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	School of Healthcare Sciences, Bangor University
Programmes monitored	Registered Nurse - Adult; Registered Nurse - Children
Date of monitoring event	22 – 23 January 2014
Managing Reviewer	Val Heath
Lay Reviewer	Natalie Paisey
Registrant Reviewer(s)	Ann Foley, Michelle Laing
Placement partner visits undertaken during the review	Chirk Community Hospital
	Primary Health Care Team, Wrexham Central
	Ysbyty Glan Clwyd Ward 14 Ysbyty Glan Clwyd A&E Ysbyty Glan Clwyd Ward 9 Ysbyty Glan Clwyd Ward 19 Ysbyty Gwynedd Endoscopy Unit
	Ysbyty Glan Clwyd Children's OPD
	Ysbyty Gwynedd Alaw Ward
	Ysbyty Gwynedd Prysor Ward
	Primary Health Care Team, Maes Derw, Llandudno
	Maelor Hospital Wrexham Children's Ward
	Mancot Community Children's Team
	Ysbyty Glan Clwyd Children's Unit
	Ysbyty Gwynedd SCBU
	Caernarfon Children's Community Nurses
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

	Risk				
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 Bangor University's programmes

The School of Healthcare Sciences at Bangor University was approved to deliver the new pre-registration nursing programme which met the NMC Standards (2010) in April 2012. This monitoring review focuses on the pre-registration nursing programme, adult field and child field.

The pre-registration programmes are influenced by the All Wales Initiative which has provided a collaborative approach to development of the nursing curricula since 2001. This has enabled NHS Wales and the education and practice placement providers to develop a shared approach to recruitment and selection, educational audit, evaluation mechanisms and the assessment of clinical practice.

The school has ensured that this national approach has been complemented by a more localised curriculum development process that has given ownership to stakeholders for the development of the future nursing workforce.

In 2013 Bangor University successfully won the contract to be the single provider for nursing in North Wales delivering education for all four fields of nursing. This success has resulted in an increase in student numbers. Students for the adult field of nursing will be recruited to commence twice yearly at Bangor and Wrexham while the remaining fields will commence each September in Bangor.

The All Wales Pre-registration nursing and midwifery group continues to meet to review and evaluate the implementation of the curriculum together with other All Wales issues that the group is requested to consider by commissioners, Chief nursing officer (Wales) and Cyngor.

The School of Healthcare Sciences is currently leading on an important research study funded by the National Institute for Health Research health services and delivery programme. The project is investigating which workforce development interventions are more likely to ensure a knowledgeable and skilled support workforce for older people in health and social care settings.

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 which have been subject to adverse concerns.

Betsi Cadwaladr University Health Board (BCUHB), the main partner, has received some negative press and media coverage during the past six months. Challenges have been identified with governance, accountability and service delivery. A review of patient care at Ysbyty Glan Clwyd has taken place in which specific concerns have been raised about infection control. The monitoring visit to Ysbyty Glan Clwyd identified effective infection control practices and a collegiate approach which includes students in maintaining effective practices.

Summary of public protection context and findings

Recruitment and selection processes are regularly reviewed and applicants are interviewed by the education providers, Health Board staff and service users.

We found the recruitment and admission processes to be consistent with NMC requirements which use set criteria to ensure that applicants possess the caring qualities required of a healthcare professional. This is an important principle in the protection of the public.

The All Wales Initiative has facilitated shared approaches to admissions, educational audit, evaluation mechanisms and the assessment of clinical practice.

We found evidence of effective partnership working that has continued over several monitoring events and serves to protect the public.

Service user involvement has been limited in previous years but this has now been addressed and is central to the programme development process.

A new strategy has been implemented that demonstrated to us how service user and carer involvement has been increased in curriculum development, classroom teaching and in student recruitment. The needs of service users being addressed in such a way are important in public protection.

Summary of areas that require improvement

None noted.

Summary of areas for future monitoring

One area identified for enhancement and further development is the activity already in place to manage escalating concerns. All contributors have their own processes in place but to date these processes have yet to ensure transparency for all stakeholders. Discussion with NHS Wales, BCUHB personnel and Bangor University identifies a need to better share information that will enhance the transparency of concerns raised and share best practice.

- Review progress made in the sharing of information between all stakeholders to enhance the transparency of actions taken in response to concerns.

Summary of notable practice

Admissions and Progression

An embedded collegiate approach is taken to manage recruitment, admissions and progression. Service users and carers and health board personnel are prepared and utilised most effectively in employing and progressing the future nursing workforce.

Practice Learning

The university has undertaken considerable development of 'Hub and Spoke' placement

opportunities across nursing fields. This includes the introduction of a set of All Wales principles and resources for spoke placements.

Summary of feedback from groups involved in the review

Academic team

The academic team gave assurance that they are confident in the quality of their nursing, adult and child programme delivery.

Members of staff reported to us that the actions completed from external reports, approval conditions, previous monitoring, self- assessment evaluation and National Student Survey action plans have all further enhanced the education provision.

A number of the staff have leadership roles on many of the national initiatives which are reported as being effective in Wales in terms of supporting the learners in practice. This is to be commended as it ensures the enhancement of the student experience and in turn benefits the employers and the public.

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

Mentors locally report being engaged with the students, the curriculum and the university. We were able to confirm this by the practice educators who are supporting the mentors and students across a wider context as well as engaging with the link lecturers.

Employers reported to us their understanding and involvement in the student journey and identified sound relationships with the university. They report students successfully completing the programmes as fit for practice and purpose.

NHS Wales reports confidence in the university which is, in part, attributed to the sound relationships, commitment and communications demonstrated by the university.

Students

Students reported being well prepared and supported in their student journey in both theory and practice.

Service users and carers

The "Expert Panel" of service users and carers is highly valued. Service users and carers contribute to the nursing programme at all stages including design, approval, admissions and recruitment. These experts then go on to deliver part of the taught curriculum and contribute to practice assessment and may also deliver continuing professional development to qualified nurses .

Relevant issues from external quality assurance reports

BCUHB has received some negative press and media coverage during the past six months, resulting in a new Chief Executive, Board Chairman and Vice Chairman. Problems have been identified with governance, accountability and service delivery. A review of patient care at Ysbyty Glan Clwyd has occurred.

Specific concerns have been raised about infection control. An infection control expert has since been recruited as assistant director of nursing for the Health Board.

In relation to nursing and midwifery programmes and respective practice placements for students close liaison has occurred with the deputy director of nursing (education) to ensure any specific areas of concerns did not impact on the student experience.

During this period, students have been removed from five practice placements within BCUHB as a result of three escalations from students allocated to the practice placements raising concerns relating to patient care and two escalations from BCUHB regarding internal investigations. As a result the Health Board are conducting formal investigations. Students have also been removed from two independent sector placements following escalation of concerns from students relating to patient care. No further students will be allocated to the practice placements concerned.

We were informed that the university has liaised with BCUHB and had put appropriate action plans in place to ensure that the student experience remained of high quality. The students and placement personnel we interviewed confirmed that they have not been disadvantaged due to this action. In some instances the developments initiated helped to improve the situation, which they felt had been a good learning experience for them. During the visit we were able to review the infection control procedures and noted they were effective and adhered to.

Evidence / Reference Source

1. Healthcare Inspectorate Wales Report 2011

2. Healthcare Inspectorate Wales Safeguarding and Protecting Children October 2009 - GAP Analysis

3. Healthcare Inspectorate Wales. Safeguarding and Protecting Children in Wales. A Review of the arrangements in place across the Welsh National Health Service

4. Healthcare Inspectorate Wales and Wales Audit Office. An Overview of Governance Arrangements. Betsi Cadwaladr University Health Board. June 2013

5. Public Services Ombudsman for Wales Report on an investigation into a Complaint against Betsi Cadwaladr University Health Board – 2009

6. Care and Social Services Inspectorate of Wales – Annual Report for 2009/10

7. Public Services Ombudsman for Wales – Quality Performance – Annual Report – 2010/11

Follow up on recommendations from approval events within the last year

All recommendations from approval events have been completed.

Evidence / Reference Source

1. NMC Programme approval report: adult nursing
2. Bangor University self-assessment report 2013/14
3. NMC Programme approval report: learning disability nursing 2012
4. NMC Programme approval report child: nursing 2012
5. NMC Programme approval report : mentorship 2012
6. NMC Programme approval report: teacher 2012
7. Major modification report: MH nursing 2012
8. NMC Programme approval report: specialist practice 2012
9. NMC Programme approval report: Return to practice 2012
10. NMC Programme approval report: nurse and midwife prescribers 2012

Specific issues to follow up from self-report

The issues from the self-report have been completed and include:

The university's successful tender has resulted in them being the one provider for nursing for North Wales. All four fields of nursing practice are commissioned and total numbers are 205 per annum (adult 151, mental health 32, learning disabilities 10, and child 12.) Mental health, learning disabilities and child fields are recruited for a September start in Bangor. Adult numbers are split into two intakes in September and March across the two sites of Bangor and Wrexham. The previous plan had been to close down the Wrexham Centre but this has now been overturned.

Glyndwr University (Wrexham) recruited to its last intake in 2013 and will no longer deliver pre-registration nursing programmes after 2016.

The UCAS entry criterion for recruitment to adult learning has been raised to 300 UCAS points. Recruitment is good as a result of this positive change.

The virtual learning site Blackboard is used effectively by teachers and most students. Text messages are utilised to engage with the students to disseminate important messages at short notice. Feedback on assessed coursework and examination is received within four weeks from the date of submission.

There is no evidence to suggest that the change to policy and care provision has negatively affected the student experience.

Evidence / Reference Source

1. Bangor University self-assessment report 2013 /14

2. Bangor University summary recruitment report 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

All registrant teachers hold NMC recordable teaching qualifications and have sufficient experience.

NMC registrations website checked 21 December 2013.

There are sufficient staff to support students to meet learning outcomes.

There are four practice educators (nationally funded) employed by Bangor and Glyndwr Universities.

Students report they receive a good level of support from university staff and mentors.

What we found at the event

The CVs we were provided with demonstrated that all staff were appropriately qualified and experienced to effectively support and deliver the programmes.

We were able to confirm from the NMC register database that programme leaders have maintained their active registration as nurses and that they have a NMC recordable nurse teacher qualification. The school also holds details of staff registration and we were informed that currency of staff qualifications is monitored on a monthly basis.

The return to practice programme has a new co-ordinator who has a NMC recordable

teaching qualification.

We examined previous programme monitoring reports and there were no issues identified that suggested there were insufficient staff resources. A workload plan is in progress to ensure appropriate staff capacity to support the increased numbers of students. Staff members are being appointed to Bangor University to ensure experience and local knowledge is present. For nursing the ratio of staff to students is reported as 1:15.

We found evidence to confirm that field specific teaching is provided across the school by experienced teachers and also there is a sufficient number of staff who are Welsh speaking to support the volume of students.

The students reported that they receive support from the practice educators in their geographic setting and greatly value the experienced link tutors who provide additional support.

Evidence / Reference Source

1. Bangor University self-assessment report 2013/14

2. NMC PIN Numbers

3. Staff CVs

4. NMC Monitoring report 2010/11

5. NMC Programme approval report: adult nursing

6. Major modification report: mental health nursing 2012

7. Bangor University self-assessment report 2012

8. Meetings with students, 22 - 23 January 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

Audits are available and in date.

All students have a suitable mentor allocated prior to commencing their placement.

There are sufficient mentors for each student.

Check due regard is upheld.

Triennial review requirements are understood and achieved for the majority of learners.

Mentor updates are attended and undertaken online.

Four practice educators are employed by the University.

Adult and Child learners confirmed there are sufficient mentors to work with students for a minimum of 40% of the time.

The non-credit rated mentorship route was previously reported as having no external examiner allocated. This is now appropriately externally examined.

What we found at the event

We found evidence to confirm that practice placement audits are conducted at least every two years; and for approving new practice learning environments the school and placement providers use objective criteria and processes. The All Wales strategy contains within it the field and generic competencies and associated practice learning outcomes which are included in the educational audit for the practice environment.

We were able to confirm that there are sufficient numbers of sign-off mentors. Students are allocated a mentor with due regard prior to commencing placement and these mentors work with students for the minimum of 40% of the time, with some working up to 80% of the time with their student.

Mentors are prepared by the NMC approved programme on site in the university. Sign-off mentors are prepared effectively in the placement setting. Mentors and practice teachers are able to attend training or annual updates sufficient to meet requirements for triennial review with multiple annual mentor updates being delivered in each locality per year. In addition electronic updates are also provided and a newsletter is sent out on a regular basis. Where a mentor is not able to attend an update the practice educator updates them on an individual basis.

We were informed that e-rostering is still being developed within the Health Board but once fully operational the system will identify placement mentors and help to provide data for maintaining mentor registers within the Health Board.

The non-credit rated mentorship route is appropriately externally examined. A cross section of practice competency documentation is now forwarded to the external examiner for the mentorship, learning and assessment in practice (MLAP) non-credit rated and the credit rated module.

Evidence / Reference Source

1. NMC monitoring report 2010/11

2. Major modification report: MH nursing 2012

3. Triennial review of mentors declaration

4. Bangor University self-assessment report 2013/14

5. Meetings with mentors and students, 22- 23 January 2014

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

Findings against key risks

Key risk 2 – Admissions and 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

Selection and admission principles are located in the All Wales nursing and midwifery education initiative document and fully meet the NMC requirements.

All students are DBS and occupational health checked on admission and are required to self-report their status annually.

Character references are taken up.

The requirement for a face to face interview with prospective students is detailed in the admissions and selection criteria within the programme documentation.

Interviews are conducted jointly with university staff and practice placement partners.

What we found at the event

We were told that recruitment and selection processes are regularly reviewed. All short-listed applicants attend for interview with university staff, Health Board staff and service users. Applicants are assessed at interview against agreed criteria to help to ensure they possess the caring qualities required of the healthcare professional.

The admissions and selection criteria follow Guidance on professional conduct for nursing and midwifery students (NMC 2008) and Good health and good character: Guidance for educational institutions (NMC 2008). In addition the entry requirements are evident in a range of formats for students including written, online and verbal

through open days.

The six C's are considered in the recruitment process and are summatively assessed during each placement. The requirement for the assessment of numeracy skills is clear.

It was confirmed to us that all personnel involved in recruitment undertake equality and diversity training online.

Evidence / Reference Source

1. Bangor University annual report 2013: Response to themes
2. Selection and admission principles: All Wales nursing and midwifery education initiative
3. BCUHB Equality, diversity and human rights policy
4. Bangor University Equality and diversity package
5. Code of Practice for recruitment and admissions 2012
6. Procedures to counter fraud during student selection, admissions and progression process
7. SHS DBS Policy 2013

Risk indicator 2.1.2 - programme provider's procedures address issues of poor performance in both theory and practice

What we found before the event

The school and university policies and processes are in place to manage fitness to practise. These include clear guidelines to deal with incidents of misconduct.

Students self-declare at progression points.

Escalating concerns policies are in place.

What we found at the event

We can confirm that a fitness to practise panel is established and practice representatives are included. Evidence provided of the outcomes of this process demonstrated its effectiveness.

A policy for the management of unfair practice in assessment is also in place.

Examples of effective partnership working when escalating concerns were demonstrated to us; however there is scope for further development. Whilst there are clear processes in place they do need to be enhanced in terms of transparency and consistency for all stakeholders.

Evidence / Reference Source

1. NMC Monitoring Report 2010/11
2. SHS Fitness to Practise policy 2013
3. BCUHB Escalating concerns policy
4. Bangor University Unfair practice procedure
5. Bangor University Code of practice for pastoral support

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

What we found before the event

Mentors know how to escalate concerns to the university about the poor practice of students.

What we found at the event

Practice placement providers reported to us that they know how, and to whom, to escalate concerns regarding student poor performance.

Students are also able to identify how, and to whom, to escalate concerns regarding poor care delivery.

NHS Wales do identify that more work is to be done to ensure universities are apprised of external NHS quality assurance reports.

Evidence / Reference Source

1. Bangor University Code of practice on placement learning
2. BCUHB Escalating concerns policy
3. Meetings with employers and mentors, 22 - 23 January 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
There is evidence of use of the accreditation of prior learning (APEL) process.

What we found at the event
We can confirm that a university APEL policy is in place which is managed by the school APEL committee and meets NMC requirements. The students and employers we interviewed could clearly articulate their understanding of the APEL process.

Evidence / Reference Source
1. Bangor University annual report 2013 Response to themes 2. Major modification report: MH nursing 2012 3. NMC monitoring report 2010/11 4. Bangor University APEL policy 5. Meetings with mentors, employers, students, 22- 23 January 2014

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

Effective partnerships are demonstrated with NHS; local providers; and the independent sector. These have been previously commended.

Placements are currently shared with Glyndwr University and supported by practice educators and link lecturers.

Senior practice placement providers are members of programme boards and development groups. Placements are well managed.

Students report good learning opportunities.

The audit tool is included in the All Wales initiative.

The capacity noted on the audit is for Bangor and Glyndwr combined.

There have been changes in service structures and reconfiguration. It is reported there is a close working relationship with partner placement providers ensuring that as changes occur implications for student placements can be monitored and appropriate action taken.

 A potential risk to placements has been suggested due to

- The reorganisation and structuring of service delivery within the Health Board.
- The recent negative media coverage.
- Ensuring link lecturers support all practice placements in North Wales as pre-registration nurse education moves to one AEI provider.

A new placement data base linked to the university banner student records system is to be implemented.

The implementation of the Hub and Spoke placement model, whilst still in its infancy, has been well planned and is being managed through the All Wales initiative.

What we found at the event

The new pre-registration nursing programme is influenced by the All Wales initiative which has enabled NHS Wales, education and practice placement providers to develop shared approaches to admissions, educational audit, evaluation mechanisms and the assessment of clinical practice.

This has been further complemented by a localised curriculum development process that has given ownership to the programmes by all stakeholders.

We were shown previous approval reports that have commended the school on the excellent partnership arrangements that existed with education and practice placement partners and with service users and carers, all of which we found continue.

The placement working group continues to review all practice placements, student capacity and link tutor allocation. We were informed that this process will be on-going as required to manage the outcomes of service redesign.

The introduction of hub and spoke placement opportunities across fields of nursing has been reported as successful. This involves a day a week in placement during year one of the programme in order to facilitate early integration to and with practice.

Practice placement staff highlighted to us that they have some reservations about the limited allocation of children's nursing students to placement during the winter months. However they acknowledge that the programme has not yet formally run a full cycle but does need to be monitored as this may need to be reviewed in the future.

Evidence / Reference Source

All Wales nursing and midwifery education initiative education audit tool

All Wales nursing and midwifery education initiative education principles for Hub and Spoke placements

1.   Bangor University annual self-assessment report 2013/14

2.   NMC monitoring report 2010/11

3.   All Wales nursing and midwifery education initiative

4.   Programme approval report: adult nursing

5.   Major modification report: MH Nursing 2012

6.   Meetings with mentors, employers, students, 22- 23 January 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

Service users are invited to join work streams for the curriculum, teaching contributions and committee work. The NMC monitoring report (2010) identified that a service user policy was in place but there was little evidence of involvement in programmes (also noted in previous year report). A task group was set up to establish guidelines and the outcomes of this group (success in engaging service users and carers) were noted at the 2012 approval events.

What we found at the event

The needs of service users are central to the programme development process. The new nursing programme has been designed and implemented in partnership with practice placement providers, service users and students. We found that the strategy that has been implemented has increased service user and carer involvement in curriculum development, classroom teaching and in student recruitment.

This is reported by service user representatives as working very well and is to be applauded.

Completion of the on-going record of achievement of practice competence document requires feedback from client / service users as part of the evidence required for mentors to assess the achievement of practice outcomes. Mentors and students told us that the process works well and gives service users and carers the opportunity of being fully involved in the summative assessment of practice.

Evidence / Reference Source

1. AEI Annual Report Response to themes, 2013/14
2. Bangor University Service Users and Carers Policy
3. School of Healthcare Sciences Service User and Carer group meeting notes
4. Meetings with employers, mentors, students, service users 22- 23 January 2014

Risk indicator 3.2.2 - academic staff support students in practice

What we found before the event

Link lecturers support students in practice and are reported as visible.

Their role in practice is considered important and functions effectively alongside the practice educator activity.

What we found at the event

We found that link lecturers are allocated to every placement setting. Both Bangor and Glyndwr University staff currently work together to ensure effective coverage of placements.

We found evidence that link lecturers are further supported by practice educators who provide services across geographic locations as well as to students on placement in the private, voluntary and independent sector.

The university also reported to us the benefit of 'peer guides' who are students ahead of others in the programme. These peers offer advice, introduce new students to practice

and act as a student listener. Raising the profile of these individuals is an action the university might wish to consider.

Evidence / Reference Source

1. Link Lecturer Role Specification 2011

2. Student and Mentor Practice Learning Contract

3. Bangor University Code of practice on placement learning

4. Bangor University Guidelines on the availability of academic staff

5. Meetings with link lecturers, students, practice educators, mentors 22 -23 January 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

Mentors are adequately prepared.

Midwifery assessors are familiar with grading of practice.

Opportunities to discuss inter assessor reliability are available through mentor updates and peer events.

Students report on their placement/mentor support via evaluations. These are available for practice placement providers to scrutinise.

What we found at the event

We found that resources are used across Wales to quality assure placements.

The students, mentors and employers we interviewed reported that students are supervised in practice by properly prepared and supported mentors. This is confirmed by the placement management system which ensures that students are only allocated to mentors who are on the mentor register.

Mentors confirmed that there is a strong focus on mentorship and that the Health Board places priority on good mentorship. Mentors feel there are strong links with the school and representatives from practice placements meet regularly with programme staff and they provide face-to face updates within the placements.

Mentors reported that close communication and liaison with the link lecturers is very important and concerns are frequently discussed jointly and decisions acted upon.

Students told us that they feel supported by their mentors and that they have learned a

lot from them. In some placements they had a primary mentor and an associate and they provide access to support throughout shift patterns and personal circumstances.

Programme providers ensure that mentors are inducted to the requirements of the curriculum; that sign-off mentors are well prepared and work with due regard and that inter assessor reliability is maintained.

Evidence / Reference Source

Registration (BN) Nursing Programme

1. All Wales Nursing and Midwifery Education Initiative. Spoke educational audit. Practice learning environment independent of hub

2. Hub and spoke QA principles

3. Bangor University self-assessment report 2013

4. Student evaluations of placements

5. Meetings with mentors, students and employers 22 - 23 January 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 registers are up to date and sign-off mentors are annotated. The database is electronic and kept up to date by ward managers. They identify who is ready for update.

Mentor registers for the private, voluntary and independent sector are held within the school.

Mentors are released to attend mentor updates.

What we found at the event

We can confirm that mentor registers are available and accurate in both Health Board and independent sector placements.

Mentors reported to us that they are normally released to attend mentor updates. If they are unable to be released a practice educator provides an individual update in the clinical setting. Triennial review requirements are addressed and maintained.

The students interviewed reported to us that there are sufficient mentors to effectively support their learning.

The e-rostering system is progressing: it will identify placement mentors and help to

provide data for maintaining mentor registers within the Health Board.

Evidence / Reference Source

1. Mentor database
2. Mentor personal record
3. Mentor update certificate
4. Mentor update dates 2014
5. Placement procedures handbook
6. Meetings with mentors, students and employers 22 -23 January 2014

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

What we found before the event

The capacity noted on the educational audit is for Bangor and Glyndwr universities combined.

Triennial review is captured on the register.

Sign off and teacher annotation is captured on the register.

What we found at the event

The BCUHB local registers of mentors are held by the placement provider and sent to the university twice a year and can be accessed when required. Mentor registers for the independent sector are held by the university and confirmed as up to date.

Practice educators confirmed that the mentor database was up to date, accurate and was reflected in the placement audit. Our findings supported this information.

Mentor registers inform audit capacity. Triennial review achievement is noted and sign-off mentors and practice teachers are clearly identified.

Evidence / Reference Source

1. Mentor databases
2. Independent sector Live Register of Mentors
3. Meeting with practice educators 22- 23 January 2014

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

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

NMC Approval reports (2012) identify NMC learning outcomes, competencies and proficiencies at progression points and for entry to the register.

There are enough opportunities to rehearse practice and simulated learning.

Employers report the students as fit for purpose.

What we found at the event

We found evidence which confirmed that programme outcomes are well articulated and comprehensively mapped to the modules, QAA benchmarks and NMC standards. These are appropriate for achieving the programme aims and to ensure that students are fit for practice and award.

The generic and field competencies for all domains are found in the All Wales field and generic competencies and associated practice learning outcomes - on-going record of achievement of practice competence. EU requirements and essential skills clusters are also explicitly measured.

Clinical competency documents are signed off by a mentor who has successfully completed a mentorship preparation programme.

Students complete all theoretical and clinical assessments in order to progress to the next level of the programme, and ultimately to qualify for the final award.

The programme team confirmed to us that students are allowed two attempts for each assessment and results are processed through the examination board prior to progression. The standard is clearly reflected in the assessment documentation.

Evidence / Reference Source

1. NMC Programme approval report: LD nursing 2012
2. NMC Programme approval report: adult nursing
3. Programme Student Nurse Induction Template 1st years
4. Programme Student Nurse Induction Template 3rd years
5. Bangor University Student charter
6. Bangor University Code of practice for student complaints and appeals
7. Practice assessment documentation
8. Meetings with students, mentors and programme team 22 - 23 January 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

Planning for placements is effective to ensure an appropriate range of placements to achieve programme outcomes, competencies and proficiencies.

Essential skills clusters and EU requirements are measured effectively.

Practice partners are apprised of the learning outcomes and progression points and have been involved in the development and delivery of the curriculum.

Employers feel the new registrants are appropriately prepared and fit for practice.

Employers have confidence that poor performance is identified and addressed efficiently and effectively.

What we found at the event

We found that learning opportunities in practice are pre-planned well in advance to ensure that students have a good range of primary and secondary care experience with care pathways utilised to enhance this learning experience.

Essential skills clusters are comprehensively mapped across the programme. EU directive requirements are addressed with experience gained in all nursing fields. Exposure to maternity care and care of the newborn is achieved through two days' experience and a three day workbook. The needs of clients with learning disabilities and mental health are also addressed.

Preparation for placement is included in the taught content which also addresses working in primary and secondary care settings and lone working.

Information relating to placement availability is effectively communicated to practice placement partners.

We can confirm that the assessment, annual progress review, the portfolio, external examiner examination and sign-off mentor processes are in place and are used to confirm achievement of programme outcomes. These details are outlined in the programme handbook, assessment handbook and practice placement handbook.

Students are required to complete an assessment in each placement setting on their personal attributes and attitudes which is additional to their portfolio.

Placements hours are clearly monitored and articulated in the handbook and weeks of study and placement are evidenced on the plans of training.

NHS Wales and employers confirmed to us that students are fit for practice and purpose.

Evidence / Reference Source

1. Programme approval report: Adult nursing

2. Programme approval report: Child nursing 2012

3. Programme approval report: Learning disability nursing 2012

4. Programme approval report : Mentorship 2012

5. Practice assessment: Adult field

6. Practice assessment: Child field

7. Student Nurse placement timesheet

8. Programme handbooks

9. Practice assessment documentation, on-going achievement record

10. Maternity care work books

11. Records of placement hours

12. Meetings with students, mentors 22 -23 January 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

Internal and external quality audit mechanisms ensure the programme remains relevant and up to date.

Internal QA systems are robust. There is an annual internal review of all modules.

All students are requested to complete a placement evaluation and evaluations are disseminated to practice placement staff.

There is an external examiner for the non-accredited mentor programme.

Bangor University self-reported the potential risk of maintaining the quality assurance of programmes due to the re-introduction of the nursing programme at the Wrexham campus following successful tender.

Progress is being made in the two areas identified in the National Student Survey (NSS) 2013 as areas for improvement. An action plan is in place to monitor this.

What we found at the event

We found that internal and external quality audit mechanisms are in place to ensure that the programme remains relevant and up to date.

External examiners review theory and practice elements of the programme and have the opportunity to visit practice areas. External examiners hold due regard for the field they are examining.

All students are requested to complete a placement evaluation. If issues arise that require prompt action these are discussed by the relevant link lecturer with practice placement staff. All remaining evaluations are currently collated by the link lecturer; the outcomes are communicated to placement staff on an annual basis and utilised during the educational audit of the placement. Placement providers told us they would like to hear more regularly of their success in supporting students.

The student voice is heard through a number of mechanisms and students told us that changes have been made in light of their feedback particularly with regard to inter professional learning.

The potential risk to maintaining the quality assurance of programmes due to the re-introduction of the nursing programme at the Wrexham campus has been mitigated by the recruitment of experienced lecturers.

Evidence / Reference Source

1. AEI Annual/Self-Assessment Report 2013
2. Programme approval report: Adult nursing 2012
3. Programme approval report: Child nursing 2012
4. Programme approval report: Learning disability nursing 2012
5. Programme approval report : Mentorship 2012
6. Bangor University self-assessment report 2012
7. Staff CVs
8. Code of Practice for external examiners: undergraduate and taught post graduate courses
9. External examiners' CVs
10. External examiner reports
11. Bangor University response to external examiner reports
12. Student evaluations of placements
13. SHS Final action plan (NSS scores)
14. Meetings with students, mentors and employers 22 - 23 January 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

Escalating concerns policies are in place to ensure compliance with NMC escalating

concerns (2010). These have been recently reviewed and revised. The NMC requirements (2010) have been included within the voicing concerns nursing home placement policy.

Datix reporting is undertaken in the placement settings for clinical concerns.

What we found at the event

We found that there are clear processes in place to protect service users including fitness to practise procedures and escalation of concerns. These are well articulated by the students, mentors and employers.

One area identified for enhancement and swift collegiate development is to bring together the activity already in place to manage escalating concerns. All contributors have their own processes in place but to date these processes have yet to ensure transparency for all stakeholders. Discussion with NHS Wales, BCUHB and Bangor University identified a need to better share information that will enhance the transparency of action over concerns raised and share best practice.

Evidence / Reference Source

1. BCUHB Escalating concerns policy
2. Fitness to practise procedures and processes
3. BU Child protection policy
4. BU Internal quality review self-evaluation document 2013/2014
5. Joint escalation policy
6. Flow chart for students causing concern

Outcome: Standard met

Comments:

- One area identified for enhancement and further development is the activity already in place to manage escalating concerns. All contributors have their own processes in place but to date these processes have yet to ensure transparency for all stakeholders. Discussion with NHS Wales, BCUHB personnel and Bangor University identifies a need to better share information that will enhance the transparency of concerns raised and share best practice.

Areas for future monitoring:

- To review progress made in enhancing information sharing between all stakeholders in relation to escalating and managing concerns and sharing best practice.

Personnel supporting programme monitoring
Prior to monitoring event
Date of initial visit: 18 December 2013
Meetings with:
Deputy Head, teaching and learning, quality and curriculum delivery Director of Nursing Programmes
At monitoring event
Meetings with:
Head of School Deputy Head, teaching and learning, quality and curriculum delivery Director of Nursing Programmes Deputy Director of Nursing (education), BCUHB Head of Education, Research and Professional Development BCUHB BN Programme lead, learning disability field BN Programme lead, child field BN Programme lead, mental health field BN Programme lead, adult field Children's service representatives: Paediatric and neonatal services manager Thrombosis specialist nurse Director of workforce, education and development services Placement administrators Service users Practice educators

Meetings with:

Mentors / sign-off mentors	47
Practice teachers	4
Service users / Carers	1
Practice Education Facilitator	2
Director / manager nursing	7
Director / manager midwifery	0
Education commissioners or equivalent	1
Designated Medical Practitioners	0
Other:	0

Meetings with students:

Student Type	Number met
Nursing - Adult	Year 1: 4 Year 2: 0 Year 3: 3 Year 4: 0
Nursing - Child	Year 1: 2 Year 2: 2 Year 3: 2 Year 4: 0
Learning and assessment - Mentor	3