## 2013-14
Annual monitoring report of performance in mitigating key risks identified in the NMC Quality Assurance framework for nursing and midwifery education

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Introduction to NMC QA framework

The Nursing and Midwifery Council is the professional regulatory body for nurses and midwives in the UK. Our role is to protect patients and the public through efficient and effective regulation. We aspire to deliver excellent patient and public-focused regulation. We seek assurance that registered nurses and midwives and those who are about to enter the register have the knowledge, skills and behaviours to provide safe and effective care.

We set standards for nursing and midwifery education that must be met by students prior to entering the register. Providers of higher education and training can apply to deliver programmes that enable students to meet these standards. The NMC approves programmes when it judges that the relevant standards have been met. We can withhold or withdraw approval from programmes when standards are not met.

Published in June 2013, the NMC’s QA framework identified key areas of improvement for our QA work, which included: using a proportionate, risk based approach; a commitment to using lay reviewers; an improved ‘responding to concerns’ policy; sharing QA intelligence with other regulators and greater transparency of QA reporting.

Our risk based approach increases the focus on aspects of education provision where risk is known or anticipated, particularly in practice placement settings. It promotes self-reporting of risks by Approved Education Institutions (AEIs) and it engages nurses, midwives, students, service users, carers and educators.

Our QA work has several elements. If an AEI wishes to run a programme it must request an approval event and submit documentation for scrutiny to demonstrate it meets our standards. After the event the QA review team will submit a report detailing whether our standards are “met”, “not met” or “partially met” (with conditions). If conditions are set they must be met before the programme can be delivered.

Review is the process by which the NMC ensures AEIs continue to meet our standards. Reviews take account of self-reporting of risks and they factor in intelligence from a range of other sources that can shed light on risks associated with AEIs and their practice placement partners. Our focus for reviews, however, is not solely risk-based. We might select an AEI for review due to thematic or geographical considerations. Every year the NMC will publish a schedule of planned reviews, which includes a sample chosen on a risk basis. We can also conduct extraordinary reviews or unscheduled visits in response to any emerging public protection concerns.

This annual monitoring report forms a part of this year’s review process. In total, 16 AEIs and 32 programmes were reviewed. The programmes have been reviewed by a review team including a managing reviewer, nurse and midwifery reviewers and a lay reviewer. The review takes account of feedback from many stakeholder groups including academics, managers, mentors, practice teachers, students, service users and carers involved with the programmes under scrutiny. We report how the AEI under scrutiny has performed against key risks identified at the start of the review cycle. Standards are judged as “met”, “not met” or “requires improvement”. When a standard is
not met an action plan is formally agreed with the AEI directly and is delivered against an agreed timeline.
| Resources | 1.1 Programme providers have inadequate resources to deliver approved programmes to the standards required by the NMC | 1.1.1 Registrant teachers hold NMC recordable teaching qualifications and have experience/qualifications commensurate with role | 1.2 Inadequate resources available in practice settings to enable students to achieve learning outcomes | 1.2.1 Sufficient appropriately qualified mentors / sign-off mentors / practice teachers available to support numbers of students |
| Admissions & Progression | 2.1 Inadequate safeguards are in place to prevent unsuitable students from entering and progressing to qualification | 2.1.1 Admission processes follow NMC requirements | 2.1.2 Programme providers’ procedures address issues of poor performance in both theory and practice | 2.1.3 Programme providers’ procedures are implemented by practice placement providers in addressing issues of poor performance in practice | 2.1.4 Systems for the accreditation of prior learning and achievement are robust and supported by verifiable evidence, mapped against NMC outcomes and standards of proficiency |
| Practice Learning | 3.1 Inadequate governance of and in practice learning | 3.1.1 Evidence of effective partnerships between education and service providers at all levels, including partnerships with multiple education institutions who use the same practice placement locations | 3.2 Programme providers fail to provide learning opportunities of suitable quality for students | 3.2.1 Practitioners and service users and carers are involved in programme development and delivery |
| | 3.3 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 | 3.3.3 Records of mentors / practice teachers are accurate and up to date |
| Quality Assurance | 4.1 Approved programmes fail to address all required learning outcomes that the NMC sets standards for | 4.1.1 Students achieve NMC learning outcomes, competencies and proficiencies at progression points and for entry to the register for all programmes that the NMC sets standards for | 4.2 Audited practice placements fail to address all required learning outcomes in practice that the NMC sets standards for | 4.2.1 Students achieve NMC practice learning outcomes, competencies and proficiencies at progression points and for entry to the register for all programmes that the NMC sets standards for |
| | 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 |

**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 hold NMC recordable teaching qualifications and have experience/qualifications commensurate with role. 1.2 Inadequate resources available in practice settings to enable students to achieve learning outcomes. 1.2.1 Sufficient appropriately qualified mentors / sign-off mentors / practice teachers available to support numbers of students.

- **Admissions & Progression**: 2.1 Inadequate safeguards are in place to prevent unsuitable students from entering and progressing to qualification. 2.1.1 Admission processes follow NMC requirements. 2.1.2 Programme providers’ procedures address issues of poor performance in both theory and practice. 2.1.3 Programme providers’ procedures are implemented by practice placement providers in addressing issues of poor performance in practice. 2.1.4 Systems for the accreditation of prior learning and achievement are robust and supported by verifiable evidence, mapped against NMC outcomes and standards of proficiency.

- **Practice Learning**: 3.1 Inadequate governance of and in practice learning. 3.1.1 Evidence of effective partnerships between education and service providers at all levels, including partnerships with multiple education institutions who use the same practice placement locations. 3.2 Programme providers fail to provide learning opportunities of suitable quality for students. 3.2.1 Practitioners and service users and carers are involved in programme development and delivery. 3.3 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. 3.3.3 Records of mentors / practice teachers are accurate and up to date.

- **Quality Assurance**: 4.1 Approved programmes fail to address all required learning outcomes that the NMC sets standards for. 4.1.1 Students achieve NMC learning outcomes, competencies and proficiencies at progression points and for entry to the register for all programmes that the NMC sets standards for. 4.2 Audited practice placements fail to address all required learning outcomes in practice that the NMC sets standards for. 4.2.1 Students achieve NMC practice learning outcomes, competencies and proficiencies at progression points and for entry to the register for all programmes that the NMC sets standards for. 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.

**Summary of findings against key risks**

| Standard Met | Requires Improvement | Standard Not met |
Introduction to Coventry University’s programmes

The Department of nursing, midwifery and healthcare practice, Faculty of health and life sciences in Coventry University was reapproved to deliver pre-registration nursing and midwifery programmes in 2013. This monitoring review focuses on pre-registration nursing adult field and pre-registration midwifery, three year and 18 month shortened programmes. To date the programmes are reported by students, mentors and employers as successful in preparing students for practice placements during the programme and fit for practice and purpose on their completion.

A statement of compliance with Health Education West Midlands (HEWM) (educational commissioner) confirms that sufficient resources in both academic and practice settings have been identified to support the programmes to be effectively delivered for the intended number of students.

HEWM identifies 2013/14 commissions are based upon effective partnerships with Coventry University and confidence that programmes of nursing and midwifery education prepare students who are fit for practice on completion of the programme. This is reiterated by employers, heads of nursing and midwifery and the Local Supervising Authority Supervising Midwifery Officer (LSA MO).

The monitoring visit took place over two days and involved visits to practice placements to meet a range of stakeholders. Particular consideration is given to the student experiences in the placements which have been subject to adverse concerns as a result of the Keogh review and Care Quality Commission (CQC) reviews.

Summary of public protection context and findings

The admissions and selection process is reported by service users, carers and employers as very effective in selecting students with appropriate values and attitudes. Students’ progression is carefully managed and strategies are in place to address and appropriately manage any academic issues or concerns relating to students’ fitness to practise.

Our findings demonstrate that admissions and progression procedures are robust and effectively implemented to ensure students entering and progressing on the programmes meet NMC standards and requirements which is fundamental to protection of the public.

The university and faculty have sound policies and procedures in place for the management of poor performance of students in both theory and practice. A robust fitness to practise process manages incidents of concern whether academic or professional misconduct. The outcomes of the fitness to practise panel confirms that cases are dealt with appropriately to support the student but most importantly to protect the public.

We found all mentors/sign off mentors were confident that the university procedures are
robust and effectively implemented and an incompetent or professionally unsuitable student would be removed from the programme.

The LSA MO and student midwives confirm they have a named supervisor of midwives to provide support and experience of midwifery supervision during the programme.

Midwifery students report their understanding of the role of the supervisor of midwives and their important contribution to public protection.

Students’ learning is enhanced by the effective involvement of practitioners and service users and carers in programme development and delivery. Learning and teaching strategies are effective in preparing and developing students. This demonstrates a strong commitment to protection of the public as students are generally well prepared before commencing placements and offering patient care under the supervision of a mentor.

The university has effective partnership working and governance arrangements of and in practice learning at a strategic and operational level to ensure shared responsibility for students learning in the practice environment. There is considerable investment in the preparation and support of mentors and the completion of mentor annual updates is good. All mentors are appropriately prepared for their role to support and assess students.

Overall mentors and students confirm that there are an appropriate range of practice learning experiences in all programmes to achieve NMC competencies / proficiencies.

Students report that they feel confident and competent to practise at the end of their programme and to enter the NMC professional register. Mentors and employers describe students completing the programmes as fit for practice and purpose.

One of the main practice placement providers, George Eliot Hospital NHS Trust (NHST), was subject to an adverse Keogh report in 2013. Our findings demonstrate university staff have worked effectively with placement providers at both strategic and operational levels to identify and control any risks to the protection of the public and the education of students on nursing and midwifery programmes. Measures are in place to ensure that students experience good role models and mentorship.

### Summary of areas that require improvement

None noted.

### Summary of areas for future monitoring

- The development of the academic in practice role.
- The use of accreditation of prior learning (APL) in pre-registration nursing programmes.
- External examiners engagement in theory and practice.
- The sharing of information between all stakeholders to enhance the transparency
of actions taken in response to concerns.

## Summary of notable practice

### Admissions and Progression
The admission and selection process is reported by service users, carers and employers as very effective in selecting students with appropriate values and attitudes. Service users and carers report their involvement is valued and influences the students learning experiences.

### Practice Learning
At South Warwickshire NHS Foundation Trust (NHSFT) students are invited to the trust board meeting to ‘tell their stories’ of their practice placement experiences. This is an excellent example of partnership activity and recognition of the value of students’ contribution to improve health care environments.

## Summary of feedback from groups involved in the review

### Academic team
The academic team give assurance that they are confident in the quality of the delivery of the BSc (Hons) Nursing (adult) and BSc (Hons) Midwifery programmes. Actions completed from external QA reports, programme approval conditions, previous NMC monitoring activity, self-assessment evaluation and national student survey action plans are used to further enhance the education provision of NMC approved programmes at the university.

### Mentors, sign-off mentors, practice teachers, employers and education commissioners
We found mentors engage effectively with students, the curricula and the university. Practice educators support mentors and students across a wider context and engage regularly with the link lecturers to discuss and address any issues pertaining to the students practice learning experiences.

We found employers have understanding and involvement in the students learning experience and have robust partnership relationships with the university. They describe students completing the programmes as fit for practice and purpose.

### Students
We were told by students that they are well prepared and supported in both theory and practice.

### Service users and carers
Service user and carer representatives told us their input and involvement in nursing and midwifery education is greatly valued by students and the university.
Relevant issues from external quality assurance reports

Keogh reviews and Care Quality Commission (CQC) reports were considered for practice placements used by the university to support students’ learning.

The following reports require action(s):

George Eliot Hospital NHST is a Keogh Trust under special measures.

Some issues needed urgent action as they may be detrimentally impacting on patient experience and continuity of care.

A key concern for the trust board to address is that, while the leadership had taken difficult decisions on the long term future of the trust, it was difficult to identify evidence of proactive clinical leadership that is focused on pursuit of excellent quality of care and treatment.

During the monitoring visit we were provided with a range of evidence to demonstrate the university’s effective engagement in working in partnership with George Eliot NHST to address the challenges experienced by the trust. This includes meetings and other communications and action plans with the CEO and Director of nursing at George Eliot NHST.

In addition, the curriculum has been enhanced in many of the areas highlighted by the Keogh (2013) report. Examples include; an inter-professional approach to education in support of complex needs, comorbidity, advocacy, care of the older person and end of life care. Students have a clear understanding of their responsibility in these areas and other relevant fields and described their expectations and future personal development as leaders of the nursing profession.

Mentors and trust managers report significant improvements in clinical areas as a result of the trust special measures. These include weekly teaching sessions within George Eliot NHST which include subjects focused on older people and end of life care.

The Beaufort Care Home was reviewed by CQC in August 2013 and found improvements were needed in the recording of medications.

At a follow up visit by CQC in September 2013 improvements had been made and the standard was met. An educational audit conducted by the university at Beaufort Care Home has confirmed appropriate learning experiences and support are available and the placement area is appropriate for students’ learning.

Section 4.1.1 provides examples of programme enhancements which include the inclusion of the six C’s (care, compassion, competence, communication, courage, commitment) which are demonstrated throughout the programmes and collaborative capabilities which include dignity and respect.

Brooklands Care Home (Amber ward) was reviewed by CQC in August 2013 and found individuals’ privacy and dignity was not always respected and their views were not always taken into account in the way the service was provided in relation to their treatment.

An action plan was implemented by the care home and an educational audit was carried
out by the university. The audit confirmed a live mentor register met NMC requirements and action plans demonstrated the support for students in Amber ward, however there was no evidence of the improvement to privacy and dignity.

During the monitoring visit it was found that the university has reviewed the potential to use Brooklands Care Home for placement experience. A repeat educational audit has been undertaken which confirmed the care home is suitable to provide appropriate learning experiences and support for students. The university may wish to consider the inclusion of reference to negative quality assurance outcomes as part of the education audit, and to make achievement of improvements explicit.

Warwick Myton Hospice was reviewed by CQC in October 2013 and it was found that the hospice did not always maintain accurate and appropriate records; specifically care plans and assessments.

To take these improvements forward we were told a workshop involving a core group had been set up to review and revise documentation. This was piloted in September 2013. New documentation was implemented in November 2013 and is being audited weekly.

Mentors and employers agree that the new documentation is more focused, which improves record keeping. The CQC revisited the placement area in January 2014 and identified the standard is now met. The adult nurse reviewer visited this placement and confirmed the area provides positive placement learning opportunities and support for students. Students confirmed they learn a lot about holistic care of patients, family members and others involved in care delivery. Mentors described their involvement in ensuring the six C’s are addressed with students.

The hospice runs a national end of life care programme which is open to participants from external organisations and some George Eliot NHST personnel attend these sessions.

All CQC compliance reports relevant to placement areas used by the university of Coventry for approved nursing and midwifery programmes were considered, but did not require further discussion as part of this review.

### Evidence / Reference Source

1. NHS Review into the quality of care and treatment provided by 14 hospital trusts in England: overview report, Keogh, July 2013
2. Response to external reports, February 2014
3. CQC Review of Compliance: The Beaufort Care Home, August 2013
4. Department of nursing, midwifery and health care practice, Faculty of health and life sciences, Coventry University: Report for Beaufort nursing home
5. Coventry University student evaluations for Beaufort Care Home, 2013
6. Coventry University learning environment profile educational audit: Beaufort Care Home.
7. CQC Review of Compliance: Brooklands Care Home (Amber), August 2013
8. Brooklands Care Home, Amber Ward post CQC action plan, 2013
Pre-registration nursing (adult) approved 2013.

Recommendations include:

- Consider the use of APL to test a claim against practice hours.
- The external examiner is to visit clinical settings.

We were informed that no students have made an APL claim since the development of the new curriculum. This will require re-visiting at the next NMC monitoring event.

External examiners are given the opportunity to visit the clinical settings but have not yet visited. This will require reporting in the Approved Education Institution (AEI) self-report 2014-2015 and re-visited at the next NMC monitoring event.

Pre-registration midwifery (three year and shortened) programmes approved 2013.

Recommendations include:

- Students’ evaluation feedback should be on-line and anonymous.

The university confirmed anonymous on-line evaluations are currently being developed.

Evidence / Reference Source

1. NMC Programme approval report: adult nursing 2013
2. External Examiners Report, Adult 2013
3. Coventry Major review of pre-Registration health programmes project report, June 2013
4. NMC Programme approval report: midwifery 2013

Specific issues to follow up from self-report

All actions highlighted in the self-report are complete. Specific issues followed up include:

- The impact of the new pre-registration nursing curriculum.

The new pre-registration nursing curriculum was initiated in September 2013.
Evaluations to date confirm this is working well and the student experience is reported as very positive and appropriate.

- Review of the NSS scores for the BSc Midwifery (three year programme).

The NSS scores and subsequent action plan demonstrate an increase in satisfaction from the previous year resulting in 95% student satisfaction.

**Evidence / Reference Source**

1. NMC Programme monitoring report, 2012
2. Pre-registration nursing programme board minutes, November 2012
3. Coventry University, Self report 2012/2013
4. NSS Action Plan (midwifery 3 year programme), 2014

**Findings against key risks**

**Key risk 1 – Resources**

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

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

Risk indicator 1.1.1 - registrant teachers hold NMC recordable teaching qualifications and have experience / qualifications commensurate with role

What we found before the event

All teachers hold NMC recordable teaching qualifications and have relevant experience.

What we found at the event

The NMC register database and staff CVs confirm all academic staff have active registration as a nurse or midwife. Professional qualifications and NMC recordable teaching qualifications and experience are commensurate with their role.
The faculty has robust governance procedures in place to monitor NMC registration and recordable qualifications of academic staff. A Lead Midwife for Education (LME) is in post and is supported by the university to undertake her role effectively; liaising with commissioners and external stakeholders; strategic planning and the management of staff resources. The role and responsibilities meet NMC requirements.

Evidence / Reference Source

1. NMC Programme approval report: nursing, 2013
2. Programme documentation, nursing, 2013
3. NMC Programme approval report: midwifery (3month), 2013
4. Programme documentation, midwifery (three year), 2013
5. NMC Programme approval report: midwifery (18 month), 2013
6. Programme documentation, midwifery (18month), 2013
7. NMC registration site checked - date 08 February 2014
8. Staff C.Vs
9. Staff workload activities, 2014
10. Health Education West Midlands (HEWM) Statement of compliance

Risk indicator 1.2.1 - sufficient appropriately qualified mentors / sign-off mentors / practice teachers available to support numbers of students

What we found before the event

There are sufficient mentors for each student and due regard is upheld. Mentor updates are attended and some are completed online, a triennial review is in place and is effective.

In adult nursing there are sufficient mentors to work with students for a minimum of 40% of the time.

In midwifery there are sufficient sign off mentors to work with midwifery students for a minimum of 40% of the time. A sign off mentor participates at midwifery interviews.

Practice Educators and Practice Facilitators are funded the by NHS trusts. HEWM commissions and funds mentorship programmes.

What we found at the event
We found there are sufficient qualified mentors and sign off mentors to support the number of student allocations. All students confirmed a suitable mentor with due regard is identified prior to the commencement of the placement.

In both pre-registration nursing and pre-registration midwifery programmes mentors and students report there are sufficient appropriately qualified mentors to work with students for a minimum of 40% of the time, with some working up to 80% of the time with their student.

Overall students on both programmes are very positive about the quality of support they receive in practice placements from mentors and sign off mentors which enables them to achieve the programme learning outcomes.

### Evidence / Reference Source

1. NMC Programme approval report: Adult Nursing, 2013
2. NMC Programme approval report: Midwifery (three years) 2013
3. NMC Programme approval report: Midwifery (18month) 2013
4. 86 student placement evaluations from a range of areas, 2013 -14
5. Telephone interview with the LSA MO 12 February 2014
6. Visit to George Eliot midwifery department 12 February 2014

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**Outcome: Standard met**

**Comments:** no further comments

**Areas for future monitoring:** none

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### Findings against key risks

**Key risk 2 – Admissions & Progression**

2.1 Inadequate safeguards are in place to prevent unsuitable students from entering and progressing to qualification

Risk indicator 2.1.1 - admission processes follow NMC requirements
What we found before the event

Admission and entry principles meet NMC requirements.

All students have a Disclosure and Barring service (DBS) and occupational health check on admission and are required to self-report their good character and health status annually.

Character references are taken up. The requirement for a face to face interview with prospective students is detailed in the description of the interview process and the admissions and selection criteria which is contained within the programme documentation.

Interviews are undertaken in partnership with practice placement provider representatives. Placements are discussed at interview.

The selection process includes a scenario based ‘speed dating’ approach that tests values and attitudes.

What we found at the event

The programme information is of a high standard and describes all aspects of the programme provision to a level which would enable an applicant to make an informed choice about their programme of study.

The faculty demonstrates commitment to providing an environment in which diversity is valued and encouraged. All university staff and practitioners are required to undertake mandatory training in equality and diversity on an annual basis. The role of the disability learning support tutor is designed to receive direct referrals from students who have declared a disability on application.

The admission and selection process is reported by service users, carers and employers as very effective in selecting students with appropriate values and attitudes. Service users and carers are involved in the selection process and confirm their involvement is valued by the faculty.

The faculty has adopted a benchmark for entry to the nursing and midwifery programmes on the understanding that numeracy development is integral to the programme. Numeracy testing is also integral to the assessment strategy. The numeracy test measures GCSE equivalence.

There are robust processes in place for obtaining DBS checks, health screening and references. Mechanisms are in place for sharing information and joint decision making with practice placement providers if issues arise.

All students are required to complete an annual self-declaration of good health and good character at progression points in the programmes. The faculty’s fitness to practise panel reviews all cases where issues are raised.

All admissions and progression procedures are robust and effectively implemented to
ensure students entering and progressing on the programmes meet NMC standards and requirements which is fundamental to protection of the public.

Evidence / Reference Source

1. NMC Programme approval report: adult nursing 2013
2. Programme handbook, adult nursing, 2013
3. NMC Programme approval report: midwifery (three years), 2013
4. NMC Programme approval report: midwifery (18month)
5. Coventry University, Policy and procedure for professional suitability, 2013
6. DBS Policy, updated April 2013
7. Department of Nursing and Health Studies, recruitment and selection strategy, undated
8. Coventry University, accreditation of prior learning guidance for staff
9. Coventry University, attendance at the selection process
10. Coventry University, Professional suitability and fitness to practise policy
11. Coventry University UCAS admissions policy, section 4.5

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

What we found before the event

Faculty and university policies and processes are in place to manage fitness to practise. These include clear guidelines to deal with incidents of academic and professional misconduct.

A fitness to practise panel is established and practice representatives are involved in the decision making process as panel members.

Students self-declare health and good character at identified progression points in the programme.

The university has a policy for unfair practice in assessment in place.

What we found at the event

The university and faculty have sound policies and procedures in place for the management of poor performance of students in both theory and practice. A robust fitness to practise process manages concerns about students including academic issues or professional misconduct. The outcomes of the fitness to practise panel
confirms that cases are dealt with appropriately to support the student but most importantly to protect the public.

Academic staff, mentors and students demonstrate understanding of the processes to address poor performance in both theory and practice.

Mentors/sign off mentors were all confident that the university procedures are robust and effectively implemented and an incompetent or professionally unsuitable student would be removed from the programme.

### Evidence / Reference Source

1. NMC Programme approval report: adult nursing, 2013
2. NMC Programme approval report: midwifery (three years), 2013
3. NMC Programme approval report: midwifery (18month), 2013
4. Coventry University, Fitness to Practise procedure and process, 2013

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

### What we found before the event

The faculty has developed a raising and escalating concerns process which identifies the procedure for reporting concerns in practice. This information is conveyed to all students and mentors.

Mentors/signoff mentors know how to escalate concerns to the university about either poor practice of students or examples of poor clinical practice in practice placement areas.

### What we found at the event

Students are provided with specific simulation sessions to develop essential practice skills before going into practice placements. They also develop skills such as assertiveness, conflict management, communication challenges and emotional resilience to equip them with the tools they may require to escalate concerns. We found students and mentors agree this skill development is appropriate and effective.

The faculty has a robust process for raising and escalating concerns in practice and this information is provided to all students and mentors. Students described with clarity how to escalate concerns to the university about either poor practice of students or examples of poor clinical practice.

They confirmed that they were able and confident to seek help and discuss concerns,
where necessary, and were supported by university staff and mentors.
For both pre-registration nursing and midwifery, all mentors reported understanding of the procedures to follow if there were concerns about a student’s performance in practice.

The LSA MO and student midwives confirm there is a named supervisor of midwives for student midwives during the programme to provide them with support and experience of midwifery supervision.

Midwifery students report their understanding of the role of the supervisor of midwives and their important contribution to public protection.

Evidence / Reference Source

1. NMC Programme approval report: adult nursing, 2013
2. NMC Programme approval report: midwifery (three years), 2013
3. NMC Programme approval report: midwifery (18month), 2013
4. Interviews with students, 12 February 2014 and 13 February 2014
5. Discussion with LSA MO, 13 February 2014
6. Interviews with mentors 12 February 2014 and 13 February 2014

Risk indicator 2.1.4 - systems for the accreditation of prior learning and achievement are robust and supported by verifiable evidence, mapped against NMC outcomes and standards of proficiency

What we found before the event

Systems for the APL are in place which is managed by the faculty APL committee. The NMC approval report for pre-registration nursing, 2013 identified that this process has not yet been used.

What we found at the event

Systems for the accreditation of prior learning and achievement are comprehensive and well established within the faculty and there is recognition by academic staff of the need to map prior learning against the NMC learning outcomes and the required hours of theory and practice learning.

To date no students have applied to make an APL claim for the 2013 approved nursing curriculum. This will require following up at the next NMC monitoring event.
Outcome: Standard met

Comments:
- To date no students have applied to make an APL claim for the 2013 approved nursing curriculum. This will require following up at the next NMC monitoring event.

Areas for future monitoring:
- The use of APL in pre-registration nursing programmes.

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

Effective partnerships are demonstrated with the NHS; local providers; and the independent sector. These have been previously commended at NMC programme approval and monitoring events.

Placements are supported by practice educators and facilitators, practice development midwives and link lecturers.
Senior practice placement providers are members of programme boards and development groups. Placements are well managed and students report good learning opportunities.

Placements have an education audit completed in partnership between the university and practice placement providers.

### What we found at the event

The university has well established and effective working relationships with commissioners, the local supervising authority (LSA) and practice placement providers in NHS trusts and the independent sector. All partners agreed that there is effective partnership working at both a strategic and operational level.

The education audit tool conforms to NMC requirements and is undertaken in partnership between academic staff and practice placement providers. The faculty and practice placement providers use objective criteria and processes for approving new practice learning environments, and audit all practice placements at least every two years. All audits we examined were in date.

We found that the university has effective partnership working and governance arrangements for practice learning at a strategic and operational level to ensure shared responsibility for students learning in the practice environment.

### Evidence / Reference Source

1. NMC Programme approval report: adult nursing, 2013
2. NMC Programme approval report: midwifery (three year), 2013
3. NMC Programme approval report: midwifery (18month), 2013
4. Meeting with service users and carers, 12 February 2014

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

### What we found before the event

Service user and carer engagement is supported at senior management level within the faculty. The faculty has a strategy document for service users and carers’ involvement in programme development and delivery. Designated academic staff have responsibility for ensuring the development of the strategy.
What we found at the event

Practitioners and service users were involved in development of the nursing and midwifery programmes. Employers and commissioners confirmed their understanding of the structure of the programmes and the focus in the programmes to develop a nurse or midwife who is fit for practice as well as the academic award. Service managers and heads of midwifery told us they had contributed to the development of the programmes. Practitioners reported they contribute to skills teaching in nursing and midwifery programmes. One effective example of collaborative working was evident within the community setting where community nurses and midwives assisted students with behaviour modelling. An example of this is the preparation and development of students’ non-verbal skills prior to visiting patient’s homes. Students and practitioners reported this as effective and sensitive development of communication and behavioural skills.

It was found that service user and carer engagement is evident during the programmes and students told us this is an effective approach to learning about the needs of service users and carers. Designated academic staff have responsibility for ensuring the development of service user and carer engagement. Service users and carers told us they feel valued by the faculty for their contribution to nursing and midwifery programmes.

There is evidence that students’ learning is enhanced by the effective involvement of practitioners and service users and carers in programme development and delivery.

Evidence / Reference Source

1. NMC Programme approval report: adult nursing, 2013
2. NMC Programme approval report: midwifery (three year), 2013
3. NMC Programme approval report: midwifery (18month), 2013
4. Meeting with service users and carers, 12 February 2014

Risk indicator 3.2.2 - academic staff support students in practice

What we found before the event

University link lecturers are visible in placements.
The LME’s engagement with practice is regular and effective.

What we found at the event
We found the faculty has a robust system of allocating link lecturers to every placement setting. Students and mentors told us they are visible, available, and easy to contact and their input and support is valued. Their role includes sign posting students to a comprehensive range of available student support facilities.

Midwifery mentors report regular contact and engagement with midwifery lecturers and the LME.

The LME works in partnership with heads of midwifery and supervisors of midwives to support staff development and training to enable midwives and supervisors of midwives to effectively provide safe care to women.

The midwifery students told us they value the “buddy system” introduced by academic staff whereby senior midwifery students support the students in the year below. They report senior students provide them with support and realistic expectations of the demands of the programme.

### Evidence / Reference Source

1. NMC Programme approval report: adult nursing, 2013
2. NMC Programme approval report: midwifery (three year), 2013
3. NMC Programme approval report: midwifery (18month), 2013

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

### What we found before the event

Mentors are adequately prepared for their role.

Opportunities for inter assessor reliability are evident.

Feedback evaluations from students about their placement experiences are monitored and acted upon by the university and practice placement providers, as appropriate.

Sign off mentors are prepared and they are allocated appropriate levels of time to support and work with students.

### What we found at the event

We found the university, in collaboration with its partner organisations, provides educational programmes which mentors confirm prepare and update them for their role.

NMC requirements to support learning and assessment in practice are achieved.

Mentors and service managers told us mentors are released to attend mentor updates
which are delivered monthly. Electronic updates are also available.

There is an effective system of communication between the practice areas and the university through academic staff, practice educators (PEs) and practice facilitators (PFs). Regular update sessions are provided by PEs, PFs, practice development midwives and link lecturers to ensure that mentors are informed and updated about programmes and assessment requirements. A mentor database viewed by reviewers confirms a live register of mentors and sign-off mentors is maintained.

Evidence / Reference Source

1. NMC Programme approval report: adult nursing, 2013
2. NMC Programme approval report: midwifery (three year), 2013
3. NMC Programme approval report: midwifery (18month), 2013
4. NMC Programme approval report: Learning and assessment in practice, 2012
5. Coventry University: Self report 2012-2013
6. 86 students placement evaluations (adult nursing) 2013
7. 26 students evaluations (midwifery), 2013
8. Coventry University, process for feedback from student evaluations.
11. Discussion with Director for placement learning, 12 February 2014
12. Students off duty rota, 2014

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

What we found before the event

Mentors are released to attend mentor updates.

What we found at the event

PEs and PFs deliver mentor updates in partnership with link lecturers. The updates are delivered monthly in placement areas and electronic updates are also available.

Sessions include planned and bespoke sessions.

We found the dates for mentor updates are provided to all clinical areas well in advance and mentors are released to attend. The PEs, PFs and nurse managers are confident
that there are sufficient mentors and sign off mentors for the numbers of students. Managers in midwifery demonstrated their commitment to effective mentoring by developing a “check and challenge” form for students to complete and give to the head of midwifery. The purpose of this tool is to evaluate the mentor support given to students. Students and mentors all found this an effective tool so this has now been shared across the three trusts that provide midwifery placements.

### Evidence / Reference Source

1. NMC Programme approval report: adult nursing, 2013
2. NMC Programme approval report: midwifery (three year), 2013
3. NMC Programme approval report: midwifery (18month), 2013
4. NMC programme approval report: Learning and assessment in practice, 2012
5. Independent provider live registers of mentors, checked January 2014

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

#### What we found before the event

Mentor registers are up to date and sign off mentors are annotated. The databases are both electronic and paper copies and kept up to date by ward managers who then identify mentors who need an update. Mentor registers in the independent sector are available and accurate.

#### What we found at the event

Practice placement providers confirmed that procedures are in place for the triennial reviews. Senior nurses verified that all mentors who have undertaken the role for a minimum of three years have now had a triennial review.

Local registers on mentors and practice teachers are maintained in each trust by PFs and are up to date and accurate. A live register for mentors for the private, voluntary and independent sector is held with the university and updated as appropriate.

### Evidence / Reference Source

1. NMC Programme approval report: adult nursing, 2013
2. NMC Programme approval report: midwifery (three year), 2013
### Findings against key risks

**Key risk 4 - Fitness to Practice**

4.1 Approved programmes fail to address all required learning outcomes that the NMC sets standards for

4.2 Audited practice placements fail to address all required learning outcomes in practice that the NMC sets standards for

Risk indicator 4.1.1 - students achieve NMC learning outcomes, competencies and proficiencies at progression points and for entry to the register for all programmes that the NMC sets standards for

**What we found before the event**

Nursing and midwifery programmes are being delivered as planned. Year two and year three students are completing the old curriculum and year one students are six months into the programmes approved in 2013.

The year one programme focuses on collaborative education across professions. Once students have completed this they will progress to adult and midwifery specific seminars for specific application to their field of practice.

Mapping of the NMC essential skills clusters in programmes ensures that these competencies are met.

**What we found at the event**

We found policies and procedures related to students' fitness to practise are clearly understood and fully implemented. Students are formally introduced through specific
sessions to NMC standards including The Code: Standards of conduct, performance and ethics for nurses and midwives (NMC 2008) so that students are familiar with the standards expected of them and to help them identify where patient care may be compromised.

There is a range of effective teaching and learning strategies including simulated learning which are effective in preparing students for practice and enables students to achieve NMC outcomes and competencies. Simulation is used as an effective approach to learning and is well integrated within the programmes.

The university has strengthened the content in the curriculum in response to CQC reports (2013) pertaining to medications management which begins at recruitment and is throughout the programme and includes the recent acquisition of “Authentic World”.

Students told us the programmes are well structured and prepare them effectively for their role. A particular strength was identified as the communication and emotional resilience element included in year one of the programme.

Midwifery students report the effectiveness of the structure of the theory/practice week in preparing them to care for women and babies. The LSA MO reported the success of the midwifery team in designing hand held mobile devices to facilitate students learning in the maternity placement. The device supports the effective development of skills and clinical competence. The management of water births was identified as one area which was enhanced through the use of this resource.

There are robust arrangements for students to be able to progress on the programme and to successfully complete the required number of placement hours and meet EU requirements.

External examiners’ reports confirm students are successful and able to move through programme progression points.

Evidence / Reference Source

1  NMC Programme approval report: midwifery (three years), 2013
2  NMC Programme approval report: midwifery (18month), 2013
3  Programme handbook, adult nursing, 2013 and 2011
4  Student handbook, adult nursing, 2013
5  Coventry University, Midwifery, teaching and learning and applied research booklet.
6  External Examiner reports, nursing and midwifery 2012 - 13
7  Interviews with students 12 February 2014
8  Coventry University, Policy and procedure for professional suitability

Risk indicator 4.2.1 - Students achieve NMC practice learning outcomes, competencies and proficiencies at progression points and for entry to the register for all programmes that the NMC sets standards for
<table>
<thead>
<tr>
<th>What we found before the event</th>
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<tbody>
<tr>
<td>All NMC requirements and competencies are reflected within the curriculum and are fully addressed within practice, some via simulation.</td>
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<thead>
<tr>
<th>What we found at the event</th>
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<tr>
<td>There is comprehensive assessment of practice documentation for each year of the programmes. The documentation includes all the NMC competencies that need to be achieved, including the essential skills, to enable the student to progress to the next year of the programme and finally to achieve registration. The midwifery log is reported as effective and mentors, students and the external examiner confirm grading of midwifery practice is clearly understood.</td>
</tr>
<tr>
<td>The programme teams have addressed relevant recommendations identified within the Francis report (2013) within modules and all students agreed that the strong emphasis within the programmes on the six C’s is commendable.</td>
</tr>
<tr>
<td>A new initiative “A compassionate approach to nursing” workshops are delivered across the year to further enhance students and mentors learning and to improve patient care.</td>
</tr>
<tr>
<td>We found students evaluate their practice placements very positively and identify the support and opportunities available to support them to achieve programme/NMC outcomes and competencies. They are able to gain an effective range of learning experiences and achieve the EU requirements. Midwifery students have good opportunities to be involved in normal births as they all have a placement in a midwife led unit as well as the opportunity whilst on community placements.</td>
</tr>
<tr>
<td>Student midwives told us the triad / tripartite approach to support and facilitate their development during the programme is effective.</td>
</tr>
<tr>
<td>Three of the midwifery academic staff are supervisors of midwives and they participate in practice based activities and ensure students are supported and they recognise and report any issues related to protection of women and babies.</td>
</tr>
<tr>
<td>Overall mentors and students confirm that there are an appropriate range of practice learning experiences in all programmes to achieve NMC competencies / proficiencies.</td>
</tr>
<tr>
<td>Students report that they feel confident and competent to practise at the end of their programme and to enter the NMC professional register. Mentors and employers confirm students are fit for practice and purpose at the end of the programme.</td>
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<table>
<thead>
<tr>
<th>Evidence / Reference Source</th>
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<tbody>
<tr>
<td>1 NMC Programme approval report: adult nursing, 2013</td>
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<td>2 NMC Programme approval report: midwifery (three years), 2013</td>
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<td>3</td>
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<td>10</td>
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**Outcome: Standard met**

Comments: no further comments

Areas for future monitoring: none

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**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 |
| Quality assurance mechanisms are in place. |
| What we found at the event |
| We found quality assurance processes are in place and are robust. Internal and external quality audit mechanisms ensure programmes remain relevant and up to date. The nursing and midwifery programmes are evaluated well by students. External examiners have due regard for the nursing field they are examining. They... |
review theory and practice and have the opportunity to visit practice areas. We found the midwifery external examiner had visited practice placement areas and met students and mentors.

External examiner reports confirm changes are considered by the programme team following student evaluations, there is evidence of excellent tutorial support provided for students and the university moderation process is robust.

All students are requested to complete a placement evaluation. If issues arise that require prompt action these are discussed, by the relevant link tutor, with placement staff and action taken, as appropriate.

The student voice is heard through a number of mechanisms and students acknowledge that changes have been made in light of their feedback. Student representatives attend the student forum which is also attended by academics, the LME and the Deputy Vice Chancellor for the Student Experience.

We found that quality monitoring conducted by HEWM demonstrates that enhancements are made to pre-registration nursing and midwifery programmes and attention is given to a range of issues including attrition and retention and resources available for mentors to enable effective support for students.

Evidence / Reference Source

1. NMC Programme approval report: adult nursing, 2013
2. Coventry University Self Report 2012-2013
3. NMC Programme approval report: midwifery (three years), 2013
4. NMC Programme Approval report: midwifery (18month) 2013
5. Coventry University, External examiner policy, June 2013
7. External examiners report: midwifery, 2012-2013
8. Interviews with students 12 February 2014 and 13 February 2014
9. NSS report, 2013
10. Coventry University, Education commissioning for quality (ECQ) process progress report, 2013
11. Coventry University, QA regulations

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

Escalating concerns processes and the mechanisms in place to ensure effective
feedback to those involved are in place.
Discussions with commissioners identify their role in reporting of concerns across institutions.

What we found at the event

The faculty has introduced a Practice Quality Group which addresses all placement related issues with a diverse group of stakeholders. The agenda includes reviews of all CQC and other quality related reports to inform the university about the appropriateness of placements settings.

There are clear and well-articulated processes in place to protect service users including fitness to practise policies and procedures and escalation of concerns. HEWM requires students to raise and report patient safety concerns about poor clinical practice.

We found these are clearly understood by the students, mentors and employers.

Our findings demonstrate there are effective quality assurance processes in place to manage risks and NMC requirements are met.

All stakeholders have their own processes in place to manage and escalate concerns but these processes could be more transparent for all stakeholders.

Our discussion with HEWM and the university identifies a need to improve sharing of information to enhance the transparency of actions taken about concerns raised and identify and disseminate good practice.

Evidence / Reference Source

1. NMC Programme approval report: adult nursing, 2013
2. NMC Programme approval report: midwifery (three years), 2013
3. NMC Programme approval report: midwifery (18month), 2013
4. Coventry University, Whistleblowing policy (escalating concerns)
5. Extract from Assessment of Practice documentation (escalating concerns) pre registration nursing, May 2013
7. Telephone discussion with Education commissioning lead for HEWM, 13 February 2014

Outcome: Standard met

Comments:

- Our findings demonstrate there are effective quality assurance processes in place to manage risks and NMC requirements are met.
- All stakeholders have their own processes in place to manage and escalate concerns but these processes could be more transparent for all stakeholders.
- Our discussion with HEWM and the university identifies a need to improve sharing of information to enhance the transparency of actions taken about concerns raised and identify and disseminate good practice.

Areas for future monitoring:
- The sharing of information between all stakeholders to enhance the transparency of actions taken in response to concerns.
## Personnel supporting programme monitoring

**Initial visit on 08 January 2014. Meetings with:**

- Head of department
- Associate Head of department
- Course director, midwifery
- Lead midwife for education
- Principal lecturer, practice learning
- Admissions tutor
- Course director adult nursing

**During monitoring event. Meetings with:**

- Nursing and midwifery programme team
- Principal lecturer, practice learning
- 4 x Heads of Department
- Lead for nursing and midwifery commissioning (Health Education West Midlands)
- Local supervising authority midwifery officer (LSA MO)
- Service users and carers

**Meetings with:**

<table>
<thead>
<tr>
<th>Mentors / sign-off mentors</th>
<th>35</th>
</tr>
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<tbody>
<tr>
<td>Practice teachers</td>
<td>3</td>
</tr>
<tr>
<td>Service users / Carers</td>
<td>4</td>
</tr>
<tr>
<td>Practice Education Facilitator</td>
<td>5</td>
</tr>
<tr>
<td>Director / manager nursing</td>
<td>2</td>
</tr>
</tbody>
</table>
### Director / manager midwifery
2

### Education commissioners or equivalent
1

### Designated Medical Practitioners
0

### Other:
20
LMASO
Practice Development Midwife x1
Ward Manager x10
SOMS x8

Meetings with students:

<table>
<thead>
<tr>
<th>Student Type</th>
<th>Number met</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing- Adult</td>
<td>Year 1: 8</td>
</tr>
<tr>
<td></td>
<td>Year 2: 6</td>
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<tr>
<td></td>
<td>Year 3: 10</td>
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<tr>
<td></td>
<td>Year 4: 0</td>
</tr>
<tr>
<td>Specialist practice</td>
<td>Adult: 2</td>
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<tr>
<td></td>
<td>District nursing: 2</td>
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<tr>
<td>Midwifery 18months</td>
<td>Year 1: 4</td>
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<tr>
<td></td>
<td>Year 2: 1</td>
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<tr>
<td>Midwifery three years</td>
<td>Year 1: 5</td>
</tr>
<tr>
<td></td>
<td>Year 2: 9</td>
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<td>Year 3: 4</td>
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