

2013-14

**Annual monitoring report of performance in mitigating
key risks identified in the NMC Quality Assurance
framework for nursing and midwifery education**

Programme provider	University of Greenwich
Programmes monitored	Registered Midwife – 36 month programme; Registered specialist community public health nursing – health visiting
Date of monitoring event	26–27 February 2014
Managing Reviewer	Peter McAndrew
Lay Reviewer	Adrian Mason
Registrant Reviewer(s)	Ann Cysewski, Karen Stansfield
Placement partner visits undertaken during the review	Pre-registration midwifery programmes: Bart’s Health NHS Trust: Newham University Hospital Lewisham and Greenwich NHS Trust: Queen Elizabeth Hospital, Woolwich Kings College Hospital NHS Foundation Trust: Princess Royal University Hospital, Farnborough Orpington: Community midwifery team Health visiting programme: Rochester Road Health Clinic, Gravesend, Kent Community Health Trust Bright Futures children centre, Gravesend, Kent Community Health Trust Kaleidoscope children’s services, Catford, Bellingham children centre, Bellingham
Date of Report Publication	4 July 2014

Introduction to NMC QA framework

The Nursing and Midwifery Council is the professional regulatory body for nurses and midwives in the UK. Our role is to protect patients and the public through efficient and effective regulation. We aspire to deliver excellent patient and public-focused regulation. We seek assurance that registered nurses and midwives and those who are about to enter the register have the knowledge, skills and behaviours to provide safe and effective care.

We set standards for nursing and midwifery education that must be met by students prior to entering the register. Providers of higher education and training can apply to deliver programmes that enable students to meet these standards. The NMC approves programmes when it judges that the relevant standards have been met. We can withhold or withdraw approval from programmes when standards are not met.

Published in June 2013, the NMC's QA framework identified key areas of improvement for our QA work, which included: using a proportionate, risk based approach; a commitment to using lay reviewers; an improved 'responding to concerns' policy; sharing QA intelligence with other regulators and greater transparency of QA reporting.

Our risk based approach increases the focus on aspects of education provision where risk is known or anticipated, particularly in practice placement settings. It promotes self-reporting of risks by Approved Education Institutions (AEIs) and it engages nurses, midwives, students, service users, carers and educators.

Our QA work has several elements. If an AEI wishes to run a programme it must request an approval event and submit documentation for scrutiny to demonstrate it meets our standards. After the event the QA review team will submit a report detailing whether our standards are "met", "not met" or "partially met" (with conditions). If conditions are set they must be met before the programme can be delivered.

Review is the process by which the NMC ensures AEIs continue to meet our standards. Reviews take account of self-reporting of risks and they factor in intelligence from a range of other sources that can shed light on risks associated with AEIs and their practice placement partners. Our focus for reviews, however, is not solely risk-based. We might select an AEI for review due to thematic or geographical considerations. Every year the NMC will publish a schedule of planned reviews, which includes a sample chosen on a risk basis. We can also conduct extraordinary reviews or unscheduled visits in response to any emerging public protection concerns.

This annual monitoring report forms a part of this year's review process. In total, 16 AEIs and 32 programmes were reviewed. The programmes have been reviewed by a review team including a managing reviewer, nurse and midwifery reviewers and a lay reviewer. The review takes account of feedback from many stakeholder groups

including academics, managers, mentors, practice teachers, students, service users and carers involved with the programmes under scrutiny. We report how the AEI under scrutiny has performed against key risks identified at the start of the review cycle. Standards are judged as “met”, “not met” or “requires improvement” When a standard is not met an action plan is formally agreed with the AEI directly and is delivered against an agreed timeline.

Summary of findings against key risks					
Resources	1.1 Programme providers have inadequate resources to deliver approved programmes to the standards required by the NMC	1.1.1 Registrant teachers hold NMC recordable teaching qualifications and have experience /qualifications commensurate with role			
	1.2 Inadequate resources available in practice settings to enable students to achieve learning outcomes	1.2.1 Sufficient appropriately qualified mentors / sign-off mentors / practice teachers available to support numbers of students			
Admissions & Progression	2.1 Inadequate safeguards are in place to prevent unsuitable students from entering and progressing to qualification	2.1.1 Admission processes follow NMC requirements	2.1.2 Programme providers procedures address issues of poor performance in both theory and practice	2.1.3 Programme providers procedures are implemented by practice placement providers in addressing issues of poor performance in practice	2.1.4 Systems for the accreditation of prior learning and achievement are robust and supported by verifiable evidence, mapped against NMC outcomes and standards of proficiency
Practice Learning	3.1 Inadequate governance of and in practice learning	3.1.1 Evidence of effective partnerships between education and service providers at all levels, including partnerships with multiple education institutions who use the same practice placement locations			
	3.2 Programme providers fail to provide learning opportunities of suitable quality for students	3.2.1 Practitioners and service users and carers are involved in programme development and delivery	3.2.2 Academic staff support students in practice		
	3.3 Assurance and confirmation of student achievement is unreliable or invalid	3.3.1 Evidence that mentors sign-off mentors, practice teachers are properly prepared for their role in assessing practice	3.3.2 Mentors, sign off mentors and practice teachers are able to attend annual updates sufficient to meet requirements for triennial review	3.3.3 Records of mentors / practice teachers are accurate and up to date	
Fitness for Practice	4.1 Approved programmes fail to address all required learning outcomes that the NMC sets standards for	4.1.1 Students achieve NMC learning outcomes, competencies and proficiencies at progression points and for entry to the register for all programmes that the NMC sets standards for			
	4.2 Audited practice placements fail to address all required learning outcomes in practice that the NMC sets standards for	4.2.1 Students achieve NMC practice learning outcomes, competencies and proficiencies at progression points and for entry to the register for all programmes that the NMC sets standards for			
Quality Assurance	5.1 Programme providers' internal QA systems fail to provide assurance against NMC standards	5.1.1 Student feedback and evaluation/ Programme evaluation and improvement systems address weakness and enhance delivery	Risk Indicator 5.1.2 - concerns and complaints raised in practice learning settings are appropriately dealt with and communicated to relevant partners.		
Standard Met		Requires Improvement		Standard Not met	

Introduction to Greenwich University's Programmes

The School of Health and Social Care sits within the newly formed Faculty of Education and Health at the University of Greenwich. The school is one of the largest in the university and provides pre-registration undergraduate and postgraduate programmes in nursing and midwifery and undergraduate and post graduate specialist community public health nursing (SCPHN) programmes. These programmes lead to registration with the NMC.

This monitoring event focuses on pre-registration midwifery, 3 year programme and specialist community public health nursing (SCPHN) health visiting programme which includes the optional community practitioner prescribing programme (V100).

The school has delivered the SCPHN health visiting programme since 2011. The programme was developed to meet the needs of the health visiting implementation plan (DH, 2011). The school has many years of experience in delivering pre-registration midwifery programmes.

The monitoring event took place over two days and involved visits to practice placements to meet a range of stakeholders. Particular consideration is given to the student experiences in the placements which have been subject to adverse concerns as a result of external reviews. This included a visit to the maternity services at Newham University Hospital, part of Bart's Health NHS Trust, which had been subject to an adverse Care Quality Commission (CQC) report in January 2014.

A meeting took place with the lead midwife for education, link lecturers, head of midwifery service, and clinical practice facilitators from Lewisham University Hospital which had also been subject to an adverse CQC report in August 2013. We did not visit the trust as the CQC were undertaking a return visit at the same time as this monitoring event was taking place.

Summary of public protection context and findings

We found that there are sufficient mentors and practice teachers available to support the number of students, and their assessment of competence is consistent and effective. The procedures to address issues of poor performance in both theory and practice are well understood and implemented effectively in both of the programmes monitored.

We can confirm that the procedures and practices in relation to fitness to practise are comprehensive, robust and rigorous and fully meet the requirements of the NMC.

Students have the confidence to raise concerns either in practice or in the university and felt supported with the response of mentors, practice teachers, service managers and lecturers to issues that were raised. These are all reassuring aspects of programme

delivery that serve to protect the public.

There are effective partnerships with service providers and associated education providers at both strategic and operational levels. We found strong evidence that these partnerships are being used to manage placements efficiently and to develop innovative solutions to challenges that exist from the escalation process, clinical governance reporting and service re-configurations. Addressing these issues is important in public protection.

Practitioners, service users and carers contribute towards programme development and delivery. We found evidence that a comprehensive strategy exists and is being implemented where service users share their experiences of current healthcare provision. This scheme makes a valuable contribution to the public protection agenda.

Students feel confident and competent to practise at the end of their programme and to enter the NMC professional register. Mentors and employers describe students completing the programmes as fit for practice and employment.

We can confirm that students achieve the NMC learning outcomes, competencies and proficiencies for entry to the midwifery and health visiting parts of the register. We also note that education commissioners assess the quality of the programme as very high and students emerging from these programmes are fit for practice and highly sought after by employers. A competent workforce is essential in meeting the public protection agenda.

As part of the monitoring event we visited maternity services at Newham University Hospital, part of Bart's Health NHS Trust, which had been subject to an adverse CQC report. A meeting also took place with the lead midwife for education, link lecturers, head of midwifery service, and clinical practice facilitators from Lewisham University Hospital which had also been subject to adverse CQC reports and was not visited as the CQC were undertaking a return visit at the same time as this monitoring event was taking place. The outcome of the practice visits and meetings was that the school in partnership with associated service providers had fully implemented action plans to protect student learning. Our findings concluded that the school has effective procedures for managing the quality of practice learning environments and that they are highly effective at ensuring that students are not exposed to poor learning experiences or poor care practices.

The outcome of the monitoring event was that all the five key risk areas assessed were confirmed as meeting the NMC standards.

Summary of areas that require improvement

None identified.

Summary of areas for future monitoring

- The development of the academic in practice role

- The admission process to SCPHN programmes to ensure that entry requirements are fully met.
- Service user and carer engagement within the selection and assessment process.
- The partnership arrangements between the education provider and placement provider in conducting educational audit.
- The triennial review process is fully implemented and updated to mentor registers.
- The accuracy and currency of the practice teacher/sign off mentor/mentor registers.

Summary of notable practice

Resources

The school has introduced mentorship awards that recognise and celebrate the contribution that good mentorship and good quality practice placements make to enhancing the practice learning experience for students.

Practice Learning

Lewisham and Greenwich NHS Trust has commissioned a management consultant to facilitate the transformation of midwifery services and explore solutions to the range of challenging issues existing within the maternity services in London.

We commend the school for the implementation and commitment to the 'buddy scheme' to develop greater understanding of mental ill health and related issues from a service user perspective. This scheme provides students with an opportunity to participate in workshop activity facilitated by service users who share their experiences of current healthcare provision such as maternity services. The strategy has a number of highly successful outcomes and these are fully evident in the pre-registration midwifery programme.

Fitness for practice

All third year midwifery students have attended a midwifery practical obstetric multi-professional training (PROMPT) workshop supported and facilitated by senior clinicians from local trusts (risk manager, labour ward matron, practice development midwife) and senior lecturers from both the midwifery team and paramedic sciences team. The aim of the workshop is twofold: to nurture the senior student midwives prior to qualifying to enhance their employability prospects and to provide opportunities to practise clinical care in a simulated safe environment working alongside other healthcare practitioners. Students indicated to us that the workshop had improved their understanding of different health professionals' roles, improved their communication and collaborative team working skills and increased their confidence and competence in the management of obstetric emergencies.

Summary of feedback from groups involved in the review

Academic team

We found the academic team to be rigorous and robust in their delivery of the programmes. Their attitudes to student centred education were exemplary and their endeavours to ensure that students received an excellent experience were evident throughout. The academic team are confident that they are able to provide good quality educational experiences for students. Strong student support systems are the strength of the programmes. Partnership working is effective and academics are highly committed to the practice learning environments and regularly visit the practice areas.

Mentors, sign-off mentors, practice teachers, employers and education commissioners

Mentors, sign-off mentors, practice teachers and employers all told us that the programme teams were inclusive and worked in partnership to ensure that the programmes prepare students who were fit for purpose and practice at the end of the programme.

They all reported that they are well supported in their role by the clinical practice facilitators and the academic team and have a good understanding of the assessment processes. Education commissioners reported the quality of the programmes to be very high and confirmed that students were fit for practice and highly employable. They assessed the school as a high quality education provider.

Students

The health visitor (HV) students were very positive about the organisation and standard of the programme. They told us that they are well prepared for their role as a health visitor and are supported by the programme team, clinical practice facilitators (CPFs), mentors and practice teachers.

Midwifery students commented positively about the programme and reported that there is a good balance between theory and practice. They are well supported by the academic team, link lecturers, CPFs, mentors and supervisors of midwives.

We can confirm that students have the confidence to raise concerns either in practice or in the university and felt supported with the response of mentors, practice teachers, service managers and lecturers to issues that were raised.

Service users and carers

Service users confirmed to us the attributes they consider are important in the health visiting role and advised that they had met with HV students who they felt were approachable and accessible.

In the pre-registration midwifery programme there are processes in place for obtaining service user feedback about the care that students deliver through the 'family/friend test' and 'walkabouts'. Students obtain testimonies about the care they provide and these are included in practice assessment documents. Service users contribute to the programme design and delivery.

The 'buddy scheme' coordinator confirmed that the school values the contribution that service users make to programme delivery and finds the school supportive.

Relevant issues from external quality assurance reports

Keogh reviews and Care Quality Commission (CQC) reports were considered for practice placements used by the university to support students' learning.

The following reports require action(s):

Bart's Health NHS Trust, Newham General Hospital - CQC report, January 2014

The CQC report found that there had been a number of 'never events' in the last year; these are events that are so serious they should never happen. The trust had undertaken work on incident reporting, investigation, learning lessons and changing practice to prevent a recurrence.

There were a significant number of vacancies for midwives within the maternity service and staff expressed feeling "burnt out". The report concluded that improvements were required in the maternity services to ensure women were safely looked after. Adverse concerns included; medicines that were not secured or managed safely; medicines that were not prescribed and given to people appropriately; there were no records that key equipment was checked daily; the number of emergency caesarean sections was above the national average.

Midwives had access to a supervisor of midwives (SoM) and met the statutory requirements. However, concerns were expressed by both midwives and doctors regarding a lack of specialist midwives. Midwives spoke with compassion about wanting to provide the best care, but were frustrated that staffing levels meant they could only just provide the basic care.

Some women felt that their care was minimal and the attitude of some staff was abrupt and rude. A project called 'great expectations' aimed to make every contact between staff and service users worthwhile.

CQC routine inspection report: University Hospital Lewisham, Maternity Services, August 2013

The inspection outcomes were that:

Standards not met include:

- Care and welfare of people who use services - action needed.
- Supporting workers - action needed. People were not always cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.
- Assessing and monitoring the quality of service provision - action needed. The provider did not have effective systems to regularly assess and monitor the quality of service that women and babies received at the hospital.

The London local supervising authority (LSA) provided a briefing for the NMC following the results of the CQC maternity survey:

The brief stated that London undertakes 20% of the total births per year in England and has the second largest immigrant population in the world outside New York City with increasing numbers of public health concerns identified within this population. It also stated that four of the six trusts have been undergoing major reconfiguration and merger.

At the monitoring event we were informed that a meeting took place with the lead midwife for education, senior midwifery service managers and clinical practice facilitators from Lewisham University Hospital which had been subject to adverse CQC reports.

The CQC were undertaking a return visit to the midwifery service at the same time as this monitoring event was taking place and therefore it was not possible to undertake a visit to the maternity practice areas.

Senior midwifery managers were confident that the CQC return visit would report that effective action had been taken to rectify the issues that were previously reported.

The school reported that they had raised an action plan to protect student learning which had been agreed at executive level within the university and which was reported and considered at trust board level. The agreed action plan was monitored by the school and by the clinical effectiveness team within the trust.

The meeting was able to confirm that all issues raised in the action plan have now been successfully resolved.

The school had worked in partnership to develop more effective channels of communication with placement providers and other education provider institutions.

The school has worked with students to make them more aware of their responsibilities to raise concerns and to inform on the support that will be available to them if concerns are raised.

The school has increased the visibility of academic staff in practice settings to support students and practice staff.

Clinical practice facilitators have introduced student forums on a monthly basis to provide additional student support and facilitate students in raising issues of concern.

We can confirm that the outcome of the meeting was that the school is working effectively with the midwifery service to enhance student learning experiences and protect student learning when adverse issues are raised. The school provided evidence that they had effective procedures for managing the quality of practice learning environments which are highly effective at ensuring that students are not exposed to poor education or poor care practices.

Evidence / Reference Source

1. London LSA annual report 2012–2013
2. CQC inspection report: Maternity services at University Hospital Lewisham, 2 August 2013 (routine inspection)
3. CQC report: Bart's Health NHS Trust, Newham General Hospital, January 2014

Follow up on recommendations from approval events within the last year

All recommendations from approval events within the last year have been completed.

Evidence / Reference Source

1. University of Greenwich self-assessment report 2013/2014
2. NMC programme monitoring report, January 2011
3. NMC self-assessment programme monitoring report, February 2012
4. NMC programme approval report: Registered midwife (3 year programme), November 2011
5. NMC programme approval report: Specialist community public health nursing, October 2011
6. NMC programme approval report: Learning and assessment in practice, practice teacher, 2013

Specific issues to follow up from self-report

Specific issues from the self-report which are all being effectively controlled through management plans include:

Implementation of strategies to further promote student retention which will further enhance the student experience; further re-configuration of South London Healthcare NHS Trust; management of placement capacity, particularly in children's nursing and midwifery programmes; transfer to new commissioning models; increased commissions to SCPHN programme; implementation of the district nursing programme; and additional funding allocated by NHS London which is ring-fenced for practice teacher support.

Evidence / Reference Source

1. University of Greenwich self-assessment programme monitoring report, 2012/2013

Findings against key risks
<p>Key risk 1 – Resources</p> <p>1.1 Programme providers have inadequate resources to deliver approved programmes to the standards required by the NMC</p> <p>1.2 Inadequate resources available in practice settings to enable students to achieve learning outcomes</p>
<p>Risk indicator 1.1.1 - registrant teachers hold NMC recordable teaching qualifications and have experience / qualifications commensurate with role</p>
<p>What we found before the event</p>
<p>The school maintains a database register to evidence that nursing and midwifery lecturers are current registrants and that they have a recordable teaching qualification.</p>
<p>What we found at the event</p>
<p>We found evidence that effective governance procedures ensure that all midwifery and health visiting lecturers with a professional qualification are registered with the NMC and have a relevant recordable teacher qualification.</p> <p>Programme leaders have a teaching qualification recorded with the NMC and have professional qualifications and experience that is commensurate with the role they undertake.</p> <p>There are sufficient academic staff dedicated to programme delivery who we found are committed and enthusiastic towards the programme quality and their academic role. Students told us they highly rate the support they receive from academic staff.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. School of health and social care: Department for adult nursing and paramedic science; Registration, November 2013 2. Nursing and Midwifery Council (NMC) registrations as at 23 October 2013 3. Staff curriculum vitae (CVs) for nursing and midwifery programmes, not dated 4. Interviews with teachers and students, 26-27 February 2014

Risk indicator 1.2.1 - sufficient appropriately qualified mentors / sign-off mentors / practice teachers available to support numbers of students
What we found before the event
NMC monitoring and programme approval reports state that there are sufficient appropriately qualified mentors and practice teachers.
What we found at the event
<p>We found that there are sufficient sign-off mentors available in midwifery services for the number of students on placement. There is a clear plan to progress mentors to sign-off mentor status. Students work with their named mentor for a minimum of 40% of the time and each mentor has one student assigned to them at any one time.</p> <p>We found evidence that the long arm practice teacher model is being used effectively to assess students' competence on the SCPHN health visiting programme. Mentors and practice teachers are provided with two additional days training to prepare them to work within the model. The documentation that supports the use of the long arm model is clear and comprehensive and identifies the different roles and activities undertaken within these arrangements.</p>
Evidence / Reference Source
<ol style="list-style-type: none"> 1. NMC programme monitoring report, January 2011 2. NMC self-assessment programme monitoring report, February 2012 3. NMC programme approval report: Registered midwife (3 year programme), November 2011 4. NMC programme approval report: Specialist community public health nursing, October 2011 5. NMC programme approval report: Learning and assessment in practice, practice teacher, 2013 6. Mentor registers viewed 26-27 February 2014 7. Interviews with students, teachers, service managers, CPFs, practice teachers and mentors, 26-27 February 2014
Outcome: Standard met
Comments: no further comments
Areas for future monitoring: none

Findings against key risks
<p>Key risk 2 – Admissions & Progression</p> <p>2.1 Inadequate safeguards are in place to prevent unsuitable students from entering and progressing to qualification</p>
<p>Risk indicator 2.1.1 - admission processes follow NMC requirements</p>
<p>What we found before the event</p>
<p>All candidates for midwifery and nursing programmes are interviewed individually by a lecturer and a representative from one of the local NHS trusts.</p> <p>The interview day includes literacy and numeracy testing.</p> <p>New regulations have been introduced in relation to the Disclosure and Barring Service (DBS), formerly the Criminal Records Bureau (CRB). The new ‘filtering rules for criminal record check certificates’ mean that certain offences need not be disclosed by applicants. All students will have DBS checks prior to commencing the programme.</p> <p>All students offered a place on a nursing or midwifery programme must have an occupational health assessment. Final acceptance on the programme requires confirmation by the occupational health assessor that students are medically fit to undertake the programme.</p>
<p>What we found at the event</p>
<p>We found that the admission process in relation to the SCPHN health visiting programme meets the NMC requirements. We do note however that there are potential risks associated with the centralised admission process undertaken by Health Education North Central and East London (HENCEL). An incident was reported to us where a student had been accepted by HENCEL for the SCPHN HV programme who did not meet the entry requirements. This was identified in the early stages of entry to the programme and a strategy was put in place to support the student to achieve the entry requirements. The school may wish to review the governance processes for entry to the programme to ensure that all students who access the programme have the necessary entry requirements prior to commencement. The school may also wish to review the selection process with HENCEL to ensure that more rigorous selection processes are implemented in the future.</p>

Evidence / Reference Source
<ol style="list-style-type: none"> 1. School of health and social care: Recruitment and selection procedure and process for NMC approved programmes leading to registration, 2012/2013 2. Pre-registration midwifery/nursing programmes: Declaration of good health and character, undated 3. Regulations governing fitness to practise decisions on specified programmes, October 2013 4. Interviews with teachers, mentors, practice teachers, service managers and students, 26-27 February 2014
Risk indicator 2.1.2 - programme providers procedures address issues of poor performance in both theory and practice
What we found before the event
<p>The regulations for fitness to practise state that the university has a responsibility (and in some instances a statutory obligation) to ensure that students are fit to practise in the relevant profession and that they meet or are likely to meet the requirements of the relevant professional body. Nursing and midwifery programmes fall under the remit of these regulations.</p>
What we found at the event
<p>We found that procedures to address issues of poor performance in both theory and practice are well understood by mentor, practice teachers, students and academic staff and implemented effectively in both of the programmes monitored. Good flowcharts exist to demonstrate the process.</p> <p>Our findings demonstrate that procedures and practices in relation to fitness to practise are comprehensive, robust and rigorous and fully meet the requirements of the NMC. The outcomes of the fitness to practise panel confirms that cases are dealt with appropriately to support the student but most importantly to protect the public.</p> <p>A project being undertaken by the faculty to identify lessons that can be learned from the fitness to practise process.</p>
Evidence / Reference Source
<ol style="list-style-type: none"> 1. University of Greenwich: Regulations governing fitness to practise decisions on specified programmes, October 2013 2. Managing concerns flowchart

<p>3. Practice assessment documents</p> <p>4. Interviews with teachers, students, mentors, practice teachers and CPFs, 26-27 February 2014</p>
<p>Risk indicator 2.1.3- programme providers procedures are implemented by practice placement providers in addressing issues of poor performance in practice</p>
<p>What we found before the event</p>
<p>The school has a raising and escalating concerns policy which identifies the procedure for reporting concerns in practice and this information is conveyed to all students, mentors and practice teachers.</p> <p>Mentors/sign-off mentors and practice teachers know how to escalate concerns to the university about either poor practice of students or examples of poor clinical practice in practice placement areas.</p>
<p>What we found at the event</p>
<p>We found that CPFs, practice teachers and mentors know how to escalate concerns to the school if poor performance was observed in practice experience. Placement providers have comprehensive documentation and practice support in place to manage poor performance.</p>
<p>Evidence / Reference Source</p>
<p>1. School of Health and Social Care: Raising and escalating concerns policy, 2013</p> <p>2. Kent Community Healthcare Trust: Process for concerns raised about a practice teacher's performance, undated</p> <p>3. Interviews with mentors, practice teachers, students, service managers and CPF's 26-27 February 2014</p>
<p>Risk indicator 2.1.4 - systems for the accreditation of prior learning and achievement are robust and supported by verifiable evidence, mapped against NMC outcomes and standards of proficiency</p>
<p>What we found before the event</p>
<p>The school recognises that applicants often have substantial learning gained from previous study. Applicants are able to make the most of this learning through the</p>

<p>process of accreditation of prior learning (APL). APL can be used to join a programme if an applicant does not meet the usual entry criteria, or it can be used within a programme to gain credit or entry at a higher level.</p>
<p>What we found at the event</p>
<p>We can confirm that the systems for the accreditation of prior learning and achievement are robust and are supported by verifiable evidence mapped against NMC outcomes and standards of proficiency.</p> <p>To further enhance the quality of the processes, the school are advised to include within the mapping process accurate information in relation to the hours of theory and practice that are included in the accreditation. This will ensure that all regulatory requirements are indisputably met.</p> <p>For midwifery programmes APL is not permitted.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. School of health and social care; APL procedure and flowchart ,undated 2. Interviews with students, teachers, and the APL coordinator, 26-27 February 2014
<p style="text-align: center;">Outcome: Standard met</p>
<p>Comments:</p> <ul style="list-style-type: none"> • The school may also wish to review the selection process with HENCEL to ensure that more rigorous selection processes for entry to the SCPHN programme are implemented in the future. • To further enhance the quality of the APL processes, the school are advised to include within the mapping process accurate information in relation to the hours of theory and practice that are included in the accreditation. This will ensure that all regulatory requirements are indisputably met.
<p>Areas for future monitoring:</p> <ul style="list-style-type: none"> • The admission process to SCPHN programmes to ensure that entry requirements are fully met.

Findings against key risks
<p>Key risk 3- Practice Learning</p> <p>3.1 Inadequate governance of and in practice learning</p> <p>3.2 Programme providers fail to provide learning opportunities of suitable quality for students</p> <p>3.3 Assurance and confirmation of student achievement is unreliable or invalid</p>
<p>Risk indicator 3.1.1 - evidence of effective partnerships between education and service providers at all levels, including partnerships with multiple education institutions who use the same practice placement locations</p>
<p>What we found before the event</p>
<p>Due to the reconfiguration of South London Healthcare NHS Trust (SLHCT) they have written to all students to re-affirm their commitment to providing placement opportunities within the re-configured structures. Close collaboration between SLHCT and the university proactively identifies where service changes may impinge on student experience.</p> <p>The increase in commissions to children's nursing programmes has resulted in pressures on placement capacity.</p> <p>An action plan has been developed by the university to respond to adverse issues raised by the LSA and CQC.</p>
<p>What we found at the event</p>
<p>We found robust evidence of effective partnerships with practice placement providers and associated education providers at both strategic and operational levels. There is also strong evidence that these partnerships are being used to develop innovative solutions to challenges that exist. This is supported by education commissioners who informed us that the school is proactive at managing potential issues and is highly responsive and effective when challenging or adverse issues arise.</p> <p>The school has a highly effective approach to maintaining partnership with placement providers. They assign a key account manager who is responsible for regularly liaising with service managers to discuss any issues that adversely impact on the learning environment. We can confirm that all parties agree that these arrangements are highly effective at maintaining quality learning experiences for students.</p> <p>Educational audit in relation to midwifery services is appropriately undertaken and fully</p>

meets NMC requirements.

In relation to the educational audit process for the SCPHN health visiting programme the school may wish to review current practices in light of the NMC quality assurance framework (Annexe 2: Assuring the safety and effectiveness of practice learning (2013)) to ensure audits are always undertaken jointly between the university and practice placement partners.

Placement management is efficiently undertaken and appears to meet the many challenges that exist from the escalation process, clinical governance reporting and the many service re-configurations. We found effective procedures are in place to protect students' learning and to assess if placements need to be withdrawn or rested. We can confirm that the school's response to adverse LSA and CQC reports in areas where students are placed is highly effective at protecting student learning. Action taken through the provision of additional support and collaborative work with the placement provider is effective and fully meets the requirement to ensure that students are not subjected to either poor learning experiences or patient care practices.

Lewisham and Greenwich NHS Trust have commissioned management consultants to facilitate the transformation of midwifery services and to look at creative and innovative solutions to the complex issues and challenges that exist with delivering midwifery services in London.

The role of the clinical practice facilitator, and adjunct titles, are pivotal in ensuring the quality of the practice environment and is an important link to the university ensuring that a strategic approach exists for the allocation and support of students in clinical practice.

We commend the school and associated placement provider services for the introduction of monthly student forums which take place within the practice placement areas where students can raise concerns and access support. The forums enable students to explore possible issues of concern and provide education staff with the opportunity to access soft intelligence and if necessary explore issues further. The value and usefulness of these forums is evidenced through some students attending on their days off.

Evidence / Reference Source

1. NMC programme monitoring report, January 2011
2. NMC self-assessment programme monitoring report, February 2012
3. NMC programme approval report: Registered midwife (3 year programme), November 2011
4. NMC programme approval report: Specialist community public health nursing, October 2011
5. NMC programme approval report: Learning and assessment in practice, practice teacher, 2013
6. London LSA annual report 2012–2013
7. CQC inspection report: Maternity services at University Hospital Lewisham, 2 August 2013 (routine inspection)
8. CQC report: Bart's Health NHS Trust, Newham General Hospital, January 2014

9. Faculty of Education and Health - Safeguarding individuals at risk: Guidance for students in practice, 2013
10. School of Health and Social Care: Practice placement guidelines handbook, 2013
11. Programme handbooks
12. Practice assessment documents
13. Bart's Health NHS Trust: Induction programme
14. Student midwives handbook
15. Interviews with students, mentors, employers, and teachers, 26-27 February 2014

Risk indicator 3.2.1 -practitioners and service users and carers are involved in programme development and delivery

What we found before the event

The university strategy states that promotion of service user involvement is now part of its mainstream policy agenda in health and social care programme areas.

What we found at the event

We can confirm that practitioners are fully involved in programme development and delivery.

Service users and carers also contribute towards programme development and delivery. A comprehensive service user and carer strategy exists and is being implemented. The midwifery programme has a consistent theme of service user involvement in the delivery of the programme. The implementation and commitment to the 'buddy scheme' which develops student midwives' greater understanding of mental ill health and related issues from a service user perspective is notable practice with positive results for students' learning and the provision of women's care. Students are required to have testimonies from service users as part of their practice assessment documentation. Service user involvement in the admissions process and the formal assessment of student competence could be further enhanced to fully embrace NMC requirements and those of contemporary practice.

Evidence / Reference Source

1. School of health and social care: Strategy for service user and carer engagement, 2013
2. Interviews with service users
3. Interview with 'buddy scheme' coordinator
4. Interviews with students and teachers, 26-27 February 2014

Risk indicator 3.2.2 - academic staff support students in practice
What we found before the event
NMC programme monitoring reports and approval reports confirm the school has a link lecturer system in place for academic staff to support students in practice.
What we found at the event
<p>Our findings confirm that the link lecturer system is fully implemented and education staff have a strong presence in practice learning environments. Students told us that they are well supported by link lecturers in practice.</p> <p>Health visitor lecturers visit the students in practice placements once a semester and more often if required.</p> <p>Midwifery lecturers spend approximately one day per week in practice.</p>
Evidence / Reference Source
<ol style="list-style-type: none"> 1. School of Health and Social Care: Practice placement guidelines handbook 2013 2. Personal tutoring policy, 2013 3. Link teacher arrangements, 2013 4. Personal tutor information pack (nursing and midwifery programmes), 2013 5. Kent Community Healthcare Trust: Format for tripartite review 6. Interviews with mentors, practice teachers, students, teachers and senior manager, 26-27 February 2014
Risk indicator 3.3.1 - evidence that mentors, sign-off mentors and practice teachers are properly prepared for their role in assessing practice
What we found before the event
NMC monitoring reports and approval reports state mentors, sign-off mentors and practice teachers are properly prepared for their role in assessing practice.
What we found at the event

<p>We can confirm that mentors/sign-off mentors and practice teacher assessment of competence is consistent and substantiated by students' performance.</p> <p>We found evidence that practice teachers and mentors are committed to their role and supportive to students who are experiencing issues with progression.</p> <p>Practice teachers in Kent Community Healthcare Trust operate a long arm mentor arrangement. Practice teachers have up to five students allocated who receive day to day supervision and support from specialist mentors who have undertaken an additional two day specialist mentor training programme. The practice teachers have a reduced caseload to facilitate the extended role. Comprehensive paperwork is in place to manage this arrangement and all specialist mentors, practice teachers and students confirmed to us that these arrangements are working well and are meeting the needs of students learning.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. School of health and social care: Mentor preparation, 'The experienced mentor guide' - frequently asked questions, November 2012 2. Specialist mentor training programme outline 3. Kent Community Healthcare Trust: Record of discussion, SCPHN documentation 4. Management process for SCPHN students registration using long arm mentoring arrangements 5. Learning agreement between practice teacher and SCPHN student 6. Progress and achievement record 7. Progress review meeting with practice teachers 8. Progress review meeting with specialist mentor 9. Mentor registers viewed 26-27February 2014 10. Interviews with teachers, mentors, students, and employers, 26-27 February 2014
<p>Risk indicator 3.3.2 - mentors, sign off mentors and practice teachers are able to attend annual updates sufficient to meet requirements for triennial review</p>
<p>What we found before the event</p>
<p>Previous NMC programme monitoring and approval reports confirm mentors, sign-off mentors and practice teachers are able to attend annual updates sufficient to meet requirements for triennial review This evidence will be explored during the monitoring event.</p>
<p>What we found at the event</p>

<p>We found that in community services all practice teachers have the opportunity to attend three updates which are provided at the university. Triennial review is undertaken and meets the requirements of the NMC.</p> <p>In midwifery services annual updates are integrated within mandatory training. Systems for managing triennial review are fully implemented.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. School of health and social care: Response to reviewers queries arising from practice visits to Kent Community Healthcare Trust, 26 February 14 2. Mentor registers viewed 26-27 February 2014 3. Interviews with students, teachers, senior managers and clinical placement facilitators, 26-27 February 2014
<p>Risk indicator 3.3.3 - records of mentors / practice teachers are accurate and up to date</p>
<p>What we found before the event</p>
<p>Previous NMC programme monitoring and approval reports confirm records of mentors/practice teachers are accurate and up to date.</p>
<p>What we found at the event</p>
<p>We can confirm that the majority of information held on mentor and practice teacher registers is accurate and up to date. However, in community services there was some data missing which was later evidenced to have taken place. The community services may wish to review the procedures that are in place for updating the registers.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. NMC programme monitoring report, January 2011 2. NMC self-assessment programme monitoring report, February 2012 3. NMC programme approval report: Registered midwife (3 year programme), November 2011 4. NMC programme approval report: Specialist community public health nursing, October 2011 5. NMC programme approval report: Learning and assessment in practice, practice teacher, 2013 6. Mentor registers viewed 26-27 February 2014

Outcome: Standard met

Comments:

- Service user involvement in the admissions process and the formal assessment of students' competence could be further enhanced to fully embrace NMC requirements and those of contemporary practice.
- In relation to the educational audit process for the SCPHN health visiting programme the school may wish to review current practices in light of the NMC quality assurance framework (Annexe 2: Assuring the safety and effectiveness of practice learning, 2013), to ensure audits are always undertaken jointly between the university and practice placement partners.
- Whilst the majority of information held on mentor and practice teacher registers is accurate and up to date in the community services there was some data missing which was later evidenced to have taken place. The community services may wish to review the procedures that are in place for updating the registers.

Areas for future monitoring:

- Service user and carer engagement within the selection and assessment process.
- The partnership arrangements between the education provider and placement provider in conducting educational audit.
- The triennial review process is fully implemented and updated to mentor registers.
- The accuracy and currency of the practice teacher/sign-off mentor/mentor registers.

Findings against key risks

Key risk 4 - Fitness to Practice

4.1 Approved programmes fail to address all required learning outcomes that the NMC sets standards for

4.2 Audited practice placements fail to address all required learning outcomes in practice that the NMC sets standards for

Risk indicator 4.1.1 - students achieve NMC learning outcomes, competencies and proficiencies at progression points and for entry to the register for all programmes that the NMC sets standards for.

What we found before the event

The midwifery pre-registration programmes are designed to prepare students to assume the responsibilities and accountability for contemporary practice as a registered midwife.

There is shared learning between midwifery and nursing students in areas such as biological and social sciences, professional values, ethics, research and informatics.

The students achieve the required NMC outcomes and competencies including the essential skills clusters and the requirements of the EU Directive 2005/36/EC.

The SCPHN health visiting programme has been developed in response to the Department of Health (DH) health visitor implementation plan, 2011-15. The school has developed the programme with local partner healthcare organisations. It is intended to meet the needs and expectations of the new agenda and make a difference to the health and well-being of individuals and communities.

The programme enables students to integrate the study of health, policy, research and evidence-based practice within the context of SCPHN practice.

Students are assessed through exams, reports, group presentations and practical work.

What we found at the event

We can confirm that learning and teaching methods, assessment processes and student support enables students to achieve the NMC learning outcomes, competencies and proficiencies for entry to the midwifery and health visiting parts of the NMC register.

Students emerging from the programmes are considered fit for practice by employers.

We found that education commissioners assess the quality of the programmes as very high and provide additional evidence that students emerging from these programmes are fit for practice and highly sought after by employers.

We saw evidence that external examiners confirm that the programmes are of high quality, meet all statutory requirements and confirm the generally high academic performance of students.

Evidence / Reference Source

1. University of Greenwich website
2. NMC self-assessment programme monitoring report, February 2012
3. NMC programme approval report: Registered midwife (3 year programme), November 2011
4. NMC programme approval report: Specialist community public health nursing, October 2011
5. External examiners annual reports, 2012/2013
6. School of health and social care: BSc (Hons) SCPHN- Definitive document, November 2011(updated January 2014)
7. Programme handbooks
8. Practice assessment documents
9. Presentation by programme team, 26 February 2014

10. Interviews with education commissioners, students, mentors, practice teachers, teachers and senior managers, 26- 27 February 2014

Risk indicator 4.2.1 - students achieve NMC practice learning outcomes, competencies and proficiencies at progression points and for entry to the register for all programmes that the NMC sets standards for

What we found before the event

The pre-registration midwifery programme offers a balance of practice and theoretical learning in a variety of settings. This enables the student midwife to develop the necessary knowledge and skills required to meet the needs of women and their families during pregnancy, childbirth and early parenthood.

SCPHN HV students work in a wide range of community-based settings in health and education sectors.

What we found at the event

We found that students on the pre-registration midwifery programme are confident and excellent ambassadors for the quality of the course. Students are able to meet the requirements of the European Directive for clinical experience and numbers of hours. All students have access to medical and surgical placements. The grading of practice is well understood by students and sign-off mentors. Practice assessment is monitored by practice scrutiny panels.

Practice teachers, mentors and students confirmed to us that there are an appropriate range of practice learning experiences to meet the specialist level of practice required for the SCPHN health visitor programme. Students work closely with children's centres which offer inter-professional learning opportunities. Alternative practice is undertaken in an array of placements that provide the students with opportunities to see public health in different settings.

The highest testament to the high calibre of practitioners produced from the programmes is the employability of the SCPHN and midwifery students.

Evidence / Reference Source

1. University of Greenwich website
2. NMC self-assessment programme monitoring report, February 2012
3. NMC programme approval report: Registered midwife (3 year programme), November 2011
4. NMC programme approval report: Specialist community public health nursing, October 2011

<ol style="list-style-type: none"> 5. External examiners annual reports, 2012/2013 6. School of health and social care: BSc (Hons) SCPHN- Definitive document, November 2011(updated January 2014) 7. School of Health and Social Care: External examiners annual reports, 2012/2013 8. Programme handbooks 9. Practice assessment documents 10. Kent Community Healthcare Trust: SCPHN feedback forms 11. Action plan for additional support in achieving SCPHN proficiencies/Behaviours and attitudes 12. Learning statement from attendance at each SCPHN learning hub 13. Presentation by programme team, 26 February 2014 14. Interviews with education commissioners, students, senior managers, mentors, practice teachers and clinical practice facilitators, 26-27 February 2014
Outcome: Standard met
Comments: no further comments
Areas for future monitoring: none

Findings against key risks
<p>Key risk 5- Quality Assurance</p> <p>5.1 Programme providers' internal QA systems fail to provide assurance against NMC standards</p>
<p>Risk indicator 5.1.1 - student feedback and evaluation/ Programme evaluation and improvement systems address weakness and enhance delivery</p>
<p>What we found before the event</p>
<p>The university has quality assurance processes in place to enable opportunities for students to complete modules, programme and practice placement evaluations.</p>

<p>What we found at the event</p>
<p>We can confirm that all modules and programmes are subject to evaluation and there is clear evidence that issues are followed through to resolution and that feedback is provided on action taken to students and clinical staff.</p> <p>We found the programme teams to be highly responsive to issues raised. Students told us that issues that had been raised by them had been listened to and acted upon by the programme teams in a prompt manner.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. School of health and social care: Programme management team notes 2. Student evaluations 3. External examiners reports 2012/2013 4. Interviews with students, practice teachers, mentors, teachers and service managers, 26-27 February 2014
<p>Risk indicator 5.1.2 - concerns and complaints raised in practice learning settings are appropriately dealt with and communicated to relevant partners.</p>
<p>What we found before the event</p>
<p>External examiners engage with both theory and practice.</p> <p>The school has a raising and escalating concerns policy which identifies the procedure for reporting concerns in practice.</p>
<p>What we found at the event</p>
<p>Our findings demonstrate there are effective quality assurance processes in place to manage risks and ensure NMC requirements are met. There are robust processes in place to manage escalating concerns (sections 2.1.3 and 3.1.1).</p> <p>We found evidence of rigorous processes that are fully implemented to ensure that external examiners fulfil all aspects of their role including monitoring the assessment of practice.</p> <p>We found external examiner reports to be comprehensive and supportive of the quality of the programmes and the academic support given to students. Issues raised by external examiners in annual reports are fully responded to and there is strong evidence of how changes have been implemented.</p>

Evidence / Reference Source
<ol style="list-style-type: none">1. NMC programme monitoring report, January 20112. NMC self-assessment programme monitoring report, February 20123. School of Health and Social Care: External examiners annual reports, 2012/134. LSA Annual Audit Report: Bart's NHS Trust - October 20135. Bart's Health NHS Trust: Interviews with students, teachers, practice teachers mentors and senior managers, 26-27 February 2014
Outcome: Standard met
Comments: no further comments
Areas for future monitoring: none

Personnel supporting programme monitoring

Initial visit on 29 Jan 2014 prior to monitoring event. Meetings with:

Pro Vice Chancellor, Faculty of education and health
 Head of department, Family care and mental health
 Head of Department, Adult nursing and paramedic science
 Director of partnerships and NHS liaison
 Director of teaching and learning
 Lead midwife for education
 Programme leader - pre-registration midwifery programmes
 Programme leader – SCPHN, health visiting
 Clinical practice facilitators

During monitoring event. Meetings with:

Pro Vice Chancellor, Faculty of education and health
 Head of department, Family care and mental health
 Head of Department, Adult nursing and paramedic science
 Director of partnerships and NHS liaison
 Director of teaching and learning
 Lead midwife for education
 Programme leader - pre-registration midwifery programmes
 Programme leader – SCPHN, health visiting
 Head of Midwifery Lewisham and Greenwich NHS Trust
 Associate Director of Nursing Lewisham and Greenwich NHS Trust
 Assistant Head of Midwifery, Dartford and Gravesham NHS Trust
 Education Lead Dartford and Gravesham NHS Trust DVH
 Associate Director of Nursing Oxleas NHS Foundation Trust
 Nurse Education, Support & Development Kent Community Healthcare NHS Trust
 Practice Development Midwife Kent Community Healthcare NHS Trust
 Clinical Educator Health Visiting Lewisham and Greenwich NHS Trust
 Head of Midwifery Newham University Hospital, Bart's Health NHS Trust

Head of Midwifery The Royal London Hospital, Education Lead for Midwifery Bart's Health NHS Trust
Associate Director Bart's Health NHS Trust
Midwifery Lecturers x 6
Midwifery practice facilitator, Princess Royal University Hospital
Midwifery Clinical Practice Facilitator Queen Elizabeth Hospital
Midwifery Clinical Practice Facilitators, Lewisham and Greenwich NHS Trust
Midwifery Clinical Practice Facilitator, Lewisham and Greenwich NHS Trust
Professional Lead Child Health & Welfare
Senior Lecturer SCPHN
AP(E)L Coordinator
Clinical Educator Health Visiting Lewisham and Greenwich NHS Trust
Visiting Lecturer, Practice Teacher Support London Contract
Associate Director of Education – South London NHS
Education Commissioning Manager – South London NHS
Head of Quality & Intelligence - Health Education Kent, Surrey and Sussex
Fitness to Practice Panel Coordinator
Service User and Carer Representatives
Buddy Scheme Coordinator

Meetings with:

Mentors / sign-off mentors	29
Practice teachers	8
Service users / Carers	2
Practice Education Facilitator	5
Director / manager nursing	4

Director / manager midwifery	3
Education commissioners or equivalent	2
Designated Medical Practitioners	0
Other:	1 Placement Team Lead

Meetings with students:

Student Type	Number met
Midwifery – Three year	Year 1: 12 Year 2: Year 3: 8
SCPHN - HV	15