

2016-17

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

Programme provider	Swansea University
Programmes monitored	Registered Nurse - Children; Registered Midwife - 18 & 36M
Date of monitoring event	21-23 Mar 2017
Managing Reviewer	Peter Thompson
Lay Reviewer	Jane Suppiah
Registrant Reviewer(s)	Diane Fraser, Lesley Saunders
Placement partner visits undertaken during the review	<p>Pre-registration nursing (child)</p> <p>Hywel Dda University Health Board: Glangwili Hospital paediatric ambulatory care unit (PACU)</p> <p>Abertawe Bro-Morgannwg University Health Board: Princess of Wales Hospital, Bridgend: paediatric assessment unit, special care baby unit (SCBU), children's ward</p> <p>Abertawe Bro-Morgannwg University Health Board: Flying Start Team, Townhill community primary school</p> <p>Abertawe Bro-Morgannwg University Health Board: Fforestfach Health Centre</p> <p>Cardiff and Vale University Health Board: Children's Hospital of Wales, Rainbow Ward</p> <p>Ysgol Crug Glas (independent provider)</p> <p>Pre-registration midwifery</p> <p>Hywel Dda University Health Board: Singleton Hospital, labour ward, ward 18, day assessment unit</p> <p>Hywel Dda University Health Board: West Wales</p> <p>Abertawe Bro-Morgannwg University Health Board: Neath Port Talbot midwifery led unit</p> <p>Abertawe Bro-Morgannwg University Health Board: Swansea community team South</p>
Date of Report	03 Apr 2017

Introduction to NMC QA framework

The Nursing and Midwifery Council (NMC)

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

Standards for nursing and midwifery education

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

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

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

QA and how standards are met

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

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

Review is the process by which we ensure that AEIs continue to meet our education standards. Our risk based approach increases the focus on aspects of education provision where risk is known or anticipated, particularly in practice placement settings. It promotes self-reporting of risks by AEIs and it engages nurses, midwives, students, service users, carers and educators.

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

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

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

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

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

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

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

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

Summary of findings against key risks

Resources	1.1 Programme providers have inadequate resources to deliver approved programmes to the standards required by the NMC	1.1.1 Registrant teachers have experience / qualifications commensurate with role in delivering approved programmes.			
	1.2 Inadequate resources available in practice settings to enable students to achieve learning outcomes required for NMC registration or annotation	1.2.1 Sufficient appropriately qualified mentors / sign-off mentors / practice teachers available to support numbers of students allocated to placement at all times			
Admissions & Progression	2.1 Inadequate safeguards are in place to prevent unsuitable students from entering an approved programme and progressing to NMC registration or annotation	2.1.1 Selection and admission processes follow NMC requirements	2.1.2 Programme providers' procedures address issues of poor performance in both theory and practice	2.1.3 Programme providers' procedures are implemented by practice placement providers in addressing issues of poor performance in practice	2.1.4 Systems for the accreditation of prior learning and achievement are robust and supported by verifiable evidence, mapped against NMC outcomes and standards of proficiency
Practice Learning	3.1 Inadequate governance of and in practice learning	3.1.1 Evidence of effective partnerships between education and service providers at all levels, including partnerships with multiple education institutions who use the same practice placement locations			
	3.2 Programme providers fail to provide learning opportunities of suitable quality for students	3.2.1 Practitioners and service users and carers are involved in programme development and delivery	3.2.2 Academic staff support students in practice placement settings	3.2.3 Records of mentors/practice teachers in private, voluntary and independent placement settings are accurate and up to date	
	3.3 Assurance and confirmation of student achievement is unreliable or invalid	3.3.1 Evidence that mentors, sign-off mentors, practice teachers are properly prepared for their role in assessing practice	3.3.2 Mentors, sign-off mentors and practice teachers are able to attend annual updates sufficient to meet requirements for triennial review and understand, and can reflect on, the process they have engaged with	3.3.3 Records of mentors / practice teachers are accurate and up to date	
Fitness for Practice	4.1 Approved programmes fail to address all required learning outcomes in accordance with NMC standards	4.1.1 Documentary evidence to support students' achievement of all NMC learning outcomes, competencies and proficiencies at progression points and or entry to the register and for all programmes that the NMC sets standards for			
	4.2 Audited practice placements fail to address all required learning outcomes in accordance with NMC standards	4.2.1 Documentary evidence to support students' achievement of all NMC practice learning outcomes, competencies and proficiencies at progression points and upon entry to the register and for all programmes that the NMC sets standards for			
Quality Assurance	5.1 Programme providers' internal QA systems fail to provide assurance against NMC standards	5.1.1 Student feedback and evaluation / programme evaluation and improvement systems address weakness and enhance delivery	5.1.2 Concerns and complaints raised in practice learning settings are appropriately dealt with and communicated to relevant partners		
Standard Met		Requires Improvement			Standard Not met

Introduction to Swansea University's programmes

The college of health and human sciences (the college) within Swansea University delivers a number of nursing and midwifery programmes across two sites. This monitoring review focuses on the pre-registration nursing programme (child) and the pre-registration midwifery programme.

The college works closely with Abertawe Bro-Morgannwg University Health Board (ABMUHB) and the Hywel Dda University Health Board (H DUHB) who provide practice placements over a large geographical area. Students are supported in practice by mentors/sign-off mentors and practice education facilitators (PEFs), education liaison nurses and education liaison midwives (the term PEF will be used throughout this report for all three roles).

The pre-registration nursing (adult, child and mental health) programme was approved on 22 June 2012 and is provided at degree level. An extension to approval of the programme was granted by the NMC until 31 August 2019 pending publication of the revised standards for pre-registration nursing education.

The BSc (Hons) nursing (child) programme has one intake a year in September. There were 23 students enrolled in 2016 and commissioned numbers are planned to increase to 31 in 2017.

There is a three-year and 18 month pre-registration midwifery programme which were approved on 27 January 2011. The three-year pre-registration midwifery programme is provided as a BMid (Hons) midwifery award. The 18 month pre-registration midwifery programme has two routes: a BMid (Hons) midwifery and a graduate diploma in midwifery. The NMC has extended the approval of the pre-registration midwifery programmes until 31 August 2019 pending publication of the revised NMC standards for pre-registration midwifery education.

20 students enrolled on the three-year pre-registration midwifery programme and four enrolled on the 18 month programme in September 2016. These were the first students admitted to the latter programme since 2012. The college plans to recruit 33 students for the three-year programme in September 2017.

The monitoring visit took place over three days and involved visits to practice placements to meet a range of stakeholders.

Summary of public protection context and findings

Our findings conclude that Swansea University has systems and processes in place to monitor and control three of the five risks to meet NMC standards and assure protection of the public. The key risks of admissions and progression, and practice learning are not met and the university is required to implement an action plan to ensure these risks are controlled.

20 September 2017: The university implemented an action plan to address the unmet outcomes. Evidence has been submitted to demonstrate completion of the action

plan. The key risk themes admission and progression and practice learning are now met and the identified risks are controlled.

The control of the key risks is outlined below.

Resources: met

We conclude that the university has adequate appropriately qualified academic staff to deliver the pre-registration nursing (child) programme and the pre-registration midwifery programmes to meet NMC standards. The university is advised to monitor academic resources closely and provide assurance to the NMC that resources are in place to support the planned increase in numbers of students for the pre-registration nursing (child) programme in September 2017.

We confirm from our findings that there are sufficient appropriately qualified mentors and sign-off mentors available to support the number of students studying the pre-registration nursing (child) programme and the pre-registration midwifery programmes to meet NMC standards.

Admissions and progression: not met

We conclude that there are adequate safeguards in place to prevent unsuitable students from entering the pre-registration nursing (child) and pre-registration midwifery programmes.

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

The university has procedures in place to address issues of poor performance in both theory and practice. These procedures are sufficiently robust to manage issues of concern about a student's professional conduct whether academic, or practice related. We found evidence of effective implementation of these procedures and examples of where students have been discontinued from the programme, which demonstrates the rigour of the process in ensuring public protection.

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

We conclude that the college does not request students to complete health declarations at progression points and on programme completion. The university must implement an action plan to ensure that this is fully addressed for all students undertaking pre-registration nursing and midwifery programmes to ensure full compliance with NMC requirements and for the protection of the public (2.1.2).

20 September 2017: A review of the evidence confirmed that pre-registration nursing and midwifery students completed health declarations at progression points and on programme completion. Systems and processes are now in place to ensure that this key risk is controlled. The key risk 2.1.2 is now met.

Practice learning: not met

Our findings conclude that there are well-established and effective partnerships between the university and placement providers at all levels.

The university has worked in partnership with commissioners and practice placement providers in responding in a timely and appropriate manner following concerns raised by external quality monitoring, which may impact on the practice learning environment.

However, exceptional reporting to the NMC in a timely manner in accordance with the Quality Assurance framework part four (NMC, 2016) requires improvement (3.1.1).

Students understand the importance of the escalating concerns policy should they need to raise issues of concern arising in practice placements. We are confident that concerns are investigated and dealt with effectively and the public is protected.

There is a well-established and dedicated service user and carer group, and we confirmed that service users and carers are involved in all aspects of the pre-registration nursing (child) programme and the pre-registration midwifery programmes.

There is a good network of direct support for students in practice placements from mentors, sign-off mentors and PEFs.

We found evidence of investment in the preparation and support of mentors and sign-off mentors. All mentors and sign-off mentors are appropriately prepared for their role of supporting and assessing students. There is a clear understanding held by sign-off mentors about assessing and signing-off competence to ensure students are fit for practice.

We conclude that in one health board the mentor registers are not accurate and up to date. The university must implement an urgent action plan to ensure mentor registers are an accurate and comprehensive record of mentors' eligibility for undertaking the role and NMC requirements are met (3.3.3).

20 September 2017: A review of the evidence confirmed that revised systems and processes are now in place to ensure that all placement providers maintain accurate and comprehensive records of mentors' eligibility for undertaking their role in supporting students to meet NMC requirements. The standard 3.3.3 is now met and the key risks are controlled.

Fitness for practice: met

Our findings conclude that learning, teaching and assessment strategies in the pre-registration nursing (child) programme and the pre-registration midwifery programmes enable students to meet the required programme learning outcomes at progression points and the NMC standards and competencies for entry to the NMC register. Mentors and employers describe students completing the programme as fit for practice and purpose.

Quality assurance: requires improvement

Our findings conclude there are effective quality assurance processes in place to manage risks, address areas for development and enhance the delivery of the pre-

registration nursing (child) programme and the pre-registration midwifery programmes.

There is no formal procedure to ensure external examiners have current NMC registration and meet revalidation requirements (5.1.1). This requires improvement.

Summary of areas that require improvement

20 September 2017: Documentation submitted by the university confirms that pre-registration nursing and midwifery students completed health declarations at progression points and on programme completion. Revised systems and processes are now in place to ensure that all practice placement providers maintain accurate and comprehensive mentor registers to confirm mentors' eligibility to undertake their role in supporting students and to meet NMC requirements. The key risk area admission and progression (2.1.2) and practice learning (3.3.3) identified below are now met.

The following risk areas are not met:

Admission and progression (2.1.2)

The university fails to comply with the NMC requirement that self-declarations of health are signed by pre-registration nursing (child) students) and pre-registration midwifery students at progression points and on completion of the programme.

- The university must implement an action plan to ensure that self-declarations of health are completed and signed for all students undertaking pre-registration nursing and midwifery programmes to ensure full compliance with NMC requirements and for the protection of the public.

Practice learning (3.3.3)

Not all records of mentors managed by the HDUHB are accurate and up to date. This relates to placement areas supporting pre-registration nursing (child) students and pre-registration midwifery students.

- The university must implement an urgent action plan to ensure mentor registers are an accurate and comprehensive record of mentors' eligibility for undertaking the role and NMC requirements are met.

The following areas require improvement:

Practice learning (3.1.1)

- The university should ensure that exceptional reporting to the NMC takes place in a timely way in accordance with the Quality Assurance framework part four (NMC, 2016).

Quality assurance (5.1.1)

- The university should ensure effective monitoring of external examiners' current registration and revalidation requirements.

Summary of areas for future monitoring

- Sufficiency of academic resources to support students studying the pre-registration nursing (child) programme.
- Pre-registration nursing and midwifery students complete and sign health declarations at progression points and on completion of the programme.
- The university escalates concerns to the NMC in a timely way.
- Records of mentors are accurate and up to date.
- The university works in partnership with health boards to enable all pre-registration midwifery students to have a small caseload.
- The university monitors external examiners' NMC registration to ensure currency and revalidation requirements are met.

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

Pre-registration nursing (child)

We found the pre-registration nursing (child) programme team has effective working partnerships with practice placement providers. They maintain supportive contact with all students through good teamwork and effective use of the personal tutor role. They are confident that effective systems are in place to support child field nursing students in relation to theory and practice learning.

Pre-registration midwifery

The lead midwife for education (LME) and members of the midwifery teaching team have clear insight into all elements of the pre-registration midwifery programmes.

They presented a cohesive approach to programme management. The team demonstrate a motivated approach to learning and teaching and are especially enthusiastic in supporting students. There is evidence of their continued engagement in clinical practice.

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

The commissioner confirmed that there is a good working relationship with the university; academic staff are responsive and flexible in their approach to nursing and midwifery education. Annual quality monitoring activities indicate that all contractual requirements are met to a high level. We were told that partnership working with placement providers and with other universities sharing placements is effective and ensures that responses to external adverse reporting is timely and appropriate in mitigating risks. The commissioner confirmed that there are excellent employment opportunities. Placement providers regard students as fit for practice following successful completion of the programmes.

Pre-registration nursing (child)

Mentors/sign-off mentors, PEFs and employers are confident that the programme produces a good calibre of qualified children's nurses who are fit for practice and are employable. Mentors told us that they receive good preparation for their role and support from the programme team and link lecturers. PEFs maintain the live databases of mentors and placement audits and work closely with staff in the university's placement audit and attendance monitoring team (PAAM).

Pre-registration midwifery

Mentors and managers told us that they have good support and communications with the midwifery programme team, both formally and informally. Some mentors and managers have been involved in developing the programme. They confirmed that specialist midwives go into the university to teach students. Mentors confirm that they are well prepared to teach and assess students. They told us that newly qualified midwives from the university are competent and fit for practice.

Students

Pre-registration nursing (child)

Students presented as articulate, confident and satisfied with their programme. They recognise and appreciate the work carried out by their tutors who provide a good level of support both in the university and in practice settings. They report good support from the academic programme team and their placement mentors. Students report satisfaction with their teaching and assessment and are confident they are being well prepared for their future role as children's nurses.

Pre-registration midwifery

Student midwives in all health boards report a high level of support from mentors, sign-off mentors, practice development midwives, consultant midwives, link lecturers and personal tutors. They are confident that sign-off mentors use the practice assessment documentation effectively to assess their practice skills. Final year

students are confident that on successful completion of the programme they will have the knowledge and skills to be employed as a preceptor midwife.

Service users and carers

Service users told us that college academic staff have a positive and genuine interest in involving them in student recruitment, programme design and delivery. They are motivated and committed to supporting the programmes because they feel valued and listened to and have personally benefitted from their involvement. They are impressed with the calibre of students recruited to and graduating from the programmes.

Relevant issues from external quality assurance reports

We considered Health Inspectorate Wales (HIW) reports, published in the 12 months which preceded the monitoring visit, related to practice placements used by the university to support students' learning. These external quality assurance reports provide the review team with context and background to inform the monitoring review.

HIW inspections identified areas for improvement in the following:

HDUHB Bronglais Hospital

HIW carried out an unannounced inspection to Bronglais Hospital's unscheduled care directorate (accident and emergency) on 7 September 2016. The report was published on 9 December 2016 (2)

The inspection identified two points for improvement relating to digitalization of records in the accident and emergency department and a review of physical accommodation for long-waiting patients (over 23 hours).

The university's response:

The university confirmed receiving a copy of the report from the head of nursing for Bronglais Hospital. The concerns raised by HIW did not raise any issues which directly impacted on pre-registration nursing students' experience. The university conducted an educational audit on 14 February 2017. The audit identified some issues relating to mentor compliance with triennial reviews. The university confirmed they continue to allocate pre-registration nursing students (adult) to the capacity confirmed in the audit. The university confirmed that it had not identified any issues of concern that needed to be escalated to the NMC (3).

What we found at the event

We found that the university works closely with all practice placement providers to monitor the outcomes of external monitoring reports. There are effective communication channels in place between university senior management and directors of nursing and midwifery in placement provider organisations (51-53).

See section 3.1.1.

Follow up on recommendations from approval events within the last year

The college confirmed there were no NMC programmes approved in 2015-16 (8).

Specific issues to follow up from self-report

The college provided a detailed report on the ongoing actions and closure in relation to key issues identified for 2015–2016 in the self-assessment report (8-9).

Key issues identified within the 2016-2017 report:

Pre-registration nursing:

An increase in student numbers for the pre-registration nursing programme is expected in 2016-2017. The university reviewed academic staff numbers to ensure adequate support for students (see section 1.1.1).

The university continues to work with local health boards to identify additional placement capacity. More than 50 extra clinical placement spaces have been identified (see section 1.2.1).

Ongoing responses to concern:

ABMUHB Singleton Hospital

The university reported that, following concerns previously identified regarding the removal of students from a placement area at Singleton Hospital, ABMUHB, the issues raised have now been resolved and students returned to the ward in January 2017. Ongoing monitoring is being maintained (4, 8-9) (see section 3.1.1)

Pre-registration midwifery:

H DUHB maternity services

The university reported that, following concerns previously identified regarding maternity services in H DUHB, student evaluations raised concerns about mentor supervision and communication with medical staff (1, 8) (see section 3.1.1).

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.

<p>What we found before the event</p>
<p>Curricula vitae demonstrate that academic staff supporting the pre-registration nursing (child) programme and the pre-registration midwifery programmes have experience and qualifications that are commensurate with their role (58).</p> <p>A staff development policy is in place whereby academic staff are required to engage in scholarship and research activities. This is monitored through annual appraisal (64-65).</p> <p>Pre-registration nursing (child)</p> <p>We found academic staff resources include four registered nurses (child), equivalent to 3.2 whole time equivalent (WTE) posts; three have an NMC recorded teaching qualification and one is currently undertaking the teacher preparation programme. An additional teacher with due regard has been appointed and will commence employment in April 2017 (30, 58).</p>
<p>What we found at the event</p>
<p>We found that the university has effective monitoring processes in place to ensure academic staff maintain active NMC registration. Senior staff confirmed that the college has processes to support, monitor and record academic staff in meeting revalidation requirements (48-49, 109-110).</p> <p>All students confirm that the programmes are delivered to the timetable as advertised, without cancellations. They told us that they are satisfied with the support they receive from the programme teams in both university and practice learning settings (69-70, 72-86).</p> <p>Programme directors plan the workload of academic staff. This includes 20 percent of time for engagement in practice for each nurse and midwifery teacher (49, 67-68).</p> <p>Pre-registration nursing (child)</p> <p>We were informed that a programme director, who is supported by designated field leads, manages the pre-registration nursing programme. The lead for the child field of practice has due regard, current NMC registration and a recorded teacher qualification (30, 36, 49, 58).</p> <p>The pre-registration nursing (child) programme team and academic managers confirm that there is sufficient time within the workload allocations to support ongoing scholarly activity and professional development. They told us that there are challenges in delivering a programme with such a distributed placement learning circuit but that this is achieved through effective partnership working and teamwork (48-49, 67, 109).</p> <p>Senior staff and the commissioner confirmed that student numbers will increase from 23 to 31 in September 2017 and this number will be difficult to manage within existing academic staff resources. The head of college reported that business case meetings</p>

<p>are under way to secure additional staff. The commissioner confirmed this and told us the use of income is being monitored to ensure that it is used to support the planned additional student commissioned numbers (48-49, 52).</p> <p>Pre-registration midwifery</p> <p>We confirm that the LME has due regard and an NMC recorded teaching qualification (36, 58). Academic staff confirm that the university supports the LME to fulfil the role and responsibilities required by the NMC. It was evident during meetings with heads of midwifery (HoMs) that the LME engages at an operational and strategic level (36, 58, 68).</p> <p>Academic midwifery staff confirm that their qualifications, clinical experience and professional development activities enable them to deliver contemporary midwifery programmes. They told us that they are supported in maintaining clinical links and to engage with midwifery practice (68, 109-110).</p> <p>We were told that applicants for both midwifery and children’s nursing are informed that they can study the programme in Welsh. We were informed that the university is trying to replace the Welsh medium lecturers for both programmes. Assurances were given that the college has access to Welsh speaking academic staff with due regard and they are able to ensure that materials are translated to ensure parity of assessment, moderation and scrutiny by the external examiners (54, 68, 84).</p> <p>We conclude from our findings that the university has adequate appropriately qualified academic staff to deliver the pre-registration nursing (child) programme and the pre-registration midwifery programmes to meet NMC standards.</p> <p>There is a planned increase in numbers of students for the pre-registration nursing (child) programme. In view of this and the academic support required for students in practice across an extensive geographical area, the university is advised that the academic resource in children’s nursing lecturers should be reviewed and reported to the NMC before the commencement of the 2017-18 academic year.</p>
<p>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</p>
<p>What we found before the event</p>
<p>Documentary evidence identifies ongoing partnership working between the university and the health boards and the private voluntary and independent (PVI) sector placement providers to ensure that there are sufficient numbers of appropriately qualified mentors and sign-off mentors to support students on the pre-registration nursing programme (child) and the pre-registration midwifery programmes. Statements of compliance and contractual agreements with placement partners pledge that resources are provided and maintained to support students (10, 38).</p>

<p>What we found at the event</p>
<p>We found that there are sufficient mentors and sign-off mentors available to support pre-registration nursing (child) and midwifery students. There is a one to one mentor:student ratio. Students confirmed they are informed of their allocated mentors in advance of their placement and they work a minimum of 40 percent of the time with them (69-70, 72-86). All mentors and sign-off mentors act with due regard (72-86).</p> <p>Pre-registration nursing (child)</p> <p>We found that notifications of intended placements are sent out by the PAAM team to the lead PEF within the health boards. Mentors and sign-off mentors are checked against the live mentor registers and completed educational audits to confirm available resources to support students. Modification of the intended placements takes place through negotiation and enables flexibility should service reconfigurations or issues with mentor availability occur. The PEFs have effective working relationships and formal and informal channels of communication with the PAAM team (51, 56, 67).</p> <p>A hub and spoke placement model is in place which allows short exposure visits for students. Mentors based in the hub placement support their students in the spoke placement (56).</p> <p>Pre-registration midwifery</p> <p>Student midwives confirmed that they have a named supervisor of midwives (SoM) during practice placements and they are aware of how to contact them (68).</p> <p>We were told that the midwife lecturers allocate students to placement sites. The PEF then allocates students to mentors after checking mentor status and availability. Managers, lecturers, mentors and students confirmed that there are sufficient sign-off mentors for the number of students. Sign-off mentors told us that they work with students for more than 40 percent of the time (51, 53, 69, 80-86).</p> <p>We conclude that there are sufficient appropriately qualified mentors and sign-off mentors available to support the numbers of students allocated to practice placements at all times.</p>
<p>Outcome: Standard met</p>
<p>Comments:</p> <p>An increase in commissioned student numbers have been agreed for the pre-registration nursing (child) field from September 2017. The head of college is reviewing academic staff resources to ensure sufficiency to support the numbers of students.</p>
<p>Areas for future monitoring:</p> <ul style="list-style-type: none"> • Sufficiency of academic resources to support students studying the pre-registration nursing (child) programme.

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

We found that selection and admissions processes are transparent, reliable and inclusive (14).

There is clear documentary evidence which confirms that admission processes meet NMC requirements. There are clear entry requirements, which include numeracy, literacy, and the international English language testing system (IELTS), which is set at seven in all areas (5-7, 10-11, 13-16, 31-33).

What we found at the event

We found that selection processes use the NHS values-based approach and involve academic staff, practice placement providers, service users and carers and students. Service users confirmed that they participate in devising questions and scenarios to be used for student selection (13-14, 50). Academic staff are confident that the low attrition rates and achievement levels within programmes is evidence of the effectiveness of the recruitment processes (48, 50, 66-68).

Students told us that they attended open days prior to applying to the university and found online information useful in helping them to choose a university (69-70).

Students are shortlisted if they can evidence appropriate academic qualifications and the values required of a nurse through their personal statement (94, 112).

Placement managers, academic staff and service users and carers described their involvement in selection. They confirmed that their preparation and briefing includes equality and diversity training, which for practitioners is delivered through the all Wales 'treat me fairly' online programme, and academic staff and service users complete a university based equality and diversity programme. We found that this is checked and recorded by the admissions tutor prior to the assembly of the selection panel (66-68, 71-86, 94, 112).

All students we spoke to confirm that they complete DBS checks and occupational health clearance prior to commencing placements, and policies are in place to

support this (69-70, 72-86).

There is a policy for the management of students who are under 18 years of age at programme commencement to protect students and the public. Academic staff and placement providers understand and implement the policy, as required (32, 50).

Pre-registration nursing (child)

The programme team told us that Universities and Colleges Admissions Service forms are screened and assessed by a child field lecturer. Shortlisted candidates participate in recruitment activities and take part in group work and scenarios involving service users, representatives from practice and students. Students assist in and observe the scenario and are fully briefed for their selection participation and supported by the admissions tutor. The final selection panel includes an academic staff member with due regard, a service user, and a practitioner (14, 50, 67, 69).

Service users involved in student selection described their participation in role-play activities and in observing group work to assess a candidate's team working and communication skills and values, such as care and compassion and commitment and enthusiasm for children's nursing (50, 71, 77, 79).

Pre-registration midwifery

We were told that there is a mothers advisory group who provide volunteers to participate in midwifery student selection days. The programme team told us that, at present, this mainly comprises recent maternity service users working at the university in non-health professional roles (68). A maternity service user we met described her participation in selection and confirmed that her preparation had included equality and diversity training (63, 71).

A midwifery lecturer, a practitioner, a third year student midwife and a service user are all involved in selection and recruitment of midwifery students. Student midwives have equality and diversity awareness embedded in their programmes and have completed a module which particularly focuses on marginalised groups and non-judgmental practices (50, 66, 68, 70, 112).

We conclude that the admissions process meets NMC requirements. There are adequate safeguards in place to prevent unsuitable students from entering the pre-registration nursing (child) and pre-registration midwifery programmes.

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

What we found before the event

The university has a policy and procedure to address concerns relating to the professional behaviour of students in both academic and placement settings. Students, academic staff and placement providers have access to these policies which are available within programme handbooks, practice assessment documentation and the college online resources (10, 17-18, 21, 31, 37, 63, 104).

Students enrolled on NMC approved programmes are required to declare that there have been no changes to their DBS status on an annual basis. Students involved in a situation which might affect their DBS status are required to disclose this to the relevant head of department, as soon as possible after the incident (17-18, 33).

What we found at the event

We confirm that the university has a robust fitness to practise policy and procedure to address issues related to poor student behaviour in practice and theory settings. Students and mentors confirm awareness of the policy and were able to describe poor behaviour which may result in a referral to the fitness to practise committee (50, 69-70, 72-86).

Students and mentors confirm their awareness of, and understanding of, the importance of cause for concern processes relating to academic performance and/or professional behaviour. Information is provided within student handbooks and practice assessment documentation, and reinforced at the start of each year of the programme at re-enrolment (17-18, 50, 69-70, 72-87, 90).

We were informed that concerns have been raised in relation to the conduct of one student in the pre-registration nursing (child) programme relating to a health issue. There were concerns about four students studying the pre-registration midwifery programme: one related to a health issue and three concerns were about professional conduct. The college has its own fitness to practise panel which completes initial investigation. If any sanctions are required, the panel refers this to the university committee of enquiry which has an independent chair outside of the college.

In 2016-17 three cases were referred to the committee of enquiry: one student withdrew from the programme and two students were discontinued from the programme (22, 31, 34, 47, 50).

The college records and monitors attrition numbers at each progression point, which are reviewed and discussed at contract monitoring meetings, joint working forums and programme reviews (11-13, 50, 52).

Employers and commissioners confirmed that attrition figures are low and retention is good. They are confident that the university is tracking all students' progress (50, 52).

Students from both programmes and the programme teams confirm that personal tutors monitor academic and practice achievement with assessment recovery permitted on one occasion. Personal tutors meet regularly with students, and we saw comprehensive records of these meetings for both pre-registration nursing (child) students and pre-registration midwifery students. There is clear progression monitoring documented. Students have access to these notes and can track their progression effectively (50, 63, 67-70, 98).

Progression is reliant upon satisfactory achievement of NMC outcomes and competencies. Examination boards are held regularly and track students' progression through to final award (11, 13, 35, 50).

<p>Students confirm the use of attendance tracking for both theory and practice learning. Classroom attendance is monitored through a recently commissioned electronic swipe card system but we were told that registers are also taken because of some early problems with the new system (50, 69-70).</p> <p>Students told us they could not recall making declarations of health and character annually (69-70). Scrutiny of enrolment forms, which are completed online, confirm that students sign and complete character forms at the end of year one and year two. Students complete a paper-based DBS declaration on programme completion (19-20, 50). Self-declarations of health are not signed at progression points or on programme completion. Achievement and completion signing-off for pre-registration nursing students (adult, mental health and child) is carried out by the head of department (50, 61). The LME undertakes this role for pre-registration midwifery students. Senior staff confirmed that they can sign the final completion forms, confirming good health, on the basis of having checked student attendance records (19, 61).</p> <p>Our findings confirm the university has not demonstrated that it has effective policies and procedures for the management of poor performance in both theory and practice. Pre-registration nursing and midwifery students do not complete self-declarations of good health at progression points and on completion of their programme. Academic senior managers sign-off final completion forms without checking these declarations. It is required to implement an action plan to ensure that this is urgently addressed.</p>
<p>Risk indicator 2.1.3 - programme providers' procedures are implemented by practice placement providers in addressing issues of poor performance in practice</p>
<p>What we found before the event</p>
<p>Placement providers have risk assessment policies that are aligned to the university's fitness to practise policy (10, 22).</p> <p>The practice assessment documentation used by pre-registration nursing (child) students and pre-registration midwifery students includes processes for managing failing students in practice. This involves the mentor and the link tutor who develop and implement an action plan, as required. If necessary the formal fitness to practise process can be initiated (17-18, 31, 87, 90, 95).</p>
<p>What we found at the event</p>
<p>Pre-registration nursing (child)</p> <p>We found clear processes for managing failing students in practice which involve the student's mentor and link tutor and/or personal tutor who develop and implement an action plan (18, 87).</p> <p>A cause for concern flow chart is available in the mentor portfolio to inform on the reporting process (50, 96).</p>

<p>We were told by mentors, PEFs and students that they have a clear understanding about the procedures that will be followed if poor performance in practice is identified. They gave examples of how they are implemented to address poor student performance or inappropriate behaviour. They confirmed that issues are identified early and acted upon with the involvement of the link lecturer and/or personal tutor and the PEF. They have confidence that issues are thoroughly investigated, as required (50, 69, 72-79).</p> <p>Pre-registration midwifery</p> <p>Service managers, practice development midwives and sign-off mentors in all health boards are confident in using the processes for raising and escalating concerns about students' performance and the fitness to practise process. They report that university lecturers are responsive and provide good support when concerns are raised. They are confident that actions taken ensure that the public is protected (50, 80-86).</p> <p>We conclude from our findings that practice placement providers have a clear understanding of, and confidence to, initiate procedures to address issues related to students' poor performance in practice. This process, whilst supportive, also ensures that students are competent and fit to practise in accordance with both university and NMC requirements to protect the public.</p>
<p>Risk indicator 2.1.4 - systems for the accreditation of prior learning and achievement are robust and supported by verifiable evidence, mapped against NMC outcomes and standards of proficiency</p>
<p>What we found before the event</p>
<p>The accreditation of prior experiential learning (APEL) and accreditation of prior certificated learning (APCL) are applied in accordance with established university and college processes (26-27).</p> <p>Accreditation of prior learning (APL) is not used for the pre-registration midwifery programme.</p>
<p>What we found at the event</p>
<p>APL is used for entry into the second year of the pre-registration nursing (child) programme for students wishing to transfer from another AEI who have completed their first year of the programme (15-16).</p> <p>Senior staff confirmed that a maximum of 50 percent APL is allowed for entry into NMC approved programmes (26-27, 50).</p> <p>There have been no recent applications for APL to the pre-registration nursing (child) programme as there is no additional capacity because of the high retention rates. We viewed APL portfolios from 2014 for entry of students transferring from other AEIs</p>

(28).

We confirmed that systems for APL and achievement are robust and supported by verifiable evidence, mapped against NMC outcomes and competencies. The APL policies and procedures were followed and the involvement of an external examiner with due regard is documented.

Outcome: Standard not met

Comments:

The university fails to comply with NMC requirements that self-declarations of health are completed and signed by students at progression points and on completion of the programme (2.1.2).

20 September 2017: Follow up Documentary Evidence from Swansea University. Standard now met

20 September 2017

Swansea University identified and implemented an urgent action plan to ensure that pre-registration nursing and midwifery students signed and completed self-declarations of health at progression points. All enrolled students were contacted directly and instructed to sign and submit a self-declaration of health. Assurance that all enrolled students had completed self-declarations was provided in writing by the LME (2 May 2017) and the head of nursing (12 May 2017). The university has ensured that it has records of all signed self-declarations of health from all enrolled students.

Documentation related to providing guidance to students was revised, and more explicit information is included in student handbooks and in briefing sessions to ensure that students understand the requirement to sign self-declarations of health at progression points and on completion. This is evidenced by the revised self-declaration of health and conduct proforma, and in updated student handbooks.

The fitness to practise policies and procedures have been reviewed and now ensure that issues arising from students' self-declaration of health are standing items within the fitness to practise panel meetings.

All students completing the pre-registration nursing and midwifery programmes in September 2017 have signed a self-declaration of health and this has been monitored at final assessment boards. This was confirmed in writing by the head of nursing and by the LME on 7 September 2017.

Evidence was submitted to demonstrate completion of the action plan. Revised systems and processes to control the risk include:

- Revised student handbooks and timetabled briefing sessions to ensure that students are informed about the requirement to complete self-declarations of health at the start of their programme, at each progression point and on completion.

- Documentation, including online self-declaration proforma and induction checklists within the practice portfolio, have been revised to ensure that students sign self-declarations of health at the start of the programme and at each progression point. This is checked in practice by the designated mentor and in the university by the relevant programme leader.
- Placement partners are provided with information about students' compliance with the requirements for self-declaration of health at programme commencement and at each progression point. This is a standing agenda item within the strategic level meetings the university holds with each health board. This was confirmed in writing by the strategic leads from the health boards.
- Fitness to practise policies has been revised and now reflect the university's requirements for self-declaration of health. Any concerns arising from a student's self-declaration of health are referred to the fitness to practise panel which considers the individual's health in relation to suitability to study and to practise.

20 September 2017 - Standard 2.1.2 is now met and risks are controlled

Evidence included:

- Confirmation of signing of health declarations by all enrolled pre-registration midwifery students and confirmation with strategic health board leads, 5 May 2017
- Confirmation of signing of health declarations by all enrolled pre-registration nursing students and confirmation with strategic health board leads, 12 May 2017
- Confirmation of signing of health declarations by all completing pre-registration nursing students and confirmation with strategic health board leads, 8 September 2017
- Confirmation of signing of health declarations by all completing pre-registration midwifery students and confirmation with strategic health board leads, 8 September 2017
- College of health and human sciences (CHHS) policy and procedure in relation to fitness to practise for students enrolled on professional pre-qualifying programmes, 1 September 2017
- CHHS: agenda of fitness to practise panel meeting, 1 September 2017
- CHHS: professional programmes, student handbook template 2017-2018
- Written confirmation from the head of nurse education and temporary staffing, ABMUHB, of being fully briefed of the revised arrangements regarding self-declaration of health and character, 7 September 2017
- Written confirmation from the assistant director of nursing (practice), HDUHB of being fully briefed of the revised arrangements regarding self-declaration of health and character, 20 September 2017
- CHHS: flow diagram of procedures to capture, record and monitor students'

self-declaration of health, September 2017

Areas for future monitoring:

- Pre-registration nursing and midwifery students complete and sign health declaration forms at progression points and on completion of the programme.

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

We found evidence of partnership working between the university and service providers at strategic and operational levels (9, 97).

The college has established partnerships and long standing contract agreements with partner health boards, HDUHB and ABMUHB (5-6, 9-10).

What we found at the event

We found robust processes of strategic and operational partnership working that ensures engagement with commissioners, NHS practice placement providers and the PVI sector.

At a strategic level the university engages with practice placement providers through the health board meetings held every two months, and at contract monitoring meetings with commissioners every four months. Senior managers and the commissioner confirmed that there is a high level of integration of staff from the university and the health boards. Staff from both organisations are involved in the maintenance of placements, supporting staff and programme development and enhancements (7, 11, 13, 51-53).

National collaboration with other AELs is provided through the all Wales practice education forum which is held bi-annually, and through the all Wales nursing and midwifery pre-registration groups which normally meet four times per year with additional meetings held as required (51-53, 102-103).

All senior placement managers confirmed that they work closely with the university to respond to risk issues made known through raising and escalating concerns, complaints and HIW inspections (1, 3-4, 51-53, 99). They confirmed that surveillance includes monitoring of educational audits, student evaluations and link lecturer visits and central record keeping and intelligence stored within the PAAM team databases (51, 56).

We found that student evaluations had raised concerns about mentor supervision and communication with medical staff in the maternity services at HDUHB (1, 8). The programme team confirmed that earlier concerns had been dealt with because of service re-configuration and there are no outstanding issues (68, 82, 84).

We visited the maternity services and confirmed that the previous concerns have been addressed. We viewed many examples of very positive student feedback. Students reported good mentor support and no concerns about midwifery practice (84, 99). Mentors, the PEF and senior staff confirmed improvements in governance measures supported by more visibility of senior staff; policy changes; staff supported and updates through midwifery and obstetric case discussions; and, regular labour ward forum meetings (84, 99).

We found evidence of partnership working in managing issues of concern following the removal of students from a placement area in Singleton Hospital, ABMUHB in October 2015 as a result of a student's complaint relating to the level of mentor supervision, inclusion in staffing establishments and attitudinal issues from staff (4, 8-9, 51).

Academic managers and the lead PEF provided us with a full audit trail of actions taken from 2014 to the present time. These actions included monitoring of student evaluations, suspension of student allocations in October 2015; an independent substantial review by ABMUHB senior nurse for safety in 2016; reallocation of the lead mentor role in the placement area and an educational audit review in October 2016. We were told that joint discussions between the university and the health board had resulted in a decision to reinstate student allocations to the placement from January 2017, with enhanced monitoring and support in the form of planned weekly meetings with students. The lead PEF confirmed that the students were reintroduced to the ward in January 2017 (4, 8-9, 51).

We found that there is a clear commitment to taking joint action to maintain an effective practice learning environment for the student and to protect the public. The university and placement providers share information about, and respond to, risk issues arising from raising and escalating concerns, complaints and HIW inspection.

However, we found that the university has no clear process for escalating concerns to the NMC other than through the annual self-assessment report or when prompted by the NMC (1, 8-9, 115). This requires improvement. The university should ensure that

exceptional reporting to the NMC takes place in a timely way in accordance with the Quality Assurance framework part four (NMC, 2016).

We confirm that educational audits are conducted every two years (with a review in alternate years) and prior to the placement area being allocated pre-registration students, which meets NMC requirements. The educational audit tool is based upon the all Wales audit tool (91-92).

The audit review group and link lecturers monitor educational audits and provide feedback to the PAAM team and programme directors (41, 51). We viewed a sample of placement audits which were completed in collaboration with mentors, PEFs and link lecturers. We confirm that action plans are identified following audits, if required, and actions are implemented and monitored by PEFs and the audit review group (42, 91-92).

Pre-registration nursing (child)

At an operational level the PAAM team undertakes the planning and management of placement experiences, including elective placements for the pre-registration nursing programme. The PAAM team has responsibility for coordinating placements, quality review, mentor updating and coordination of educational audit, and maintains communication with other AElS sharing placements (10, 51, 56).

We saw evidence that the PAAM team keeps accurate records of occasions where students have been moved or placements have been deactivated (56).

PEFs, employers, mentors and students confirmed that they are aware of where to find the policy and procedures for raising and escalating concerns and report the process is effective in ensuring that concerns are fully investigated and supported (69, 72-79).

Pre-registration midwifery

HoMs and managers told us that they have good informal and bi-annual formal meetings with the LME. The programme team and HoM gave us an example of the joint actions arising from clinical governance. These action plans gave assurance of patient and student safety (1, 68, 83-84, 99).

The midwifery academic team, in close liaison with the PEFs, coordinate the placement of students (51).

Students understand the mechanisms for raising and escalating concerns and feel confident in being supported by their academic tutor (80-86).

We conclude that there are effective partnerships between education and service providers at all levels. However, exceptional reporting to the NMC in a timely manner in accordance with the Quality Assurance framework part four (NMC, 2016) requires improvement.

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

<p>What we found before the event</p>
<p>We found some evidence that practitioners and service users and carers are involved in programme development and delivery within the pre-registration nursing (child) programme and the pre-registration midwifery programme (62, 105-106).</p> <p>The service user and carer strategy details the level of involvement of service users expected across all healthcare programmes (62).</p>
<p>What we found at the event</p>
<p>Teaching timetables in the university confirm that practitioners and service users and carers are involved in programme delivery (105-106).</p> <p>Pre-registration nursing (child)</p> <p>We found that practice placement providers are involved in the recruitment of students and in the design, delivery and evaluation of the pre-registration nursing (child) programme (5, 7, 87, 105).</p> <p>Students confirmed that service users and carers provide written comments in practice assessment documents about the care that they receive from students. Children provide this feedback on an approved scale of 'smiley faces'. This contributes to the judgement made regarding the student's suitability to progress on the programme (69, 72-79).</p> <p>Students also verified that service users contribute to teaching on the programme and gave examples which included service users' stories about mental health, healthcare needs of a child, and a parent of a child with complex health needs (69, 72-79).</p> <p>A new endeavour by the college is to engage with a peripatetic autism bus which enables students to be immersed in a multi-sensory educational environment and to develop their appreciation of care for the young person with autism (51).</p> <p>Pre-registration midwifery</p> <p>We were told by mentors and students that midwives with specialist roles such as substance misuse contribute to students' learning in the university. We heard examples of users talking to students about Down's syndrome and breastfeeding (68, 70, 85, 106).</p> <p>We found that service users have opportunities to provide students with feedback on the care they receive from the student, via the sign-off mentor. The feedback is used as an opportunity for reflection with the mentor and informs the assessment of practice (80-86, 90, 118).</p> <p>We conclude that practitioners and service users and carers are involved in programme development and delivery in pre-registration nursing (child) and pre-registration midwifery programmes.</p>

<p>Risk indicator 3.2.2 - academic staff support students in practice placement settings</p>
<p>What we found before the event</p>
<p>Students are supported in practice by the link lecturer, who is a member of academic staff within the college. The college's link lecturer policy facilitates the academic staff's links with practice (22, 39-42).</p> <p>Midwifery teachers participate in tripartite assessment of student midwives to ensure competency (13, 15, 17, 90).</p>
<p>What we found at the event</p>
<p>Pre-registration nursing (child)</p> <p>We found that link lecturers give regular and timely support to mentors and to students in practice placements; participate in mentor update sessions either as part of the skills update days or on a bespoke basis as required; and, assist PEFs and clinical managers in the management of placement capacity. Link lecturers participate in the education audits of practice placements with the PEFs and use findings from these audits and student feedback to inform mentor updates (42, 51, 92).</p> <p>Mentors/sign-off mentors and clinical managers are able to name link lecturers and other university staff who support students and mentors in practice placements (72-79).</p> <p>Student nurses confirmed that link lecturers and personal tutors provide them with good support and are involved in supporting the assessment of practice (69, 72-79).</p> <p>Pre-registration midwifery</p> <p>Midwifery lecturers told us that the university supports their role in practice placement settings. We were told that they have introduced more blended learning with online resources so that they can have more time to visit students and mentors in practice placements. Lecturers told us that they each have a link practice placement area. As well as visiting their practice link areas regularly, lecturers told us that they visit their personal students on whichever practice site they are working (68, 70, 80-86).</p> <p>Students confirmed that they know how to contact the link lecturer and their personal tutor, when necessary, and confirmed that their personal tutor visits them at least once during each practice placement allocation as well as participating in the tripartite meetings to discuss grading of practice. Mentors also explained that the student's personal tutor meets with the mentor and student separately and then together. Students and mentors told us that they find this approach helpful in integrating theory to practice. Only one student and one mentor told us they had had challenges during practice learning which had been well addressed and resolved in partnership with the student's personal tutor (70, 80-86).</p>

<p>We conclude that academic link lecturers and other academic staff with due regard effectively support pre-registration nursing (child) students and pre-registration midwifery students in practice placement settings.</p>
<p>Risk indicator 3.2.3 – records of mentors/practice teachers in private, voluntary and independent placement settings are accurate and up to date</p>
<p>What we found before the event</p>
<p>Mentor registers for the PVI sector providers are maintained in the university (10, 30).</p>
<p>What we found at the event</p>
<p>We viewed the PVI records of mentors held by the university and confirm that they are accurate and up to date (57).</p>
<p>Risk indicator 3.3.1 - evidence that mentors, sign-off mentors and practice teachers are properly prepared for their role in assessing practice</p>
<p>What we found before the event</p>
<p>There are clear mechanisms in place for mentor and sign-off mentor recruitment, training and updating. The university has an NMC approved mentor preparation programme. Partnership working between the university, the health boards and PVI providers ensures that frequent mentor updates, sign-off mentor preparation and triennial reviews are undertaken (8, 59-60, 111, 114).</p>
<p>What we found at the event</p>
<p>Senior managers and the commissioner confirmed that the contractual responsibility to ensure that there are sufficient prepared and updated mentors to support commissioned numbers of students is met (51-52).</p> <p>Mentors in all health boards confirm that the mentor preparation programme prepares them for their mentor and sign-off mentor role and that updates are held regularly (72-86).</p> <p>The PEFs support sign-off mentor preparation and triennial review (43, 51, 60).</p> <p>Students recognise exemplary support from mentors and this is recognised through annual mentor awards (48, 51).</p> <p>Pre-registration nursing (child)</p>

<p>Mentors confirm they understand their role as a mentor and sign-off mentor and their responsibility in ensuring that a student meets assessment requirements. Link lecturers provide mentor support, as required (72-79).</p> <p>Pre-registration midwifery</p> <p>The majority of mentors told us they have attended the mentorship programme provided by Swansea University (80, 83-84, 86). We met one trainee mentor who told us she has a 'buddy' mentor who countersigns her assessments of the student she is supporting (81, 85).</p> <p>Mentors confirmed that mentor updates are provided as part of their mandatory study days and that the PEF includes sessions on subjects they request, which has included discussing scenarios about 'failing to fail'. Mentors said they appreciated the opportunity to share experiences with other mentors about dealing with concerns. We were told by students and mentors that when the link lecturer visits students they also provide guidance to mentors to ensure practice assessment documentation and processes are understood (80-89).</p> <p>Sign-off mentors in all health boards report understanding of the assessment of practice process and documentation, and they are confident in grading the assessment of practice (80-86).</p> <p>From our findings we conclude that mentors and sign-off mentors are properly prepared for their role in assessing practice.</p>
<p>Risk indicator 3.3.2 - mentors, sign-off mentors and practice teachers are able to attend annual updates sufficient to meet requirements for triennial review and understand, and can reflect on, the process they have engaged with</p>
<p>What we found before the event</p>
<p>Employers provide time and resources for mentor preparation and updating (39-40, 111).</p>
<p>What we found at the event</p>
<p>We found that mentor updates are incorporated into annual mandatory training workshops within the health boards. They are held regularly and delivered face to face using a range of delivery options that include scheduled, one to one and bespoke (51, 111).</p> <p>Mentors confirmed that the mentor preparation programme prepared them for their role (72-85).</p> <p>We saw clear guidelines available online to mentors and managers, which facilitated the process of triennial review. PEFS confirmed that sign-off mentor preparation and triennial review is addressed within mentor update activities (60, 73-80).</p>

<p>Live mentor registers demonstrate that triennial reviews are accurately recorded and the three-year requirement is adhered to (73-74, 78, 80).</p> <p>We conclude that mentors and sign-off mentors attend annual updates sufficient to meet requirements for triennial review and to support the assessment of practice.</p>
<p>Risk indicator 3.3.3 - records of mentors / practice teachers are accurate and up to date</p>
<p>What we found before the event</p>
<p>Mentor registers are maintained in the health boards and are managed by the PEFs who check to ensure sufficient mentors and sign-off mentors are available to support the planned student numbers allocated to practice placements (30, 116).</p>
<p>What we found at the event</p>
<p>We viewed all live mentor registers during the visits to placements. Students' allocation to mentors on the duty rotas and the information in educational audits were cross checked for currency and accuracy with the mentor register (72-75, 78).</p> <p>Pre-registration nursing (child)</p> <p>We found some variability in the registers we viewed with only some recording the type and date of initial mentor preparation. All mentor registers are designed to capture and record details of mentor updating, triennial review and sign-off mentor status. We found that, with the exception of one mentor register, all mentor registers are accurate and up to date (73-75, 78).</p> <p>We found that some records within one mentor register for a placement used for pre-registration nursing (child) students were not complete. This related to inconsistency in recording of triennial reviews, information about initial mentor preparation and confirmation of sign-off mentor status (72, 100).</p> <p>We confirm that all students were supported by a qualified and up to date mentor (5, 7-17).</p> <p>Pre-registration midwifery</p> <p>We viewed records of mentors within each of the two health boards visited. In one health board we found the register to be accurate and up to date with records of all essential data which provided assurance that mentors are up to date (80).</p> <p>We found at the Glangwili Hospital, HDUHB mentor records are not accurate and up to date, specifically the recording of triennial reviews for mentors supporting students on the pre-registration nursing (child) and pre-registration nursing midwifery programmes.</p>

Senior managers confirmed that, because of pressure of work, they had been unable to ensure that the registers had been maintained. They provided assurance that they had other sources of evidence to confirm that all sign-off mentors were compliant with updating and triennial review and that they only allocated sign-off mentors who were up to date (55, 84, 101).

We conclude that in one health board the mentor registers are not accurate and up to date. The university must implement an urgent action plan to ensure mentor registers are an accurate and comprehensive record of mentors' eligibility to undertake the role and to ensure that NMC requirements are met.

Outcome: Standard not met

Comments:

Criteria for escalating concerns to the NMC, in line with the QA framework, is not explicitly articulated. This requires improvement (3.1.1)

In the Glangwili Hospital, HDUHB mentor records are not accurate and up to date. The university needs to implement an urgent action plan to ensure mentor registers are an accurate and comprehensive record of mentors' eligibility to undertake the role and NMC requirements are met (3.3.3).

20 September 2017: Follow up Documentary Evidence from Swansea University. Standard now requires improvement

20 September 2017

Swansea University identified and implemented an action plan to ensure that mentor registers are an accurate and comprehensive record of mentors' eligibility to undertake the role to meet NMC requirements (3.3.3).

A review of the evidence against the action plan confirmed that the following actions have been completed:

The university has worked with HDUHB to review the status of all mentors and sign-off mentors supporting pre-registration nursing and pre-registration midwifery programmes to ensure they meet NMC requirements. The live mentor register has been redesigned to ensure that data relating to the date of the initial mentor preparation, the dates of the last annual mentor update and triennial review and current status are recorded. Extracts from the live registers confirm that the health board is tracking the compliance of all mentors and sign-off mentors and that all essential NMC requirements are recorded.

The assistant director of nursing (practice), HDUHB confirmed in writing that the mentor register is current, up to date and accurate, which ensures that only mentors and sign-off mentors who meet NMC requirements are allocated to students. Revised reporting systems have been established and managers are now receiving copies of their service section of the mentor register and are required to confirm/update the data contained on a regular basis. Service managers are required to reconcile the record of mentors with student allocation lists.

The allocation of students to up to date mentors and sign-off mentors is being monitored directly by the education liaison team members, in conjunction with ward sisters and team leaders responsible for the allocation of students and mentors. The assistant director of nursing confirmed in writing that systems are in place for senior managers across the health board to check mentor records and to verify that students are supported by up to date mentors and sign-off mentors.

Procedures are in place to ensure there are a sufficient number of compliant mentors within the designated placement areas to support pre-registration nursing students and pre-registration midwifery students. This is monitored through the health board's operational performance management systems.

HDUHB's education liaison team provide mentor update sessions on a regular basis across all the health board's geographical locations, as part of the health board's learning and development programme. This was confirmed in writing by the assistant director of nursing (practice) HDUHB. The flexible mentorship preparation and schedules, 2017, provide regular opportunities for updating mentors.

The assistant director of nursing (practice) HDUHB confirmed in writing that resources to support mentor updates, the allocation of mentors and monitoring and updating the mentor record have been enhanced by an increase in the staffing of the education liaison team from 2.5 whole time equivalent (WTE) to 3.8 WTE.

20 September 2017 – Standard 3.3.3 is now met and key risks are controlled.

Evidence included:

- HDUHB: flexible mentorship preparation and schedules, 2017
- Extracts of revised live mentor record, HDUHB, 20 September 2017
- Written confirmation from assistant director of nursing (practice), HDUHB, of revised processes to ensure that mentor registers are an accurate and comprehensive record of mentors' eligibility to undertake the role and NMC requirements are met, 31 August 2017
- Written confirmation from assistant director of nursing (practice), HDUHB, of additional staffing resources for education liaison team, 31 August 2017

Areas for future monitoring:

- That the university escalates concerns to the NMC in a timely way
- Records of mentors are accurate and up to date in all placements supporting NMC approved programmes.

Findings against key risks

Key risk 4 - Fitness for Practice

4.1 Approved programmes fail to address all required learning outcomes in

<p>accordance with NMC standards</p> <p>4.2 Audited practice placements fail to address all required practice learning outcomes in accordance with NMC standards</p>
<p>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</p>
<p>What we found before the event</p>
<p>The pre-registration nursing (child) programme and the pre-registration midwifery programmes are mapped against NMC standards (5-6, 87, 90, 93).</p> <p>The programme documentation identifies learning and teaching strategies and available support to enable students to achieve NMC learning outcomes and competencies at progression points and for entry to the register (5-6).</p> <p>The pre-registration nursing (child) programme and the pre-registration midwifery programmes aim to develop practitioners who demonstrate the values of a nurse or as a midwife as described in the NMC Code (2015) and the NHS Constitution (2015). This is mirrored in the teaching design and assessment, for example in skills learning and embedding of professional values within the core elements of practice assessment (15-16).</p>
<p>What we found at the event</p>
<p>All students receive clear information specifying the learning, teaching, and assessment and support available to them (69-70, 72-86, 93).</p> <p>Students and academic staff confirm that there are opportunities for students to undertake formative assessment and to receive support and timely feedback from their personal tutor to further develop their knowledge and skills (67-70, 72-86).</p> <p>We confirm that all students complete mandatory training prior to practice placements; this is updated annually and confirmed with placement providers. Simulated learning prepares students for practice and is delivered in well-equipped and resourced facilities (8, 11, 13, 48, 67-68, 117).</p> <p>Students and academic staff describe opportunities for students to rehearse skills in an environment that promotes values-based care, dignity, courtesy and respect (67-70).</p> <p>We found that the college is committed to interprofessional learning. It holds regular interprofessional learning world cafes attended by students from nursing fields of practice and other healthcare related programmes, including paramedics and social work. External specialists are involved in programme delivery and ensure a multi-disciplinary approach to enhance student learning (11, 13, 18, 105-106, 117).</p>

Programme providers collect, analyse and report appropriate information to ensure the continued effectiveness of teaching and learning strategies. The annual programme reviews include appropriate action plans which are reported to, and monitored by, the board of studies and learning and teaching committee (11-13, 29, 52, 67-68, 117).

Pre-registration nursing (child)

We were told by the programme team that the focus of learning and teaching is student centred and is aimed at developing confident and proactive nurses. Teaching and assessment strategies are varied and include: simulation, large group teaching and small, child-focussed nursing seminar groups and problem based learning groups which use scenarios identified from students' placement experiences. Students reported that they raised concerns about the reliance on a generic style of teaching across the fields of adult, mental health and child nursing. They are supported by their academic teacher who ensures a balance between generic and field-specific content. Students and academic staff confirmed that all generic and field specific outcomes are covered within the programme (67, 69, 117).

Students perceived there was an over-emphasis on care of the service user with dementia which is now less prominent within the programme. The availability of the peripatetic autism bus now compliments the use of the dementia bus as a training approach for students.

We confirmed that individual students' hours of theory and practice comply with European Union (EU) requirements. Students told us that they have responsibility to ensure that practice hours are recorded within their practice assessment documents (69, 87).

Pre-registration midwifery

We confirmed that the information provided to students at the start of the programme is informative and clear, in addition students receive an information pack for each practice placement. Students told us that the information makes their responsibilities clear to them (17, 70, 90).

Students and lecturers told us that the facilities for simulated learning have improved. Students told us that they would like more simulated practice although many students told us they can participate in simulation in practice placements. Some third year students reported that they have been given opportunities to engage in peer teaching of midwifery skills which increased their knowledge and improved their teaching skills (17, 70, 90).

Academic staff confirmed that both pre-registration midwifery programmes use learning and teaching strategies which amalgamate theory to practice and are closely aligned with the practice portfolio (68, 117).

We confirm that the programme identifies the number of hours of theory and practice in each year and this complies with the EU directive. Students told us that attendance hours in practice must be signed by their mentor, and are checked in the university (17, 68, 70, 90, 117).

Our findings conclude that learning, teaching and assessment strategies in the pre-

<p>registration nursing (child) programme and the pre-registration midwifery programmes enable students to successfully meet the required programme learning outcomes, NMC standards and competencies.</p>
<p>Risk indicator 4.2.1 – documentary evidence to support students’ achievement of all NMC practice learning outcomes, competencies and proficiencies at progression points and upon entry to the register and for all programmes that the NMC sets standards for</p>
<p>What we found before the event</p>
<p>The pre-registration nursing (child) and pre-registration midwifery practice assessment documentation and mentor support enables students to achieve NMC practice competencies at progression points and for entry to the NMC register (16-17, 87, 90).</p> <p>Students are prepared for their practice learning experiences which includes explanation about the practice assessment documentation and relevant policies and procedures (16-17).</p>
<p>What we found at the event</p>
<p>External examiners for both programmes confirm that assessments enable students to meet the learning outcomes of the programmes and are commensurate with standards in other universities (11, 13, 23-24).</p> <p>The annual programme review and enhancement process captures feedback from student evaluation, external examiner reports and achievement data, and ensures that there is continual monitoring of the programme’s effectiveness in enabling students to meet NMC outcomes and competencies (11-13, 117).</p> <p>The commissioner, employers and mentors all confirm that pre-registration nursing (child) students and pre-registration midwifery students are fit for practice on successful completion of the programmes (52, 72-86).</p> <p>Pre-registration nursing (child)</p> <p>Placement managers and mentors told us that students are well prepared for their practice placements. They confirm that students demonstrate a good level of knowledge and skills for the stage of the programme (72-79).</p> <p>We found students and mentors/sign-off mentors demonstrate understanding and confidence in both the formative and the summative practice assessment processes (23-24, 70, 72-79).</p> <p>Essential skills and competencies are identified in the practice assessment documentation. Samples of completed assessment documents confirmed that students achieve the required outcomes at progression points and at the end of the</p>

programme (72-79, 87, 117).

Third year pre-registration nursing (child) students informed us that they feel confident and competent to practise and to enter the professional register on successful completion of the programme (69).

Mentors support students to engage with a wide variety of practice learning experiences to enable them to meet essential skills clusters and NMC outcomes. Experiences included a hub and spoke approach to practice learning although we found that not all students make use of these opportunities unless prompted by mentors and PEFs (56, 69, 72-79, 117).

We saw examples of service user and carer testimonials in practice assessment documentation which confirmed that students are caring, compassionate and skilled in practice (87).

Pre-registration midwifery

We confirm that all students are allocated to a well prepared sign-off mentor for their placement and that they have a buddy mentor to provide support when their mentor has days off. Students told us that they follow their mentor's duty rota. Each of the health boards provide consultant and midwife led maternity services. Students confirm that they experience a good range of practice placements and that EU requirements are facilitated and achieved. This was confirmed in completed practice documentation. Students told us that they must be proactive to seek out learning experiences not available locally and that mentors are generally supportive in enabling them to access these additional experiences (70, 81, 83, 85, 90).

Most students told us that they have not had the opportunity to experience a caseload. One third year student said that she had been encouraged to follow up one woman as a case study. She had seen her in antenatal clinics, observed her birth and seen her in the postnatal period. The programme team told us that they had not implemented caseloading as a requirement for all students. Senior staff confirmed that health boards' policies do not allow caseloads for pre-registration students (67, 70, 83, 85).

Mentors and students told us that they are confident in using the practice assessment documentation and graded practice. We viewed examples of entries of evidence and signatures in students' portfolios. Students also showed us that the EU required minimum amount of experience is documented and verified by their sign-off mentor (80-86).

HoMs, PEFs, and sign-off mentors in both health boards confirmed that the programme prepares student midwives who are safe and fit for practice and for preceptor midwifery posts or for independent practice on successful completion of the programme (83-85).

Students confirmed they will be appropriately prepared to take on a midwifery preceptor post on successful completion of the programme (70).

We conclude that students on the pre-registration nursing (child) programme and the pre-registration midwifery programmes achieve NMC practice competencies at progression points and meet NMC standards for entry to the register.

Outcome: Standard met

Comments:

Midwifery students are not all able to have a caseload. This was due to health board policies.

Areas for future monitoring:

- The university works in partnership with health boards to enable all pre-registration midwifery students to have a small caseload.

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

We found that students, practice placement providers and service users and carers have a range of opportunities to provide feedback and to evaluate all aspects of pre-registration nursing and pre-registration midwifery programmes (11, 13, 88-89, 107-108).

Feedback from multiple sources is collated and discussed at the student/staff forum. Findings feed into programme team review meetings and are progressed to the programme board of studies which agrees and monitors any action plans (11, 13, 113).

What we found at the event

Our findings confirm that there are a variety of evaluation systems that capture student experience in the placement and academic environment. These include evaluation of theory, evaluation of practice, the national student survey for third year students and feedback to the student staff forum (11, 13, 88-89, 107-108).

Students told us they feel they are listened to and confirmed any issues raised are normally resolved. We found feedback to students is arranged through the student/staff forum and through 'you said, we did' arrangements. Student

representatives are members on the learning and teaching committee and on the boards of studies (54, 67-70, 103).

All theory modules are evaluated and feed into annual programme reviews. Reviews identify clear action plans and identify review dates which are monitored by the programme board. The college recently introduced an online facility for the evaluation of theory and practice. Students complete evaluations at the end of each placement which are made available to PEFs, who disseminate feedback directly to the placement sites. Mentors confirmed this and we saw examples of student evaluations during our visits (54, 72-86).

Practice placement providers confirm that they have numerous opportunities to provide feedback to the university and work in partnership in addressing any weaknesses and enhancing programme delivery (72-86, 97).

We found that the university has appointed external examiners who demonstrate currency in education and practice and have due regard (23-24, 44-45, 54).

The university demonstrated an external examiner database which records current registration and revalidation of external examiners (46). We found that this addition to the database has recently been implemented. There is no formal procedure to routinely monitor external examiners appointed to NMC approved programmes. This requires improvement.

External examiners for the pre-registration nursing and midwifery programmes report annually on the quality of theory and practice based learning and student achievement. They visit practice placement areas to meet students and mentors and scrutinise a sample of practice assessment documentation before the examination board. Completed practice assessment documentation, examination board minutes and external examiner reports confirm external examiner engagement at all levels and stages of the programmes (11-12, 23-24, 35, 54, 87, 90).

External examiners participate in the practice assessment processes of the pre-registration midwifery programme through tripartite meetings (24, 54, 90).

The programme directors respond to external examiner comments, as appropriate, and any requirements for changes to the assessment process or programme are considered at boards of study and the college's curriculum approval board, which is a sub-committee of the learning and teaching committee. They are reported in the annual programme review which operates as the central analytical tool for programme monitoring (11, 13, 23-24, 54).

We confirmed that the college follows up and effectively concludes issues from previous monitoring reviews, annual self-assessment reports and recommendations from programme approval/re-approval/modification. There were no approvals or monitoring activity in the last academic year which required following up (8, 11-12).

We found that the information in the AEI requirements and placements section in the online NMC portal is up to date (10).

We conclude from our findings that evaluation systems operate consistently, are fit for purpose and provide appropriate reporting and dissemination of findings to enhance programme delivery. There is no formal procedure to ensure external examiners have

current NMC registration and meet revalidation requirements. This requires improvement.
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
We found that the university has processes in place which enable concerns and complaints about practice learning settings to be raised and addressed. The university, in collaboration with practice placement providers, has a raising and escalating concerns policy and a clear complaints procedure (22, 25). Students are made aware of how to escalate concerns, and mentors and academic staff have clear guidance on how to support students raising concerns or making complaints (17-18, 87, 90).
What we found at the event
<p>Students confirmed that they are informed about the complaints procedure at the start of the programme and they have access to the procedure which is summarised within the programme handbooks (17-18, 69-70).</p> <p>Mentors told us they understand the process for supporting students in practice who wish to make a complaint or raise or escalate concerns (72-86).</p> <p>The senior academic staff confirmed that students have opportunities to raise complaints informally at the student/staff forum, with their personal tutor and with mentors in practice. We found that all issues raised by students have been managed satisfactorily without the need to escalate further. The college confirmed that there have been no formal complaints raised by pre-registration nursing (child) students or pre-registration midwifery students in the last 12 months (54). They are confident that effective and timely support from the personal tutor enables students to have the confidence to raise issues early and to have them dealt with in an efficient and supportive way (54, 67-68).</p> <p>Mentors confirmed that they are given feedback following students' evaluations of practice placements. Evaluations are made available to PEFs who disseminate them directly to practice staff. External examiners' comments are also disseminated to placements via the PEFs (54, 72-86).</p> <p>Our findings conclude that concerns and complaints raised in practice learning settings are appropriately dealt with and communicated to relevant partners.</p>
Outcome: Standard requires improvement

Comments:

There is no formal procedure to ensure external examiners have current NMC registration and meet revalidation requirements. This requires improvement (5.1.1).

Areas for future monitoring:

- The university monitors external examiners' NMC registration to ensure currency and revalidation requirements are met.

Evidence / Reference Source

1. NMC briefing document for Swansea University, 9 March 2017
2. HIW unannounced inspection report, Bronglais Hospital, HDUHB, 9 December 2016
3. College of health and human sciences (CHHS) responses to HIW reports activity, 21 March 2017
4. Audit trail and correspondence relating to managing cause for concern raised by a student in practice on ward 3, Singleton Hospital, 2015-2017
5. NMC programme approval report, pre-registration nursing, 17 April 2012
6. NMC programme approval report, pre-registration midwifery, 27 November 2011
7. NMC monitoring report, pre-registration nursing (adult and child), 2014
8. NMC annual self-assessment programme monitoring report, 2016-17
9. NMC annual self-assessment programme monitoring report, 2015-16
10. SU AEI requirements evidence, reference source summary, accessed 4–24 March 2017
11. CHHS annual programme review, pre-registration nursing (child), 2015-2016
12. CHHS attrition figures pre-registration nursing (child), 2015-2016
13. CHHS annual programme review, with attrition figures, pre-registration midwifery, 2015-2016
14. SU admissions policy, undated
15. BMid (Hons) pre-registration midwifery programme specification and curriculum document, long and shortened programmes, 2011
16. BSc (Hons) pre-registration nursing programme specification and curriculum document, 2012
17. CHHS BMid (Hons) midwifery programme handbook, 2016-17
18. CHHS BSc (Hons) nursing programme handbook, 2016-17
19. CHHS pre-registration student DBS declaration on completion (paper based), undated
20. CHHS declaration of good conduct on annual enrolment, online screenshot, 22 March 2017
21. SU undergraduate handbook, 2016-2017
22. CHHS policy for raising and escalating concerns, undated
23. BSc (Hons) nursing (child) external examiner reports and responses, 2014-2016
24. BMid (Hons) midwifery external examiner reports and responses, 2014-16
25. SU complaints handling policy and procedure, undated
26. SU accreditation of prior learning policy and process, undated
27. SU recognition of prior learning panel meeting, minutes, 15 November 2016
28. Sample of completed APL claims, various dates and summary of APL activity pre-registration nursing (child) and pre-registration midwifery programmes, 2014-2016

29. CHHS terms of reference learning and teaching committee, undated
30. Managing reviewer initial meeting in preparation for monitoring event, 7 March 2017
31. CHHS fitness to practice for applicants and enrolled students, 2014
32. SU under 18s policy and procedures, undated
33. CHHS disclosure of criminal records policies for applicants and current students, undated
34. CHHS fitness to practise and professional suitability panel, terms of reference, undated
35. Examination board minutes, pre-registration nursing and midwifery, 2015-2016
36. Managing reviewer NMC online staff registration enquiries, 21 March 2017
37. CHHS policy for students not achieving in practice, January 2015
38. CHHS statement of compliance template, undated
39. Service level agreement with ABMUHB, March 2017
40. Service level agreement with HDUHB, March 2017
41. CHHS audit review group, terms of reference, undated
42. CHHS link lecturer policy, undated
43. CHHS details of mentor assessor preparation modules, 2012
44. SU procedures for the appointment of external examiners, undated
45. External examiners CVs, pre-registration nursing (child) and pre-registration midwifery, various dates.
46. Online database for recording external examiners details, viewed 23 March 2017
47. CHHS fitness to practise, summary of activity and examples, 2015-2016
48. CHHS PowerPoint presentation; overview of provision and introductory presentation, 21 March 2017
49. Managing reviewer meeting with senior team to discuss resources and shared governance, 21 March 2017
50. Managing reviewer meeting to discuss admissions and progression, 21 March 2017
51. Managing reviewer meeting to discuss practice placement partnership meeting, 22 March 2017
52. Managing reviewer meeting with education commissioner, director of workforce education development services, 22 March 2017
53. Meeting with head of college to discuss strategic partnerships and management of risks, 22 February 2017
54. Managing reviewer meeting to discuss quality assurance, 23 March 2017
55. Managing reviewer meeting with HDUHB LME and education liaison midwife (ELM), to discuss live mentor registers, 23 March 2017
56. Managing reviewer meeting with PAAM team and access to online placement databases, 23 March 2017
57. Managing reviewer meeting with coordinator for mentor preparation and viewing of live mentor register for PVI placement providers, 22 March 2017
58. Academic staff CVs, March 2017

59. *ABMUHB mentor preparation materials, 2017*
60. *ABMUHB guidelines for triennial review, 2017*
61. *Managing reviewer meeting with LME and head of department to discuss signing off processes for admission of students to NMC register, 23 March 2017*
62. *Service user and carers strategy 2014*
63. *CHHS guidelines for the provision of academic support, June 2014*
64. *CHHS staff development policy, undated*
65. *SU performance enabling policy, 2015-2016*
66. *CHHS BMid (Hons) midwifery selection record, 2016*
67. *Meeting with programme team, pre-registration nursing (child), 21 March 2017*
68. *Meeting with programme team, pre-registration midwifery, 21 March 2017*
69. *Meeting with student nurses (child) in university, 21 March 2017*
70. *Meeting with student nurses (midwifery) in university, 21 March 2017*
71. *Meeting with service users and carers, 21 March 2017*
72. *Visit to Glangwili Hospital PACU, meetings with students, mentors, ward managers and PEF; review of duty rosters and mentor database, 21 March 2017*
73. *Visit to Princess of Wales Hospital, Bridgend, paediatric assessment unit meetings with students, mentors, ward managers and PEF; review of duty rosters and mentor database, 22 March 2017*
74. *Visit to Princess of Wales Hospital, Bridgend, children's ward, meetings with students, mentors, ward managers and PEF; review of duty rosters and mentor database, 22 March 2017*
75. *Visit to Princess of Wales Hospital, Bridgend, SCBU, meetings with students, mentors, ward managers and PEF; review of duty rosters and mentor database, 22 March 2017*
76. *Visit to Flying Start, ABMUHB based at Townhill Community Primary School meetings with students, mentors, and managers, March 2017*
77. *Visit to Fforestfach Health Centre, meetings with students, mentors, ward managers and PEF; review of duty rosters and mentor database, 23 March 2017*
78. *Visit to Children's Hospital of Wales, Rainbow ward, meetings with students, mentors, ward managers and PEF; review of duty rosters and mentor database, 22 March 2017*
79. *Visit to Ysgol Crug Glas (independent school), meetings with students, mentors and managers, 23 March 2017*
80. *Visit to Singleton Hospital labour ward, meetings with students, mentors, PEF and review of mentor database and midwife rosters, 22 March 2017*
81. *Visit to Singleton Hospital wards and midwife led unit, meetings with students and mentors, 22 March 2017*
82. *Reviewer midwifery meeting with lead midwife for education, 23 March 2017*
83. *Visit to Neath Port Talbot midwife led unit, meetings with students, mentors, practice development midwife, manager, 23 March 2017*

84. Visit to Glangwili Hospital, meetings with students, mentors, ELM, managers and review of the live database, 23 March 2017
85. Visit to Swansea community midwifery team, 23 March 2017
86. Visit to breastfeeding support group – 360 Café (independent), meeting with students and service users and carers, 23 March 2017
87. CHHS professional practice portfolio (pre-registration nursing), including ongoing record of achievement year one, two and three, 2016-17
88. Student evaluations of each placement provider (pre-registration nursing), various dates
89. Student evaluations of each placement provider (pre-registration midwifery), various dates
90. CHHS professional practice portfolio (midwifery), including ongoing record of achievement year one, two and three, 2016-17
91. Practice learning environment audit profiles for midwifery placements visited, various dates
92. Practice learning environment audit profiles for child placements visited, various dates
93. BSc (Hons) nursing programme handbook, September 2016 cohort, 2016-2017
94. Children's nursing selection dates and panel members details, 2016-2017
95. Failing students action plan, undated
96. Mentor portfolio, ABMUHB, undated
97. CHHS communication pathways with placement partners, 2016
98. Sample of tutorial records (midwifery and child) 2014-2016
99. HDUHB summary report of current and additional control measures in place following investigation of cases, January-April 2016
100. Print out of screen capture, child mentor live register Cilgerran ward, Glangwili Hospital, 21 March 2017
101. Print out of screen capture, midwifery mentor live register, Glangwili Hospital, 21 March 2017
102. Terms of reference and minutes, all Wales nursing and midwifery pre-registration group, various dates
103. Terms of reference and minutes, all Wales practice facilitator forum, various dates
104. NMC annual self-assessment programme monitoring report, 2014-15
105. Teaching timetables, pre-registration nursing (child), undated
106. Teaching timetables, pre-registration midwifery, undated
107. Students evaluation of modules, pre-registration nursing (child), various dates 2014-2016
108. Students evaluation of modules, pre-registration midwifery, various dates 2014-2016
109. CHHS staff summaries of continuing professional development, 2016-2017
110. CHHS arrangements for revalidation workshops, 16 March 2017
111. ABMUHB schedules for mentor updates, 2017
112. BMid (Hons) admissions selection process and selection records, undated

113. CHHS minutes of student staff forum, various dates 2015-2016

114. ABMUHB sign-off mentor preparation materials, 2017

115. Managing reviewer request for university response to HIW inspection reports, March 2017

116. ABMUHB process of entering and monitoring mentor register data, an overview of governance arrangements, February 2017

117. Managing reviewer meeting, fitness for practice, 22 March 2017

118. Programme diary confirming scheduling of service user involvement in midwifery lectures, 2016-17

Personnel supporting programme monitoring
Prior to monitoring event
Date of initial visit: 07 Mar 2017
Meetings with:
<p>Pre-registration programme director, nursing</p> <p>Lead midwife for education</p> <p>Placement audits and attendance monitoring manager</p> <p>Representative from college governance office</p> <p>Manager quality, standards and academic integrity</p> <p>Senior lecturer, designated field lead for pre-registration nursing (child)</p> <p>Head of department of nursing</p>
At monitoring event
Meetings with:
<p>Head of midwifery in HDUHB</p> <p>Senior nurse paediatrics HDUHB</p> <p>Lead nurse education ABMUHB</p> <p>Senior lecturer children and young people's nursing team</p> <p>PEF ABMUHB</p> <p>Senior nurse education HDUHB training (seconded)</p> <p>Education liaison nurse team leader HDUHB</p> <p>Community manager, Swansea midwives</p> <p>Midwifery matron</p> <p>Assistant director of nursing HDUHB</p> <p>Head of the department of nursing</p> <p>Programme director pre-registration nursing</p> <p>Operations lead for pre-registration midwifery</p> <p>Head of midwifery education and LME</p> <p>Director of student engagement and experience</p> <p>Manager – quality, standards and academic integrity</p> <p>Admissions and enrolment manager</p> <p>Assessment and awards manager</p>

Placement audits and attendance monitoring manager
Programme team pre-registration midwifery
Programme team pre-registration nursing (child)

Meetings with:

Mentors / sign-off mentors	23
Practice teachers	
Service users / Carers (in university)	5
Service users / Carers (in practice)	5
Practice Education Facilitator	4
Director / manager nursing	2
Director / manager midwifery	5
Education commissioners or equivalent	1
Designated Medical Practitioners	
Other:	

Meetings with students:

Student Type	Number met
Registered Nurse - Children	Year 1: 10 Year 2: 8 Year 3: 5 Year 4: 0

Registered Midwife - 18 & 36M	Year 1: 6 Year 2: 3 Year 3: 6 Year 4: 0
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