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

2016-17
Monitoring review of performance in mitigating key risks identified in the NMC Quality Assurance framework for nursing and midwifery education

Programme provider	Northumbria University
Programmes monitored	Registered Nurse - Adult; Registered Midwife - 18 & 36M
Date of monitoring event	29 Nov-01 Dec 2016
Managing Reviewer	Peter McAndrew
Lay Reviewer	Adrian Mason
Registrant Reviewer(s)	Robert Gallagher, Annie Powell
Placement partner visits undertaken during the review	Pre-registration nursing programme, adult nursing field:
	City Hospitals Sunderland NHS Foundation Trust, Sunderland Royal Hospital, Ward E58, Ward C33
	South Tyneside NHS Foundation Trust, Sunderland East, Riverview Health Centre, Community Team, Treatment Centre Level 2
	Northumbria Healthcare NHS Foundation Trust, Northumbria Specialist Emergency Care Hospital, emergency department
	Northumbria Healthcare NHS Foundation Trust, Blyth Community Hospital, Ward 3
	Barchester Care Home, Bedlington
	Newcastle upon Tyne Hospitals NHS Foundation Trust, Freeman Hospital, central op, NCCC Ward 33, Ward 21 (Cardio ITU)
	Pre-registration midwifery programme:
	Northumbria Healthcare NHS Foundation Trust, Community Midwifery, Ashington
	Northumbria Healthcare NHS Foundation Trust, Northumbria Specialist Emergency Care Hospital, Birthing Centre
	Newcastle upon Tyne Hospitals NHS Foundation Trust, delivery suite, antenatal ward
	Gateshead Health NHS Foundation Trust, Queen Elizabeth Hospital, Maternity Unit, community services, Ward 21
	City Hospitals Sunderland NHS Foundation Trust, Sunderland Royal Hospital, Labour, Birth, Recovery
	South Tyneside NHS Foundation Trust, South

	Tyneside District Hospital, Maternity Unit
	Newcastle upon Tyne Hospitals NHS Foundation Trust, Rye Hill Children's Centre, community central team
Date of Report	12 Dec 2016

Introduction to NMC QA framework

The Nursing and Midwifery Council (NMC)

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

Standards for 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

Category	Key Risk			
Resources	**1.1 Programme providers have inadequate resources to deliver approved programmes to the standards required by the NMC**	1.1.1 Registrant teachers have experience / qualifications commensurate with role 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 Northumbria University's programmes

The department of nursing, midwifery and health ('the department') at Northumbria University is located within the faculty of health and life sciences. The department provides pre-registration nursing and midwifery education for a large geographical area in the north east of England. The department has a state of the art clinical skills centre which is devoted to excellence and provides high quality practical learning experiences. The centre enables students to undertake skills training in a safe and controlled environment and to gain valuable experience of real hospital situations.

The monitoring event reviewed the risks associated with the provision of the pre-registration nursing programme, with the adult nursing field as the practice focus, and pre-registration midwifery programmes.

The current BSc (Hons) pre-registration nursing programme was reapproved conjointly by the university and the NMC in June 2012 with an undergraduate integrated Masters (M Nurs) route. An additional work based learning (WBL) route in the adult nursing field was conjointly approved as a major modification in February 2016.

The current pre-registration three year midwifery programme was conjointly reapproved in June 2012 and the 18 month pre-registration midwifery programme in July 2010. The NMC has subsequently extended approval for the 18 month programme until August 2019.

The monitoring visit took place over three days due to the large geographical area covered by the university, and involved visits to practice placements to meet a range of stakeholders. The practice placement visits selected provided the opportunity to visit a wide selection of hospital and community based placement experiences in both urban and rural settings.

Particular consideration was given to the pre-registration adult nursing student experience in the placements in City Hospitals Sunderland NHS Foundation Trust and South Tyneside NHS Foundation Trust where recent Care Quality Commission (CQC) visits have resulted in adverse findings. Particular consideration was also given to pre-registration midwifery students' experience in Northumbria Healthcare NHS Foundation Trust where midwifery services at the Northumbria Specialist Emergency Care Hospital were rated by the CQC as requires improvement.

Summary of public protection context and findings

Our findings demonstrate that Northumbria University has systems and processes in place to monitor and control all the key risk themes to assure protection of the public.

Resources: met

We found that robust governance procedures ensure that all midwifery and nursing lecturers are registered with the NMC and have a recorded teacher qualification. We found that there is sufficient academic staff dedicated to programme delivery for the numbers of students recruited. Programme leaders act with due regard. The academic staff profile demonstrates strong evidence of excellence in staff development. Academic staff are enthusiastic and committed to their roles. There are

sufficient appropriately qualified mentors and sign-off mentors available to support the number of students. Mentors and sign-off mentors show a high commitment and enthusiasm for their roles with students.

Admissions and progression: met

The admission process meets the NMC requirements and is undertaken in partnership with clinical staff with some service users and carers and student involvement. The procedures would benefit from further engagement of service users and carers and we welcome the plans that have been confirmed to us to actively involve service users and carers in the selection process in the future.

Disclosure barring service (DBS) checks and occupational health clearance are completed before a student can proceed to practice placements and these compulsory procedures are undertaken to protect the public.

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

We found that procedures to address issues of poor performance in both theory and practice are well understood and implemented effectively in the programme areas we monitored and protect the public from poor practice.

Accreditation of prior learning (APL) policies, procedures and practices are robust and ensure that NMC learning outcomes and hours of theory and practice are fully mapped within the accreditation process. The accreditation process for the WBL adult nursing field route of the pre-registration nursing programme is particularly robust and well administrated.

Practice learning: met

We found that strong evidence exists of effective partnerships with service providers at both strategic and operational levels. Practice learning is founded within a strong framework which features a three year strategy for practice learning, a partnership placement agreement and a data sharing agreement. Educational audit is effectively undertaken to meet the NMC requirements and involves education staff as active partners.

Particular scrutiny was undertaken during the monitoring visit to reassure the NMC that effective risk management approaches are being adopted to protect student learning in placement areas that had been subject to adverse CQC inspection reports. Through a process of practice visits and specific meetings with senior academic and trust managers we conclude there is an effective strategy which manages any risks that exist in these situations to assure students' learning.

The role of the practice placement facilitator (PPF) makes a significant contribution in ensuring the provision of positive practice learning experiences for students.

A robust strategy exists for service users and carers' engagement and there is considerable evidence that they are fully involved in programme development and delivery. A number of innovative approaches in relation to service user and carer involvement was identified during the monitoring event. Service users feel valued by the university.

Mentors and sign-off mentors are committed to their role and are supportive to students who are experiencing issues with progression and they are well prepared to fail students when this is indicated.

We found that registers for mentors and sign-off mentors provide an accurate, complete and up to date record.

Fitness for practice: met

We found that students achieve the NMC learning outcomes and competencies for entry to the nursing and midwifery parts of the register. We found that students emerging from the programme are considered fit for practice by employers and educational commissioners. External examiners confirm that the programmes meet all statutory and academic requirements. We found that practice placement providers make a strong investment in students' learning and are committed to provide suitable employment opportunities on qualification. We commend the innovative development initiative jointly undertaken by Northumbria Healthcare NHS Foundation Trust with the university to provide a work based route to the adult nursing field.

Quality assurance: met

All modules and programmes are subject to programme evaluation. The outcomes of programme evaluation are made readily available through online facilities to all parties and especially to practice placement providers. The proforma used by external examiners for their annual reports is comprehensive and specifically 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 responded to appropriately by programme leaders.

Effective procedures exist to enable students to raise complaints and concerns and there is clear evidence that they are appropriately supported.

Summary of areas that require improvement

There are no areas that require improvement.

Summary of areas for future monitoring

- Service users and carers' involvement in the admission process.

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

The midwifery programme pre-registration academic team told us that they are well resourced and are very satisfied with the level of engagement all midwifery academic staff maintain with practice partners through their roles as link teachers. They also told us that relationships at a strategic level with placement providers is a strength of their provision, with the lead midwife for education (LME) and heads of midwifery working closely in several areas of collaboration. The programme team told us that they are committed to providing a good quality educational experience for their student midwives.

The nursing programme pre-registration academic team told us that they have appropriate resources to deliver the programmes to the level of quality that was approved to meet NMC standards. They told us that they maintain strong working relationships with associated placement providers through undertaking the role of lecturers in practice. We were told they have opportunities to engage in continuing professional development which is actively facilitated within the university. They told us that they are very committed to maintaining the high quality of the programmes.

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

Commissioners told us that the university performs well with strong management teams and maintains good collaborative relationships with the associated placement providers. They told us that the university is very responsive to issues raised by commissioners and associated placement providers; a good example of this was the work that they had undertaken on the management of student attrition and through an increased focus on dementia care in the nursing programme. Commissioners told us that all the evidence suggests that the university provides nurses and midwives who are fit for practice and that they are generally recruited locally.

Sign-off mentors for the pre-registration midwifery programmes told us that they are well supported in their mentor role, by practice managers, PPFs and by the university. They expressed a high level of commitment to student learning across all partner trusts visited and are pleased to have qualifying student midwives from the university as colleagues. Practice managers told us that working relationships between the university and the NHS trusts are effective and that they value this at both strategic and operational levels. Midwifery practice managers told us that they offer qualifying student midwives opportunities for applying for employment in their trusts.

All mentors, sign-off mentors, PPFs and employers associated with the pre-

registration nursing programme told us that they have confidence in the programme's ability to provide registrant nurses who are fit for practice. Mentors told us that they receive good preparation for their role and good support from the programme teams and lecturers in practice.

Students

Student midwives told us that they are satisfied with their programmes and are happy to be learning in the university and in the associated placement provider trusts. They told us that they value the mentorship they receive and the close links between practice and the university through the roles of link teachers and PPFs. They told us that the quality of the teaching and feedback from the academic team is of good quality but a small number of students suggested that there could be greater consistency in the teaching quality. Students agree that the programmes prepare them for becoming qualified midwives.

Student nurses told us that they are enjoying their programme of study and that they are positive about the choice of university and their experience within the programme. They confirmed that they receive good support from university academic staff and mentors in practice placements.

Service users and carers

Service users in maternity services told us that they received good quality care from the students and they were very pleased to be able to be looked after by the student midwives from the university.

Representatives from a patient liaison group in South Tyneside Foundation Trust told us that they found that student nurses had positive attitudes towards service users. Other service users that we met in practice visits told us that students were professional, caring and friendly and some commended the care that they had received from students.

Service users and carers who contribute to the development and delivery of the pre-registration nursing and midwifery programmes told us that they felt they made a major contribution to engendering dignity and compassion within the students.

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 (12-18).

The following reports required action(s):

Cambian Appletree, Newcastle (long stay and rehabilitation mental health care for working-age adults). Date of report: 30 August 2016

The CQC rated the provider in relation to whether services were effective as requires improvement. The CQC found that the provider had not fully updated its policies to reflect the changes in the Mental Health Act revised code of practice. Staff understanding of their responsibilities under the Mental Capacity Act varied and staff did not always reflect decisions made about patients' capacity in their care plan (12).

The university response: No students were in placement at the time of the CQC visit or report. Placements have been suspended until the CQC action plan has been achieved and a positive educational audit has been completed (49).

Mental Health Concern, Pinetree Lodge, Newcastle (nursing care for adults living with dementia). Date of report:15 July 2016

The CQC rated the provider as requires improvement. 'Is the service safe?' and 'is the service effective?' were both rated as requires improvement. The CQC found that arrangements for the recording of medicines and for training staff in relation to the Mental Capacity Act and Deprivation of Liberty Safeguards needed to be strengthened (13).

The university response: Student placements have been suspended and ongoing discussions are being held with the placement provider about the provision of future placements after the CQC action plans have been achieved. Students will only return to this area after a positive educational audit has been completed (49).

Akari Care Limited, Princes Court, Newcastle (nursing and residential care for people who are living with dementia). Date of report: 18 October 2016

The CQC rated the provision as requires improvement. 'Is the service safe?', 'is the service responsive?' and 'is the service well led?' were all rated as requires improvement. The CQC found issues with the management of medicines and with the recording of information within people's care records (14).

The university response: Student placements have been suspended and ongoing discussions are being held with the placement provider about the provision of future placements after the CQC action plans have been achieved. Students will only return to this area after a positive educational audit has been completed (49).

St Clare's Hospice, Newcastle. Date of report: 16 September 2016

The CQC rated the provider as requires improvement. 'Is the service safe?', 'is the service effective?' and 'is the service well led?' were all rated as requires improvement. The provider breached the regulations relating to medicines management and good governance. The CQC found that people were not protected against the risks associated with medicines and that staff were not supported in their roles by agreed supervision and appraisal. Patient records were also in need of development to reflect people's views about pain relief and their future care needs (15).

The university response: Student placements continue to take place to St Clare's Hospice. A thorough risk assessment was undertaken and a risk management plan was agreed which included the provision of additional educational support. Student evaluations continue to be very positive about the quality of the learning environment and about the quality of the experience (49).

City Hospitals, Sunderland NHS Foundation Trust. Date of report: 20 January 2015

In relation 'to are services safe?' and 'are services responsive?' the CQC rated the provision as requires improvement. There were a number of areas of poor practice where the trust needs to make improvements to ensure that there are sufficient qualified, skilled and experienced nursing staff available on medical wards and children's services, and to ensure that staff are suitably skilled and supported through

the completion of mandatory training and appraisals, particularly in the accident and emergency department (16).

Risk management plans have been agreed with the placement provider in relation to the concerns raised by the CQC. Risk assessments and joint meetings between the university and placement provider indicated that it was not necessary to remove students but placements were re-audited and additional support is provided for students until action plans are achieved (49).

Northumbria Healthcare NHS Foundation Trust, Northumbria Specialist Emergency Care Hospital. Date of report: 05 May 2016

The CQC rated maternity and gynaecology services as requires improvement. The CQC found a number of areas that required improvement which included improving the services clinical strategy and ensuring that staff know their specific roles. Record keeping and staffing levels across maternity services were also found to require improvement (17).

A joint education and service meeting was held to agree risk management plans in relation to the concerns raised by the CQC. Risk assessments and joint meetings indicated that it was not necessary to remove students but placements were re-audited and additional support is provided for students until action plans are achieved (17, 49, 98).

South Tyneside NHS Foundation Trust, South Tyneside District Hospital. Date of report: 01 December 2015

Urgent and emergency services, medical care, surgery, critical care and services for children and young people were all rated as requires improvement by the CQC. They found poor compliance with mandatory training, and in particular safeguarding, and asked for the review of a number of procedures relating to safe practices (18).

The university response: A joint education and service meeting was held to agree risk management plans in relation to the concerns raised by the CQC. Risk assessment procedures were undertaken jointly. This assessment resulted in the number of students on placement being reduced until the CQC action plan had been achieved. Students who were on placement received additional educational academic support from the practice learning team. Placements were re-audited to confirm suitability against the concerns that had been raised. All this action has been successful and there have been no issues or concerns raised through student evaluations or the student forum (49).

What we found at the monitoring visit:

Meeting to discuss clinical governance/CQC adverse reports: 29 November 2016

In response to CQC quality inspection adverse outcomes a meeting was held with senior education managers and senior trust clinical representatives to assess the joint action taken to protect students' learning in placement areas within services (49).

Relationships between placement providers and senior academic staff at the university were confirmed as very good with regular meetings held where all adverse issues are discussed and appropriate action agreed. A data sharing agreement is 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 (38-39, 49, 99).

We were told that when the CQC has raised adverse 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 discusses risk issues with the PPFs. 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 the students. They also continue to monitor the student's placement evaluations and to monitor issues through discussions at student forums. When concerns have arisen, the university has routinely re-audited the placement environments to identify if the concerns have had any adverse effects on effective student learning. The university and placement providers are confident that this joint collaborative action is effective at managing any risks that arise (28, 49).

The NMC were informed through exceptional reporting procedures of the adverse CQC reports and that in each case there were no unmanaged risks to student learning (5, 41).

Particular scrutiny was undertaken during the monitoring visit to reassure the NMC that effective risk management approaches are being adopted to protect student learning in placement areas that had been subject to adverse CQC inspection reports. Through a process of practice visits and meetings with senior academic and trust managers we can confirm that an effective strategy is in place which manages any risks that exist in these situations to assure student learning (49, 76-78, 84).

Follow up on recommendations from approval events within the last year

NMC programme audit/major modification report; Northumbria University, BSc (Hons) nursing studies/RN (adult nurse), 05 February 2016

Recommendation one: An interim report regarding evaluation of the programme to be provided in a time period of between six to 12 months (1).

An interim report was published in November 2016 and gives an evaluative narrative account of the first six months of implementation and delivery of the approved WBL route into pre-registration adult nursing leading to an award of BSc (Hons) nursing studies/registered nurse (adult) (42-43, 95).

The interim report, completed by the collaborative project team, identified that the strength of the partnership has been pivotal to the success of the initiative. They added that these success factors included the strength of the belief in the project; the strong professional relationships that exist; the mutual respect from all parties; and the commitment to overcome organisational barriers (42-43, 95).

The interim report concluded that "all these factors have contributed to a great student experience, fantastic mentor support and a pathway into nursing that all can be proud of" (95).

Specific issues to follow up from self-report

Issues in the self-assessment report 2015-2016 include:

- The nursing and midwifery academic workforce face the challenges of an aging staff group and being able to recruit to vacant posts with candidates who meet the professional experience requirements of the NMC and the expectations of an academic post within the university.

Effective action has been undertaken to ensure sufficient appropriately registered and qualified staff are employed to deliver nursing and midwifery programmes to the standards required (5, 41).

- Recruitment to the 18 month midwifery programme (PG Dip midwifery studies) has not met an increase in commissioned targets.

Effective action has been undertaken with local NHS trusts and with Health Education North to attempt to improve recruitment and reduce high attrition rates. The university is currently developing a new approach to recruitment and considering options for re-approval (5, 41).

- Patient assessment questionnaire (PAQ), which aimed to provide a reliable and valid indication of student performance in practice from the service user and carer perspective, was discontinued.

The process of gathering and collating up to 10 responses from service users and carers was not feasible without an online system. The questionnaire has been reviewed and piloted in practice. The main change is mentors request feedback on behalf of the student and the feedback is not electronically collated. An alternative system has been implemented to enable students to obtain service user feedback about their practice (5, 41).

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 sound governance procedures that ensure that all nurse and midwifery teachers maintain registration with the NMC and meet the requirements of revalidation (74).

The senior lecturer and lecturer role descriptor includes in the key responsibilities the requirement to engage in research, professional practice, and other scholarly activities in support of the programme and the faculty's academic development programme (33).

What we found at the event

We found that all programme leaders, field leaders and the majority of lecturers supporting the nursing and midwifery pre-registration programmes, have an active registration and a recorded teaching qualification with the NMC. Programme leaders act with due regard. The academic staff profile demonstrates strong evidence of excellence in staff development. Academic staff are enthusiastic and committed to their roles and are motivated to maintain the quality of the programmes that they contribute towards. The department's governance procedures are robust and well administrated and ensure that all midwifery and nursing lecturers with a professional qualification are registered with the NMC (41–46, 74-75, 97).

There is sufficient academic staff dedicated to programme delivery. Academic staff and students told us that the programmes are adequately staffed and this was confirmed in programme evaluation reports. We confirmed that time is allocated to academic staff to engage in placement visits, the academic advisor role, supporting practice modules, outreach work and dedicated time for staff development (33, 43–45, 47).

The LME told us that the teaching resource for pre-registration midwifery programmes is good and has improved since the recent university restructuring exercise. The LME told us she is enabled to fulfil the LME role according to NMC requirements (45).

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 appropriately qualified mentors and sign-off mentors to support the numbers of students on pre-registration nursing and midwifery programmes (41).

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 three yearly capacity forecasting by the placements and partnership office; strategic partnership meetings between the university and key placement providers; regular operational meetings with educational leads and PPFs to plan and monitor

capacity and effectiveness of the learning environments; and educational audit of practice which includes both quality and capacity monitoring (5).

In January 2014, the placement management system within the faculty was upgraded to ARC Audit-Net. This has become embedded and all audits and capacity is immediately available to the university placements office and the placement provider. To ensure placements meet both current and future workforce need, there is an ongoing drive to source and develop new practice learning experiences to add to the placement portfolio (5).

Within the pre-registration nursing programmes, the use of a 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 (5).

What we found at the event

We found that mentors and sign-off mentors show a high commitment and enthusiasm for their roles with students (76–94).

Students told us that they are allocated mentors and sign-off mentors with due regard in placements and that they are supported in their learning. They told us that they experience one-to-one mentorship. Mentors, students, and practice representatives confirm that students are able to work directly with their sign-off mentors for at least 40 percent of their time in practice. Mentors report that they are supported in maintaining their currency by PPFs who provide mentor updates. Mentors and sign-off mentors told us that they are provided with time to perform their roles. Students told us that co-mentoring strategies are deployed to support student learning and to ensure that mentorship continuity is maintained if mentors are absent. Student midwives are allocated a named supervisor of midwives (SoM) in their home trusts (76-89).

Programme teams, practice learning teams and PPFs told us that agreements are in place to specify the number of students that can be accommodated by each placement. Staff at all levels and students could articulate clearly the process for allocating students to placements. Students told us that they are satisfied that efforts are made to meet personal needs and choices in placement allocation (28, 43–45, 53, 76-89).

We found that the hub and spoke placement model is well received and understood. Students told us that they benefit from getting to know a placement but also from being able to follow the patient/client journey and gain experience in other areas. Some students told us that it also enables them to see how services link together (76-89).

We concluded that there are sufficient appropriately qualified mentors and sign-off mentors available to support the number of students.

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 a comprehensive admissions policy which assures equal opportunities for prospective students. All participants in the selection process are required to have undertaken equality and diversity training. Practice staff and service users participate in a value based approach to selection (22-23, 26).

There is a robust procedure in place to manage the learning experiences of students less than 18 years of age going into practice placements and this ensures both protection of the student as well as protection of the public (26).

The university has a disability and dyslexia support team (DDST) which is made up of a DDST manager; four disabilities advisers; two dyslexia support tutors and a number of dyslexia tutors who work on a variable hours basis; two student support coordinators; and, a student support administrator. The purpose of DDST is to provide information, advice, guidance and support to disabled students at all stages of their university career and also to provide this to other staff working with students with disabilities (37).

What we found at the event

Pre-registration midwifery programmes

We found the selection and admissions processes to be robust and inclusive. The programme team told us that there is a strong focus on maternity service users as part of the admissions process although, at present, there are not enough service users available to participate in face-to-face interviews with all applicants. We were told that a values based approach to selection is undertaken with some direct service user input. There are currently developments being planned across the faculty to strengthen the values based approach to selection through multiple mini interviews (MMIs) with increasing service user involvement. Selection and recruitment events include practice partners. Heads of midwifery (HoMs) told us that they enable midwives to be involved in

this important activity. HoMs told us that they value their involvement in the 'sifting' of applications to the midwifery programmes in order to contribute to the high calibre of applicants accepted onto the programmes. There is a robust process in place to ensure that all students have had DBS checks and health clearance prior to commencing on placement. The LME and programme team confirm that if there was a delay in clearance, students would not be allowed to commence placement. This is clearly documented in programme information received by applicants (21, 45, 69, 84-89, 96, 109).

Pre-registration nursing programme (adult field)

We found that selection and admission processes adhere to NMC standards and requirements. Academic staff and practice partners told us that they are involved in the selection process. They have undertaken equality and diversity training in order to participate in the recruitment procedures (76-82).

Academic staff and practice 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 (26, 76-82).

Service users are involved at the group interview stage through an audio-visual scenario that applicants must then write about in order to determine their suitability for nursing. It is particularly used to identify if applicants have appropriate caring and compassion attributes. We were told by academic staff that development work was currently taking place to strengthen the values-based approach to selection and to enhance the involvement of service users in the process (43, 96).

Students confirmed that they had a DBS check prior to commencing the programme. They also confirmed that they complete a good health and good character declaration at the commencement of enrolment in each year of and at the end of the programme (76-82).

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 (37, 76-82).

We concluded from our findings that the admissions process meets the NMC requirements and is undertaken in partnership with practice placement providers, with some service users and carers' and student involvement. The procedures would benefit from further engagement of service users and carers and we welcome the plans that have been confirmed to us to actively involve service users and carers in the selection process in the future.

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

What we found before the event

The university has policies and procedures applying to cheating, plagiarism, and other forms of academic misconduct (29).

The procedures that are fully implemented for the professional suitability to practise process embrace the NMC's fitness to practise requirements. These procedures are mirrored by a DBS process and panel which investigates issues that have arisen from DBS and health checks on admission to the programmes. Academic misconduct procedures converge with the professional suitability to practise processes. These procedures are well managed and rigorous (11).

What we found at the event

Pre-registration midwifery programmes

Students confirmed that they completed annual self-declarations of good health and character as part of their re-enrolment processes and clearly understand the rationale for this. The programme team, mentors, PPFs and managers told us that the processes for addressing students' poor performance are well developed and are understood and used by mentors and programme team members with the support of managers and PPFs. Students told us about their personal experiences of requiring additional support to improve their performance. They confirmed that this was provided by mentors and guidance tutors and included the use of the practice assessment documentation and ongoing achievement record. The processes for addressing students' performance in their academic work are robust and enable close monitoring of progress where concerns have been identified. The LME told us that she completes the final good health and good character declaration prior to students' applications for admission to the NMC register (21, 45, 69, 83-89, 93-94).

Pre-registration nursing programme (adult field)

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 (19-20, 43).

We were told that three students studying the WBL adult route had failed a module at the second progression point. This was identified as a challenge, as the students had only six months to achieve all the requirements for progression. The students were given additional focused support to improve their critical academic writing skills; they met the assessment requirements and progressed at the second attempt. The lessons that have been learned are discussed in the interim evaluation report and have been implemented (43, 71, 95).

Fitness to practise procedures are contained in the handbook of student regulations under section three, student disciplinary rules and procedures. The section outlines 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 professional codes of conduct (107).

The fitness to practise panel considered three cases for pre-registration nursing students (two adult field and one learning disabilities field) in the academic year 2015/16. The cases were for alleged unauthorised falsification of practice assessment

documentation and poor practice. We scrutinised the veracity of the management of these cases at a meeting with senior academic staff and concluded the procedure was comprehensive, reliable and robust (52, 100-101, 107-108).

We were also told that there had been 16 proven cases of academic misconduct in relation to pre-registration nursing and midwifery students. These cases were dealt with under the academic misconduct procedures and primarily concerned issues of collusion or plagiarism. None of the cases required the intervention of the fitness to practise panel. 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 (29, 52).

We found that fitness to practise policies and procedures are clearly embedded in the programme and understood by students. and fitness to practise requirements are embedded throughout the curriculum. All students told us that they are expected to comply with and use the NMC Code throughout their academic and practice learning work, and they recognise its importance in their development as professionals (24, 43–45, 76–89).

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

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What we found before the event

Procedures to identify and address poor performance in practice are fully implemented and follow a set procedure that is well understood by mentors, sign-off mentors and students (41).

What we found at the event

Pre-registration midwifery programmes

Mentors, PPFs and managers told us that the university processes for addressing students' poor performance in practice are well developed and are understood and used by mentors with the support of managers, PPFs and the midwifery learning teams (MLTs). Mentors gave us examples of how they had used the process to raise concerns about a student's practice performance, and manage action plans to support the students' development. Mentors told us how the processes, including MLT support, were helpful to them when they needed to fail students due to poor practice performance (84-89).

Pre-registration nursing programme (adult field)

Mentors and PPFs 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. PPFs and mentors told us that they know how to manage poorly performing or failing students through the use of action planning facilitated within the practice assessment document (PAD). They confirmed that a tripartite approach is taken with a poorly performing student involving the guidance tutor (54-56, 60-61, 76-

82).

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

We found that the university has comprehensive policies and procedures to support a framework for APL, APEL (accredited prior experiential learning), and AWBL (accredited work based learning) (30).

What we found at the event

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 (30, 51, 104-105).

We scrutinised the accreditation process for the recently approved WBL adult nursing field route which awards 50 percent of the programme. We found that the APL procedures are robust, reliably evidenced and well administered. (1, 51, 105).

There is no APL allowed for pre-registration midwifery programmes, which meets NMC standards.

Outcome: Standard met

Comments:

Service users and carers have only a limited involvement in the admission process. A plan has been developed and is being implemented to increase their active engagement in the process.

Areas for future monitoring:

Service users and carers' involvement in the recruitment and selection 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

There is considerable evidence of strong and effective partnerships between education and service providers at both strategic and operational levels. The school and associated service providers have fully embraced the concept of 'building a learning community of practice' and this has engendered a high level of commitment to the provision of practice learning from all stakeholders (11).

Northumbria University works closely with key placement providers to ensure sufficient, high quality practice learning experiences for students on nursing and midwifery programmes. The partnership agreement between the university and the placement provider, is underpinned by a learning and teaching agreement between the placement provider and the commissioners Health Education North (HEN). Regular meetings and discussions ensure that capacity requirements are forecast and practice learning opportunities meet both present and future workforce demands (5, 35).

The university has a practice learning strategic plan for programmes leading to professional accreditation, 2015-2018. The strategy states that placements and programme teams must work to identify and minimise the risk whilst ensuring that the university's duty of care is maintained and followed (36).

The measurement of the quality of the practice placement as a learning environment has always been a collaborative venture between the university and associated placement providers. This partnership is based upon developing all placement areas to create a learning community where team working, evidence based practice and 'lifelong learning' are a priority. To support this, NHS practice placement providers employ PPFs to give continuity of support and advice, and implement initiatives that enhance the quality and capacity of practice placements (27-28).

The educational audit of practice is a tool used to measure the quality of the learning environment. It represents standards that must be achieved in order for a practice learning environment to be considered suitable for students (27-28).

The policies and procedures for raising concerns in practice continue to evolve in relation to policy advice and lessons learnt through managing incidents and concerns. Policy development is always in partnership with key placement providers and with student representation. Increasingly, service user organisations and representatives are part of this process and the faculty values their input (5, 25).

The university has comprehensive procedures for tracking the outcomes of CQC inspection visits. All inspections which raise an adverse report are jointly reviewed to manage any risks that may be presented to student learning and safe practice. The tracking database is accurate and up to date (12-18, 38-39).

What we found at the event

Strong evidence exists of effective partnerships with service providers at both strategic and operational levels. Practice learning is founded within a strong framework which features a three year strategy for practice learning, a partnership placement agreement and a data sharing agreement. Educational audit is effectively undertaken to meet the NMC requirements and involves education staff as active partners (27-28, 35-36, 41-42, 76–89, 99).

Particular scrutiny was undertaken during the monitoring visit to reassure the NMC that effective risk management approaches are being adopted to protect student learning in placement areas that had been subject to adverse CQC inspection reports. Through a process of practice visits and specific meetings with senior academic and trust managers we have been able to determine that an effective strategy is in place which manages any risks that exist in these situations to assure student learning (12–18, 38-39, 41-42, 49, 76-78, 84).

Placement management is 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 withdrawn or rested to protect student learning. We were told of examples of how these measures have been used successfully. Where it was appropriate these escalated issues have been exceptionally reported to the NMC. These measures meet the requirements to protect student learning and ensure that students are not subjected to either poor educational or patient care practices (34–36, 42, 49, 53, 120-121).

The role of the PPF makes a significant contribution in ensuring the provision of positive practice learning experiences for students (49, 53).

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

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

What we found before the event

Practitioners are involved in programme development and delivery and there is evidence of how they have contributed to changes to the programmes. Service users and carers are involved in aspects of the programme management and delivery and there are plans being implemented for their engagement within the selection process, the provision of patient narratives as learning resources and the formal participation in student assessment. The faculty undertook an innovative pilot study into service users and carers providing much more structured and statistically reliable feedback on their experience of receiving care from students (11).

The faculty has a comprehensive policy for service user and carer engagement. This faculty strategy has been co-produced from the meetings of the service user and carer working group. It represents the collaboration of experiences of service users and

carers, academic and administrative staff who have actively worked to involve service users and carers. It covers a wide range of activities service users and carers could be involved in, including: selection and recruitment of students; contributing to identifying important areas of content for curricula or questions for research; development of learning materials e.g. scenarios for seminar sessions; working in a research team to develop an outline proposal for funding; undertaking training in teaching or research methods; and, preparing material and presenting to groups inside or outside the university (40).

What we found at the event

We found strong evidence that practitioners and service users and carers are involved in programme development and delivery.

Practitioners told us that they contribute to the programme delivery by providing teaching sessions at the university and being involved in curriculum development and planning activities. Practice managers told us they are committed to enable clinical staff to participate in teaching, recruitment and development activities at the university (76– 89).

The faculty has a robust strategy for service users and carers' engagement which is ambitious and fully captures the requirements of contemporary healthcare practice. The strategy contains realistic timescales for the achievement of the set targets and the implementation is driven by a service user and carer working group (40).

Service users and carers who contribute to the development and delivery of the pre-registration nursing and midwifery programmes told us that they felt they make a major contribution to engendering dignity and compassion within the students. They told us that they participate in a broad range of activities with students which include: making videos that were shown on interview days; delivering teaching sessions based on their personal experiences; writing patient narratives; participating in role plays as patients; and, creating awareness of the issues of old age and dementia. They told us that the initiative in relation to dementia awareness had been shortlisted for a nursing times award. They told us that their contributions are evaluated very well by students and that they feel valued by the university (50).

Pre-registration midwifery programmes

Mentors told us that they contribute to the programme delivery by attending face-to-face sessions at the university and some are involved in curriculum development and planning groups. Practice managers in all trusts told us of their commitment to enable trust staff to participate in teaching, recruitment events and activities at the university.

The LME and programme team told us that they consider the input of service users essential in programme development and delivery. Service users or their representatives are present on curriculum planning groups and have actively participated at programme approvals. The LME and programme team told us that they are working with other faculty staff and the faculty service user working group to ensure a user focus is maintained and enhanced through the development of a blended learning package that includes user scenarios. Students told us about service user-based study activities which they attend within their home trusts and these include

service user-led bereavement sessions and breastfeeding peer support groups. Maternity service users' views of student performance in practice are actively sought in a range of ways and they are encouraged to contribute to the practice assessment process through providing 'witness testimonies' to mentors about students' performance. Practice managers and PPFs told us that if student midwives are named in feedback from the 'friends and family' survey of care, they are contacted directly to ensure that they receive the feedback which can contribute to their assessment and development (45, 85-88, 109-110).

Pre-registration nursing programmes (adult field)

Practitioners and service users and carers are involved in programme development and delivery. Students stated that they are required to obtain written feedback on their nursing care from service users as part of their portfolio development, using the newly introduced service user questionnaires (SUE-Qs). Students also told us that they had regularly obtained service user feedback through patient testimonies prior to the recent introduction of SUE-Qs. Students gave examples of service user involvement in teaching and assessment which includes participating in objective structured clinical examinations (OSCEs), role play scenarios and direct classroom discussions. Students particularly evaluated a module entitled 'values and principles for nursing people in later life' which had a major service user and carer input. They told us that it was very effective in helping them understand the role, challenges and needs of the carer. Mentors confirmed that they also participate in obtaining student service user feedback in a variety of forms during practice learning experiences and that this helps inform them in their assessment of student performance (19-20, 76-82, 106).

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

What we found before the event

Students and practice teachers report that they are well supported in practice settings by academic staff (11).

The lecturer role description includes supporting the assessment of students in clinical practice through meetings with students and mentors during placements (34).

Providing practice learning support to students is central to the university's healthcare programmes. One approach to support in practice is the promotion of practice learning teams (PLT). The approach used by South Tyneside Foundation Trust PLT is to promote the concept of a 'community of practice' through the use of practice learning supervision sets (PLSS) (5, 34).

What we found at the event

Pre-registration midwifery programme

We found many examples cited across all trusts of the value and visibility of academic staff in practice settings chiefly through their roles as MLTs. Students and mentors agree that the MLTs are valuable as sources of support for them and in the practice

assessment processes. There is 20 percent of work time allocated for the link teacher role to support practice learning in the workload model used in the faculty. The programme team members told us that they meet this requirement. Students told us that MLTs are available to them through a variety of means such as email and telephone during placements as well as by face-to-face visits (83-89).

Pre-registration nursing programme (adult field)

All practice learning areas have an identified lecturer in practice who supports the learning environment. Students confirmed that they are also visited by their guidance tutors who are their personal lecturers who provide individual support. They told us that they value visits and the support that they provide to them. The students gave examples of how the guidance tutor assists them with their understanding of the programme documentation, learning outcomes and competency requirements. Mentors and practice managers confirmed that university academic staff visit placement areas and discuss the students' progress and learning experiences. They also told us that lecturers in practice provide curriculum updates to mentors as required. During practice visits we noted visible evidence of relevant university staff details on display with relevant contact details (43, 76-81).

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

Mentor and practice teacher registers are comprehensive and up to date. Triennial review is fully implemented and the quality of the live register could be further enhanced if the date for the triennial review was inserted on the record (11).

What we found at the event

We found that the live register for mentors and sign-off mentors are complete, accurate and up to date for all practice placement providers. The live register for the associated NHS trust providers is maintained within the trust and the private and independent sector is maintained by the university (117).

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

There is strong evidence that mentors and practice teachers are properly prepared for their role in assessing practice. They reported that they felt confident, up to date and prepared to fail students when it is appropriate (11).

What we found at the event

Pre-registration midwifery programmes

Mentors told us that they are properly prepared for their role as mentors and value the support that they receive from the practice manager to undertake the role. New student mentors undertake the NMC approved mentor programme and are supported in their mentoring role during the programme by a sign-off mentor in their workplace. Practice managers and PPFs confirm that becoming a mentor is part of the workplace employment policy for all qualified midwives (84-89).

Pre-registration nursing programmes (adult field)

Mentors told us that they are well prepared and competent for their role in practice. They confirmed that they have a good understanding of the practice assessment documentation to guide and support students throughout their programme of study. The faculty has an NMC approved programme to prepare mentors to develop their knowledge and competence to facilitate learning and assessment for a range of learners to meet the standards to support learning and assessing in practice (NMC, 2008). The content includes exploration and evaluation of current theories and debates that impact upon practice learning as well as how to manage the poor performing and/or failing student (76–82, 102-103, 118-119).

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

What we found before the event

Mentors and sign-off mentors attend annual updates and meet the requirements for triennial review (34, 41).

What we found at the event

Pre-registration midwifery programmes

Mentors told us that they undertake annual updates and that this is built into their mandatory training schedule; this is confirmed by practice managers. Mentors described annual updates as useful in helping them to become familiar with any changes to programme assessment documentation or programme updates, and to provide the opportunity to share examples of assessment scenarios. Mentors and PPFs told us that there are flexible opportunities for mentors to undertake updates including face-to-face and online approaches. Mentors told us that they understand the requirements for triennial review. MLTs and PPFs work together to provide appropriate updates and midwifery mentors are encouraged to use their mentor experience and development towards NMC revalidation (45, 83-89).

Pre-registration nursing programmes (adult field)

Mentors and sign-off mentors told us that updates are made available using online activities and face-to-face group interactions. They told us that triennial reviews are undertaken by either the PPF or the placement manager as part of their appraisal system. Evidence from mentors indicates that they get the necessary time to attend updates to enable continued student support and assessment. Mentors told us that they receive email alerts through the ARC intranet system informing them when their updates and triennial reviews are due. Mentors told us that they understand the importance of the requirements to remain updated and how this was a prerequisite of student support and assessment (34, 76-81).

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

What we found before the event

Records of mentors are accurate and up to date and are maintained by PPFs (41).

What we found at the event

Mentor records are maintained on secure databases that include the dates of updates and triennial reviews. PPFs maintain the currency of the data and the register is accessible by password protection to appropriate staff through the internet. Academic staff told us that they have access to the database for mentors in their allocated areas. We were shown the mentor registers for all trusts visited and they are up to date. The register clearly identifies mentors who are active or currently inactive, for example through being absent long-term from work (34, 45, 76-84, 115-117).

Outcome: Standard met

Comments:

No further comments

Areas for future monitoring:

None identified

Findings against key risks

Key risk 4 - Fitness for Practice

4.1   Approved programmes fail to address all required learning outcomes in

accordance with NMC standards

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

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

What we found before the event

The university provides a three year pre-registration midwifery programme that was approved in 2012 (3, 6, 10).

The postgraduate diploma in midwifery studies (pre-registration shortened programme) meets the needs of qualified adult nurses who already hold a degree and wish to undertake a midwifery programme. The programme was developed in partnership with stakeholders, service users, students and programme team members. The programme meets the NMC standards for pre-registration midwifery education. The programme has recently experienced some recruitment difficulties and a development plan is in place. The programme was subject to a minor modification in 2016 to increase the programme hours to 3000 hours to meet EU requirements (2, 5, 8, 10).

The pre-registration nursing BSC (Hons) programme was approved in 2012. The curriculum uses a spiral approach that has generic modules with field application. The PAD has used a creative and innovative approach to assessment using a variety of tools to triangulate feedback to the student (4, 9).

Northumbria University was commissioned by Northumbria NHS Foundation Trust to deliver a work-based route through the current NMC approved three-year programme leading to the award of BSc (Hons) nursing studies with registration (adult). The route uses APL which allows suitably qualified and experienced candidates (healthcare assistants employed by this NHS trust) to access the programme at its mid-point. Students are 'work-based' by nature of their employment with the trust as supernumerary status nursing students on this full-time programme. On successful completion of the programme with registration as a nurse, the student is guaranteed a job with the trust for a period of five years. This is a pilot initiative and is part of the trust's nursing workforce development strategy. The initial commission was for two cohorts of 10 students with two intakes in March and September. The students join the other students on the three year route for the majority of their theory sessions (1).

The university also provides an M Nurs. route to the pre-registration nursing programme which was approved through a major modification approval process in 2012 (7, 9).

What we found at the event

Pre-registration midwifery programmes

Students told us that they receive clear programme information about what they are

expected to achieve during the programme. It also informs them about the learning resources and teaching and learning support available during the programme. Students told us that they are satisfied with the quality of the teaching on the programme and value the learning experienced in the practice environment which helps them achieve practice skills and to apply theoretical knowledge to their practice.

Students told us that the quality of feedback from the programme team is very good and enables them to develop their academic skills. Student portfolios include documentation on theory and practice hours undertaken in accordance with the EU directive. Students and the programme team told us that simulated learning is a key part of the learning and teaching strategy for the programmes and involves a variety of methods including clinical skills teaching, medicines management and numeracy, using a virtual learning environment and face to face sessions. Students told us they value the variety of opportunities for simulated learning. Mentors told us that student midwives are pro-active in identifying learning opportunities and in linking theory to practice. Some mentors commended student midwives for sharing their theory knowledge when in practice and feel it enhances the knowledge of peers and midwives they are working alongside (45, 63–69, 83-89, 111-113).

Pre-registration nursing programmes (adult field)

Students 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 PAD which mentors and guidance tutors verify. Mentors and students also confirmed that they are able to meet generic and field specific competencies throughout the programme. Adult nursing students meet the requirements of the EU directives. Evidence of students' experience in specific areas of practice are demonstrated in their personal and professional development file (PPDF) and skills passport showing that by the end of the programme students meet 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. Care delivery is over a 24 hour and a seven day week period. Students told us that they work 37.5 hours per week in practice and confirm they experience 24 hour care (19, 54-58, 60-62, 70-73, 76–81, 114).

Students confirmed that they have experienced simulated practice learning and that this is in addition to the hours for learning in practice. They told us that they undertake OSCEs as part of formative assessments 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 and acquisition of skills and prepares them for the role of adult nurse on completion. This was verified by practice managers who stated that students are fit for purpose on successful completion of their study (76-82).

We found that students emerging from the pre-registration nursing and midwifery programmes are considered fit for practice by employers and educational commissioners. External examiners confirm that the programmes meet all statutory and academic requirements (48, 76–94).

We found that practice placement partners make a strong investment in student learning and are committed to providing suitable employment opportunities on qualification. We commend the innovative and collaborative approach jointly undertaken

by Northumbria Healthcare NHS Foundation Trust with the university to provide a WBL route to the adult nursing field (1, 62, 71, 95).

We concluded from these findings that students achieve the NMC learning outcomes and competencies at all progression points and for entry to the nursing and midwifery parts of the register.

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

What we found before the event

For midwifery programmes the external examiners comment on the clear lecturer involvement in tripartite assessment and support for graded practice. They particularly support the use of PebblePad as an e-portfolio to facilitate and record students' learning and assessment in clinical practice. They state it provides a user-friendly interface which facilitates the challenging nature of evidencing learning and grading practice. Lecturers engage with students and sign-off mentors to support the initiative in practice, and have also produced a YouTube video to inform and support mentors (5).

What we found at the event

Pre-registration midwifery programmes

We found that the NMC midwifery practice outcomes and essential skills clusters are embedded in the curriculum and are evidenced in the PADs to demonstrate each student's achievement and progression. Student midwives and mentors told us that the breadth of experience available to students ensures that they are able to practise and complete all skills at each level of the programme. PADs demonstrate students' achievements at each progression point. PAD exemplars demonstrate the effective use by mentors in giving student feedback to enable their development and to grade assessment of practice. Students and mentors confirmed their understanding of the purpose of the PAD and the ongoing record of achievement.

Service providers are confident that any issues of poor performance in student midwives' practice is always promptly addressed. Mentors and managers confirm that students exiting the midwifery programmes are safe, competent and fit for practice and employment in their trusts. All students confirm that they are able to achieve the requirements of the programmes including the essential skills and the EU directive. Students on the 18 month programme told us that they find it challenging to achieve all practice competencies within the programme but confirmed that they are able to do so (62–69, 83-89, 93-94, 111-113).

Pre-registration nursing programme (adult field)

Students told us that the skills passport is the tool they use to record attainment of skills and competencies throughout all three years of the programme. This is integrated into their PPDF to demonstrate achievement of all NMC practice learning outcomes and

competencies at progression points and on completion of the programme. Mentors confirmed it also allows them to see any outstanding skills and competencies that students must achieve. Mentors told us that they have a good understanding of the PAD. Each of the skills within the passport are explicitly mapped to the NHS knowledge and skills framework (KSF), the NMC essential skills clusters and the NHS Litigation Authority Standards (54–60, 76–82).

We found that the M Nurs. and the BSc (Hons) pre-registration nursing (WBL) routes, which are of shorter duration through the application of APL, include robust process to ensure that they are safe and effective and enable students to achieve the required standards of competency at the point of registration. Students on the WBL route told us that they have additional support from a clinical educator who works alongside the allocated mentor to help them to achieve the NMC competencies and essential skills (76-82).

We concluded from these findings that students achieve all the NMC practice learning outcomes and competencies at progression points and upon entry to the register.

Outcome: Standard met

Comments:

No further comments

Areas for future monitoring:

None identified

Findings against key risks

Key risk 5 - Quality Assurance

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

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

What we found before the event

All modules and programmes are subject to programme evaluation for each cohort and evaluated by the programme team annually (41).

The external examiner role is specified in a role descriptor. The role includes monitoring the assessment of practice and meeting with students and practice assessors. The annual reporting form asks if professional requirements are met (31-32).

What we found at the event

Pre-registration midwifery programmes

We found that there is a comprehensive range of methods for students to give feedback and evaluation on the midwifery pre-registration programmes. Students told us that the university actively encourages them to voice their concerns about the quality of the programme. Students told us of examples of how they had raised concerns through the programme evaluation process with the programme team about their workload of assessments while trying to develop their caseload in practice. They told us that they felt their concerns were listened to by the programme team and that they had influenced change to the assessment schedule (45, 83-89).

Pre-registration nursing programmes (adult field)

We found that there are appropriate quality assurance mechanisms implemented to ensure robust methods of evaluating the programme. 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 PPFs. 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 for placement experience. We also sampled student evaluations from placements visits and the feedback was found to be overwhelmingly 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 (43, 76–82).

Students confirmed that they elect representatives from their guidance tutor groups to address any issues that may arise during their programme. They consider this is a worthwhile mechanism for liaising with teaching staff (76-89).

We found that external examiners engage with theory and practice elements of the programme including meeting with students and mentors and the monitoring of 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 (43-45, 76-89, 90-94).

The AEI requirements on the NMC portal are up to date and provide assurance of continuing AEI status (41).

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

What we found before the event

The university has comprehensive policies and procedures in place to enable students to raise complaints and concerns about practice learning (41).

What we found at the event

Pre-registration midwifery programmes

The LME, programme team and practice managers told us that the systems for communication between practice placement providers on issues raised in practice settings are effective in enabling joint working on action plans to address any concerns or complaints raised in a timely way. We were told of a number of examples by practice managers of the effectiveness of the partnership working and how issues have been resolved or escalated as required (41, 45, 84-89).

Pre-registration nursing programmes (adult field)

Students told us that 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. We found that students, mentors, PPFs and practice managers are all familiar with the processes for dealing with concerns and complaints raised in practice learning settings (43-44, 76-82).

We concluded 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

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33. Northumbria University role description; senior lecturer/lecturer (adult nursing), undated

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42. Initial meeting to set the scene for the NMC monitoring visit, 29 November 2016

43. Meeting with adult nursing field programme team, 29 November 2016

44. Meeting with child, mental health and learning disabilities nursing fields programme teams, 29 November 2016

45. Meeting with pre-registration midwifery programme team, 29 November 2016

46. Meeting to review lecturers' CVs, registration database and revalidation arrangements, 29 November 2016

47. Meeting to review faculty leadership, 29 November 2016

48. Meeting with education commissioner, 29 November 2016

49. Meeting to review clinical governance issues and adverse CQC quality reports, 29 November 2016

50. Meeting to review service user and carer involvement, 29 November 2016

51. Meeting to review arrangements for the accreditation of prior learning, 30 November 2016

52. Meeting to review fitness to practise procedures and practices, 30 November 2016

53. Meeting to review the management arrangements for practice learning, 30 November 2016

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midwife - programme handbook 2015/16

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77. South Tyneside NHS Foundation Trust, Sunderland East, Riverview Health Centre, Community Team, Treatment Centre Level 2, meetings with mentors, students, PPF and service users, 29 November 2016

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79. Northumbria Healthcare NHS Foundation Trust, Blyth Community Hospital, Ward 3, meetings with mentors and students, 30 November 2016

80. Barchester Care Home, Bedlington, meetings with mentors and students, 30 November 2016

81. Newcastle upon Tyne Hospitals NHS Foundation Trust, Freeman Hospital, central op, NCCC Ward 33, Ward 21 (Cardio ITU), meetings with PPFs, education leads, service leads, lecturers in practice, mentors and students, 30 November 2016

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85. Newcastle upon Tyne Hospitals NHS Foundation Trust, delivery suite, antenatal ward, meetings with mentors and students, 29 November 2016

86. Gateshead Health NHS Foundation Trust, Queen Elizabeth Hospital, Maternity Unit, community services, Ward 21, meetings with service leads, PPFs, midwifery lecturers, service user lead in trust, mentors, students and service users, 30 November 2016

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with mentors, students and service users, 30 November 2016

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102. Northumbria University sign-off mentor experience record, undated

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registration student midwife portfolio, 31 July 2015

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115. Live register of mentors, Northumbria Healthcare NHS Foundation Trust, 29 November 2016

116. Live register of mentors, South Tyneside NHS Foundation Trust, 29 November 2016

117. Live register of mentors, Northumbria University, private and independent sector placements, practice placements and partnerships office,1 December 2016

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121. Northumbria University, faculty of life and health sciences, policy and procedure for the removal of a practice placement area, updated 2013

Personnel supporting programme monitoring
Prior to monitoring event
Date of initial visit: 08 Nov 2016
Meetings with:
Head of department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University
Associate pro vice chancellor learning and teaching, faculty of health and life sciences, Northumbria University
Head of nursing and midwifery, faculty of health and life sciences, Northumbria University
Director of practice learning, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University
Lead midwife for education/director of learning and teaching, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University
Director of technology enhanced and online learning, faculty of health and life sciences, Northumbria University
Quality support manager, faculty of health and life sciences, Northumbria University
Programme leader, pre-registration midwifery, three year programme, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University
PPF, Northumbria Healthcare NHS Foundation Trust
PPF, Newcastle upon Tyne Hospitals NHS Foundation Trust
At monitoring event
Meetings with:
Initial meeting to set the scene for the NMC monitoring visit, 29 November 2016:
Head of department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University
Associate pro vice chancellor learning and teaching, faculty of health and life sciences, Northumbria University
Head of nursing and midwifery, faculty of health and life sciences, Northumbria University
Director of practice learning, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University
Lead midwife for education/director of learning and teaching, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University
Director of technology enhanced and online learning, faculty of health and life sciences, Northumbria University

Quality support manager, faculty of health and life sciences, Northumbria University

Programme leader, pre-registration midwifery, three year programme, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Director of nurse education, Northumbria Healthcare NHS Foundation Trust

PPF, Northumbria Healthcare NHS Foundation Trust

PPF, Newcastle upon Tyne Hospitals NHS Foundation Trust

Meeting with adult nursing field programme team, 29 November 2016:

Programme leaders, pre-registration BSc (Hons) nursing programme, adult field x 3, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Programme leaders, pre-registration M Nurs programme, adult field x 2, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Programme leader, pre-registration BSc (Hons) nursing programme, adult field WBL route, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Director of practice learning, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

PPF, Northumbria Healthcare NHS Foundation Trust

PPF, Newcastle upon Tyne Hospitals NHS Foundation Trust

Meeting with child, mental health and learning disabilities nursing fields programme team, 29 November 2016:

Programme leader, pre-registration BSc (Hons) nursing programme, mental health field, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Programme leader, pre-registration BSc (Hons) nursing programme, children's nursing field, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Programme leader, pre-registration BSc (Hons) nursing programme, learning disabilities field, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Senior lecturer, pre-registration BSc (Hons) nursing programme, mental health field, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Senior lecturer, pre-registration BSc (Hons) nursing programme, children's nursing field, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Senior lecturer, pre-registration BSc (Hons) nursing programme, learning disabilities field, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

PPF, Northumbria Healthcare NHS Foundation Trust

Meeting with pre-registration midwifery programme team, 29 November 2016:

Programme leaders, pre-registration BSc (Hons) midwifery programme x 2, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Programme leader, postgraduate 20 month pre-registration midwifery programme, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Lead midwife for education/director of learning and teaching, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Midwifery lecturers x 2, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Midwifery service representative, Northumbria Healthcare NHS Foundation Trust

PPF, Northumbria Healthcare NHS Foundation Trust

Meeting to review lecturers' CVs, registration database and revalidation arrangements, 29 November 2016:

Head of department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Quality support manager, faculty of health and life sciences, Northumbria University

Meeting to review faculty leadership, 29 November 2016:

Faculty pro vice chancellor, faculty of health and life sciences, Northumbria University

Head of department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Faculty associate pro vice chancellor, strategic workforce development, faculty of health and life sciences, Northumbria University

Meeting with education commissioners, 29 November 2016:

Contracting and commissioning manager, HEN

Quality manager, HEN

Meeting to review clinical governance issues and adverse CQC quality reports, 29 November 2016:

Head of nursing and midwifery, faculty of health and life sciences, Northumbria University

Director of practice learning, department of nursing, midwifery and health, faculty of

health and life sciences, Northumbria University

Lead midwife for education/director of learning and teaching, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Placement Manager, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Deputy director of nursing South Tyneside NHS Foundation Trust

PPF, Northumbria Healthcare NHS Foundation Trust

Meeting to review service user and carer involvement, 29 November 2016:

Lead for service user and carer engagement/reader in disability and mental health, department of social work, education and community, faculty of health and life sciences, Northumbria University

Service user and carer working group member, faculty of health and life sciences, Northumbria University

Service user and carer representatives x 5

Senior lecturers x 3, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Meeting to review arrangements for APL, 30 November 2016:

APEL coordinator, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Programme leader, pre-registration BSc (Hons) nursing programme, adult field WBL route, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Senior lecturers x 2, APL accreditation, pre-registration BSc (Hons) nursing programme, adult field WBL route, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Meeting to review fitness to practise procedures and practices, 30 November 2016:

Fitness to practise panel coordinator, faculty associate pro vice chancellor, strategic workforce development, faculty of health and life sciences, Northumbria University

Faculty registrar, faculty of health and life sciences, Northumbria University

Head of nursing and midwifery, faculty of health and life sciences, Northumbria University

Lead midwife for education/director of learning and teaching, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Meeting to review the management arrangements for practice learning, 30 November 2016:

Student placement manager, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Director of practice learning, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Programme leaders, pre-registration BSc (Hons) nursing programme, adult field x 2, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Programme leader, pre-registration BSc (Hons) nursing programme, adult field WBL route, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

Senior lecturers x 2, department of nursing, midwifery and health, faculty of health and life sciences, Northumbria University

PPF, Northumbria Healthcare NHS Foundation Trust

PPF, Newcastle upon Tyne Hospitals NHS Foundation Trust

Meetings with:

Mentors / sign-off mentors	48
Practice teachers	
Service users / Carers (in university)	6
Service users / Carers (in practice)	6
Practice Education Facilitator	8
Director / manager nursing	8
Director / manager midwifery	4
Education commissioners or equivalent	2
Designated Medical Practitioners	
Other:	

Meetings with students:

Student Type	Number met
Registered Nurse - Adult	Year 1: 10 Year 2: 4 Year 3: 33 Year 4: 0
Registered Midwife - 18 & 36M	Year 1: 5 Year 2: 3 Year 3: 10 Year 4: 0