Mott MacDonald

Protecting the public through quality assurance
of education and supervision of midwives

NMC Nursing & Midwifery Council

2014-15
Monitoring report of performance in mitigating key risks identified in the NMC Quality Assurance framework for nursing and midwifery education

Programme provider	University of Chester
Programmes monitored	Registered Midwife - 36M; Registered Nurse - Adult
Date of monitoring event	18-19 Feb 2015
Managing Reviewer	Peter Thompson
Lay Reviewer	Carol Rowe
Registrant Reviewer(s)	Carys Horne, Ann Cysewski
Placement partner visits undertaken during the review	NHS Wirral Community St Catherine's Hospital. Home Instead- Oxton Wirral- Independent Community social care provider. Arrowe Park hospital Elderly Care/ medicine. Countess of Chester medical ward. State of Jersey (Skype meeting). Isle of Man (Skype meeting). Warrington and Halton Foundation Trust;Wirral Maternity Hospital NHS Foundation Trust
Date of Report	03 Mar 2015

Introduction to NMC QA framework

The Nursing and Midwifery Council (NMC) is the professional regulator for nurses and midwives across the United Kingdom (UK) and Islands. Our primary purpose is to protect patients and the public through effective and proportionate regulation of nurses and midwives. 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 Quality assurance (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 monitoring report forms a part of this year's review process. In total, 17 AEIs were reviewed. 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 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 placement settings		
	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 and understand the process they have engaged with	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 Chester's programmes

The faculty of health and social care is one of eight faculties in the University of Chester. The faculty was approved to deliver a pre-registration nursing (adult, child and mental health) programme in 2011 to meet NMC standards for pre-registration nursing education, 2010.

The pre-registration nursing (adult) programme is delivered on four sites: Chester; Warrington; Leighton and Clatterbridge. The commissioned numbers for nursing adult students are currently 322 per year. There are two cohorts per year and these are distributed between the four sites. All sites have comparable resources and a senior academic manager is located on each site to provide management and leadership.

The pre-registration nursing (adult) programme was endorsed for delivery on the Isle of Man in 2012 and on the States of Jersey in 2013. Jersey commissions 15 student nurses (adult) per year; the Isle of Man commissions 12 student nurses (adult) per year.

The faculty also provides a three year pre-registration midwifery programme which was approved in 2012 and supports commissions of 28 students per year who attend the Chester campus for the theoretical part of the programme.

The pre-registration midwifery programme is endorsed for delivery on the States of Jersey and supports three students every three years. The first cohort commenced in September 2014. The theoretical components of the programme are delivered at Chester and all practice placements are provided in Jersey.

This monitoring review focuses on the pre-registration nursing (adult) and the pre-registration midwifery programmes delivered at the University of Chester and includes the endorsement arrangements for the delivery of the programmes in the State of Jersey and the Isle of Man.

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 endorsed programmes which were monitored through a comprehensive arrangement of telephone and video conferencing meetings between the review team and students, mentors, academic staff, managers, commissioners and service users and carers. Placements which have been subject to concerns as a result of Care Quality Commission (CQC) reviews were also selected as part of the monitoring sample.

We found that the University of Chester works to optimise the quality of learning in practice placements through a well-established partnership arrangement with the three other approved education institutions (AEIs) within the North West. Placements and placement capacity are managed through a database in a centralised placement learning support service (PLSS).

We found that key risks in relation to programme resources are adequate and appropriate to meet NMC standards. Students on the pre-registration nursing (adult) and pre-registration midwifery programmes are supported and assessed by mentors and sign off mentors who are well prepared for their role. Mentors and sign off mentors are aware of the importance of their role and ensure that students are fit for practice in

order to protect the public.

Clear endorsement arrangements are in place with the Isle of Man and the States of Jersey to deliver the respective programmes and adequate resources are confirmed and monitored through statements of compliance and the University of Chester's governance processes.

Admission and progression procedures are robust and effectively implemented to ensure students entering and progressing on the pre-registration nursing and midwifery programmes meet NMC standards and requirements which is fundamental to protection of the public.

Disclosure and barring service (DBS) checks, occupational health clearance and mandatory training are completed before a student can proceed to placement. These compulsory procedures are undertaken in order to protect the public.

The faculty has sound policies and procedures in place to address issues of poor performance in both theory and practice. There is a robust suitability to practise procedure which manages incidents of concern, both academic and practice related. We found evidence of the effective implementation of these procedures; examples of where students have been subject to remedial action, or their programme terminated, which demonstrates the rigour of the process in ensuring public protection.

We found the university has effective partnership working and governance arrangements at a strategic and operational level to ensure shared responsibility for students' learning in the practice placement environments. We confirmed that these arrangements extend to the partners delivering the endorsed programmes.

The university demonstrates responsibility in response to external quality reviews and has effective partnerships with practice placement providers to address any areas of concern to ensure students' learning is not compromised.

We found that effective teaching and learning strategies are in place to ensure that students are able to make clear links between theory and practice; students develop their skills in simulated learning environments and complete mandatory training, prior to going into practice placements.

Students successfully meet the required programme learning outcomes, and competencies at progression points and meet NMC standards for entry to the NMC register.

The commissioner, employers and managers confirm that students successfully exiting the nursing and midwifery programmes are safe, competent and fit for practice.

Our findings conclude that the university has effective mechanisms and strategies in place to identify risk, address areas for improvement and enhance the delivery of the pre-registration midwifery programmes.

We found that quality assurance processes that relate to the pre- registration nursing (adult) programme enable students to achieve stated learning outcomes in both theory and practice learning. However, the engagement of external examiners with the theory and practice element of the pre- registration nursing adult programme requires improvement to strengthen the risk control. The quality assurance process specific to external examiner reporting, in relation to theory and practice of the pre-registration

nursing (adult) programme, needs to be strengthened.

Summary of public protection context and findings

We found that the University of Chester optimises the quality of learning in practice through a well-established partnership arrangement with the three other AEIs within the North West. Placements and placement capacity is managed through a centralised PLSS which maintains a data base of all approved practice placements. All placements are subject to educational audit using a process agreed through the partnership arrangement. Student placement is based upon clear intelligence of placement configurations and mentor availability.

We found that key risks in relation to programme resources are adequate and appropriate to meet NMC standards. Student nurses on the approved nursing and midwifery programmes are being well supported. Clear endorsement arrangements are in place with the Isle of Man and Jersey to deliver the respective programmes. Resources are confirmed and are being monitored through statements of compliance and the University of Chester's governance processes.

We found admission and progression procedures are robust and effectively implemented to ensure students entering and progressing on the pre-registration nursing (adult) and midwifery programmes meet NMC standards and requirements which is fundamental to protection of the public.

Disclosure barring service (DBS) checks, occupational health clearance and mandatory training are completed before a student can proceed to placement. These compulsory procedures are undertaken in order to protect the public.

We found that mentors and sign off mentors are well prepared for their role in supporting and assessing students. Managers ensure that mentors and sign off mentors are able to achieve the NMC requirements for updating and triennial review. Mentors and sign off mentors are aware of the importance of their role and ensure that students are fit for practice in order to protect the public.

The department has sound policies and procedures in place to address issues of poor performance in both theory and practice. There is a robust suitability to practise procedure which manages incidents of concern, both academic and practice related. We found evidence of the effective implementation of these procedures; examples of where students have been subject to remedial action, or their programme terminated, which demonstrates the rigour of the process in ensuring public protection.

We found the university has effective partnership working and governance arrangements at a strategic and operational level to ensure shared responsibility for students' learning in the practice placement environments. We confirmed that these arrangements extend to the partners delivering the endorsed programmes.

The university demonstrates responsibility in response to external quality reviews and has effective partnerships with practice placement providers to address any areas of concerns to ensure students' learning is not compromised.

We found that effective teaching and learning strategies are in place to ensure that

students are able to make clear links between theory and practice; students develop their skills in simulated learning environments and complete mandatory training, prior to going into practice placements.

Students successfully meet the required programme learning outcomes, and competencies at progression points and meet NMC standards for entry to the NMC register.

The commissioner, employers and managers confirm that students successfully exiting the nursing and midwifery programmes are safe, competent and fit for practice.

We found that there are effective quality assurance processes in place to identify risk, address areas for improvement and enhance the delivery of pre-registration midwifery programmes. However we found that quality assurance processes that relate to pre-registration nursing programmes, while enabling students to achieve stated learning outcomes in both theory and practice learning, are in need of improvement to strengthen the risk control. Specifically this relates to risk 5.2.1 where external examiners are required to continually engage with both theory and practice elements of the approved programme.

Our findings conclude that the university has effective mechanisms and strategies in place to deliver the approved nursing programme and to ensure the protection of the public.

Summary of areas that require improvement

The quality assurance process specific to external examiner reporting in relation to theory and practice of the approved programme, needs to be strengthened.

Summary of areas for future monitoring

- To monitor the implementation and evaluation of strategies to further enhance service user and carer involvement in selection and programme delivery.
- To monitor the faculty's plans to further enhance external examiners' involvement in the scrutiny of all aspects of approved programmes.

Summary of notable practice

Resources

None identified

Admissions and Progression

None identified

Practice Learning

None identified

Fitness for Practice

None identified

Quality Assurance

None identified

Summary of feedback from groups involved in the review

Academic team

We found that the programme team are enthusiastic, knowledgeable and have full confidence in the programmes. They informed us of the effective working partnerships in place which support and maintain robust programme provision. Specifically, given the geographical locations of the partner sites, we found evidence that the partnership arrangements and communications with placement providers delivering the endorsed programmes on the States of Jersey and the Isle of Man are well maintained and carefully monitored. This is achieved through the University of Chester's robust action planning and governance processes.

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

We found that mentors and sign-off mentors are well prepared for their roles and that there is adequate provision for locally based annual mentor updating opportunities. Practice education facilitators (PEFs) are highly valued by all students, mentors and service managers for the level of support and clinical education which they provide. PEFs are also responsible for maintaining and monitoring the live register of mentors and sign-off mentors; tracking the educational audit status of clinical placements in trusts; actively involved in student recruitment and in supporting the assessment of practice.

Students

Nursing (adult)

We found that student nurses in all years of the pre-registration nursing (adult) programme are confident, professional and articulate. All students are very positive about their experiences at the university and are complimentary of the extensive nature and level of professional, pastoral and academic support available. They specifically comment on the excellent academic support of the university lecturers; the input of personal tutors; personnel in the university study skills department; and, the support of PEFs in practice placements.

We found that considerable attention is afforded to supporting students to appreciate the whole of a service user's 'journey' within healthcare through access to hub and spoke placement opportunities. Third year students report that they are well prepared, and confident for their future roles as registered nurses.

All students commented on the positive aspects of being taught within cohorts comprising of small numbers of students and at the campus of their choice within the university. This is viewed by students as a key strength of the programme.

Midwifery

Students told us that they are highly satisfied with the midwifery programme, are well supported in theory and practice and that midwifery lecturers are visible in practice. Students confirmed that they have a good range and exposure to sufficient learning opportunities to meet the programme outcomes.   Whilst students told us that they have not used the escalation of concerns policy, they are confident that they would know what to do if they observed poor practice.

Service users and carers

We found evidence of service user involvement in all areas of the programme. Service users contribute to the recruitment and selection of students at the initial interviews; they complete testimonials in students' assessment of practice documentation and are actively involved in classroom teaching and learning. We heard about their involvement in the programme tendering processes, and about examples of service user engagement and feedback to students in acute and community care placements and in respite care.

Relevant issues from external quality assurance reports

External quality assurance reports were considered for practice placements used by the university to support students' learning. Some of the programme provision within pre-registration nursing (adult) and pre-registration midwifery is approved under NMC endorsement standards to be delivered within UK territories that include the Isle of Man and the States of Jersey. Therefore in addition to the Care Quality Commission (CQC) reports we also considered external monitoring reports pertinent to healthcare in the Isle of Man and the States of Jersey.

The following reports require action (s)

West Midlands Quality Review Service (WMQRS): inspection of Nobles Hospital, Isle of Man, November 2014 (2)

The Isle of Man, Department of Health commissioned the West Midlands Quality Review Service (WMQRS) to inspect Nobles Hospital (2).

The inspection was to consider the compliance of the emergency department, theatres and anaesthetics and critical care services within the Nobles Hospital.

The principal lecturer responsible for nurse education on the island met with the chief nurse and they confirmed that there were no areas of concern in relation to the supervision of nursing students.

In response to the report, Nobles Hospital commissioned a rolling programme of external independent peer reviews across all aspects of health care, including acute hospital, mental health services, community care, primary care and in the wider context the workings of the Department of Health and public health and commissioning.

Student nurses are involved in this current review and two student nurses have been randomly chosen by the nurse education team to give their views to the West Midlands reviewers. This was confirmed by the education commissioner (101-102).

The faculty provided a clear statement in the self-assessment report 2014/15 in relation

to concerns raised by the review of services at the Nobles Hospital and identified that clear courses of action had been taken by the faculty in escalating the information to the NMC (1).

CQC inspection of St Patrick's Care Home. Widnes, December, 2014. Major concerns were raised requiring action in relation to providing care, treatment and support that meets people's needs; caring for people safely and protecting them from harm (3).

University of Chester action: the inspection report was reviewed. Communication between the cluster lead, the academic link, and other AEIs sharing placement Liverpool John Moores University (LJMU) resulted in:

- Removal of students from placement

- Deactivation of the placement

- Ongoing support from the academic lead

It was agreed that further review was required prior to reactivating the placement to support students' practice learning. At the time of the monitoring visit the placement area was still deactivated (11).

CQC inspection of Elderholme Nursing Home, Wirral, July 2014 (4).

The inspection required action in relation to; consent to care and treatment; and, the care and welfare of people who use the services.

University of Chester action: the inspection report was reviewed. Communication between the cluster lead, the academic link, and the practice education facilitator (PEF) resulted in a risk assessment of the placement environment with the service manager. The outcome was the placement area would continue to support students' learning with additional support from the link lecturer (11).

CQC inspection of Chapel Brook House, Congleton, May 2014. The outcome of the inspection was that action is required in relation to: providing care, treatment and support that meets people's needs; caring for people's safety and protecting them from harm; staffing; and the quality and suitability of management (5).

University of Chester action: the report was reviewed and communication between the cluster lead, and the academic link resulted in :

- Deactivation of the placement (no students were on placement at the time of the decision)

- The academic link will provide ongoing support to the placement staff

At the time of the monitoring visit the university reported that the placement is now withdrawing services and transferring residents (11).

CQC inspection Ashely House Forensic Unit, Halton, October, 2014. Actions needed in relation to staffing (6).

University of Chester action: the report was reviewed and communication between the cluster lead, and the academic link resulted in:

- Deactivation of the placement (no students were placed at the time of the decision)

- Support from academic lead provided to the placement area

- Further review is required prior to reactivating the placement area

At the time of the monitoring visit the placement area remains deactivated as a practice learning environment (11).

CQC inspection Hollymere House nursing home, Crewe, January 2014. Actions needed in relation to staffing (7).

University of Chester action: the report was reviewed and communication between the cluster lead, and the academic link resulted in:

- Deactivation of the placement (no students were allocated to the area at the time of the decision)

- Support from academic lead provided to the placement area

- Further review is required prior to reactivating the placement area

At the time of the monitoring visit the placement area remains deactivated as a practice learning environment (11).

CQC Inspection Primrose House Nursing Home, Crewe, February 2014. Action required in relation to treating people with respect and involving them in their care (8).

University of Chester action: the report was reviewed and communication between the cluster lead, and the academic link resulted in:

- Deactivation of the placement (no students were allocated to the area at the time of the decision)

- Support from academic lead

- Further review is required prior to reactivating the placement

At the time of the monitoring visit the placement area remains deactivated at as a practice learning environment (11).

CQC Inspection of Tarvin Court, Chester, December, 2014. Action required in relation to safety and well led service (9).

University of Chester action: the report was reviewed and communication between the cluster lead, and the academic link resulted in:

- Deactivation of the placement (no students were allocated to the area at the time of the decision)

- Support from the academic lead

- Further review is required prior to reactivating the placement as a practice learning environment

At the time of the monitoring visit the university reported that the placement area is still deactivated as a practice learning environment (11).

CQC inspection of Warrington hospital midwifery services in January, 2014. Actions required in relation to: Supporting workers, and in the care and welfare of people using services (10).

The University of Chester action: the report was reviewed and communication between the cluster lead, and the academic link resulted in:

- The academic lead discussed risk assessment with the service manager and there was agreement that there was no risk to student's learning experience.

- The placement continues to be used as a practice learning environment. Students are provided with additional support from Warrington maternity link lecturer (12, 14). The placement is included in the schedule of visits for the midwifery reviewer during NMC monitoring, 2015. (See section 3.1.1).

CQC inspection of Wirral University Teaching Hospital Foundation Trust: Arrowe Park Hospital, December, 2014 (13).

The CQC inspection report followed an unannounced visit to Arrowe Park Hospital. The report identified several areas relating to the standards of "treating people with respect", "involving people in their care", "providing care, treatment and support that meets people's needs", "staffing" and "quality and suitability of management".

The report identified concern on elderly wards about the management of patient dignity; and staffing levels on the elderly care wards were identified as below standard. There were no issues identified by the inspectors within the accident and emergency department of the surgical ward.

There were ten pre-registration nursing students allocated to areas identified within the report which raised issues related to:

- The ability of placements to provide appropriate supervision and mentorship.

- Exposure of students to unsuitable practices and therefore poor practice learning experience.

University of Chester action: the report was reviewed, communication with the cluster lead, the academic link and PEF resulted in:

- Reducing the number of students allocated to the elderly care areas, reducing capacity consistent with the availability of staff and mentors.

Following the publication of the report, 8 -10 December 2014, Students have been visited in practice learning areas and concerns related to their experiences, supervision and care experiences have been reviewed.

A meeting was held on 15 December attended by the University of Chester, the Director of Nursing and senior trust staff, and representatives from Edge Hill University, Liverpool University, and LJMU to discuss the report and ongoing support for placements.

An education action plan has now been put in place to increase academic link visibility, to review practice evaluations from students, and to review and monitor subsequent CQC reports (14).

Evidence / Reference Source

1. The University of Chester self-assessment report, 2014-2015

2. West Midlands Quality Review Service (WMQRS): care of adults in the emergency department, theatres and anaesthetics and critical care services. Noble's Hospital, Isle of Man. visit date 26th November 2013 / report date April 2014

3. CQC inspection of St Patricks' Care Home, Widnes, December 2014

4. CQC inspection of Elderholme Nursing Home Wirral, July 2014

5. CQC inspection of Chapel Brook House Congleton, May 2014

6. CQC inspection Ashely House Forensic Unit Halton, October, 2014

7. CQC Inspection Hollymere House Nursing Home Crewe, January 2014

8. CQC Inspection Primrose House Nursing Home Crewe, February 2014

9. CQC Inspection of Tarvin Court , Chester December, 2014

10. CQC inspection of Warrington hospital midwifery services, January, 2014

11. University of Chester ; CQC checks – non NHS placements, January, 2015

12. Minutes Midwifery and reproductive health programme committee, March 2014 and September 2014

13. CQC inspection of Wirral University Teaching Hospital Foundation Trust: Arrowe Park Hospital, December, 2014

14. University of Chester response to concerns in relation to CQC inspection of Wirral University Teaching Hospital Foundation Trust: Arrowe Park Hospital December, 2014

101. Telephone discussions with commissioners, Jersey 18 February 2015

102. Telephone discussions with commissioners, Isle of Man 18 February 2015

Follow up on recommendations from approval events within the last year

There were no approval events held during 2013-2014 and so no recommendations needed to be followed up (1).

Evidence / Reference Source

1. University of Chester self- assessment report, 2014-2015

Specific issues to follow up from self-report

All actions highlighted in the 2013 - 2014 self-report are complete (1).

Particular issues followed up include:

- Focus on attrition, in particular, the reasons for exiting the programmes

Programme teams continue to monitor attrition; analyse progression, achievement and attrition data through assessment boards and exit interviews; and have more

intelligence about the reasons why students leave the programme. Reasons relate to financial difficulties and mistaken career choice. Strategies are in place to assist students to make career choices which involves partnership working with placement providers.

- Improve student response rates to module and practice evaluations

Evaluation processes have been reviewed; focus groups facilitated by the faculty senior teaching fellow; and strategies identified to improve students' engagement with evaluation processes. The faculty is working collaboratively with North West AEIs and practice placement representatives to develop a web-based online placement evaluation tool for students. The evaluation tool is to be piloted in January 2015 and will be reviewed as part of an ongoing monitoring process.

Evidence / Reference Source

1. University of Chester self-assessment report, 2014-2015

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 have experience/qualifications commensurate with role.

What we found before the event

Documentary evidence confirms that the programme provider has adequate resources to deliver the pre-registration nursing (adult) and pre- registration midwifery programmes (16 – 24).

Endorsement approval reports and statements of compliance confirm that resources are in place to support students undertaking the pre-registration nursing (adult) programme on the Isle of Man and the pre- registration nursing adult and midwifery programmes on the States of Jersey (127-131).

The majority of academic staff members have, or are in the process of obtaining a

teaching qualification recorded with the NMC. Programme leaders act with due regard and have current NMC registration and a teacher qualification recorded with the NMC (23).

What we found at the event

We found that processes are in place to effectively monitor academic staff members' NMC registration to ensure it continues to be active. All newly appointed nursing and midwifery teachers, as a requirement of the contract of employment, must achieve teacher status (17, 71). A research and scholarship policy is in place whereby academic staff members are entitled to twenty-five days for scholarship and research (16).

Programme leaders act with due regard and have current registration and a teacher qualification recorded with the NMC (21- 23, 135).

Nursing (adult)

We found that teachers supporting the pre-registration nursing (adult) programme have current NMC registration and hold, or are working towards, a teaching qualification recordable with the NMC (23, 28).

Programme leaders have professional experience commensurate with their role and there are adequate resources to deliver the programme. Academic staff members confirmed that they are afforded opportunities for professional academic development (16- 24, 28, 135).

Midwifery

Midwifery lecturers are appropriately qualified and experienced to effectively support and deliver the pre-registration midwifery programme; most have a NMC recorded teaching qualification and two midwifery lecturers are supervisors of midwives (SoMs) (16- 24, 49, 135).

The university supports the Lead Midwife for Education (LME) to fulfil the role and responsibilities required by the NMC. The LME is involved in strategic decision-making through membership of the faculty management committee (29).

We were informed that there are six whole time equivalent (WTE) lecturers in midwifery, and the department is in the process of recruiting a professor in midwifery (71, 49).

Our findings conclude there are adequate, appropriately qualified and experienced academic staff members to deliver the pre-registration nursing (adult) and pre-registration midwifery programmes to meet NMC standards.

Evidence / Reference Source

16. Research and scholarly activity database of staff publications and staff conference attendances, 2014

17. Staff development and performance review policy, 2010

18. Notes and guidance to workload planning (academic) and workflow planning framework, 2014

19. Learning and teaching strategy (2013 -2016/17)

20. Research and scholarship policy, 2014

21. Process ensuring checks the monitoring academic staff active registration due regard (undated)

22. Policy processes enable nursing and midwifery teachers to achieve the outcomes of state for development framework (SLAiP, 2008).

23. Abridged staff profiles, 2014

24. Summary practice learning strategy to support NMC SLAiP standards (undated)

28. Reviewers meeting with programme team, pre-registration nursing (adult), 18 February 2015

29. MR Meeting with LME / midwifery lead, 30 January 2014

49. Programme team meeting (midwifery), 18 February, 2015

71. Presentation by staff team, 18 February 2015

127. NMC approval report preregistration nursing (adult) 2012

128. NMC approval report preregistration midwifery, 2013

129. Endorsement report, RAN, Isle of Man, 27 March, 2012

130. Endorsement report, RAN, Jersey, 27 March, 2012

131. Endorsement report, RM, Jersey, 30 May 2013

135. MR meeting with faculty managers about resources, 18 February 2015

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

Documentary evidence confirms that there are sufficient appropriately qualified mentors and sign off mentors to support the numbers of students. These are checked during the placement educational audit process which is managed by the PLSS (24).

Endorsed programmes have sufficient resources to support students in practice (127-131).

What we found at the event

We found there are sufficient qualified mentors and sign off mentors to support the number of student nurses and student midwives. PEFs informed us that placement capacity for supporting students is managed through the monthly review of mentor databases and quarterly discussions with the university about placement capacity and mentor numbers (39, 40, 60, 62).

All students and mentors confirmed that mentors work at least 40% of the time with

students and in their absence students are supported by associate mentors (34-38, 53-59).

Nursing (adult)

Students, mentors and PEFs described a strong team approach to mentorship, which ensures that students are well supported. In addition, during hub and spoke placements arrangements are established which ensure that students maintain contact from within their spoke with their mentor in the hub placement (34-47).

The PEFs have pivotal roles in supporting mentors, sign-off mentors and students and are a highly valued resource (31-42, 104, 118, 120).

Mentors and sign off mentors told us that they are well prepared for their respective roles. We were told that there is opportunity and support for relevant continuing professional development (CPD) activity (37-42, 104, 137).

Midwifery

We found that there are sufficient sign off mentors available to support midwifery students and a 1:1 ratio is maintained. Students confirmed that they experience a supportive learning environment, that mentors are readily accessible and that they provide good and effective support (48, 54-59).

Students are also allocated a SoM for the duration of the programme, and we found evidence that students accessed their SoM for advice outside of the planned meetings (54,155).

We conclude from our findings that there are sufficient appropriately qualified sign-off mentors available to support the number of commissioned students. All sign off mentors act with due regard.

Evidence / Reference Source

24. *Summary practice learning strategy to support NMC SLAiP standards (undated)*

31. *Practice office allocation process, November 2014*

32. *Placement Charter (undated)*

33. *Collaborative audit summary (undated)*

34. *Meeting with pre-registration nursing students (university), 19 February 2015*

35. *Meeting with nursing students on placement, 18 February 2015*

36. *Meeting with nursing students on placement, 19 February 2015*

37. *Meeting with nursing mentor sign of mentors, 18 February*

38. *Meeting with nursing mentor / sign of mentors, 19 February 2015*

39. *Meeting with adult services managers on placement ,18 February 2015*

40. *Meeting with adult services managers on placement, 19 February 2015*

41. *Meetings with PEF's (adult) on placement, 18 February, 2015*

42. *Telephone discussions with adult services manager, endorsed adult programme, Jersey, 19 February*

2015

43. Off duty: adult placements, 18 February 2015

44. Portfolios of practice learning, (adult) level 4, 5, 6, 2013-2014

45. Pre-registration nursing (adult) programme handbook, 2014

46. Audits: adult placements 2014

47. PLSS mentor database, pre-registration nursing (adult)

48. PLSS mentor database, pre-registration midwifery

53. Reviewer meeting with pre-registration midwifery students at university, 18 February 2015

54. Meeting with midwifery students on placement, 18 February 2015

55. Meeting with midwifery students on placement, 19 February 2015

56. Reviewer telephone discussion with midwifery students (Jersey) 19 February 2015

57. Meeting with midwifery sign off mentors on placement, 18 February 2015

58. Meeting with midwifery sign off mentors on placement, 19 February 2015

59. Telephone discussions with midwifery sign off mentors (endorsement Jersey), 19 February 2015

60. Meetings with PEF's (midwifery) on placement, 19 February 2015

62. Telephone discussion with midwifery service managers (endorsement Jersey) 19 February

104. Meeting with employers 19 February, 2015

118. Health Education North West (HENW) Clinical Placement Strategy

120. MR meeting with placement team 18 February 2015

127. NMC approval report preregistration nursing (adult) 2012

128. NMC approval report preregistration midwifery, 2013

129. NMC endorsement report, RAN, Isle of Man, 27 March, 2012

130. NMC endorsement report, RAN, Jersey, 27 March, 2012

131. NMC endorsement report, RM, Jersey, 30 May 2013

137. Summary of practice learning strategy to support Nursing and Midwifery Council SLAiP Standards (2008).

155. Examples of escalating concerns, 2014

Outcome: Standard met

Comments:

No further comments

Areas for future monitoring:

None identified

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
Documentary evidence details admission processes and confirms compliance with NMC requirements (76, 77, 79, 83, 109, 127-131). Service users and practitioners are active within the selection processes and receive equality and diversity training (80-83). Endorsement approval reports for pre-registration nursing (adult) and midwifery programmes delivered on the Isle of Man and the States of Jersey confirm admission processes comply with NMC requirements (127-131).
What we found at the event
We found that recruitment and admissions processes comply with NMC standards and requirements (26, 49, 76, 77, 80-83, 109, 127-131). Academic staff members, practitioners and service users informed us they had completed equality and diversity training prior to participation in the recruitment of students (25, 28, 38-39, 52, 57-58, 113). We heard that academic staff and practice placement providers appreciate the values based approach to interviewing and its focus on candidates' personal attributes to work appropriately with service users (28, 49, 37-42, 57-62 , 87-89, 104). We confirmed that there are robust processes in place for obtaining DBS checks, health screening and references. Practice placement providers confirmed mechanisms are in place for sharing information and joint decision-making takes place with the university if issues arise (76-77, 79, 85, 104, 113). We found there is a policy relating to students less than 18 years of age (38). Practice placement providers and academic leads confirmed that this policy and procedure is effective to manage the learning experiences of students less than eighteen years of age going into practice placements (26, 104, 28, 49, 113). Nursing and midwifery students confirmed that they sign a declaration of good health and good character annually which ensures the university's responsibility for public

protection and meets NMC requirements (34-36, 53-56).

Nursing (adult) and midwifery

Students confirmed that face-to-face interviews, which include group activities, involve academic staff, service users and practitioners. Students commented that whilst past academic achievement, literacy and numeracy are examined at interview; this is balanced by the values based interview approach which explores the necessary personal attributes to work appropriately with service users (34-36, 53-56).

Service users and practitioners confirmed that they receive training in preparation for interviewing, including equality and diversity training (25, 41, 60 104). The forum of carers and users of service (FOCUS) has, in addition, a diversity and equality policy (81). We were informed that the recruitment and admissions group involved service users and carers who developed the marking criteria sheet used in selection of students to enable the panel to make consistent decisions (113).

Practitioners value the opportunity to contribute to the selection of students and confirmed that they are released from the work place to participate in the interview process (104, 41, 60, 62).

Midwifery programme (States of Jersey).

Service user participation in face-to-face selection is not included in the selection of students for the 2014 intake. However service users have contributed to the preparation of scenarios used to inform values based selection. In Jersey, prospective candidates for midwifery have positively evaluated the 'insight day' in which they are given information about the programme and maternity care practice. These days have also included visits to practice placements with opportunities to speak with service users (28, 113,160).

There is on-going development with service users and carers to strengthen their involvement in selection, particularly in the States of Jersey where service user and carer engagement has been challenging due to the relatively smaller number of potential service users in an island setting (88, 113).

We conclude that admissions and progression procedures are robust and effectively implemented to ensure students entering and progressing on the nursing (adult) and midwifery programmes meet NMC standards and requirements, which is fundamental to protection of the public.

Evidence / Reference Source

25. Meetings with service users and carers, 19 February 2015

26. Code of practice and support for students aged under 18 years 2014

28. Reviewers meeting with programme team, pre-registration nursing (adult), 18 February 2015

34. Meeting with pre-registration nursing students (university), 19 February 2015

35. Meeting with nursing students on placement, 18 February 2015

36. Meeting with nursing students on placement, 19 February 2015

37. Meeting with nursing mentor sign of mentors. 18 February

38. Meeting with nursing mentor / sign of mentors, 19 February 2015

39. Meeting with adult services managers on placement, 18 February 2015

40. Meeting with adult services managers on placement, 19 February 2015

41. Meetings with PEF's (adult) on placement, 18 February 2015

42. Telephone discussions with adult services manager, endorsed adult programme Jersey, 19 February 2015

49. Programme team meeting (midwifery), 18 February, 2015

52. Meeting with midwifery lead 30 January, 2015

53. Reviewer meeting with pre-registration midwifery students at university 18 February 2015

54. Meeting with midwifery students on placement, 18 February 2015

55. Meeting with midwifery students on placement, 19 February 2015

56. Reviewer telephone discussion with midwifery students (Jersey), 19 February 2015

57. Meeting with midwifery sign off mentors on placement, 18 February 2015

58. Meeting with midwifery sign off mentors on placement, 19 February 2015

59. Telephone discussions with midwifery sign off mentors (endorsement jersey), 19 February 2015

60. Meetings with PEF's (midwifery) on placement, 19 February 2015

61. Reviewer meeting with midwifery manager and PEFs, 18 February 2015

62. Telephone discussion with midwifery service managers (endorsement jersey), 19 February 2015

76. University of Chester DBS student screening policy, 2014

77. University of Chester DBS student screening procedures, 2014

79. Progression points adhered to as specified by the NMC monitored through Module Assessment Boards (MABs).

80. FOCUS service users training sessions

81. FOCUS diversity and equality's policy

82 .List of clinical staff involved in preregistration nursing interviews 2014 - 2015

83. List of service users involved in preregistration nursing interviews 2012 / 2013

85. Examples of risk assessment policies from Trusts

87 .Telephone discussions with commissioners, 18 February 2015

88. Telephone discussions with commissioners, Jersey 18 February 2015

89. Telephone discussions with commissioners, Isle of Man 18 February 2015

109. Undergraduate admissions policy, 2015

104. Meeting with employers, 19 February, 2015

113. Meeting with admissions team and APL coordinator ,18 February, 2015

127. NMC approval report preregistration nursing (adult) 2012

128. NMC approval report preregistration midwifery, 2013

129. NMC endorsement report, RAN, Isle of Man, 27 March, 2012

130. NMC endorsement report, RAN, Jersey, 27 March, 2012

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

What we found before the event

The faculty has a robust fitness to practise policy and procedure to address concerns relating to the professional behaviour of students in both academic and clinical settings. (1, 92-93, 108, 159).

Students, academic staff and placement providers are informed of processes for monitoring performance (1, 50, 52).

The placement providers have clearly articulated risk assessment policies that are commensurate with the university's policy (85).

What we found at the event

We found that all lecturers, placement providers and students understand the procedures to address issues of poor performance in both theory and practice (28, 34-42, 49, 53-62,104).

We found evidence of a robust fitness to practise procedure and decision making process which manages issues of concern about a student whether academic or behavioural (1, 92-93,104, 28, 49, 95-96,108). The outcomes following a fitness to practise hearing range from a period of supervision to the withdrawal of the student from the programme (1).

The faculty is supported by a university proctor with legal experience who meets with students as part of their induction period and provides a detailed explanation about fitness to practise principles, policies and procedures. He is involved in all cases where causes of concerns are raised and supports academic staff in interviewing, collecting evidence and progressing procedures from the informal stage to the fitness to practise panel hearings (161).

Any concerns which arise about a student's good health or good character during the programme are referred to the professional suitability procedures (92-93,104, 28, 49,95-96,108). We confirmed that in the academic year 2013/14, there were 33 cases referred to the university proctor for consideration of which three cases involved student nurses (mental health) and one case involved a midwifery student.

The majority of these cases (28) were addressed via the informal route, with only five cases proceeding to a formal professional suitability panel hearing. One student nurse (mental health) had their programme terminated, one student received a verbal warning, and one student's conduct is still being investigated; the one midwifery student resigned

(1).

For students who have failed theory or practice assessment components there is a reassessment policy that considers progression points and the twelve-week rule. The minutes of the assessment boards demonstrate that students are removed from the programme if they fail to meet NMC and university requirements (28, 34-38, 49, 53-55, 49, 79, 96 105).

There are processes in place to monitor students' attrition at each progression point in the programmes. We viewed progression data and action plans which had been implemented following the review of data at assessment boards and programme boards (98-103,105, 73 –76).

Senior university staff informed us the university reports progression and achievement of students to Health Education North West and to the commissioner on the Isle of Man and the States of Jersey on a quarterly basis, and appropriate strategies are implemented to improve students' performance (97-100). This was confirmed by education commissioners (101-103).

We conclude from our findings that the university has effective policies and procedures in place for the management of poor performance in theory and practice. We are confident that concerns are investigated and dealt with appropriately ensuring protection of the public.

Evidence / Reference Source

1. University of Chester self-assessment report, 2014-2015

28. Reviewers meeting with programme team for adult 18 February 2015

34. Meeting with pre-registration nursing students (university) 19 February 2015

35. Meeting with nursing students on placement, 18 February 2015

36. Meeting with nursing students on placement, 19 February 2015

37. Meeting with nursing mentor sign of mentors, 18 February 2015

38. Meeting with nursing mentor / sign of mentors, 19 February 2015

42. Telephone discussions with adult services manager, endorsed adult programme Jersey, 19 February 2015

44. Portfolios of practice learning, (adult nursing) level 4, 5, 6, 2013-2014

49. Programme team meeting (midwifery), 18 February, 2015

50. Programme handbook (midwifery) 2014-2015

51. Reviewer meeting with midwifery sign off mentor 19 February 2015

52. MR Meeting with midwifery lead, 30 January 2015

53. Reviewer meeting with pre-registration midwifery students at university 18 February 2015

54. Meeting with midwifery students on placement, 18 February 2015

55. Meeting with midwifery students on placement, 19 February 2015

56. Reviewer telephone discussion with midwifery students (Jersey) 19 February 2015

57. Meeting with midwifery sign off mentors on placement, 18 February 2015

58. Meeting with midwifery sign off mentors on placement, 19 February 2015

59. Telephone discussions with midwifery sign off mentors (endorsement Jersey), 19 February 2015

60. Meetings with PEF's (midwifery) on placement, 19 February 2015

61. Reviewer meeting with midwifery manager and PEFs, 18 February 2015

62. Telephone discussion with midwifery service managers (endorsement Jersey), 19 February 2015

73. Isle of Man collaborative AMR, 2013-2014

74. Annual academic partnership report , 2013-2014 between University of Chester and Isle of Man

75. Periodic review of the partnership between University of Chester and Isle of Man, 2013-2014

76. PRN – annual programme monitoring report 2013-2014 (Jersey)

79. Progression points adhered to as specified by the NMC monitored through Module Assessment Boards (MABs) (Undated)

85. Examples of risk assessment policies form NHS trusts, 2014

92. Identification of concerns form (undated)

93. Professional suitability, September 2014

95. Fitness to Practise: Professional hearing documentation, November 2012

96. Student files, 2013 - 2015

97. Isle of Man collaborative AMR, 2013-2014

98. Annual academic partnership report , 2013-2014 between University of Chester and Isle of Man

99. Periodic review of the partnership between University of Chester and Isle of Man, 2013-2014

100. PRN – annual programme monitoring report 2013-2014 (Jersey)

101. Telephone discussions with commissioners, 18 February 2015

102. Telephone discussions with commissioners, Jersey 18 February 2015

103. Telephone discussions with commissioners, Isle of Man 18 February 2015

104. Meeting with employers, 19 February, 2015

105. Assessment board minutes, 2013- 2014

108. Professional suitability procedures undated

159. AEI requirements, 2015

161. Meeting with proctor and academic staff to discuss FtP , 19 February, 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

There are processes for managing failing students in practice which involve both the mentor and the link tutor who construct an action plan with input from the PEF. The

---

procedure is outlined in pre-registration nursing (adult) and pre-registration midwifery practice assessment documentation (158). If necessary, the formal fitness to practise process can be initiated.

There is support for students with disability (42).

What we found at the event

We found evidence that the processes for managing failing students in practice, are understood and implemented appropriately (28,34-42,44,45,49-62,66-69).

Students and mentors informed us of their confidence in the procedures to follow in the event of poor student performance in practice. Based on their experiences, students and mentors confirmed the early and supportive interventions of the academic link in practice (ALP) and the PEF to support the management of students (34-38, 50-60).

One student offered an example of how a personal, professional incident had been managed appropriately (34).

We conclude that the processes for managing failing students in practice are understood and are implemented appropriately.

Evidence / Reference Source

28. Reviewers meeting with programme team for adult, 18 February

34. Meeting with pre-registration nursing students (university), 19 February 2015

35. Meeting with nursing students on placement, 18 February 2015

36. Meeting with nursing students on placement, 19 February 2015

37. Meeting with nursing mentor sign of mentors, 18 February 2015

38. Meeting with nursing mentor / sign of mentors, 19 February 2015

39. Meeting with adult services managers on placement, 18 February 2015

40. Meeting with adult services managers on placement, 19 February 2015

41. Meetings with PEFs (adult) on placement, 18 February, 2015

42. Telephone discussions with adult services manager, endorsed adult programme Jersey, 19 February 2015

44. Portfolios of practice learning, (adult nursing) level 4, 5, 6, 2013-2014

45. Pre-registration nursing (adult) programme handbook, 2014

49. Programme team meeting (midwifery), 18 February, 2015

50. Programme handbook (midwifery)

51. Reviewer meeting with midwifery sign off mentor, 19 February 2015

52. MR meeting with midwifery lead, 30 January 2015

53. Reviewer meeting with pre-registration midwifery students at university, 18 February 2015

54. Meeting with midwifery students on placement, 18 February 2015

55. Meeting with midwifery students on placement, 19 February 2015

56. Reviewer telephone discussion with midwifery students (Jersey), 19 February 2015

57. Meeting with midwifery sign off mentors on placement, 18 February 2015

58. Meeting with midwifery sign off mentors on placement, 19 February 2015

59. Telephone discussions with midwifery sign off mentors (endorsement Jersey), 19 February 2015

60. Meetings with PEFs (midwifery) on placement, 19 February 2015

61. Reviewer meeting with midwifery manager and PEFs, 18 February 2015

62. Telephone discussion with midwifery service managers (endorsement Jersey), 19 February 2015

66. NMC Standards for pre-registration midwifery education, 2010

67. Portfolios of practice learning,(midwifery) level 4, 5, 6, 2013-2014

68. Practice assessment documentation, midwifery 2014

69. Programme handbook (midwifery) 2014-2015

158. Portfolios of practice learning, level 4, 5, 6

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 are clear procedural guidelines and documentation relating to the accreditation of prior experiential learning (AP(E)L) and achievement (78, 110-111).

What we found at the event

We found evidence that systems for the accreditation of prior learning (APL) are in place. Claims for APL are received and supported by the faculty APL coordinator and are used for entry to the pre-registration nursing programmes at academic level 5 after successful completion of a foundation degree. The APL claims require explicit mapping against level 4 modules, and NMC outcomes. Programme assessment boards confirm the outcome of APL claims (78, 110, 111, 112, 28, 35, 49, 113).

The APL processes allow for transfer from other AEIs and accreditation of prior learning (113).

Midwifery lecturers confirmed that APL is not permitted within the three year pre-registration midwifery programme, which complies with NMC standards (113).

Evidence / Reference Source
28. *Reviewers meeting with programme team, pre-registration nursing (adult) 18 February 2015*
35. *Meeting with nursing students on placement,18 February 2015*
49. *Programme team meeting (midwifery), 18 February, 2015*
78. *Undergraduate Admissions Policy (undated)*
110. *Thematic review of APEL, self-assessment report 2013-2014*
111. *QSM Handbook F: Accreditation of Prior Learning (APL), undated.*
112. *Summary of APL file, 2014*
113. *Meeting with admissions and APL team, 18 February 2015*

Outcome: Standard met

Comments:

No further comments

Areas for future monitoring:

None identified

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

Documentary information details mechanisms for creating and maintaining effective partnerships between the university and practice placement providers. The University of Chester works closely with Health Education North West and with three other AEIs (LJMU, Liverpool University and Edge Hill University) to manage practice placements

and to effectively collaborate about generic practice documentation, policies and procedures (32, 114,118).

CQC adverse reporting is responded to effectively and, where appropriate, all relevant stakeholders are involved in the decision making and action planning.

What we found at the event

We found that there are strong and effective partnerships between education and service providers at all levels that include partnerships with three AEIs that share practice placements. Placements are managed through the PLSS, which is jointly funded and based at LJMU (32, 71-72,114,118-119,123).

An educational audit tool is used across practice areas, which standardises the approach to the audit process, and is centrally held on the PLSS. The PEFs and academic links to practice areas undertake the educational audit every year in collaboration with the sister/ward manager (46,121).

We viewed audits for placement areas used for pre-registration nursing (adult) and pre - registration midwifery programmes, which include details of mentors and student capacity in each placement area (46). The audits are in date and comply with NMC requirements. A RAG rating system provides a warning of audits nearing expiry and prompts PEFs and academic links to practice areas that educational audits need to be reviewed (120-121,136).

A raising and escalating concerns policy is in place in placement provider organisations and senior placement providers reported a pro-active approach to issues of concern arising in practice placements. We found that students have the confidence to inform the PEFs and academic link lecturers of any concerns (119-121, 154-159).

We found that clinical governance frameworks are in place within partner NHS trusts and have been strengthened over the past two years in response to concerns from CQC reports. Communication processes at trust and executive level are effective and well developed following issues raised by the CQC and other external monitoring (11-14).

In the event of any concerns related to practice learning environments we found that robust processes are in place for communicating and managing clinical governance issues with the university at a strategic and an operational level (11-14). Placement providers and the programme teams confirmed the partnership is working effectively (28, 41, 49, 61,104, 108, 114, 116).

We did not find any evidence that service reconfigurations had occurred which may have impacted on programme delivery and student support.

Service managers and the programme team confirmed that information relating to outcomes of third party reviews is shared between placement providers and the AEI, who work closely together to address any actions (28, 49,104,114,118).

Students on placement at Warrington Hospital are aware of the recent CQC report and actions being taken to address concerns; students confirmed support available for

practice learning; one of the students confirmed that she met with the CQC review team (54, 58). Students commented that they are highly satisfied with the level of support provided at Warrington hospital (59). The unit is in the process of appointing a consultant midwife to lead on low risk care (49).

The head of midwifery at Arrowe Park Hospital confirmed that there are robust processes for disseminating outcomes of third party reviews, which includes briefings at the chief executive forum and which are shared with the university collaborative link (61). Birth rate plus is a midwifery workforce planning tool that is being completed to assess midwifery staffing levels. It was confirmed that the university provides a good range of programmes to support staff development (61).

There is a joint approach to the management of concerns raised by students in which designated inspectors from the AEI and trust investigate the concern and feedback directly to the student about the outcome (28, 49,104,123). The midwifery students we met had not used the escalation of concern policy, but were confident in knowing what to do if required (53- 54, 56, 61-62).

Midwifery

There are excellent partnership arrangements between the AEI and placement provider partners. Midwifery managers, mentors and practice education facilitators (PEFs) all reported that midwifery ALPs are visible in practice. Placement providers and the programme team confirmed the partnership is working effectively (49, 61, 62).

The LME is relatively new to the role and is in the process of setting up regular meetings with heads of midwifery services (49).

We were informed that the partnership with the States of Jersey is working well. We confirmed that the ALP visits Jersey placement areas a minimum of three times per year and the PEF from Jersey has visited the Chester Campus on two occasions (56,131). The PEF attends the programme committee by Skype, and remains fully conversant with the programme requirements through access to the online learning platform (49. 130, 131).

We conclude that there are well established and effective partnerships between the university and practice placement providers at all levels and NMC risks are effectively managed.

Evidence / Reference Source

11. University of Chester ; CQC checks – non NHS placements, January, 2015

12. Minutes Midwifery and reproductive health programme committee, March 2014. And September, 2014

13. CQC inspection of Wirral University Teaching Hospital Foundation Trust: Arrowe Park Hospital, December, 2014

14. University of Chester response to concerns in relation to CQC inspection of Wirral University Teaching Hospital Foundation Trust: Arrowe Park Hospital, December, 2014

28. Reviewers meeting with programme team, pre-registration nursing (adult) 18 February 2015

32. NHS Health Education North West Placement Charter, undated.

41. Meetings with PEF's (adult) on placement 18 February, 2015

46. Audits of placements 18 and 19 February, 2015

49. Reviewers meeting with programme team and LME, pre-registration midwifery, 18 February 2015

53. Reviewer meeting with pre-registration midwifery students at university, 18 February, 2015

54. Reviewer meeting with midwifery students in placement, 18 February 2015

56. Reviewer telephone discussion with midwifery students (Jersey), 19 February 2015

59. Meetings with PEFs (midwifery) on placement, 19 February 2015

58. Meeting with midwifery sign off mentors on placement, 19 February 2015

61. Reviewer meeting with midwifery manager and PEFs, 18 February 2015

62. Telephone discussion with midwifery service managers (endorsement Jersey), 19 February 2015

71. Presentation by staff team, 18 February 2015

72. MR meeting with practice placements team, 18 February, 2015

104. Meeting with employers 19 February, 2015

108. Professional Suitability Procedures undated

114. NHS Health Education North West Placement Charter, undated.

116. Notes from Directors of Nursing meeting held 24 October 2014

118. Health Education North West (HENW) Clinical Placement Strategy

119. Practice Office Allocation Process, 2014

120. MR meeting with placement team 18 February 2015

121. User guide to the Practice Learning Support System (PLSS) Practice Learning Environment Quality Assurance & Audit Tool.

123. List of deactivated placements and Process for the Introduction/Re-introduction of Placement (see Practice Placement QA mechanisms - Section D) and List of de-activated and re-activated placements following concerns regarding quality

130. NMC endorsement report, RAN, Jersey, 27 March, 2012

131. NMC endorsement report, RM, Jersey, 30 May 2013

136. Schedule of dates that lecturers visited Jersey 2013/2014

154. COCH Guidelines for issues arising in practice placements

155. COCH Guidelines for supporting learning raising concerns whilst on placement

156. Examples of escalating concerns, 2013 – 2014

157. Isle of Man : escalating concerns, 2014

158. Policy on reporting serious concerns- whistleblowing policy, 2014

159. AEI requirements

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

What we found before the event

Documentary information confirms that service users, carers and practitioners are involved in all aspects of programme development and provision (1, 80, 81).

What we found at the event

There is involvement of service users, carers and practitioners within all aspects of programme development and provision (1, 28, 49, 71, 80- 81).

FOCUS is a service user and carer group that operates within the North West region and is available to the University of Chester who has an on-going commitment to service user and carer involvement. Members of FOCUS described their involvement in generic and field specific teaching sessions in the pre-registration nursing programmes (86).

There is a service user and carer (SUC) strategy and implementation plan (71, 86, 125). The SUC feedback form is included in all pre-registration nursing and midwifery practice learning documentation. As students' progress through the pre-registration nursing (adult) programme and the pre-registration midwifery programme they are encouraged to be more proactive in obtaining SUC feedback (67, 68).

Nursing (adult)

We found examples of service user and carer engagement which includes; involvement in the admission and selection of students; service users are invited to discuss key issues and share their experiences with students; and testimonials from service users are recorded within the SUC form, which are integral to the students' assessment of practice documentation (67). We confirmed that students are proactive in gaining this information and value the opportunity to record service user feedback in their assessment of practice documentation (34-38).

Midwifery

Service users and practitioners are actively involved in programme development and delivery. Students confirmed that service users contribute to their university based sessions and highlighted that topics covered include experience of postnatal depression, and input from support groups, including the Stillbirth and Neonatal Death Society (SANDS) (53-56).

Mentors and students confirmed that service user feedback informs on-going formative assessment and feedback is obtained from all women involved in students' case holding experience (53-61).

Objective structured clinical examination (OSCE) assessments are completed in placement, and where possible, this is with a service user. Mentors told us that they prepare students for the OSCE assessment and provide formative feedback as part of this process. Service managers and PEFs confirmed that students are involved in skills training within the trusts where they learn with midwives and other professionals, examples include the practical obstetric multi-professional training (PROMPT) (49, 53-61).

Students on the endorsed midwifery programme receive theoretical teaching at Chester University and therefore experience the input of service users (49, 56).

Our findings confirm service users and practitioners are involved in the delivery of the pre-registration nursing (adult) and midwifery programmes.

Evidence / Reference Source

1. University of Chester self-assessment report 2014-2015

28. Reviewers meeting with programme team, pre-registration nursing (adult) 18 February 2015

34. Meeting with pre-registration nursing students (university), 19 February 2015

35. Meeting with nursing students on placement, 18 February 2015

36. Meeting with nursing students on placement, 19 February 2015

37. Meeting with nursing mentor sign of mentors, 18 February 2015

38. Meeting with nursing mentor / sign of mentors, 19 February 2015

49. Reviewers meeting with programme team and LME, 18 February 2015

53. Reviewer meeting with pre-registration midwifery students at university, 18 February 2015

54. Meeting with midwifery students on placement, 18 February 2015

55. Meeting with midwifery students on placement, 19 February 2015

56. Reviewer telephone discussion with midwifery students (Jersey), 19 February 2015

57. Meeting with midwifery sign off mentors on placement, 18 February 2015

58. Meeting with midwifery sign off mentors on placement, 19 February 2015

59. Telephone discussions with midwifery sign off mentors (endorsement Jersey), 19 February 2015

60. Meetings with PEF's (midwifery) on placement, 19 February 2015

61. Reviewer meeting with midwifery manager and PEFs, 18 February 2015

67. Portfolios of practice learning,(midwifery) level 4, 5, 6, 2013-2014

68. Practice assessment documentation, midwifery 2014

71. Presentation academic team 18 February 2015

80. FOCUS Service Users Training Sessions

81. Forum of Carers and Users of Services (FOCUS) Diversity and Equalities Policy, 2014

86. Meeting with service users and carers (university), 19 February 2015

125. Service user and carer (SUC) strategy and implementation plan, undated

Risk indicator 3.2.2 - academic staff support students in practice placement settings

What we found before the event

There is evidence of an academic lecturer workload distribution of 20% in practice. This includes academic link lecturers' involvement in educational audits; support for failing students and escalation issues. All practice placements have a named academic lecturer in practice (ALP), whose contact details are displayed in clinical areas and maintained in a register in the PLSS (1, 17, 21,32,132).

What we found at the event

All practice placement areas have a named ALP who publicises planned dates they intend to visit placements to enable them to be easily accessed (28, 49, 71, 114-121, 133, 44, 104) Students and mentors confirmed that academic staff are visible in practice and they normally visit placements on a weekly basis. Outside of these times, ALPs are easily contactable by telephone and email and are described by students and mentors as being very responsive. We consistently found that students and mentors value the support provided by ALPs (34-41, 53-62).

The partnership link tutor visits the State of Jersey a minimum of three times per year, and is in regular contact via skype, telephone and email (49, 124).

Evidence / Reference Source

1. University of Chester self-assessment report, 2014-2015

17. Staff development and performance review policy, 2010

21. Process ensuring checks the monitoring academic staff active registration due regard (undated)

28. Reviewers meeting with programme team, pre-registration nursing (adult), 18 February 2015

32. Placement Charter (undated)

34. Meeting with nursing students on placement, 19 February 2015

35. Meeting with nursing mentor sign of mentors, 18 February

36. Meeting with nursing mentor / sign of mentors, 19 February 2015

37. Meeting with adult services managers on placement, 18 February 2015

38. Meeting with adult services managers on placement, 19 February 2015

39. Meetings with PEFs (adult) on placement 18 February, 2015

40. Telephone discussions with adult services manager, endorsed adult programme, Jersey, 19 February 2015

41. Meetings with PEF's (adult) on placement 18 February, 2015

44. Completed portfolio (assessment of practice) adult nursing students

49. Reviewers meeting with programme team and LME, pre-registration 18 February 2015

53. Reviewer meeting with pre-registration midwifery students at university 18 February 2015

54. Meeting with midwifery students on placement, 18 February 2015

55. Meeting with midwifery students on placement, 19 February 2015

56. Reviewer telephone discussion with midwifery students (Jersey) 19 February 2015

57. Meeting with midwifery sign off mentors on placement, 18 February 2015

58. Meeting with midwifery sign off mentors on placement, 19 February 2015

59. Telephone discussions with midwifery sign off mentors (endorsement Jersey), 19 February 2015

60. Meetings with PEF's (midwifery) on placement, 19 February 2015

61. Reviewer meeting with midwifery manager and PEFs, 18 February 2015

62. Telephone discussion with midwifery service managers (endorsement Jersey), 19 February 2015

71. Presentation by staff team, 18 February 2015

104. Meeting with employers 19 February, 2015

114. NHS Health Education North West Placement Charter, undated.

115. NHS Health Education England Learning and Development Agreement

116. Notes from Directors of Nursing meeting held 24.10.14

117. Minutes of the Cheshire and Merseyside Community Health and Wellbeing Leads Meeting held 20.03.14.

118. Health Education North West (HENW) Clinical Placement Strategy

119. Practice Office Allocation Process, 2014

121. User guide to the Practice Learning Support System (PLSS) Practice Learning Environment Quality Assurance & Audit Tool.

124. Reviewer meeting with pre-registration midwifery students at university 18 February 2015

132. Practice Learning Strategy 2013-2017. Role and Responsibilities for Academic Links in Practice (ALP) PowerPoint presentation.

133. List of people who are Academic Links in Practice (ALPs)

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/sign-off mentors are properly prepared through an NMC approved mentor programme and regular updates. Information is also made available in the placement charter (30-32).

There are clear processes for monitoring of mentor preparation and annual updates (1).

What we found at the event

We found PEFs and employers support mentors to successfully complete the university's NMC approved mentor module to enable them to support and assess student nurses and student midwives (113, 115).

Commissioners confirmed that mentor preparation and updating is part of the service level agreement and is reviewed through contract monitoring processes (88-89).

Mentors and sign of mentors confirmed that they are well prepared for their role in supporting students and in the assessment of practice. We viewed mentor databases and verified that all listed mentors/sign-off mentors hold a mentor qualification (47- 48).

Evidence / Reference Source

---

1. University of Chester self-assessment report 2014-2015

30. Summary practice learning strategy to support nursing and midwifery Council SLAiP standards (undated)

31. Practice office allocation process, November 2014

32. Placement Charter (undated)

47. PLSS mentor database, Pre-registration nursing (adult)

---

48. PLSS mentor database, Pre-registration midwifery

88. Telephone discussions with commissioners, Jersey 18 February 2015

89. Telephone discussions with commissioners, Isle of Man 18 February 2015

113. MR meeting with placements team, 18 February 2015

115. NHS Health Education England Learning and Development Agreement.

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 and understand the process they have engaged with

What we found before the event

Documentary information confirms mechanisms for supporting mentors and sign off mentors in meeting the Standards to support learning and assessment in practice (SLAiP), NMC 2008, for updating and triennial review (137).

Statements of compliance and endorsement approval reports pledge this support within the Isle of Man and States of Jersey provision (127-131).

What we found at the event

We found that all mentors and sign off mentors are up to date and meet the requirements for triennial reviews. This is clearly documented on 'live' mentor databases in the PLSS, which also identifies when mentors are approaching their annual updates and triennial reviews, in addition to annual appraisals (47- 48).

Mentors told us that they are able to attend annual updates, which are conducted, by PEFs and academic staff (35-40, 58-62).

Annual updates are generally conducted in small groups but 1:1 meetings are organised, if required. Annual updates provide a forum for discussions around mentoring; grading of assessments is identified as being a common theme; sharing of good practice and the dissemination of information (139).

We conclude that mentors and sign off mentors attend annual updates sufficient to meet requirements for triennial review and to support the assessment of practice.

Evidence / Reference Source

35. Meeting with nursing mentor sign of mentors, 18 February 2015

36. Meeting with nursing mentor / sign of mentors, 19 February 2015

37. Meeting with adult services managers on placement, 18 February 2015

38. Meeting with adult services managers on placement, 19 February 2015

39. Meetings with PEF's (adult) on placement, 18 February 2015

40. Telephone discussions with adult services manager, endorsed adult programme, Jersey, 19 February 2015

47. PLSS mentor database, Pre-registration nursing (adult)

48. PLSS mentor database, Pre-registration midwifery

57. Meeting with midwifery sign off mentors on placement, 18 February 2015

58. Meeting with midwifery sign off mentors on placement, 19 February 2015

59. Telephone discussions with midwifery sign off mentors (endorsement Jersey), 19 February 2015

60. Meetings with PEF's (midwifery) on placement, 19 February 2015

61. Reviewer meeting with midwifery manager and PEFs, 18 February 2015

62. Telephone discussion with midwifery service managers (endorsement Jersey) 19 February

127. NMC approval report preregistration nursing (adult) , 2012

128. NMC approval report preregistration midwifery, 2013

129. NMC endorsement report, RAN, Isle of Man, 27 March, 2012

130. NMC endorsement report, RAN, Jersey, 27 March, 2011

131. NMC endorsement report, RM, Jersey, 30 May 2013

137. Summary of practice learning strategy to support Nursing and Midwifery Council SLAiP Standards (2008).

139. Mentor updates 2014/15 Department of Midwifery and Reproductive Health

---

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

---

What we found before the event

Data bases are kept, up to date, and include mentor preparation, updating and triennial review (1).

What we found at the event

The mentor registers are accurate and up to date; they contain information about mentor qualifications, annual updates and triennial review. The mentor register is well managed to identify mentors who are due for an update and triennial review (1, 47-48).

Evidence / Reference Source

---

1. University of Chester self-assessment report, 2014-2015

47. PLSS mentor database, Pre-registration nursing (adult), 18 and 19 February 2015

48. PLSS mentor database, Pre-registration midwifery, 18 and 19 February 2015

Outcome: Standard met

Comments:

The PLSS database is an excellent and highly accessible means of sharing information between the AEI and all placement providers.

Areas for future monitoring:

None identified

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

Pre-registration nursing (adult) and pre-registration midwifery programme documentation identifies learning and teaching strategies and student support to enable students to achieve NMC learning outcomes and competencies at progression points and for entry to the register (1, 19,45, 69).

External examiners confirm successful progression and achievement of students (84, 99).

What we found at the event

All students told us that they benefit from effective teaching and learning strategies, which include simulated learning. They are given opportunities to rehearse and develop caring and practical skills before they go into practice placements .We found that assessment methods are varied, appropriate and sufficiently challenging to develop and assess students' knowledge and understanding (34-36, 55-57).

The requirements of the European Directive including the specified hours of theory and practice are met in the approved programmes (28, 34-36, 49, 55-57). External examiners' reports for nursing adult and midwifery programmes confirm students are

able to move through programme progression points and are successful on completion of the programme (84, 99).

We found that the programmes are up to date and reflect current workforce priorities. Commissioners and employers confirmed that successful students emerging from the programmes are employable and fit for practice (88-90, 104,). All third year students reported that they feel confident and competent to practise and to enter the NMC professional register on completion of their programme (34-36, 55-57).

Nursing (adult)

We found evidence of a range of different teaching and learning strategies which support students to achieve NMC learning outcomes at progression points and for successful completion of the programme (124, 132).

Students informed us that lecturers are flexible in their approach to classroom teaching and are responsive to feedback from students in relation to any requests for additional specific theoretical input in key subject areas (34-36, 55-57).

Students confirmed that they have a good range of opportunities to rehearse and develop caring and practical skills prior to practice placements (34-36, 55-57).

We found that students are supported and encouraged to excel in their programme and examples include; students who are engaged as 'student quality ambassadors' who meet with the matrons and PEFs in practice placements to explore current issues; disseminate good practice locally and have presented at a national conference (72, 34-36, 104, 88-90).

The programme is enhanced by dementia, mental health awareness and mental health first aid training, which is part of the Health Education North West regional imperatives for 2014-2015 (116).

Midwifery

We found that the pre-registration midwifery programme has Baby Friendly Initiative (BFI) accreditation (68).

Students on placement in Jersey have theory taught at the Chester Campus (57,60).

We heard that there are plans to further enhance the programme with improved focus on perinatal mental health and examination of the newborn (49).

Simulated learning using Sim Mom and Sim baby is an integral part of learning and teaching and is highly rated by students for developing their skills and confidence. Students have the opportunity to practice skills in a simulated environment with the 'NOELLE' birthing simulator; they are exposed to sufficient learning opportunities to achieve the learning outcomes at progression points and for completion of the programme (55-57).

Mentors confirmed there are clear guidelines and explicit assessment of practice criteria which improves inter-rater reliability (58-63).

Our findings conclude that learning, teaching and assessment strategies in the approved programmes enable students to successfully meet the required programme learning outcomes, NMC standards and competencies.

Evidence / Reference Source

1. University of Chester self-assessment report 2013-2014 and 2014-2015

19. Learning and teaching strategy (2013 -2016/17)

28. Reviewers meeting with programme team, pre-registration nursing (adult) 18 February 2015

34. Meeting with pre-registration nursing students (university) 19 February 2015

35. Meeting with nursing students on placement, 18 February 2015

36. Meeting with nursing students on placement, 19 February 2015

45. Pre-registration handbook (adult nursing) 2014-2015

49. Programme team meeting (midwifery), 18 February, 2015

62. Programme handbook (midwifery) 2014/15

69. Programme handbook (midwifery) 2014-2015

55. Meeting with nursing students on placement, 18 February 2015

56. Meeting with nursing students on placement, 18 February 2015

40. Reviewer meeting with midwifery sign off mentor 18 February 2015

57. Meeting with nursing students on placement, 18 February

58. Reviewer meeting with midwifery manager and PEFs 18 February 2015

59. Reviewer meeting with midwifery sign off mentor 19 February 2015

60. Reviewer telephone discussion with midwifery sign off and PEF (Jersey) 19 February 2015

61. Reviewers meeting with programme team and LME, pre-registration midwifery, 18 February 2015

63. Register of mentor sign off mentors and practice teachers (midwifery), 18 and 19 February 2015

99. External examiner reports (midwifery), 2014

84. External examiner reports (adult nursing, 2014

68. Practice assessment documentation, midwifery 2014

88. Telephone discussions with commissioners 18 February 2015

89. Telephone discussions with commissioners, Jersey, 18 February 2015

90. Telephone discussions with commissioners, Isle of Man, 18 February 2015

104. Meeting with employers, 19 February, 2015

116. Notes from Directors of Nursing meeting held 24.10.14

124. Reviewer meeting with pre-registration midwifery students at university 18 February 2015

132. Practice Learning Strategy 2013-2017.Role and Responsibilities for Academic Links in Practice (ALP) PowerPoint presentation

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

What we found before the event

| The pre-registration nursing (adult) and the pre-registration midwifery programme assessment of practice documentation and student support enables students to achieve NMC practice learning outcomes and competencies at progression points and for entry to the NMC register (63, -66, 170). |

What we found at the event

We found the essential skills and competencies and European Directive requirements are identified in the assessment of practice documents. Samples of completed documents confirmed that students achieve the required outcomes at progression points and at the end of the programmes (44, 45).

Nursing (adult)

We found that students understand and work towards achievement of the essential skills and NMC competencies in the practice documentation (34-36). Students and mentors confirmed the opportunities for formative and summative assessment; examples of opportunities for formative assessment include the development of skills within the skills laboratory in the university through simulation opportunities (34-42, 44).

We found that there is scope to further strengthen the feedback given to students in respect of their grades in the medicines calculations assessment (SNAP). Students would value feedback on the mark awarded when using the paper version of this test to ensure progression and accuracy in dosage calculation (34 -36).

We found that students approach the hub and spoke placement arrangement proactively and regard it as an opportunity to appreciate the patient's journey through health care and to engage with different members of the multidisciplinary team (34-36).

Employers and mentors confirmed that students are employable, safe, competent and fit for purpose at the point of professional registration (88-90,104).

Midwifery

Placement learning outcomes are achieved under the supervision of a sign-off mentor whom the student works with at least 40% of time; we are assured that preliminary, intermediate and final interviews are held at the required times to record progress against the intended learning outcomes. Mentors confirmed the on-going record of achievement is accessible to them and this is referred to in order to get information about students' past performance (58-64).

We found that several documents must be completed to confirm all NMC requirements have been met, including a competency document containing the essential skills clusters, a record of EU directives and a practice portfolio for each module containing OSCE assessments, clinical reports and an inter-professional learning log (44-45, 70).

External examiners engage with both theory and practice and year three students confirmed that they have met with the external examiner. Stringent processes are in

place for the management of the assessment of work; the programme team confirmed that 25% of Chester based practice assessments are moderated, and due to the small cohort at Jersey 100% of the practice assessments will be moderated when they are submitted later this year. Mentors confirmed clear guidelines and explicit assessment criteria improved inter-rater reliability (58-64).

The mechanisms used to assess clinical practice allows students to develop skills and achieve competence with opportunities to receive formative feedback from mentors. Only two attempts are allowed at the summative practice assessment (49, 58-60).

We are assured that there are adequate placements learning opportunities both at local trusts and in Jersey, which enable students to meet the programme requirements. We were told that these provide students with a range of experience, including normality and complications in childbirth. Jersey and Chester based students have both had experience of home birth (57).

Heads of midwifery confirmed they are satisfied with the calibre of students completing the programme and are able to employ those who apply for midwifery posts (62).

We conclude that students on the nursing (adult) programme and student midwives on the midwifery programme achieve NMC practice learning outcomes and competencies at progression points and meet NMC standards for entry to the register.

Evidence / Reference Source

1. University of Chester self-assessment report 2013-2014 and 2014-2015

34. Meeting with pre-registration nursing students (university) 19 February 2015

35. Meeting with nursing students on placement 18 February 2015

36. Meeting with nursing mentors and sign off mentors placement 18 February 2015

37. Meeting with nursing mentor sign of mentors. 18 February 2015

38. Meeting with nursing mentor / sign of mentors, 19 February 2015

39. Meeting with adult services managers on placement, 18 February 2015

40. Meeting with adult services managers on placement, 19 February 2015

41. Meetings with PEF's (adult) on placement, 18 February 2015

42. Telephone discussions with adult services manager, endorsed adult programme Jersey, 19 February 2015

44. Practice assessment documentation, midwifery 2014

45. Pre-registration nursing (adult) programme handbook, 2014

49. Reviewers meeting with programme team and LME, pre-registration midwifery, 18 February 2015

57. Reviewer telephone discussion with midwifery students (Jersey), 19 February 2015

58. Reviewer meeting with midwifery sign off mentor, 18 February 2015

59. Reviewer meeting with midwifery manager and PEFs 18 February 2015

60. Reviewer meeting with midwifery sign off mentor, 19 February 2015

61. Reviewer telephone discussion with midwifery sign off and PEF (Jersey) 19 Feb

62. Telephone discussion with midwifery service managers (endorsement Jersey) 19 February

64. Off duty: midwifery placements, 19 February 2015

63. Practice assessment documentation, adult nursing, 2014

66. Portfolios of practice learning, level 4, 5, 6

70. Programme handbook (midwifery), 2014/15

88. Telephone discussions with commissioners 18 February, 2015

89. Telephone discussions with commissioners, Jersey 18 February 2015

90. Telephone discussions with commissioners, Isle of Man 18 February

104. Meeting with employers, 19 February, 2015

170. NMC Standards for pre-registration midwifery education, 2010

Outcome: Standard met

Comments:

There is scope to further strengthen the feedback given to students in respect of their grades in the medicines calculations assessment (SNAP). Students would value feedback on the mark awarded when using the paper version of this test to ensure progression and accuracy in dosage calculation.

Areas for future monitoring:

None identified.

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

Students' views and evaluations about the theoretical and practice elements of the programme are sought in a number of different ways (1). Documentary evidence confirms that evaluation of theory and practice are received by faculty, discussed at

relevant boards, collated and disseminated. There is a range of effective mechanisms for responding to student feedback and actions taken are reported back to students and to placements through dissemination and focus group meetings.

What we found at the event

We found that there are robust processes for assuring quality, and implementing enhancements to programmes, and students are well represented at course level by student representatives (34-42, 53).

Evaluations of practice placements are collected from students, collated and disseminated to placement colleagues through the link lecturers and PEFs, and are discussed at the directors of nurse's meeting held quarterly (28, 49 104). Evaluations of modules are fed back to the module leader for review and are used to inform the annual monitoring programme report. These reports confirm consideration and action planning as required (141-143).

Students confirm that they have several informal opportunities to provide feedback to the programme team (34-42, 53-55). They are aware of the formal process for module and end of year evaluations and engage with this process. However, the faculty staff acknowledge that response rates to online evaluations are low, and they have introduced measures to improve students engagement with this process, for example, students are given time to complete the evaluations in timetabled sessions and are required to sign a form in the practice assessment document to confirm they have completed the evaluation (28.49,72). The student staff liaison (SSL) group meets quarterly and facilitates two way discussions of issues relating to all aspects of the student experience (70).

Nursing (adult)

There is a systematic process in place for responding to student evaluations of practice; PEFs confirmed that they receive quarterly placement evaluations reports (41). Not all mentors are aware of the outcome of placement evaluations, but confirmed that they receive feedback of any specific issues directly relevant to themselves (37, 38). Senior placement managers confirmed that they consider student placement evaluations on a quarterly basis (104).

The response rate and outcomes of the National Student Survey is excellent and the faculty provides direct feedback to students through the SSL meeting and through regular newsletters (28, 49, 122). A number of student-led enhancements have been achieved through the Student Quality Ambassadors (SQA) scheme, for example, introduction of a buddy system to enhance student support, setting up a student midwifery society, and fund raising activities to enhance patient services (104, 88-90).

Students confirmed that the programme teams are responsive to feedback and were able to give several examples of enhancements made to the programme, for example the sequencing of assessment and in the midwifery programme; and the increased opportunity for simulated perineal suturing (72, 53-55).

External examiner reports confirm that programmes deliver appropriate content to meet

learning outcomes (99, 84).

Employers confirmed that there are good mechanisms for eliciting the views of students and that the directors of nursing arrange meetings with students during all years of the programme. Through the quality ambassador's role students are encouraged to use the 'fifteen steps' approach, which gives them opportunities to comment upon care standards. Students confirmed that the trust managers are responsive and gave examples of improvements made as a result of student suggestions (104, 88-90).

Endorsed programmes are subject to annual monitoring review and there is evidence of close tracking of resources, student attrition and progression and areas for improvement (142-145). Academic staff undertake reciprocal visits to ensure consistency in programme delivery and provide detailed reports on areas needing to be addressed, for example, mentor updating and physical resources (74).

We conclude that the internal quality assurance systems provide assurance that NMC standards are met.

Evidence / Reference Source

1. University of Chester self-assessment report, 2014-2015

28. Reviewers meeting with programme team, pre-registration nursing (adult) 18 February 2015

34. Meeting with pre-registration nursing students (university) 19 February 2015

35. Meeting with nursing students on placement, 18 February 2015

36. Meeting with nursing students on placement, 19 February 2015

37. Meeting with nursing mentor sign of mentors 18 February 2015

38. Meeting with nursing mentor / sign of mentors, 19 February 2015

39. Meeting with adult services managers on placement 18 February 2015

40. Meeting with adult services managers on placement 19 February 2015

41. Meetings with PEF's (adult) on placement 18 February, 2015

42. Telephone discussions with adult services manager, endorsed adult programme, Jersey, 19 February 2015

49. Programme team meeting (midwifery), 18 February, 2015

49. Reviewer meeting with pre-registration midwifery students at university, 18 February 2015

53. Meeting with midwifery students on placement, 18 February 2015

54. Meeting with midwifery students on placement, 19 February 2015

55. Reviewer telephone discussion with midwifery students (Jersey), 19 February 2015

58. Telephone discussions with midwifery sign off mentors (endorsement Jersey), 19 February 2015

70. Telephone discussion with midwifery service managers (endorsement jersey), 19 February 2015

72. Presentation by staff team, 18 February 2015

72. Isle of Man Link tutor visit report 2013-2014

74. Annual academic partnership report , 2013-2014 between University of Chester and Isle of Man

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

What we found before the event

The university in collaboration with practice placement providers has a raising and escalating concerns policy and clear complaints procedures. Students are made aware of how to escalate concerns in student handbooks. At each practice placement induction students are informed of the importance of, and process for, raising and escalating concerns when on practice placements (153, 156-157).

What we found at the event

We found there is a robust system in place for raising and escalating concerns (reported in 3.1.1).

Students and mentors confirmed they understand the process and that they have the confidence to raise and escalate concerns (34-42, 53-61). The faculty provided information of concerns that had been raised in practice during 2013-2014 by pre-registration nursing students. These included concerns relating to care, qualified staff / unqualified staff ratios, management of aggression, medicines management issues, needle stick injury and health and safety concerns. We are able to confirm that the policies and procedures were followed to escalate the concerns and students were supported during the process by the ALP (162).

Nursing (adult)

During the induction process, nursing students (adult) are given a standardised

presentation on raising concerns by the university proctor (161).

External examiners reports are constructive with respect to academic modules (99, 151). They are involved in the scrutiny of OSCEs through receiving videos of a sample of OSCE events.

We heard that external examiners engage with both theory and practice elements and that, within the nursing (adult) programme, although external examiners have not taken up invitations to visit practice placements. We heard that the faculty is in the process of rescheduling assessment boards to take place in the afternoon so that external examiners can be given more opportunities to visit practice placements.

We were informed that external examiners routinely review completed practice assessment documentation (PADs) prior to the award assessment board (28). However the external examiners reports do not confirm that practice assessment work had been scrutinised and the university external examiner report template does not explicitly ask for this feedback (99, 151).

We found that external examiners attend assessment/award boards. However, the assessment board in which the pre-registration nursing (adult) programme is considered is a multiple award board involving all faculty programmes. The award was made without explicit recognition of the practice element of the nursing programmes (168). We concluded that the faculty needs to strengthen internal quality assurance processes to ensure the external examiner engages with the theory and practice elements of the pre-registration nursing programme (152).

Midwifery

We found that external examiners engage with both theory and practice and third year students confirmed that they have met with the external examiner (56). Stringent processes are in place for the management of all assessed of work; the programme team confirmed that 25% of Chester based practice assessments are moderated, and due to the small cohort at Jersey 100% of the practice assessments will be moderated when they are submitted later this year (49).

Our findings conclude that the university has effective mechanisms and strategies in place to identify risk, address areas for improvement and enhance the delivery of the pre-registration midwifery programmes.

We found that quality assurance processes that relate to the pre- registration nursing (adult) programme enable students to achieve stated learning outcomes in both theory and practice learning. However, the engagement of external examiners with the theory and practice element of the pre- registration nursing (adult) programme requires improvement to strengthen the risk control.

Evidence / Reference Source

28. Reviewers meeting with programme team, pre-registration nursing (adult) 18 February 2015

34. Meeting with pre-registration nursing students (university) 19 February 2015

35. Meeting with nursing students on placement, 18 February 2015

36. Meeting with nursing students on placement, 19 February 2015

37. Meeting with nursing mentor sign of mentors 18 February 2015

38. Meeting with nursing mentor / sign of mentors, 19 February 2015

39. Meeting with adult services managers on placement 18 February 2015

40. Meeting with adult services managers on placement 19 February 2015

41. Meetings with PEF's (adult) on placement 18 February 2015

42. Telephone discussions with adult services manager, endorsed adult programme, Jersey, 19 February 2015

49. Programme team meeting (midwifery), 18 February, 2015

53. Meeting with midwifery students on placement, 18 February 2015

54. Meeting with midwifery students on placement, 19 February 2015

55. Reviewer telephone discussion with midwifery students (Jersey) 19 February 2015

56. Meeting with midwifery sign off mentors on placement, 18 February 2015

57. Meeting with midwifery sign off mentors on placement, 19 February 2015

58. Telephone discussions with midwifery sign off mentors (endorsement jersey) 19 February 2015

59. Meetings with PEFs (midwifery) on placement, 19 February 2015

60. Reviewer meeting with midwifery manager and PEFs, 18 February 2015

61. Telephone discussion with midwifery service managers (endorsement Jersey) 19 February

99. External Examiner annual report, midwifery, 2013/2014

151. External examiner reports adult nursing, 2014

152. Faculty responses to external examiner reports, 2013-2014

153. Appendix 2a Complaints Procedure Form

156. Examples of escalating concerns, 2013 – 2014

157. Isle of Man: escalating concerns, 2014

161. Meeting with Proctor and academic staff to discuss FtP , 19 February, 2014

162. Summary of Instances when students raised concerns in practice, 2013-2014

168. Unconfirmed report of the meeting of the Awards assessment Board for MSc, BSc, Batchelor of Nursing,11 December, 2015

Outcome: Standard requires improvement

Comments:

Whilst the school reported that external examiners (pre-registration nursing (adult) have access to samples of PADs there was no evidence that external examiners reported on them. External examiner reports, using the university standard template are not explicit in reporting their scrutiny of assessment of practice and external examiners have not visited practice areas. The faculty needs to strengthen internal quality assurance processes to ensure the external examiner engages with the theory and practice elements of the pre-registration nursing programme.

Areas for future monitoring:

External examiner engagement in the scrutiny of practice learning with clear internal mechanisms for recording this activity.

Personnel supporting programme monitoring
Prior to monitoring event
Date of initial visit: 28 Jan 2015
Meetings with:
Faculty coordinator for practice learning Director of pre-registration nursing Faculty administrator for quality Associate Dean for learning and teaching Head of education and learning and development. Jersey Head of midwifery, child and reproductive health
At monitoring event
Meetings with:
Executive Dean of faculty Coordinator for practice learning Director of pre-registration nursing Faculty administrator for quality Associate Dean for learning and teaching Programme leads for pre-registration nursing adult Academic lead in practice x 2 Programme lead for pre-registration programmes Faculty co-ordinator for placement learning and skills Deputy head of acute adult care Head of education and learning and development Senior lecturers x 2 APL coordinator Placement coordinators University Proctor

Lead Midwife for Education

Meetings with:

Mentors / sign-off mentors	34
Practice teachers	
Service users / Carers	4
Practice Education Facilitator	10
Director / manager nursing	16
Director / manager midwifery	3
Education commissioners or equivalent	3
Designated Medical Practitioners	
Other:	2 skills assistant library technician

Meetings with students:

Student Type	Number met
Registered Midwife - 36M	Year 1: 3 Year 2: 6 Year 3: 9 Year 4: 0
Registered Nurse - Adult	Year 1: 21 Year 2: 16 Year 3: 10 Year 4: 0