

2016-17

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

Programme provider	Edge Hill University
Programmes monitored	Registered Nurse - Children; Return to Practice Nursing
Date of monitoring event	26-27 Apr 2017
Managing Reviewer	Peter McAndrew
Lay Reviewer	Carol Rowe
Registrant Reviewer(s)	Robert Gallagher, Julia Winter
Placement partner visits undertaken during the review	<p>Pre-registration nursing programme, child nursing field: Liverpool Community NHS Trust, Smithdown children's walk in centre</p> <p>Zoe's Place, children's hospice, voluntary sector placement, Alder Hey Children's Hospital NHS Foundation Trust, medical ward 4C, accident and emergency department</p> <p>Southport and Ormskirk NHS Foundation Trust, Ormskirk District Hospital, children's ward, neonatal unit</p> <p>Lancashire Care NHS Foundation Trust, Birleywood Health Centre (West Lancs East)</p> <p>Return to practice, nursing programme: Aintree University Hospitals NHS Foundation Trust, Aintree University Hospital, main B theatres, ward 16, admissions medical unit (AMU), elective care centre (ECC) day ward</p> <p>Walton Centre NHS Foundation Trust, Sherrington ward</p> <p>Wirral University Hospital NHS Foundation Trust, Arrowe Park Hospital, ward 30, ward 22</p>
Date of Report	10 May 2017

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 nursing and midwifery education

Our legislation defines our role in the education and training of nurses and midwives. It allows us to establish standards of education and training which include the outcomes to be achieved by that education and training. It further enables us to take appropriate steps to satisfy ourselves that those standards and requirements are met, which includes approving education providers and awarding approved education institution (AEI) status before approving education programmes.

Quality assurance (QA) is our process for making sure all AEIs continue to meet our requirements and their approved education programmes comply with our standards.

We can withhold or withdraw approval from programmes when standards are not met.

QA and how standards are met

The QA of education differs significantly from any system regulator inspection.

As set out in the NMC QA framework, which was updated in 2016, AEIs must annually declare that they continue to meet our standards and are expected to report exceptionally on any risks to their ability to do so.

Review is the process by which we ensure 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.

The NMC may conduct a targeted monitoring review or 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: Risk controls need to be strengthened. 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					
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 in delivering approved programmes.			
	1.2 Inadequate resources available in practice settings to enable students to achieve learning outcomes required for NMC registration or annotation	1.2.1 Sufficient appropriately qualified mentors / sign-off mentors / practice teachers available to support numbers of students allocated to placement at all times			
Admissions & Progression	2.1 Inadequate safeguards are in place to prevent unsuitable students from entering an approved programme and progressing to NMC registration or annotation	2.1.1 Selection and 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	3.2.3 Records of mentors/practice teachers in private, voluntary and independent placement settings are accurate and up to date	
	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, and can reflect on, 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 Edge Hill University's programmes

The faculty of health and social care at Edge Hill University (EHU) is one of the largest providers of health and social care education in the north west of England. The faculty delivers a range of approved NMC programmes which includes a pre-registration nursing programme with fields in adult, child, mental health and learning disabilities nursing. The pre-registration nursing (child) programme and return to practice nursing programme are the main focus for the monitoring review.

EHU is located in the heart of the north west of England, a short distance from Liverpool, Southport and Manchester. The campus offers a high quality facility for health and social care students and houses an innovative faculty of health and social care building which incorporates high quality clinical skills and simulation facilities.

The BSc (Hons) pre-registration nursing programme was approved conjointly by the university and the NMC in May 2012. An MSc route was approved as a major modification in April 2013 for all four nursing fields. The NMC has extended approval for the programme until 2019. Major modifications were also approved in June 2016 to provide a joint pre-registration nursing and social work programme in all the four fields of nursing. The children's nursing and social work programme will commence the first intake in September 2017. The return to practice nursing programme was conjointly approved in August 2015.

The monitoring event took place over two days and involved visits to practice placements to meet a range of stakeholders. The practice placement visits covered a wide selection of hospital and community based placement experiences provided by the NHS and the private, voluntary and independent (PVI) healthcare sector. Particular consideration was given to the pre-registration children's nursing student experience in placements which have had issues raised in recent care quality commission (CQC) inspection reports. These included children's services at Ormskirk District General Hospital, part of Southport and Ormskirk NHS Trust, community children's services provided by Liverpool Community Health NHS Trust, and within the PVI healthcare sector at Zoë's Place Baby Hospice. Placement visits for the return to practice nursing programme included Arrowe Park Hospital, part of Wirral University Hospital NHS Foundation Trust, which had issues raised in the recent CQC inspection report.

Summary of public protection context and findings

Our findings demonstrate that two of the key risk themes; admissions and progression and fitness for practice have elements which require improvement. The university must implement improvements in these areas of their provision to assure public protection. The key risk themes are described below.

Resources: met

We found that lecturers have a strong academic profile and that there is sound evidence of staff development. We found that there is a strong commitment to developing the research profile of the academic teaching team. These initiatives include the engagement of service users which are being used positively to inform teaching and learning. The faculty's governance procedures are robust and well administrated, and ensure that all nursing lecturers with a professional qualification are registered with the NMC and have a recorded teacher qualification or are working towards its achievement. Procedures that support nursing lecturers to meet the requirements of revalidation are also robust. Programme leaders act with due regard.

We concluded that the university has adequate resources to deliver the pre-registration nursing (child) programme and the return to practice nursing programme to meet NMC standards.

Mentors and sign-off mentors show a high commitment and enthusiasm for their roles. Students on the return to practice nursing programme and students in the final placement on the pre-registration programme are allocated to an up to date sign-off mentor.

There are sufficient appropriately qualified mentors and sign-off mentors to support the number of students studying the pre-registration nursing (child) programme and the return to practice nursing programme.

Admissions and progression: requires improvement

We found that the selection and admission processes for the pre-registration nursing programme adheres to NMC standards and requirements. Academic staff, practice partners and service users and carers are involved in the selection process and have undertaken equality and diversity training. A value based selection process is used which includes a face to face interview. Pre-registration nursing (child) students undertake a disclosure and barring service (DBS) check and health check prior to commencing the programme. The university has a policy for the management of students who are under the age of 18 years.

We found one student on the return to practice nursing programme who did not undertake a formal selection interview before commencing the programme. It is a requirement for the programme provider to ensure that students on NMC approved programmes have undertaken a formal interview to assess suitability and for a formal record to be evidenced.

We found one service user who had participated in the selection interview for the return to practice nursing programme who had not undertaken equality and diversity training. It is an NMC requirement that all participants in the selection interview process must have undertaken equality and diversity training. These two elements of the admission process require improvement.

We found that procedures implemented to address issues of poor performance in both theory and practice are well understood and implemented effectively in the pre-registration nursing (child) and the return to practice nursing programmes.

Students studying the pre-registration nursing (child) programme complete annual declarations of good health and character.

We found that a declaration of good health and character is not completed at the end of the return to practice nursing programme to inform that the student meets the requirements for re-entry to the NMC register. It is an NMC requirement that health and character forms are completed and signed at the completion stage, and records are kept of this compliance. This element of the return to practice nursing programme requires improvement.

We found that accreditation of prior learning (APL) policies, procedures and practices are robust and fully ensure that both NMC learning outcomes and hours of theory and practice are fully mapped within the accreditation process, and protect the public from students who may not have adequately demonstrated that they have met the required NMC learning outcomes and standards of competence.

Practice learning: met

We found strong evidence to confirm that effective partnerships exist with associated service providers and education providers at both strategic and operational levels.

Particular scrutiny was undertaken within the monitoring review to provide assurance that an effective strategy and risk management approaches are in place to protect students' learning in placement areas where issues have been raised by the CQC. We found that an excellent strategy exists for service users and carers' engagement and there is considerable evidence that they are involved in all aspects of programme development and delivery in both the pre-registration nursing and return to practice nursing programmes.

Academic staff support students in practice placement settings and maintain positive relationships with practice staff, especially when additional student support is required.

Mentors and sign-off mentors are properly prepared for their role in assessing practice. The mentor registers are accurate, complete and up to date.

Fitness for practice: requires improvement

We found that students achieve the NMC learning outcomes and competencies for entry to the nursing part of the register in the pre-registration nursing (child) programme and the return to practice nursing programme. Students emerging from the programmes are considered fit for practice by employers and commissioners.

External examiners confirm the quality of the programmes, the effective level of academic support, the rigor of the assessment of practice, the high level of achievement attained by the majority of the students and that the programmes enable students to achieve the statutory requirements.

We found that the module handbook for the return to practice nursing programme does not contain or make reference to essential information for students relating to the re-assessment opportunities that are available to them if they are referred at the

first attempt. The programme documentation should make this information explicit to enable students to monitor their own progress. This requires improvement.

Quality Assurance: met

Effective internal quality assurance processes are in place to manage risks, address areas for development and enhance the delivery of the pre-registration nursing (child) and return to practice nursing programmes.

We found that all modules and programmes are subject to evaluation and there is sound evidence that issues are followed through to resolution, and that timely feedback is made available to students and clinical staff on action taken.

External examiners' reports are comprehensive and issues raised in the reports are appropriately responded to by programme leaders.

We found that effective procedures exist to enable students to raise complaints and concerns and there is evidence that they are appropriately supported and that the issues raised are effectively communicated to practice partners.

Summary of areas that require improvement

The selection process for the return to practice nursing programme must be revised to assure that all students undertake a formal interview to assess suitability and for a formal record to be evidenced of the interview.

All participants involved in the selection interview process for the return to practice nursing programme must have undertaken equality and diversity training.

Students at the completion stage of the return to practice nursing programme must complete and sign a good health and character declaration form to inform re-entry to the NMC register and full records are kept of this compliance.

Programme documentation for the return to practice nursing programme must be revised to include information for students relating to the re-assessment opportunities that are available to them if they are referred at the first attempt.

Summary of areas for future monitoring

- The formal interview element of the selection process for the return to practice nursing programme.
- All participants involved in the selection interview process for the return to practice nursing programme have undertaken equality and diversity training.
- Good health and character declaration forms are completed and signed by all students at the completion stage of the return to practice nursing programme to inform re-entry to the NMC register process.

- Programme documentation for the return to practice nursing programme contains information on the re-assessment opportunities that are available to students if they are referred at the first attempt.

Summary of notable practice

Resources

None identified

Admissions and Progression

None identified

Practice Learning

None identified

Fitness for Practice

None identified

Quality Assurance

None identified

Summary of feedback from groups involved in the review

Academic team

Academic staff told us that they have adequate numbers of staff with due regard to deliver the pre-registration nursing programme across the four fields of practice. There are adequate resources to provide due regard academic support for students on the return to practice nursing programme. They confirmed they undertake a practice link role in relation to supporting students, mentors and sign-off mentors. Academic staff informed us that they have opportunities to engage in continuing professional development and that this is actively encouraged and facilitated in the faculty.

The academic team told us that they have close working partnerships with practice placement providers and work collaboratively with other approved education institutions (AEIs) with whom practice placements are shared.

They told us that the university is supportive in enabling them to meet revalidation requirements and staff development through annual personal reviews and development action plans. They told us that academic staff maintain currency with practice through research, conferences, and practice support roles.

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

Mentors and sign-off mentors told us that they have the necessary support from academic staff as well as the practice education facilitators (PEFs) for the number of

students on the programmes. Mentors and sign-off mentors told us that they are confident in their role and are committed to ensuring that students meet the NMC standards and competencies on completion of their programme.

PEFs told us that they have access to the live database of mentors and placement educational audit information. They work in collaboration with staff in the practice learning office at the university.

Employers and commissioners told us that students are fit for purpose and gain employment on successful completion of their programme. Sign-off mentors, PEFs and employers all confirmed their confidence in the programme.

Students

All students are positive about their choice of university and complimentary about their experience at all levels within the programmes. Students confirm they receive very good support from university academic staff. Students report they have supportive mentors in practice placements and that they spend in excess of the required NMC time working with them. Students confirm that mentors enable them to access a range of learning experiences. Students are satisfied with the quality of their teaching and assessment and feel they are being well prepared for their future role as registrants. Students confirm their understanding of the processes and their responsibility for escalating concerns in practice.

Service users and carers

Service users told us that they feel valued by the university. They feel part of the faculty team and value being members of a designated service user and carer council. They told us that they make a significant contribution to the pre-registration nursing programme which is positively evaluated by students. They told us that they access training in relation to their contribution and are well supported by academic staff.

Service users and carers in practice settings confirmed that mentors and students ensure that the service user consents to students being involved in their care.

Relevant issues from external quality assurance reports

CQC reports were considered for practice placements used by the university to support students' learning. These external quality assurance reports provide the reviewing team with context and background to inform the monitoring review (6-18).

The following reports required action:

CQC, inspection report, Wirral University Teaching Hospital NHS Foundation Trust Arrowe Park Hospital, overall rating requires improvement, date of report, 10 March 2016. The NHS trust is required to make improvement in urgent and emergency services, medical care, critical care, maternity and gynaecology, services for children and young people, end of life care, outpatients and diagnostic imaging. CQC noted an increase in methicillin-resistant staphylococcus aureus and clostridium difficile

infections across medical services. CQC reported that the NHS trust must make sure that all staff understand and comply with the best practice in infection prevention and control. The CQC also found nursing staff shortages which were inhibiting the ability to meet the needs of patients (6).

University response:

Approved practice placements within services where an issue was raised were risk assessed by the link lecturer, practice lead and service manager in relation to the issues raised in the CQC inspection. Student evaluations on practice experience were positive. The risk assessment determined there were no increased risks to effective practice learning and student placements could continue with additional support from academic staff and PEFs (57, 113).

We visited practice placements at Arrowe Park Hospital as part of the practice visits programme. The practice visit confirmed that the risk management plan had been fully implemented and that all risks to students' practice learning are being successfully managed (71).

CQC, inspection report, Bridgewater Community Healthcare NHS Foundation Trust, overall rating requires improvement, date of report, 6 February 2017. Community services for children, young people and families require improvement. The NHS trust is required to: ensure that children and young people are reviewed in a timely manner and provide assurance of safe care and treatment in the delivery of the service; and, ensure staffing levels for all clinicians are consistently sufficient to meet the demands of the service (7).

University response:

The university confirmed that the NHS trust is not currently used for student practice placements (57).

CQC, inspection report, Liverpool Community Health NHS Trust, overall rating requires improvement, date of report, 8 July 2016. Requires improvement in community services for children, young people and families. The number of health visitors reporting to one team leader was excessive and could lead to a lack of adequate support for the team leaders. The trust must address this to ensure that caseloads are manageable and staff have the appropriate support from their team leaders. There is a risk present as long as hybrid paper and electronic recording systems are being used. The provider must ensure that all record keeping risks are mitigated. The trust must ensure that policies and procedures relating to safeguarding take account of the latest statutory guidance (8).

University response:

The NHS trust is in transition and due to be dissolved by June 2017 and services will be realigned to alternative NHS community provision that is part of the university's established practice placement partners. The service was jointly risk assessed in relation to the issues raised in the CQC inspection. Students' evaluations on placement experience showed a consistently high level of satisfaction. A risk management plan was agreed for additional link lecturer contact to support clinical

areas and reduced student placements. Plans for educational audits of the learning environments are in place and will be undertaken following proposed service transaction in preparation for learners attending allocated placements (57, 118).

We visited the community services for children, young people and families as part of the practice placement visits and confirmed that the risk management plan had been fully implemented and all risks to student learning are being successfully managed (62).

CQC, inspection report, Southport and Ormskirk Hospital NHS Trust, Ormskirk District General Hospital, overall rating requires improvement, date of report, 15 November 2016. The children's services require improvement. The service must ensure that all clinical pathways are up to date and reflect current standards and guidance. The service must ensure complaints are dealt with robustly and in a timely manner (9).

University response:

The approved practice placements were jointly risk assessed in relation to the issues raised in the CQC inspection. Students' online evaluations were reviewed and no significant adverse issues identified. A risk management plan was put in place to enable student placements to continue. Additional academic support has been provided for students who have been reminded of their responsibilities in seeking support and raising concerns should they require it. PEFs liaise weekly with practice education lecturers (PELs) to identify any issues regarding student experience and capacity, and outcomes are referred to the faculty practice leads. Students are visited by the faculty PEL who will report any particular concerns to the student's personal tutor, link lecturers and practice lead, as appropriate (57, 112, 115).

We visited placements at Ormskirk District Hospital as part of the practice placement visits and confirmed that the risk management plan had been fully implemented and all risks to student learning are being successfully managed (65).

CQC, inspection report, Wrightington, Wigan and Leigh NHS Foundation Trust, Royal Albert Edward Infirmary, overall rating requires improvement, date of report, 22 June 2016. Requires improvement in services for children and young people. Nurse staffing within the paediatric services are inadequate. Nurse staffing levels on rainbow ward did not reflect the Royal College of Nursing (RCN) standards and on the neonatal unit did not always meet standards of staffing recommended by the British Association of Perinatal Medicine (BAPM). Also, staffing rotas on rainbow ward did not identify an appropriately trained member of staff for the high dependency unit (HDU) for each shift (10).

University response:

The university confirmed that there are no students currently allocated to these placements (57).

PVI sector:

CQC, inspection report, Abbey Lawns Limited Abbey Lawns Care Home, overall rating inadequate, date of report, 23 January 2017. Abbey Lawns is a privately-owned care home providing both nursing and personal care for up to 61 people who have a

range of care needs (11).

University response:

Student placements are ceased until the CQC action plan is achieved and a positive educational audit is completed (57).

CQC, inspection report, Acorns Care Centre, overall rating requires improvement, date of report, 23 December 2016. Acorns Care Centre is registered to provide accommodation and support for up to 39 older people. The service provides residential and nursing care as well as care for people living with dementia (12).

University response:

Student placements are ceased until the CQC action plan is achieved and a positive educational audit is completed (57).

CQC, inspection report, Amberleigh House Care Home, overall rating requires improvement, date of report, 21 March 2017. Amberleigh House is a purpose-built home that provides residential and nursing care for a maximum of 38 older people. The home specialises in providing care for people living with dementia (13).

University response:

Student placements are ceased until the CQC action plan is achieved and a positive educational audit is completed (57).

CQC, inspection report, Ashton View Nursing Home, overall rating requires improvement, date of report 26 January 2016. Ashton View provides residential and nursing care for people living with dementia for up to 57 people. People were not fully protected against the risks associated with medicines (14).

University response:

Student placements are ceased until the CQC action plan is achieved and a positive educational audit is completed (57).

CQC, inspection report, Elm House Nursing Home, overall rating requires improvement, date of report, 7 February 2017. Elm House provides nursing care for up to 30 people in a residential area of Southport. Improvements have been made since the last inspection but they need to continue (15).

University response:

Student placements are ceased until the CQC action plan is achieved and a positive educational audit is completed (57).

CQC, inspection report, Manchester House Nursing Home, overall rating inadequate, date of report, 9 January 2017. Manchester House is registered to provide accommodation and nursing care for up to 67 older people and younger adults with a physical disability. The service was placed in special measures. There are serious issues with risks posed to clients; inaccurate care plans; not enough staff on duty to meet client's needs; and, serious safeguarding issues including allegations of abuse (16).

University response:

The nursing home was risk assessed by the link lecturer and service manager in relation to the serious issues raised in the CQC inspection. A student in placement at the time of the inspection evaluated the practice experience positively and wanted to remain in the placement. As a result of the risk assessment it was determined that the risks to student learning could be managed effectively through additional input by the link lecturer. It was assessed that the care delivered was effective and that the students' learning would be enhanced by the experience of participating in the development plan. The placement continues to be evaluated positively by students (57, 109).

CQC, inspection report, Margaret Roper House, overall rating requires improvement, date of report 23 November 2016. Margaret Roper House is a nursing home registered to accommodate people who have mental health care needs for up to 23 people. People were not fully protected against the risks associated with medicines (17).

University response:

Student placements are ceased until the CQC action plan is achieved and a positive educational audit is completed (57).

CQC, inspection report, Zoe's Place Liverpool, overall rating requires improvement, date of report, 18 January 2017. The service provides care and support for up to six children who have life limiting illnesses with special and complex needs to varying degrees. The service offers respite, palliative and terminal care to children aged from birth to five years. Significant improvements have been made since the last inspection but these need to be maintained. At this inspection, the overall management of the hospice had improved. Changes had been made to ensure a more robust system is in place to monitor how the service operates and to drive forward improvements. The clinical governance framework is effective and ensured good standards of care (18).

University response:

The learning environment was risk assessed by the link lecturer and service manager in relation to the issues raised in the CQC inspection. Students valued the placement and reported care as effective and caring. An action plan was implemented in relation to CQC issues supported by the university, and additional academic support was made available. With this additional support it was agreed to continue to place students and evaluations continue to be positive (57, 110).

We visited Zoe's Place as part of the practice visits and found that the CQC action plan has been fully implemented and the area was confirmed as a positive student learning environment where caring and respectful nursing practice was evident (63).

Additional external report:

Countess of Chester NHS Foundation Trust, Countess of Chester Hospital, 8 February 2017. The BBC published an article regarding the increased neonatal mortality rate at the NHS trust. It was reported there were 13 unexplained deaths between January 2015 and July 2016. Neonatal intensive care is currently suspended

(19).

What we found at the monitoring visit:

Although identified as a placement provider to the NMC the university reported that it does not currently use the Countess of Chester Hospital for placement experience for either pre-registration nursing or midwifery students. If it was used again the AEI, within the Cheshire and Merseyside Partnership, associated with the placement provider would be consulted as to the status of placements (57).

Meeting to discuss clinical governance and CQC adverse reports, 26 April 2017

In response to issues raised in CQC quality inspection reports a meeting was held with senior education managers and senior trust clinical representatives to assess the joint action taken to protect students' practice learning (57).

We were told that positive and collaborative relationships are maintained between placement providers and senior academic staff at the university, with regular meetings held where all adverse issues are discussed and appropriate action agreed. Learning agreements are in place between the placement providers and the university which places a positive responsibility on all parties to share information about issues that may affect student learning. The university maintains an active database in relation to the outcome of all CQC visits to associated placement providers which records the outcomes of the visit (50, 57).

We were told that, when the CQC has raised issues through inspection visits, the university has an early conversation with the placement provider to identify the extent of the concerns and the possible risks to effective student learning. The university rechecks student evaluations and undertakes a risk assessment with the PEFs and link lecturer and senior practice learning staff when this is appropriate. This activity enables the university to fully assess the risks to student learning and to agree a risk management plan, which may involve the removal of students or implementing additional educational support arrangements for students. They also continue to monitor the students' placement evaluations and to monitor issues. The university and placement providers are confident that this joint collaborative action is effective at managing any risks that arise (57, 109-118).

Follow up on recommendations from approval events within the last year

Programme major modification, BSc (Hons) nursing and social work (children's nursing and social work), 27 April 2016 (4)

The following recommendations were made (4).

Recommendation one: Review arrangements for delivering student feedback (following theory or practice assessment) with a view to integrating subject matter and theoretical components wherever possible (Standard 8.2.3).

Recommendation two: Review opportunities for practice educators and sign-off mentors to meet and discuss students' learning and progression (Standard 9.3.3).

University response:

The university confirmed that the recommendations have been achieved within the action plan for the introduction of the new programme which commences in September 2017. Action has been taken to integrate the student feedback process and to provide opportunities for practice educators and sign-off mentors to discuss student learning and progression (49).

The following potential risks for future monitoring were identified and informed the plan for the monitoring event and were considered in the review of practice learning, APL procedures and programme evaluation arrangements.

- The effectiveness of organisation, allocation, management and evaluation of spoke placements.
- The arrangements for, and quality of, student feedback following practice and theory assessments within the programme.
- Evidence that opportunities exist and have been applied to accredit prior learning AP(E)L.
- Students spend 12 weeks of nursing practice learning during the integrated placement in year four of the programme and the practice assessment document (PAD) and course design accurately reflects this requirement.
- Partnership working between mentors/sign-off mentors and practice educators to support student learning, assessment and progression (4).

Specific issues to follow up from self-report

EHU NMC self-assessment report, 2016-2017 (1)

The university exceptionally reported the following issues and these informed the monitoring visit and were followed up in the review of practice learning:

Nursing service transformation in the NHS: the impact on placement and mentor capacity. The university plans to work effectively with partner organisations to manage associated risks and to continue biennial educational audits to confirm the suitability of practice placements. The university also plans to collaborate with commissioners to identify additional placement capacity and additional mentors and sign-off mentors. The university will continue with a programme of monthly stakeholder meetings and quarterly interprofessional collaborative meetings to identify proactive measures. They will continue to participate in quarterly meetings with commissioning managers from the north west placement network (1, 49, 60).

Mentor, teacher and practice teacher funding to support delivery of short courses, including mentorship preparation at stage two and three, has been subject to cuts of up to 40 percent. The cut to continuing professional education (CPD) funding has the potential to impact upon the pre-registration provision with specific and serious concern regarding the development of mentors. The university aims to continue to

provide approved mentorship modules to trusts and organisations who are prepared to fund through alternative means. In collaboration with partners, the university plans to continue to support programme delivery which includes the growth of mentors (1, 49, 60).

The university identified the following key issues for 2016-2017 annual monitoring:

Changes to NHS services and the merger of services are identified as having the potential to impact on placement and mentor capacity. The faculty reports it works closely with commissioners and partner organisations and meets on a regular basis to identify changes and manage any risks. Monthly stakeholder meetings also continue to support the faculty in addressing placement issues as they arise as well as identifying new provision (1, 49, 60).

The interprofessional practice learning group has been replaced by a faculty strategic practice learning group. This group is responsible for ensuring the governance arrangements for all programmes where practice learning forms part of the curriculum. In order to address the specific practice needs of nursing and midwifery students the departments of nursing and midwifery have formed a group that will specifically address relevant issues that arise (1, 60).

Regarding information technology (IT) data management systems for managing learning in practice, the university report a collaborative project with Merseyside and Cheshire AEs, to review the current system, that culminated in an agreement to purchase a system that could provide data sets required within the current context of health and social care education in practice. To date the system has been purchased and work towards its implementation is ongoing with a provisional implementation date of late 2017 (1, 60).

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 required for NMC registration or annotation**

Risk indicator 1.1.1 - registrant teachers have experience / qualifications commensurate with role in delivering approved programmes.

What we found before the event

The faculty has enough academic and support staff to deliver the programmes to the

required level of quality (49).

The faculty has an agreed tracking procedure to accurately record academic staff professional registrations, to ensure they are up-to-date and to monitor the status of NMC recorded teaching qualifications (37).

What we found at the event

We found that all programme leaders, field leaders and the majority of lecturers supporting the nursing pre-registration programme and the return to practice nursing programme have an active NMC registration and a recorded teaching qualification. Programme leaders act with due regard. The academic staff profile demonstrates strong evidence of excellence in staff development. There is a high commitment to developing the research profile of the academic teaching team through research which engages service users as active participants and is effectively used to inform teaching and learning. Academic staff are enthusiastic and committed to their roles and are motivated to maintain the quality of the programmes that they contribute towards. The faculty's governance procedures are robust and well administered and ensure that all nursing lecturers with a professional qualification are registered with the NMC. Procedures that support lecturers to meet the requirements of revalidation are also robust (1, 37, 49-54, 75, 97, 138).

There is sufficient academic staff dedicated to the delivery of the pre-registration nursing (child) and return to practice nursing programmes. Academic staff and students told us that the programmes are adequately staffed and this was confirmed in programme evaluation reports. We were able to evidence that time was allocated to academic staff to engage in placement visits, the academic advisor role, supporting practice modules, and dedicated time for staff development (40, 50-54, 60-72, 78-79, 82-85, 103-108).

We concluded from the available evidence that the university has adequate resources to deliver the pre-registration nursing (child) programme and the return to practice nursing programme to the standards required by the NMC.

Risk indicator 1.2.1 - sufficient appropriately qualified mentors / sign-off mentors / practice teachers available to support numbers of students allocated to placement at all times

What we found before the event

There are sufficient mentors and sign-off mentors available in practice settings to support the numbers of students (49).

The faculty has a strategy for the management of the hub, spoke and short visit experiences in practice which provides guidance on how the experiences should be managed (39).

What we found at the event

There are sufficient appropriately qualified mentors and sign-off mentors to support the numbers of students on the pre-registration nursing (child) and return to practice nursing programmes. Mentors, sign-off mentors, students and service representatives confirm there are sufficient mentors with due regard to support the numbers of students. The university reports challenges in relation to the adequate supply of placements due to service reconfigurations and the loss of continuing professional education funding for mentor preparation. The university and service partners are effectively managing these challenges. The flexibility of the designated academic team to provide mentor preparation in a number of modes and the effective work of the PEFs to resource new placements are pivotal to this success (1, 31, 50-53, 60-71, 82-85, 90, 103-108).

Mentors and sign-off mentors demonstrate a high commitment and enthusiasm for their roles and this is valued by students. Mentors and sign-off mentors told us that they receive adequate notification of students commencing practice placements. They confirmed that they can access information electronically using the practice learning support system (PLSS) which is a live electronic database which contains all information for students, practice partners and stakeholders across the Cheshire and Merseyside region (61-71, 90, 103-108, 140).

Students told us that they receive sufficient notification of who their mentor or sign-off mentor is and information about the practice environment through the PLSS database in advance of commencing their practice placement (69-71).

Students confirm that they are allocated to sign-off mentors for the return to practice nursing programme and for the final practice placement on the pre-registration nursing (child) programme (61-71, 90, 103-108).

Mentors and sign-off mentors confirm they work with and support students for a minimum of 40 percent of the time on a one to one basis and confirm that when they are not available a co-mentor is assigned. The efficacy of these arrangements is confirmed by students (61-71, 90, 103-108).

Regular meetings and discussions ensure that capacity requirements are forecast and practice learning opportunities meet both present and future workforce demands. This is achieved by regular operational meetings with educational leads and PEFs to plan and monitor capacity and the effectiveness of the learning environments. The review of the educational audits of practice also includes both quality and capacity monitoring in relation to nurses and other health and social care students that may use the placement areas (28, 31, 46-48, 50-53, 60).

Within the pre-registration nursing (child) programme the use of the hub and spoke

model has enabled students to follow the patient pathway and access new experiences with specialist nurses in both health and social care settings. Students report positively on the benefits of these placement opportunities (39, 50-52, 60-71, 90, 103-108).

We concluded from the available evidence that there are sufficient appropriately qualified mentors and sign-off mentors available to support the numbers of pre-registration nursing (child) and return to practice nursing students allocated to placement placements.

Outcome: Standard met

Comments:

No further comments

Areas for future monitoring:

None identified

Findings against key risks

Key risk 2 – Admissions & Progression

2.1 Inadequate safeguards are in place to prevent unsuitable students from entering an approved programme and progressing to NMC registration or annotation

Risk indicator 2.1.1- selection and admission processes follow NMC requirements

What we found before the event

The university has comprehensive admission policies which state commitment to providing a professional admissions service and the pursuit of clear, fair and consistently applied policies and procedures (5, 23).

All candidates for the pre-registration nursing programme undertake a literacy test and a numeracy test as part of the admission procedures (44-45)

The university has an academic regulation in respect of the operation of a criminal conviction panel. The policy is relevant for students who are enrolled on a course carrying professional registration and/or require an enhanced DBS certificate as a condition of entry. If a conviction is identified the student will be referred to the

relevant faculty for initial investigation. Students registered to a programme that leads to a professional registration are made aware that following the initial investigation, a criminal conviction may result in a referral to a university fitness to practise panel (21).

The faculty has a policy for the management of reasonable adjustments across all programmes. The policy relates to reasonable adjustments consistent with the Equality Act 2010 to ensure students are not seriously disadvantaged during their programme of studies (33).

What we found at the event

Pre-registration nursing (child)

We found that the selection and admission processes for the pre-registration nursing (child) programme adheres to NMC standards and requirements. Academic staff and practice placement partners told us that they are involved in the selection process and that they have undertaken equality and diversity training in order to participate in the recruitment procedures. The faculty maintains a register to evidence that participants have undertaken the required training (23, 41-45, 51-53, 81).

Academic staff and practice placement partners told us that the values based interview approach is an effective method of selecting applicants with the requisite personal attributes for a career in nursing. Service users are involved in the face to face interview stage and told us that they developed questions to assess if the students have appropriate caring and compassion attributes. Service users confirmed that they had undertaken training that included equality and diversity training before they participated in the selection process, and this is recorded on a faculty register (51-53, 56, 61-67, 80).

Pre-registration nursing (child) students confirmed that they undertook a DBS check prior to commencing the programme (21-22, 61-67, 73).

The university has a policy for the management of students who are under the age of 18 years at the programme commencement, which is effectively implemented and reported on to protect the students and the public (25, 51-53).

Students requiring reasonable adjustments told us that they receive timely and constructive support in both academic and practice settings to fulfil their role and responsibilities (33, 51-53, 61-67).

Return to practice nursing

We reviewed the files of students studying the return to practice nursing programme and determined that the students had provided evidence of previous NMC registration. There was evidence that a formal interview had taken place with a member of academic staff, a practice representative and service users and carers. There was also evidence that an assessment of the student's learning needs had taken place in the admission stage to enable a realistic plan to be put in place for the student to achieve the requirements for re-entry to the NMC register (74).

<p>We found one student on the return to practice nursing programme who had not had a formal selection interview before commencing the programme. We reviewed the student's personal file and found that the student had been working as a healthcare assistant within an NHS trust prior to commencing the return to practice nursing programme and had been interviewed for the programme by trust staff. The service manager from the NHS trust had written a letter, which was in the student's file, to state that they did not feel that it was necessary to do a joint interview with the student for admission to the programme. The programme leader told us an informal interview had taken place with the student on an open day but there was no record of the interview in the student file. It is a requirement for the programme provider to ensure that students complete a formal interview to assess their suitability to access the return to practice nursing programme and a formal record is evidenced. This requires improvement (68, 71, 74).</p> <p>We met service users who had participated in the selection process for the return to practice nursing programme who had undertaken equality and diversity training. However, we found one service user who had participated in the selection interview for the return to practice nursing programme who had not undertaken equality and diversity training. This service user was a NHS trust governor and had been identified to participate in the selection interview as the trust education manager was sure the service user had undertaken appropriate training; this was confirmed to us in writing. The programme leader told us that she found out prior to the interview that the service user had not undertaken equality and diversity training and she provided a briefing on relevant equality and diversity principles prior to the interview taking place. However, it is an NMC requirement that all participants in the selection interview process must have undertaken formal equality and diversity training. This element of the admission process requires improvement (68-71, 74, 77, 80).</p> <p>We concluded from our findings that the admissions process for the pre-registration nursing (child) programme meets the NMC requirements and is undertaken in partnership with practitioners and service users and carers. However, we concluded that the selection process for the return to practice nursing programme relating to all students completing a formal interview and the equality and diversity training of service users require improvement.</p>
<p>Risk indicator 2.1.2 - programme providers' procedures address issues of poor performance in both theory and practice</p>
<p>What we found before the event</p>
<p>All pre-registration nursing students are required to sign a declaration of good health and good character on entry to year one, year two, year three and on exit from the programme (22).</p> <p>The university has robust fitness to practise procedures. The policy recognises that the university academic awards may result in a professionally recognised qualification</p>

and that academic success alone may not meet all of the professional requirements which might include for example, physical health, mental health, moral or behaviour matters. In confirming appropriate academic qualifications or admission to a professional body and/or statutory registration, the university agrees to satisfy itself that the student will be a safe and suitable entrant to the given profession. The representation of the fitness to practise panel includes a representative from the profession concerned and meets NMC requirements (20).

What we found at the event

Academic staff told us that they are aware of the procedures to address issues of poor performance in either theory or practice. For students who have failed theory or practice assessment components there is a clear reassessment policy that takes into account progression points as well as the NMC 12-week rule (41-43, 51-54, 92, 94-96, 98).

The university has a number of policies to address issues that may arise in relation to a student's behaviour and conduct and these include: sickness and absence; academic malpractice; disciplinary; student code of conduct, fitness to practise; fitness to study; and, reasonable adjustments policy. Where concerns about a student's performance are raised, one of the above policies is drawn upon and implemented, as appropriate. All students are given information at the start of their programme relating to the university code of conduct and professional body requirements, and these documents are included in the student programme handbook (20, 33, 41-43, 59, 91, 99).

During the academic year, 2015/16, the following cases were raised in relation to pre-registration nursing students' performance; five cases of academic malpractice; and, three cases of a disciplinary nature. No cases progressed to a fitness to practise panel. The faculty consider the latter is a success of the procedures that they had implemented in relation to lessons learned regarding students' behaviour which include; highly effective procedures for reviewing good health and character issues within the admission process; monitoring and tracking student behaviour and adopting an early intervention approach when issues arise; a robust personal tutor system; building on lessons learned from past cases; and, ensuring students are aware of relevant issues early in the programme (20, 35-36, 59, 93-95).

The fitness to practise regulations outline the policies and procedures for the composition and role of a fitness to practise panel and meet NMC requirements. The procedures are managed on a faculty wide basis and apply to all health and social care professionals who are subject to a professional code of conduct. We are assured that if there were repeated or more serious cases which suggested serious misconduct, the fitness to practise procedures would be used to assess the professional suitability of the student (20, 59, 93).

We found that fitness to practise policies and procedures are clearly embedded in the programmes and understood by students. All students told us that they are expected

<p>to comply with and use the NMC Code throughout their academic and practice learning work, and they recognise its importance in their development as nurses (20, 59, 61-71).</p> <p>In the pre-registration nursing (child) programme we confirmed that good health and good character forms are signed and completed at all appropriate progression and completion stages. We verified the compliance with this requirement by sampling a selection of student files. Students also confirmed that they complete the declarations at the required stages of the programme (22, 51-52, 61-67, 73).</p> <p>We found that a signed declaration of good health and good character is not completed by students at the end of the return to practice nursing programme to meet the requirements for re-entry to the NMC register. We were told by the programme leader that a final interview takes place with all students to determine that all the NMC requirements for registration are met and that this includes asking the students if they have any issues of health or character to declare. However, students do not complete a signed declaration of good health and good character at the completion of the programme prior to re-entry to the NMC register and a record of this compliance is not made (68-71).</p> <p>We concluded that this element of the return to practice nursing programme requires improvement.</p>
<p>Risk indicator 2.1.3 - programme providers' procedures are implemented by practice placement providers in addressing issues of poor performance in practice</p>
<p>What we found before the event</p>
<p>The faculty has a policy and procedure for managing poor performance in practice which is detailed in a 'managing issues of poor performance in theory and practice' policy (92).</p>
<p>What we found at the event</p>
<p>Mentors, PEFs and link lecturers told us that they are familiar with procedures to manage poor performance across a range of issues from professional conduct through to managing the failing student. PEFs and mentors told us that they know how to manage poorly performing or failing students through the use of action planning facilitated within the PAD. They confirmed that a tripartite approach is taken with a poorly performing student involving the link lecturer (41-43, 51-53, 60-71, 92, 141-142).</p> <p>We concluded that the university's procedures are implemented by practice placement providers in addressing issues of poor performance in practice.</p>

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

17 students applied to use the APL process in the academic year 2015-16, all of whom were admitted to the pre-registration nursing programme. Trends in applications from students wishing to move from another university remain consistent and numbers are low. However, APL has increasingly been used to support service providers to enable their current employees to study the pre-registration nursing programme on a secondment basis. Significantly, these candidates hold a relevant foundation degree and can demonstrate the required prior learning. In addition, service providers have also collaborated with the university to identify suitable applicants with a first degree (in a relevant subject) and have supported their learning in practice before completing a portfolio of evidence which enables their entry onto the MSc nursing programme (1).

There are robust APL processes in place where claims are scrutinised by an established faculty panel. Applicants are required to provide a portfolio of evidence which demonstrates how many credits they wish to have accredited. The pre-registration nurse programme APL coordinator subsequently maps the supporting evidence to the first year core modules. Where questions have been raised about candidates' suitability, applicants have been asked to provide further evidence (1, 34).

The NMC Standards for pre-registration nursing education (2010) enable APL up to 50 percent of the programme. However, the current programme design includes a year-long module of practice that has been agreed across Cheshire and Merseyside partnership and this inhibits this option. The faculty has not had requests for APL beyond the first year of the programme during 2015-16 (1).

What we found at the event

We found that students are supported to make APL applications by the programme admissions tutors. The applications include the use of a portfolio to map learning experience and the transcripts of previously studied programmes which are mapped to the NMC requirements. All completed applications are scrutinised by the APL coordinator and an APL panel who check the claim is worthy of the level of accreditation. All claims recommended for approval are considered by the programme examination board and reviewed by an associated external examiner before the claim is ratified (1, 34, 51-52, 58, 86-87, 130).

The university permits APL claims of up to 50 percent of the programme which is consistent with NMC requirements. However, current practice does not usually

exceed a claim for the first year of the programme as the practice modules for the second year of the programme span the whole academic year (34, 41-42, 58).

The faculty confirmed that during 2015/16, 21 students successfully made APL claims and of these, four were transfers from other AELs, seven had completed a foundation degree on assistant practitioner programmes and ten had completed a portfolio to meet the requirements of year one of the programme (1, 58).

We reviewed the accreditation process for the pre-registration nursing programme, especially for students accessing the master's programme, and those who had undertaken a foundation degree and were accessing the programme at year two after the first progression point. We found that the APL procedures are robust, reliably evidenced and well administrated (34, 58).

We concluded from the available evidence that the APL policies, procedures and practices are robust and ensure that both NMC learning outcomes and hours of theory and practice are fully mapped within the accreditation process.

Outcome: Standard requires improvement

Comments:

The selection process for the return to practice nursing programme must be revised to assure that all students undertake a formal interview to assess their suitability to access the programme. A formal record of the interview must be evidenced.

The selection process for the return to practice nursing programme must also be revised to assure that all participants involved in the selection interview process have undertaken equality and diversity training.

The return to practice nursing programme procedures must be revised to assure that a good health and character form is completed and signed for all students at the completion stage of the programme to inform the registration process and records are kept of this compliance.

Areas for future monitoring:

- The formal interview element of the selection process for the return to practice nursing programme.
- Participants in the selection interview process for the return to practice nursing programme have undertaken equality and diversity training.
- Good health and character forms are completed and signed for all students at the completion stage of the return to practice nursing programme to inform the registration process.

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

A partnership agreement exists for all placement providers between Health Education North West (HENW), education providers, and PVI organisations involved in the provision of practice learning experiences (38).

All practice placements are educationally audited by the use of the electronic multi-professional practice learning environment quality assurance audit tool which was developed collaboratively by the Cheshire and Merseyside practice education partnership multi-professional quality audit working group and the PLSS. The audit tool is reviewed annually in accordance with the agreed terms of reference (5,47).

The university is a partner of the Cheshire and Merseyside practice education partnership educational standards group. The group provides a collaborative forum for partners to engage and discuss systems and processes relating to compliance with the NMC standards (28).

Cheshire and Merseyside practice education partnership has a multi-professional quality audit working group who are responsible for monitoring and maintaining the multi-professional practice learning environment quality assurance audit tool (31).

The university has a policy for safeguarding, whistleblowing and management of a cause for concern. The policy recognises professional bodies expect compliance with the appropriate code(s) of conduct, ethics and practice of statutory, professional and/or regulatory body, and as such all staff and students have an obligation to report to an appropriate authority any actual or perceived breaches of these codes or if anyone else may be at risk. The policy provides a simple flow chart to identify how an issue can be raised and how action should be taken by the university (25, 27).

Cheshire and Mersey practice education partnership has produced a flowchart to guide students when to raise concerns (29).

The university has developed a risk management policy and flow chart about the suitability of practice learning when issues are raised by CQC inspections. The documentation assesses the suitability of a practice learning environment for students following the publication of a CQC report (26).

What we found at the event

We found robust evidence of effective partnerships with practice placement providers and associated AEs at both strategic and operational levels. The faculty manages the learning environment as an active part of the Cheshire and Merseyside practice education partnership and uses the PLSS to monitor the quality of practice learning. The faculty works closely with key placement providers to ensure sufficient, quality practice learning experiences for students on nursing programmes. The partnership agreement between the university and the placement provider is underpinned by a learning agreement between the placement provider and the commissioners HENW. Regular meetings and discussions ensure that capacity requirements are forecast and practice learning opportunities meet both present and future workforce demands (28, 60, 140).

Placement management is highly effective and meets the many challenges that exist from the escalation process, clinical governance reporting and service re-configurations. Effective procedures are in place to protect student learning and to assess if placements need to be additionally supported, withdrawn or rested to protect student learning. There are examples of how these measures have been used successfully to protect student learning and ensure that students are not subjected to either poor educational or patient care practices (60).

Effective policies and procedures are in place to enable students to escalate issues of poor practice in placement areas and they are supported by the university throughout the process. The process for raising and escalating concerns is included in the student's handbook and is located on the students' virtual learning environment (VLE) and available to mentors through mentor support materials. The policy and process is addressed during the university induction session for students and is incorporated in the student's placement induction at the commencement of the programme. Students are aware of the process of how they would raise a concern about poor standards of care. We were told about examples of when this had occurred and we determined that appropriate action had been taken (27, 29-30, 38, 60-71).

Educational audit is effectively undertaken to meet the NMC requirements and involves education staff as active partners. A joint education and practice audit review group monitors that the audit has been effectively undertaken and that action plans are appropriately followed up to achievement. We reviewed the educational audits for all practice placements visited and confirmed that the audits were appropriately completed in partnership between education and service staff and addressed issues that had arisen from quality or clinical governance reports and audits (31, 47, 62-71, 69-91).

Particular scrutiny was undertaken within the monitoring process to reassure the NMC that effective risk management approaches have been adopted to protect student learning in placement areas that have had issues raised within CQC quality inspection reports. Through a series of practice visits and a specific meeting with senior academic and trust staff we confirmed that an effective strategy is in place which effectively manages any risks that exist in these situations (6-19, 26, 57, 109-118).

The university exceptionally reports to the NMC on all issues where there is increased risk and escalates concerns in line with the QA framework in a timely way (1, 60).

The role of the PEF is commended for the significant contribution that it makes in ensuring the provision of positive practice learning experiences for students (60-71).

We concluded from our findings that there is strong evidence of effective partnerships between the university and service providers and associated AEs at all levels, and that there is effective governance of the practice learning environments.

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

What we found before the event

The faculty has an agreed strategy for patient and public involvement (PPI). The overall aims of this strategy are to delineate the systems and processes in place to provide both the opportunities and support for service users and carers to: appropriately engage with students as they progress through their programme (education), and to engage with research activity within the faculty across different levels from individual projects to strategic planning and development (research). In order to achieve these aims the faculty has established a service user and carer council and service user and carer group which have responsibility for implementing the strategy (32).

What we found at the event

We found that programme management and programme development teams include representation from practitioners and service managers (51-53, 61-71, 100-102).

The faculty has an active service user and carer council which manages the engagement of service users and carers across all aspects of faculty educational activity. The service user and carer group has approximately 40 participants who make a contribution across all nurse education programmes. Service users and carers contribute towards programme development and management, the student selection process, simulated learning, and providing feedback in the PAD about the student's performance in care delivery (32, 51-53, 56, 61-71, 75-76, 141-142).

Representatives from the service users and carers group told us that they are highly motivated to contribute towards the pre-registration nursing programme and they felt that their contribution has a positive effect on students. They told us that they contribute significantly towards the selection process and have a valuable role in determining whether the students have appropriate attributes in relation to care and compassion. They told us that they felt part of the faculty team and are well supported and valued by the university. They told us that they accessed training provided by the university to help them in their role (32, 51-53, 56, 61-71, 75-76).

During practice visits we met with service users and carers who confirmed they are asked for their consent for students to be involved in the delivery of their care. They told us that the mentors make the initial approach to gain consent and to explain that their care will not be affected by anything that they wish to record about care received from the student. Mentors confirmed that service users and carers are offered the opportunity to provide the student with feedback on their performance in providing care and this is recorded in their PAD. Any informal verbal testimony provided to the student's mentor is fed back to the student and they are encouraged to record this in their PAD (56, 61-71, 141-142).

We concluded from our findings that practitioners and service users and carers make a significant and important contribution to student learning.

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

What we found before the event

The faculty has a role descriptor for the academic link lecturer role which gives guidelines and standard operational procedures for staff. Link lecturers are expected to establish effective communications between the university and the partner organisation, monitor the learning environment for students, profile the practice area and act as a resource for staff within the partner organisation. The link lecturer role is designed to support and enable mentors and practice educators to fulfil their educational role and support student learning. The role descriptor states that the NMC advises that the role should constitute approximately 20 percent of the lecturer's working hours (40).

What we found at the event

The role and responsibilities of academic staff supporting students in practice placement settings is clear and understood by students, mentors and lecturers. Reports on outputs of this activity are disseminated to share good practice (40, 51-53, 60, 78).

Service managers and mentors confirmed that all practice placement areas have an identified link lecturer. Students confirmed that they are visited by the link lecturer when they are in practice settings; they value the visits and support provided to them. Students gave examples of how the link lecturer visit assists them with their understanding of the programme documentation, learning outcomes and competency requirements (60, 69-71, 78).

During practice visits we noted visible evidence of university academic staff details on display boards with relevant contact details (76-81).

We concluded from the available evidence that academic staff, through the link lecturer role, are effective in supporting students in practice placement settings.

Risk indicator 3.2.3 – records of mentors/practice teachers in private, voluntary and independent placement settings are accurate and up to date

What we found before the event

At the initial meeting, PEFs told us that the records of mentors and practice teachers in the PVI sector placement settings are accurate and up to date (49).

What we found at the event

We found that the live register and database for mentors in the PVI sector placement settings is part of a shared regional system across the Cheshire and Merseyside partnership. The system incorporates details of NHS and non NHS voluntary and independent organisations that facilitate practice learning of students in partner AEs. The system includes placement, mentor and quality assurance data for all practice placements in the region. We viewed the database and confirmed that mentors' and sign-off mentors' details are accurate in terms of being active on the system for the placements visited and confirmed mentors are up to date with annual updates and triennial reviews (51-53, 60-71).

We concluded from the available evidence that the formal records of mentors and practice teachers in the PVI sector placement settings are accurate and up to date.

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

What we found before the event

The Cheshire and Merseyside practice education partnership provides comprehensive guidance for mentors about the role (48).

<p>What we found at the event</p>
<p>The university provides an NMC approved mentor preparation programme which is positively evaluated by participants. Mentors and sign-off mentors told us that they are well prepared and competent for their role in assessing practice competence. They confirmed that they received preparation by the PEF and link lecturer prior to the allocation of students. Mentors and sign-off mentors for both the pre-registration nursing (child) and the return to practice nursing programmes told us that they had a good understanding of the PAD which enables guidance and support for students throughout their programme of study as well as for assessment (48, 60-71, 141-142).</p> <p>We concluded from the evidence available that mentors and sign-off mentors are properly prepared for their role in assessing practice and to protect the public from unsafe practice.</p>
<p>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, and can reflect on, the process they have engaged with</p>
<p>What we found before the event</p>
<p>Cheshire and Mersey practice education partnership, on behalf of all associated AElS, provide update packages for all mentors (46).</p> <p>At the initial meeting, PEFs told us that mentors and sign-off mentors meet the requirements for annual update and triennial review (49).</p>
<p>What we found at the event</p>
<p>We found that the requirements for triennial reviews are well understood and achieved by mentors and sign-off mentors. The completion of the triennial review is correctly recorded on live mentor registers. We verified on the PLSS that all mentors and sign-off mentors are facilitated to attend annual updates. They told us that updates are made available using a combination of online activities and face to face group interactions. They told us that triennial review is undertaken by either the PEF or the placement manager. Mentors and sign-off mentors told us that they get the necessary time to attend updates (60-71).</p> <p>PEFs demonstrated to us the robust alert system within PLSS that informs them when mentor annual updates and triennial reviews are due. Mentors also indicated that they understand and reflect on the processes involved in remaining appropriately updated and current for the purpose of student support and assessment (60-71).</p> <p>From the evidence made available we can confirm that mentors and sign-off mentors</p>

are able to attend annual updates sufficient to meet the requirements for triennial review and understand the importance of being up to date.
Risk indicator 3.3.3 - records of mentors / practice teachers are accurate and up to date
What we found before the event
At the initial meeting, PEFs told us that the records of mentors and practice teachers are accurate and up to date (49).
What we found at the event
<p>We found that the mentor register is held online on the PLSS website which is maintained by the Cheshire and Merseyside partnership in conjunction with PEFs. We sampled the mentor databases for NHS practice placements visited as part of the monitoring process and the records were complete, up to date and accurate. Access to the mentor records by placement staff is password protected. Staff within the university told us that they are able to access the PLSS website in order to confirm that mentors supervising students are live, updated and have undertaken triennial review (61-71).</p> <p>Our findings confirm that mentor registers are accurate and up to date and ensure students are only allocated to mentors who meet NMC requirements.</p>
Outcome: Standard met
<p>Comments:</p> <p>No further comments</p>
<p>Areas for future monitoring:</p> <p>None identified</p>

Findings against key risks
<p>Key risk 4 - Fitness for Practice</p> <p>4.1 Approved programmes fail to address all required learning outcomes in accordance with NMC standards</p>

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 (child) programme

Pre-registration nursing at the university is ranked top in the north west for assessment and feedback, learning resources and personal development (National student survey, 2016) (49).

The current pre-registration nursing programme is designed so that theory and simulated practice hours are integrated and therefore do not count towards the achievement of practice learning hours in nursing. The advantage of this is the opportunity for both skills and knowledge rehearsal, which enables students to prepare for practice learning within a controlled environment. Currently, the students undertake in excess of the 2300 hours of practice learning required to meet the NMC standards during their programme, so it is not required to attribute simulated practice hours. However, whilst practice partners are currently in support of this model, with increasing demands on placement capacity, the programme team will be addressing the ongoing viability of this approach in the future (1).

A minor modification to the programme during 2015/16 was undertaken in order to raise the profile of clinical skills and simulation and this has enabled a more focused approach to the future delivery. Nursing students consistently evaluate their exposure to simulated practice positively, in that it serves to increase their confidence as they progress through the programme (1).

Five key skills are taught through simulation: hand hygiene; care of the deteriorating patient; children’s nursing students are taught a physiological assessment of children of varying ages and abilities; learning disabilities students are taught the ability to communicate using a person-centred approach appropriate to individual needs; and, mental health students are taught communication and assessment skills associated with complex care delivery (1).

In relation to the life sciences, student evaluations have identified that they would like more pharmacology and drug calculation skills (1).

The pre-registration nursing programme has an agreed procedure to track sickness/absence of students (35).

Return to practice nursing programme

The return to practice nursing programme is provided on a part-time basis over 15 weeks, and provides students with the opportunity to enhance self-confidence, gain

current knowledge which reflects the NHS modernisation agenda and develop practice skills in order to competently return to their field of clinical practice. The programme is accessed at degree level. Students are expected to attend both theoretical study days and to complete a minimum of 150 hours in practice which will be facilitated with student preferences and supported by a sign-off mentor (2, 43, 49). Simulation is not used in return to practice nursing programme (1).

What we found at the event

Pre-registration nursing (child) programme

Students undertaking the pre-registration nursing (child) programme told us that their practice learning experiences enable them to meet the required NMC (2010) competencies, progression points and essential skills clusters. This is evidenced in their PADs which mentors and personal tutors verify. Mentors and students also confirmed that they are able to meet generic and field specific competencies throughout the programme. Students told us that they complete mandatory training requirements prior to accessing practice placement experience. Evidence of a student's experience in specific areas of care is demonstrated in their PAD, showing that by the end of the programme the student meets all NMC outcomes and competencies. Programme documentation confirms that during the programme students complete 2300 hours in practice and 2300 hours in theory or the equivalent through APL. The university monitors theory and practice hours to ensure all EU requirements are met. Students confirmed that they work 37.5 hours per week in practice and they experience 24-hour care. Child field nursing students told us that they benefit from learning with the other fields of nursing and they articulated how this enriches their understanding of the needs of the child and family (41-42, 51-52, 61-67, 82-83, 141-142, 144-145).

Students confirmed that they have experienced simulated practice learning and that this is in addition to the hours for learning in practice. Students told us that they undertake objective structured clinical examinations (OSCEs) as part of formative assessment and this helps to ensure that they are safe in practice. They also told us that teaching and learning strategies used throughout the programme are effective in developing their knowledge base and acquisition of skills, and the programme prepares them for the role of the nurse on successful completion of the programme. Practice managers verified students are fit for purpose on successful completion of their programme (61-67, 146).

Return to practice nursing programme

Students undertaking the return to practice nursing programme told us that their prior learning and experience is used positively to aid effective learning and teaching activities and to facilitate achievement of programme outcomes and NMC competencies. The students meet the NMC (2010) outcomes and are prepared for, and conversant with future revalidation requirements (43, 53, 68-71, 84).

<p>We found that the module handbook for the return to practice nursing programme does not contain or make reference to essential information for students relating to the reassessment opportunities that are available to them if they are referred at the first attempt. The information is contained in an undergraduate handbook for continuing professional education programmes and modules, but the students are not aware of the programme requirements as it does not appear in the student or module handbook. It is an NMC requirement that programme documentation should make this information explicit to enable students to monitor their own progress. This requires improvement (43, 68-71, 139).</p> <p>We found that students emerging from the pre-registration nursing (child) programme and the return to practice nursing programme are considered fit for practice by employers and the education commissioners. External examiners confirm that the programmes meet all statutory and academic requirements (55, 61-71, 122-136).</p> <p>We concluded from these findings that students on the pre-registration nursing (child) programme and the return to practice nursing programme achieve the NMC learning outcomes and competencies for entry to the nursing parts of the register. However, we found that the module handbook for the return to practice programme did not contain essential information relating to the reassessment opportunities that are available to students if they are referred at the first attempt and this requires improvement.</p>
<p>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</p>
<p>What we found before the event</p>
<p>The pre-registration nursing (child) programme practice learning experiences enable students to meet the required NMC (2010) generic and field competencies, progression points and essential skills clusters. The PAD includes an ongoing record of the student’s achievement (3-5, 41).</p> <p>Attendance forms are signed and verified in relation to meeting the required practice hours of learning in the practice settings in the pre-registration nursing programme (36).</p> <p>Students on the return to practice nursing programme have an assessment of their learning needs and previous nursing experience in the admission stage, to enable a plan to be put in place for the student to achieve the requirements for re-entry to the NMC register (2, 43).</p>
<p>What we found at the event</p>

Students on the pre-registration nursing (child) programme told us that they are supported by mentors to engage with a wide variety of practice learning experiences to enable them to meet essential skills clusters and the NMC outcomes. Mentors and sign-off mentors confirmed they have good understanding of the PAD. Students are required to demonstrate practice competencies in relation to the domain competencies as described in the Standards for pre-registration nursing education (NMC, 2010). Students have the opportunity for initial planning of their learning experiences supported by their mentor. The PAD includes an ongoing record of achievement which mentors review with their student at their first meeting. Students are allocated to a placement hub and mentors help to identify suitable spoke learning experiences. Spoke placements and visits are aligned to the patient journey. Students identified that these afford an opportunity for interprofessional learning. Feedback from spoke placements is used by the hub mentor to inform the overall assessment of competence (61-67, 142, 144-145).

All students have the opportunity for an interim review which is supported by mentors and reviewed by academic staff. Action plans are put in place where specific needs are identified. Students who are unsuccessful at the first attempt at practice assessment have an opportunity for reassessment (61-67, 142, 144-145).

Students on the return to practice nursing programme confirmed that they are experiencing an individualised bespoke practice experience programme to enable them to achieve the requirements for re-entry to the NMC register (68-71).

Placement providers confirm that poor performance of students is identified, reported and addressed appropriately by the university in partnership with practice placement providers (51-53, 60-71).

Employers and education commissioners confirm that students successfully exiting the pre-registration nursing (child) programme and the return to practice nursing programme are safe, competent and fit for practice (55, 61-71).

We concluded from these findings that students undertaking the pre-registration nursing (child) programme and the return to practice nursing programme achieve all the NMC practice learning outcomes and competencies for entry/re-entry to the NMC register.

Outcome: Standard requires improvement

Comments:

Programme documentation for the return to practice programme must be revised to include essential information for students relating to the re-assessment opportunities that are available if they are referred at the first attempt.

Areas for future monitoring:

- The return to practice nursing programme contains information on the re-assessment opportunities available to students if they are referred at the first attempt.

Findings against key risks
<p>Key risk 5 - Quality Assurance</p> <p>5.1 Programme providers' internal QA systems fail to provide assurance against NMC standards</p>
<p>Risk indicator 5.1.1 - student feedback and evaluation / programme evaluation and improvement systems address weakness and enhance delivery</p>
<p>What we found before the event</p>
<p>The pre-registration nursing programme is subject to a comprehensive evaluation process (49).</p> <p>Cheshire and Mersey practice education partnership has agreed a process with all associated AEs for dealing with areas of concerns raised within learner evaluations (30).</p>
<p>What we found at the event</p>
<p>We found that there are appropriate quality assurance mechanisms implemented to ensure robust methods of evaluating the pre-registration nursing and return to practice nursing programmes, and these include the involvement of programme boards and an annual programme monitoring process. Students told us that there is a strong emphasis throughout the programme on evaluating theory and practice experiences. Practice staff told us that student evaluations of practice learning experiences are made readily accessible to them and that they provide useful feedback for picking up issues or concerns that students may have had during placement experience. Student evaluations are discussed at practice learning team meetings attended by academic staff and PEFs. We scrutinised a sample of student evaluations for theory modules and found them to be largely positive with students, indicating that they found teaching to be relevant and helpful towards preparing them for placement experience. We also sampled student evaluations from practice placements experience and the feedback was positive with students citing the support of mentors as being of a high standard. They also indicated that the learning environments are conducive to meet their learning outcomes (41-43, 51-53, 61-71, 82-88, 90, 100-108).</p> <p>Students on the pre-registration nursing (child) and return to practice nursing programmes confirmed that they elect representatives from their cohorts to address any issues that may arise during the programmes and to be members of the staff</p>

<p>student consultative committee. They consider this a worthwhile mechanism for raising and resolving issues. Students confirm that responses to issues raised are fed back to them through the VLE (61-71, 143).</p> <p>We found that external examiners demonstrate currency in education and practice, have due regard and engage with theory and practice elements of the programme. They meet with students and mentors and monitor the PADs at each progression point and students' portfolios upon completion of the programmes. The proforma used by external examiners for their annual reports asks for evidence that statutory requirements are being met and for activities that confirm that the assessment of practice is a robust process. External examiners' reports are comprehensive and issues raised in the reports are appropriately responded to by programme leaders. The faculty effectively monitors the external examiners' current NMC registration and revalidation requirements (51-53, 119-136).</p> <p>The AEI requirements on the NMC portal are up to date and provide assurance of continuing AEI status (137).</p>
<p>Risk indicator 5.1.2 - concerns and complaints raised in practice learning settings are appropriately dealt with and communicated to relevant partners</p>
<p>What we found before the event</p>
<p>The university has a comprehensive complaints procedure which is approved by the university's academic board (24).</p> <p>The university has a comprehensive safeguarding policy which identifies that the university wishes to adopt the highest standards and take all reasonable steps in relation to the health, safety and welfare of children, young people and adults accessing its services and facilities. The policy states that it is unacceptable for a child, a young person or an adult to experience any form of harm or abuse. Their welfare is paramount and they have the right to protection and support (25)</p>
<p>What we found at the event</p>

Students on the pre-registration nursing programme and the return to practice nursing programme told us they are introduced to the process for raising concerns or complaints from the outset of the programme and that it is reiterated throughout the programme. They told us they are aware of guidance about complaints and concerns from their programme handbooks and teaching about the Code (NMC, 2015). We found that mentors, PEFs and practice managers are all familiar with the processes for dealing with concerns and complaints raised in practice learning settings (24, 27, 29-30, 41-43, 61-73).

The faculty maintains a database record of all concerns and complaints that are raised by students in practice learning settings which details action taken. The record evidences that appropriate action is taken to investigate and resolve the issues raised and that the outcomes are communicated to all concerned. Senior academic staff confirm lessons learned from the process are reported and fed back to practice placements (51-53, 89).

Students confirm that guidance and support is available to them if they raise a concern or complaint and for staff involved in handling the complaints or supporting students. Students and mentors confirm they are confident and supported to escalate a concern in practice and that this would be followed up appropriately (25, 27, 29-30, 61-71).

Mentors, PEFs and service managers confirm that they receive timely student feedback from evaluations on placement learning experiences (30, 61-71, 90, 103-108).

External examiners' annual reports confirm that they engage with the monitoring of both theory and practice elements of approved programmes. The feedback provided by external examiners is appropriately communicated to all relevant staff including mentors and sign-off mentors (119-131).

We concluded from the available evidence that effective procedures exist to enable students to raise complaints and concerns and there is clear evidence that they are appropriately supported.

Outcome: Standard met

Comments:

No further comments

Areas for future monitoring:

None identified

Evidence / Reference Source

1. NMC self-assessment report, EHU, 2016-2017
2. NMC programme approval report, EHU, return to practice nursing, 4 August 2015
3. NMC programme approval report, EHU, pre-registration nursing (adult, child, mental health, learning disabilities fields), 21 March 2012
4. Programme major modification, EHU, (adult nursing and social work, learning disabilities nursing and social work, mental health nursing and social work, children's nursing and social work), 27 April 2016
5. NMC programme monitoring report, EHU, pre-registration adult nursing/community nurse prescribing (V150)/non-medical nurse prescribing (V300), 15 and 16 March 2011
6. CQC, inspection report, Wirral University Teaching Hospital NHS Foundation Trust Arrowe Park Hospital, 10 March 2016
7. CQC, inspection report, Bridgewater Community Healthcare NHS Foundation Trust, 6 February 2017
8. CQC, inspection report, Liverpool Community Health NHS Trust, 8 July 2016
9. CQC, inspection report, Southport and Ormskirk Hospital NHS Trust, Ormskirk District General Hospital, 15 November 2016
10. CQC, inspection report, Wrightington, Wigan and Leigh NHS Foundation Trust, Royal Albert Edward Infirmary, 22 June 2016
11. CQC, inspection report, Abbey Lawns Ltd Abbey Lawns Care Home, 23 January 2017
12. CQC, inspection report, Acorns Care Centre, 23 December 2016
13. CQC, inspection report, Amberleigh House Care Home, 21 March 2017
14. CQC, inspection report, Ashton View Nursing Home, 26 January 2016
15. CQC, inspection report, Elm House Nursing Home, 7 February 2017
16. CQC, inspection report, Manchester House Nursing Home, 9 January 2017
17. CQC, inspection report, Margaret Roper House, 23 November 2016
18. CQC, inspection report, Zoe's Place Liverpool, 18 January 2017
19. BBC, increased neonatal mortality rate at the NHS trust, Countess of Chester NHS Foundation Trust, Countess of Chester Hospital, 8 February 2017
20. EHU, academic regulations 2016/17, fitness for practise regulations, September 2016
21. EHU, academic regulations 2016/17, operation of criminal conviction panels, September 2016
22. EHU, faculty of health and social care, declarations of good health and good character, pre-registration nursing programme, undated
23. EHU, admissions policy, undated
24. EHU, student complaints procedure, 2016-17

25. EHU, policy on the safeguarding of children, young people and adults at risk, 2016
26. EHU, CQC and OFSTED risk management, March 2016
27. EHU, faculty of health and social care, safeguarding, whistleblowing and management of cause for concern, March 2016
28. Cheshire and Merseyside practice education partnership education standards group, terms of reference, September 2016
29. Cheshire and Mersey practice education partnership, learner raising concerns collaborative communication process and flowchart, August 2016
30. Cheshire and Mersey practice education partnership, process for dealing with areas of concerns raised within learner evaluations, August 2016
31. Cheshire and Merseyside practice education partnership, multi-professional quality audit working group, January 2016
32. EHU, faculty of health and social care, service user and carer council and service user and carer group, patient and public Involvement (PPI) strategy for education and research, 2016-2021
33. EHU, faculty of health and social care, management of reasonable adjustments across all programmes, undated
34. EHU, faculty of health and social care, credit use and transfer including recognition of prior learning policy, August 2016
35. EHU, faculty of health and social care, pre-registration nursing programme, procedure for tracking sick/absent students, undated
36. EHU, faculty of health and social care, pre-registration nursing programme, attendance forms to record practice hours, August 2016
37. EHU, faculty of health and social care, tracking professional body registrations and recordable teaching qualifications, 3 August 2016
38. HENW, partnership agreement between HENW, education providers, PVI organisations involved in the provision of practice learning experiences, April 2016
39. EHU, faculty of health and social care, pre-registration nursing programme, Strategy for the management of the hub spoke and short visit experiences in practice, April 2012
40. EHU, faculty of health and social care, academic link lecturer role, guidelines and standard operational procedures for staff, undated
41. EHU, faculty of health and social care, definitive course document, re-validation: pre-registration nursing programme, BSc (Hons) nursing, 21 March 2012
42. EHU, faculty of health and social care, definitive course document, MSc in nursing (pre-registration), 25 February 2013
43. EHU, faculty of health and social care, submission document, return to professional practice nursing, August 2015

44. EHU, faculty of health and social care, BSc (Hons) nursing programmes 2017 entry, interview literacy test, undated
45. EHU, faculty of health and social care, BSc (Hons) nursing programmes 2017 entry, interview maths test, undated
46. Cheshire and Mersey practice education partnership, mentor/educator/supervisor update, April 2015
47. Cheshire and Merseyside practice education partnership and the PLSS, multi-professional practice learning environment, quality assurance audit tool, 2015
48. Cheshire and Merseyside practice education partnership, guidance for mentors, undated
49. Initial visit meeting to agree programme for NMC monitoring event, 4 April 2017
50. Introductory meeting and presentation, 26 April 2017
51. Meeting with child field nursing programme team, 26 April 2017
52. Meeting with adult, mental health and learning disabilities nursing programme teams, 26 April 2017
53. Meeting with return to professional practice, nursing, programme team, 26 April 2017
54. Meeting to discuss lecturer registration database and monitoring processes, 26 April 2017
55. Telephone discussion with education commissioner's representative, 26 April 2017
56. Meeting with service users and carer representatives, 26 April 2017
57. Meeting to discuss clinical governance issues and action taken to protect students when quality issues have been raised in practice placements providers, 26 April 2017
58. Meeting to discuss the APL process, 27 April 2017
59. Meeting to discuss fitness to practise policies and procedures, 27 April 2017
60. Meeting to discuss the management of practice learning, 27 April 2017
61. Meeting with first year BSc (Hons) children's nursing students, 26 April 2017
62. Practice visit to Liverpool Community NHS Trust, Smithdown children's walk in centre to meet students, mentors, service managers and review of educational audit and the mentor register, 26 April 2017
63. Practice Visit to Zoe's Place, children's hospice, voluntary sector placement, to meet students, mentors, service manager and review of educational audit and the mentor register, 26 April 2017
64. Practice visit to Alder Hey Children's Hospital NHS Foundation Trust, medical ward 4C, accident and emergency department, to meet chief nurse, directors of nursing, students, mentors, clinical managers and review of educational audit and the mentor register, 26 April 2017
65. Practice visit to Southport and Ormskirk NHS Foundation Trust, Ormskirk District Hospital, children's ward, neonatal unit, to meet students, mentors senior clinical managers and to review of educational audit and the mentor register, 27 April 2017
66. Practice visit to Lancashire Care NHS Foundation Trust, Birleywood Health Centre (West Lancs East), to meet students, mentors, senior clinical managers and review of educational audit and the mentor register, 27 April 2017

67. Meeting with student, BSc(Hons) to discuss learning disabilities spoke placement experience at Midstream (West Lancs) Ltd. 27 April 2017
68. Visit to Aintree University Hospitals NHS Foundation Trust, Postgraduate Centre, Edge Hill University Campus, to review teaching and learning facilities for return to practice students and to meet senior service representatives, 26 April 2017
69. Practice visit to Aintree University Hospitals NHS Foundation Trust, Aintree University Hospital, main B theatres, ward 16, AMU, ECC day ward, to meet return to practice students, sign-off mentors, senior clinical managers and review of educational audit and the mentor register, 26 April 2017
70. Practice visit to the Walton Centre NHS Foundation Trust, Sherrington ward, to meet director of nursing, return to practice student, sign-off mentor, senior clinical managers and review of educational audit and the mentor register, 26 April 2017
71. Practice visit to Wirral University Hospital NHS Foundation Trust, Arrowe Park Hospital, ward 30, ward 22, to meet deputy director of nursing, head of clinical excellence, PEFs, return to practice students, sign-off mentors, senior clinical managers and review of educational audit and the mentor register, 27 April 2017
72. EHU, staff revalidation portfolio example, my evidence to meet NMC's revalidation requirements, 18 February 2016
73. EHU, faculty of health and social care, pre-registration nursing programme, student files x8, viewed 26 April 2017
74. EHU, faculty of health and social care, return to professional practice, nursing, student files x4, viewed 26 April 2017
75. EHU, faculty of health and social care, evaluative research project, "service user and carers (SUC) opinions of their input into the student curriculum in the faculty of health and social care at EHU", February 2017
76. EHU, faculty of health and social care, notes of the service user and carer council, 22 February 2017
77. EHU, faculty of health and social care, email from multi-professional education manager, Aintree NHS Foundation Trust concerning service user who had not undertaken equality and diversity training prior to undertaking student selection interviews, 27 April 2017
78. EHU, faculty of health and social care, academic link activity record and supporting evidence, 2016/17
79. EHU, faculty of health and social care, staff performance review, academic year 2016/17
80. EHU, faculty of health and social care, register for interview training and updates for service users (includes equality and diversity and safeguarding updates), 2015-2016 and 2016-2017
81. EHU, faculty of health and social care, staff equality and diversity training update register, 2016-17
82. EHU, faculty of health and social care, annual monitoring and review report (AMR), BSc (Hons) nursing, adult, mental health, learning disabilities, child, 2015/16
83. EHU, Faculty of health and social care, annual monitoring and review report (AMR), MSc pre-registration nursing, 2015/16
84. EHU, faculty of health and social care, annual monitoring 2016, nursing, head of department commentary, 2015/16

85. EHU, faculty of health and social care, annual monitoring and review report (AMR), return to professional practice programme, 2015/16
86. EHU, faculty of health and social care, board of examiners meeting, pre-registration nursing programmes, 14 September 2016
87. EHU, faculty of health and social care, board of examiners meeting, pre-registration nursing programmes, 20 April 2017
88. EHU, faculty of health and social care, board of examiners meeting, level six modules 'stand alone' or pathway, return to professional practice, nursing, 1 August 2016
89. EHU, faculty of health and social care, complaints register summary, February 2017
90. EHU, faculty of health and social care, pre-registration nursing, placement evaluation summary, September 2015 to April 2017
91. EHU, faculty of health and social care, report on academic malpractice cases for pre-registration nursing students, 2015/16
92. EHU, faculty of health and social care, managing issues of poor performance in theory and practice, summary, 2015/16
93. EHU, faculty of health and social care, fitness to practise, initial investigation process, April 2017
94. EHU, faculty of health and social care, student tracking database, academic performance, April 2017
95. EHU, Faculty of health and social care, monitoring and tracking of students for retention, summary, April 2017
96. EHU, faculty of health and social care, supporting students with assessment drafts, March 2016
97. EHU, faculty of health and social care, peer review and development policy, March 2016
98. EHU, faculty of health and social care, poor practice as identified in student academic work policy, March 2016
99. EHU, faculty of health and social care, sickness and absence in pre-registration studies policy, March 2016
100. EHU, faculty of health and social care, postgraduate professional education programme board meeting notes, 26 October 2016
101. EHU, faculty of health and social care, pre-registration nursing programmes board meeting notes, 18 October 2016
102. EHU, faculty of health and social care, pre-registration nursing programmes board meeting notes, 17 January 2017
103. EHU, faculty of health and social care, BSc (Hons) nursing, student evaluation report, placement report (PARE), September 2015 cohort, year one, March 2016
104. EHU, faculty of health and social care, BSc (Hons) nursing, student evaluation report, placement report (PARE), April 2015 cohort, year one, March 2016
105. EHU, faculty of health and social care, BSc (Hons) nursing, student evaluation report, placement report (PARE), September 2014 cohort, year two, March 2016
106. EHU, faculty of health and social care, BSc (Hons) nursing, student evaluation report, placement report (PARE), April 2014 cohort, year two, March 2016

107. EHU, faculty of health and social care, BSc (Hons) nursing, student evaluation report, placement report (PARE), September 2013 cohort, year three, March 2016
108. EHU, faculty of health and social care, BSc (Hons) nursing, student evaluation report, placement report (PARE), April 2013 cohort, year three, March 2016
109. EHU, faculty of health and social care, report on placement area with issues raised in CQC/OFSTED quality report, Manchester House Care Home, 25 January 2017
110. EHU, faculty of health and social care, report on placement area with issues raised in CQC/OFSTED quality report, Zoe's Place baby hospice, 30 November 2016
111. EHU, faculty of health and social care, report on placement area with issues raised in CQC/OFSTED quality report, Bridgewater Community Healthcare NHS Foundation Trust, 8 March 2017
112. EHU, faculty of health and social care, report on placement area with issues raised in CQC/OFSTED quality report, Southport and Ormskirk NHS Trust, 12 January 2017
113. EHU, faculty of health and social care, report on placement area with issues raised in CQC/OFSTED quality report, Arrowe Park Hospital and Clatterbridge Hospital, July 2016
114. EHU, faculty of health and social care, report on placement area with issues raised in CQC/OFSTED quality report, Mersey Care NHS Trust, January 2016
115. EHU, faculty of health and social care, link tutor report after CQC inspection reports quality issues, Southport and Ormskirk NHS Trust, April 2015
116. EHU, faculty of health and social care, link tutor report after CQC inspection reports quality issues, Lancashire Care NHS Trust, October 2015
117. EHU, faculty of health and social care, CQC quality reports and lessons learned, presentation, April 2017
118. EHU, faculty of health and social care, link lecturer report after CQC inspection reports quality issues, April 2016
119. EHU, faculty of health and social care, academic standards and quality enhancement committee, review of external examiner activity, 4 July 2017
120. EHU, faculty of health and social care, external examiners annual conference, January 2017
121. EHU, faculty of health and social care, academic standards and quality enhancement committee, peer mentoring for external examiners and flow chart, undated
122. EHU, faculty of health and social care, academic standards and quality enhancement committee, external examiner engagement with students in practice, review of external examiner activity for academic year 2015/2016
123. EHU, faculty of health and social care, annual external examiner report, BSc (Hons) nursing, adult field, 2015/16
124. EHU, faculty of health and social care, response to external examiner's annual report, BSc (Hons) nursing, adult field, 2015/16
125. EHU, faculty of health and social care, response to external examiner's annual report, MSc nursing, adult field, 2015/16
126. EHU, faculty of health and social care, annual external examiner report, MSc nursing, adult field, 2015/16

127. EHU, faculty of health and social care, annual external examiner report, BSc (Hons) nursing, child field, BSc (Hons) children's nursing and social work, 2015/16
128. EHU, faculty of health and social care, response to external examiner's annual report, BSc (Hons) nursing, child field, BSc (Hons) children's nursing and social work, 2015/16
129. EHU, faculty of health and social care, response to external examiner's annual report, MSc nursing, child field, 2015/16
130. EHU, faculty of health and social care, annual external examiner report, MSc nursing, child field, 2015/16
131. EHU, faculty of health and social care, annual external examiner report, BSc (Hons) nursing, learning disabilities field, BSc (Hons) learning disabilities nursing and social work, 2015/16
132. EHU, faculty of health and social care, response to external examiner's annual report, BSc (Hons) nursing, learning disabilities field, BSc (Hons) learning disabilities nursing and social work, 2015/16
133. EHU, faculty of health and social care, response to external examiner's annual report, BSc (Hons) nursing, mental health field, 2015/16
134. EHU, faculty of health and social care, response to external examiner's annual report, MSc nursing, mental health field, 2015/16
135. EHU, faculty of health and social care, response to external examiner's annual report, MSc nursing, mental health field, 2015/16
136. EHU, faculty of health and social care, annual external examiner report, MSc nursing, mental health field, 2015/16
137. AEI requirements, NMC portal, accessed on 14 April 2017
138. NMC register, accessed on 14 April 2017
139. EHU, faculty of health and social care, continuing professional education undergraduate programmes and modules, programme handbook, 2015/16
140. Cheshire and Merseyside, PLSS, flowchart, undated
141. EHU, faculty of health and social care, return to professional practice, practice assessment document and practice learning evidence record, 2016/17
142. EHU, faculty of health and social care, child field practice assessment record including ongoing record of achievement, 2 February 2017
143. EHU, faculty of health and social care, faculty student representative structure, 2017
144. EHU, faculty of health and social care, BSc(Hons) nursing (pre-registration) programme handbook, March 2017
145. EHU, faculty of health and social care, MSc nursing (pre-registration) programme handbook, March 2017
146. Edge Hill University, Better at home suite, available at: <https://www.edgehill.ac.uk/research/category/better-at-home-suite/>, 28 April 2017

Personnel supporting programme monitoring
Prior to monitoring event
Date of initial visit: 04 Apr 2017
Meetings with:
<p>Associate dean/director of nurse education, faculty of health and social care, EHU</p> <p>Associate dean, quality and academic planning, faculty of health and social care, EHU</p> <p>Head of nurse education, student experience, faculty of health and social care, EHU</p> <p>Head of nurse education, programme development, faculty of health and social care, EHU</p> <p>Associate head, nurse education (child lead), faculty of health and social care, EHU</p> <p>Programme leader, return to practice nursing, faculty of health and social care, EHU</p> <p>Programme leader, pre-registration nursing, faculty of health and social care, EHU</p> <p>Practice lead, pre-registration nursing, faculty of health and social care, EHU</p> <p>Practice learning manager, faculty of health and social care, EHU</p> <p>Faculty quality officer, faculty of health and social care, EHU</p> <p>PEF, Mersey Care NHS Foundation Trust</p> <p>PEF, Southport and Ormskirk Hospital NHS Trust</p> <p>PEF, St Helens and Knowsley Teaching Hospitals NHS Trust</p>
At monitoring event
Meetings with:
<p>Introductory meeting and presentation, 26 April 2017</p> <p>Associate dean/director of nurse education, faculty of health and social care, Edge Hill University</p> <p>Associate dean, quality and academic planning, faculty of health and social care, Edge Hill University</p> <p>Head of nurse education, student experience, faculty of health and social care, Edge Hill University</p> <p>Head of nurse education, programme development, faculty of health and social care, Edge Hill University</p> <p>Associate head, nurse education (child lead), faculty of health and social care, Edge Hill University</p>

Programme leader, return to practice, faculty of health and social care, Edge Hill University

Programme leader, pre-registration nursing, faculty of health and social care, Edge Hill University

Practice lead, pre-registration nursing, faculty of health and social care, Edge Hill University

Practice learning manager, faculty of health and social care, Edge Hill University

Faculty quality officer, faculty of health and social care, Edge Hill University

Associate head, nurse education (adult lead), faculty of health and social care, Edge Hill University

Associate head, nurse education (mental health lead), faculty of health and social care, Edge Hill University

Senior lecturer, nurse education (learning disabilities lead) / consultant nurse, Alder Hey Children's NHS Foundation Trust

Professional standards co-ordinator, faculty of health and social care, Edge Hill University

Meeting with child field nursing programme team, 26 April 2017

Associate head, nurse education (child lead), faculty of health and social care, Edge Hill University

Senior lecturer, nurse education (child) x6, faculty of health and social care, Edge Hill University

Lecturer, nurse education (child) x2, faculty of health and social care, Edge Hill University

Faculty assistant registrar, faculty of health and social care, Edge Hill University

Meeting with adult, mental health and learning disabilities nursing programme teams, 26 April 2017

Pathway lead, MSc nursing, faculty of health and social care, Edge Hill University

Pathway lead, BSc nursing, faculty of health and social care, Edge Hill University

Programme leader, pre-registration nursing, faculty of health and social care, Edge Hill University

Associate head, nurse education (adult lead), faculty of health and social care, Edge Hill University

Associate head, nurse education (mental health lead), faculty of health and social care, Edge Hill University

Senior lecturer, nurse education (learning disabilities lead) / consultant nurse, Alder Hey Children's NHS Foundation Trust

Senior lecturer, nurse education (adult) x2, faculty of health and social care, Edge Hill University

Lecturer, nurse education (adult) x3, faculty of health and social care, Edge Hill University

Graduate teaching assistant (adult), faculty of health and social care, Edge Hill University

Senior lecturer, nurse education (learning disabilities), faculty of health and social care, Edge Hill University

Lecturer, nurse education (learning disabilities), faculty of health and social care, Edge Hill University

Graduate teaching assistant (learning disabilities), faculty of health and social care, Edge Hill University

Senior Lecturer, nurse education (mental health) x2, faculty of health and social care, Edge Hill University

Lecturer, nurse education (mental health), faculty of health and social care, Edge Hill University

PEF, Mersey Care NHS Foundation Trust

Meeting with return to professional practice, nursing, programme team, 26 April 2017

Programme leader, return to practice nursing, faculty of health and social care, Edge Hill University

Head of nurse education, programme development, faculty of health and social care, Edge Hill University

Recruitment co-ordinator (return to practice), faculty of health and social care, Edge Hill University

Meeting to discuss lecturer registration database and monitoring processes, 26 April 2017

Head of nurse education, student experience, faculty of health and social care, Edge Hill University

Head of nurse education, programme development, faculty of health and social care, Edge Hill University

Faculty quality officer, faculty of health and social care, Edge Hill University

Professional standards co-ordinator, faculty of health and social care, Edge Hill University

Telephone discussion with education commissioner's representative, 26 April 2017
Programme manager, education transformation and commissioning, Health
Education England

Meeting with service users and carer representatives, 26 April 2017

Service user and carer representatives x5, faculty service user council, faculty of
health and social care, Edge Hill University

Meeting to discuss clinical governance issues and action taken to protect students
when quality issues have been raised in practice placements providers, 26 April
2017

Head of nurse education, student experience, faculty of health and social care, Edge
Hill University

Head of nurse education, programme development, faculty of health and social
care, Edge Hill University

Associate head, nurse education (child lead), faculty of health and social care, Edge
Hill University

Programme leader, pre-registration nursing, faculty of health and social care, Edge
Hill University

Practice lead, pre-registration nursing, faculty of health and social care, Edge Hill
University

Practice learning manager, faculty of health and social care, Edge Hill University

Placement support unit team leader, faculty of health and social care, Edge Hill
University

Faculty quality officer, faculty of health and social care, Edge Hill University

Faculty assistant registrar, faculty of health and social care, Edge Hill University

Meeting to discuss the APL process, 27 April 2017

Head of nurse education, student experience, faculty of health and social care, Edge
Hill University

Head of nurse education, programme development, faculty of health and social
care, Edge Hill University

Pathway lead, MSc nursing, faculty of health and social care, Edge Hill University

Pathway lead, BSc nursing, faculty of health and social care, Edge Hill University

Faculty quality officer, faculty of health and social care, Edge Hill University

Faculty assistant registrar, faculty of health and social care, Edge Hill University

Meeting to discuss fitness to practise policies and procedures, 27 April 2017

Head of nurse education, student experience, faculty of health and social care, Edge Hill University

Head of nurse education, programme development, faculty of health and social care, Edge Hill University

Programme leader, pre-registration nursing, faculty of health and social care, Edge Hill University

Faculty assistant registrar, faculty of health and social care, Edge Hill University

Secretary, fitness to practise panel, faculty of health and social care, Edge Hill University

Meeting to discuss the management of practice learning, 27 April 2017

Head of nurse education, student experience, faculty of health and social care, Edge Hill University

Head of nurse education, programme development, faculty of health and social care, Edge Hill University

Programme leader, pre-registration nursing, faculty of health and social care, Edge Hill University

Practice lead, pre-registration nursing, faculty of health and social care, Edge Hill University

Practice education lecturer, faculty of health and social care, Edge Hill University

Practice learning manager, faculty of health and social care, Edge Hill University

Placement support unit team leader, faculty of health and social care, Edge Hill University

Senior lecturer, nurse education (adult), faculty of health and social care, Edge Hill University

Senior lecturer, nurse education (child), faculty of health and social care, Edge Hill University

Placement development lead, Cheshire and Merseyside, North West placement development network, Health Education England

PEF, Southport and Ormskirk Hospital NHS Trust

PEF, St Helens and Knowsley Teaching Hospitals NHS Trust

Meetings with:

Mentors / sign-off mentors	15
----------------------------	----

Practice teachers	2
Service users / Carers (in university)	6
Service users / Carers (in practice)	6
Practice Education Facilitator	6
Director / manager nursing	11
Director / manager midwifery	
Education commissioners or equivalent	1
Designated Medical Practitioners	
Other:	

Meetings with students:

Student Type	Number met
Registered Nurse - Children	Year 1: 29 Year 2: 4 Year 3: 3 Year 4: 0
Return to Practice Nursing	Year 1: 7 Year 2: 0 Year 3: 0 Year 4: 0

This document is issued for the party which commissioned it and for specific purposes connected with the captioned project only. It should not be relied upon by any other party or used for any other purpose.

We accept no responsibility for the consequences of this document being relied upon by any other party, or being used for any other purpose, or containing any error or omission which is due to an error or omission in data supplied to us by other parties.

M
MOTT
MACDONALD **M**

Protecting the public through
quality assurance of nursing
and midwifery education

NMC Nursing &
Midwifery
Council