Consultation on the new roles of Supervisor and Assessor in practice: make your voice heard

Following my column in June 2017’s edition of BJN (Rosser 2017) regarding the proposed Nursing and Midwifery Council (NMC) consultation on the new pre-qualifying nursing and midwifery standards, I would like to consider in more detail, the three proposed roles of Practice Supervisor, Practice Assessor and Academic Assessor. These three new roles are proposed in Annexe 1 of the Education Framework: Requirements for Learning and Assessment for all Nursing and Midwifery Programmes (NMC 2017). The consultation opened on 13th June 2017 and closes on 12th September 2017. These proposals present a radical departure from the current system of support and assessment for student nurses and midwives, so, this is your chance to comment. In order to help you formulate your own views, I would like you to think of the practical challenges that the proposals present.

Practice supervisors: Historically, the NMC proposed a model of mentorship which required mentors to both support and formally assess students in practice. Given that in business circles, mentorship was introduced purely to guide the novice practitioner and to nurture, educate and protect their interests (Foster et al 2015), it could be argued that the NMC interpretation of the role compromised mentors’ ability to truly support the student as well as objectively assess them. So, the new proposals rightly separate the supervision and support from the formal assessment of the student’s competence. They allow the new practice supervisor to focus on supporting and guiding, yet offering an opportunity to contribute to the assessment without acting as final judge. This supervisor role can be any registered health and social care professional and not restricted to registered nurses. This should promote a greater engagement with interprofessional learning.

Practice Assessor: This role clearly stipulates the role is about the formal judgement of a student’s learning in practice. The practice assessor confirms students’ achievement of the required learning outcomes and standards of proficiency in practice.

Academic Assessors: I am unclear what this role refers to in terms of the oversight and assessment of students. Some of the recent informal discussions in webinars and meetings seem to suggest that this role refers to those academics who have strategic oversight of particular stages in the academic programme. However, it reads as though it refers to all academics involved in the formal theoretical assessment of student nurses and midwives. Many universities employ specialist sociologists, psychologists and biologists to deliver specific aspects of the prequalifying programmes. These ‘ologists’ are not nurses but specialists in their specific field and I believe offer a significant contribution to the delivery of the different programmes. With the move to a modularised system of education delivery, this requirement for academic assessors to be registered nurses may mean that the ‘ologists’ would deliver significant sections/modules of the curriculum but not be permitted to assess them. This would present a considerable challenge to resources in many universities.

Together, all three roles present a significant change to the current system of facilitation and assessment of nursing and midwifery students. Whilst the NMC seem to have devolved a substantial element of the governance of these roles to the universities, it does mean that each university will be responsible for dictating and monitoring the following:
1. The preparation and support for all three roles. There is no requirement now for supervisors and assessors of students to undergo and achieve an accredited module to act in these roles. So, for those of you who are currently mentors and sign-off assessors, what preparation would you deem appropriate? Would an online workbook approach, to be completed by the individual be ‘sufficient’? Or, might a half/one or two-day workshop better enable supervisors and assessors to be familiar with the expectations of the particular programme and the assessment requirements? Perhaps a one-hour webinar would suffice? What would you recommend?

2. The practice supervisor cannot also act as practice or academic assessor for the same student on the same part of the education programme. This means that the individual supervisor/assessor would need to take responsibility to avoid any overlap. However, when the university/practice providers are audited, how can we be sure that any duplication of role is avoided? Additionally, can we be sure that we have sufficient practitioners on the ground to keep the role of support and assessor distinctly separate?

3. The NMC suggest that it is the responsibility of the university/practice partnership to determine the adequacy of numbers in the role of supervisor and assessor. Might this be different across the country? What recommendation would you give?

4. There is a requirement for supervisors and assessors to receive ongoing support to perform their role. Who might deliver this support and how might it be delivered and measured when it comes to auditing?

5. Importantly, “practice supervisors must have sufficient opportunities to engage with practice assessors and academic assessors to share their views on the learning and achievement of the students they are supervising” (NMC 2017, p4). In the busy clinical environments where supervisors and assessors work, how might this be organised? How might it be measured for auditing purposes?

So, there are many questions that lie behind the NMC recommendations and I urge you to put your own views forward. This is your chance to influence the preparation of the next generation of professional nurses. Education does matter. Make yourself heard.


Professor Elizabeth Rosser, 26.7.17