

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

Programme provider	Teesside University
Programmes monitored	Registered Nurse - Mental Health; Specialist Practitioner - District Nursing (Mandatory Integrated Nurse Prescribing)
Date of monitoring event	18-19 Feb 2015
Managing Reviewer	Karen Stansfield
Lay Reviewer	Sarah Fishburn
Registrant Reviewer(s)	Andy Mercer, Sandra Burley
Placement partner visits undertaken during the review	Nursing (mental health) Tees Esk and Wear Valley NHS Foundation Trust, Auckland Park Hospital, (Ceddesfeld, Hamsterley wards), Sedgefield and the Dales community mental health team, Roseberry Park Hospital, (Bedale, Fulmer and Mallard wards) and liaison psychology, Ideal House, Thornaby community mental health team. Cambrian Victoria House, Darlington (independent sector). Priors Hospital, Middleton- St- George (independent sector), Thorburn unit and secure services. District Nursing Masefield Road Centre, Hartlepool, North Tees and Hartlepool NHS Foundation Trust. Newton Aycliffe and Shildon integrated team, County Durham and Darlington NHS Foundation Trust. Leyburn community office/Leyburn Medical Practice, South Tees NHS Foundation Trust. Friarage Hospital, Northallerton, South Tees 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 Teesside University's programmes

Teesside University comprises six schools, the largest of which is the School of Health and Social Care. The school was reapproved to deliver a pre-registration nursing (adult, mental health, child and learning disabilities) programme in 2012.

The Specialist Practitioner Qualification (SPQ) district nursing (with integrated nurse prescribing) programme was approved at undergraduate BSc (Hons) level and postgraduate diploma level in 2010.

In 2013 a major modification approved an MSc nursing in the home/district nursing programme which includes SPQ district nursing with integrated nurse prescribing. The SPQ district nursing with integrated prescribing programme was given a one year extension by the NMC until June 2016. The reason for the extension is to enable the academic team to incorporate the work being undertaken by the Queens Nursing Institute into district nursing standards.

This monitoring review focuses on the pre-registration nursing (mental health) programme and SPQ district nursing (integrated nurse prescribing) programme.

We found students were very positive about the programmes and the support they receive from the university and its practice placement partners.

The commissioner and employers confirm that the programmes prepare pre-registration nurses (mental health) who are fit for practice at the point of registration and district nurses who are fit for practice at the point of annotation. All NMC key risks are currently controlled apart from practice learning which requires improvement with regard to ensuring all records of mentors are accurate and up to date.

The monitoring visit took place over two days and involved visits to practice placements to meet a range of stakeholders. Particular consideration is given to the student experiences in the placements in County Durham and Darlington NHS Foundation Trust and Roseberry Park Hospital, Tees, Esk and Wear Valley NHS Foundation Trust, which were subject to adverse Care Quality Commission (CQC) reports in December and July 2014.

## Summary of public protection context and findings

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

There is a robust procedure in place to manage the learning experiences of students less than 18 years of age going into practice placements. This ensures both protection of the student as well as protection of the public.

Disclosure and barring service (DBS) check, occupational health clearance and mandatory training are completed before a student nurse (mental health) can proceed to placement. For district nursing students these are undertaken by the employer and a

process is in place to monitor this by the university. These compulsory procedures are undertaken in order to protect the public.

We found there is considerable investment in the preparation and support of mentors/practice teachers and the completion of mentor/practice teacher annual updates is robust. All mentors/practice teachers are appropriately prepared for their role of supporting and assessing students. There is a clear understanding held by sign-off mentors/practice teachers about assessing and signing off competence to ensure students are fit for practice to protect the public. However, records of mentors are not all accurate and this requires improvement to ensure all NHS trusts' databases are up to date.

The school of health and social care has sound policies and procedures in place to address issues of poor performance in both theory and practice. The robust fitness to practise (FtP) procedure manages incidents of concern, both academic and practice related. We found evidence of the effective implementation of these procedures which demonstrates the rigour of the process in ensuring public protection.

We did not find any evidence to suggest there are any adverse effects on students' learning as a result of CQC reviews in placements in County Durham and Darlington NHS Foundation Trust and Roseberry Park Hospital, Tees Esk and Wear Valley NHS Foundation Trust, which resulted in adverse CQC reports in December and July 2014.

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 environments. There are effective quality assurance processes in place to manage risks, address areas for development and enhance the delivery of pre-registration nursing (mental health) and district nursing programmes.

We conclude from our findings that practice placement providers have a clear understanding of, and confidence to, initiate procedures to address issues of students' poor performance in practice. This process, whilst supportive, also ensures that students are competent and fit to practise in accordance with both university and NMC requirements to protect the public. Programme learning strategies, experience and support in practice placements enable students to meet programme and NMC standards and competencies. Students report that they feel confident and competent to practise at the end of their programme. Mentors, practice teachers and employers describe students completing the programmes as fit for practice and purpose.

### Summary of areas that require improvement

- Ensure all mentor/practice teacher databases are up-to-date.

### Summary of areas for future monitoring

- Ensure all mentor/practice teacher databases are up-to-date.

### 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 the programme teams have close working partnerships with practice placement providers. They informed us about effective systems which are in place to support both nursing and district nursing students in relation to theory and practice learning, in order to ensure that the relevant NMC standards and requirements are met.

The academic team are appropriately qualified, and are providing a well-balanced programme for students. Students are supported in practice placement areas by the zoned academic who is the lecturer attached to the practice area. They visit the area for tripartite meetings and other educational activities, and provide support to the student and practice placement mentor. A zone is defined as a specified geographical area where nursing care is provided. The use of the system of zoned academics to support tripartite meetings in practice was viewed positively by all parties, including students, mentors, and service managers.

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

All mentors/sign-off mentors, practice teachers, practice placement facilitators (PPFs) and employers expressed confidence in the programmes and a positive relationship with the university. Mentors/practice teachers told us that they receive good preparation for their role and support from the programme teams and zoned academics. PPFs maintain the live databases of mentors/practice teachers and work closely with staff members in the placements department at the university.

We found mentors/sign-off mentors/practice teachers are committed to ensuring that students are appropriately recruited, supported in theory and practice learning, and that they meet the NMC standards and competencies on completion of the programmes.

Employers and commissioners report students are fit for practice and purpose on successful completion of the programmes.

### **Students**

We found all students are positive about their choice of university and complementary about their experience at all levels within the programmes.

#### Nursing (mental health)

We found that nursing students are enthusiastic, articulate and objective in their feedback. They reported good quality teaching and learning and evaluate their practice learning experiences very positively. Most students apply for a post in a local trust on successful completion of the programme.

They are confident in their knowledge and skills, and commented on the openness and support from all the staff they encounter. This enables them to work in partnership with academic and practice placement providers to achieve programme learning outcomes and NMC competencies.

#### District Nursing

Students are enthusiastic about the district nursing programme and they confirm they receive excellent university preparation in combination with appropriate practice learning opportunities. Past students feel confident and competent that the programme provided a sound preparation for their role as district nurses.

### **Service users and carers**

We found evidence of indirect service user and carer involvement in the recruitment of students. Service users and carers contribute to teaching and aspects of practice assessment for both nursing and district nursing programmes.

Service users told us that they enjoy their involvement with students and feel well supported by the university in their role. They find that the feedback they receive from the university following any input they give is particularly helpful and constructive.

## **Relevant issues from external quality assurance reports**

CQC reports were considered for practice placements used by the university to support students' learning.

CQC compliance order at County Durham and Darlington NHS Foundation Trust related to care plan documentation that did not always reflect the care provided, December 2014. (2)

The compliance order is still in position. The CQC are satisfied with the trust's action plan. A comprehensive assessment by the CQC was undertaken on 2 February 2015. The pre-registration nursing students have benefited from the training programme regarding documentation undertaken by mentors and placement providers' staff.

There is close monitoring of the student experience by the NHS trust senior nurse, PPFs, director of placements and zoned lecturers. The placements remain suitable

learning environments for students' learning. There is appropriate monitoring of the student experience between the partners. (1)

CQC inspections in July 2014 relating to the following areas at Tees, Esk and Wear Valley NHS Trust. One standard at the Dales unit at Stockton on Tees (learning disabilities services) not met related to the care and welfare of people who use the service was deemed to have a minor impact. (3)

Good progress has been made with the action plan to date. Staff have received training in positive behaviour support (PBS) and have been supported with coaching, mentoring and supervision. A range of interventions for patients are in place. The CQC was asked to re-inspect in November 2014. There have been no concerns raised through students' practice evaluations. The student experience is closely monitored by the trust senior nurses, PPFs and zoned academic staff. (2)

Roseberry Park, Middlesbrough - two CQC standards were not met in March 2014, during an inspection to ensure that the improvements required had been made.

Care and welfare of people who use services and safeguarding people who use service from abuse deemed to have a moderate impact. (82)

An action plan has been submitted to the CQC and the local authority. Good progress is being made with the implementation of the action plan which includes intervention planning, training for staff and patient feedback. The next scheduled full inspection of the trust by the CQC was 26 January 2015. The trust received a top rating of four (the highest) in the new national 'Intelligent Monitoring' CQC report on mental health trusts; the best possible score and the trust is one of only 16 of the 39 mental health trusts in the report to receive that rating.

An action plan was put in place by the trust. There is close monitoring of the student experience by the NHS trust senior nurses in place. There are sufficient placements which remain suitable environments for student learning and appropriate monitoring of the student experience between the partners continues.

Other CQC compliance reports relevant to placement areas used by Teesside University for approved nursing and district nursing programmes were considered but did not require further discussion as part of this review.

We found that all practice placements we visited are fully informed of external agencies involved in monitoring practice, such as the CQC. Service managers keep their staff up to date with the latest CQC outcomes and any further action required.

The school continues to work closely with the NHS trusts and an effective two way communication process is in place at university senior management level with nurse directors. At the monitoring visit we found that all clinical governance issues are controlled and well managed.

The school director of placements is responsible for linking with practice placement providers, maintaining effective communication and monitoring the actions taken. The school provided us with evidence that confirmed appropriate action had been taken in relation to the trusts that were the subject of adverse CQC reports.

Our findings confirm the school's placement management process is robust and effectively addresses the many challenges that exist from the escalation process of



concerns, clinical governance reporting and service re-configurations. We found effective procedures in place to protect student learning and to assess if placements need to be withdrawn (see section 3.1.1).

### Evidence / Reference Source

1. Teesside University self-assessment report 2014/15.
2. CQC compliance order at County Durham and Darlington NHS Foundation Trust December 2014.
3. CQC inspections relating to Tees, Esk and Wear Valley NHS Trust, July 2014.
82. CQC Roseberry Park, Middlesbrough, March 2014.

### Follow up on recommendations from approval events within the last year

The return to practice (nursing) (academic level six) programme was re-approved in March 2014. Recommendations and actions include:

- Strengthening of field specific content has been addressed through the inclusion into the timetable of specific field sessions facilitated by a field specific lecturer.
- The team has introduced a multi-field mini conference to address contemporary issues.
- All documentation has been revisited and the required revisions have been completed.

The return to midwifery practice programme was re-approved in March 2014. There were no recommendations. (1)

### Evidence / Reference Source

1. Teesside University self-assessment report, 2014/15

### Specific issues to follow up from self-report

All actions highlighted in the 2014/15 self-report are complete or ongoing as stated below. (1)

Specific issues followed up include:

Mentoring in practice:

Demand for the mentoring in practice programme and the resources needed to meet mentor capacity are continuously monitored. The school has responded to the needs of placement providers for mentors by delivering the mentoring in practice module on a

number of NHS trust sites, as necessary, depending upon allocated student numbers. Resources within the module team have matched the demand. (1)

Return to practice programme:

The school is monitoring student numbers, student experience and the sufficiency of mentors and sign-off mentors. (1)

Midwifery:

The use of group discussions at interviews is being assessed. The impact of the reconfiguration of maternity services at a local trust is being monitored. Also included are: the impact of student numbers on mentorship and inter-mentor consistency in grading of practice criteria. (1)

Specialist community public health nursing (SCPHN):

The consistency of two site delivery of some elements of the SCPHN programme is being monitored. The external examiner is assured that there is consistency in marking across both sites. (1)

Practice teacher numbers are being closely monitored with practice managers.

The programme leader is monitoring the engagement with practice teachers and practice visits by the external examiner for the SCPHN district nursing programme (see section 5.1.1).

Non-Medical Prescribing (V300):

The programme leader will continue to work with non-medical prescribing leads to include mentor preparation workshops in practice environments. (1)

Pre-registration nursing:

The programme team continue to monitor the roll out of the pre-registration nursing curricula (2012) and placement availability.

### Evidence / Reference Source

1. Teesside University self-assessment report, 2014/15

## 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

<p>Risk indicator 1.1.1 - Registrant teachers have experience/qualifications commensurate with role.</p>
<p>What we found before the event</p>
<p>The university ensures that the professional registration of academic staff is current through the maintenance and monitoring of a staff database. (4)</p>
<p>What we found at the event</p>
<p>The university has processes in place to effectively monitor academic staff members to ensure active NMC registration is maintained. All newly appointed nursing and midwifery teachers, as a requirement of the contract of employment, must achieve teacher status. A research and scholarship policy is in place whereby academic staff are entitled to 25 days for scholarship and research. (4, 83)</p> <p>Programme leaders act with due regard and have current NMC registration and a teacher qualification recorded with the NMC. (4-6)</p> <p>Nursing (mental health)</p> <p>We saw evidence that teachers supporting the pre-registration nursing (mental health) programme hold current NMC registration and hold, or are working towards, a teaching qualification that can be recorded with the NMC. We confirmed that they hold qualifications and experience commensurate with their role. (4, 7)</p> <p>The mental health programme team are well resourced, and the teaching team have appropriate qualifications to ensure due regard). The zoned lecturer system, which links lecturers with specific practice placements, ensures that lecturers support practice areas relevant to their clinical and/or academic expertise. (5-9. 58)</p> <p>District Nursing</p> <p>We found the district nursing programme team successfully teach and support students and provide a link lecturer role for practice placement areas over a large geographical area. They have the specialist practitioner qualification for district nursing, community practitioner prescribing qualification (V100) and a teacher qualification recorded on the NMC professional register. (5-6, 32, 84)</p> <p>We conclude from our findings that the university has adequate appropriately qualified academic staff to deliver pre-registration nursing (mental health) and district nursing programmes to meet NMC standards.</p>
<p>Evidence / Reference Source</p>
<p>4. Teesside University Procedure control sheet: Academic staff professional registrations undated.</p>

- 5. Academic Staff CVs- 18 February 2015.
- 6. Sample check – NMC register online 18 February 2015 managing reviewer.
- 7. Meeting with mental health field lead and programme team at the university, 18 February 2015.
- 8. Meetings with managers in practice (mental health), 18 February 2015.
- 9. Meetings with managers in practice (mental health), 19 February 2015.
- 32. Meeting with district nursing programme team, Teesside University, 18 February 2015.
- 58. Breakdown of staff contributing to the pre-registration nursing programmes, undated.
- 83. University IDP and PDR webpages 2015.
- 84. Breakdown of staff involved in delivering the district nursing programme 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

The university is pro-active in ensuring that there is sufficient sign-off mentor capacity. Initiatives include approval of simulation workshops for the first two “sign-offs” through the mentor programme. A strategic approach has also been taken to increase sign-off mentors in the community in preparation for the final year adult field allocations with district nurses. (1)

District Nursing

In the academic year 2013- 2014, four new practice teachers completed the programme and local NHS trusts continue to support this development. Two students are due to commence the practice teacher programme in 2014-2015. (1)

What we found at the event

The allocation of pre-registration students to practice placements is the responsibility of the university and NHS Trust partners and is managed by the school’s placement department. District nursing students are allocated placements by individual trusts in discussion with the university. (80)

Practice placement learning environments are audited and monitored by PPFs and zoned academics to ensure that mentor/practice teacher levels are adequate. (7, 12-13, 24-27, 32)

Nursing (mental health)

We found that there are sufficient qualified mentors/sign-off mentors available to support pre- registration nursing (mental health) students. Audit documentation and the mentor databases relating to the mental health practice placement providers confirm

this to be the case. (8-14, 20)

The students we met during placement visits confirmed that mentorship arrangements are effective and consistent. (15-16)

#### District Nursing

We were informed that there are an adequate number of sign-off mentors and practice teachers and they verified that they are well prepared for their role. Student district nurses are allocated to practice teachers or sign-off mentors. Student district nurses confirmed they are supernumerary. (26, 29, 31, 37)

District nursing students confirmed that there are adequate numbers of practice teachers/sign-off mentors who provide good and effective support for them during practice placements. (31, 37)

We saw databases which confirmed the allocation of each student to a practice teacher. We confirmed that all practice teachers working with district nursing students have due regard to district nursing. (26, 29, 33-35)

In South Tees NHS Trust due to staff shortages, pre-registration student placements have been reduced with student nurses allocated elsewhere in the trust. The priority is to maintain placements with sign-off mentors and practice teachers for the district nursing students. This had been done in agreement with both the placement provider and the university. (24-25, 27-28)

Audits are undertaken in practice on a two yearly cycle and identify suitable practice placements and the number of students the placement can take at any one time and for different programmes. We found that the audit documentation was up to date in the areas reviewed. (39)

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

#### Evidence / Reference Source

1. Teesside University self-assessment report, 2014/15.
7. Meeting with mental health field lead and programme team at the university, 18 February 2015.
8. Meetings with managers in practice (mental health), 18 February 2015.
9. Meetings with managers in practice (mental health), 19 February 2015.
10. Meetings with mentors and sign-off mentors in practice (mental health), 18 February 2015.
11. Meetings with mentors and sign-off mentors in practice (mental health), 19 February 2015.
12. Meetings with practice placement facilitators in practice (mental health), 18 February 2015.
13. Meetings with practice placement facilitators in practice (mental health), 19 February 2015.
14. Practice placement environment audits (mental health), 18-19 February 2015.
15. Meeting with pre-registration students in practice (mental health), 18 February 2015.

- 16. Meeting with pre-registration students in practice (mental health), 19 February 2015.
- 20. Mentor database - Mental Health Tees Esk and Wear Valley NHS Trust, 18 February 2015.
- 24. Meeting with practice placement facilitators district nursing, 18 February 2015.
- 25. Meeting with service managers, district nurses, 18 February 2015.
- 26. Meeting with practice teachers and sign-off mentors, district nursing, 18 February 2015.
- 27. Meeting with Practice Placement Facilitators, district nursing, 19 February 2015.
- 28. Meeting with service managers, district nursing, 19 February 2015.
- 29. Meeting with practice teachers and sign-off mentors, district nursing, 19 February 2015.
- 31. Meeting with student district nurses, 18 February 2015.
- 32. Meeting with district nursing programme team, Teesside university, 18 February 2015.
- 33. Mentor database viewed Masefield Road, Hartlepool, North Tees and Hartlepool NHS Foundation Trust on 18 February 2015.
- 34. Mentor database viewed Newton Aycliffe and Shildon Integrated Team, County Durham and Darlington NHS Foundation Trust on 18 February 2015.
- 35. Mentor database viewed Friarage Hospital, Northallerton South Tees NHS Foundation Trust on 19 February 2015.
- 37. Meeting with student district nurses, 19 February 2015.
- 39. Audit documentation for the district nursing placements visited on 18/19 February 2015.
- 80. Meeting with director of placement learning and assistant dean 18 February 2015 and practice placement allocation administrator.

**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

Nursing (mental health)

The interview process meets NMC requirements. Shortlisted applicants attend interviews which are conducted by teaching staff and their practice partners. Service users are not involved at this stage due to the challenge of resourcing each interview session. Service users have been involved in the development of the interview questions which reflect the NHS constitution. New questions and scenarios were developed by the service user reference group for use in the 2014/15 recruitment cycle. Pre-registration nursing (mental health) students have worked with the programme team to develop a video for use on selection days. This video explores the student perspective on what they have learnt from service users and carers. (1)

Declaration of good health and good character is declared electronically by pre-registration students annually. The system is managed by the student's record office. (73)

District Nursing

Applicants for the district nursing programme are interviewed in their home trust by a senior manager and the programme leader. The trust interview protocol is followed with the addition of questions developed by the service user/carer group. (1, 73)

What we found at the event

We found that recruitment and admissions processes comply with the NMC standards and requirements. All applicants are assessed for literacy and numeracy. Face-to-face interviews are conducted jointly with lecturers and practitioners who all receive equality and diversity training prior to participation in the recruitment of students. (7, 10-13, 15-16, 32, 75)

Several service users and carers we met had received equality and diversity training for involvement in interview panels for other programmes in the school but not for the district nursing or pre-registration nursing (mental health) programmes. They told us that they would be willing to be involved in this way. (62-63)

There is a cross university policy and scheme for supporting students with additional needs in the academic setting and in practice placements. (75)

Nursing (mental health)

Service users are not directly involved in the interview panels, but have contributed to the design of selection days, including a short video shown during the events which also includes a contribution by students. Service users, have also contributed to the standard questions used by the interview panel. (15-16, 62)

We found there are robust processes in place for obtaining disclosure barring service (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. (8-13, 75)

The university has a procedure in place to manage the learning experiences of students less than 18 years of age going into practice placements. This ensures both protection of the student as well as protection of the public. (75)

Nursing 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 the NMC requirements. (15-16)

#### District Nursing

Lecturers and students informed us there are a variety of approaches used to assess potential students. Student district nurses told us that there is a rigorous interview and selection process. They reported that there was competition for places on the programme. (31-32, 37)

Senior managers/leads, practice teachers and the university programme leader are involved in the interviews for student district nurses in their home trust, although the number of interviewers appeared to vary between trusts. Student district nurse applicants have DBS checks undertaken and there is a process in place to monitor this by the university. (24-30, 75)

Service user representatives and the programme leader told us that interview questions generated by the service user/carer group were included into the interview process in January 2015. (32, 40, 63)

We conclude that all admissions and progression procedures are robust and effectively implemented to ensure students entering and progressing on the pre-registration nursing (mental health) and district nursing programmes meet the NMC standards and requirements which is fundamental to protection of the public.

#### Evidence / Reference Source

1. Teesside University self-assessment report, 2014/15.
7. Meeting with mental health field lead and programme team at the university, 18 February 2015.
8. Meetings with managers in practice (mental health), 18 February 2015.
9. Meetings with managers in practice (mental health), 19 February 2015.
10. Meetings with mentors and sign-off mentors in practice (mental health), 18 February 2015.
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12. Meetings with practice placement facilitators in practice (mental health), 18 February 2015.
13. Meetings with practice placement facilitators in practice (mental health), 19 February 2015.
15. Meeting with pre-registration students in practice (mental health), 18 February 2015.
16. Meeting with pre-registration students in practice (mental health), 19 February 2015.



- 24. Meeting with practice placement facilitators district nursing, 18 February 2015.
- 25. Meeting with service managers, district nurses, 18 February 2015.
- 26. Meeting with practice teachers and sign-off mentors, district nursing, 18 February 2015.
- 27. Meeting with practice placement facilitators, district nursing, 19 February 2015.
- 28. Meeting with service managers, district nursing, 19 February 2015.
- 29. Meeting with practice teachers and sign-off mentors, district nursing, 19 February 2015.
- 30. DBS process for admission to district nursing programme, undated.
- 31. Meeting with student district nurses, 18 February 2015.
- 32. Meeting with district nursing programme team, Teesside University, 18 February 2015.
- 37. Meeting with student district nurses, 19 February 2015.
- 40. Minutes of service user/carer group undated.
- 62. Meeting with service users and carers pre-registration mental health nursing, 19 February 2015.
- 63. Meeting with service users and carers – district nursing, 19 February 2015.
- 73. Initial visit managing reviewer, 3 February 2015.
- 75. Meeting with Assistant Dean Quality Enhancement, 18 February 2015.

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

What we found before the event

Fitness to practise (FtP) procedures are in place and understood and implemented by both university staff and practice placement partners. During 2013/14, 34 students were investigated through an informal FtP procedure, with 15 progressing to a formal panel hearing. Unprofessional behaviour through the misuse of social networking sites is the most common reason for student referral to a formal panel hearing. The school's response has been to educate students about professional values and appropriate use of social network sites. (1)

What we found at the event

We found that all academic and practice staff and students are aware of the procedures to address issues of poor performance. (7-13, 24-29, 32)

A robust FtP procedure and decision making process manages issues of concern about a student whether academic or behavioural. The outcomes range from a period of supervision to withdrawal from the programme. (72)

We saw details of statistics relating to fitness to practise investigations and their outcomes. We confirmed the majority of FtP cases relate to social media misuse.

Academic staff told us that as a result they had undertaken specific information sessions with students relating to use of social media, and had noted a subsequent reduction in these issues. There are no fitness to practise concerns relating to district nursing students. (72, 73)

There has been one case where a previous student had failed to achieve the programme outcomes within the district nursing student group and had been discontinued from the programme. (32)

There are processes in place to monitor students' attrition at each progression point in the pre-registration nursing programme. We viewed progression data and action plans which had been implemented following the review of data at assessment boards and programme boards. Attrition as a whole for the pre-registration nursing programme was 21% for the September 2011 cohort that completed in September 2014. The school has robust action plans in place to monitor and reduce attrition, which year on year is reducing. This was verified by Health Education North East who jointly review and agree the action plans. (22, 61, 76)

Our findings confirm the university has effective policies and procedures in place for the management of poor performance in both theory and practice which are clearly understood by all stakeholders. We are confident that concerns are investigated and dealt with effectively ensuring that the public is protected.

#### Evidence / Reference Source

1. Teesside University self-assessment report, 2014/15.
7. Meeting with mental health field lead and programme team at the university, 18 February 2015.
8. Meetings with managers in practice (mental health), 18 February 2015.
9. Meetings with managers in practice (mental health), 19 February 2015.
10. Meetings with mentors and sign-off mentors in practice (mental health), 18 February 2015.
11. Meetings with mentors and sign-off mentors in practice (mental health), 19 February 2015.
12. Meetings with practice placement facilitators in practice (mental health), 18 February 2015.
13. Meetings with practice placement facilitators in practice (mental health), 19 February 2015.
22. Teleconference with Health Education North East, 18 February 2015.
24. Meeting with practice placement facilitators district nursing, 18 February 2015.
25. Meeting with service managers, district nurses, 18 February 2015.
26. Meeting with practice teachers and sign-off mentors, district nursing, 18 February 2015.
27. Meeting with practice placement facilitators, district nursing, 19 February 2015.
28. Meeting with service managers, district nursing, 19 February 2015.
29. Meeting with practice teachers and sign-off mentors, district nursing, 19 February 2015.
32. Meeting with district nursing programme team, Teesside University, 18 February 2015.
61. Attrition – pre-registration as at 31 December 2014 (Last HENE return).
72. Review of documentation relating to fitness to practise incidents and formal and informal complaints, 19

February 2015.

73. Initial visit managing reviewer, 3 February 2015.76. Action plans viewed in relation to attrition for the pre-registration nursing programmes, 2014-2015.

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 mentor and zoned academics who construct an action plan with input from the PPF. The procedure to follow is outlined in pre-registration nursing (mental health) and district nursing practice assessment documentation (PAD). If necessary, the formal fitness to practise process can be initiated. (77-78)

A cause for concern flow chart is available in mentor/practice teacher handbooks to inform on the reporting process. (77-78)

What we found at the event

We were told by mentors/practice teachers, PPFs and students that they have a clear understanding about the procedures that will be followed if poor performance in practice is claimed.

Nursing (mental health)

Mentors, PPFs and student nurses gave examples of how procedures are implemented to address poor student performance or inappropriate behaviour. This understanding is in many instances enhanced by attendance at the workshop 'supporting under achieving students' provided by PPFs. (15-16, 24, 26-27, 29, 31. 37)

A range of responses to poor performance in practice by students were highlighted, and most are based on collaborative action plans developed jointly by the mentor, student and the 'zoned academic' linked to the placement area. (10-12, 15-16)

District nursing

Practice teachers informed us about examples of when they had encountered failing students; the procedures followed and the action that was taken to support the student district nurse and protect the public. Practice teachers and students felt the programme leader is always readily available to provide advice and additional practice visits in order to support both parties.

The zoned academic was cited as providing additional support for both practice teachers and students and ensuring procedures are understood and appropriate action taken. Practice teachers told us about an experience of failing a district nursing student in the consolidation period at the end of the programme. They described how this had

been a stressful experience for all involved, but also described the way that they had followed the university protocol for failing a student. (26, 29, 31, 37, 42-43)

We found that the cause for concern flow chart is on display in the placement areas we visited; explained in students' practice assessment documents and in mentor handbooks. (77-78)

We conclude from our findings that practice placement providers have a clear understanding of and confidence to initiate procedures to address issues of students' poor performance in practice. This process, whilst supportive, also ensures that students are competent and fit to practise in accordance with both university and NMC requirements to protect the public.

#### Evidence / Reference Source

- 10. Meetings with mentors and sign-off mentors in practice (mental health), 18 February 2015.
- 11. Meetings with mentors and sign-off mentors in practice (mental health), 19 February 2015.
- 12. Meetings with practice placement facilitators in practice (mental health), 18 February 2015.
- 15. Meeting with pre-registration students in practice (mental health), 18 February 2015.
- 16. Meeting with pre-registration students in practice (mental health), 19 February 2015.
- 24. Meeting with practice placement facilitators, district nursing, 18 February 2015.
- 26. Meeting with practice teachers and sign-off mentors, district nursing, 18 February 2015.
- 27. Meeting with practice placement facilitators, district nursing, 19 February 2015.
- 29. Meeting with practice teachers and sign-off mentors, district nursing, 19 February 2015.
- 31. Meeting with student district nurses, 18 February 2015.
- 37. Meeting with student district nurses, 19 February 2015.
- 42. BSc (Hons) nursing in the home/district nursing, practice teacher handbook, 360 degree tool, October 2014, page 12.
- 43. BSc (Hons) nursing in the home/ district nursing, programme handbook, October 2014, page 17.
- 77. BSc (Hons) Pre-registration nursing handbook, 2014-2015.
- 78. BSc (Hons) Pre-registration nursing mentor handbook, 2014/2015.

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

The first candidates to enter the second year of the pre-registration nursing programme using accreditation of prior (experiential) learning (AP(E)L) commenced in September 2012. Candidates had successfully completed the school's foundation degree programme. (18)

## What we found at the event

### Nursing (mental health)

We saw evidence of use of the approved accreditation of prior learning (APL) processes; the process approved as part of the programme approval has been operationalised. This includes an individual mapping document, which specifies how prior learning meets programme/module outcomes and forms the basis of an AP(E)L claim. This was confirmed when we viewed documentation which included an example of a completed APL claim relating to a pre-registration nursing student who joined the September 2013 cohort. (17, 57)

### District Nursing

Systems for APL are in place. The university allow up to 50 credits for APL into the district nursing degree programme, although this is not detailed in any handbook and was provided as separate documentation to the review team. Students gave us examples of using AP(E)L relating to prescribing and other modules covered by the district nursing course. They were able to AP(E)L up to 50 credits from the course. (31, 36-38)

Evidence viewed from two student district nurses' claims confirms that they had used APEL processes for three modules successfully completed prior to commencing the district nurse programme. (31, 37)

Portfolio evidence presented by previous and current students who were exempt from undertaking the V100 module demonstrates that they were still required to complete the practice learning outcomes for prescribing and document that they were up-to-date and using the qualification appropriately. (31, 36-38, 41, 55-56)

An issue was identified during discussion relating to the awarding of a degree to nurses who already hold a degree. This has been addressed by the university for future programmes, where a nurse with an existing degree will be required to study the programme at Masters level. (53-54, 79)

We conclude systems for the accreditation of prior learning and achievement are robust and well managed within the school.

## Evidence / Reference Source

- 17. APL claim viewed by mental health reviewer, 19 February 2015
- 18. Teesside University self-assessment report, 2013/14.
- 31. Meeting with student district nurses, 18 February 2015.
- 36. Meeting with qualified district nurses, 18 February 2015.
- 37. Meeting with student district nurses, 19 February 2015
- 38. Meeting with qualified district nurses, 19 February 2015.
- 41. Review of district nursing student work, 19 February 2015.

- 53. Academic Standards Committee minutes, 26 March 2014.
- 54. Band 5 nurse mapping to university Level 5 descriptors, 20 March 2014.
- 55. APL Entry portfolio for district nursing, 19 February 2015.
- 56. APL claim for district nursing students signed off, 3 October 2014.
- 57. APL claim for pre-registration nursing 8 September 2014 viewed by the managing reviewer.
- 79. Meeting with the Assistant Dean, Learning, Teaching and Student Experience, 19 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

Risks are managed through the university working in partnership with placement providers at strategic and operational levels. The process involves discussions at programme boards; established networks of partnership forums; quarterly feedback from commissioners; module and programme evaluations and annual programme review. (1)

Audits are conducted by zoned academics with the PPFs. (1)

The director of nursing informed the university about CQC inspection outcomes at Auckland Park Hospital, part of Tees, Esk and Wear Valley NHS Trust. This hospital cares for older people with mental health needs. Students remain in placement areas

with support from PPFs and zoned academics. (18)

The programme leader for the district nursing programme monitors placement capacity with the NHS trust managers and the PPF and via student feedback on an ongoing basis. (1)

#### What we found at the event

Our findings demonstrate that the university has well established and effective working relationships with Health Education North East and practice placement providers. (7-13, 22, 24-29, 49-52)

All stakeholders informed us that they have effective partnership working at both a strategic as well as operational level. A protocol of information exchange between the NHS trusts and the university is established to strengthen communication about external monitoring. (64)

The director of placement learning communicates regularly with the PPFs and other senior service managers in the NHS trusts and is confident she would be quickly advised of any clinical governance issues. There are a range of forums at a strategic and operational level which ensure that appropriate information is shared. The processes for joint actions arising from adverse clinical governance concerns places patients safety and ensuring students practice learning is not compromised at the forefront of all action plans. (80)

Private, voluntary and independent (PVI) sector placement communication processes are well developed. We found that direct questions about external monitoring are included in the educational audit tool and the zoned academic is pivotal in gaining and sharing information. (80)

A raising and escalating concerns policy is in place in the university and placement provider organisations. Issues of concern arising in practice placements can be raised by students, academic staff or practitioners. These are monitored by the director of placement learning and escalated as appropriate within the placement organisation and university. PPFs, employers, mentors and students report the process is effective in ensuring that concerns are fully investigated and supported. (80)

A multi-professional audit tool developed for use across the placement areas facilitates a streamlined approach to managing the quality assurance of practice placements and to enhance students' learning. This was confirmed by PPFs and the senior placement manager. In addition, the audit tool ensures information is shared more easily with other universities using shared placement areas. (12-13, 80)

One private sector placement provider we visited reported that their placements are accessed by students from the University of York in addition to students from Teesside University. Audit documentation is shared by the two AEIs, and mentor updates are facilitated jointly by staff from both universities, to allow mentors to understand minor variations in practice assessment documentation and the different reporting systems in place for raises issues related to practice areas. (7, 9)

The PPFs support the completion of educational audits, which are completed every two

years by trust staff in the placement area, and normally with the zoned academic from the university. We viewed a live database of placements, within the school's PLU which demonstrates a robust process for initiating the timely completion of audits via the placement system ARC. We found that all educational audits reviewed were in date. (48, 80)

We saw evidence of responses to adverse CQC inspections for each area identified. Individualised responses had been formulated, student evaluations considered and in some places placements have been suspended or discontinued, as a consequence. In other situations, extra support for students has been put in place. Each placement area has a future review date identified. (65)

The university and practice placement partners have developed service level agreements (SLA), clearly setting out responsibilities of all stakeholders in the preparation of nurses and midwives. (80)

We conclude that there are well established and effective partnerships between education and service providers at all levels and NMC risks are effectively managed.

#### Evidence / Reference Source

1. Teesside University self-assessment report 2014/15.
7. Meeting with mental health field lead and programme team at the University, 18 February 2015.
8. Meetings with managers in practice (mental health), 18 February 2015.
9. Meetings with managers in practice (mental health), 19 February 2015.
10. Meetings with mentors and sign-off mentors in practice (mental health), 18 February 2015.
11. Meetings with mentors and sign-off mentors in practice (mental health), 19 February 2015.
12. Meetings with practice placement facilitators in practice (mental health), 18 February 2015.
13. Meetings with practice placement facilitators in practice (mental health), 19 February 2015.
18. Teesside University self-assessment report 2013/14.
22. Teleconference with Health Education North East, 18 February 2015.
24. Meeting with practice placement facilitators district nursing, 18 February 2015.
25. Meeting with service managers, district nurses, 18 February 2015.
26. Meeting with practice teachers and sign-off mentors, district nursing, 18 February 2015.
27. Meeting with practice placement facilitators, district nursing, 19 February 2015.
28. Meeting with service managers, district nursing, 19 February 2015.
29. Meeting with practice teachers and sign-off mentors, district nursing, 19 February 2015.
48. ARC and Independent Sector database 18 February 2015 viewed by the managing reviewer.
49. Teleconference with Director of Nursing- North Tees and Hartlepool NHS Foundation Trust, 18 February 2015.
50. Teleconference with Director of Nursing Tees Esk Wear Valley NHS Foundation Trust, 18 February 2015.
51. Teleconference with Director of Nursing County Durham and Darlington NHS Foundation Trust, 18 February 2015.
52. Teleconference with Director of Nursing South Tees NHS Foundation Trust, 18 February 2015.



64. Protocol for sharing information between the University of Teesside and NHS Trusts/PVI not dated.  
65. Action Plans for practice partners who have adverse CQC reports, 19 February 2015.  
80. Meeting with director of placement learning and assistant dean (quality enhancement), 18 February 2015 and practice placement administrator.

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

What we found before the event

Nursing (mental health)

The involvement of service users/carers is firmly embedded within the programme. Service user and carer activities include; curriculum evaluation and design, recruitment and selection of students, programme induction, module teaching and practice assessments. (1)

District nursing

Service user and carer evaluations and feedback on the students has helped the students in the development and enhancement of their communication. Service users assess the student's communication skills and reflect on their receipt of care. This is an essential part of the assessment of practice. (1)

What we found at the event

We found evidence that practice placement providers are involved in the recruitment of students and the design, delivery and evaluation of pre-registration nursing (mental health) and district nursing programmes. (8-9, 25, 28)

We found excellent examples of service user and carer involvement throughout the district nursing and pre-registration nursing (mental health) programmes.

Service users and carers told us that there are over 100 people involved in some way with the university in providing input into the health and social care courses. (62-63)

We met with service user and carer representatives who told us that they felt well prepared and supported in their roles. They gave examples of suggestions they had made about service user involvement which included contact with students during the induction week in a "core values" session which was implemented by the programme team. (62-63)

We heard that they receive constructive feedback about any involvement they have, and receive a letter with specific feedback after each session they attend. Several service users told us how much they enjoy their interaction with the university, how valuable it is to them to have this involvement and how it enhances their own well-being. (62-63)

Service users gave examples of how their individual needs are anticipated in advance

by the university, for example by giving plenty of notice about prospective sessions to enable them to arrange for a carer to attend with them. An example was given of considering the physical needs of a wheelchair user who can only sit for a limited time, and arranging for occupational therapists to attend to move him into another chair to ensure that he is safe during his involvement with the university. This also enabled occupational therapy students to attend to learn from this interaction. This is an example of excellent inter-professional working and learning. (62-63)

We heard that service users had been involved in producing videos which are used during teaching sessions, and service users attend to answer questions about these videos. Service users and carers told us that they attend presentations of students project work and are asked for feedback in this context. They find this involvement very satisfying and interesting. (62-63)

#### Nursing (mental health)

In the pre-registration nursing (mental health) programme students confirmed that service users are involved in the assessment of practice, as part of the practice portfolio. In each placement area students are the subject of a 360° evaluation, and service users are one part of this assessment. Both mentors and students reported favourably on the process. Students are not made aware of which service users contribute, but they do receive the feedback and are required to reflect on the feedback as part of the assessment of practice. (10-11, 15-16)

Service users and carers have a significant involvement in the delivery of a number of theory modules. While many of these contributions recount lived experience of mental health issues, the university has also invited representatives of a number of ethnic minority groups, including refugees and asylum seekers to contribute to a module which explores diversity and equality in local communities. This is highly valued by students as a way to provide some insight into ways in which social factors can impact on mental health. (15-16)

Practitioners are involved in classroom teaching, particularly in specialist areas of practice such as eating disorders and child and adolescent mental health. (7, 12-13)

#### District Nursing

There is evidence of established activity with service users/carers within both theory and practice elements of the programme. We were given examples by past and current students about university study days which involve service users/carers as well as all students undertaking the dementia friends training, which students found very helpful. (31, 36-38)

Service users complete feedback questionnaires for district nursing students which are administered by their practice teacher, this process includes additional feedback from their practice teacher, providing 360° review. Students found this approach very useful in highlighting areas for their further development and also in building confidence. (31, 36)

We saw examples of brief service user feedback in student district nurse portfolios. We discussed with students and lecturers how this could be developed further to provide constructive feedback to students about aspects of their care. (31, 36-38, 70)

Our findings confirm that practitioners and service users and carers are involved in the development and delivery of pre-registration nursing (mental health) and district nursing programmes.

Evidence / Reference Source

1. Teesside University self-assessment report, 2014/15.
7. Meeting with mental health field lead and programme team at the University, 18 February 2015.
8. Meetings with managers in practice (mental health), 18 February 2015.
9. Meetings with managers in practice (mental health), 19 February 2015.
10. Meetings with mentors and sign-off mentors in practice (mental health), 18 February 2015.
11. Meetings with mentors and sign-off mentors in practice (mental health), 19 February 2015.
12. Meetings with practice placement facilitators in practice (mental health), 18 February 2015.
13. Meetings with practice placement facilitators in practice (mental health), 19 February 2015.
15. Meeting with pre-registration students in practice (mental health), 18 February 2015.
16. Meeting with pre-registration students in practice (mental health), 19 February 2015.
25. Meeting with service managers, district nurses, 18 February 2015.
28. Meeting with service managers, district nursing, 19 February 2015.
31. Meeting with student district nurses, 18 February 2015.
36. Meeting with qualified district nurses, 18 February 2015.
37. Meeting with student district nurses, 19 February 2015.
38. Meeting with qualified district nurses, 19 February 2015.
62. Meeting with service users and carers pre-registration mental health nursing, 19 February 2015.
63. Meeting with service users and carers – district nursing, 19 February 2015.
70. Review of district nursing student portfolios, 19 February 2015.

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

What we found before the event

Zoned academics participate in tripartite meetings with mentors and students. This activity provides opportunities for informal update and feedback on curriculum issues. (73)

What we found at the event

We found that zoned lecturers give regular and timely support; participate in mentor/practice teacher update sessions either as part of the mandatory timetabled days or on a bespoke basis as required; and assist PPFs and service managers in the

management of placement capacity. Zoned lecturers participate in the education audits of practice placements with the PPFs and use findings from these audits and student feedback to inform mentor updates. (14)

#### Nursing (mental health)

Every member of the mental health academic team is linked to a number of practice placement areas, depending on their own clinical background and research interests. They are responsible for setting objectives in a tripartite arrangement with the student and mentor, through the development of the learning contract. The zoned lecturer also contributes to summative assessment of competency at the end of every placement. Zoned lecturers participate in the educational audits relating to each practice placement. (14)

During practice placement visits we saw examples of students' practice portfolios which include learning contracts. In one student's practice portfolio we viewed an action plan to manage specific learning needs within the placement. (14-16, 19)

#### District nursing

Students, lecturers and practice teachers told us that tripartite meetings are undertaken every semester in the placement area. Both students and practice teachers found these invaluable. All placements areas emphasised how supportive the programme leader is including their availability to answer questions over the phone. Several past and current students mentioned that the programme leader is intuitive in her ability to draw out what each student needs and provides excellent personal support, if required. (26, 29, 31-32, 37)

All practice placements have a zoned lecturer who is a member of the academic staff. All practice staff know the university staff linked to their area and the programme leader for the district nurses. (24-29)

Our findings conclude that zoned lecturers effectively support student nurses (mental health) and student district nurses in practice placements.

#### Evidence / Reference Source

14. *Practice placement environment audits (mental health), 19 February 2015.*
15. *Meeting with pre-registration students in practice (mental health), 18 February 2015.*
16. *Meeting with pre-registration students in practice (mental health), 19 February 2015.*
19. *Student portfolios/practice assessment documentation (mental health), 19 February 2015.*
24. *Meeting with practice placement facilitators district nursing, 18 February 2015.*
25. *Meeting with service managers, district nurses, 18 February 2015.*
26. *Meeting with practice teachers and sign-off mentors, district nursing, 18 February 2015.*
27. *Meeting with practice placement facilitators, district nursing, 19 February 2015.*
28. *Meeting with service managers, district nursing, 19 February 2015.*
29. *Meeting with practice teachers and sign-off mentors, district nursing, 19 February 2015.*
31. *Meeting with student district nurses, 18 February 2015.*

- 32. Meeting with district nursing programme team, Teesside University, 18 February 2015.
- 37. Meeting with student district nurses, 19 February 2015.
- 73. Initial visit managing reviewer, 3 February 2015.

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

The school provides a mentoring in practice module, which is delivered on trust sites across the geographical area. Following feedback from students studying this module a pre sessional mentor's workshop is now provided. This workshop is jointly delivered by lecturers from the school and with the senior nurse and PPFs from the NHS Trusts. (1)

The content of the mentor update sessions is updated annually. (73)

The assessment for the practice teacher programme includes an assessed simulated sign-off which on successful completion of the module enables the practice teacher to have attained one 'sign-off'. (1)

What we found at the event

We found PPFs and employers support mentors/practice teachers to successful complete the university's NMC approved mentor module/practice teacher preparation programme to enable them to support and assess student nurses and student district nurses. (8-9, 12-13, 24-29)

Mentors/sign-off mentors and practice teachers supporting students studying the pre-registration nursing (mental health) programme and the district nursing programme confirmed they are well prepared for their role in assessing practice. Additional support is available for mentors, sign-off mentors and practice teachers through the school of health and social care mentor website (9-10, 26, 29, 44).

We viewed mentor databases and verified that all listed mentors/practice teachers hold a mentor/practice teacher qualification. (20, 33-35)

Evidence / Reference Source

- 1. Teesside University self- assessment report, 2014/15.
- 8. Meetings with managers in practice (mental health), 18 February 2015.
- 9. Meetings with managers in practice (mental health), 19 February 2015.
- 10. Meetings with mentors and sign-off mentors in practice (mental health), 18 February 2015.
- 12. Meetings with practice placement facilitators in practice (mental health), 18 February 2015.
- 13. Meetings with practice placement facilitators in practice (mental health), 19 February 2015.

- 20. Mentor database - Mental Health Tees Esk and Wear Valley NHS Trust, 18 February 2015.
- 24. Meeting with practice placement facilitators district nursing, 18 February 2015.
- 25. Meeting with service managers, district nurses, 18 February 2015.
- 26. Meeting with practice teachers and sign-off mentors, district nursing, 18 February 2015.
- 27. Meeting with practice placement facilitators, district nursing, 19 February 2015.
- 28. Meeting with service managers, district nursing, 19 February 2015.
- 29. Meeting with practice teachers and sign-off mentors, district nursing, 19 February 2015.
- 33. Mentor database viewed Masefield Road, Hartlepool, North Tees and Hartlepool NHS Foundation Trust on 18 February 2015.
- 34. Mentor database viewed Newton Aycliffe and Shildon Integrated Team, County Durham and Darlington NHS Foundation Trust on 18 February 2015.
- 35. Mentor database viewed Friarage Hospital, Northallerton, South Tees NHS Foundation Trust on 19 February 2015.
- 44. Mentor website- viewed, 18 February 2015.
- 73. Initial visit managing reviewer, 3 February 2015.

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

Nursing

Mentor updates take place on the trust sites. (73)

District nursing

The programme leader facilitates four updates per year for practice teachers. Attendance at the first and last of these are restricted to practice teachers currently supporting current students. The middle two update sessions are open to all mentors/practice teachers involved in supporting the district nursing students. (73)

What we found at the event

We found that mentor updates are provided in a number of formats and attendance is recorded in the 'live' mentor register held in each NHS trust and managed by the PPFs. The university placements department maintains an up-to-date register of mentors working in practice placements in the PVI sector (8-11, 20-21, 48).

Nursing (mental health)

We were informed by mentors and PPFs that annual updates for all nurses working in NHS placement areas are incorporated into mandatory update study days and facilitated by the PPF and zoned lecturers. Mentors are expected to attend a face-to-face update every two years. Zoned lecturers offer individual updates, if required. (10-

13)

During placement visits the PPFs provided a list of forthcoming updates; this was formulated with reference to the database to ensure those due an update had every opportunity to attend. (20-21)

We heard that mentor updates are easy to access, and provide good, current information relevant to the mentor role. Mentors are aware of the requirements for sign-off status and triennial review, and confirmed that these aspects are covered in annual update sessions. (10-11)

District nursing

Practice teachers and employers told us that there is a variety of delivery for annual updates which are flexibly tailored to the needs of practice teachers and also to the geographical spread of practice placements; ranging from updates provided by zoned lecturers when in their practice areas, to planned session/bespoke sessions by PPFs. There are four opportunities for practice teachers to update during the year. Additionally there is the opportunity for one-to-one updates if these are required. (25-26, 28-29)

PPFs are very flexible in their delivery due to the rural nature of trusts and find that it is more cost effective and achievable to take the update out into the various health centres as this saves travelling time for staff. All mentor/practice teacher activity is recorded onto the database by the PPFs and their administrative support. (24-27, 33-35)

Practice teachers told us that the annual updates last for two to three hours, and that they meet their needs. They told us that they are supported to attend updates and given protected time to attend. (26, 29)

We found that all practice teachers have attended annual updates and meet the requirements for triennial reviews, which is clearly documented on the live mentor register. We confirmed that district nursing students are supported by practice teachers. (26, 29, 31, 33-35, 37)

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

#### Evidence / Reference Source

8. Meetings with managers in practice (mental health), 18 February 2015.
9. Meetings with managers in practice (mental health), 19 February 2015.
10. Meetings with mentors and sign-off mentors in practice (mental health), 18 February 2015.
11. Meetings with mentors and sign-off mentors in practice (mental health), 19 February 2015.
12. Meetings with practice placement facilitators in practice (mental health), 18 February 2015.
13. Meetings with practice placement facilitators in practice (mental health), 19 February 2015.
20. Mentor database - Mental Health Tees Esk and Wear Valley NHS Trust, 18 February 2015.
21. Schedule of forthcoming mentor updates - Tees Esk and Wear Valley NHS Trust.
24. Meeting with practice placement facilitators district nursing, 18 February 2015.

- 25. Meeting with service managers, district nurses, 18 February 2015.
- 26. Meeting with practice teachers and sign-off mentors, district nursing, 18 February 2015.
- 27. Meeting with practice placement facilitators, district nursing, 19 February 2015.
- 28. Meeting with service managers, district nursing, 19 February 2015.
- 29. Meeting with practice teachers and sign-off mentors, district nursing, 19 February 2015.
- 31. Meeting with student district nurses, 18 February 2015.
- 33. Mentor database viewed Masefield Road, Hartlepool, North Tees and Hartlepool NHS Foundation Trust on 18 February 2015.
- 34. Mentor database viewed Newton Aycliffe and Shildon Integrated Team, County Durham and Darlington NHS Foundation Trust on 18 February 2015.
- 35. Mentor database viewed Friarage Hospital, Northallerton, South Tees NHS Foundation Trust on 19 February 2015.
- 37. Meeting with student district nurses, 19 February 2015.
- 48. ARC and Independent Sector database, 18 February 2015 managing reviewer.
- 73. Initial visit managing reviewer, 3 February 2015.

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

What we found before the event

The mentor registers are maintained in the trusts. The PVI mentor register is maintained in the placement department at the university. (73)

What we found at the event

#### Nursing (mental health)

The vast majority of mental health placements are provided by Tees, Esk and Wear Valley NHS Trust. The PPFs who are employed by the trust maintain an electronic trust wide mentor database. The database is accessible from any trust PC or laptop, provided appropriate log in credentials are entered; this allows information held on the database to be available instantly across a wide geographical area. Sample checks relating to the practice areas visited during day one confirmed that the database is accurate, and can be linked to information contained in educational audit documentation. Educational audits are held on the same system as the mentor database therefore both can be considered together, by anyone with appropriate permissions. (12-14, 20)

#### District nursing

We found that each trust has an electronic mentor register database recording nurses names, area of speciality, mentor status and review data. We examined the mentor register in each trust and found that two trusts demonstrated their registers were up-to-date with a RAG rated system for tracking activity and identification of review dates. In North Tees and Hartlepool NHS Foundation Trust we found the database did not have a



RAG rating system, so did not clearly identify whether all mentors were up-to-date with their annual and triennial reviews. When sorted by date, we identified that eight pre-registration nursing mentors were out of date with their annual updates, but are recorded as being live on the database. Two of these were due to attend for updating on the day of the monitoring visit. It was not possible to ascertain from this database whether students are allocated to these mentors at the time. This information was held on a separate database, so the two had to be cross-referenced. We were informed that no nursing/district nursing students were allocated to these mentors, and all practice teachers were up-to-date with their updates. (33-35)

The database at County Durham and Darlington NHS Foundation Trust showed the currency of mentors' updates using a RAG system where any mentors or practice teachers who had not attended an annual update were shown in red. (34)

The placement allocations department keeps an electronic mentor database for the PVI sector which includes mentor updates and triennial review dates. The samples we viewed for nursing (mental health) placements were up to date. (48)

We concluded that this risk area requires improvement to ensure that all mentors and practice teachers recorded as being live on the database have received an annual update.

#### Evidence / Reference Source

- 12. Meetings with practice placement facilitators in practice (mental health), 18 February 2015.
- 13. Meetings with practice placement facilitators in practice (mental health), 19 February 2015.
- 14. Practice placement environment audits (mental health).
- 20. Mentor database - Mental Health Tees Esk and Wear Valley NHS Trust, 18 February 2015.
- 33. Mentor database viewed Masefield Road, Hartlepool, North Tees and Hartlepool NHS Foundation Trust on 18 February 2015.
- 34. Mentor database viewed Newton Aycliffe and Shildon Integrated Team, County Durham and Darlington NHS Foundation Trust on 18 February 2015.
- 35. Mentor database viewed Friarage Hospital, Northallerton, South Tees NHS Foundation Trust on 19 February 2015.
- 48. ARC and Independent Sector database, 18 February 2015 managing reviewer.
- 73. Initial visit managing reviewer, 3 February 2015.

**Outcome: Standard requires improvement**

#### Comments:

This risk area requires improvement to ensure that all mentors and practice teachers recorded as being live on the database have received an annual update.

#### Areas for future monitoring:

Monitor live mentor/practice teachers databases to ensure records accurately demonstrate that mentors/practice

teachers have an annual update.

### 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

Nursing (mental health)

The programme design specifies learning outcomes to be achieved in both theory and practice in relation to progression points, and for entry to the pre-registration nursing (mental health) NMC register. Theory and practice are appropriately integrated, to enable students to make links between theory and practice.

District nursing

The programme team are creative in their approach to teaching, learning and assessing. Initiatives include the inclusion of summative assessed simulations in the field specific module, education on motivational interviewing techniques and their practical application. (1, 73)

The students are also encouraged to access wider learning opportunities. For example the 2013-4 cohort of district nursing students undertook the dementia friends training and also organised and provided events for the user carer week in the school of health and social care. (1)

What we found at the event

We heard that all students benefit from effective teaching and learning strategies which includes simulated learning. Students are given opportunities to rehearse and develop caring and practical skills before they go into practice placements. (15-16)

We were told that students receive feedback from formative and summative

assessments to enable them to develop and meet programme outcomes. Students confirmed that they find the varied approaches to learning supportive, and that they have opportunities to put theoretical learning into practice. (15 -16, 31, 36-38)

We heard of examples where students had not reached the required standard and had been offered additional support, and examples where students had been removed from the programme as a result of failing to reach the required standard and programme learning outcomes. (15, 16, 32)

#### Nursing (mental health)

We found that students are taught using varied methods including simulated learning, classroom teaching, objective structure clinical examinations (OSCEs), sessions presented by service users and practice placements in order to meet NMC learning outcomes and competencies. (62-63)

Theory and practice are appropriately integrated, and students confirmed that they are able to make links and apply theory to practice learning and skill development. (7, 15-16)

All third year student nurses (mental health) told us that they will feel confident and competent to practise and to enter the professional register on successful completion of the programme. (15-16)

#### District nursing

Students emerging from the programme are considered safe, competent and fit for practice by employers. (25-28)

Successful students are usually employed within the trust where they have undertaken their practice placement. This was confirmed by former students. (25, 28, 31, 36-37)

Student district nurses undertake examinations for both the evidence appraisal module and as a requirement for the community practitioner nurse prescribing module. Students are also examined through the use of simulations including OSCEs for specialist practice and long term conditions. (31, 36-38, 71)

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. Teesside University self-assessment report, 2014/15.
7. Meeting with mental health field lead and programme team at the University, 18 February 2015.
15. Meeting with pre-registration students in practice (mental health), 18 February 2015.
16. Meeting with pre-registration students in practice (mental health), 19 February 2015.
25. Meeting with service managers, district nurses, 18 February 2015.
26. Meeting with practice teachers and sign-off mentors, district nursing, 18 February 2015.
27. Meeting with practice placement facilitators, district nursing, 19 February 2015.

- 28. Meeting with service managers, district nursing, 19 February 2015.
- 31. Meeting with student district nurses, 18 February 2015.
- 32. Meeting with district nursing programme team, Teesside university, 18 February 2015.
- 36. Meeting with qualified district nurses, 18 February 2015.
- 37. Meeting with student district nurses, 19 February 2015.
- 38. Meeting with qualified district nurses, 19 February 2015.
- 62. Meeting with service users and carers pre-registration mental health nursing, 19 February 2015.
- 63. Meeting with service users and carers – District Nursing, 19 February 2015.
- 71. Review of programme documentation for PgDN in home and District Nursing, 19 February 2015.
- 73. Initial visit managing reviewer, 3 February 2015.

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 service improvement project provides final year students in both programmes with the opportunity to present a major project to practice placement providers. These are viewed positively by practitioners, and some of the projects are developed and implemented in practice. (1, 73)

Nursing (mental health)

External examiners are confident that the tripartite approach to supporting students in practice, along with the competency based approach in the practice portfolio enables students to meet the NMC standards and competencies. (1)

The hub and spoke practice model enables students to build their confidence in practice placements. (73)

What we found at the event

Nursing (mental health)

We found the essential skills and competencies and European directive requirements are clearly identified in the assessment of practice documentation. (19)

Students' practice portfolios require that the achievement of competencies is formally noted and recorded at each progression point within the programme. The tripartite relationship between the student, mentor/sign-off mentor and zoned lecturer supports the assessment of practice process. (19)

Several examples of practice portfolios were seen during placement visits, and students

and mentors reported that portfolios are appropriately designed and comprehensive. (10-11, 15-16, 19)

Mentors, employers and the education commissioners all confirm that students are fit for practice on completion of the nursing (mental health) programme. (8-13, 22)

#### District nursing

We found that the NMC standards for district nursing education are clearly articulated in the practice assessment documentation and understood by students and practice teachers. The mechanisms to assess clinical practice allow students to develop skills and achieve competence with opportunities to receive feedback from practice teachers. Students and practice teachers find the assessment documentation straightforward with clear guidelines for its use. (47, 70-71)

We found that district nursing students have a wide range of opportunities for learning through both formative and summative assessments. The district nursing programme actively encourages students to seek wider opportunities in their practice setting and spend time with specialist nurses, and allied health professionals who provide interesting and valuable knowledge to enhance the district nurse role. As an example, all students have undertaken training as dementia friends and found this was really useful in practice. (31, 37-38)

We found that the tripartite system in place for all district nursing students is an effective way to review questions and monitor progress and provides a robust mechanism for student progression. This is supported by the portfolio for practice requiring practice teachers/sign-off mentor to assess and sign-off practice learning outcomes for specialist practice and prescribing. We found the portfolios presented are complete and signed off by their assessor. (31, 37-38, 70)

We found that district nursing students present their specialist practice project at the end of the programme, these projects examine service developments that inform the students practice. It is appropriate that practice teachers and service managers are invited into the university to watch these presentations. Evidence was presented that the findings from these projects are taken further if practical to be implemented as practice innovation and improvements. (81)

Employers confirmed they are satisfied with the calibre of students completing the programmes and are able to employ those who apply for district nursing posts. (8-9, 25, 28, 49-52)

District nursing students report that they are well prepared for practice and third year student nurses (mental health) report they will be competent and fit for practice on completion of the programme. (15-16, 31, 37-38)

We conclude that students on the pre-registration nursing (mental health) programme and students on the district nursing programme achieve NMC practice learning outcomes and competencies at progression points and meet NMC standards for entry to the relevant part of the NMC register.

Evidence / Reference Source

1. Teesside University self-assessment report, 2014/15.
8. Meetings with managers in practice (mental health), 18 February 2015.
9. Meetings with managers in practice (mental health), 19 February 2015.
10. Meetings with mentors and sign-off mentors in practice (mental health), 18 February 2015.
11. Meetings with mentors and sign-off mentors in practice (mental health), 19 February 2015.
12. Meetings with practice placement facilitators in practice (mental health), 18 February 2015.
13. Meetings with practice placement facilitators in practice (mental health), 19 February 2015.
15. Meeting with pre-registration students in practice (mental health), 18 February 2015.
16. Meeting with pre-registration students in practice (mental health), 19 February 2015.
19. Student portfolios/practice assessment documentation (mental health), 19 February 2015.
22. Teleconference with Health Education North East, 18 February 2015.
25. Meeting with service managers, district nurses, 18 February 2015.
28. Meeting with service managers, district nursing, 19 February 2015.
31. Meeting with student district nurses, 18 February 2015.
36. Meeting with qualified district nurses, 18 February 2015.
37. Meeting with student district nurses, 19 February 2015.
38. Meeting with qualified district nurses, 19 February 2015.
47. Supporting documentation for the district nurse programme, module guides seen at Teesside university, 19 February 2015.
49. Teleconference with Director of Nursing, North Tees and Hartlepool NHS Foundation Trust, 18 February 2015.
50. Teleconference with Director of Nursing Tees Esk Wear Valley NHS Foundation Trust, 18 February 2015.
51. Teleconference with Director of Nursing County Durham and Darlington NHS Foundation Trust, 18 February 2015.
52. Teleconference with Director of Nursing South Tees NHS Foundation Trust, 18 February 2015.
70. Review of district nursing student portfolios, 19 February 2015.
71. Review of programme documentation for PgDN in home and District Nursing, 19 February 2015.
73. Initial visit managing reviewer, 3 February 2015.
81. Examples of practice innovation district nursing students.

**Outcome: Standard met**

Comments:

No further comments

Areas for future monitoring:

None identified

Findings against key risks
<p><b>Key risk 5- Quality Assurance</b></p> <p><b>5.1 Programme providers' internal QA systems fail to provide assurance against NMC standards</b></p>
<p>Risk indicator 5.1.1 - student feedback and evaluation/ Programme evaluation and improvement systems address weakness and enhance delivery</p>
<p>What we found before the event</p>
<p>Nursing (mental health)</p> <p>Students are positive about the pre-registration nursing programme. Results in the 2014 national student survey demonstrates overall satisfaction at 94%, up to 100% in some fields. The satisfaction scores for practice placements increased in all areas and overall satisfaction for these questions increased again to 94%. (1)</p>
<p>What we found at the event</p>
<p>We found the university has comprehensive systems for student feedback and evaluation to enhance programme delivery. These include written student evaluations for modules and online evaluations of practice placements, student representation at programme board meetings and more informal feedback via the virtual learning environment and to the programme leader for current issues. (7, 15, 16, 31, 36)</p> <p>Students reported they are extremely well supported through the programme and confirmed their feedback was heard by the programme team and acted upon, where possible. (15, 16, 36)</p> <p>The students confirmed that they are required to contribute to the evaluation of all the individual modules and practice placement experiences they undertake, and also complete an overall evaluation at the end of each year of the programme. The programme team confirmed that module evaluations are considered at programme board meetings, with a view to potential amendments to programme delivery. Students are not always aware of any impact that their completed evaluations have, although they did highlight one or two examples of change arising from evaluations. (45)</p> <p>Practice placement evaluations are required at the end of every placement, and students confirmed that they are unable to access their next placement information until they complete an evaluation of their previous placement. (15-16, 85)</p>

Practice placement evaluations are used to inform future delivery; students and the field leader confirmed that as a result of placement evaluations by the first cohort of students for the approved programme which meets the NMC standards for pre-registration nursing (2010), changes had been made to the hub and spoke model of allocation, to allow slightly longer spoke placements in year one. The suggestion was made by students in order to enhance assimilation into the placement area for inexperienced students on their first allocation. (15-16, 85)

Our findings conclude there are effective quality assurance processes in place to manage risks, address areas for development and enhance the delivery of nursing (mental health) and district nursing programmes.

#### Evidence / Reference Source

1. Teesside University self-assessment report, 2014/15.
7. Meeting with mental health field lead and programme team at the university, 18 February 2015.
15. Meeting with pre-registration students in practice (mental health), 18 February 2015.
16. Meeting with pre-registration students in practice (mental health), 19 February 2015.
31. Meeting with student district nurses, 18 February 2015.
36. Meeting with qualified district nurses, 18 February 2015.
45. Sample of DN student evaluations of placement areas, 19 February 2015.
85. Sample of pre-registration nursing student evaluations of placement areas, 19 February 2015.

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

##### Nursing (mental health)

Students are confident that any concerns regarding practice are listened to and acted upon. Two formal and 12 informal complaints were received during 2013/14. All complaints were dealt with using the school's procedures. Escalation of students' concerns has also led to their removal from placement areas and the deactivation of these areas. (1)

##### District Nursing

The external examiner is encouraged to meet with students and practice teachers. Meetings with students led to comments on the high level of clinical expertise and the working knowledge of the assessment of practice documentation by practice teachers in her report. A planned meeting with practice teachers has been reorganised at the external examiners request. (1)



What we found at the event

All students, mentors and practice placement providers reported being aware of how to raise concerns and complaints in practice settings. We found any concerns and complaints raised are appropriately dealt with and communicated to relevant partners. (12-13, 15-16, 25, 28, 31, 36) (see section 3.1.1)

Nursing (mental health)

The university and the Tees, Esk and Wear Valley NHS Trust have an agreed protocol for responding to any CQC or similar concerns raised in respect of practice placement environments. These have been invoked on several occasions and service managers, practice placement facilitators, and the programme team were able to respond quickly, and clarify the position of students in order to ensure a positive learning experience was maintained. (7-9, 10-11, 65)

One or two students described a positive experience in situations where they had been involved in quality reviews; one student in particular who had raised a concern felt well supported by both practice placement staff and the university. Students appeared to be aware of their obligations under the 6Cs and the duty of candour. (15-16)

Reports from the external examiner confirm that standards are commensurate with other similar programmes across the country. The external examiner has visited students on placement settings, and is involved in the verification of practice assessment as well as academic performance. (23)

External examiner reports were seen relating to assignments, videos of OSCE assessments and portfolios which had been reviewed. The external examiners identified that they agreed with marks given by academic staff. (23)

We saw evidence of informal and formal complaints by students, actions taken and dates resolved. The outcome of one of the formal complaints had not been fully completed. However, we were provided with information about the resolution of this complaint and it was updated during the review. (72)

District Nursing

External examiner reports confirm that the district nursing programme with integrated prescribing is meeting the specialist learning outcomes and NMC standards. We found external examiner reports are clear, detailed and specific to the programme examined. It was noted that the current external examiner has not yet had the opportunity to meet with students or practice teachers but this had been offered. We were told that this had not taken place due to sickness and another practice visit has been arranged (46, 83).

We conclude from our findings that the university has robust processes in place to ensure issues raised in practice learning settings are appropriately dealt with and communicated to relevant partners.

Evidence / Reference Source

1. Teesside University self-assessment report, 2014/15.
7. Meeting with mental health field lead and programme team at the university, 18 February 2015.
8. Meetings with managers in practice (mental health), 18 February 2015.
9. Meetings with managers in practice (mental health), 19 February 2015.
10. Meetings with mentors and sign-off mentors in practice (mental health), 18 February 2015.
11. Meetings with mentors and sign-off mentors in practice (mental health), 19 February 2015.
12. Meetings with practice placement facilitators in practice (mental health), 18 February 2015.
13. Meetings with practice placement facilitators in practice (mental health), 19 February 2015.
15. Meeting with pre-registration students in practice (mental health), 18 February 2015.
16. Meeting with pre-registration students in practice (mental health), 19 February 2015.
23. External examiners reports (mental health) and report of visit to clinical areas, 19 February 2015.
25. Meeting with service managers, district nurses, 18 February 2015.
28. Meeting with service managers, district nursing, 19 February 2015.
31. Meeting with student district nurses, 18 February 2015.
36. Meeting with qualified district nurses, 18 February 2015.
46. External examiner reports for BSc (Hons) nursing in the home/ district nursing, 2013/2014.
65. Action Plans for practice partners who have adverse CQC reports, 19 February 2015.
72. Review of documentation relating to fitness to practise incidents and formal and informal complaints, 19 February 2015.

**Outcome: Standard met**

Comments:

No further comments

Areas for future monitoring:

None identified

### Personnel supporting programme monitoring

#### Prior to monitoring event

Date of initial visit: 03 Feb 2015

#### Meetings with:

Programme director, pre-registration nursing

Director of placements

Field leader, pre-registration nursing - mental health  
 Programme leader District Nursing  
 Programme leaders BSc pre-registration nursing x2  
 Assistant Dean Quality Enhancement  
 Programme leader non-medical prescribing

**At monitoring event**

**Meetings with:**

Meeting with PPFs district nursing x4  
 Meeting with qualified district nursing former students x4  
 Student practice teacher x1  
 Assistant Dean Quality Enhancement  
 Assistant Dean Learning, Teaching and Student Experience  
 Executive Dean, School of Health and Social Care  
 Placement department senior administrator  
 Teleconference with Director of Nursing- North Tees and Hartlepool NHS Foundation Trust  
 Teleconference with Director of Nursing Tees Esk Wear Valley NHS Foundation Trust  
 Teleconference with Director of Nursing County Durham and Darlington NHS Foundation Trust  
 Teleconference with Director of Nursing South Tees NHS Foundation Trust  
 Practice placement facilitators in practice (mental health)x 2  
 Meeting with the programme team district nursing Teesside university, 18 February 2015  
 Placement department - director of placements  
 Meeting with the programme team pre-registration nursing (mental health) Teesside University, 18 February 2015

Meetings with:

Mentors / sign-off mentors	31
Practice teachers	7
Service users / Carers	8

Practice Education Facilitator	
Director / manager nursing	8
Director / manager midwifery	
Education commissioners or equivalent	2
Designated Medical Practitioners	
Other:	5  Former students x 4 Student practice teacher x1

Meetings with students:

<b>Student Type</b>	<b>Number met</b>
Registered Nurse - Mental Health	Year 1: 8 Year 2: 8 Year 3: 3 Year 4: 0
Specialist Practitioner - District Nursing (Mandatory Integrated Nurse Prescribing)	Year 1: 8 Year 2: 0 Year 3: 0 Year 4: 0