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 West of Scotland
Programmes monitored	Registered Nurse - Adult; Registered specialist community public health nursing – health visiting
Date of monitoring event	5 -6 March 2014
Managing Reviewer	Peter Thompson
Lay Reviewer	Kathleen Houston
Registrant Reviewer(s)	Monica Murphy, Joanna Dunn
Placement partner visits undertaken during the review	Vale of Leven hospital: Acute medical admissions unit; Lomond ward and Rehabilitation unit.
	Monkland's hospital: Ward 18 (coronary care, high dependency and general medicine) and Ward 12 (orthopaedic and elderly medicine).
	Bellshill long term community care team
	NHS Ayrshire and Arran: Symington Health Centre
	NHS Ayrshire and Arran: Crosshouse Area Centre
	NHS Greater Glasgow & Clyde: West Dunbartonshire Health Centre
	NHS Lanarkshire: Coatbridge Health Centre
	NHS Dumfries & Galloway: Stranraer Health Centre (phone call)
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	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 University of West of Scotland's programmes

The School of health, midwifery and nursing at the University of West of Scotland (UWS) provides pre-registration undergraduate education and training for five health boards in the West of Scotland. The school has a presence across the four campuses of the university in Ayr, Dumfries, Hamilton and Paisley.

This monitoring event reviewed the pre-registration adult nursing programmes which are delivered at degree and at master's levels and the specialist community public health nursing - health visiting (SCPHN-HV) programme.

The monitoring visit 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 where Healthcare Improvement Scotland have raised concerns about care standards.

Summary of public protection context and findings

We found robust processes to ensure there are sufficient appropriately qualified mentors and practice teachers to promote effective learning experiences for students. For the SCPHN-HV programme, practice teachers told us that their clinical workloads are adjusted to allow time to support students and that they are able to arrange placement days flexibly in order to provide focused supervision time.

For the adult programme mentors told us they were spending 50% or more time with allocated students. All students told us that the practice supervision they receive ensures that they achieved their required learning outcomes and competencies.

Our findings demonstrate that the university has effective procedures for the recruitment and selection of students. Students, service users and practice placement partners are satisfied that the interview process is effective in selecting candidates with the appropriate values and attitudes.

We found effective procedures for addressing poor performance in theory and practice. Managers, mentors and practice teachers expressed confidence in implementing the procedures for fitness to practise and addressing poor performance in practice. We are satisfied that practice staff have the confidence and knowledge to implement the cause for concern policy in situations where students are not achieving the required competencies and may be a danger to public protection.

We found effective partnerships between the university and practice placement partners. We ascertained that procedures for raising and escalating concerns are fully implemented and effective. All students and practice placement partners to whom we spoke explained how they would raise concerns within practice areas and identified clear lines of support through the liaison lecturer, practice education facilitator or care home education facilitator. Furthermore, students feel that their concerns are taken seriously and that they are supported by their lecturers and the practice placements partners.

In line with NMC requirements, audits are undertaken biennially to determine the suitability of the placement. This is undertaken jointly with practice placement partners. Liaison lecturers review issues arising from educational audit activity, share good practice and agree activities for enhancing the quality of practice learning.

We found the wide range of learning strategies and support provided enables students to achieve the NMC learning outcomes and competencies. There are opportunities for students to rehearse and develop practice skills prior to placements and offering care to service users. These help to promote effective student learning and maintain public protection.

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

Practice learning environments within NHS Lanarkshire have received unfavourable inspections from Healthcare Improvement Scotland. At the monitoring visit we found that the school has taken appropriate action to protect student learning and to ensure that students are not subjected to either poor educational experiences or unsafe patient care.

Summary of areas that require improvement

Service users had not been involved in curriculum planning or the recent approval of the SCPHN-HV programme. Overall, user and carer involvement in the SCPHN-HV programme was found to be lacking in consistency and formalisation. Improvements are required to address this weakness and to enhance assurance for public protection.

Summary of areas for future monitoring

- The development of the academic in practice role.

- The extent to which service users' and carers' contributions to programme development and delivery is formalised and implemented across the whole school.

- There is a potential need for future monitoring depending on the outcome of the Vale of Leven report. The university is advised to keep the NMC informed of the actions taken in response to the publication of the report in order to determine whether this is necessary.

- The impact of introducing a single student intake from September 2013 on the quality of student experience and the compliance with standards.

Summary of notable practice

None identified.

Summary of feedback from groups involved in the review

Academic team

We found that academic staff are committed to supporting students to ensure they become effective and caring health professionals. Curriculum content is reinforced by simulation and practice learning. Liaison lecturers ensure that the links between theory and practice learning are consolidated. Staff are confident that they offer educational experiences of high quality and that all risks are managed. Academic teams show a willingness to overcome the challenges of the geographical spread of campuses and practice learning environments (PLE) and fulfil their liaison lecturer role to a high standard.

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

Managers, practice teachers and mentors in health boards work collaboratively using effective tracking and evaluation processes to monitor and assess the training of student nurses and health visitors. Students particularly commended the support of mentors and practice education facilitators (PEF) and practice teachers (PT). The enthusiasm for rigour in professional practice and patient focus, demonstrated by those interviewed in PLEs, was commendable. Representatives of NHS health boards expressed confidence in the work of the UWS in providing high quality programmes and recognised a focused, responsive and flexible approach from school staff at all levels.

Students

Students told us that the curriculum is contemporary and relevant and that there is good theory and practice integration. They feel well supported in all aspects of their learning experiences and are confident that they will be fit to practise and employable upon completion. SCPHN-HV students were unanimous in praising the support given by the academic staff, reporting that they are responsive and easy to contact. All students are able to articulate clearly how they would raise concerns in the practice setting.

Service users and carers

The service users' and carers' comments, captured formally within the pre-registration programme and informally within the SCPHN-HV programme, confirmed confidence in the students' abilities and appreciation of their caring and compassionate approach.

Relevant issues from external quality assurance reports

Healthcare Improvement Scotland (HIS)/Health Environment Inspectorate (HEI) reports between 2012 and 2013 were considered for practice placements used by the university to support students' learning.

The following reports require action(s):

A report relating to the Vale of Leven (NHS Lanarkshire) was commissioned in 2009.

The Scottish government set up an independent, public inquiry into the circumstances of deaths and illness at the Vale of Leven hospital between 1 January 2007 and 1 June 2008 which are attributed to c. difficile infection. The delayed report is expected to be published in March 2014.

In August 2013, HIS was commissioned to undertake a rapid review of the safety and quality of care for acute adult patients in NHS Lanarkshire. The outcome of this review was that the health board was required to make 21 improvements by 17 December 2013 and focussed on emergency care services and clinical staffing.

The university has subsequently been in contact with the NMC and the chief executive NHS Lanarkshire to raise concerns about the findings of the reports. NHS Lanarkshire confirmed that processes had been put in place to address concerns and to support adult nursing students in practice. There is a clear action plan in place to address the concerns.

Following press releases the NMC Standards compliance manager requested information from UWS and the details were notified to the NMC.

At the review we found that the school is monitoring student evaluations very closely and has increased support as appropriate. They have a system in place to support students who raise concerns. The school's placement management process is sound and engagement with partners is robust to advise how challenges arising from the escalation process, clinical governance reporting and service re-configurations can be managed. Effective procedures are in place to protect students' learning and to assess if placements need to be withdrawn or rested.

We consider that the school's responses to adverse HIS reports, in areas where students are placed, are appropriate and effective. Action taken is fully consistent with the requirement to protect student learning and to ensure that students are not subjected to either poor educational experiences or unsafe patient care.

All HIS compliance reports relevant to the placement areas used by the UWS for approved nursing and midwifery programmes were considered but did not require further discussion as part of this review

Evidence / Reference Source

1.   Hospital standardised mortality ratio (HMSR) and HIS rapid review engagement event, 18 December, 2013
2.   Update on HSMR improvement plan and HIS rapid review, 3 January, 2014, version 1.2
3.   HEI steering group report for nursing and midwifery and allied health professional (NMAHP) senior leaders meeting, 28 January, 2014
4.   Http://www.healthcareimprovementscotland.org/our_work/governance_and_assurance/
5.   email from UWS to NMC Standards compliance , 20 December 2013
6.   UWS School senior staff presentation, 5 March 2014

Follow up on recommendations from approval events within the last year

BSc (Hons) Midwifery (3year) / BSc (Hons) Midwifery (78 weeks) approved May 2013 - five recommendations.

MSc Adult and Mental Health Nursing, NMC Major modification desktop review. March 2013 - four recommendations.

We found that the school has responded to the outcomes of the approval events within the last year. There is confirmation that recommendations were considered in a timely manner. When recommendations have not been implemented the school has provided a clear rationale for their decision including consideration of the implications and educational value of the recommendations.

Evidence / Reference Source

1. UWS Self assessment report, 2013-2014 (part 1)
2. NMC programme approval report: BSc (Hons) Midwifery (3year) / BSc (Hons) Midwifery (78 weeks), May 2013.
3. NMC major modification report: MSc adult and mental health nursing (desktop review), March 2013.

Specific issues to follow up from self-report

All actions highlighted in the self- report are complete. Specific issues followed up include:

Monitoring of the impact of a single intake (fully implemented in September 2013)

Evaluation by educationalists, practice placement providers and students confirms that the single intake of students has impacted on the availability of learning and teaching resources. This is being addressed through development of the e-learning platform.

Increase in referral of students to fitness to practise

The school has witnessed an increase in the numbers of fitness to practise cases as a result of students' inappropriate conduct on social media sites which involves reference to practice learning environments and confidential information. Research has been funded by NHS Education for Scotland (NES) to explore the national fitness to practise data and this will reported in 2014. A review of fitness to practise cases is underway within the school and planning for development of a new policy is scheduled for completion in the academic session 2014-15.

Evidence / Reference Source

1. UWS Self assessment report, 2013-2014

Findings against key risks

Key risk 1 – Resources

1.1   Programme providers have inadequate resources to deliver approved programmes to the standards required by the NMC

1.2   Inadequate resources available in practice settings to enable students to achieve learning outcomes

Risk indicator 1.1.1 - registrant teachers hold NMC recordable teaching qualifications and have experience / qualifications commensurate with role

What we found before the event

Evaluation by educationalists, practice partners and students confirms that the single intake of students has impacted on the availability of learning and teaching resources. This is being addressed through development of the e-learning platform.

What we found at the event

We found that the majority of teachers hold NMC recordable teaching qualifications and have experience and qualifications commensurate with their role. Academic staff are supported to achieve NMC teacher status. The programme leads for adult pre-registration nursing and for health visiting hold NMC recorded teaching qualifications. The workload for teachers is assigned with due regard.

Evidence / Reference Source

1. UWS Activity planning guidelines, 2010

2. UWS Performance and development review, 2012-13

3. UWS Academic development plan, 2013

4. Activity planning process template, 2013

5. School staff development application form, 2012

6. Research and knowledge exchange strategy, 2013

7. Institute research report, 2013

8. Staff CVs

9. Staff development guidelines and process, 2012

10. Compliance with stage 4 (2.3 SLAiP NMC 2008), 2013

11. NMC registration service

12. School senior staff presentation, 5 March 2014

Risk indicator 1.2.1 - sufficient appropriately qualified mentors / sign-off mentors / practice teachers available to support numbers of students

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What we found before the event

Placement capacity is overseen by the practice education facilitator (PEF) or care home educational facilitator (CHEF) and liaison lecturers (LL). Any changes in services that affect the numbers of mentors are notified to senior management and a notification of change form is completed, signed and returned to the university practice learning unit for amendments to the allocation system. Arrangements are clearly articulated for PEF teams to prioritise applications of potential student mentors for the mentorship in professional practice module from areas where capacity could be increased.

What we found at the event

We found that there are sufficient appropriately qualified mentors, sign-off mentors and practice teachers available to support numbers of pre-registration nursing, adult field students and health visiting students.

For the SCPHN-HV programme, practice teachers confirmed that their clinical workloads are adjusted to allow time to support students and that they are able to arrange placement days flexibly in order to provide focused supervision time.

For the pre-registration nursing, adult field students confirmed that the time they spent with mentors exceeded the 40% requirement. All mentors reported spending 50% or more time with allocated students. Various approaches to supporting students were described that include the allocation of co-mentors and team approaches which aided inter-assessor reliability. Mentors reported that normally they have sufficient time to complete students' practice assessment documentation.

Evidence / Reference Source

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1. Lanarkshire, nursing and midwifery students practice learning experience model, 2012

2. UWS Practice learning strategy, 2012-2014

3. NHS mentorship capacity summary, 2013

4. UWS Educational audit summary, 2013

5. Practice education partnership forum, Dumfries, June 2013

6. Performance management of pre-registration nursing and midwifery education: survey report UWS, NES 2013 (page 13)

7. UWS NHS / private sector mentor database

8. NHS Greater Glasgow and Clyde practice placements capacity policy

9. Interviews with managers, PEFS, CHEFs, practice teachers, mentors and students, 5- 6 March 2014

10. Interviews with representatives from NHS health boards, 5- 6 March 2014

Outcome: Standard met

Comments: no further comments

Areas for future monitoring: none

Findings against key risks

Key risk 2 – Admissions & Progression

2.1   Inadequate safeguards are in place to prevent unsuitable students from entering and progressing to qualification

Risk indicator 2.1.1 - admission processes follow NMC requirements

What we found before the event

Conditions of entry to the BSc and MSc pre-registration nursing, adult field programme, stipulate that occupational health services must approve all prospective students as being fit to undertake the programme. All students must have a satisfactory protection of vulnerable groups (PVG) check and are expected to declare any changes in health or good conduct status annually; this is checked at each progression point.

The selection process for pre-registration programmes takes place in partnership with practice placement providers (who have undertaken a short workshop on selection process and have undertaken equality / diversity training within their own role). Interviews are face to face.

What we found at the event

We found that the selection processes are robust, follow NMC requirements and are enhanced by a newly introduced values-based approach.

Service users contribute to the selection process through the admissions group where

they review and develop the questions used in pre-registration nursing interviews. Practice placement providers participate in selection with academic staff and they are all fully briefed for their participation.

We were informed that all students must have a satisfactory PVG check and are expected to declare any changes in health or good conduct status annually; this is checked at each progression point.

Health visitor students are sponsored by practice partners and interviewed by the programme team in collaboration with practice representatives. PVG checks are made by both the NHS sponsor and by the university.

Evidence / Reference Source

1. UWS entry criteria for undergraduate nursing / midwifery programmes, September 2014/15

2. UWS admissions policy, September 2012

3. UWS undergraduate & pre-registration admissions- operational policy, 2014-2015

4. Admissions: care & compassion, 2013

5. Student files

6. UWS fraud policy and procedure, 2012-15

7. Interview panel membership, 3 March 2014

8. Interviews with lead for admissions programme team managers, PEFS, CHEFs, practice teachers, mentors and students, 5- 6 March 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

Personal tutors can refer students who are struggling with their academic work to the university's study skills course and if appropriate to the counselling services. Personal tutors complete individual progress reports on pre-registration nursing students at the end of each complete year of the programme.

What we found at the event

We found that the school has clear and robust processes for the management of students' poor performance in both theory and practice. There is fitness to practise procedure in place. In addition, processes are available to enable failing students to receive remedial support and, if needed, they can be given leave from the programme

to address academic, health or personal difficulties that impact upon performance.

Programmes have clear progression points and criteria for progression are closely monitored. Intercalated students are contacted during their absence and their access to university resources is not interrupted. Students are required to disclose any changes in conduct and health status before rejoining the programme.

All pre-registration nursing students are aware of their responsibilities to meet self-declaration requirements which are checked annually at progression points.

Concerns identified through initial PVG checking and disclosures from all students are risk assessed by the admissions tutor and shared with the respective senior managers within NHS health boards who make the final decision of acceptance or refusal.

SCPHN-HV students are required to pass their first period of practice before progressing to consolidated practice.

Evidence / Reference Source

1. Mentor update presentation slides, 2014
2. UWS student engagement policy, 2011-14
3. UWS guidelines for the personal tutor role pre-registration programmes, 2010-2013
4. MSc adult nursing / BSc adult nursing part one - progression report, 2013
5. On-going record of achievement
6. UWS Cause for concern procedure nursing and midwifery, 2012-14
7. Managing progress – monitoring progression, status report, 2013/14, (with supporting action plan)
8. Interviews with managers, mentors and practice teachers 5 - 6 March 2014

Risk indicator 2.1.3- programme providers' procedures are implemented by practice placement providers in addressing issues of poor performance in practice

What we found before the event

Documentary evidence suggests that risk is managed through assessment of practice, mentor and practice teacher activity and liaison lecturer support.

What we found at the event

We found that managers, mentors and PTs are confident in implementing the procedures for fitness to practise and addressing poor performance in practice. They have clear written guidelines and mentor updating sessions reinforce measures to manage poor performance.

All mentors and practice teachers commented positively on the timeliness of responses from liaison lecturers and PEFs in providing advice and support when addressing student performance issues. There are clear criteria and policies to withdraw students from practice and we observed evidence that these have been implemented. Reported reasons include, for example, poor standards of care; realignment of services and reduction in mentor availability to provide adequate supervision.

Evidence / Reference Source

1. Mentor update presentation slides, 2014

2. UWS Student engagement policy, 2011-14

3. UWs guidelines for the personal tutor role pre-registration programmes, 2010-2013

4. MSc adult nursing / BSc adult nursing part one - progression report, 2013

5. On-going achievement record (OAR)

6. UWS cause for concern procedure nursing and midwifery, 2012-14

7. UWS managing progress – monitoring progression, status report 2013/14 (with supporting action plan)

8. UWS student engagement policy, 2011-14

9. Interviews with managers, mentors and practice teachers, 5-6 March 2014

10. Interviews with representatives of NHS Health Boards, 5- 6 March 2014.

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

What we found before the event

Recognition of prior learning (RPL) procedures are clear and robustly implemented. All RPL claims are double marked and if the claim is for credit at SCQF level 9 or above the assessment is approved by the external examiner. Completed RPL portfolios are marked and presented to the appropriate subject and programme panels.

What we found at the event

The school actively uses RPL against NMC standards for approved programmes. This includes candidates entering the pre-registration programme from FE colleges, transferring from other universities and candidates accessing postgraduate study through RPL bridging processes. Application for RPL is made to the lifelong learning academy which reviews the evidence provided and maps it against NMC standards and module outcomes.

We concluded systems for the recognition of prior learning and achievement are robust and supported by verifiable evidence, mapped against NMC outcomes and standards of proficiency.

Evidence / Reference Source

1. UWS recognition of prior learning, 2012-15
2. UWS MSc students' academic files
3. UWS assessment board minutes
4. Interview with admissions' lead.

Outcome: Standard met

Comments: no further comments

Areas for future monitoring: none

Findings against key risks

Key risk 3- Practice Learning

3.1   Inadequate governance of and in practice learning

3.2   Programme providers fail to provide learning opportunities of suitable quality for students

3.3   Assurance and confirmation of student achievement is unreliable or invalid

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

What we found before the event

The school demonstrates effective partnership working with five NHS health boards, neighbouring universities and charities at strategic, operational and clinical levels. Partnership working is directed through a practice placement partnership agreement with each practice placement provider through an agreed and jointly owned practice

learning strategy.

The school's process for reporting incidents and accidents is embedded in students' practice assessment documents and students are given clear guidance on raising concerns. Processes for responding to concerns are clear and involve collaboration between the university, practice placement providers and the health boards. Students are encouraged to raise any concerns about practice learning environments at any time and to complete end of placement surveys through which they have a defined opportunity for providing feedback.

What we found at the event

We found that governance of and in practice learning is achieved through effective partnership working at strategic and operational levels. A strategic partnership engagement group meets twice yearly whereby senior academic staff, executive nurses and members of NHS health boards discuss all aspects of programme provision. UWS has a service level agreement with each of its five health boards through which it defines and monitors training and development activity. We were informed that this is enhanced by a senior lecturer designated to liaise with practice placements in each of the five health boards.

PEFs and CHEFs provide a bridging role for information and intelligence sharing regarding placement and academic issues. Placements are managed through negotiation between the university practice learning unit, PEFs and CHEFs. Students' allocation is determined by capacity planning and monitoring activities.

Educational audits are completed biennially and reviews of action plans arising from the audits are undertaken.

Liaison lecturers review issues arising from educational audit activity, share good practice and agree activities for enhancing the quality of placement learning. There are clear criteria for the selection and preparation of new practice learning environments and for withdrawal of placements. There are reported instances where placements were withdrawn from the placement circuit (see 2.1.3).

We found that procedures for raising and escalating concerns are fully implemented and effective. All students and practice partners know how to raise concerns within practice areas and identified clear lines of support through the liaison lecturer, PEF or CHEF.

Students feel that their concerns are taken seriously and that they are well supported if they raise concerns about poor practice in the placement area.

All nursing managers reported being informed of concerns, actions undertaken and resolution with respect to any concerns/complaints raised. Managers expressed confidence in the university's processes for escalating concerns and in the feedback received from PEFs.

The SCPHN-HV programme leader is actively involved with practice placement providers at a strategic and practice level. Practice teachers told us they are well informed about developments in the curriculum, and find the PT update days beneficial and effective for them to support and assess HV students.

Evidence / Reference Source

1. UWS practice learning environments control of risks, 2013

2. UWS practice learning strategy, 2012-2014

3. UWS safe and supportive learning environments, 2013

4. UWS communication flow practice learning management, 2013

5. Guidance for student nurses and midwives raising and escalating concerns (whistleblowing)

6. Practice education partnership forum, terms of reference, 2013

7. UWS AEI requirements, 2013/2014, section 1.6.

8. UWS educational audit summary, 2013

9. Removing students from a practice learning environment document, 2013

10. UWS performance management annual review, 2013

11. Pre-registration nursing preparation for practice timetables

12. Interviews with lead for practice learning, student experience lead, managers, mentors, practice teachers and students, 5 -6 March 2014

13. Interviews with representatives from NHS health boards, 5 - 6 March 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

There is a section in the on-going achievement record (OAR) where users and carers can comment on the student's performance. The section is signed by the mentor.

Service users are involved in the selection of students. The involvement of service users and carers in pre-registration programmes is manageable in small student cohorts but logistically difficult in the larger adult nursing cohorts. Currently the school is guided by the service users' and carers' participation policy which has predominantly a mental health focus. The school is striving to increase its service user impact on pre-registration nursing.

The annual SCPHN-HV report 2013 confirmed the intention to include NHS health board partners, service users and students in programme development for the 2014 approval.

What we found at the event

We found that practice placement providers are involved in programme development, and delivery. The school utilises specialist practice experience that includes end of life

care, critical care, cancer care and child protection.

Within the pre-registration nursing programme service user involvement is secured through well selected learning materials and simulation resources which use recorded service user vignettes to inform students' learning. Staff are actively encouraged to explore multimedia resources to incorporate meaningful service user perspectives to enhance student learning.

Within the SCPHN-HV programme practitioners are involved in curriculum development, and PTs contribute to teaching in the university setting. PTs obtain service user feedback on student performance on an informal basis but reported that this is not formally collected or routinely integrated into the practice portfolio.

No students interviewed for the programmes monitored were able to recall any service user involvement in the university teaching sessions.

We found mentors encourage and support service users in providing feedback on student nurses' contributions to their care. This is now formally recorded in the students' OAR in the first year of the programme using revised documentation.

The school told us that service users had not been involved in the current planning activity for the approval of the SCPHN-HV programme. Service user and carer involvement in the SCPHN-HV programme was found to be lacking in consistency and formalisation. Improvements are required to address this weakness and to enhance assurance for public protection.

Evidence / Reference Source

1. UWS service user and carer participation, 2011-2014

2. UWS MSc and BSc Nursing curriculum documents, 2010 – 2013

3. UWS undergraduate & pre-registration admissions- operational policy, 2014-2015

4. Extracts from adult ongoing achievement records, year one

5. Typed summary of service user feedback comments relating to SCPHN-HV students

6. Timetables showing use of service – carer based learning materials within pre-registration nursing

7. UWS virtual dementia tour learning materials

8. UWS learning pack for diabetes

9. UWS Pre-registration selection questions

10. Interviews with lead for admissions, lead for students' experience, lead for practice learning, managers, mentors, practice teachers and students, 5- 6 March 2014

Risk indicator 3.2.2 - academic staff support students in practice

What we found before the event

The school has reviewed the liaison lecturer (LL) role given the geographical nature of the UWS placement circuit comprising 1,062 placements and the different shift patterns the students attend. It is agreed that the LL will aim for a minimum of one face to face contact per student allocation and then will make contact via a variety of other mechanisms such as email and the 'Big Blue Button' on Moodle or Skype. The LL role has been updated in 2013 to reflect this.

What we found at the event

We found convincing evidence that academic staff support students in practice through the clearly articulated, implemented and monitored LL role.

Service managers, mentors and PTs told us that LLs from the university fulfil scheduled visits and are contactable either directly or via the PEFs and CHEFs.

Managers, PEFs, CHEFs, PTs, mentors and students told us that academic staff visit students in practice at least three times per year, and provide additional support should this be required. The team provide this level of support to all students despite the geographical dispersion of students. All students were very appreciative of the visits and support given.

Evidence / Reference Source

1. UWS practice education partnership forum, Paisley, March 2013
2. UWS report of student online practice learning experience evaluation (PLEE) within undergraduate/ pre-registration nursing and midwifery programmes, March 2011- January 2014
3. UWS practice education partnership forum, Ayr, 9 September, 2013
4. Practice placements' record as at December 2013
5. Interviews with NHS health board representatives, 5 -6 March 2014
6. Interviews with managers, mentors, practice teachers and students, PEFs and CHEFs, 5- 6 March 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

All mentors, sign-off mentors and PTs are effectively prepared for their role in assessing practice through: updating; attendance at liaison meetings; and, written information documents.

UWS provides mentor and PT preparation programmes which adequately prepare staff for these roles.

What we found at the event

We found the university provides NMC approved mentor and practice teacher preparation programmes, which mentors and PTs told us prepares them for their role to support and assess students.

Nurse managers and PEFs told us that processes are in place to identify, select and protect the study time for newly recruited student-mentors.

There is a mentor update group which coordinates and informs the mentor update programme. There are a variety of approaches used to update mentors and sign off mentors.

The university provides two PT update days per year.

We found evidence to conclude that mentors, sign-off mentors and practice teachers are prepared for their role in assessing practice.

Evidence / Reference Source

1. External examiners reports

2. UWS programme annual reports

3. Interviews with programme lead, managers, practice teachers, mentors and students, 5- 6 March 2014

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

What we found before the event

Mentor preparation and updating is monitored through partnership. NHS Education for Scotland (NES) mentors' survey, 2013, page 19, states that 90.09% of responders confirmed that they had participated in annual mentoring updates.

What we found at the event

We found that all mentors and sign-off mentors have access to an annual update via one-to-one, group or online media (ProLearn). All mentors told us the content of updates is appropriate and effective for their on-going needs to assess students in practice. Issues covered at updates relate to practice assessment of students, curriculum development, escalating concerns and practice standards.

Within care homes mentor updating is scheduled in accordance with staff availability and is supported by the CHEFs and LLs. Mentors told us that updating enables them to

be compliant with on-going inclusion on the register of mentors and for triennial review.

We found practice teachers attend up to two practice teacher update days per year.

They told us they are effectively prepared for their role to support students and for the assessment of practice.

Evidence / Reference Source

1. Performance management of pre-registration, nursing and midwifery education: survey report, UWS, NES, 2013
2. Interview with lead for practice, PEFS and CHEFs, 5 and 6 March 2014
3. Interviews with managers, mentors, practice teachers and students, 5 and 6 March 2014
4. Interviews with representatives from NHS Health Boards, 5 and 6 March 2014

Risk indicator 3.3.3 - records of mentors / practice teachers are accurate and up to date

What we found before the event

The NHS health board maintains the live register of mentors which includes updates and triennial review. The university maintains the private and independent sector database. There are clear criteria for removing mentors, sign-off mentors and PTs from the live register.

Student evaluations in the 2013 survey confirm good access to PTs for SCPHN-HV.

What we found at the event

We found records of mentors and practice teachers for NHS placements and care homes are accurate and up to date. Updating, sign off mentors' status and triennial review activities are clearly annotated.

Mentors who are not currently active are clearly identified and explained. Alerts and follow up actions ensure rigour and managers are informed of mentors and practice teacher compliance or concerns raised by the PEFs or CHEFs.

Evidence / Reference Source

1. UWS Mentor/practice teacher live register guidance, 2013
2. NES qualitative analysis of performance management surveys, final report, UWS 2013
3. Live registers (MiNT)

4.   Interviews with managers, PEFs, CHEFs, mentors, practice teachers, 5 and 6 March 2014

Outcome: Standard requires improvement

Comments:

- We found that although service user and carer involvement is embedded within the pre- registration nursing, adult field programme it is less evident in the SCPHN-HV programme.

- Despite plans to include service users in the recent SCPHN-HV approval process this has not happened and there is no formalised process to gain feedback from service users. Improvements are required to address this weakness and to enhance public protection.

Areas for future monitoring:

- The extent to which service users' and carers' contributions to programme development and delivery is formalised and implemented across the whole school.

- There is a potential need for future monitoring depending on the outcome of the Vale of Leven report. The university is advised to keep the NMC informed of the actions taken in response to the publication of the report in order to determine whether this is necessary.

Findings against key risks

Key risk 4 - Fitness to Practise

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

There is a wide range of learning strategies to enable students to achieve the NMC

learning outcomes and competencies which includes simulation, scenario based activities, and enquiry based learning. The university virtual learning environment (VLE) Moodle offers students the opportunity to engage in live chat sessions and synchronised methods of online support sessions.

External examiners' reports confirm that the programmes meet national and professional standards and are designed at the appropriate levels.

What we found at the event

We found the wide range of learning strategies and support provided enables students to achieve the NMC learning outcomes and competencies. Opportunities to rehearse and develop practice skills in the form of, for example, OSCEs, simulation and role plays are appreciated by all students. They contribute to the preparation of students for practice prior to them offering care to service users thus promoting effective student learning and maintaining public protection.

Student nurses (adult field) understand the progression points in their programmes and what is required for them to progress.

Our findings demonstrate that student nurses (adult field) achieve the NMC learning outcomes and competencies for entry to the register. Students emerging from the programme are considered fit for practice by mentors and employers.

The SCPHN-HV programme meets all NMC standards of proficiency. Employers, practice teachers and service managers confirm that students who successfully complete the programme are fit for practice and are employable.

Evidence / Reference Source

1. UWS programme annual reports, 2013

2. External examiner reports

3. Students files

4. Interviews with programme leads managers, practice teachers, mentors and students, 5-6 March 2014

5. Interviews with representatives from NHS health boards, 5- 6 March 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 essential skills clusters (ESC) and the standards of proficiency for pre-registration

nursing are embedded in the practice assessment documentation.

Students are prepared for practice through preparation of practice sessions in the classroom and through trust inductions which are also attended by UWS LLs.

External examiners sample assessment in practice and confirm that students achieve NMC practice learning outcomes and proficiencies at the required progression points.

What we found at the event

For pre-registration nursing, adult field mentors and students told us that theory and practice are embedded through practice learning. The smooth transition from university learning to practice settings was commended by students. Students consider themselves adequately and effectively prepared for assessment in practice. They report that skills lab sessions in the university are timely for placement learning.

The ongoing achievement record facilitates engagement by student and mentor in making the practice learning meaningful. Compliance with EU directive requirements is recorded in the ongoing achievement record.

For the SCPHN-HV programme we found enthusiasm and role modelling by PTs are key aspects of the placement experience for students in addition to peer learning and willingness to explore critical incidents through reflective dialogue in the team. HV students are assessed in practice for competency in all the NMC (2004) standards of proficiency for specialist community public health nurses and NMC (2006) standards for community practitioner nurse prescribers (V100).

Evidence / Reference Source

1. Practice education partnership forum, Dumfries, June'13
2. External examiners Reports
3. UWS programme annual reports
4. Students' ongoing achievement records
6. Interviews with managers, practice teachers, mentors and students, 5-6 March 2014
7. Interviews with representatives from NHS health boards, 5- 6 March 2014

Outcome: Standard met

Comments: no further comments

Areas for future monitoring: none

Findings against key risks
Key risk 5- Quality Assurance **5.1   Programme providers' internal QA systems fail to provide assurance against NMC standards**
Risk indicator 5.1.1 - student feedback and evaluation/ Programme evaluation and improvement systems address weakness and enhance delivery
What we found before the event
Systems for evaluating theory and practice are well established.
What we found at the event
We found that all modules and programmes are subject to evaluation; there is clear evidence that issues are followed through to resolution; and, feedback on action taken is provided for students. Additionally, students give feedback on practice learning environments and the response rate is 72%. Some students are reluctant to complete surveys even though given occasions in the timetable to do so. We were told the requirement to include personal identifiers within the feedback was perceived as being a threat to anonymity even though written and verbal instructions state clearly the need to have a means of following up any concerns raised. Feedback loops to clinical staff are provided three times per year via the network of PEFs and CHEFs. Students are required to respond to numerous evaluation tools that include the National Student Survey and NES (that occur within the third year), as well as module and placement evaluations. The school positively encourages active student feedback and demonstrates a listening and responsive approach. Students were able to cite examples of how evaluation comments had been discussed and responded to via subject development groups and student-chaired staff student liaison groups. Feedback to students is given via evaluation conferences where a 'you said...we did' format is used.
Evidence / Reference Source
1.   UWS report of student online practice learning experience evaluation (PLEE) in nursing and midwifery programmes March 2011- January 2014 2.   MSc and BSc adult, programme handbooks, 2013, 2014

3. SCPHN – HV programme handbook

4. Interviews with managers, mentors, practice teachers and students, 5-6 March 2014

Risk indicator 5.1.2 - concerns and complaints raised in practice learning settings are appropriately dealt with and communicated to relevant partners

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What we found before the event

There is an identified procedure for reporting 'unsafe' practice learning environments within the ongoing achievement record and recently updated version for raising and escalating concerns about practice.

What we found at the event

Procedures for reporting 'unsafe' practice learning environments and raising and escalating concerns about practice are reported in section 3.1.1.

We found that external examiner reports are comprehensive and are very supportive of the high quality of the programmes and the excellent academic support given to students. They confirm their involvement in scrutiny of assessment of theory and practice. Any issues raised by external examiners are responded to in a timely manner by the respective programme leads and reported within university annual reporting mechanisms.

Representatives from health boards confirmed that they regularly received summaries of evaluations from all programme activities. In particular they use placement evaluations to inform risk assessments in light of any concerns raised by adverse quality assurance reporting.

Evidence / Reference Source

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1. UWS pre-registration nursing & midwifery, practice placement evaluation questions 2011 (revised 2013)

2. Students ongoing achievement record, pages 10 and 18-21)

3. UWS report of student online practice learning experience evaluation (PLEE) within nursing and midwifery programmes March 2011- January 2014

4. NES, Scottish collaboration for the enhancement of pre-registration nursing cause for concern project, stage 1 2013

5. Interviews with managers, practice teachers, mentors and student, 5-6 March 2014

6. Interviews with representatives from NHS health boards, 5- 6 March 2014

Outcome: Standard met
Comments: no further comments
Areas for future monitoring: none

Personnel supporting programme monitoring
Prior to monitoring event
Date of initial visit: 3 February 2014
Meetings with:
Head of School Deputy head of school Enhancement & quality lead Admissions lead Student engagement lead Student progression lead Practice learning lead Deputy for BSc (adult field) nursing programme leader MSc (adult field) nursing programme leader SCPHN-HV programme leader Academic and professional lead (Ayr Campus)
At monitoring event
Meetings with:
Head of School Deputy head of school Enhancement & quality lead Admissions lead Student engagement lead Student progression lead Practice learning lead Deputy for BSc (adult field) nursing programme leader MSc (adult field) nursing programme leader SCPHN-HV programme leader Academic and professional lead (Ayr Campus PEFs and CHEFs Programme team pre-registration adult nursing Director of practice development, NHS Health Board Lanarkshire Head of practice development, acute services, NHS Greater Glasgow and Clyde

Clinical improvements lead, NHS Ayrshire and Arran (telephone interview)

Lead nurse, Argyll and Clyde, NHS Highland (telephone interview)

Simulation suite facilitation staff

Meetings with:

Mentors / sign-off mentors	10
Practice teachers	6
Service users / Carers	0
Practice Education Facilitator	7
Director / manager nursing	9
Director / manager midwifery	0
Education commissioners or equivalent	0
Designated Medical Practitioners	0
Other:	1 Practice development nurse

Meetings with students:

Student Type	Number met
Nursing - Adult	Year 1: 5 Year 2: 8 Year 3: 3
SCPHN - HV	6