welfare and safety in line with staff procedures.
- h) Students must ensure any placement concerns are highlighted to line management team, to ensure regular contact with academic tutors for ongoing academic support, and ensure any difficulty in achieving learning outcomes is proactively sought utilising support offered by Practice Educators, SWASfT CPD, PPC and LDO teams.

## 5. Policy Statement

5.1 Under the Learning and Development Agreement with SW HEE and workplace agreements all students within the Trust must possess at least the minimum entry requirements as required by the appropriate Regulatory Body. All learners must: -

- a) Be medically fit to be placed within the Trust;
- b) Possess a Disclosure and Barring Service (DBS) check, previously known as an eCRB;
- c) Have evidence of occupational health screening in accordance with the criteria set out in the Trusts Occupational Health Guidelines and in accordance with any additional criteria agreed between the Education Provider and the Occupational Health Service provider;
- d) Possess work permits or other requirements for overseas students where necessary.
- e) Have completed safeguarding, conflict resolution, PREVENT, infection prevention and control in line with skills for health, and have completed or working towards the competencies of the skills for health care certificate.
- f) Manual Handling - in addition, to promote the safety of students, patients, staff and wider trust, students must have completed a manual handling theory and practical assessment, any failure to meet the standards must be highlighted to the student, practice placement coordinator and Practice Educator with individual risk assessments and action plans in place to prevent injury and harm.

## 6. Placement provision

6.1 All placement areas will be arranged by the Practice Placement Coordinator (PPC), in conjunction with local management teams and student resourcing officer. The PPC will work with the universities placement teams and program leads on the numbers of students per placement area.

6.2 Priority will go to partner universities who are supporting paramedic undergraduate programmes.

- 6.3 All requests for practice placements should be received by the placement coordinator, they should be planned in advance to ensure all staff involved in supporting the placement are aware and adequate placement provision exists
- 6.4 The student resourcing officer, in conjunction with the University placement system ARC, will ensure that the line manager and Practice Educator are aware of the student name, placement times and dates
- 6.5 Placements will be arranged as per the work place agreement with the relevant universities
- 6.6 The Trust will take all reasonable steps to provide a safe working environment for individuals engaged in practice placement, this will include a suitable induction

## 7 Practice placement induction

- 7.1 The practice placement coordinators, in liaison with the student resourcing officer and relevant departments, will organise a central induction for each university student cohort ahead of their first placement block. This will be in addition to the pre-requisites for placement preparation offered by the Universities, as stated in the work place agreements.
- 7.2 Students will, in addition to the central class room based induction, be required to attend a local induction into placement, focusing on health and safety before they are permitted to begin their placement. A station induction check list will be required to be completed and handed to the PPC for central p file recording.
- 7.3 Students will receive kit familiarisation, emergency radio procedures and safety briefings for arriving on scene, working in an ambulance environment and vehicle familiarisation with competency sign off. In addition to this centrally held induction, students will be required to undertake a 'local' placement induction to ensure they are aware of health and safety and reporting requirements, along with any codes of conduct for the specific placement area, for example the clinical hub and make ready environments which will have specific requirements for student safety.

## 8. Practice Educator support

- 8.1 The placement coordinator, in conjunction with the academic programme team, will ensure that Practice Educators supporting the placement are aware of their responsibilities and are supported.
- 8.2 Practice Educators will be encouraged and expected to obtain a relevant Practice Educator qualification as per the college of Paramedics guidance for practice placement educator's handbook, HcPC requirements within the stands for education and training and Partner university work place agreements.
- 8.3 Practice Educators will be offered and encouraged to attend an annual Practice Educator update day with the relevant partner university in collaboration with SWAfST.

- 8.4 Practice Educators with students will have priority access to mentorship courses
- 8.5 Practice Educators will have access to relevant academic tutors for student support concerns/guidance
- 8.6 Practice Educators with students, or wishing to be allocated a student, will have the PPC as the trust point of contact.
- 8.7 Registered Paramedics/nurses concerned about supporting a student should meet and discuss with their Operations Officer to ensure these can be overcome through appropriate support and guidance. In the event it is determined supporting a student is not appropriate a 'Temporary withdrawal of Practice Education form' should be completed and reviewed monthly (appendix B), this should be held on personal file and sent to the local placement coordinator for GRS update to cease student allocation. Should this extend beyond the 3 month period, Operations Officers should seek to support using guidance contained within the Performance and Development Policy

## **9. Practical management of students on practice placement**

- 9.1 Ambulance staff must ensure that, students wear the University or Trust provided reflective outer clothing when the need arises. Student helmets are provided within the cab of each DCA, and should be worn where indicated following a dynamic risk assessment. Spare helmets should be available on stations which can be provided for RRV student shifts and these should be taken out with the student. Where there is no student helmet and there is a need for these to be worn, staff must inform students to remain within the vehicle for their safety.
- 9.2 The student, where provided, must wear either the trust issue uniform or the University provided uniform on all placements within the trust. If a student has not switched over to the new university uniform, and is continuing to wear a trust issue uniform during the transition period, the trust uniform is not to be worn outside of SWAST placement; this includes not wearing trust uniform for university purposes or placements with other trusts. For those on observer shifts, hi-visibility jackets or tabards will be provided for the duration of the shift and clothing and shoes suitable for the working environment must be worn as per the trusts uniform policy.
- 9.3 Photographic identity such as a university card, SWASfT ID card or driving licence must be provided to the Trust supervising staff member at the commencement of a placement period.
- 9.4 In liaison with the PPC, the local management team and mentor must ensure that their student has attended placement induction as set out in section 6 of this policy and where this has not occurred the student must not be permitted to attend their placement shift. In this situation the PPC and ROC student scheduler must be informed and arrangements to attend both a class room and local induction is achieved with relevant competencies and assessments sent to HR People and Culture for p-file recording.
- 9.5 Where the student has specific objectives to complete, these should be discussed with the mentor at commencement of duty.

- 9.6 The level of patient involvement will be determined by the signed off competencies held within the students portfolio and must fall in line with the trust scope of practice. The student will only be permitted to carry out a task that the mentor is satisfied for them to complete
- 9.7 Patient consent must be sought in order for a student to partake in any assessment or involvement. This should be documented on the Electronic Patient Care Record.
- 9.8 When qualified medical staff are on placement (doctors or nurses) they are required to have submitted, at the time of honorary contract set up, the competence of a particular skill should they consider contributing to patient care and receive authorisation from the clinical and Learning and Development departments.
- 9.9 Where there is no clear benefit to patient care regardless of their qualifications, participation should be as detailed within point 9.6.
- 9.10 The student should not routinely be left unsupervised with patients. Students must accept the guidance and supervision of the designated supervisory member of staff at all times.

An example of a situation whereby this may, under exceptional circumstance be acceptable, would be when a student attends a multi-casualty incident and is directed by a registered clinician to observe walking wounded, providing the student can demonstrate the competence and happy to do so. An example of a circumstance that must never occur is to leave a final year student in the back of an ambulance responsible for a time critical patient on the way to a hospital unsupervised by a registered clinician. For further guidance please refer to SOP C04 section 5.7 – 5.9.

- 9.11 Students must comply with all relevant SWASFT policies and procedures and with the requirements of the Data Protection regulations.
- 9.12 Students are not permitted to photograph film or record any Trust activities using any medium at any time and should refer to the social media policy.
- 9.13 The student should maximise the time spent with the Trust in continuing their education, being proactive where placement provision is compromised at short notice such circumstance as mentor absence. In this situation the student must notify the duty Operations officer and student resourcing officer for a resolution to be sought to ensure the placement hours are not compromised. Long term mentor absence should be notified by the resourcing officer to the practice placement coordinator who will work with the operations teams to seek resolution.
- 9.14 The safety of the student is the responsibility of a designated supervising staff member who should be named and recorded on GRS for the period of practice placement, and daily sign on with the Clinical Hub.
- 9.15 The mentor should, where time allows, facilitate a structured debrief of each incident with the student in order to allow for knowledge assimilation, this must not compromise or delay patient care and does not sit outside Standard Operational Procedures (SOP's) for ambulance turn around.
- 9.16 In order to maintain patient confidentiality the portfolio/diary **must not** contain

references or information that may be traced to individual cases; however, the use of a trust indent number is acceptable.

9.17 Students should refer to the current guidance held within the JRCALC app regarding Personal Protective Equipment (PPE) and ensure adherence to this. In addition Practice Educators should be aware of current guidelines and ensure students follow these.

## 10 Monitoring

### 10.1 Internal Monitoring

10.1.1 The Quality Committee will be the committee responsible for ensuring the development and annual review of this policy, and will present it to the Board for approval.

### 10.2 External Monitoring

**10.2.1 Learning and Development Agreement (LDA) Monitoring:** Annual Audit by the HEE South West and HEE Wessex to ensure quality of service, appropriate allocation of resources and availability of information for local and national forecasting and planning processes.

**10.2.2 Health and Care Professions Council (HCPC) Audit:** Annual Audit of Training Provision, CPPD Portfolios, Course Design and Ambulance Tutors, training facilities, documentation and observing undertaken against HCPC Standards of Education and Training Policy and the HCPC Standards of Proficiency

**10.2.3 Partner University or academic programme leads:** Annual audit of placements and student feedback reports to be sent to the practice placement coordinator for review and action where required with the relevant line managers for each placement area.

## 11 References

- SW HEE Learning and Development Agreement (2018);
- HCPC Standards of Conduct, Performance and Ethics (2012);
- HCPC Standards of Proficiency (2012)
- HCPC Standards of Education and Training year

## 12 Associated Documents

## HONORARY CONTRACT CHECKLIST

<b>Name:</b>		<b>Telephone:</b>	
<b>Job Title:</b>		<b>Date of Birth:</b>	
<b>Address:</b>			
<b>Base:</b>			
<b>Reporting to:</b>			
<b>Start date:</b>			
<b>End date:</b>			

<b>Actions and Inclusions</b>	<b>Date Received:</b>	<b>Signed</b>	
<b>For completion by the authorising manager who requested honorary contract</b>			
ID Checks complete ( 2 forms of photographic and one address)			
C1 checked (if applicable)			
Qualifications and Blue Light checked if applicable			
Health clearance checked?			
DBS (formally CRB) received? (no more than 3 years old)*			
<b>Copies of all of the above should be sent to the People and Culture/Recruitment Department with this completed form.</b>			
<b>For completion by People and Culture/Recruitment Department:</b>			
Name checked against ALERTS list			
HPC/NMC checked (if applicable) – copy on file			
<b>Honorary Contract</b>	<b>Sent:</b>	<b>Received:</b>	
<b>ESR paperwork</b>	<b>Sent:</b>	<b>Received:</b>	

\*any DBS disclosures containing convictions/cautions should be referred to the Recruitment Manager for approval.

# Practice Educators

## Temporary withdrawal form

<b>Practice Educator Name</b>	
<b>ESR Number</b>	
<b>Station</b>	
<b>Operations Officer</b>	
<b>County</b>	
<b>Practice Placement Coordinator (PPC's)</b>	
<b>Initial withdrawal date</b>	
<p><b>Reason for withdrawing</b></p> <p>(Please justify the reasoning for wanting to withdraw from practice education at this time)</p>	<p>Signed Practice Educator _____</p> <p>Signed Operations Officer _____</p>



<b>1 month review date</b>		
<b>Outcome with reasoning (please circle)</b>	<b>Available for practice education and student allocation</b>	Signed Practice Educator _____
	<b>Continue with withdrawal from practice education</b>	Signed Operations Officer _____
<b>2 month review date</b>		
<b>Outcome with reasoning (please circle)</b>	<b>Available for practice education and student allocation</b>	Signed Practice Educator _____
	<b>Continue with withdrawal from practice education</b>	Signed Operations Officer _____
<b>3 month review date</b>		
<b>Outcome with reasoning (please circle)</b>	<b>Available for practice education and student allocation</b>	Signed Practice Educator _____
	<b>Continue with withdrawal from practice education</b>	Signed Operations Officer _____

**Extension beyond the 3 month period should be managed through an informal meeting under the Performance and Development Review Policy**

**Form to be emailed to Deputy County Commander, Practice Placement Coordinator's [placementcoordinator@SWAST.nhs.uk](mailto:placementcoordinator@SWAST.nhs.uk). County Business Managers to save a copy to the individual staff P-file.**

