



Multi-professional Principles for Practice Learning

Endorsed by the following Higher Education Institutes



Version	Final V1
Date approved	29/01/2024
Date of review	29/01/2026
Authors	Davinia.rodgers@nhs.net / liz.numadi@essex.ac.uk

East of England Principles for Practice Learning

Summary



The East of England Principles for Practice Learning have been developed in consultation with stakeholders across the region to be a reference resource for best practice.

They reflect the shared commitment required of the region's stakeholders to ensure practice learning is valuable, meaningful, and safe, with inclusion and partnership sitting in the <u>centre</u> of everything we do.

The principles are underpinned by our shared values and framed within 7 core themes of *Belonging & welcoming, Communication, Professionalism, Behaviours, Respect*, and *Collaboration*.

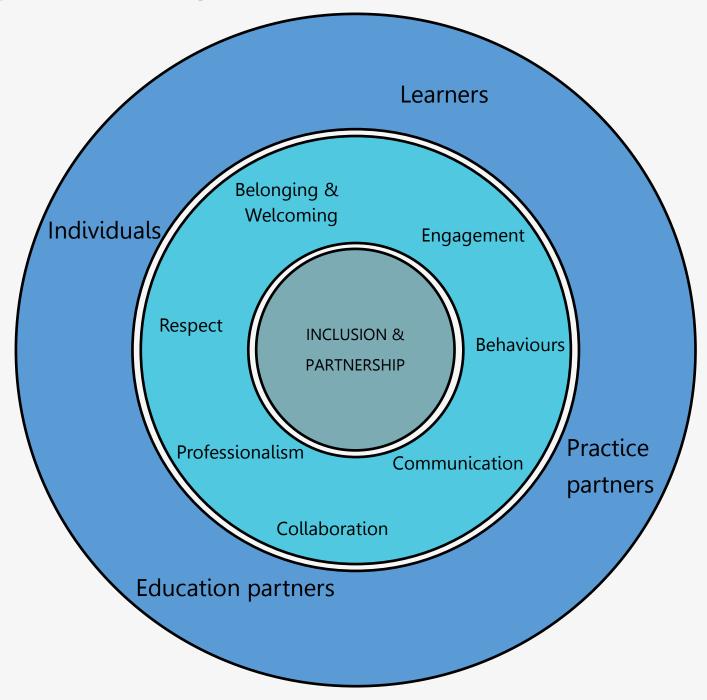
For the purposes of this document four key stakeholders are identified as follows, each with an important role and set of expectations across all 7 core themes. A fully successful practice learning experience requires the expectations and principles of each stakeholder to be met:

- 1. **Practice Partners** include the NHS, the practice education teams including Education Leads and those at care delivery level who support learning and assessment (Practice Educators, Practice Supervisors and Assessors), other providers of social and health care and our partners in the independent sector and voluntary organisations. Practice partners will ensure their processes, practices, and resources are effective and appropriate to support learning opportunities that seek to encompass the four pillars of practice clinical, education, research and leadership¹. [click here for full details across the 7 core themes]
- 2. **Learners** include pre-registration non-medical healthcare students and apprentices. However, can also be applied to other learners in practice settings. Learners will demonstrate commitment to placements, adhering to professional standards of relevant Professional, Statutory and Regulatory Bodies and have the best interests of the individuals they interact with whilst in the learning environment. *[click here for full details across the 7 core themes]*
- 3. **Education Partners** include universities, other learning institutions, and the Link Lecturers / Education Champions / Placement Tutors, supporting the development of health and care workforce. Education partners will ensure regular and effective collaboration with practice partners as well as effective processes to ensure the availability and capacity of practice-based learning for all learners. *[click here for full details across the 7 core themes]*
- 4. **Individuals** include those identifying as patient, service user, client, person/people with lived experience or expert by experience within different settings/ services. Service users and carers come first in everything the NHS does, and can expect high quality care that is safe, effective and focused on patient experience at all times, including when learners are involved in their care. *[click here for full details across the 7 core themes]*

These Principles for Practice Learning have been co-produced with the aim to:

- To support flexible practice learning for all pre-registration non-medical learners in both health and social care settings.
- To value all, who are engaged in practice learning, within the East of England.
- To promote a whole team approach with the four key stakeholders involved in successful practice learning experiences.
- To develop and enhance quality and articulate a shared commitment.
- To enable demonstrable commitment to the East of England Clinical Learning Environment Strategy which includes inclusivity, compassion, education excellence and partnership working.

Principles for practice learning





Practice Partners

Theme	Principles - Our Practice Partners (Education teams and those who support learning & assessment at the
	point of care delivery) should:
Belonging & welcoming	1. Accept learners as valued members of the team and facilitate their supernumerary status and protected learning time in practice, as
	appropriate.
	2. Promote a culture for learning where learners feel empowered to speak up without fearing blame and provide meaningful evaluations
	and feedback and with thorough and effective processes in place for receiving and responding to learner feedback (positive and negative)
	3. Provide appropriate visible practice education support, and signpost learners to access any organisational well-being services offered to
	staff as well as university support systems.
Communication	4. Provide practice education team and/or named point of contact details prior to placement, thorough placement induction / orientation
	ensuring learners have access to appropriate trust policies and procedures, reasonable adjustment requests and understand expectations
	for timely communication and/or tripartite meetings.
	5. Give and receive constructive, honest, and timely feedback verbally and in writing, to encourage and develop learning and assessment
	including clinical supervision and coaching, as well as time for reflection and debriefing in regards to actions arising.
Engagement	6. Ensure equitable learning opportunities encompassing the four pillars of practice - clinical, education, research and leadership, are
	accessible to all learners and support the development of independent practice.
	7. Provide learners with effective and appropriate resources including planning for reasonable steps to accommodate learners' identified
	needs and equitable access to devices for local digital systems as well as digital access cards if required.
	8. Working collaboratively with link lecturers/education champions/placement tutors/practice educators ensuring personal and team
	understanding of learners' learning and assessment requirements
Professionalism	9. Support completion of educational audits, or attend recognised learning organisation panels if used, and adhere to student learning
	agreements collaboratively with education partners to establish shared responsibilities.
	10. Ensure that all practice educators (including practice supervisors and practice assessors) have sufficient training, resources and time in
	their job roles to effectively support learners in line with regulatory and professional guidance.
	11. Escalate risk related to learning and act to manage placement capacity to enhance workforce development and quality of provision in
	line with expected professional and regulatory body standards for education.
Behaviours	12. Express opinions in a manner that upholds kindness and fosters inclusivity, which actively advocating for anti-racism through allyship.
	Retain from any form of discrimination and take action to prevent harassment, bullying or victimisation.
	13. Confidently review quality of learning, mitigating risks and act on needs during placements, escalating concerns through governance
	processes in line with Education Contract and Placement Agreement, resolving issues through timely collaborative action planning.
Respect	14. Refer to learners by their preferred name and act as professional role models demonstrating and visibly upholding the values,
•	standards and/or professional codes of practice.
	15. Only delegate learning and assessment roles by adhering to the regulatory and/or education standards or domains for assessment.
Collaboration	16. Work collaboratively with all relevant stakeholders to develop innovative, creative, and effective ways of providing learning in practice,
Cottabolation.	facilitating change as required to achieve local goals.
	17. Participate in curriculum development, timely investigation of concerns, recruitment of learners & support individual needs flexibly.
Return to Summary page	17. Participate in curriculum development, timely investigation of concerns, recruitment of learners & support individual needs hexibly.

Learners

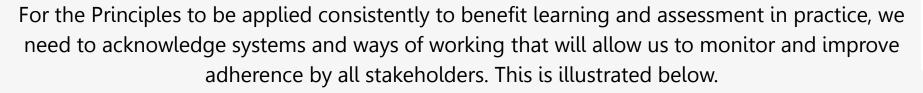
Theme	Principles — Our Learners should:	
Belonging &	1. Be willing to learn as part of a team and demonstrate inclusive, anti-racist and non-discriminatory, professional conduct, acting with integrity in raising concerns either directly or with appropriate Educator Provider/Trust support and to stop issues of bullying and harassmer or victimisation.	
welcoming	2. Communicate any identified learning or health related needs to their practice supervisor / assessor or educator to ensure that the placement can provide an optimum learning environment.	
Communication	3. Give and receive timely constructive feedback in a professional manner, ensuring open and honest engagement with in-placement evaluation or feedback mechanisms, and submission of end of placement evaluations to inform improvements to education and practice.	
	4. Escalate observed risk communicating verbally and with contemporaneous written documentation about care activities to ensure adherence to professional code and standards of conduct.	
	 5. Share concerns in a timely manner, recognising anonymity can be maintained but may limit direct improvement actions, with clinical staff, onsite supervisors, practice educators or managers with support from their Education Provider, if required, in relation to: Care quality and safety of an individual/patient Concerns about the learning environment, including attendance or absence Unaddressed learning needs or reasonable adjustments Inability to progress formal assessments in a timely manner Inability to meet professional and regulatory requirements for supervision and support (including supernumerary status and protected learning time) 	
Engagement	6. Demonstrate enthusiasm and commitment to placements by participating in pre-placement planning including any guided learning provided and being proactive to communicate with area/team in advance	
	7. Attend placement as rostered, negotiate requests for days off in advance, arrive on time and adhere to programme and local attendance policy as well as sickness/special leave and relevant dress / uniform policies. 8. Take responsibility for identifying own learning needs and becoming self-directed in learning, including improving digital literacy, researce and action.	
Professionalism	9. Adhere to professional & legal standards of practice, in line with relevant Professional, Statutory and Regulatory Body's (PSRB) codes, policies, & procedures, including requirements to:	
	 Prioritise people and protect their interests, respect confidentiality Practise effectively, communicate appropriately and work within limits of your knowledge and skills Preserve safety and be open when things go wrong Promote professionalism, trust, and be honest 	
Behaviours	10. Take responsibility for own health and actions or inactions, addressing risks for others who may be affected by them—in collaboration with educator, be open and honest with patients when something that goes wrong with their treatment or care causes, or has the potential to cause, harm or distress.	
Respect	11. Have best interests of the individuals they interact with whilst in the learning environment, seeking their consent and being aware of the potential vulnerability.	
Collaboration	12. Ensure learning outcomes are being achieved through contributing to individuals person-centred care whilst on placement	
	13. Be prepared for assessment of learning, always keeping all assessment documents in good order and available.	

Education Partners

Theme	Principles — Our Education Partners should:
Belonging & welcoming	1. Accept learners as valued members of the community and facilitate their supernumerary status and protected learning time in practice, a appropriate, whilst being a member of the health and/or social care team.
wetcoming	2. Act to stop harassment, bullying or victimisation with a zero-tolerance approach when managing concerns raised.
Communication	3. Request placement allocations sufficiently in advance to allow placement area/teams to prepare for learners' arrival and urgen communicating to practice providers any changes to placement requirements in writing and verbally when at short notice.
	4. Collate and share placement evaluation and feedback promptly throughout and at the end of the placement as required by the stude learning agreement, actively participating in governance meetings.
	5. Be open and transparent about placement preparation and actively managing issues that may impact practice learning including robu and ongoing assessment and implementation of reasonable adjustments to support learning in university and practice
	 6. Through partnership working and with an improvement focus hear and respond to any concerns raised by learners or practice partners a supportive manner relation to: Supporting learning and assessment
	 Care quality and patient safety
	Cultural or equality, diversity and inclusion concerns
	 Issues of professionalism 7. Provide educational opportunities, pastoral support and preparation for practice learning for learners to have best opportunity to succe
	across the learning journey and document in learning agreements (tripartite, if relevant) and memorandum of co-operation where used.
Engagement	8. Provide face to face and remote support to placements through roles, such as, link lecturers, education champions, practice educato allocated placement/personal tutors and academic assessors.
	9. Complete educational audits, student learning agreements, memorandum of co-operation, if used, collaboratively with practice partner to establish shared responsibilities.
	10. Adhere to professional & legal standards of practice, evidenced by regulatory and professional codes, policies, practices & procedures.
Professionalism	11. Actively respond & supportively manage concerns raised about professionalism and support failing learner process, including tripartite concerns meetings, progression progress meetings and/or Fitness to Practice processes.
Behaviours	12. Express opinions in a manner that upholds kindness and fosters inclusivity, which actively advocating for anti-racism through allyship. Retain from any form of discrimination and take action to prevent harassment, bullying or victimisation
Respect	13. Ensure the curriculum and its delivery will enhance equality, diversity and inclusion and promote respectful action.
	14. Treat learners with courtesy, dignity & respect and always protect their supernumerary status and protected learning time in line with regulatory requirements.
Collaboration	15. Participate in frequent shared opportunities for review & planning of innovative, creative practice learning models with all practice
	partners and education providers locally.
	16. Build professional relationships to allow for effective curriculum development and review, research, and recruitment of learners together with practice partners.
	17. Support education of placement providers' staff and their development in relation to knowledge and skills for learning and assessment

Individuals

treated. 2. Not participate in harassment, bullying or victimisation of others, reporting concerns to a member of staff as necessary 3. Be polite when communicating with others including learners 4. Recognise and treat learners as part of the healthcare team, whilst having the right to give consent or decline their involvement in care, if preferred 5. Have the opportunity to contribute to the assessment of the learners' performance to support overall improvement 6. Be able to feel assured of high quality care that is safe, effective and focused on patient experience at all time including when learners are involved in their care 7. Be free to disagree but not be disagreeable 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, 9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when it pain or more vulnerable		
treated. 2. Not participate in harassment, bullying or victimisation of others, reporting concerns to a member of staff as necessary 3. Be polite when communicating with others including learners 4. Recognise and treat learners as part of the healthcare team, whilst having the right to give consent or decline their involvement in care, if preferred 5. Have the opportunity to contribute to the assessment of the learners' performance to support overall improvement 6. Be able to feel assured of high quality care that is safe, effective and focused on patient experience at all time including when learners are involved in their care 7. Be free to disagree but not be disagreeable 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, 9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when it pain or more vulnerable	Theme	Principles — Our Individuals should:
2. Not participate in harassment, bullying or victimisation of others, reporting concerns to a member of staff as necessary 2. Not participate in harassment, bullying or victimisation of others, reporting concerns to a member of staff as necessary 3. Be polite when communicating with others including learners 4. Recognise and treat learners as part of the healthcare team, whilst having the right to give consent or decline their involvement in care, if preferred 5. Have the opportunity to contribute to the assessment of the learners' performance to support overall improvement 6. Be able to feel assured of high quality care that is safe, effective and focused on patient experience at all time including when learners are involved in their care 7. Be free to disagree but not be disagreeable 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, 9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when it pain or more vulnerable		1. Refer to learners by the name they have introduced themselves by and respect the ways others would like to be
necessary		
Communication 3. Be polite when communicating with others including learners 4. Recognise and treat learners as part of the healthcare team, whilst having the right to give consent or decline their involvement in care, if preferred 5. Have the opportunity to contribute to the assessment of the learners' performance to support overall improvement 6. Be able to feel assured of high quality care that is safe, effective and focused on patient experience at all time including when learners are involved in their care 7. Be free to disagree but not be disagreeable 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, 9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when it pain or more vulnerable	Belonging & welcoming	2. Not participate in harassment, bullying or victimisation of others, reporting concerns to a member of staff as
4. Recognise and treat learners as part of the healthcare team, whilst having the right to give consent or decline their involvement in care, if preferred 5. Have the opportunity to contribute to the assessment of the learners' performance to support overall improvement 6. Be able to feel assured of high quality care that is safe, effective and focused on patient experience at all time including when learners are involved in their care 7. Be free to disagree but not be disagreeable 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, 9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when in pain or more vulnerable		necessary
their involvement in care, if preferred 5. Have the opportunity to contribute to the assessment of the learners' performance to support overall improvement 6. Be able to feel assured of high quality care that is safe, effective and focused on patient experience at all time including when learners are involved in their care 7. Be free to disagree but not be disagreeable 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, Professionalism (ways of interacting) 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, 9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when in pain or more vulnerable	Communication	3. Be polite when communicating with others including learners
their involvement in care, if preferred 5. Have the opportunity to contribute to the assessment of the learners' performance to support overall improvement 6. Be able to feel assured of high quality care that is safe, effective and focused on patient experience at all time including when learners are involved in their care 7. Be free to disagree but not be disagreeable 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, 9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when in pain or more vulnerable		1 Recognise and treat learners as part of the healthcare team, whilst having the right to give consent or decline
Frofessionalism (ways of interacting) Behaviours 6. Have the opportunity to contribute to the assessment of the learners' performance to support overall improvement 6. Be able to feel assured of high quality care that is safe, effective and focused on patient experience at all time including when learners are involved in their care 7. Be free to disagree but not be disagreeable 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, 9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when in pain or more vulnerable		
Professionalism (ways of interacting) 6. Be able to feel assured of high quality care that is safe, effective and focused on patient experience at all time including when learners are involved in their care 7. Be free to disagree but not be disagreeable 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, 9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when in pain or more vulnerable	Engagement	·
Professionalism (ways of interacting) 6. Be able to feel assured of high quality care that is safe, effective and focused on patient experience at all time including when learners are involved in their care 7. Be free to disagree but not be disagreeable 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, 9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when in pain or more vulnerable		
Including when learners are involved in their care T. Be free to disagree but not be disagreeable		improvement
7. Be free to disagree but not be disagreeable 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, Respect 9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when in pain or more vulnerable		6. Be able to feel assured of high quality care that is safe, effective and focused on patient experience at all times,
7. Be free to disagree but not be disagreeable 8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory, Performance of the pain or more vulnerable or more	Duefessionalism (wave of interestinal	including when learners are involved in their care
Respect 9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when it pain or more vulnerable	Professionalism (ways of interacting)	7. Be free to disagree but not be disagreeable
Respect 9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when in pain or more vulnerable		8. Express opinions and act in a way which is actively inclusive, anti-racist and non-discriminatory.
Pain or more vulnerable	Behaviours	
Pain or more vulnerable	Respect	9. Treat learners with courtesy, dignity and respect whilst being aware that conflict can occur, especially when in
10. Interest with leave and staff who assessed their informs of decision well-in a decision well-in a		
10. Interact with learners and staff who support their informed decision making about care	Collaboration	10. Interact with learners and staff who support their informed decision making about care
Collaboration		





Practice Partners

Learners

Individuals

Education Partners



↓





Governance of practice partners contribution to practice learning is routinely monitored through Practice Education Committees, learner evaluations, regulatory bodies reviews and educational audits.

Immediate and/or individual concerns can be raised by learners or others with your Practice Educator/Practice Assessor, link lecturer or nominated tutor for practice.

Governance for practice learning for learners is firstly with Practice Assessors/
Practice Educators in raising concerns and creating action plans. This should be collaboratively created and monitored with Education Partners.

Serious incidents may result in removal of the learner from the placement area during investigation or occasionally a Fitness to Practice referral. Individuals who are not able to meet these principles with learners are free to not be Involved in supporting learning in practice.

However, the principles outlined here are often part of local policies in relation to expected standards of interaction with staff and may need to be discussed further.

Governance of education partners contribution to practice learning is routinely monitored through Practice Education Committees, regulatory and professional body reviews and practice staff evaluations of placements.

Learners or practice staff can raise concerns with Student Unions, Education Leads in practice, regulatory bodies and Lead for Practice Learning in the Education provider.

Strategic governance of student learning environments is monitored by Professional Statutory Regulatory Bodies (PSRB), additional actions are required in relation to the Nursing & Midwifery Council including exception reporting by Education Partners where safety of students and/or patients is at risk in a student learning environment. Practice Partners must inform Education Partners of unexplained deaths, major incidents, CQC 'inadequate' rating, public concerns or student concerns leading to internal investigation. HCPC strategic governance is implicit within this document and no further requirements

Acknowledgements



This document is the result of contributions and support from various stakeholders across East of England without whose effort it could not have been achieved.

The Principles have been built on the work from Cambridgeshire and Peterborough Integrated Care System 'The Learner Charter', and the ambition is that they will complement national work including the 'Safe Learning Environment Charter' as well as aligning to existing standards of nursing, midwifery and AHP Professional, Statutory and Regulatory Bodies (PSRBs).

Particular note is also given to the alignment with the AHP Principles of Practice-based Learning.

Additional Resources

The following resources have been used and / or referred to in the development the East of England Principles for Practice Learning:

- NMC Code of Conduct—<u>The Code (nmc.org.uk)</u>
- HCPC Standards of Conduct—Standards of conduct, performance and ethics | (hcpc-uk.org)
- Read the professional duty of candour—<u>Read the professional duty of candour The Nursing and Midwifery Council (nmc.org.uk)</u>
- A just culture guide—<u>NHS England</u> » A just culture guide
- NHS Constitution for England—<u>NHS Constitution for England: easy reads GOV.UK (www.gov.uk)</u>
- AHP Principles of Practice-based learning—<u>AHP Principles of Practice-based Learning Digital Oct23 Final.pdf (csp.org.uk)</u>
- NMC Exceptionally report a risk—https://www.nmc.org.uk/education/quality-assurance-of-education/how-we-monitor-education-institutions/exceptionally-report-a-risk/