

**NMC UK Wide Quality Assurance Framework
PROGRAMME MONITORING REPORT**

<p>Programme Provider Name: <i>(Education provider and associated practice placement providers)</i></p>	<p>University of Bedfordshire In partnership with: Cambridge Community Services (CCS) Luton & Dunstable Foundation NHS Trust NHS South of England Central Buckinghamshire Healthcare NHS Trust includes Stoke Mandeville NHS Midlands and East (Commissioning) Bedford Hospital NHS Trust NHS Bedfordshire (Commissioning) South Essex Partnership Trust Community MH (SEPT) Oxford Health –MH Berkshire NHS Trust (Midwifery)</p>
<p>NMC Provider Code:</p>	<p>9060</p>
<p>Programmes Monitored and clinical focus:</p>	<p> <input type="checkbox"/> Pre registration nursing <input type="checkbox"/> Adult <input type="checkbox"/> Child <input type="checkbox"/> Mental health <input type="checkbox"/> Learning disabilities <input checked="" type="checkbox"/> Pre registration midwifery <input checked="" type="checkbox"/> Specialist community public health nursing <input checked="" type="checkbox"/> HV <input type="checkbox"/> SN <input type="checkbox"/> OH <input type="checkbox"/> FHN <input type="checkbox"/> Learning & assessment in practice <input type="checkbox"/> Mentor <input type="checkbox"/> Practice teacher <input type="checkbox"/> Teacher <input type="checkbox"/> Supervisor of midwives <input type="checkbox"/> Return to practice <input type="checkbox"/> Nursing <input type="checkbox"/> Midwifery <input type="checkbox"/> Specialist practitioner <input type="checkbox"/> Adult nursing <input type="checkbox"/> Mental health <input type="checkbox"/> Children's nursing <input type="checkbox"/> Learning disability nurse <input type="checkbox"/> General practice nurse <input type="checkbox"/> Community mental health nursing <input type="checkbox"/> Community learning disabilities nursing <input type="checkbox"/> Community children's nursing <input type="checkbox"/> District nursing <input type="checkbox"/> Overseas nurses programme <input type="checkbox"/> Overseas midwives programme <input checked="" type="checkbox"/> V100 <input type="checkbox"/> V150 <input type="checkbox"/> V 300 </p>

<p>Part of Register Programme/s Lead to:</p>	<p>Nurses part of the register <input type="checkbox"/> RNA <input type="checkbox"/> RNMH <input type="checkbox"/> RNLD <input type="checkbox"/> RNC</p> <p>Midwives part of the register <input checked="" type="checkbox"/> RM</p> <p>Specialist community public health nurses part of the register <input checked="" type="checkbox"/> RHV <input type="checkbox"/> RSN <input type="checkbox"/> ROH <input type="checkbox"/> RFHN <input type="checkbox"/> RSCP</p> <p>Recorded qualifications <input checked="" type="checkbox"/> V100 <input type="checkbox"/> V150 <input type="checkbox"/> V 300 <input type="checkbox"/> Teacher</p> <p>Specialist practitioner <input type="checkbox"/> SPA <input type="checkbox"/> SPMH <input type="checkbox"/> SPC <input type="checkbox"/> SPLD <input type="checkbox"/> SPGP <input type="checkbox"/> SCMh <input type="checkbox"/> SCLD <input type="checkbox"/> SPCC <input type="checkbox"/> SPDN</p> <p>Non recordable <input type="checkbox"/> Mentor <input type="checkbox"/> Practice teacher <input type="checkbox"/> Supervisor of midwives</p>
<p>Managing Reviewer / Reviewer(s):</p>	<p>Managing Reviewer: Suzanne Reed Reviewers: Susan Winterburn SCPHN HV/V100 Sheena Payne Pre-Registration Midwifery (3 year and 18 month)</p>
<p>Academic Year: Date of Monitoring Event:</p>	<p>2012/13 28/29 November 2012</p>
<p>Date of Report:</p>	<p>03 December 2012</p>

SUMMARY OF FINDINGS

Teachers are well qualified and have experience commensurate to their role; the majority of staff hold current registration status and hold or are working towards a teaching qualification. The Programme Lead holds NMC Recordable Teacher qualification and is an NMC registrant. The Programme Specialist submitted a second portfolio to the NMC in early September 2012 and is awaiting confirmation of recordable Teacher qualification. The Lead Midwife for Education and programme team all hold a recordable teacher qualification. Due to the reorganisation and re-focus of the department a number of vacancies have arisen, however there are sufficient staff and cover is currently provided by experienced visiting lecturers and fixed term contracts. Vacant posts are expected to be advertised or filled by December 2012. The research strategy clearly shows that all staff will be involved in scholarly and professional activity to enhance and inform their work and will also be integrated into the curriculum. Research relates to service improvement or research based practice.

There are sufficient appropriately qualified mentors/sign-off mentors and practice teachers to support the volume of students. In addition, student support is provided by a range and variety of other staff working at different levels. Additional Preparation Programmes were provided to ensure sufficient Practice Teachers are available to support the increased numbers of students (from 6 to 28). In SCPHN HV **Cambridge Community Services is to be commended for the simple, diagrammatic representation flow chart and mentor model. In midwifery, students comments on the excellent support received stating the practice educators “go the extra mile” Mentorship is to be commended and is a mark of best practice for forward planning and proactive approach to identification of number of future mentors required.**

Admission processes follow NMC requirements. Interview panels undergo equality and diversity training. In SCPHN HV criminal records bureau checks (CRB) are completed by the employer with written confirmation provided for the university, this and occupational health clearance are required prior to commencing in practice placements. In midwifery, maths; numeracy; reasoning; attitude; understanding of the role of the midwife; and articulation comprise part of the selection of students. An Access Forum has been established to facilitate engagement with local colleges. **It is commendable that all staff and students complete criminal records bureau checks annually.** Teachers, Practice Teachers and mentors follow procedures to address poor performance of students in both theory and practice. How to deal with poor performance and failing students is explicit in the Governance Standards and includes the process for joint practice and university disciplinary panels and support and appeals. The university has a risk register to record details of any student who is failing to progress. Effective systems are in place to manage APEL applications and to verify claims. A comprehensive package of documents is available to guide lecturers and students through the process of making an APEL claim. Examples of good APEL claims together with University Regulations and Codes of Practice and NMC Guidelines are in place ensuring a robust and verifiable audit trail.

There is clear evidence of effective partnerships at strategic and operational levels. Without exception, commissioners spoke highly of university staff, describing them as very motivated and responsive and having good relationships with the Trusts. Engagement with commissioners includes contract meetings and quarterly strategic reviews with a robust structure in place to allow issues identified to be addressed. A range of metrics are used by commissioners to measure university performance and quality. Audits are completed bi-annually and a traffic light system provides a means of highlighting issues. **However the process for reporting, reviewing and completing actions arising from educational audits is unclear. There is some degree of variation evident between auditors with more detail and accuracy in a few of the midwifery reports. In both SCPHN HV and in midwifery education audits there is evidence of issues highlighted which could impact on student learning that were not followed through to completion or review and have not been signed off in order to effectively close the audit loop.** Mentors sign-off mentors and practice teachers are properly prepared for their role in assessing practice. An electronic website is available for mentor access and includes policies, protocols; programme handbooks; giving feedback to students and how to deal with failing students. Mentors and practice teachers are able to attend annual updates sufficient to meet requirements for triennial review. Face to face annual updates are delivered in the Trusts and are also available electronically. Mentor and practice teacher handbooks are available. The triennial review process is clearly described on the website. Up to date and accurate details of mentor, sign-off mentor and practice teachers are recorded on live registers. Triennial reviews and updates are recorded on registers that are held and updated by the Trust staff on a regular basis with university staff having access to the databases. Academic staff act as link lecturers. Specific role responsibilities for supporting students as well as involvement in a

range of practice activities are identified. **In midwifery, the practice educator role is commendable in supporting students.** In SCPHN HV, service users are involved in teaching and programme planning. The service user is also asked to approve a list of potential questions asked at interview. In SCPHN HV, students, mentors and practice teachers reported excellent support from the course leader. The system of 'long arming' students at SEPT and the excellent practice teacher / mentor support model used at CCS ensure consistency of student assessment by practitioners. The validity and reliability of assessments is further improved as practice portfolios are marked by two practice teachers followed by moderation from the course leader. Practice teachers are also invited to assess student OSCE's. Medicines management is evidenced through online numeracy assessment in theory and assessment in practice. Students' competencies are assessed in practice and fine grading is used to grade practice in line with NMC requirements. Sign-off mentors, who have been through the mentorship programme and annual updates, assess students. Moderation occurs through pairing of mentors to exercise consistency. There are a variety of formative and summative assessments. **The new skills suite allows for appropriate simulation in practice and is to be commended.** Each student is allocated a supervisor of midwives. The LME declares students who have completed all NMC requirements as competent to be admitted to the Midwifery part of the register. Trusts employ students following registration. Both Trusts use the 'Systemone' clinical management system which includes; caseload information, communication, referrals, electronic patient records and other management tools. There have been delays in SCPHN HV student's direct access to the Trust Intranet and to Systemone. However students are able to view the system via their mentor and the Trusts have confirmed that this issue will be resolved prior to the next placement.

Students evaluate theoretical and practice components of their programmes. Recently, to improve the response rate of evaluations an electronic option has been made available. Feedback on placement evaluations is shared with mentors, sign-off mentors and practice teachers. A new quality assurance team has been established and one member has a focus and specific remit for health programmes, an administrator is also part of the team. The team will function with a strategic and operational approach. The external examiner is very positive about the level and quality of student work. In SCPHN HV the students have not yet reached the stage of the programme for her involvement.