2015-16
Monitoring review of performance in mitigating key risks identified in the NMC Quality Assurance framework for nursing and midwifery education

Programme provider	University of South Wales
Programmes monitored	Mentorship; Registered Nurse - Learning Disabilities
Date of monitoring event	08-10 Mar 2016
Managing Reviewer	Shirley Cutts
Lay Reviewer	Sophia Hunt
Registrant Reviewer(s)	David Mudd, Carole Proud
Placement partner visits undertaken during the review	Community support team – Cardiff East Community support team – Cardiff West Llanfrechfa Grange assessment and treatment unit Hafod Y Wennol, service for clients with challenging behaviour Craig Y Parc special school Heatherwood Court private sector medium secure unit Llanarth Court – Osbern Ward, private sector medium secure unit Community drug and alcohol team, Ysbyty Cwm Cynon - Cwm Taff University Health Board (UHB) Community hospital – Cwm Taff UHB District nursing team, Dewi Sant - Cwm Taff UHB Royal Glamorgan Hospital – Cwm Taff UHB Princess of Wales Hospital – Abertawe Bro Morgannwg UHB Mental health rehabilitation unit, Cefn-Yr-Afon - Abertawe Bro Morgannwg UHB Bridgend Community Mental Health Team - Abertawe Bro Morgannwg UHB
Date of Report	21 Mar 2016

Introduction to NMC QA framework

The Nursing and Midwifery Council (NMC)

The NMC exists to protect the public. We do this by ensuring that only those who meet our requirements are allowed to practise as a nurse or midwife in the UK. We take action if concerns are raised about whether a nurse or midwife is fit to practise.

Standards for pre-registration education

We set standards and competencies 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.

Quality assurance (QA) and how standards are met

The quality assurance (QA) of education differs significantly from any system regulator inspection.

As set out in the NMC QA framework, which was updated in 2015, approved education institutions (AEIs) are expected to report risks to the NMC. Review is the process by which the NMC ensures that AEIs continue to meet our education standards. 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 AEIs and it engages nurses, midwives, students, service users, carers and educators.

Our role is to ensure that pre-registration education programmes provide students with the opportunity to meet the standards needed to join our register. We also ensure that programmes for nurses and midwives already registered with us meet standards associated with particular roles and functions.

The NMC may conduct an extraordinary review in response to concerns identified regarding nursing or midwifery education in both the AEI and its placement partners.

The published QA methodology requires that QA reviewers (who are always independent to the NMC) should make judgments based on evidence provided to them about the quality and effectiveness of the AEI and placement partners in meeting the education standards.

QA reviewers will grade the level of risk control on the following basis:

Met: Effective risk controls are in place across the AEI: The AEI and its placement partners have all the necessary controls in place to safely control risks to ensure programme providers, placement partners, mentors and sign-off mentors achieve all stated standards. Appropriate risk control systems are in place without need for specific improvements.

Requires improvement to strengthen the risk control: The AEI and its placement partners have all the necessary controls in place to safely control risks to ensure programme providers, placement partners, mentors and sign-off mentors achieve stated standards. However, improvements are required to address specific weaknesses in AEI's and its placement partners' risk control processes to enhance assurance for public protection.

Not met: The AEI does not have all the necessary controls in place to safely control risks to enable it, placement partners, mentors and sign-off mentors to achieve the standards. Risk control systems and processes are weak; significant and urgent improvements are required in order that public protection can be assured.

It is important to note that the grade awarded for each key risk will be determined by the lowest level of control in any component risk indicator. The grade does not reflect a balance of achievement across a key risk.

When a standard is not met an action plan must be formally agreed with the AEI directly and, when necessary, should include the relevant placement partner. The action plan must be delivered against an agreed timeline.

Summary of findings against key risks

Category	Risk				
Resources	**1.1 Programme providers have inadequate resources to deliver approved programmes to the standards required by the NMC**	1.1.1 Registrant teachers 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 in accordance with NMC standards**	4.1.1 Documentary evidence to support students' achievement of all NMC learning outcomes, competencies and proficiencies at progression points and or entry to the register and for all programmes that the NMC sets standards for			
	4.2 Audited practice placements fail to address all required learning outcomes in accordance with NMC standards	4.2.1 Documentary evidence to support students' achievement of all NMC practice learning outcomes, competencies and proficiencies at progression points and upon entry to the register and for all programmes that the NMC sets standards for			
Quality Assurance	**5.1 Programme providers' internal QA systems fail to provide assurance against NMC standards**	5.1.1 Student feedback and evaluation / programme evaluation and improvement systems address weakness and enhance delivery	5.1.2 Concerns and complaints raised in practice learning settings are appropriately dealt with and communicated to relevant partners		

Standard Met	*Requires Improvement*	*Standard Not met*

Introduction to University of South Wales' programmes

Nursing and midwifery programmes in the University of South Wales (USW) are delivered through the school of care sciences (the school) which is part of the faculty of life sciences and education (the faculty). The school provides a number of undergraduate and postgraduate programmes, alongside a number of short courses in nursing.

Numbers on commissioned programmes are predicated by workforce plans by three university health boards – Cwm Taf, Abertawe Bro Morgannwg and Aneurin Bevan. The diverse geography provides students with opportunities to work with service users and carers from a diverse range of populations. To complement these wide ranging placements the school also has a state-of-the-art clinical simulation centre which replicates a fully operational mini-hospital, its wards and specialist units including intensive care, an emergency department including ambulance simulator, paediatric and maternity suites, complete with the technologies you would find in an acute hospital.

More than half of USW's nursing and healthcare research is either world-leading or internationally excellent and all of the research is internationally recognised, according to the 2014 research excellence framework (1).

The workforce education and development service (WEDS), Welsh government (educational commissioner) NHS Wales acts as the sole commissioner for nursing and midwifery programmes in Wales (2). The current pre-registration nursing learning disability programme was approved in 2012. There is one intake of learning disability students per year in September. In 2015 there were 30 commissioned places which will increase to 43 in September 2016 (10).

Students are based on the Glyntaff campus for the theoretical part of the programme. For practice placements they are based in one of the health boards and also with private healthcare service providers (2).

The mentor programme was approved in March 2013 with four conditions and one recommendation. The programme is delivered four times per year at each of three sites with approximately 250 students undertaking the programme every year. The programme has two fixed study days; one at the beginning and one at the end of the programme. The same learning resources are used across the three health boards ensuring consistency of delivery. Three further days are undertaken covering five distance learning units which focus on the eight NMC domains (4).

The mentorship programme is provided at level six and does not have any associated academic credit. The programme is normally completed within three months with the student mentor achieving the outcomes stated within the domains of the NMC Standards to support learning and assessment in practice (2008) (SLAiP) (4).

The monitoring visit took place over three days and we visited seven learning disability placements and 10 mentorship placements.

Summary of public protection context and findings

Our findings conclude that the University of South Wales approved programmes have systems and processes in place to monitor and control risks of three standards, resources, admissions and progression and practice learning to assure protection of the public. We found two standards not met for the mentor preparation programme; fitness for practice and quality assurance. Action is required to address the significant weaknesses identified, to ensure that all NMC standards and requirements are met and public protection assured.

The university produced an action plan to address the two unmet outcomes. A documentary review on 28 September 2016 to review progress made against the action plan confirmed that the action plan has been fully implemented and the identified risks are now controlled.

Control of the key risks is outlined as follows:

Resources – met

We found that the school has sufficient appropriately qualified staff in both the university and practice areas to support students. All the staff we met are enthusiastic about their role. Professional development is encouraged and supported in both the university and the practice areas. Systems are in place in both the school and the health boards to support staff through the NMC revalidation process.

Admissions and progression – met

We found that the school and their practice partners work closely together to ensure that admission and progression policies and procedures are implemented. Practice partners and service users are integral to the admissions process. Practice partners and students are familiar with fitness for practice procedures and we saw evidence of their implementation. Accreditation of prior learning (APL) procedures are understood and implemented.

Practice learning – met

We found that the partnership working is extremely strong, described as 'second to none' by the commissioners. Students are well supported in practice placements by both school staff and their mentors. Mentors are well prepared for their role and supported by the practice facilitators (PF). Mentor registers are maintained by the PFs and held in the health boards. Close communication between the PFs, the link lecturers (LL) and the university placement department ensure that students are placed appropriately with a qualified and updated mentor.

Fitness for practice – not met

We found that students on the pre-registration nursing programme are enthusiastic and positive about the programme they are undertaking. They report that they are well prepared for their practice placement experiences and that the theoretical part of the pre-registration programme reflects contemporary learning disabilities health and social care practice. Teaching staff are creative in their approach, looking to create a dynamic learning environment.

We found that the mentor preparation programme is not subject to the rigorous scrutiny required for an NMC approved programme. The programme is delivered by the PFs in the health boards and managed by a lecturer – the programme leader (PL)

in the school. The PFs support the student mentors through the programme and mark their portfolios on completion of the programme. The PFs meet regularly and there is very strong partnership working across the health boards. They were able to describe their marking procedures but there is no evidence of formal marking criteria to enhance consistency across the health boards, or of internal moderation processes to demonstrate inter-rater reliability.

The PL and the PFs have monthly meetings, but there are no minutes recorded and consequently there is no evidence to demonstrate that the management of the programme is discussed. The school does not have documentary evidence to support students' achievement of the programme learning outcomes. This evidence is held by the PFs in their respective health boards. It is not routinely submitted to the PL and was not produced during the monitoring visit. This standard is not met and action is required to control the risk.

The university implemented an action plan to address the need for rigorous scrutiny of the mentor programme. The plan included ensuring that PF meetings with the PL are minuted, the development of common marking criteria and the application of formal moderation processes.

A documentary review on 28 September 2016 to review progress made against the action plan confirmed that revised systems and processes are in place to ensure that meetings between the PL and the PFs are minuted, that the common marking criteria is used across all sites and that internal and external moderation processes are implemented.

Quality assurance – not met

Processes are in place for students on the pre-registration nursing learning disability programme to evaluate theory and practice. The teaching team respond to student feedback through formal and informal methods.

The EE appointed to the programme has the appropriate professional and academic qualifications and engages with both theory and practice.

The mentor preparation programme is evaluated by the student mentors, and evaluates very positively. New mentors feel well prepared for their role. The PFs respond to the evaluations, sharing feedback across the health boards. There is no process for the school to be formally involved in this process, therefore there is no evidence of quality assurance systems in place by the university to provide assurance against NMC standards.

An external examiner (EE) has been appointed to the programme. Scrutiny of professional and teaching qualifications revealed that the teaching qualification is not one approved by NMC. Neither is there any evidence that the EE has moderated any completed portfolios. This standard is not met and action is required to control the risk.

The university implemented an action plan to address the appropriateness of the EE and the recording of their scrutiny of the student mentors work.

A documentary review on 28 September of evidence submitted by the university against the action plan confirmed that revised systems and processes are in place to

ensure that an appropriately qualified EE is in place and that they clearly record their scrutiny of the programme and student mentors' submitted work.

Summary of areas that require improvement

The evidence submitted by the university to support completion of the action plan was reviewed on 28 September 2016 and confirmed that systems and processes are now in place to address all of the issues identified below.

The following areas are not met and require urgent attention:

The university must ensure that documentary evidence is available to demonstrate that students undertaking the mentorship programme consistently meet the learning outcomes and competencies required by the NMC Standards for supporting learning and assessment in practice (2008).

The university must introduce quality assurance mechanisms to provide assurance to the NMC that the non-accredited mentorship programme undergoes the same rigorous academic processes as its pre-registration provision, including internal moderation and EE processes.

Summary of areas for future monitoring

Mentor preparation programme:

- Marking and moderation processes by the PFs in the health boards
- Moderation processes within the university
- Processes for programme evaluation and annual reporting
- The extent of the engagement of the EE

Summary of notable practice

Resources

None identified

Admissions and Progression

Service users spoke very highly of their involvement with the interview process and it was evident that their involvement had been both positive and valuable to the selection process. Service users ask their own questions during the interviews, ensuring that the service user feels valued as a part of the interview process. It provides the university with a good opportunity to gauge the applicant's communication skills and behaviours when addressing individuals with learning disabilities.

Practice Learning

There is a well-established service users and carers group who have contributed to the development and delivery of the curriculum. The teaching and research advisory

committee (TRAC), which is made up of men and women who have learning disabilities and their supporters, give advice on teaching and research that is about people with learning disabilities. This has had a positive impact on learning disabilities students' learning. It promotes a people first philosophy and assists students in their preparation for practice based learning. Service users provide feedback on student performance in practice using a standard document and this forms part of the evidence for the ongoing record of achievement of practice competence. This document was developed by TRAC and is used across all fields of nursing.

Fitness for Practice

None identified

Quality Assurance

None identified

Summary of feedback from groups involved in the review

Academic team

All members of academic staff are passionate about the programmes which they deliver. They are determined to provide their students with the skills and knowledge they require to become confident and articulate nurses. They strive to continually develop their teaching strategies in order to achieve this. Learning is seen as a collaborative partnership between the student, the academic and the mentors in practice and there is a sense of shared vision and values between these partners. The team works hard to create meaningful opportunities to engage service users, carers and practitioners in the learning experience of students and in inclusion in research projects.

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

Practice partners are extremely complimentary regarding the school's approach to teaching and learning. They are positive about the abilities of the students during and on completion of the programmes. Mentors are enthusiastic about their role and knowledgeable about the programmes. They ensure that students take advantage of all learning opportunities available. Mentors are dedicated to their role in the supervision and assessment of students in practice and take their responsibilities for developing students and protecting the public seriously. Employers recognise the value of students in clinical areas and promote the role of mentor very well.

Students

Students feel well supported by both academic and practice staff. They value the opportunities to develop their skills and knowledge and many take advantage of additional experiences which are supported by the staff. Pre-registration students told us the programme itself promotes the key values of nursing, including dignity, compassion and respect, and that these values are taken with them into the practice learning environments. Students clearly expressed that they are given feedback and

support to improve both academically and in practice placements and that they have good relationships with lecturers and mentors in order to do this.

Service users and carers

All the service users we met are confident about their role and their inclusion in the programme. They state that their opinions and ideas are valued and respected and they can see how these influence and sometimes lead programme developments. Users of learning disabilities services spoke extremely highly of their involvement with the university and the wide range of opportunities for engagement that they had experienced. TRAC members spoke very highly of the support provided by the academic team and of the emerging skills of the student nurses. TRAC had won an award for the support that they provided to the university student experience and this was highly valued and appreciated by the group.

Relevant issues from external quality assurance reports

Health Inspectorate Wales (HIW) identified concerns regarding standards of care in areas within the Abertawe Bro Morgannwg University Health Board (ABMUHB). The initial exception report was submitted to the NMC in June 2014 and the update provided in January 2015 (3).

USW continues to place student nurses for practice learning experiences in the ABMUHB. The majority of these placements are in Princess of Wales Hospital, Glanrhyd Hospital, and Maesteg Hospital.

The faculty is aware of a number of initiatives the health board are implementing and are working with the board to ensure that students are informed of the aspects relating to service improvement (3).

ABMUHB has introduced a number of measures post Andrews Report (2014) to improve client care. These include the introduction of a values and behaviour framework (3).

This year Princess of Wales Hospital has received over 2,400 positive reviews left by patients and relatives on the iWantGreatCare website - averaging a maximum five stars rating. Formal complaints about ABMUHB care between April 2014 and March 2015 were down by 240 compared with same period the year before, an 18 percent decrease (3).

To address the issues raised in the Andrews Report – Trusted to Care, the Health Board set up seven themed work streams: care standards, environment; learning, skills and knowledge, 24/7 services, medicines management; integrated quality and values and leadership (3).

This year, two unannounced visits by HIW to Princess of Wales Hospital resulted in positive reports with no significant issues found (3, 11).

Since the last exception report to the NMC, the faculty confirmed that no incidences have occurred whilst students were placed in ABMUHB that required concerns to be raised or a protection of vulnerable adults (POVA) investigation instigated (3).

The nature of the incidence within ABMUHB which subsequently resulted in the conviction of a small number of nursing staff was linked to record keeping and falsification of records. In addition, the Andrews Report specifically focussed on poor medicines management and issues relating to hydration (3).

The curriculum content in relation to record keeping and the specific areas of concern within the Andrews Report remain as detailed in the initial exception report to the NMC.

HIW have also visited a number of the areas which are used for placements for learning disabilities (LD) field students. Action plans are in place in Llanarth Court, Heatherwood Court and Rowan House (12-19).

With the exception of Rowan Court, these areas were visited during the monitoring event. Rowan Court was not visited, this was due to lack of time.

Follow up on recommendations from approval events within the last year

The pre-registration midwifery programme was approved in March 2015.

One recommendation: With regard to the neonatal examination (theory) module, clarify in the module specification the relationship between the theoretical and practical elements.

The university has addressed this. The relationship between the theory to practical elements has been agreed with the module manager, the lead midwife for education and with senior midwifery managers of the local health boards associated with the programme.

Specific issues to follow up from self-report

None identified

Findings against key risks

Key risk 1 – Resources

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

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

Risk indicator 1.1.1 - registrant teachers have experience / qualifications commensurate with role.

What we found before the event

The faculty supports the development of staff across each academic session which is reviewed on an annual basis. Staff identify their developmental and educational needs through the process of appraisal. The faculty personnel officer maintains an active record of all staff who have a professional qualification with the NMC, including those with registered teacher status, and verifies annual renewal of this status (1, 2).

What we found at the event

Pre-registration nursing - learning disability

There are six members of teaching staff with a current registration in learning disability nursing. The programme leader and four team members have a teaching qualification recorded with the NMC and the sixth is currently working towards this. It is a university requirement for all newly employed staff to obtain a teaching qualification in their first year. A member of the learning disability team is also one of two professors in learning disability nursing. The head of school also holds a registration in learning disability nursing. We can confirm that this information is maintained and monitored, with revalidation information also included (23-25).

Mentor preparation programme

The mentor preparation programme is a non-accredited programme. It is delivered by PFs in the trusts that are overseen by a named member of academic staff as a programme manager (PM).

The PM and all PFs hold a current registration and all have a teaching qualification recorded with the NMC (24, 107, 111).

Professional development is encouraged and supported by the dean and the head of school. All staff are allocated to a research group with an expectation that they will contribute to the research process and publication of findings. The dean is also keen for staff to maintain their currency and relevance in practice, leading by example. These two activities are seen as an opportunity to strengthen the connections between theory and practice (26).

Mechanisms are in place to support staff with the process of revalidation. These are led by an academic subject manager. An all Wales approach has been introduced enabling approved education institutions (AEIs) and practice partners to work together in implementing the process, with staff in the school specifically committed to supporting ABMUHB staff. Information sessions have been held in the school and monthly 'drop in' sessions are planned, to maintain the support and flow of information as the process rolls out. We met two members of staff who are preparing for revalidation and are very positive about the process and the support they are receiving. They also commented that the NMC template is very user friendly. Revalidation will be embedded in the annual appraisal process, promoting the process as an ongoing activity with evidence gathering taking place throughout the

three year cycle (27).

Our findings conclude that there are sufficient resources to deliver the programme.

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 mentor preparation programme is delivered in the three partner health boards by a team of PFs, four times per year. This can be increased if more mentors are required. Staff in the private sector are invited to attend, but separate programmes can be arranged if required (1, 3).

Ward managers/team leaders are responsible for allocating mentors, ensuring that they have been updated and act with due regard. The process is monitored by the programme leaders (PL), PFs and LLs. It is monitored through student evaluation of practice placement and during the audit process. Learning disability students placed in non NHS settings can also be allocated an associate mentor, for example special education teachers (2, 3).

If the number of available mentors or sign-off mentors is temporarily reduced in an area, the PFs and/or the practice learning environment manager (PLEM) informs either the placement staff, LL or associate head responsible for practice environment allocation and the number of students allocated to that area will be reduced if necessary (3).

Student mentors are supported by an experienced mentor (4).

What we found at the event

Pre-registration nursing – learning disability

We found that there are sufficient appropriately qualified nurse mentors, sign-off mentors and supervisors available to provide support and practice based assessment of skill and competence for all pre-registration learning disabilities students. This extends to all areas of the hub and spoke model of practice placements. All mentors act with due regard. Scrutiny of off duty demonstrates that at least 40 percent of a student's time is spent being supervised by a mentor. This was confirmed by the students we met. In the final placement year three students spend 40 percent of their time being supervised by a mentor and in addition at least one hour per week is spent as protected time with a sign-off mentor. Students record their time in practice in their practice assessment documentation which is checked by their mentor and personal tutor (66-67, 69-74, 78, 89-90, 93, 102-106, 110, 130-132).

The practice placement areas visited were consistently able to demonstrate through their educational audits that they have adequate numbers of mentors and sign-off

mentors to facilitate practice learning for the capacity of students. Succession planning was considered when planning mentor capacity (91-92, 94-97).

Feedback from one nursing student indicated that too many students had been using a placement area; this was noted in the education audit and action was taken to change the shift pattern of students and ensure adequate learning opportunities for all students on the ward (92, 107).

Mentor preparation programme

The decision to propose a nurse or midwife to undertake the mentorship programme is decided during the annual personal development review and is based on both service need via the educational audit and the nurse or midwife's personal development plan. (130).

There was no-one undertaking the mentor preparation programme during our visit. We met mentors who had recently completed the programme, who confirm that they were supported by a qualified mentor. Their line manager and unit team ensure that time is allocated to enable completion of the five days of work based activity embedded within the programme. The activity and support is recorded by the mentorship student in their enabling activities workbook. Student mentors are given opportunities to shadow an experienced mentor in working with a pre-registration student in order to gain experience of the role and discuss assessment opportunities and decisions (73, 100, 102, 116, 119, 126).

We conclude that there are sufficient resources in the practice setting to support student learning and achievement on the programme.

Outcome: Standard met

Comments:

There are sufficient, appropriately qualified staff in the school and the practice areas to teach, support and assess the students. Annual appraisal systems are used within all areas to identify areas for staff development which meet both organisational and professional requirements.

Areas for future monitoring:

Review the numbers of mentors as commissioned student numbers increase.

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

The university has a procedure in place to facilitate the admission and protection of students under 18 years of age (5).

Staff undertake training in equality and diversity with additional update sessions for those involved in the recruitment of students (1).

For all pre-registration nursing programmes the selection and admission criteria includes evidence of a good command of written and spoken English. International English language test score (IELTS) is required at level seven. Good health and good character checks are assessed during the selection and recruitment process (2).

The interview process includes face to face interviews and is supported by practice partners (2).

All students are required to confirm good health and good character with explicit details of this requirement provided in the programme documentation (2).

What we found at the event

Pre-registration nursing - learning disability

Principles for the admission of pre-registration nursing students have been developed as an all Wales initiative. These include requirements for occupational health clearance, disclosure and barring service (DBS) checks, academic attainment and good character. Interview criteria are also included. There is clear guidance for referees and a proforma to complete to confirm good character. In the university, the admissions process is managed by the enquiries and admissions unit who initiate the DBS checking process and the good health and good character requirements. The faculty has a DBS panel to adjudicate on any issues raised during the checking process. Membership includes academic staff from the faculty, staff from partner health boards and employers. An all Wales admissions group meets biannually to plan, monitor and evaluate the implementation of the admissions process. The university provides appropriate pre-interview training for the panel members which includes equality and diversity training and elements of values-based recruitment in order to protect the public through the appropriate selection and training of student nurses (28-30, 36, 81-82, 88).

All shortlisted applicants are required to attend for face to face interviews. Interviews are conducted by a lecturer who is accompanied by either a practice partner or a service user. The interviewers we met confirm that they have been prepared for the role, including equality and diversity training. Interview schedules confirm this arrangement. New interviewers are encouraged to shadow experienced interviewers as part of their preparation. A recent initiative to recruit more service users led to a

number of sixth form pupils from a local school taking advantage of the opportunity to shadow interviewers (31, 34-35).

Applicants are scored against prescribed criteria. Questions are very specific and a scoring system is also included (32).

The learning disability lecturers work with a group called the teaching, research and advisory committee (TRAC) to ensure that their service users are properly prepared and well supported. TRAC is formed of representatives from self-advocacy groups across South Wales. Interviewing students is a standing agenda item at their monthly meeting. An annual review of the interview process takes place which provides an opportunity to identify skills which need developing further, for example role plays to practice interview skills. During one of these reviews the TRAC group developed the current interview question schedule which has been adopted across all fields of the nursing programme and reflects a values based approach (33, 75-76).

Service users spoke very highly of their involvement with the interview process and it was evident that their involvement had been both positive and valuable to the selection process. TRAC group members are able to ask their own questions during the interviews, including questions such as "what's your favourite colour? Mine's lilac". This ensures that the service user felt valued as a part of the interview process and the university had a good opportunity to gauge the applicant's communication skills and behaviours when addressing individuals with learning disabilities (72, 76, 79).

Students demonstrate that they have been able to meet the criteria for competent and safe practice for progression through the programme. This is detailed and confirmed in each student's individual ongoing record of the achievement of practice competence. This comes under close scrutiny from learning disabilities academic staff and nurse mentors (65).

Mentor preparation programme

Applicants for this programme are nominated by their manager at their first annual appraisal. They must have been qualified for at least one year and have completed their preceptorship. Employers complete all required evidence regarding good health, good character and current DBS status. All student mentors entering the programme have undergone face-to-face, values based recruitment processes as part of their initial employment with the health board. The PF allocated to that area then interviews the nurse to ensure that they understand the commitment that they are undertaking and complete the mentorship pledge. In order to become a student mentor the nurse or midwife is not required to formally apply to the university, rather this process is undertaken on an informal basis with the PFs. The PFs also ensure that the supervisor for the student mentor is active on the mentor register (35, 37, 86, 100, 107, 109, 111).

One of the work based learning activities on this programme is an opportunity to join pre-registration interview panels. One mentor explained how this supports achievement of the mentorship domains by developing skills in decision making, assessment and leadership (109, 111, 116).

Our findings conclude there are robust processes in place to ensure suitable individuals enter and progress on the programmes.

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 processes are in place and are communicated to students and practice providers (6, 7).

What we found at the event

Clear guidance is provided for university departments on making students aware of their programme requirements. Clear guidance for practice partners is also included with the process clearly described. The faculty advisory fitness to practise committee (FAFtPC) meets regularly to consider referrals and advise and support practice partners if they determine a student should not be in practice. The faculty fitness to practise committee (FFtPC) receives referrals from FAFtPC . Membership includes members from other faculties and a member from the student's profession. The university's fitness to practise committee has a membership which includes the dean from the student's faculty, a member of teaching staff from the student's faculty, a teacher from another faculty and an external member from the student's profession (38-41).

Clear guidance is provided for students regarding their roles and responsibilities as a university student (42-47).

From 2014 students have been required to maintain their 'live' status on the DBS register and are responsible for paying the annual fee. This is checked annually by the admissions staff. If a change in their status is declared, a new check is required (35).

We found that all academic staff and practice mentors are aware of procedures to identify and address issues of poor performance by learning disabilities students in both academic and practice based settings (66-74, 101-107).

Learning disabilities students report that they are well supported and can rely on the help of practice mentors, LLs and PFs if they are experiencing difficulties in interpreting and contextualising learning outcomes and benchmarks in the practice setting (75).

We conclude there are comprehensive systems in place to monitor and address poor performance.

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

Examples of fitness to practise procedures being implemented by practice partners are included in the annual self-assessment report (3).

What we found at the event

Practice partners are familiar with the fitness to practise process and make referrals to the school as necessary. Guidelines for them to suspend students are included in the documentation and there are examples of students being suspended for poor behaviour in practice.

The FAFtPC has regular planned meetings and also calls ad hoc meetings as necessary. The frequency of meetings, approximately monthly, ensures that referrals are dealt with promptly. The group is chaired by an associate head of school (47).

Investigations are thorough and clearly documented. Reasons for referral include forgery of mentor signatures, inappropriate behaviour in placements and using a swipe card for a friend. Outcomes include referral to FFtPC, discontinuation from the programme, suspension from the programme and written warnings (47-48).

Students are supported through fitness to practise proceedings by their personal teacher and a student support officer who is employed by the school (49).

Mentors are aware of the programme provider's policies and procedures for addressing poor performance in practice. They are confident and clear about how and when to gain support from LLs and PFs. PFs and LLs are highly visible in the placement areas, including private, voluntary and independent (PVI) placement providers. We heard from mentors that this enabled them to feel comfortable when raising concerns about a student, because they knew appropriate support would be provided both to themselves and the student. Mentors are positive about the all Wales practice assessment document. They report that it encourages regular review and feedback to students which aids gaining early and effective support for students failing to meet practice competencies (70-74, 100, 102, 104-105, 107, 109, 118).

We found two examples in the 2015/16 academic session of learning disabilities students struggling to achieve learning outcomes in practice. We found that good communication between the practice mentor, the LL and PF results in extra support via the development and implementation of a student centred action plan. Learning objectives are formulated and appropriate learning opportunities provided to meet the objectives. This is then evaluated at a planned follow up meeting (69-70).

Students evaluate mentor performance as part of the practice evaluation process. These are followed up by the PFs. Concerns regarding performance as a mentor may be highlighted through this process or through the raising concerns policy. The PFs are alerted of concerns raised by the LL or PL and follow up using the health boards' policies and procedures (108, 112, 115, 123-124).

We conclude practice placement providers understand and implement processes to

address poor performance in students.

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

Processes for APL are in place. Guidance is clear and applicants are informed of the process (2, 4).

What we found at the event

The APL process is well established in the school (50). Applications are considered by the admissions tutor alongside the programme leader and the field lead. There are clear criteria for mapping the evidence.

The development of a certificate in higher education has provided a route of entry to the pre-registration nursing programme for health care support workers. The content of the certificate has been mapped against year one of the pre-registration nursing programme enabling APL criteria to be met. The examples seen demonstrated 30 admissions to the adult field, four to child, two to learning disability and five to mental health (33, 51).

We found that the learning disabilities programme team have a good understanding of APL regulations, its application and restrictions. The learning disabilities programme team have a designated admissions tutor who monitors the use of APL on student entry to the programme (72).

The university accepts 100 percent claims for APL on the mentorship programme in line with NMC requirements outlined within the standards for SLAiP. Guidance and one-to-one support to undertake this process is provided on behalf of the university by the practice facilitators (86, 88, 111).

Our findings conclude there are robust procedures in place to accredit prior learning against NMC outcomes.

Outcome: Standard met

Comments:

The school has rigorous procedures in place to ensure that students entering their programmes are suitable candidates to enter the profession and the NMC register. Practice partners and service users are an integral part of this process. Fitness to practise procedures are understood and implemented by academic staff and practice partners, with the emphasis on student support.

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

Partnership working is well established with practice partners and other universities. This has been particularly useful in managing student access to practice placements. The school works collaboratively with both Cardiff and Swansea universities who share the placement areas, ensuring equitable allocation and maximising the utilisation of all areas (3).

The involvement of the commissioners and the Welsh government, has led to the development and agreement of a set of all Wales 'principles for student placements'. The aim of these principles is to ensure all students have a range of practice learning experiences and these are used in a fair and equitable way. It also aims to support that every area, where healthcare is delivered, should accommodate students (3).

The commissioners have also held partnership meetings involving both education and practice providers to work collaboratively in developing an all Wales service level agreement which is in final draft stages (3).

The school has very close collaborative working relationships with the placement providers and this is enhanced by the joint appointment of seven PFs across three health boards. The contracts for the PFs are held by the health boards while their salaries are paid by the university (3).

A number of regular meetings enhance the opportunities for partnership working (1, 3).

If a practice learning environment is deemed unsuitable by either the faculty or the practice environment provider or by any other external intelligence means, then the students would be removed from the area, given appropriate support depending on

the reason for removal and re-placed into another suitable practice learning experience. Re-auditing of the practice learning environments from which students had been removed would be undertaken prior to any planned return of students (1).

What we found at the event

We found that partnership working is strong and energetic at all levels of the organisational structures. The dean acknowledges that relationships are long standing and well established while the commissioners and senior nurses from the health boards state that the partnership working is 'second to none'. The commissioners' confidence in the programmes delivered by USW is reflected in increased student numbers for September 2016. The commissions for the LD field have increased from 30 to 43. A comment that we heard repeated frequently is that 'being in Wales is different', referring to the stability of the workforce in both education and practice. Pride in their work is seen as a key driver for the success of the partnership working. We found in all placement providers that an agreement was in place to ensure the practice placement area meets the NMC requirements for practice learning (26, 53, 86, 88, 91-92, 94-97).

Strategically, school staff engage regularly with their practice partners. For example the head of school meets at least four times a year with the director of nursing in each of the partner health boards and the deputy vice chancellor meets annually with the commissioners. Lecturers attend various meetings and committees in all of the health boards, for example the senior nurse meetings and the education and development forum meetings. Practice staff are highly visible in the school for example through a joint meeting four times a year chaired by the associate head of school responsible for practice learning environments. This is attended by all key educational and practice staff. PFs have an office in the school allocated specifically for their use (1, 3, 26, 33, 52-53).

This level of partnership working enables the strategic leads for all AEIs and the health boards to share planning for service redesign and increasing capacity, ensuring that all areas are receiving students if they are deemed suitable by audit and ongoing evaluations. Work is continuing with the partner health boards and PFs to open up new areas for student placements. The associate head overseeing practice learning continues to work with the academic managers to identify opportunities for placement learning in the private sector. The increase in commissioned student numbers has increased the urgency of this work so a practice innovations officer (PIO) has been appointed by the school with a remit to identify and make first contact with new placement areas. A placement innovations group has been established which is chaired by an associate head of school and attended by the PFs. The LLs are also working closely with the PIO in the inspection of potential new areas, and the auditing and preparation if they are suitable (1, 3, 26, 33, 53-54).

In addition, a number of all Wales initiatives have increased the level of partnership working across the country. A pan Wales education audit tool is used by all AEIs and health boards across Wales, as is a pan Wales practice assessment document (PAD). The LLs are known within the practice areas and undertake the biennial

educational audits with the ward/department lead. The PFs are highly visible in practice and central to following up action points from audits. All education audits reviewed were in date (91-92, 94-97, 124, 125).

The majority of mentors are alumni of the USW and value their ongoing links with the university. Where concerns have been raised in practice learning environments there is evidence of appropriate action being undertaken to protect the public and maintain the quality of the student learning experience (92, 96). The PFs are well informed of external reviews being undertaken in their practice learning areas and action plans are in place and monitored following adverse clinical governance reports being issued in these areas to ensure that students are well supported and that public protection remains the highest priority (92, 96, 102-103, 109, 113, 118, 124-125).

The allocation of student placements is undertaken using the 'ARC intranet' placement allocation software package and is overseen by the associate head responsible for practice learning and the relevant PL. Practice areas are allocated students based on the information held in the audit document on the ARC system. As placement office staff do not have direct access to the mentor register they do not have current information. The PF and the LL work with the practice managers to resolve the issues and keep the placement office informed but this is not a streamlined process. The associate head of school is in the process of reviewing their allocations software, acknowledging that it will not be fit for purpose as student numbers increase and that a more comprehensive package will be required (3, 55-56).

The PFs have a strong presence within in the practice areas and also have Monday to Friday office hour cover for mentors or practice managers to contact them. This enables a speedy resolution to any immediate problems or any unexpected changes to the number of available mentors etc. Should this arise, the PFs are able to identify an alternate placement area and this is communicated immediately to the university and the placement team. The PFs have access within the health boards to the student's allocation programme via a secure electronic database (3, 55-56). The PFs meet regularly to discuss and develop practice learning and have strong working relationships with the LLs and associate head of school for practice learning. The PFs work closely with the placement leads in the placements office and respond rapidly to placement concerns related to capacity or quality of placement experience (107, 111).

PFs meet monthly with the academic manager who line manages them to discuss evaluations, mentorship and practice learning environments (35).

We found communication and collaboration between the USW, Cardiff University and Swansea University is strong. LLs, PFs and educational leads report that the all Wales approach to educational audit, PAD and principles of practice learning strengthen the partnership (111-113).

In practice we met with mental health nursing students from the universities of Swansea, Cardiff and USW working together with the learning disability students, and keen to support each other (114).

Pre-registration nursing – learning disability

We found that educational audits are complete and suitably detailed. Eight audit documents were inspected across the range of statutory, independent and voluntary sector placement providers. All were up to date and audits are within the stated two year time frame. Action plans resulting from audits are followed up and completed within the stated timeframe (78).

We found an example of when a concern was raised following an inspection by HIW at a learning disabilities service in which students were on placement. The students were removed from the placement area immediately and found suitable alternative placements. Students were only allowed back into this practice area when HIW reported that the service has responded to the concern, that the concern had been addressed and an educational re-audit had been carried out (73).

Mentor preparation programme

Mentors, sign-off mentors and student mentors are clear about the support available from the programme provider during placement and they speak warmly of the strong relationship between practice and the university. The majority of mentors are alumni of the USW and value their ongoing links with the university. This is evidenced in mentors' enthusiastic engagement in the annual mentor conference held by the university (102-103, 109, 113, 118).

We conclude there is strong and effective partnership working.

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

What we found before the event

Service users, carers and practice placement staff are actively involved in the delivery of the programme. This includes involvement in formal teaching activities, participation in simulated activities and using their experiences and 'stories' to enhance the students' knowledge and understanding (8).

The university has been commended for their commitment to involving users and carers in the development and delivery of the programme (2).

Practice partners are also keen to enhance the involvement of service users and carers. The health board is using the patient experience feedback software Snap 11 which is being used in all hospitals and which will be rolled out to mental health and learning disability services in the next few months, as well as testing the system in GP practices, care homes and community nursing services (3).

The pre-registration nursing programme has a 40 credit generic module each year which focusses on all client groups. In year two all students have specific study days focussing on the different client groups. For example, the students have a workshop for all nursing students for all fields of practice which is run by service users, carers and relatives. The workshop focusses on issues related to people with learning disabilities particularly when in receipt of healthcare. The workshop includes a talk by

the relatives of a person with learning disabilities who received poor care in secondary healthcare. This workshop evaluates very positively but had quite a profound effect on the students in terms of what can happen when the needs of service users and carers are not met (3).

Service user and carer involvement in the mentor preparation programme is not clear. When the programme was originally approved the programme team agreed to consider how this could be included in the learning resources and it was recommended that it may be appropriate to enlist the help of service users and carers (4).

What we found at the event

Pre-registration nursing – learning disability

We found that the involvement of service users and carers in the learning disabilities nursing programme is seen as crucial in enabling the development of professionals who are responsive to individual needs and the personalisation agenda. The service users we met are confident and articulate regarding their role in all aspects of the programme. Service users with learning disabilities are effectively engaged in teaching, including the delivery of the curriculum in areas such as citizenship and communication skills (76, 99).

There is a well-established service users and carers group who have contributed to the development and delivery of the curriculum, including student selection at the initial interview stage (see section 2.1.1). The TRAC committee, which is made up of men and women who have learning disabilities and their supporters, give advice on teaching and research about people with learning disabilities. This has had a positive impact on learning disabilities students' learning. It promotes a people first philosophy and assists students in their preparation for practice based learning. Service users provide feedback on student performance in practice using a standard document and this forms part of the evidence for the ongoing record of achievement of practice competence. This document was developed by TRAC and is used across all fields (72, 76-77).

We found that students are well prepared for their placements in secure environments and anxieties that they have are addressed in the classroom before embarking on the placement. Practitioners from forensic and secure environment services come into the university during student theory blocks to conduct preparation workshops before going into practice placements in these secure environments (73, 75).

The TRAC members expressed a list of personal qualities that they felt were essential for student nurses to have and when asked if they felt that the students at USW would make good nurses one member responded "most of them will. But, some of them will struggle; they don't know how to talk to me". A second member added, "he doesn't like it if they don't make eye contact and I don't like it if they don't laugh with me at things that are funny" (76).

Mentor preparation programme

We found that mentors and sign-off mentors value the service user voice in their assessment of students. They told us that this is discussed within the current mentorship programme and at annual update. The majority of mentors speak of gaining informal feedback from service users and carers, and are aware of the service user questionnaire (100, 105, 109, 118-119).

Mentors and students are aware of the importance of introducing themselves to service users, acknowledging that service users may refuse care delivered by a student. A mentor was able to give a clear example of a service user who had requested not to be visited by a student. A student reported requesting not to work with a service user whom she knew from her school days. In both cases the service user's needs and wishes are seen as paramount (101, 104).

Our findings conclude there is comprehensive involvement of service users and carers and practitioners in all aspects of the programme.

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

What we found before the event

Systems are in place to ensure that students are supported whilst in practice placement settings. The personal tutor, LLs, mentors, PFs, student support officer, advice centre staff, student services, disability services and placement staff are involved in the support network. Support can be accessed either in person or online (2-3).

The role of the LL is clearly defined, with a requirement that an appropriate pattern of visits/contacts is agreed (9).

What we found at the event

We found that the provision of student support is a central component of the programme. Commissioners commented on the positive impact that this provision has had on attrition rates, which are now below the national average. The employment of a dedicated student support officer provides an additional layer of support for both students and staff (26, 33, 49, 53).

The system of PFs and LLs operated by the university is well coordinated and the team work well together to ensure the consistent quality of practice learning (86, 88).

The system effectively and efficiently ensures that there is a visible presence of academic staff and PFs in clinical areas and that all mentors and students from the university are provided with the same high level of support during their practice learning experiences (70-71, 73-74, 100, 102, 104-105, 107).

Pre-registration nursing – learning disability

Students feel well supported in practice. All the students and mentors that we met were able to identify and name the LL. They are clear about how to contact LLs and personal tutors. Students report that lecturers respond promptly to emails and telephone messages. A student, who had transferred onto the nursing programme from a traditional undergraduate degree, was very positive about the level of support received. There is good understanding of the expected role of the LL (66-67, 69-75, 78, 83, 106, 110, 117).

Mentorship preparation programme

Mentors who have completed the current programme report that they received support from the PFs and LLs to complete the portfolio and to access the five days of work based activities (100, 116, 119).

We conclude that students are well supported by academic staff in practice placements.

Risk indicator 3.3.1 - evidence that mentors, sign-off mentors and practice teachers are properly prepared for their role in assessing practice

What we found before the event

Mentors are supported in their role by the PFs, who also provide mentorship training and mentor updates. The LL is also involved in mentor updating. The identification of specific practice learning outcomes in different practice areas is discussed during these sessions. An annual mentorship conference is also used as an opportunity to update as well as being an opportunity to share best practice. The health boards also have intranet and internet pages with current news items, information and updates relating to mentorship and the student experience. Mentors are confident of the skills they develop in relation to supporting learning and assessment and they felt that they were able to fail students when it was appropriate. Mentors feel well supported in their role (1-4).

The mentor preparation programme incorporates a route leading to sign-off mentor status for all midwifery mentors. The route is also available for nurses who require sign-off status and who will formally assess competency in the final practice assessment for student nurses. The programme places significant emphasis on the criteria for the sign- off mentor. Each mentor has an opportunity to use a mentor resource development profile where they record their mentorship activity from initial training and includes a section for annual update and triennial review and a record of sign-off development if applicable (2-4).

What we found at the event

Pre-registration nursing – learning disability

We found that mentors meet the mentorship criteria consistent with NMC standards.

All are current with regard to updating and act with due regard. Mentors have a good relationship with the school and there is good communication between academic staff, practice mentors and PFs (66-67, 69-74, 78).

Nurse mentors and PFs have a good grasp of the legislative reforms and key changes to policy that will impact upon future roles, responsibilities and tasks of learning disabilities nursing (66-67, 69-74, 78).

New mentors who had recently undertaken the mentorship programme at USW recalled how they were given opportunities to shadow an experienced mentor as a part of their preparation for the role and that they had completed numerous structured learning activities to prepare them for mentorship during their programme (73, 100).

We found that mentors and sign-off mentors from the statutory, independent and voluntary sectors are well prepared for their role. There is a good understanding of the ways practice assessment criteria can be interpreted and contextualised and the regulations related to student progression (66-67, 69-74, 78).

Managers in practice placement areas are confident that mentors and sign-off mentors are consistent in upholding the standards required for safe practice (73, 100, 107). Students confirmed that mentors provide clear feedback regarding areas that they need to improve upon before a learning outcome is achieved and that their mentors do not sign-off any element until they are confidently able to demonstrate the skill or competence in practice (70-71, 73-74).

Students described how feedback from spoke placements is communicated to the hub mentor by the use of a short placement feedback form, and that they were also given opportunities for inter-professional learning through the hub and spoke placement system (70-71, 73-74).

Students report being well supported by their mentors. All mentors are able to give good examples of the support and guidance they give to students as well as the judgements they make on competence and fitness to practise. Mentors have good understanding of fitness to practise policy and regulations. Mentors are enthusiastic and have good understanding of their role in preparing students for registered status, including being able to provide rationale for supporting students from other fields of practice (66-67, 69, 70-74, 78).

Mentorship preparation programme

The mentorship programme is taught in practice by the PFs. They have developed two workbooks to support understanding facilitating learning and assessment in practice and to support five days of work based learning. Mentors who have completed the programme are positive about the mode of delivery, the support they received and how well prepared for practice they feel (100, 116, 118, 126).

To achieve sign-off mentor status, mentors describe a clear process of study days and then support with a final placement student. The PFs organise and oversee sign-off development. Activity is recorded in a mentor development record. This record may also be used to support reflection on mentoring and acts as a record for triennial review. (109).

We are assured mentors and sign-off mentors are properly prepared for their role.

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

Mentors have access to continuing professional development. Annual updates and a mentor conference support the mentor's role. Triennial review is fully implemented and provides a mechanism for mentors to develop their mentorship role. (4)

What we found at the event

We found that ward managers, educational leads and mentors have a clear understanding of the need for annual mentorship updates (57-58, 104-105, 107-109, 118).

Annual updates are conducted by the PFs as either a set session or a bespoke group meeting in practice. The PFs and mentors value the opportunity to discuss mentoring and the challenges of assessing a student in practice. A sign-off mentor reported that 'you feel inspired after an update' (58, 107, 111, 118, 128).

All mentors, sign-off mentors and managers we met during the practice placement visits clearly stated that they were able to meet their requirements for annual updating in line with NMC standards (70-71, 73-74, 100, 102, 104-105, 107).

Triennial review is embedded within the personal development review and recorded on the mentor database by the PFs. Mentor and sign-off mentor compliance with triennial review is discussed at annual updates and during educational audits. A proforma has been developed to support the recording of mentor activity and updates to support triennial review (57-58, 107, 111).

Mentors from the independent sector have equal access to mentor preparation and updating when compared to those working in the statutory sector (66-67, 69-74, 78).

Our findings conclude that mentors/sign-off mentors are supported to attend annual updates to meet the requirements for triennial review.

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

What we found before the event

The practice placement providers maintain a mentor register database which provides details of staff that have completed the mentorship preparation programme and are compliant with annual updates and triennial review. One of the health boards uses a traffic light system and automatically moves anyone who goes RED, by failing to

update or provide evidence of triennial review before the due date into the removed section. The divisional lead nurse, senior nurse and clinical manager are updated weekly on staff who are in this category and informed that they must not support a student until they have demonstrated compliance to the NMC SLAiP Standards. The list of compliant mentors is sent to them on a monthly basis (1-3).

The strategic process of mentorship is overseen by the academic manager responsible for the PFs. Compliance with the SLAiP standards and currency of the mentor databases are confirmed at the monthly meetings held with these staff (3).

The availability of mentors, sign-off mentors and practice teachers is confirmed as part of the audit process and monitored by use of the all Wales evaluation of practice learning environments tool (3).

If for any reason the number of available mentors, sign-off mentors or practice teachers temporarily reduced in a particular area, the PFs and/or the PLEM informs either the placement staff, LL or the associate head of school responsible for practice environment allocation, and the number of students allocated to that area would be reduced if necessary (3).

What we found at the event

We found that the PFs are responsible for the maintenance of the mentor register database within the health boards. They are supported by their line manager in the placement provider area and by the associate head with responsibility for practice learning in the university. The databases follow a slightly different format in each area. However, the information recorded is consistent. The databases include details of the mentor's preparation programme, date of their last update and date for triennial review (66-67, 69-74, 78, 98, 107, 111, 120-121).

We were able to randomly sample mentor/student activity from the ward/department off duty and from the students' PAD. The information sampled was accurate with the mentor database (120-121, 131-132).

The university holds a register for the PVI sector, which is updated by the LLs with information from the PFs, link mentors and service managers (73-74, 88).

We conclude mentor records are accurate and up to date.

Outcome: Standard met

Comments:

Partnership working is evident and strong in all elements of programme delivery for both programmes that we monitored. Mentors are enthusiastic about their role, valuing the opportunity to become a mentor.

Areas for future monitoring:

None identified

Findings against key risks

Key risk 4 - Fitness for Practice

4.1   Approved programmes fail to address all required learning outcomes in accordance with NMC standards

4.2   Audited practice placements fail to address all required practice learning outcomes in accordance with NMC standards

Risk indicator 4.1.1 – documentary evidence to support students' achievement of all NMC learning outcomes, competencies and proficiencies at progression points and or entry to the register and for all programmes that the NMC sets standards for

What we found before the event

Pre-registration nursing – learning disability

Shared learning is a key feature of the pre-registration nursing programme. Examples of this include issues of disability and transitions in care which are studied together by child field and learning disability field students. Mental health students learn about biopsychosocial aspects of care with learning disability students. Students from all fields come together to undertake learning in the safeguarding of vulnerable groups. The students undertake learning units and the unit relating to safeguarding contains a specific section on inter-professional safeguarding (3).

Inter-professional learning is also embedded throughout generic modules in each year of the pre-registration nursing programme. Students from all fields of practice work together in both classroom and clinical skills/simulation based environments (3).

NMC competencies are mapped against the programme outcomes and the module specifications provide evidence of how module delivery provides a learning disabilities context both for theory and practice. The generic and field competencies are mapped within the theory and practice "all Wales" reference documents. The integration of competencies with the essential skills clusters (ESCs) and module outcomes, including the process through which students will provide evidence of achievement of these, is clearly articulated (2).

Mentor preparation programme

Distance learning materials and enabling activities are a feature of the mentor preparation programme (4).

What we found at the event

Pre-registration nursing - learning disability

We found that students are enthusiastic and positive about the programme they are undertaking. They report that they are well prepared for their practice placement experiences and that the theoretical part of the pre-registration programme reflects contemporary learning disabilities health and social care practice. They understand the rationale for the provision of experiences outside of the learning disabilities field and recognise the transferability and relevance to their own field of learning disabilities (72, 75).

We found that through engagement with the clinical simulation environment the students are better prepared for meeting the holistic care needs of people with learning disabilities. The activities provide insights into the service user journey when they engaging in mainstream clinical services aimed providing physical care. Students are also well prepared for their adult field alternative placement through engagement with the clinical simulation centre (72, 75).

Teaching staff are creative in their approach, looking to create a dynamic learning environment. For example, additional funding has been obtained which will be used to develop a community area in the simulation suite which will be used by all students. Another development is the hydrominerva suite, a computerised system which relays scenarios and can change outcomes depending on the decisions made by the students. It is anticipated that these developments will provide an opportunity to further develop inter-professional working (3, 26, 33).

Students are able to link theory to practice which is enhanced by the teaching role adopted by service users during their delivery of the programme in classroom settings. There is effective use of case study and problem solving scenario work that further helps students to establish theory and practice links. Learning disabilities students are well prepared for their studies in other fields of nursing (child, mental health and adult) and are able to understand the relevance to their own field of learning disabilities (72, 75).

TRAC members enjoy participating in the assessment of learning disability student nurses in the clinical simulation suites, including wearing 'Google glasses' that video records their perspective. Students are later able to review the video to promote reflection on the client experience (72, 76, 87).

There are a variety of assessments used to test the students' skills and knowledge throughout the programmes, including controlled conditions exams and objective structured clinical examinations (OSCEs). Students with a disability are supported with reasonable adjustments that offer them alternative and supported assessment opportunities. The uses of formative assessments help students develop skills on modules (2).

Mentor preparation programme

The materials developed and used by the PFs in the two taught days of the programme, are clear and explanatory. The workbooks which support the students' learning are also clear and easy to use and were commended at the approval event. These resources are used by PFs in all three health boards (4, 126).

Students undertaking the mentorship programme are complimentary about the support received from the PFs and their practice area during the programme (100,

109, 116, 119).

The students are able to describe the process of completing the programme, for example submitting and discussing their mentor workbooks. They describe receiving a certificate for completing the programme and entry onto the mentor register database (111, 116, 119).

PFs inform the PM of the successful completion of the programme, but this is an informal process.

There was no evidence of marking criteria, formal moderation of marking or external scrutiny. The USW was unable to produce documentary evidence of their process for confirming achievement of the mentorship programme (59-61). This is a significant weakness and does not meet the NMC standard and therefore action is required.

Risk indicator 4.2.1 – documentary evidence to support students' achievement of all NMC practice learning outcomes, competencies and proficiencies at progression points and upon entry to the register and for all programmes that the NMC sets standards for

What we found before the event

Pre-registration nursing - learning disability

All students on the pre-registration nursing programme work with a range of health and social care professionals whilst undertaking practice learning opportunities. For example the LD students have a substantive practice learning experience with the community support teams which involve multi-professional and multi-agency working. They also have experiences in special schools working alongside educational staff, special education teachers and special education support workers (3).

The all Wales practice assessment strategy for pre-registration nursing programmes leading to the award of Bachelor of Nursing (Hons) prescribes the process by which student performance is measured against generic and field standards for competence (2-3).

The students have discussions with their personal tutor prior to undertaking practice learning experiences to identify which practice learning outcomes may be achievable in specific placement areas (3).

All students experience a range of practice learning experiences which provide opportunities to achieve the specific practice learning outcomes (2,3).

Each student has an actual practice learning experience with all client groups which evaluates well. Learning disability students have a placement in an accident and emergency department which also provides an opportunity for practice staff to develop new skills to work with this client group (3).

In year two, all students experience a simulated clinical workshop in which they are required to manage a group of clients in a secondary healthcare setting. One of the clients has a learning disability and has been admitted for a chest infection. The

students are required to assess the client's inhaler technique and provide appropriate education. The session takes place in the simulation suite and the client is, in the role of an actor, an actual service user with a learning disability (3).

The students also have a simulated normal birth scenario using a medium fidelity human patient simulator which can simulate normal and abnormal labour. The learning disability field of practice students in September 2012 cohort commented very positively about this as they acknowledged they can have a situation whereby a client goes into labour and had not been aware that they were expecting a baby (3).

The personal tutor is also required to monitor and confirm the student is of good character during and on completion of the professional course and seek advice and refer any student who raises concern in relation to good health or good character to the appropriate programme leader and/or the associate head of school responsible for student experience (20).

Mentor preparation programme

An enabling activities learning resource book is provided for student mentors to negotiate with their supervising mentor for the five days that are classified as unprotected learning and which are facilitated by the student working with an experienced mentor. The mentor's supervisor or manager will ensure that five days of protected mentor programme time will be available to the student mentor to achieve the requirements of the programme. Interviews with mentor students confirmed that these arrangements are put in place and that they are able to have the protected learning days (4).

Assessment of practice documentation has been developed, which confirms that the mentor students have achieved the learning outcomes and evidences that the student has undertaken the specified time requirements (4).

Mentors report that they are able to have allocated learning time for mentor activity and that five days protected learning is provided for student mentors (4).

What we found at the event

Pre-registration nursing – learning disability

Commissioners are highly satisfied with the skills and competence of students completing the programme, and confirm that they are keen for the newly qualified nurses to remain in Wales. Practice partners are actively recruiting from the cohort due to complete in September 2016, with 98 percent of the cohort having been offered a substantive post (26, 33, 74, 107).

A number of students have been nominated for national awards, recognising their additional skills and qualities. For example, one learning disability student was runner up in the Royal College of Nursing (RCN) in Wales 'nurse of the year' awards. Two students have been nominated for a 'rising star' award (33, 62).

We found that the practice environment provides adequate learning opportunities for learning disabilities nursing students to achieve learning outcomes detailed in the

assessment of the clinical practice document. All students have experiences with service users across the life span, engaging with children, adults and older adults (65-67, 69-75, 77-78).

Students and their mentors identify and negotiate additional learning opportunities and this forms part of the hub and spoke model of practice placement. Generic and field specific practice learning outcomes are understood by mentors and are able to relate these to the student experience. Excellent channels of communication influence and support hub and spoke placements. There is good communication between hub practice mentors and spoke supervisors regarding student performance and any issues of concern (66- 67, 69-74, 78).

Year three students have opportunities to demonstrate their competence in leadership and management by carrying a small caseload under supervision from an appropriately qualified mentor. They take a leading role in multi-disciplinary meetings and care programme approach meetings. Students receive supportive and directional feedback from mentors following these experiences (65, 75, 77).

Year three students also engage in supervised lone working. Lone working is risk assessed and the lone working policy is strictly adhered to (66-67, 75).

Students have opportunities to work with professionals other than nurses. There are reports and testimonials from supervisors outside of the nursing field and these are used by students to add to their evidence of competence in practice (65, 75, 77).

Students are also encouraged to be involved in external activities which will enhance their learning. For example, in 2015, nine students took part in the Cavell Trust charity event. Part of the learning process was fundraising to fund themselves. Other travellers in the group gave positive feedback regarding their caring attitude. The head of school is keen to develop a directory of additional opportunities (26).

The achievement of the specific practice learning outcomes is documented in the student's ongoing record of achievement of practice competence, which also details the students' professional performance and progress during practice learning experiences (3).

We found that mentors and students are positive about the all Wales PAD and report that it supports documentation of students' learning in practice. An experienced sign-off mentor reported that they could see a difference in pre–registration students with the current NMC standards. They also noted students are better prepared for practice, know what they wish to achieve in practice, research a placement area and are keen to visit and discuss the placement before the placement start date (118).

The personal tutor must ensure the student has met all of the NMC requirements for entry to that part of the register and in particular the completion of practice elements and achievement of competencies/practice outcomes. This will also include the completion of a specific number of hours in theory and in practice (20).

Mentor preparation programme

We found that the mentorship programme includes five days of work based learning and two study days with three further days to complete the mentorship workbook. The programme is completed within three months. Mentors who have undertaken this

programme feel supported in carrying out the work based activities and record their learning in an enabling activities workbook (107, 111, 116, 119, 126, 133).

The mentorship programme is taught and overseen by the PFs who provide certificates of completion for the participants who submit their portfolio.

The PFs are unable to describe or give documentary evidence regarding moderation or verification by the USW of students' assessed work (59, 107, 111). This is a significant weakness in the system, which requires action in order to meet the standard required.

<div style="background-color:red; text-align:center;">Outcome: Standard not met</div>

Comments:

Pre-registration nursing – learning disability

The university and their practice partners provide a range of learning opportunities for the students. Teaching methods are creative and dynamic, and students are encouraged to engage in a range of activities. On completion of the programme they are competent and confident in their skills. The health boards are keen to employ them.

Mentor preparation programme

The teaching materials used to support this programme demonstrate that NMC standards for the programme are met. Feedback regarding the quality of the mentors was consistently positive. However, the university needs to address their processes for assuring the rigour of moderation and verification of achievement of programme learning outcomes leading to mentor/sign-off mentor status recognised by the NMC.

28 September 2016: Follow up Documentary Evidence from the University of South Wales. Standard now met

A review of the evidence to support completion of the AEI action plan was completed on 28 September 2016.

The PM meets with the PFs monthly. The meetings are now minuted, with the progress of students on the mentor preparation programme a standing agenda item. The standardisation of marking and moderating procedures has been agreed. Completion of the programme is confirmed by the PM and the chair of the award board.

Evidence to support the standard is met includes:

- USW, monitoring review action plan update, 30 June 2016
- USW, school of care sciences, mentor preparation programme, evidence of completion, 01 July 2016
- USW, faculty of life science and education, notes of PF group meeting with PM, 15 April 2016, 20 May 2016, 25 July 2016
- USW, faculty of life science and education, PEQAC meeting minutes, 29 April 2016, 10 June 2016, 15 July 2016

Areas for future monitoring:

Review the marking and moderation processes by the PFs in the health boards.

Review the moderation and verification processes within the university.

Findings against key risks

Key risk 5 - Quality Assurance

5.1   Programme providers' internal QA systems fail to provide assurance against NMC standards

Risk indicator 5.1.1 - student feedback and evaluation / programme evaluation and improvement systems address weakness and enhance delivery

What we found before the event

Following completion of the practice learning experiences (PLEs), evaluation sessions are timetabled and the students are allocated sessions in relation to the health board or area in which they have just had the PLE. The actual session lasts an hour and is facilitated by PFs for the health board/area. PFs undertake both a verbal evaluation of the experience and the students also complete the all Wales evaluation of PLE form (3).

The quality of pre-registration nursing programmes is also monitored via the national student survey, the results of which are consistently positive indicating high levels of student support and the quality of the student experience. Action plans are used to secure improvements in any necessary areas (3).

Programme leaders submit an annual course board report and action plan to which practice partners also contribute. They are expected to attend the collaborative partner course board (21).

EEs are appointed to each programme. They are engaged in assessing the theoretical element of the programme in accordance with university regulations. They are invited to attend an annual EE event when they meet with students, mentors and practice facilitators. They are also invited to attend any presentations or OSCEs which are summatively assessed and to examine the assessment of students practice documentation. The EEs are involved in the conferment of progression and completion of the programme (1).

Pre-registration nursing - learning disability

Boards of examiners receive results from all theory and practice modules. This is clearly articulated within the theory, practice assessment and student documentation (2).

EEs are appointed to fields of practice and meet with students and visit practice areas (2).

Mentor preparation programme

The faculty have confirmed that an appropriate EE has been appointed for the programme provision (4).

What we found at the event

Pre-registration nursing – learning disability

We found that students rate the quality of their programme highly. They engage with the evaluation of both theory and practice, confirming the process described above (75).

We found that learning disabilities nursing students engage with the all Wales practice learning experience evaluation tool, find it useful for purposes of feedback and provides good structure to the feedback and reporting system. Evaluations are completed in hard copy. They are reviewed by the PFs and any concerns are referred to the programme leader/associate head of school with the lead for PLEs, LL, senior nurse for education in the health board and PLE as appropriate. The level of action and cascading of information depends on the nature of the issue/concern. Decisions for reporting are made by the PL/associate head of school with the lead for PLEs (3, 63, 72, 80, 122-123).

Post practice placement forums also take place, when learning disabilities nursing students return to the university, in order to discuss and feedback on their learning experiences in practice settings (75).

Mentors confirm that they receive feedback from the learning disabilities programme team following evaluation by students of their practice based experiences. This takes place via the PF and LL (66-67, 69-71, 73-74).

Learning disabilities nursing students confirm that they engage in module evaluations and newly qualified practitioners report that they engage with the student end of programme evaluation at the end of their programme (80).

There are examples given of changes made to the programme and modules following evaluation (72, 75).

Student progression and completion is determined at the progression and completion award boards. The student must have met all academic and clinical requirements as detailed in the university progression regulations and the ongoing record of the achievement of practice competence, which confirms achievement of the practice learning outcomes related to the field and generic competencies. The final confirmation is made at the award board and the course tutor, in collaboration with the field leaders and module managers, confirms each individual student to the chair of the board (8).

Students are encouraged to nominate practice areas for good practice and support,

with awards being presented at the annual mentor conference. Practice areas value these awards and display them prominently in their areas (33, 66-67, 69-75).

Module evaluations are also completed in a timetabled session. Module leaders submit a module review form to the course board. This is informed by their practice partners. The review includes the subject external examiner's report, student feedback (module evaluation forms), employer feedback, if relevant, student evaluation of practice learning and end of programme evaluation (21, 64).

A programme evaluation is also completed. These demonstrate a high level of satisfaction with the programme (84).

All pre-registration nursing students demonstrate a high level of satisfaction with the programme. In the National Student Survey (NSS) 2015, overall satisfaction was rated 100 percent for learning disability. Whilst proud of these results the programme team also acknowledge that they need to maintain their momentum and their standards (33, 85, 86).

An EE is appointed to the programme. They meet all NMC requirements regarding due regard and teaching qualifications (24, 134).

The EE is supportive of the assessment strategy for the programme, confirms that marking is consistent with other LD programmes, scrutinises the written work and the PADs (135).

The EE attends the university on a regular basis, observing role play over two days in the simulation suite and attending the award boards where they take the opportunity to meet with students. They also attend the annual mentor conference which provides opportunities to meet with both mentors and students (72).

Mentor preparation programme

Quality assurance of this programme is managed by the PFs in the trusts. Each PF conducts a written evaluation session which is discussed with the PFs from the other health boards. Monthly meetings are held with the PM in the school where these are also discussed. There are no formal minutes of these meetings (35, 59).

We discussed the limitations of this approach with the PFs and the PM. They agree that the process lacks the rigor and transparency required of a NMC approved programme (35, 59). This significant weakness in risk control requires action to meet the NMC standards.

A condition of the programme approval was the appointment of an EE. This condition is documented as met (4).

A NMC register check confirmed the currency of the appointed EE's professional registration but raised doubts regarding the recorded teacher status. Scrutiny of the CV demonstrated that the teaching qualification held is not approved by NMC (24, 29) and therefore this requirement is not met and action is required to meet the standard (24, 127).

Scrutiny of the EE's annual report demonstrates inclusion of the module code number for the mentor preparation programme. However, this non-accredited programme is not identified specifically within the report. The EE for this programme also scrutinises

a number of other modules. The PL needs to ensure that commentary specifically related to the mentor preparation programme is included in the annual report (68).

The PFs explained that they mark and internally moderate the mentor portfolios within the health boards. They maintain their own mark sheets for students completing each programme. They have informal discussions regarding the portfolios across the health boards. The PM is given anecdotal feedback at their monthly meetings. There is no evidence that mentor portfolios are externally moderated. The PFs, and PM agree that that the marking and moderation process does not meet the standards required for an NMC approved programme and action is required (35, 59). The associate head of school agreed that an action plan will be developed and implemented to address this risk and meet the standards required by the NMC.

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

What we found before the event

The faculty has a 'student concerns toolkit', which is discussed with all students prior to their first practice learning experience and is available via the student Blackboard virtual learning environment portal. This document incorporates the NMC (2010) raising and escalating concerns: guidance for nurses and midwives (revised 2015). The students have sessions on 'What to do if you witness poor practice', the Code, accountability and advocacy. The school ensures every nursing student has a copy of the Code: Professional standards of practice and behaviour for nurses and midwives (NMC 2015). These are discussed during the induction period of the programme and reiterated in detail as the programme progresses across a range of modules (3, 22).

All students undertake a specific learning unit on safeguarding of children and another on safeguarding of vulnerable adults and the faculty has signed-up to the 'speak out safely campaign' by the RCN (3).

What we found at the event

Pre-registration nursing – learning disability

Students are aware of the support mechanisms in place if they instigate a concern or complaint. Their personal teacher, the PF and the student support officer are available to support them in this process. They also have the email contact for the associate head of care sciences responsible to oversee practice learning experiences. One of these key individuals will respond to the student within one working day but often an immediate response can be made (3, 49).

We found that learning disabilities nursing students, mentors and PFs have a good knowledge and understanding of the policy and mechanism for raising and escalating concerns in the practice setting (65-67, 69-71, 73-75).

Learning disabilities nursing students report that the 'raising concerns toolkit' provides a good model for guidance (75, 136).

One learning disabilities nursing student gave a good account of their experiences of raising a concern in practice. They told us they were well supported by their mentor, LL and PF, and that appropriate action was taken consistent with policy (69).

Raising concerns is addressed during each of the theoretical parts of the programme before going into practice placements (75).

Mentor preparation programme.

Student mentors adhere to the processes in place in their employing health board.

Outcome: Standard not met

Comments:

Pre-registration nursing – learning disability

The university's policies and procedures are applied to this programme to ensure that the programme meets the required academic and professional standards. Students are highly satisfied with the programme. The programme team address concerns raised as and when necessary.

Mentor preparation programme

The PFs manage the programme adequately within the health boards. The school needs to ensure that the programme is subject to the university's quality assurance processes and meets the NMC standards and requirements as part of this process, specifically in relation to the following: verification process of EE professional requirements, marking, moderation and external scrutiny of assessed work, programme and EE reports.

28 September 2016: Follow up Documentary Evidence from the University of South Wales. Standard now met

A review of the evidence to support completion of the AEI action plan was completed on 28 September 2016.

A new EE has been appointed to the programme. The EE has visited the school and met with the PM. The module report demonstrates the EE's satisfaction with the marking and moderation processes now in place meet NMC requirements. The results are formally presented to the progress and achievement board.

Evidence to support the standard is met includes:

- USW, school of care sciences, school programme and achievement board, undated
- USW, school of care sciences, external examiner assessment report form, 01 July 2016

Areas for future monitoring:

Mentor preparation programme:

- Review the processes in place for programme evaluation and annual reporting.

- Review the extent of the engagement of the external examiner in the programme including the annual reporting.

Evidence / Reference Source

1. AEI requirements, updated November 2015

2. Pre-registration nursing, learning disability, approval report, 2012

3. Self-assessment report, 2015-16

4. Mentor preparation programme, approval report, 2013

5. University of Prifysgol, Glamorgan, Cardiff, Pontypridd, Caerddydc, children's and young people's procedure, November 2012

6. University of South Wales, Prifysgol De Cymru, policy and procedure governing fitness to practise 2015-16

7. University of South Wales, Prifysgol De Cymru, raising concerns, a reflective toolkit for students and those supporting them, PowerPoint presentation

8. University of South Wales, Faculty of Health, Sport and Science, bachelor of nursing (hons) (adult, child health, learning disabilities and mental health fields of practice), Department of Care Sciences, definitive document, March 2012

9. School of Care Sciences roles and responsibilities of the link lecturer, 2015

10. Initial visit meeting, 25 February 2016

11. HIW, inspection report, Princess of Wales Hospital, 17-18 February 2015

12. HIW management letter, Llanarth Court, June 2014

13. HIW action plan, Llanarth Court, June 2014

14. HIW improvement plan, Llanarth Court, 11-15 May 2015

15. HIW inspection report, Llanarth Court, 11-15 May 2015

16. HIW inspection report, Rowan House, 13 July 2015

17. HIW inspection report, Heatherwood Court, 2-4 June 2015

18. HIW action plan, Heatherwood Court, July 2014

19. HIW management letter, Heatherwood Court, July 2014

20. The role of the personal tutor, June 2015

21. Procedures for annual monitoring, 2013

22. Raising concerns toolkit, PowerPoint presentation, undated

23. Spreadsheet showing NMC registration and teacher status, undated

24. NMC register check, 8th March 2016

25. USW Faculty of life sciences and education, new staff induction booklet, revised February 2015

26. Meeting with dean, deputy vice chancellor and head of school, 08 March 2016

27. Meeting with academic subject manager, community academic manager, senior lecturer, clinical skills nurse trainer, 08 March 2016

28. USW admissions policy January 2015

29. CV, external examiner, mentor preparation programme, viewed 10 March 2016

30. All Wales admissions tutors group terms of reference, undated

31. Selection process / interviews, undated

32. Pre-registration interview sheet, undated

33. Initial meeting with associate head of school, head of school, learning disability lecturers x 2, mentor preparation programme manager, 08 March 2016

34. Schedule of interviews, 30 January, 20 February, 05 March 2016

35. Meeting with academic manager for admissions/programme manager for mentor preparation programme, 08 March 2016

36. USW faculty of life sciences and education, policy and procedures in respect of disclosure of criminal records for applicants to, and students on, courses involving access to vulnerable members of the community and any other course leading to registration with an approved body, undated

37. Good health and good character, mentor preparation programme, undated

38. USW fitness to practise regulations, 2015-16

39. USW, fitness to study regulations, 2015-16

40. USW, academic misconduct regulations, 2015-16

41. USW, academic appeals regulations, 2015-16

42. USW, student conduct regulations, 2015-16

43. USW student charter, undated

44. Roles and responsibilities of students and the university, undated

45. USW students complaints regulations, 2015-16

46. USW, extenuating circumstances regulations 2015-16

47. USW, faculty of life sciences and education, fitness to practise advisory committee minutes, January 2015, May 2015, September 2015, December 2015

48. Fitness to practise investigation notes x 2 cases, 2015

49. Meeting with student support officer, 09 March 2016

50. USW, School of care sciences, APL for advanced standing /exemptions for part(s) of the Bachelor of Nursing (Hons) programme, undated

51. APL examples, 2015

52. Partner practice learning environment providers and Higher Education Statistics Agency (HESA) pre-registration nursing and midwifery management meeting, 19 June 2014, 13 October 2015

53. Meeting with lead nurse learning disabilities Aneurin Bevan University Health Board (ABUHB), Workforce and development manager, Powys teaching health board, senior nurse manager, Powys teaching health board, head of nursing learning disability service, LD/mental health delivery unit, Abertawe Bro Morgannwg University Health Board (ABMUHB), Acting head of clinical education, ABMUHB, Education, 09 March 2015 and contracting

manager, the workforce education and development service (WEDS), director WEDS, assistant director quality improvement (QI) and clinical governance, Cwm Taf University Health Board (CTUHB), head of workforce education and research, ABMUHB

54. Meeting practice innovations officer, 09 March 2016

55. Meeting with associate head of school, 09 March 2016

56. Visit to placements office, 09 March 2016

57. NHS Wales mentor portfolio, supporting learning and assessment in practice, undated

58. USW, pre-registration nursing and midwifery mentorship: Inspiring connections between theory and practice, mentor portfolio, undated

59. Meeting with practice facilitators, 10 March 2016

60. Meeting with programme manager, mentor preparation programme, 09 March 2016

61. Meeting with associate head of school, 10 March 2016

62. RCN in Wales, Nurse of the year awards, 2015

63. Bachelor of nursing, learning disability, practice learning evaluations x 10, September 2012 cohort

64. USW, annual monitoring course report, Bachelor of Nursing, 2014-15

65. Ongoing record of achievement of practice competence, Bachelor of Nursing Honours degree, learning disabilities field of practice, March 2012

66. Meeting with students, mentors and practice facilitator at community support team – Cardiff East, 08 March 2016

67. Meeting with students, mentors and practice facilitator at community support team – Cardiff West, 08 March 2016

68. USW, school of care sciences, award external examiner annual report, 2015-16

69. Meeting with students, mentors and practice facilitator at Llanfrechfa Grange assessment and treatment unit, 08 March 2016

70. Meeting with students, mentors and practice facilitator at Hafod Y Wennol, service for clients with challenging behaviour, 09 March 2016

71. Meeting with students, mentors and practice facilitator at Craig Y Parc special school, 09 March 2016

72. Meeting with the learning disabilities programme team, 09 March 2016

73. Meeting with students, mentors and practice facilitator at Heatherwood Court private sector medium secure unit, 09 March 2016

74. Meeting with students, mentors and practice facilitator at Osbern ward Llanarth Court private sector medium secure unit, 09 March 2016

75. Meeting with students, learning disabilities field, university of South Wales, 10 March 2016

76. Meeting with service users and advocates/supporters, University of South Wales, 10 March 2016

77. Bachelor of Nursing (Hons) (adult, child health, learning disabilities and mental health fields of practice) definitive document, March 2012

78. All Wales nursing and midwifery education initiative, educational audit, practice learning environment, 2012

79. Raising concerns: a reflective toolkit for students and those supporting them, 2015

80. All Wales practice learning experience evaluation tool, 2012

81. Faculty admissions policy, 2013

82. All Wales admission principles, 2013

83. Nursing student handbook, 2015-16

84. USW, Bachelor of Nursing programme evaluation, 2012 curriculum, September 2012 cohort x 9

85. NSS survey, 2015

86. USW, school of care sciences, NSS action plan, 2015-16

87. Tour of University of South Wales clinical simulation suite, 10 March 2016

88. University of South Wales welcome and overview presentation, 08 March 2016

89. Student information file, community drug and alcohol team, Ysbyty Cwm Cynon, undated

90. Student information file, Osbern ward Llanarth Court, private sector medium secure unit, accessed 09 March 2016

91. Educational audit document; Hafod Y Wennol, ABM UHB, dated 13 October 2015

92. Educational audit document; Royal Glamorgan Hospital Cwm Taff UHB, viewed 08 March 2016

93. Student information file, Dewi Sant Cwm Taff UHB, viewed 08 March 2016

94. Educational audit document; Dewi Sant Cwm Taff UHB, viewed 08 March 2016

95. Educational audit document; Craig-Y-Parc Special School (SCOPE), dated 15 July 2015

96. Educational audit document; Heatherwood court, dated 25 February 2016

97. Educational audit document; Osbern Ward, Llanarth Court, 29 June 2015

98. Mentor database, Cwm Taff UHB, at Royal Glamorgan Hospital Cwm Taff UHB, accessed 08 March 2016

99. University of South Wales teaching and research advisory committee (TRAC) documents, undated

100. Meeting with mentors and link lecturer at community drug and alcohol team, Ysbyty Cwm Cynon - Cwm Taff University Health Board (UHB), 08 March 2016

101. Meeting with students at community drug and alcohol team, Ysbyty Cwm Cynon - Cwm Taff University Health Board (UHB), 08 March 2016

102. Meeting with mentors at community hospital – Cwm Taff UHB, 08 March 2016

103. Meeting with students at community hospital – Cwm Taff UHB, 08 March 2016

104. Meeting with district nursing team and students, Dewi Sant - Cwm Taff UHB, 08 March 2016.

105. Meetings with mentors at Royal Glamorgan Hospital – Cwm Taff UHB, 08 March 2016

106. Meetings with students at Royal Glamorgan Hospital – Cwm Taff UHB, 08 March 2016

107. Meeting with practice facilitators and link lecturers at Royal Glamorgan Hospital – Cwm Taff UHB, 08 March 2016

108. Meetings with ward manager and link lecturer Princess of Wales Hospital – Abertawe Bro Morgannwg UHB, 09 March 2016

109. Meetings with mentors Princess of Wales Hospital – Abertawe Bro Morgannwg UHB, 09 March 2016

110. Meetings with students Princess of Wales Hospital – Abertawe Bro Morgannwg UHB, 09 March 2016

111. Meeting with practice facilitators, senior nurse for education and link lecturers Princess of Wales Hospital – Abertawe Bro Morgannwg UHB, 09 March 2016

112. Meeting with unit manager and link lecturer mental health rehabilitation unit, Cefn-Yr-Afon - Abertawe Bro Morgannwg UHB, 09 March 2016

113. Meeting with mentor mental health rehabilitation unit, Cefn-Yr-Afon - Abertawe Bro Morgannwg UHB, 09 March 2016

114. Meeting with student mental health rehabilitation unit, Cefn-Yr-Afon - Abertawe Bro Morgannwg UHB, 09 March 2016

115. Meeting with Bridgend Community Mental Health Team and link lecturer - Abertawe Bro Morgannwg UHB, 09 March 2016

116. Meeting with mentor at Bridgend Community Mental Health Team - Abertawe Bro Morgannwg UHB, 09 March 2016

117. Meeting with student at Bridgend Community Mental Health Team and link lecturer - Abertawe Bro Morgannwg UHB, 09 March 2016

118. Meeting with mentors and signoff mentors, 10 March 2016

119. Teleconference with mentor who had undertaken the 2013 mentorship programme, 10 March 2016

120. Mentor database Cwm Taff UHB, accessed 08 March 2016

121. Mentor database Abertawe Bro Morgannwg, accessed 09 March 2016

122. Student placement evaluation reports for Cwm Taff UHB, 08 March 2016

123. Student placement evaluation reports for Abertawe Bro Morgannwg UHB, 09 March 2016

124. Audit reports for Cwm Taff UHB, 08 March 2016

125. Audit reports for Abertawe Bro Morgannwg UHB, 09 March 2016

126. Friends and family test documentation for Abertawe Bro Morgannwg UHB, 09 March 2016

127. Portfolio for mentor preparation programme, validated 2013

128. Mentor update material, PowerPoints and session plan, accessed 8-9 March 2016

129. Sign off preparation portfolio, accessed 9 March 2016

130. Personal development review documentation, accessed 9 March 2016

131. Off duty Cwm Taff UHB, accessed 8 March 2016

132. Off duty Abertawe Bro Morgannwg UHB, accessed 9 March 2016

133. Student evaluations for the mentorship programme, accessed 10 March

134. CV, external examiner, pre-registration nursing, learning disability, viewed 10 March 2016

135. USW, school of care sciences, subject external examiners report, 2013-14, 2014-15

136. USW safeguarding policy January 2016

Personnel supporting programme monitoring
Prior to monitoring event
Date of initial visit: 25 Feb 2016
Meetings with:
Associate head of school with responsibility for NMC approved programmes and practice learning   Academic lead, learning disability nursing   Academic subject manager, family care   Academic subject manager, adult nursing   Academic subject manager, mental health nursing   Head of school of care sciences   Academic manager admissions and mentor preparation programme lead
At monitoring event
Meetings with:
Associate head of school with responsibility for NMC approved programmes and practice learning   Academic lead, learning disability nursing   Head of school of care sciences   Academic manager admissions and mentor preparation programme lead   Academic manager, community   Senior lecturer   Academic subject manager – lead on revalidation   Clinical skills nurse trainer   Dean of the school of care sciences   Deputy vice chancellor   Lead nurse, learning disabilities, Aneurin Bevan University Health Board (ABUMHB)   Workforce and development manager, Powys teaching health board   Senior nurse manager, bank/agency, Powys teaching health board   Head of nursing, learning disability service, learning disability/mental health delivery unit, Abertawe Bro Morgannwg University Health Board (ABMUHB)   Acting head of clinical education, Cwm Taff University Health Board (CTUHB)

Education and contracting manager, the workforce education and development service (WEDS)

Director, the workforce education and development service (WEDS)

Assistant director QI and clinical governance, Cwm Taff (CTUHB)

Head of workforce, education and research, Abertawe Bro Morgannwg University Health Board (ABMUHB)

Meetings with:

Mentors / sign-off mentors	35
Practice teachers	1
Service users / Carers	25
Practice Education Facilitator	7
Director / manager nursing	2
Director / manager midwifery	
Education commissioners or equivalent	10
Designated Medical Practitioners	
Other:	

Meetings with students:

Student Type	Number met
Mentorship	Year 1: 3 Year 2: 0 Year 3: 0 Year 4: 0

Registered Nurse - Learning Disabilities	Year 1: 7 Year 2: 8 Year 3: 8 Year 4: 0
	Year 1: 0 Year 2: 0 Year 3: 0 Year 4: 0

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