**Trainee Nursing Associate (TNA) Programme**

**TNA Final Evaluation**

As part of the development of the TNA/ NA role it is important that we evaluate the role and programme to ensure that it meets the future needs of the Trust and ensure standardisation of the role, both here and across the Devon STP. This information will also be used to feedback to the national group looking at the development of this role. As you are nearing the end of your TNA programme could you please find time to complete the following questions to help us identify what has worked well and areas we need to review. Your participation in this review will remain confidential. Thank you

Department …… ………………………………………………………………… Position…….………………………………

**\*1 = not at all 5 – Very**

|  |  |  |
| --- | --- | --- |
|  |  | **Comment** |
| 1. How well prepared was your assessor/ supervisor/ dept. to support this role? |  | **\*1 2 3 4 5**  |
| 3. As the TNA is part of the numbers how often were you able to work with your assessor/ supervisor on developing your band 4 skills as protected learning time? | DailyWeekly Fortnightly MonthlyLess often |  |
| 2. In your opinion does the rotation model used allow adequate time for the TNAs to gain experience from a range of settings? | **Y/N** |  |
| 6. Did you feel well prepared for your academic study, either prior to or during the initial stages of you studies? | **Y/N** | ***How?*** |
| 7. Did you receive enough support with your academic work? | **Y/N** | **If no what support would have been beneficial** |
| 8. Did the academic subjects cover the requirements of the TNA role?  | **Y/N** | **If no what subjects would have been beneficial** |
| 9. Are there particular subjects that you found difficult, if so why? | **Y/N** | **If yes why?** |
| 10. What factors helped or hindered your progress in the following settings:academic/ placement |  |  | **Helped**  | **Hindered** |
| **Academic** |  |  |  |
| **Placement** |  |  |  |
| 11. How were you supported with protected learning time in placements? |  |  |
| 12. What impact do you feel the range of placements has had on your ability to provide patient care |  |  |
| 13. Were you able to achieve competence in medicines management during your final placements? | **Y/N** | ***If no please explain why not*** |
| 14. Do you think the NA role would benefit from other skills not met to ensure they are fit for purpose at the end of the programme? | **Y/N** | ***Please identify*** |
| 15. How has your role as a TNA helped to improve patient care? |  |  |
| 16. Do you understand the role and responsibilities of the Registered Nursing Associate? | **Y/N** |  |
| 17a. Do you understand the NMC standards of proficiency for nursing associates?17b. How does the NA role differ from a registered nurse  | **Y/N** |  |
| 18.Do you feel other staff now have an understanding of this role? | **Y/N** |  |
| 19. How clear are you about accountability and delegation in relation to the T/NA role? |  | **\*1 2 3 4 5**  |
| 20. How well prepared and confident to do you feel to undertake the Registered Nursing Associate role? |  | * Very prepared
* Somewhat prepared
* Not very prepared
* Not at all prepared
* Don't know
 |
| 21. How confident do you feel to undertake the following as a registered NA?* Identifying risks to the people you are caring for when it is needed.
* Making decisions about people’s care requirements
* Working effectively with health and social care colleagues from different organisations
* Supporting the Registered Nurses to assess and review care plans
* Identifying actions to mitigate risks to the people you care for
* Identifying people's care requirements
* Working effectively with health and social care colleagues within your organisation
* Tailoring the care you deliver to the needs of individual patients/ service users
* Demonstrating leadership capabilities when it is needed
 | **Very confident** | **Confident** | **Unsure** | **Not at all confident** |
|  |  |  |  |
| 22. What do you see as the next steps in your future career? |  |  |
| 23. Please give any additional comments about the programme, placements, administration etc. that you feel has worked well or would help to improve the TNA programme. |  |  |

**Thank you for completing this questionnaire.**

**Please return to:** plh-tr.tnaprojects@nhs.net