

## What is current knowledge and experience?

Reference: PS1-C Last Updated: 23/07/2018

If a registered professional is competent in an area of practice, they should be able to supervise and support a student for that area, providing feedback on their progress towards, and achievement of, proficiencies and skills. The practice supervisor's knowledge and experience should enable the student to meet their learning needs and outcomes; engaging and working with other registered and non-registered professionals will further enhance the student learning experience.

It's the AEI's responsibility, with its practice learning partners, to determine what this might mean in practice, provided that public protection is upheld, and students are supported to meet their learning outcomes.

Practice supervisors should be able to judge whether their own knowledge and experience is relevant for the students they are supervising. For nurses, midwives and nursing associates this aligns with [Standard 13 in the Code](#).

- Do I have the underpinning knowledge and skills that the student is here to learn, and therefore understand what the learning outcomes might be?
- If not, who else needs to be involved in supervising this student?
- What further training, education or support would I need to be able to effectively supervise this student as they learn?

Practice supervisors may or may not hold the same qualification or field of practice as the student. As an example, a student studying for a School Nursing SCPHN qualification may have their learning supervised by a SCPHN nurse leader working in a team that deals with 0–19-year-olds. They may themselves hold a SCPHN Health Visitor qualification and registration, but since they have experience of working with school aged children in their work role, they would have the 'relevant experience' and would therefore be suitable to supervise the student.

Practice supervision should be a dynamic process led by considerations for the skill mix in the practice setting as well as the intended outcomes for the student and matching them up in the best possible way.

For instance, a learning disabilities student nurse might learn about developing care plans from the registered LD nurse and learn about care plan delivery from the nursing associate working in the team. Equally they could learn about care coordination with other agencies from a social worker to gain a better understand of the practical support offered as part of the care plan.

Similarly, a student on a SPQ in community learning disabilities nursing programme could attend business planning meetings in the GP surgery that they are placed with to understand how service planning is done and the role of the specialist nursing team in service planning; or they could spend some time with the physiotherapist and occupational therapist to understand how a young person's care planning package is developed.

It should be for the local practice lead to decide who would be best placed to deliver the supervision so that the necessary knowledge and skills are learned in a safe, effective and kind way and meet the desired outcomes of the practice learning opportunity being undertaken.