

# Supporting nursing students in practice with a dyslexia and / or a dyspraxia.

---

## *Practice supervisors/assessors A guide for practice supervisors and practice assessors and students on placement*

This document is designed to give advice about dyslexia and dyspraxia in the clinical setting. It provides strategies and reasonable adjustments to enable students with a dyslexia and / or a dyspraxia to reach their potential on placement.

## **Contents**

<b>Introduction</b>	<b>2</b>
<b>What is Dyslexia</b>	<b>2</b>
<b>What is Dyspraxia (Developmental Co-ordination Disorder (DCD))</b>	<b>2</b>
<b>Impact of Dyslexia and Dyspraxia (SpLD) in the Clinical Setting</b>	<b>4</b>
<b>Strengths Associated with SpLD</b>	<b>4</b>
<b>Placement Difficulties</b>	<b>5</b>
<b>The emotional impact of SpLD</b>	<b>7</b>
<b>The Law, Reasonable Adjustments and Disclosure</b>	<b>8</b>
<b>The Law</b>	<b>8</b>
<b>Reasonable Adjustments</b>	<b>8</b>
<b>Support in Practice</b>	<b>11</b>
<b>Initial Meeting</b>	<b>12</b>
<b>Strategies to Support Students</b>	
<b>Memory, listening and speaking</b>	<b>13</b>
<b>Organisation and time management</b>	<b>17</b>
<b>Writing and recording information</b>	<b>19</b>
<b>Reading</b>	<b>21</b>
<b>Dealing with Medication and Drug Calculation</b>	<b>24</b>
<b>Handover Tips</b>	<b>26</b>
<b>References and Further Information</b>	<b>29</b>

## Introduction

This document aims to promote awareness of the challenges faced in placement by students with a dyslexia and dyspraxia (SpLD). It provides strategies and reasonable adjustments that practice supervisors/assessors practice supervisors/assessors and students can develop in the clinical setting.

This document has been updated with the NMC Future nurse: Standards of proficiency for registered nurses (2018). At points within this document the relevant standard will be highlighted.

### What is Dyslexia?

*'Dyslexia is a combination of abilities and difficulties; the difficulties affect the learning process in aspects of literacy and sometimes numeracy. Coping with required reading is generally seen as the biggest challenge at Higher Education level due in part to difficulty in skimming and scanning written material. A student may also have an inability to express his/her ideas clearly in written form and in a style appropriate to the level of study. Marked and persistent weaknesses may be identified in working memory, speed of processing, sequencing skills, auditory and/or visual perception, spoken language and motor skills. Visuo-spatial skills, creative thinking and intuitive understanding are less likely to be impaired and indeed may be outstanding'* (SpLD Working Group/DfES, 2005).

### What is Dyspraxia (Developmental Co-ordination Disorder (DCD))?

*'Developmental Co-ordination Disorder (DCD), also known as Dyspraxia in the UK, is a common disorder affecting fine or gross motor co-ordination in children and adults. This lifelong condition is formally recognised by international*

*organisations including the World Health Organisation. DCD is distinct from other motor disorders such as cerebral palsy and stroke and occurs across the range of intellectual abilities. Individuals may vary in how their difficulties present; these may change over time depending on environmental demands and life experience.*

*An individual's co-ordination difficulties may affect participation and functioning of everyday life skills in education, work and employment. Children may present with difficulties with self-care, writing, typing, riding a bike and play as well as other educational and recreational activities. In adulthood many of these difficulties will continue, as well as learning new skills at home, in education and work, such as driving a car and DIY. There may be a range of co-occurring difficulties which can also have serious negative impacts on daily life. These include social and emotional difficulties as well as problems with time management, planning and personal organisation and these may also affect an adult's education or employment experiences' (SpLD Test Evaluation Committee (STEC), 2013).*

## **Impact of Dyslexia and Dyspraxia (SpLD) in the Clinical Setting**

Dyslexia affects the ability to master literacy skills, but it also impacts memory, concentration, organisation and sequencing skills. Dyspraxia is associated with co-ordination and motor difficulties and it also affects memory, concentration, organisation and sequencing skills. The student is often considered 'clumsy'. However, the degree to which a dyslexia or dyspraxia will affect a student on placement will vary according to their own strengths, life experiences and how well they can compensate for their difficulties.

### **Strengths often associated with SpLD**

All students with a dyslexia have strengths and many will have developed strategies and ways of coping in their learning and working environment. Some individuals may have outstanding talents, (Steve Jobs, Walt Disney, Steven Spielberg, Jamie Oliver to name but a few)

These talents may include:

- Good problem solving and 'trouble shooting' skills
- An ability to look at information in a holistic way and see the 'big picture'
- Effective interpersonal skills
- Well-developed verbal abilities
- Creative thinkers
- Good visual-spatial skills

Dyslexia is a persistent condition and exists where literacy skills are hindered by one or more of the following:

- Reading – weak decoding / poor word recognition / inadequate comprehension / lack of fluency / slow speed
- Spelling – inaccurate / inconsistent / erratic
- Writing – untidy handwriting / poor grammar / inaccurate punctuation / nonacademic and waffly style / slow speed

When on placement, dyslexic students may also encounter day to day problems associated with dyslexia. These may include:

Short-term memory problems with poor retention of information

**On placement, the student may have difficulties with remembering:**

- verbal instructions
- telephone messages
- complicated medical terms and drug names
- names, faces and job titles
- all the necessary information to be passed onto other staff

Difficulties with processing information quickly

**On placement, the student may take:**

- a few moments to think things through and so may seem slow
- longer to learn routines or procedures
- longer to understand exactly what is being demanded
- longer to read calibrations on equipment

Organisational skills and time management problems

**On placement, the student may:**

- have problems with planning ahead and scheduling tasks
- estimate incorrectly finishing a task on time
- find it hard to remember appointments
- have problems with prioritising work

Difficulties with sequencing

**On placement, the student may have difficulty in correctly ordering of:**

- letters (NSH instead of NHS)
- numbers (53 instead of 35)
- tasks
- files alphabetically or sequentially
- retelling an incident starting in the middle rather than the beginning

Difficulties with spoken language

**On placement, the student may have problems with:**

- mispronunciation of familiar or unfamiliar words (such as drug names)
- word finding and expression
- understanding
- sticking to the point when speaking

Problems with motor skills

**On placement, the student may have:**

- untidy handwriting
- slow speed of writing

Difficulties with orientation

**On placement, the student may:**

- have problems identifying left and right
- lose their way easily
- have difficulty following lines across charts correctly

Problems with concentration and distractibility

**On placement, the student may:**

- become more distracted especially on a busy ward
- find it difficult to stay on task
- need more effort to focus which may lead to tiredness

Inconsistency of performance and so may have good days and bad days

### **The emotional impact of SpLD**

Dyslexia and dyspraxia can have a negative emotional impact.

Some students have feelings of inadequacy and low self-esteem which is often the result of years of continual reinforcement that they are 'lazy' or 'stupid'. They often have a sense of frustration, feeling incapable of doing something that other students appear to do easily.

Yet, they are sometimes 'perfectionists' with high expectations, not allowing themselves to get things wrong and so they keep trying until they get it right. Consequently they may find placement particularly tiring and emotionally stressful. They may have feelings of isolation and lack confidence in their own abilities.

All these can result in high levels of stress and even anger, although this is typically directed at themselves rather than at others.

Usually, students with a dyslexia are particularly vigilant about their practice because they are aware of the errors that they may make on placement and the implications that this may have on the health and safety of themselves and others. However, practice supervisors/assessors practice supervisors/assessors may need to reinforce the significance of some student's own limitations and highlight the potential risks involved when using dangerous equipment and administering drugs.



## The Law, Reasonable Adjustments and Disclosure

### The Law

The Equality Act 2010 defines a disability as *‘a physical or mental impairment which has a **substantial** and **long-term** adverse effect on your ability to carry out normal day-to-day activities’*.

A physical or mental impairment can include:

- Physical impairments (mobility difficulties)
- Sensory impairments (visual or hearing)
- Medical conditions (genetic/progressive/chronic/hidden conditions)
- Long-term mental health conditions
- Learning difficulties (SpLD/dyslexia/autistic spectrum disorders)

The Equality Act 2010 states that discrimination occurs when a student with a disability is treated less favourably for disability-related reasons, and if reasonable adjustments are not put in place, the student may be at a disadvantage.

### Reasonable Adjustments

There is a duty to make reasonable adjustments where a disabled student is at a substantial disadvantage. These should be made on an individual basis, involving a process of evaluating what is reasonable within the context of the placement. For example, in the clinical setting, this could include additional training and support,

giving verbal rather than written instructions and allowing plenty of time to complete a task. This may be a specific area where the student can write notes with a minimum of distraction.

When deciding if an adjustment is reasonable, factors to be taken into consideration include: 'practicality, effectiveness, efficiency, cost, and health and safety (of the individual and others)' (RCN, 2017 p.21).

**However, there is no duty to make reasonable adjustments that would compromise competence standards; a student with a disability must be able to demonstrate their fitness to practice, using reasonable adjustments that do not invalidate competence standards.**

It is unlawful for individuals with disabilities (including dyslexia) to be treated less favourably for a disability-related reason (Equality Act 2010)

According to the Royal College of Nursing (2005:11)

“These Acts establish that both the education and practice setting have a legal, as well as moral, obligation to provide students with the best support they can – and this includes mentors” (now called practice superiors/assessors).

To avoid placing students with a dyslexia at a substantial disadvantage, reasonable adjustments should be put in place. Any adjustments should be made on an individual basis, and this involves a process of evaluation and assessment of what would be reasonable within the context of their work placement. However, students with a dyslexia must still be able to demonstrate their fitness to practice, and learn the required skills and demonstrate competencies as would any (neurotypical) student without a dyslexia.

However, any reasonable adjustments can only be put in place if the student has disclosed their disability. A student has the right to confidentiality about their disability, so if they limit their disclosure, they restrict the reasonable adjustments that can be implemented.

Students may feel reluctant to disclose for fear of stigmatisation and/or discrimination, but if they feel that disclosure is a positive thing and would lead to support, students may be more inclined to be open about their difficulties.

Where a practice supervisor/assessor provides a supportive environment, the student is more likely to disclose his or her disability. Disclosure is important in that it allows the practice supervisor/assessor to become more aware of the student's difficulties and to be able to implement positive strategies that can help overcome the student's weaknesses. This, in turn, may help the student to feel more positive about disclosing in future, and also in providing a more effective placement experience for both student and mentor.

Disclosure to other staff should only be made on a need to know basis and with the consent of the student and should conform to the Trust policy.

## Support in Practice

Future nurse: Standards of proficiency for registered nurses (NMC, 2018)

Annexe A: Communication and relationship management skills

1. Underpinning communication skills for assessing, planning, providing and managing best practice, evidence-based nursing care
  
- 2.9 engage in difficult conversations, including breaking bad news and support people who are feeling emotionally or physically vulnerable or in distress, conveying compassion and sensitivity
  
4. Evidence-based, best practice communication skills and approaches for working with people in professional teams
  - 4.1 Demonstrate effective supervision, teaching and performance appraisal through the use of:
    - 4.1.1 clear instructions and explanations when supervising, teaching or appraising others
    - 4.1.2 clear instructions and check understanding when delegating care responsibilities to others
    - 4.1.3 unambiguous, constructive feedback about strengths and weaknesses and potential for improvement
    - 4.1.4 encouragement to colleagues that helps them to reflect on their practice
    - 4.1.5 unambiguous records of performance

Platform 1: Being an Accountable professional

- 1.4 demonstrate an understanding of, and the ability to challenge, discriminatory behavior
  
- 1.5 understand the demands of professional practice and demonstrate how to recognise signs of vulnerability in themselves or their colleagues and the action required to minimise risks to health
  
- 1.11 communicate effectively using a range of skills and strategies with colleagues and people at all stages of life and with a range of mental, physical, cognitive and behavioural health challenges
  
- 1.14 provide and promote non-discriminatory, person centred and sensitive care at all times, reflecting on people's values and beliefs, diverse backgrounds, cultural characteristics, language requirements, needs and preferences, taking account of any need for adjustments

After disclosure of a disability, the practice supervisor/assessor should evaluate the student's needs prior to or at the beginning of the placement so that reasonable adjustments can be set up.

## **Initial Meeting**

Discuss the student's specific needs with them:

- Ask if they have any particular worries or difficulties (e.g. reading, writing, memory, organising, time management, handover, medication)
- Talk about any strategies that they may already have in place to compensate for these difficulties. Ask them how they normally cope and as their mentor, is there anything you can do to support them?
- Can either of you now think of any other areas of difficulty that you've not yet covered and come up with some possible solutions and strategies
- Talk about how reasonable these solutions and strategies may be in the clinical setting (e.g. audio recording at handover)
- Discuss any alternative strategies that may be more realistic
- Write these strategies down for further reference
- Discuss health and safety issues such as using dangerous equipment and administering drugs, and explore if the student may need extra support in these specific procedures
- Suggest to them that they download **Dyslexia, Dyspraxia and Dyscalculia. A toolkit for nursing staff by the Royal College of Nursing:**  
[https://www.tcd.ie/disability/assets/doc/Word%20Docs/AST%20books/Subject%20specific/nursing/Nursing\\_tool\\_kitf.pdf](https://www.tcd.ie/disability/assets/doc/Word%20Docs/AST%20books/Subject%20specific/nursing/Nursing_tool_kitf.pdf)
- Document concerns and strategies.
- Set up regular meetings with the student to discuss progress and evaluate how the support strategies are working for everyone

The following pages contain strategies to help support students with a dyslexia or dyspraxia on placement.

## Area of difficulty: Memory, listening and speaking

Future nurse: Standards of proficiency for registered nurses (NMC, 2018)

Annexe A: Communication and relationship management skills

4. Evidence-based, best practice communication skills and approaches for working with people in professional teams
  - 4.1 Demonstrate effective supervision, teaching and performance appraisal through the use of:
    - 4.1.1 clear instructions and explanations when supervising, teaching or appraising others
    - 4.1.2 clear instructions and check understanding when delegating care responsibilities to others
    - 4.1.3 unambiguous, constructive feedback about strengths and weaknesses and potential for improvement
    - 4.1.4 encouragement to colleagues that helps them to reflect on their practice
    - 4.1.5 unambiguous records of performance

Platform 1: Being an Accountable Professional:

1.5 understand the demands of professional practice and demonstrate how to recognise signs of vulnerability in themselves or their colleagues and the action required to minimise risks to health

1.16 demonstrate the ability to keep complete, clear, accurate and timely records

### On placement, students may have difficulties with:

- Holding onto information for very long, especially remembering:
  - Information (including phone messages) that needs to be passed on or written down
  - Appointments and dates
  - Names, faces and job titles
  - Complicated medical terms and drug names
  - Clinical procedures
- Remembering when they are under stress, leading to confusion and going into memory overload

- Deciding which bits of information are more important than others
- Understanding, following and remembering spoken instructions
- Listening for very long
- Pronouncing words correctly
- Trying to find the correct words to express themselves
- Sticking to the point when speaking (forgetting the thread)

### **Strategies for practice supervisors/assessors:**

- Be patient
- Give verbal instructions in a quiet place if possible
- Use straightforward language, speak slowly, pause between phrases and maintain eye contact
- Avoid using ambiguous language, which could be interpreted in different ways
- Give concise instructions in the same order as they are meant to be carried out
- Encourage the student to use a notebook to write down verbal instructions; check they got them right
- Be aware of information overload and break down long, complicated instructions into smaller, manageable steps
- Repeat or rephrase if necessary and emphasise important information
- Say complicated words, medical conditions or drug names clearly and if necessary, ask them to repeat them back to you (suggest they look at [howjsay.com](http://howjsay.com) or use a medical dictionary)
- ‘Anchor’ instructions on your fingers (with the student watching) as you say them
- Ask the student to repeat back information/instructions whilst ‘anchoring’ on their own fingers to ensure they have understood
- Provide written instructions if necessary, and prioritise tasks/highlight the main points

- Demonstrate practical skills whilst giving verbal explanations
- Encourage the student to audio record teaching sessions and demonstrations
- Encourage the student to repeat back what they have learned and to reflect on why
- Allow the student to practise a task under your observation before meeting the patient
- Allow plenty of time during supervisory sessions to explain procedures and routines
- Ask staff to avoid interrupting the student whilst carrying out a task
- Encourage students to take phone messages using L3R: **Listen/ Repeat/ wRite/ Read**
- Encourage the use of a handover sheet to assist in prioritizing service user care.

**Strategies for students:**

Future nurse: Standards of proficiency for registered nurses (NMC, 2018)

Platform 1: Being an Accountably Professional

1.16 demonstrate the ability to keep complete, clear, accurate and timely records

1.17 take responsibility for continuous self-reflection, seeking and responding to support and feedback to develop their professional knowledge and skills

1.18 demonstrate the knowledge and confidence to contribute effectively and proactively in an interdisciplinary team

1.19 act as an ambassador, upholding the reputation of their profession and promoting public confidence in nursing, health and care services



- Practise what you want to say before you meet the person
- Don't rush when speaking, and pause before answering questions; be brave and say 'can I come back to you on that?' if you can't think of what to say
- Stick to the point and speak in short sentences
- Ask the speaker to repeat or rephrase information, if necessary
- Say the patient's name over and over to yourself; check the client notice board and picture their face in your head
- 'Anchor' instructions on your fingers
- Keep a notebook handy, and write down key ideas or words
- If you think you're going to forget something, write it down • Write down instructions in the correct order
- Ask co-workers not to interrupt
- If the speaker is unhelpful (or rude), stress the need for being accurate with information
- Repeat back information to the speaker to check if it's right
- Use L3R for taking phone messages
  - Listen to the message and ask who's calling
  - Repeat back the message
  - wRite down the message
  - Read the message back
- Ask for any practical skills to be demonstrated whilst listening to verbal explanations
- Practise procedures again and again and go through them yet again in your head!
- Practise saying complicated words or medication out loud; show the word to your practice supervisor/assessor and ask how to pronounce it (or use howjsay.com or a medical dictionary)
- Build up a glossary of words you use frequently and make sure you can say them
- Use the same procedure at handover every time to make it less confusing

## Area of Difficulty: Organisation and time management

Future nurse: Standards of proficiency for registered nurses (NMC, 2018)

Annexe A: Communication and relationship management skills

4. Evidence-based, best practice communication skills and approaches for working with people in professional teams
  - 4.1 Demonstrate effective supervision, teaching and performance appraisal through the use of:
    - 4.1.1 clear instructions and explanations when supervising, teaching or appraising others
    - 4.1.2 clear instructions and check understanding when delegating care responsibilities to others
    - 4.1.3 unambiguous, constructive feedback about strengths and weaknesses and potential for improvement
    - 4.1.4 encouragement to colleagues that helps them to reflect on their practice
    - 4.1.5 unambiguous records of performance

Platform 1: Being an Accountable Professional:

1.5 understand the demands of professional practice and demonstrate how to recognise signs of vulnerability in themselves or their colleagues and the action required to minimise risks to health

1.13 demonstrate the skills and abilities required to develop, manage and maintain appropriate relationships with people, their families, carers and colleagues

### On placement, the student may have problems with:

- Planning ahead and scheduling tasks
- Remembering dates, times and appointments
- Estimating how long a task will take
- Multi-tasking
- Prioritising tasks and balancing coursework, placement and everyday life
- Ordering and sequencing tasks and ideas
- Filing alphabetically or sequentially
- Reacting quickly in a busy and stressful environment

### **Strategies for practice supervisors/assessors:**

Future nurse: Standards of proficiency for registered nurses (NMC, 2018)

Platform 5 Leading and managing nursing care and working in teams

5.8 support and supervise students in the delivery of nursing care, promoting reflection and providing constructive feedback, and evaluating and documenting their performance

- Meet together at the start of the placement to discuss administrative procedures and routines
- Set up a time to go through the module learning outcomes and to sign off competencies
- Encourage the student to note priorities at the start of the shift
- Allow time for the student to organise their thoughts
- Put up visual reminders/ checklists/ posters of tasks
- Consider flexible working patterns within the shift
- Refer student to ALS for time management support

### **Strategies for students:**

- Record realistic dates and times for your practice supervisor/assessor to sign off competencies on your portfolio
- Always have something with you (note pad/mobile device) to record important information
- Write a list of tasks and then prioritise these. Tick these off as you complete them
- Use coloured pens and folders to help organise your work
- Create a flow chart or prompt sheet (to put in your pocket) to put things in the right order
- Make an appointment with the University for help with organisational skills if you are still struggling

## Area of difficulty: Writing and Recording Information

Future nurse: Standards of proficiency for registered nurses (NMC, 2018)

1.16 demonstrate the ability to keep complete, clear, accurate and timely records

On placement, the student may have difficulty with:

- Untidy handwriting
- Writing concisely, using appropriate language
- Writing at speed and under pressure
- Filling in forms at speed
- Writing with clear expression, using correct grammar and spelling
- Spelling medical terms, especially words that look the same (hypotension and hypertension)
- Putting letters and/or numbers in the correct order (35 instead of 53)

### Practice supervisor/assessor support:

- Be open to providing help
- Allow the student to write in a quiet place if at all possible
- Allow extra time to write notes if it is needed
- Try to avoid students having to write in group situations which may lead to embarrassment Encourage co-workers not to interrupt the student whilst writing
- If possible, allow the student to dictate notes onto a digital recorder (but make sure that confidentiality is maintained)
- Check notes written by the student: make suggestions for a clear format and use of colour (multicoloured ball-point pen)
- Be prepared to help proof-read notes
- Encourage the use of a portable electronic medical spell checker if the student already has one
- Allow the use of a computer or laptop if the student's handwriting is illegible
- Provide the student with a glossary of terms
- Allow the student to practise filling in documents and forms before doing it for real
- Allow the student to practise putting information and data onto graphs before doing

it for real

- If possible, use other methods of noting information eg allow handover to be taped (keep on the ward and wipe clean once the student has taken action or made notes from this)
- Assist in discerning key points at handover by going over the student's notes after handover
- Help in determining what needs to be written down in the student's notes
- Encourage the student to attend learning support from the University if writing is a persistent problem

### **Strategies for students:**

- Ask your practice supervisor/assessor if you are not sure about a word
- Use an electronic dictionary or use [howjsay.com](http://howjsay.com) or a medical dictionary
- Read drug-related words very carefully and slowly and break words down into chunks, and check with your practice supervisor/assessor that you've read the words correctly
- If you don't know what a word means, find out!
- If possible, read in a quiet area so you don't lose concentration
- Read out loud (or whisper) to help you understand
- In an emergency, ask someone else to read the information: getting it wrong could be fatal
- Highlight important key words; this makes it easier to pick out information quickly later on
- Use a system for noting down medical words /abbreviations and their meanings.
- Organise these alphabetically using cards with the word spelt correctly on the front and the definition on the back, or insert a table into Word to build up a glossary
- Use coloured overlays (or tinted glasses) to read if this helps
- Use a different coloured background on the computer

## **Area of difficulty: Reading**

Future nurse: Standards of proficiency for registered nurses (NMC, 2018)

1.16 demonstrate the ability to keep complete, clear, accurate and timely records

### **On placement, the student may have difficulty with:**

- Reading words accurately, especially complex medical terms or words that look similar (hypotension and hypertension)
- Reading at a reasonable speed and under pressure
- Reading out loud in front of others
- Keeping track of their place whilst reading
- Reading and understanding information on complex charts
- Reading black print on a white background
- Understanding and retaining what they have just read and so needing to reread something several times
- Focusing whilst reading

### **Strategies for practice supervisors/assessors:**

- Allow opportunities to discuss reading difficulties
- Allow plenty of time to read and reread information
- Consider letting the student read in a quiet area away from distractions; ask coworkers not to interrupt
- Encourage working with a member of staff to ensure that new and complex words are read accurately
- Emphasise the importance of accuracy when reading certain information (especially medications)
- Encourage the student to cross check drug names on bottles and packets with patient's written notes/drug dosage
- If the student makes an error when reading, do not make any judgmental comments; simply provide the correct word
- Avoid asking the student to read aloud in front of others if they don't want to

- Encourage the use of any assistive technology (e.g. Reading Pen)
- Some students may prefer information printed on coloured paper
- Allow the use of coloured overlays or tinted glasses
- Allow the use of a different coloured background on the computer
- Colour code information on white boards in bullet points (not long sentences) and include plenty of white spaces to avoid cluttered information
- Use bold to highlight (avoid underlining or too much italic)
- Highlight important words so they are easier to pick out later
- Provide written material in advance if possible
- When writing, use plain English and avoid jargon, acronyms or ambiguous word
- Use a plain font (size 12-14; Arial, Verdana) and avoid blocks of capital letters
- Encourage the use of a ruler or magnifying bar (if the student has one) to help finding information on charts
- Suggest 1-to-1 learning support at ALS if reading is a significant problem 13

### **Strategies for students:**

- Ask your practice supervisor/assessor if you're not sure about a word
- Use an electronic dictionary or use [howjsay.com](http://howjsay.com) or a medical dictionary
- Read drug-related words very carefully and slowly and break words down into chunks, and check with your practice supervisor/assessor that you've read the words correctly
- If you don't know what a word means, find out!
- If possible, read in a quiet area so you don't lose concentration
- Read out loud (or whisper) to help you understand
- In an emergency, ask someone else to read the information: getting it wrong could be fatal
- Highlight important key words; this makes it easier to pick out information quickly later on
- Use a system for noting down medical words /abbreviations and their meanings. Organise these alphabetically using cards with the word spelt correctly on the front and the definition on the back, or insert a table into Word to build up a glossary

- Use coloured overlays (or tinted glasses) to read if this helps
- Use a different coloured background on the computer
- Make an appointment with the university for help with reading strategies if you are still struggling



## Area of difficulty: Dealing with Medication and Calculating Drug Doses

Future nurse: Standards of proficiency for registered nurses (NMC, 2018)

Platform 4 Providing and evaluating care

4.14 understand the principles of safe and effective administration and optimisation of medicines in accordance with local and national policies and demonstrate proficiency and accuracy when calculating dosages of prescribed medicines

4.15 demonstrate knowledge of pharmacology and the ability to recognise the effects of medicines, allergies, drug sensitivities, side effects, contraindications, incompatibilities, adverse reactions, prescribing errors and the impact of polypharmacy and over the counter medication usage

4.16 demonstrate knowledge of how prescriptions can be generated, the role of generic, unlicensed, and off-label prescribing and an understanding of the potential risks associated with these approaches to prescribing

4.17 apply knowledge of pharmacology to the care of people, demonstrating the ability to progress to a prescribing qualification following registration

### Practice supervisor/assessor support:

- Alert the student to the dangers of inaccuracy in drug calculations and administration
- Ensure that the student has cross checked all the patient's names and date of birth
- Make sure s/he has checked the drug names on the packet or bottle and cross checked these with the patient's written notes/drug dosage
- Where possible, allow and encourage the student to work with a non-dyslexic member of staff
- Allow the student plenty of time and ask co-workers not to interrupt
- Clarify with the student that s/he is working in metric and that calibrations on syringes etc have been checked
- Encourage the use of a calculator, notepad (and fingers if needs be)
- Ask the student to estimate the answer before doing the calculation – can s/he predict what a sensible answer would be? Then do the calculation. Is that answer in line with the expected answer?
- Ensure that the student always double checks his/her work methodically
- Encourage the student to write down each stage of the calculation. If an error is made, this will make it easier to spot which part of that calculation is causing a problem to the student.
- Offer support when doing a calculation, but bear in mind that ultimately the student will need to be able to do this independently without that support

- Where possible, allow charts to be photocopied so that they can be colour coded and/or divided into segments for easier reading
- Encourage the use of a ruler or magnifying bar (if the student has one) to follow lines across charts

## Area of difficulty: Handover Tips

Future nurse: Standards of proficiency for registered nurses (NMC, 2018)

Platform 1 Being an accountable professional

1.11 communicate effectively using a range of skills and strategies with colleagues and people at all stages of life and with a range of mental, physical, cognitive and behavioural health challenges

Platform 4 Providing and evaluating care

4.3 demonstrate the knowledge, communication and relationship management skills required to provide people, families and carers with accurate information that meets their needs before, during and after a range of interventions

Platform 5 Leading and managing nursing care and working in teams

5.4 demonstrate an understanding of the roles, responsibilities and scope of practice of all members of the nursing and interdisciplinary team and how to make best use of the contributions of others involved in providing care

5.7 demonstrate the ability to monitor and evaluate the quality of care delivered by others in the team and lay carers

### Practice supervisor/assessor support:

- Make sure that the handover procedure is the same every time so that it becomes automatic for the student
- Ensure that handover is not rushed
- Encourage the use of tick lists, handover sheets and the student's notebook
- Assist in the design of a formatted text for taking notes at handover
- Make sure that the student has understood everything before the other member of staff has left the shift
- Go over the student's notes after handover and assist in discerning key points
- Consider allowing handover to be taped (but bear in mind issues of confidentiality and the need to wipe the tape clean once it is no longer needed). However, do not simply 'tape' handover without the student attempting to take notes and understand

## **Area of difficulty: Motor skills**

### **On placement, the student may have difficulty with:**

- Untidy handwriting
- Slow speed of writing
- Identifying left and right
- Finding their way around the hospital without getting lost
- Dropping things
- Bumping into things
- Spilling things
- Putting procedures into the correct sequence
- Doing procedures at speed

### **Strategies for practice supervisors/assessors:**

- Indicate left/right when giving verbal directions
- Make sure that the student has a map of the hospital or placement area
- Give them a tour of the clinical area, explicitly pointing out any important places
- Permit the use of a laptop for writing if possible
- Allow extra time for writing to be legible
- Demonstrate practical skills first and then let the student practise
- Permit extra time to learn new procedures
- Use flow charts and diagrams to sequence procedures correctly
- Use colour coding to prioritise tasks
- Be aware that a situation may become worse if the student feels under stress

### **Strategies for students:**

- Ensure you have a map of the hospital
- Ask if you can use a laptop if your handwriting is illegible

- Slow down when writing to make your handwriting easier to read
- Practise any skills you are unfamiliar with
- Put long procedures into a flow chart or diagram to get the sequences correct
- Use colour coding to prioritise tasks

## References & Further Information

### References

Royal College of Nursing (2017) RCN *Guidance for mentors of nursing students and midwives* Available at: <https://www.rcn.org.uk/professional-development/publications/pub-006133>

SpLD Test Evaluation Committee (STEC) (2013) *Updated guidance on the assessment of DCD/dyspraxia* [online] Available at: <http://www.sasc.org.uk/SASCDocuments/Dyspraxia>

SpLD Working Group/DfES (2005) *SpLD Working Group 2005/DfES Guidelines* [online] Available at: [http://www.bdadyslexia.org.uk/files/Working\\_group\\_guidelines\\_2005\[1\].pdf](http://www.bdadyslexia.org.uk/files/Working_group_guidelines_2005[1].pdf)

### Further Information

Association of Dyslexia Specialist in Higher Education: *Supporting Learners on placement*  
[www.adshe.org.uk](http://www.adshe.org.uk)

British Dyslexia Association (BDA) [www.bdadyslexia.org.uk](http://www.bdadyslexia.org.uk)

Disability Rights Commission [www.drc-gb.org](http://www.drc-gb.org)

Dyslexia Action [www.dyslexiaaction.org.uk](http://www.dyslexiaaction.org.uk)

Dyspraxia Foundation [www.dyspraxiafoundation.org.uk](http://www.dyspraxiafoundation.org.uk)

Equality Act 2010 [www.gov.uk/equality-act-2010-guidance](http://www.gov.uk/equality-act-2010-guidance)

Healthcare Professionals with Disabilities: Information about supporting dyslexic and (and disabled) students on clinical practice [www.hcp-disability.org.uk/dyslexia/dsylexia.html](http://www.hcp-disability.org.uk/dyslexia/dsylexia.html)

Royal College of Nursing (2019) Practice-based learning. Available at:  
<https://www.rcn.org.uk/professional-development/practice-based-learning?sfns=mo>

Skill – National Bureau for Students with Disabilities [www.skill.org.uk](http://www.skill.org.uk)

Supporting Dyslexic Students on Practice [www.southhampton.ac.uk/studentsupport](http://www.southhampton.ac.uk/studentsupport)

Supporting Nursing and Midwifery Students with a Disability in Clinical Practice: A Resource Guide for Clinical and Academic Staff [www.ucd.ie](http://www.ucd.ie)

