

School of Human and Health Science

Standard Operating Procedure for Staff and Learners Raising and Escalating Concerns in Clinical Learning Environments: NMC/HCPC/SWE/GPhC/GDC approved programmes

Document Name	Standard Operating Procedure for staff and learners raising and escalating concerns in the clinical learning environment: NMC/HCPC/SWE/GPhC/GDC approved programmes
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1.0 Introduction and Purpose

We acknowledge the outstanding learning opportunities and high standards of patient-centred care that stakeholder organisations, NHS Trusts, private and voluntary and independent organisations (PIVO) provide. It is recognised that the majority of learners complete their placement without concerns. There can, however, be circumstances where the standard of care does not meet a satisfactory standard or the actions of learners and or health and social care partners does not reflect the professional and quality requirements set out by the University of Huddersfield, NHS England Workforce, Training and Education, quality assurance agencies or the Professional, Statutory and Regulatory Bodies (PRSB)

- Nursing and Midwifery Council (NMC)
- Health and Care Professions (HCPC)
- Social Work England (SWE)
- General Pharmaceutical Council (GPhC)
- General Dental Council (GDC)

When these circumstances arise, the need to raise, escalate, and address concerns promptly, whilst adhering to professional codes is paramount in minimising risk or limiting the potential for future risk.

This standard operating procedure is specific to the School of Human and Health Sciences and should be read in conjunction with the relevant university policies such as the complaints and fitness to practice.

1.1 This standard operating procedure aims to:

- Guide learners, university members, and learning environment colleagues in voicing concerns.
- Provide a framework to support the management of issues that may occur within the learning environment.

1.2 Concerns may include:

- Danger or risk to health and safety, such as breaching of health and safety rules or guidelines.
- Concerns relating to the quality of the learning environment.
- Issues relating to staff and learner conduct, such as unprofessional attitudes or

behaviour, including concerns related to equality, diversity and inclusion.

- Issues with care delivery involving staff members (including safeguarding vulnerable people, prevention of radicalisation, risk of exploitation and equality and diversity).
- General issues relating to care, such as concerns over resources, products, people, staffing or the organisation.
- Issues relating to the health and well-being of a colleague, which may affect their ability to practise safely.
- Misuse or unavailability of clinical equipment, including inadequate training.
- Financial malpractice, including criminal acts and fraud.

Additionally, learners may express concerns about the learning experience, including challenges in achieving assessment requirements, lack of learning opportunities, lack of practice supervision, and inability to complete assessment interviews.

2.0 Processes of Support

Escalating concerns can be uncomfortable for staff and learners, but failure to do so may cause harm. It is recognised that clear pathways from within the university and learning environments are necessary to support the raising concerns process, for learners, university and clinical staff. The following support is available.

2.1 Learner

Learners should be signposted to the support available at the earliest opportunity. The support available includes:

- Practice supervisor/assessor
- Nominated person within the learning environment
- Organisational education team/manager
- Freedom to Speak up champion within the clinical environment
- Personal academic tutor
- Link tutor/Visiting tutor/Clinical practice educator
- Academic assessor
- Student Engagement Team
- Student Wellbeing Service
- Students' Union
- Occupational Health

2.2 University Staff

Whether escalating a concern or supporting learners, staff may need to seek support with either process or during/following a concern to debrief. The support available includes:

- Course Leader
- Subject Area Leads
- Head of Practice Education/Subject Area Lead for Nursing Practice Education, Simulation and Skills.
- Head of Department
- Staff wellbeing services
- Occupational health
- Employee assistance programme
- Trade union

2.3 Learning Environment Staff

Whether escalating a concern or supporting learners, staff within the learning environment, such as practice educators, supervisors or assessors, may need to seek support with either process or during/following a concern to debrief. The support available includes:

- Organisational education team
- Learning environment manager
- Concern leads from the university such as link tutor, visiting tutor, clinical practice educator, clinical educator, academic assessor, or Head of Practice Education/ Subject Area Lead for Nursing Practice Education, Simulation, and Skills.
- Organisational Safeguarding lead
- Freedom to Speak Up champion
- Trade union

3.0 Process for raising and escalating concerns

Should a learner wish to raise a concern they should consult with the organisational education team/manager, clinical practice educator (PE), practice supervisor (PS), practice assessor (PA), or nominated person within the organisation. If this is not possible the learner should contact the clinical practice educator for the university or Freedom to Speak Up champion for the organisation.

If staff within the learning environment wish to raise a concern about a learner, they should contact the organisational educational team and the academic assessor.

Concerns must be raised verbally and a contemporaneous and factual record of the events at the time recorded by the person raising the concern. The earlier a concern is escalated, the easier it is to take action. If a concern is unresolved, the relevant escalation process, which is outlined in Appendix 1-4, should be followed. There are four escalation processes:

- Escalation Process 1 -Learner raises concerns regarding supervision, assessment, and support in practice.
- Escalation Process 2- Staff within the learning environment have concerns about a learner's progress, professional behaviour, health, or well-being.
- Escalation Process 3 -Learner raises concerns regarding a practice learning environment.
- Escalation Process 4 -Quality concern is raised regarding a practice learning environment where there is immediate or pending risk to the safety of learners, public or service user.

Examples of the nature of a concern are shown in table 1

Table 1 -Nature of concern and escalation process to follow. <i>Please note that these are examples, and this list is not exhaustive</i>	
Escalation process 1 Clinical Incidents Affecting Learner Needlestick Injury Physical injury, sprain or strain of a limb or spine Slips, trips & falls	Escalation process 1 Supervision in Practice Learners are not allocated to a practice assessor/practice supervisor/practice educator and/or their supernumerary status is not upheld Delays in the assessment processes
Escalation process 2 Professional Issues Fraudulent activity Inappropriate use of social media Learner not arriving at practice learning environment	Escalation process 2 Clinical Incident Affecting Patient / Client Medication Error Working outside of the scope of practice

Escalation process 2	Escalation process 3 &/or 4
Health & Well-Being of Learner Safeguarding issues Signs of deteriorating Mental Health Signs of Neglect /Verbal / Physical	Learning Environment Concerns have been raised about the care delivery within the learning environment. Witnessing poor practice. Racism/bullying Unexpected patient death

4.0 Roles and responsibilities within raising and escalating concerns

It is crucial to understand the roles and responsibilities of staff within the context of raising concerns and supporting learners within this process.

4.1 Practice supervisor

The practice supervisor supports and supervises the learner in the learning environment.

Should a learner raise a concern the practice supervisor should provide support to address the concern, escalating to the practice assessor as needed. Should the concern relate to a learners conduct and competence, they should initially explore this with the learner, involving the practice assessor, organisational education team, as needed and the academic assessors, should performance not improve. The practice supervisor should escalate their concerns to the organisational team, practice assessor and the academic assessor immediately if there is a risk to public protection.

4.2 Practice assessor/educator

The practice assessor assesses and confirms the learner's achievement of practice learning objectives within practice learning experiences.

Should a learner raise a concern, the practice assessor will provide support to address the concern, escalating to the organisational education team and academic assessor. Should the concern relate to a learner's conduct and competence, the practice assessor in collaboration with the organisational educational team and academic assessor, should explore this and develop a SMART action plan.

The practice assessor should escalate their concerns immediately to the organisational education team and academic assessor if there is a risk to public

protection. The organisational education team will inform the Head of Practice /Subject Area Lead for Nursing Practice Education, Simulation and Skills.

4.3 Nominated person

The nominated person is a member of staff within the learning environment not directly working with the learner, to whom the learner can take any concerns.

Learners can raise concerns with the nominated person at any time. The nominated person will support and advise the learner with regards to their concern, escalating where needed to the organisational education team/manager.

4.4 Organisational educational team

The organisational education team (clinical educators/PLFS/Educator) provides support, guidance, and clinical education to staff and learners to oversee, support and enhance the student experience.

Learners can raise concerns with the organisational education team at any time. The team will support and advise the learner regarding their concern. They will collaborate with the academic assessor, investigating where necessary, and notify the Head of Practice Education/ Subject Area Lead for Nursing Practice Education, Simulation, and Skill at the University of Huddersfield where necessary.

4.5 Organisational manager (ward manager, home manager)

The organisational manager monitors the area and staff performance, adhering to local and National Guidance, and ensuring patient care is of a high and safe standard.

Learners can raise concerns with the organisational manager at any time. The organisational manager will support and advise the learner along with the team and investigate the concern. They will collaborate with the academic assessor and notify the Head of Practice Education/ Subject Area Lead for Nursing Practice Education, Simulation, and Skill at the University of Huddersfield where necessary.

4.6 Freedom to Speak-up-Champion/Guardian

The Freedom to Speak Up Champion/Guardian aims to offer support and help to bridge any barriers that may prevent a learner from speaking up with the learning environment. They will signpost and escalate within the organisation as needed.

4.7 Link tutor/ Visiting tutor/Clinical Practice Educator

The link tutor/visiting tutor/clinical practice educator works in partnership with learning environment colleagues to develop and maintain the quality of the learning environment.

Should a concern be raised related to the quality of a learning environment, the link tutor/visiting tutor/clinical practice educator should support the learner and investigate the concerns raised within 3 working days. In the event the link tutor/visiting tutor/clinical practice educator is unavailable, the academic assessor/practice educator should collaborate with the organisational educational team in undertaking an investigation. A factual record should be maintained.

If the concern relates to learner experience a summary should be documented in the practice assessment document.

If the concern relates to the quality of the learning environment, in collaboration with the organisational education team, area manager, and the link tutor/visiting tutor/clinical practice educator, an action plan should be created within OnlinePARE.net -Practice Assessment Record and Evaluation (PARE) with clear review dates set. The learner supported by the Link tutor/visiting tutor/clinical practice educator should complete the escalating concerns form found in all practice module in brightspace, attaching any evidence such as statements. The link tutor/visiting tutor/clinical practice educator should report the concern to the appropriate course leader, who will also receive an automatically generated email alerting them of the filed escalating concerns form. The course leader will complete the actions taken section on the concerns form within 3 working days. If necessary, the course leader or the Link tutor/visiting tutor/clinical practice educator will escalate the matter to the Head of Practice Education/Subject Area Lead for Nursing Practice Education, Simulation, and Skills.

Should the learning environment be deemed unsafe for learners, or be in breach of the University and regulatory standards, the Head of Practice Education/ Subject Area Lead for Nursing Practice Education, Simulation and Skills, in consultation with the organisational designated person and on reviewing the evidence, will, Remove learners from the learning environment informing the organisational educational team.

Suspend the use of the learning environment (informing the university placement team) until learner safety and PSRB regulations are assured, communicating the concern to other Approved education institutions (AEIs) using the area.

Collaborate with the organisational designated person, create an action plan with clear time frames, and where necessary submit an exceptional report to NHSE, HCPC, GPhC, GDC, and NMC.

Inform the University NMC correspondent, Safeguarding Lead, Head of Department, and the Dean where needed.

4.8 Personal Academic Tutor

The personal academic tutor encourages academic growth and offers support and signposts to relevant services such as the student engagement team.

When the personal academic tutor is notified of a concern regarding the quality of the learning environment, they should inform the link tutor/visiting tutor/clinical practice educator, who should meet with the learner, organisational education team, and area manager within 3 working days to address the concern. If the link tutor/visiting tutor/clinical practice educator is unavailable, the academic assessor/practice educator should address the concern. The personal academic tutor should offer the learner the opportunity to meet with them within 3 working days, signposting the learner to the student engagement team for further support.

4.9 Academic assessor /practice educator

The academic assessor /practice educator confirms and collates progression and supports the assessment process.

Should the concern relate to learner supervision and assessment the practice assessor and link tutor/visiting tutor should inform the academic assessor/practice educator and the organisational education team of the concerns. The practice assessor and academic assessor along with the organisational education team should meet with the learner within 3 working days, creating an action plan with clear time frames, and ensuring clear documentation within the practice assessment document. It is the responsibility of the practice assessor in collaboration with the learner to create the action plan. In the event of the Academic assessor/practice educator being unavailable, the link tutor should address the concern.

If a learner's concern persists the escalating concerns form found in all practice modules in Brightspace should be completed. If the concern relates to the learner's progress, professional behaviour, health, or well-being, an action plan should be put in place, consider referring them to occupational health. **NB** This must be with the learner's consent. Consideration should be given to the fitness to practice or fitness to study process and referral made by the academic assessor where necessary.

Learners where possible and the course leader should be made aware of this. An example of the concerns form is provided within the standard operating procedures (Appendix 5). The course leader will also receive an automatically generated email alerting them of the submitted concerns form, in which they will address and complete the actions taken section within 3 working days. If necessary, the course leader or the academic assessor/practice educator will escalate the matter to the Head of Practice Education/Subject Area Lead for Nursing Practice Education, Simulation, and Skills.

If the learner is deemed unfit or there is a risk to a learner or patient safety, the Head of Practice Education/Subject Area Lead for Nursing Practice Education, Simulation, and Skills in collaboration with the organisational education team will temporarily remove the learner from the learning environment pending investigation. He/she will submit the Precautionary Measures Risk assessment to the Pro Vice Chancellor for review and authorisation of ongoing removal, pending fitness to practice or fitness to study investigation. The Head of Department and Dean will be informed of the actions taken.

At all stages including the organisational education team sending a learner home from practice, the learner should be referred to the student engagement team and the academic assessor informed.

4.10 Course leader

The course leader has an overview of the programme and is responsible for managing the quality and delivery of the course.

The course leader will review, action, and complete the actions section of the concerns form within 3 working days. If necessary, escalate the matter to the Head of Practice Education/Subject Area Lead for Nursing Practice Education, Simulation, and Skills. The course leader will monitor for trends and share this with the course teams to action within specific modules or individual roles such as personal academic tutors and or academic assessors. These trends and actions will be reported in the course leader's annual report and shared with the NMC correspondent for reporting within the annual self-assessment report.

4.11 Head of Practice Education/Subject Area Lead for Nursing Practice Education, Simulation and Skills

The Head of Practice Education (HoPE) for Nursing/Allied Health Professionals & Midwifery/Subject Area Lead for Nursing Practice Education, Simulation, and Skills (SAL for Practice) works collaboratively with key stakeholders, learners, and university teams to support, develop and maintain the quality of the learning experience.

The HoPE/SAL for Practice is responsible for raising, escalating, investigating and reporting concerns to stakeholder organisations, Trusts, private voluntary and independent organisations (PIVO), Senior Education Leads, and managers. Concerns will normally be escalated within two working days depending on the

concern raised.

Working collaboratively with the designated person from Trusts and private voluntary and independent organisations (PIVO), the HoPE/Subject Area Lead for Nursing Practice Education, Simulation and Skills is responsible for exceptionally reporting concerns where relevant to the NMC, HCPC, SWE, GPhC, GDC, and NHSE, escalate where necessary to the safeguarding lead within the university.

4.12 Safeguarding Lead

The safeguarding champion/Lead is a supportive role and can provide advice and guidance on any issue relating to safeguarding and prevent concerning students /learners or staff.

The Department and University Safeguarding lead must be notified immediately of any concerns regarding the safety of learners or patients. The Safeguarding Lead will action within the university guidance and feedback to the Head of Practice and Head of Department as needed.

It must be noted anyone can escalate a concern to the safeguarding lead via telephone or Safeguarding - University of Huddersfield and/or the Care Quality Commission (CQC) <https://www.cqc.org.uk/>.

4.13 Student Engagement Team

The Student Engagement Team provides advice, guidance, and ongoing support covering a range of non-academic issues to all learners throughout their course.

For learners who encounter challenges and circumstances that have an impact on their well-being, mental health, or welfare during their studies, including their placement, or who are unsure where to access information, the Student Engagement Team offers an initial “front line” support service. The Student Engagement team works flexibly to respond to the needs of learners to determine what help and support is needed both immediately and medium term. The Student Engagement team can signpost learners to the central support services within the university such as the Wellbeing service, Disability service, and The Students Union

advice centre.

Students can book appointments with the Student Engagement Team using the following link: [Student Engagement Team Booking Link](#)

Please note learners should be sign-posted to the student engagement team at any point during the concerns process.

4.14 Student wellbeing service

Learners may encounter challenges and circumstances that have an impact on their well-being, mental health, or welfare during their time at university. The [Student Wellbeing Service](#) provides emotional and well-being support to learners and helps them engage with their studies whilst dealing with such circumstances. They offer support to learners, through listening, information, advice, and guidance, and offer practical strategies and interventions.

4.15 Student union

The provides Student Union learners with advice and support if they are having problems or concerns. They can support learners with completing statements. They can represent the learner and their interests, signposting to available support.

4.16 Occupational Health

Occupational Health provides support and advice in the following areas:

- Adjustments to help individuals whilst studying at the University and whilst on placement.
- Advice on where to obtain further help and support.

Academic staff can refer a learner for support having discussed this with the learner and consent obtained. Once a referral is made the academic is required to inform the course leader and record it in the learner's records

Learners can self-refer if they have a health concern that they feel they cannot discuss with a member of the academic staff, by emailing occupational.health@hud.ac.uk

4.17 Health and Social Care Providers

All health and social care providers are required to report any concerns to the university promptly using the relevant escalation process as shown in Appendix 1-4 and via the monthly DATIX reporting system. This allows the university to promptly support learners, and address concerns raised through action planning. This includes any pending CQC reports that could impact the learner such as 'inadequate', never events, and incidents that involve the University of Huddersfield learners which are documented in the monthly Datix return to the Head of Practice Education /Subject Area Lead for Nursing Practice Education, Simulation and Skills. This will enable the evaluation of risk and ensure any escalation to the professional and, or regulatory bodies such as the NMC, HCPC, GPhC, GDC and NHSE are completed in partnership with the designated person.

Any investigation involving a learner must be in collaboration with the University.

Should a learner need to be interviewed in relation to an investigation, a member of the university **must** be present.

5.0 Sharing Intelligence

By sharing intelligence about emerging trends and concerns, learners, academic teams, and learning environment providers can better prepare for and respond to escalating issues, fostering resilience and minimizing harm within a no-blame culture.

The following communications in line with GDPR guidance can be used to achieve this.

5.1 Sharing intelligence with learners

- Individual feedback to the reporting learner
- Induction at each part of the programme
- Simulated learning sessions within each part of the programme
- The use of case studies within practice modules
- Academic assessor sessions with practice modules
- Student panel
- Course committee
- Student voice representatives

5.2 Sharing intelligence with university staff

- Feedback at Department away days
- Subject Area meetings
- Head of practice education/Subject Area Lead for Nursing Practice Education, Simulation, and Skills update meeting
- Academic assessor preparation and yearly update
- Department Leadership team
- Senior Leadership Team

5.3 Sharing intelligence with learning environment staff

- Practice Placement Quality Group (PPQC)
- School Executive Partnership Meetings

5.4 Sharing intelligence with other AEI's in line with the NHS England funding agreement

- Directors of Practice – West Yorkshire based.
- Pan Midlands Yorkshire and East Practice Learning Group
- Greater Manchester Practice Learning Group

6.0 Monitoring Compliance and Effectiveness

The Heads of the Practice Education for Nursing, AHP, and Midwifery will review the effectiveness of this standard operating procedure regularly, taking into consideration local and national drivers. A formal review will be undertaken annually.

7.0 Useful Links

Association of Directors of Social Services (Northern Ireland, Wales and England).

(2005), *Safeguarding adults A national framework of standards for good practice and outcomes in adult protection work.*

Department of Health. (2010). *Confidentiality: NHS code of practice*

General Dental Council Raising a concern if you work in dentistry

General Pharmaceutical Council Reporting concerns

GOV. UK. (2023), *The NHS constitution for England*.

GOV.UK. (2023), *Care and support statutory guidance*.

HCPC. (2024), *Fitness to practice - raising concerns*.

NHS England. (2024), *Safe learning environment charter*.

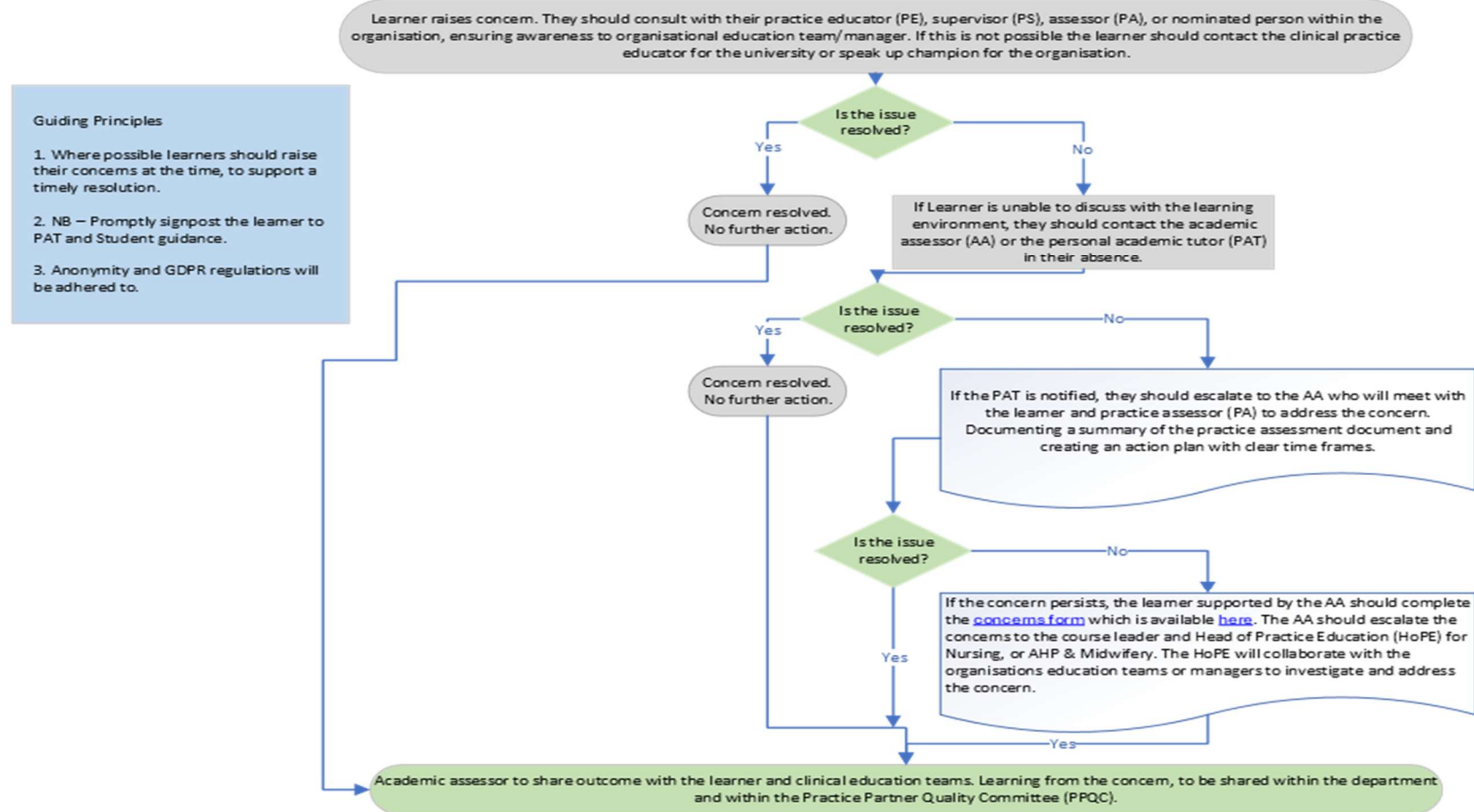
NHS England, & National Guardians Office. (2022). *NHS-freedom-to-speak-up-guide-eBook*.

Social Work England. *Concerns*. <https://www.socialworkengland.org.uk/concerns/>

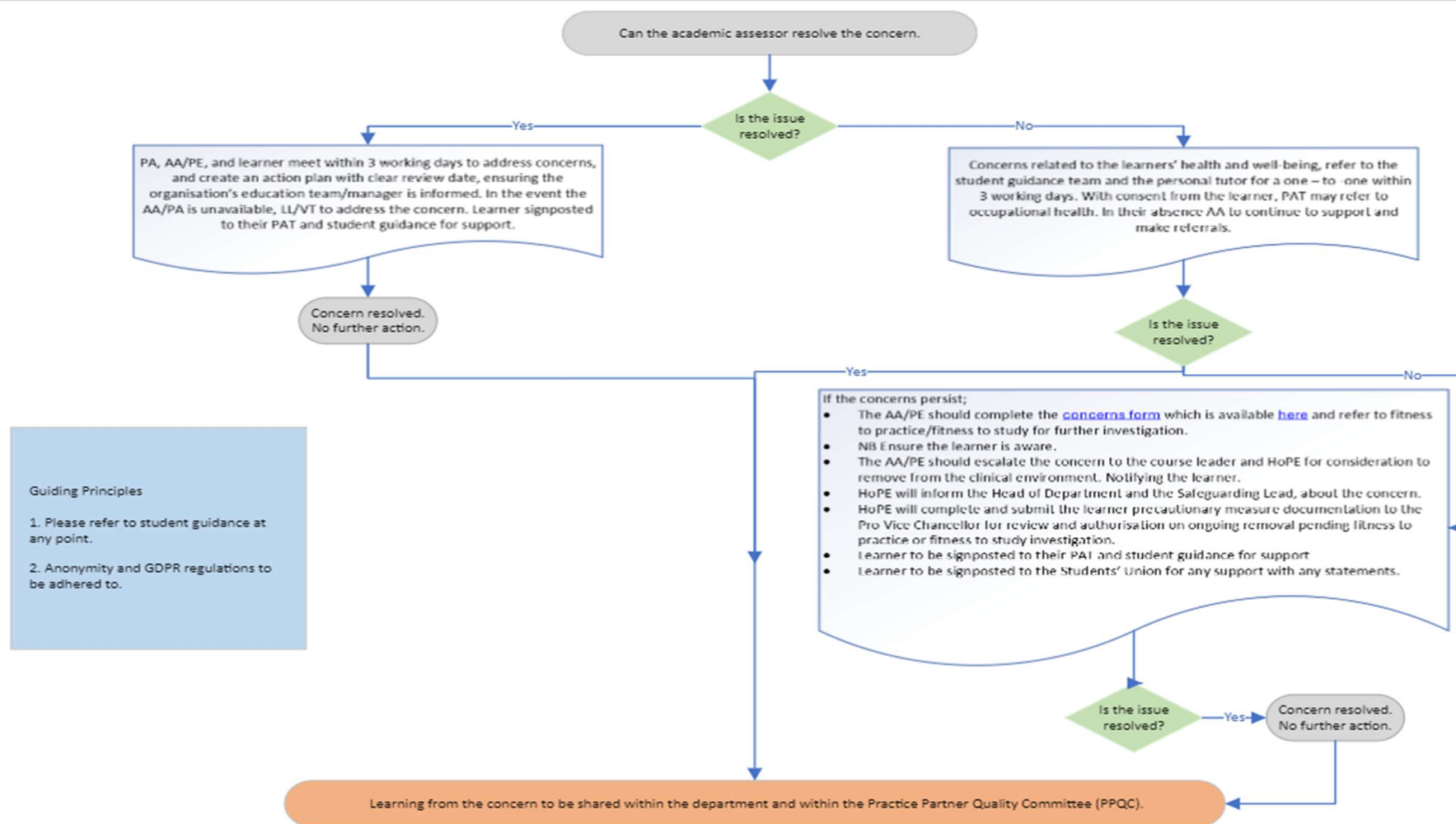
University of Huddersfield. (2021). *Freedom to speak up: Public interest disclosure (whistleblowing) policy*.

Escalating Concerns Process Appendices 1-5

Escalation Process 1 – Learner raises concern regarding supervision, assessment and support in practice.



Escalation Process 2— Learning environment has concerns about a learner's progress, professional behaviour, health or well-being.

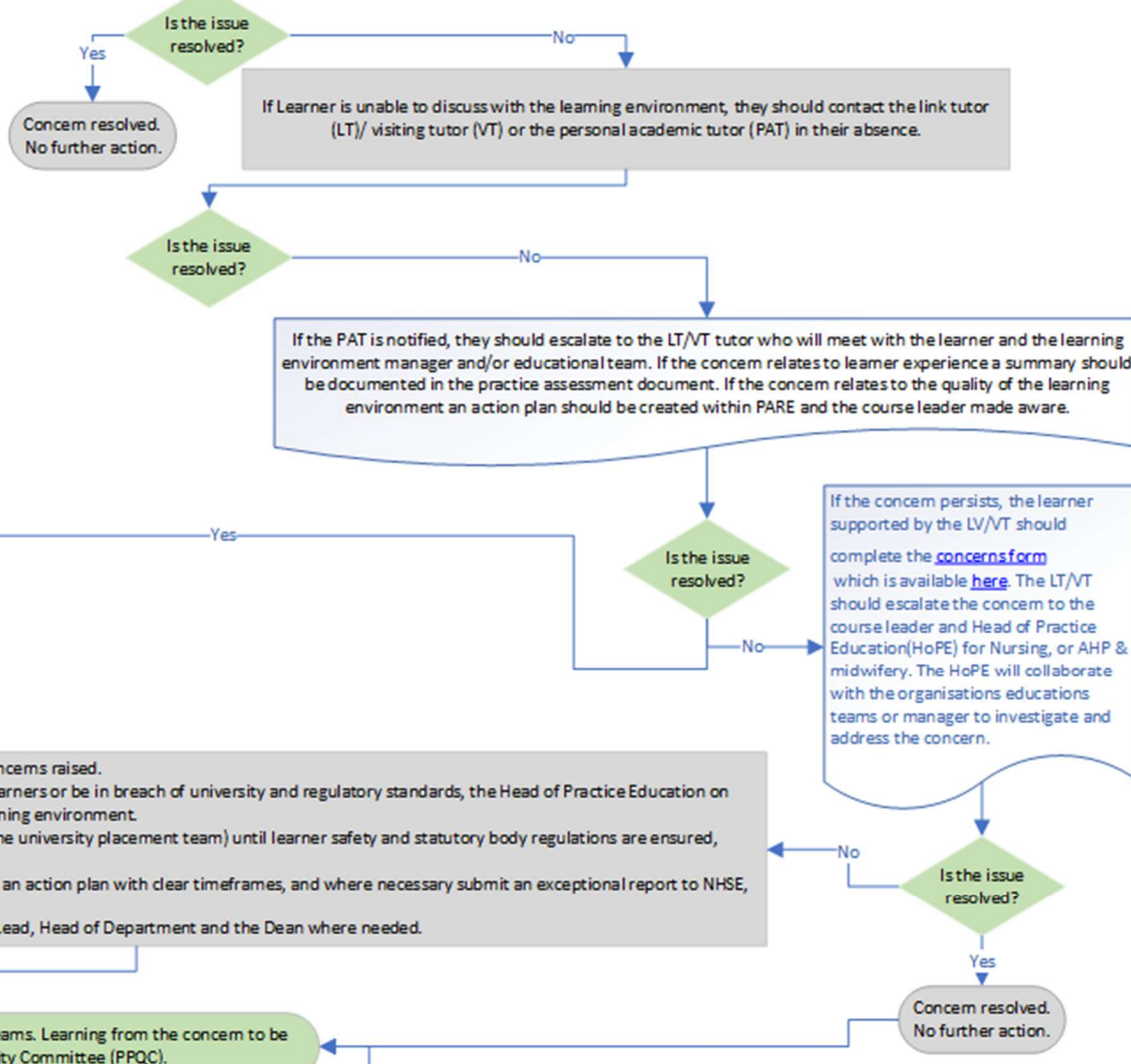


Escalation Process 3 – Learner raises concern regarding a practice learning environment.

Learner raises concern. They should consult with their practice educator (PE), supervisor (PS), assessor (PA), or nominated person within the organisation, ensuring awareness to organisational education team/manager. If this is not possible the learner should contact the clinical practice educator for the university or speak up champion for the organisation.

Guiding Principles

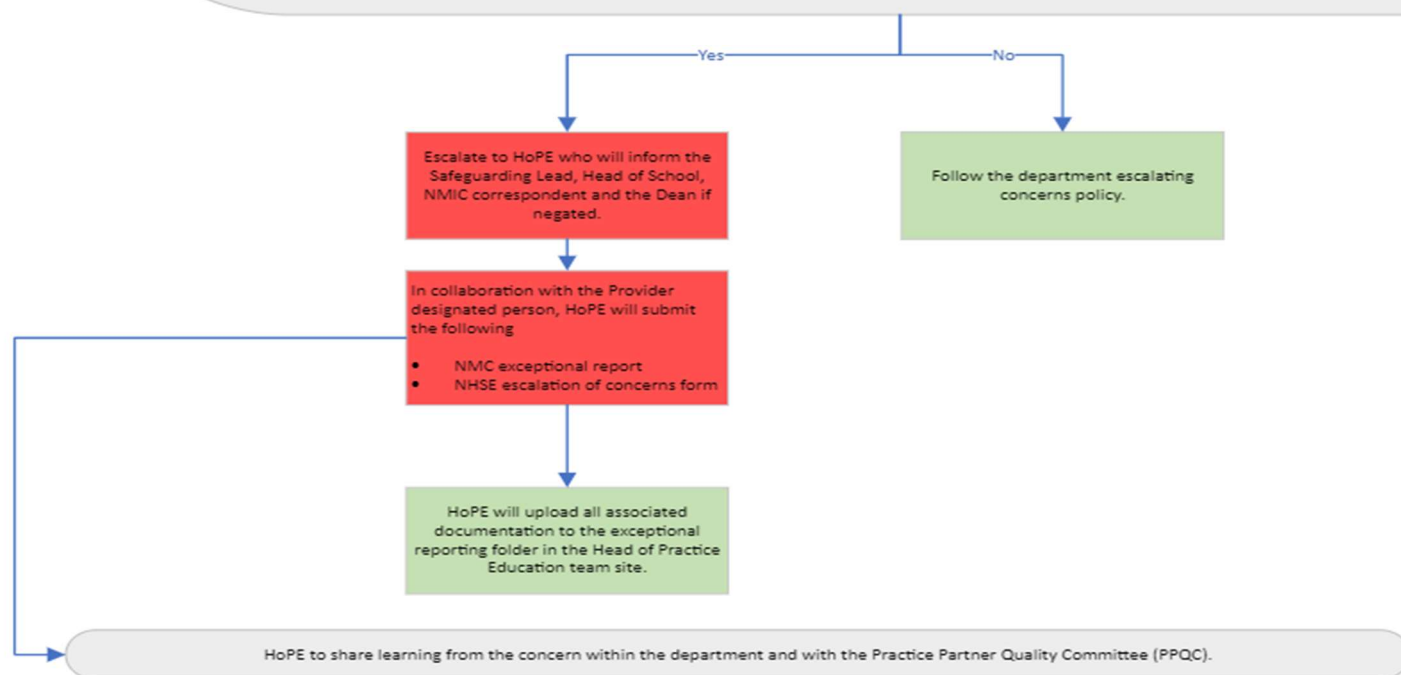
1. Where possible learners should raise their concerns at the time, to support a timely resolution.
2. Where possible and with support of the learner they should remain in the area.
3. Anonymity and GDPR regulations will be adhered to.



Escalation Process 4 – Quality concern regarding a practice learning environment.

Does the concern relate to any of the following statements?

- There is an immediate or impending risk to the safety of learners, members of the public, or service users.
- An unexpected or unexplained death has occurred.
- A major incident has occurred.
- A placement provider partner has been rated as 'inadequate' by the Care Quality Commission (CQC). NB Needs improvement does not need this.
- Significant concerns have been raised by a member of the public.
- Learners have raised any complaints leading to an internal investigation.



Appendix 5 - Escalating Concerns Form

Appendix 5 - Escalating Concerns Form

This form is for learners supported by either their academic assessor/practice educator or link tutor/visiting tutor to complete as part of the relevant escalation process within the Raising and Escalating Concerns Standard Operating Procedure. Before submitting this form, please ensure you are familiar with the content and processes within this document.

Please note this is the **word version for example** only and the link to the electronic form is [here](#).

By submitting this form, you agree, that information may be shared for investigative purposes with senior practice staff, relevant University staff, or statutory bodies or services were deemed necessary. Whilst every attempt will be made to maintain anonymity, this cannot be guaranteed.

Nature of concern and process (please tick relevant boxes)			
Escalation Process 1 -Clinical Incidents Affecting Learners Needlestick Injury Physical injury, sprain or strain of a limb or spine Slips, trips & falls		Escalation process 1-Supervision in Practice Learners are not allocated to a practice assessor/practice supervisor/practice educator and/or their supernumerary status is not upheld Delays in the assessment processes	
Escalation process 2-Professional Issues Fraudulent activity Inappropriate use of social media Learner not arriving at practice learning environment		Escalation process 2-Clinical Incident Affecting Patient / Client Medication Error Working Outside of the Scope of Practice	
Escalation process 2-Health & Well-Being of Learner Safeguarding issues Signs of deteriorating Mental Health Signs of Neglect /Verbal / Physical		Escalation process 3 &/or 4-Learning Environment Concerns have been raised about the care delivery within the learning environment. Witnessing poor practice. Racism/bullying Unexpected death	
Details of the Learner and Learning Environment			
Name of learner			
Learner ID Number			
Programme			
Cohort & Year of study eg January 2024- year 1			

Name and address of clinical learning environment (inc ward/department)			
Link tutor/placement educator/clinical practice educator			
Personal Academic Tutor			
Academic Assessor			
Details of the concern			
Name, title, and date of the individual completing the form			
Details of the learner's practice educator/assessor including email address			
Date of incident/concern			
Location of incident			
Details of incident			
Summary of actions taken to address the concern and by whom			
Date learning environment made aware of the concern			
Date learner signposted to the <u>Student Engagement Team</u> by the link tutor/visiting tutor, academic assessor/practice educator, personal academic tutor, clinical placement educator, or course leader. (Please circle the relevant designation).			
Internal University Processes			
	Yes	No	N/A
University staff referrer completes and reviews the concern with the learner before submission			
Audit checked by link lecturer/ clinical practice educator (if the concern relates to the learning environment) (NB a reaudit may be required)			
Care Quality Commission reports for the area reviewed by link lecturer/ clinical practice educator (if the concern relates to the learning environment)			
Learner evaluations checked by link lecturer/ clinical practice educator, if the concern relates to the learning environment or academic assessor if concern relates to SSSA			
Action plan and review date agreed with the link lecturer/clinical practice educator, learning environment and organisational			

educational team. manager (if the concern relates to the learning environment)			
Learning environment is confirmed as a suitable placement for learners by link lecturer/ clinical practice educator/academic assessor (if not discuss with the Head of Practice who will inform the placement team accordingly)			
Escalated to Course Leader by staff member involved			
Escalated to Fitness to Practice/Study by the referrer			
Escalated to Head of Practice Education/Subject Area Lead for Nursing Practice Education, Simulation and Skills			
Escalated to University Safeguarding lead			
Escalated to the provider designated person			
Escalated to Care Quality Commission (where appropriate)			
Reported to the statutory body NMC, HCPC, SWE, GPhC, GDC by Head of Practice Education/ Subject Area Lead for Nursing Practice Education, Simulation and Skills			
Reported to the university NMC correspondent			
Reported to the NHSE by Head of Practice Education/Subject Area Lead for Nursing Practice Education, Simulation and Skills.			
Escalated to Head of Department by Head of Practice Education/Subject Area Lead for Nursing Practice Education, Simulation and Skills.			
Escalated to the Dean by Head of Practice Education/Subject Area Lead for Nursing Practice Education, Simulation and Skills or Head of Department			
Outcome of the concerns and any actions taken to be completed by the course leader (HoPE /SAL for Practice only to complete if involved).			
Confidential summary of the outcome is shared with the learner			
Learning from the concern shared with the Department teams (where appropriate)			
Learning from the concern shared with partners via PPQC (where appropriate)			
Concern closed by either course leader or Head of Practice Education/Subject Area Lead for Nursing Practice Education, Simulation and Skills. (latter only if escalated to the HoPE/SAL)			
Copies of the concern and evidence to be sent to the relevant course operation team and saved under the learner's name and number			