

2013-14

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

Programme provider	University of West London
Programmes monitored	Registered nurse - children; Overseas nurses programme
Date of monitoring event	12-13 February 2014
Managing Reviewer	Peter Thompson
Lay Reviewer	Caroline Thomas
Registrant Reviewer(s)	Shirley Cutts, Diana De
Placement partner visits undertaken during the review	<p>A&E, Northwick Park Hospital</p> <p>Dryden ward (short stay acute assessment unit), Northwick Park Hospital</p> <p>Elliot ward (female surgery), Northwick Park Hospital</p> <p>Herrick ward (stroke rehabilitation), Northwick Park Hospital</p> <p>Jenner ward (cardiology), Northwick Park Hospital</p> <p>Hardy ward (care of older people), Northwick Park Hospital</p> <p>Kempton ward, Royal Berkshire Hospital</p> <p>Lion /Dolphin wards, Royal Berkshire Hospital</p> <p>Community children's nurse team</p> <p>Paediatric emergency care department, Royal Berkshire Hospital</p> <p>St Marks Hospital, Maidenhead</p> <p>Shooting Star Hospice</p> <p>Kingsley ward (haematology), Northwick Park Hospital</p> <p>Gladstone 1 (medicine and care of older people),</p>

	Central Middlesex Hospital
Date of Report Publication	4 July 2014

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.

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	3.2.2 Academic staff support students in practice		
	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	
Fitness for Practice	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			
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 the University of West London's programmes

The College of nursing, midwifery and healthcare at the University of West London (UWL) offers programmes of study in adult, child, mental health and learning disability nursing, midwifery, primary care and operating department practice.

This monitoring review considered the pre-registration children's nursing programme and the overseas nurses' programme (ONP). The children's nursing programme is commissioned by Health Education Thames Valley and Health Education North West London. There is an intake of 25 students per year, divided into two groups and based at Paragon House, West London, or Fountain House, Reading. The majority of the teaching occurs on the students' base site. Students are positive about this arrangement, stating that they are well supported by the programme team.

The ONP programme is commissioned by and delivered in partnership with Northwick Park Hospital, which is part of the North West London Hospitals NHS Trust. The numbers of students can vary between 10 and 25 per year depending on the trust's requirements.

The AEI 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 Care Quality Commission (CQC) reviews.

Summary of public protection context and findings

To ensure the quality of learning in practice, UWL and practice placement partners take a proactive approach in ensuring there are sufficient appropriately qualified mentors to meet projected student numbers. Commissioners confirm that the university has effective resource and capacity planning processes in place.

We found that the university has robust procedures for the recruitment and selection of students. This is enhanced by the use of a numeracy and literacy test and problem solving exercises to ascertain their ability to cope with the academic rigour of the programme. Furthermore, values-based group exercises strengthen public protection by ensuring that successful applicants have the essential attributes for nursing. Special attention is paid to selection of ONP students, who are selected in partnership with the sponsoring trust and observed in their practice as health care assistants before being accepted for interview.

We found that procedures for addressing poor performance in theory and practice are robust. Policies and procedures relating to fitness to practise are comprehensive and fully meet the requirements of the NMC. Our findings conclude that the outcomes of the cases considered by the fitness to practise panel are appropriate to support the student

but most importantly decisions made protect the public.

We are satisfied that practice staff have the confidence and knowledge to implement the cause for concern policy in situations where students are not achieving the required competencies and may be a danger to public protection.

We found effective partnerships between the university, the commissioners and practice placement partners. Use of the pan-London educational audit tool facilitates consistency in the quality assurance of practice learning environments across the London area.

We found that students feel confident and competent to practise at the end of their programme and to enter the NMC professional register. The programmes are positively evaluated by education commissioners, service managers, mentors and students. Mentors and employers describe students completing the programmes as fit for practice and purpose.

Three of the practice placement partners received adverse CQC reports in 2013/14. We concluded from our findings that effective partnership working between the academic teams, the practice placement partners and the commissioners has ensured that deficiencies have been addressed and appropriate levels of response agreed and implemented. The college's responses are informed by risk assessment and are appropriate and effective. Progress on actions taken is monitored closely by the college in order to protect students' learning and to ensure that they are not subjected to either poor educational or patient care practices.

The college and its practice placement partners provide a good standard of nursing education. There are processes in place to ensure that all of the NMC identified key risks are well controlled.

Summary of areas that require improvement

None identified

Summary of areas for future monitoring

- The development of the academic in practice role
- The continued monitoring of adverse CQC reports, joint action plans and quality assurance processes
- The sustainability of the model for delivering the children's nursing programme on two sites with a small core team consisting of a programme leader and 2.6 wte lecturers.
- Review external examiner engagement with practice and scrutiny of practice assessment documentation.

Summary of notable practice

None identified

Summary of feedback from groups involved in the review

Academic team

We found that the academic teams and their supporting managers were enthusiastic and highly motivated about the programmes delivered. They actively listen to and respond to students in a timely manner.

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

Mentors, sign-off mentors, employers and education commissioners were all positive about the programmes delivered. All were confident that on completion of their programmes students were fit for purpose and were highly employable. Mentors and sign-off mentors acknowledged the effective level of support provided by link lecturers and confirmed that partnership working was strong.

Students

We found that students conveyed a strong sense of being well prepared for registration in theory and in practice and were confident that this would be recognised by their future employers.

Service users and carers

Feedback from service users, included in practice assessment documents, confirmed that they were confident in the students' abilities and that they recognised that students were caring and compassionate.

Relevant issues from external quality assurance reports

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

The following reports require action(s):

The CQC review of Wexham Park Hospital in June 2013 found that standards were not met for accident and emergency, medical and paediatric wards. Action was required in four areas; the fifth area required enforcement action. UWL managers and the link lecturing team, with colleagues at Wexham Park, assessed the impact on student learning in these areas. Agreement was reached that the student learning experience was satisfactory but support would be offered to both mentors and students. The lead link lecturer supported the trust for two days a week.

At a follow up visit to Wexham Park Hospital in January 2014, the CQC inspected nine standards – of these six required enforcement action (respecting and involving people who use services; care and welfare of people who use services; cleanliness and infection control; staffing; assessing and monitoring the quality of service provision;

records). Two other standards required action – safety and suitability of premises and safety, availability and suitability of equipment.

Three clinical areas were particularly identified as not complying with the standards; some areas demonstrated improvements since the last visit in July, including Accident and Emergency; and, other areas were reported as being well led and managed.

The Director of Berkshire Institute for Health and Student Experience (UWL) and the lead link for Wexham Park met with the Interim Director of Nursing in January 2014 to discuss the report and implemented remedial actions.

The decision was made to immediately withdraw from the practice circuit three clinical placement areas cited within the report. However, it was recognised that third year students in their final placement were based in these areas with only three weeks of their placement remaining. In view of this, and so as not to disadvantage these students, the decision was made to allow the students to remain in their placement with additional support from the UWL link lecturers.

UWL gave an undertaking to work closely with Wexham Park Hospital in supporting students, mentors and staff in the post report period. All link lecturers were fully briefed and instructed to take a proactive role in supporting students, visit them in practice and discuss the concerns raised in the CQC report. Furthermore, a student focus group was held for all students in the trust to explore the student experience within placement learning.

The Limes, West London Mental Health Trust (WLMHT) was reviewed by the CQC in July 2013. Following the visit CQC issued a formal warning to WLMHT regarding Regulation 11 - Safeguarding people who use services. The CQC found that people who use the service were not protected from the risk of abuse because the provider had not taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. Staff did not demonstrate a clear understanding of their responsibilities to report safeguarding issues. As a result of the findings of the visit actions were taken to support the mental health student nurses who are in placement in this area. Further teaching sessions on protecting vulnerable adults and raising concerns were provided in the preparation for practice sessions, prior to students going in to placement. Additional link lecturer visits to students in this practice learning environment were provided to ensure students were well supported and felt able to raise any concerns as necessary.

The Hillingdon Hospital NHS Foundation Trust / Hillingdon Hospital CQC review in 2013 found deficiencies in provision of adult services, accident and emergency, maternity services, and paediatrics. This provider is used only for midwifery placements. UWL held discussions with service colleagues and were reassured by supervisors of midwives that concerns over risks of inadequate staffing levels were being controlled.

During the monitoring visit we found that the college monitors CQC reports every month and identifies any adverse issues affecting areas that are being used for practice placements. They discuss the outcomes of external quality assurance visits with the practice placement partners and commissioners; produce an action plan to protect student learning; and, explore ways in which to support the placement partners.

All CQC compliance reports relevant to the placement areas used by UWL for approved nursing and midwifery programmes were considered but did not require further

discussion as part of this review.

Evidence / Reference Source

1. CQC Report: Wexford Park Hospital, July 2013 and January 2014
2. CQC Report: The Limes, West London mental health trust, July 2013
3. CQC Reports: Hillingdon Hospital NHS Foundation Trust, 2013
4. UWL Self- assessment report, 2013/14
5. Telephone interviews with commissioning managers and directors, of nursing, 12-13 February 2014
6. UWL email notification from NMC correspondent, UWL, January 2014
7. UWL review of placements report, Wexham Park Hospital, January 2014
8. UWL Record of monitoring/inspection visits to Wexham Park Hospital, November, 2013
9. Link lecturer meeting (undated)
10. UWL Notes of meeting Wexham Park Hospital, 22 January 2014

Follow up on recommendations from approval events within the last year

The following programmes were approved within the last year:

- Mentoring for healthcare professionals, March 2012. Approved with one recommendation.
- Preparation of supervisors of midwives, March 2012. Approved with two recommendations.
- Registered midwife: three year programme, May 2013. Approved with two recommendations
- Registered midwife: 18 months programme, May 2013. Approved with two recommendations.
- Teacher Programme, June 2013. Approved with one recommendation.

We found that the UWL has responded to the recommendations of the NMC programmes approved within the past year.

Evidence / Reference Source

1. UWL Self- assessment report, 2013/14

2. NMC programme approval reports, 2013

Specific issues to follow up from self-report

Academic resources

A number of nursing and midwifery lecturers are approaching retirement age and staff are being encouraged to give as much notice as possible to allow for recruitment as appropriate. Human resource planning activities are required in the light of the age profile of staff. The midwifery team is identified as likely to be most affected.

At the monitoring event we found that academic resources are under continuous review by the senior management team and staff vacancies are filled quickly. The creation of a joint appointment for midwifery is being considered and flexible working arrangements are being explored to assist in the retention of staff approaching retirement. A professor of midwifery is being recruited to further enhance staff resources.

Placement resources:

The number of HV mentors available to support student nurses has been reduced due to an increase in target numbers of HV (SCPHN) students.

We found appropriate placements in primary care are secured for all adult and children's nursing students. Following successful educational audits new placement opportunities are now available, in addition to the use of 'hub and spoke' placements.

The introduction of the pan-London practice assessment document (PAD) in September 2014.

Our findings demonstrate that robust partnership arrangements are in place to ensure that all mentors and students who will use the new PAD from September 2014 are familiar with the documentation. This will be achieved through student workshops, mentor workshops and practice newsletters.

Evidence / Reference Source

1. UWL self-assessment report, 2013/14

Findings against key risks

Key risk 1 – Resources

1.1 Programme providers have inadequate resources to deliver approved

<p>programmes to the standards required by the NMC</p>
<p>1.2 Inadequate resources available in practice settings to enable students to achieve learning outcomes</p>
<p>Risk indicator 1.1.1 - registrant teachers hold NMC recordable teaching qualifications and have experience / qualifications commensurate with role</p>
<p>What we found before the event</p>
<p>The college has sufficient appropriately qualified staff to support programmes in nursing and midwifery. UWL requires that all nursing and midwifery lecturers achieve recordable teacher status within two years of taking up post.</p> <p>A process is in place whereby the college monitors NMC registration annually to ensure all lecturers maintain their professional registration.</p>
<p>What we found at the event</p>
<p>We found that all programme leaders hold an NMC recorded teaching qualification and new lecturers are supported towards gaining the required qualification. All lecturers have appropriate professional qualifications and are allocated to teaching with due regard.</p> <p>We were informed that because of specific contractual demands of the commissioners, the child programme is delivered to separate cohorts on two sites by a dedicated teaching team consisting of a programme leader and 2.6 wte lecturers. Their input is supplemented by the involvement of specialists from other fields of nursing. The students informed us that input from other lecturers tended to be adult focused and often needed to be revisited and contextualised by the children's nursing team.</p> <p>We conclude from our findings that the college currently has the resources to deliver the child nursing programme. However there is a potential risk of the sustainability of this model for delivering the children's nursing programme on two sites with a small core team.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. UWL self-assessment report, 2013/14 2. NMC online registration checking service 3. NMC programme monitoring report , 2011

4. UWL staff profile, 2013
5. Results of research and scholarship audit, 2012 / 2013
6. UWL staff CV's, 2013
7. UWL Staff development guidelines and course handbook for PgC Academic Practitioner;
8. Children's nursing programme staffing resources paper, 2014
9. Pre-registration nursing programme annual report, section 10, 2013
10. Academic resources workload distribution and monitoring processes, 2013
11. Interviews with Dean, programme teams and students, 12-13 February 2014
12. Telephone interviews with senior service managers, 12-13 February 2014

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

What we found before the event

The NMC monitoring report, 2011 states there are sufficient updated mentors to support students in practice placements. The Practice Education Support Unit (PESU) manages the allocation of students in partnership with practice placement providers through communication with clinical placement facilitators (CPFs) and learning environment leads (LELs). Quarterly meetings are held to ensure sufficient capacity and availability of qualified mentors.

There is a clear process in place for designating, preparing and supporting mentors to support pre-registration child field nursing students and ONP students.

What we found at the event

We found that there are sufficient appropriately qualified mentors to support the number of students. Mentors confirmed that they have time to support students and facilitate their learning needs including providing reflective time with the students.

Students confirmed that they are able to spend more than the minimum 40% time with mentors and are also supported by co-mentors and associate mentors.

The college works closely with the CPFs/LELs to map all students' learning requirements over the next four years. This has also taken into account the increases in adult nursing student numbers who have first placements in early 2015. Commissioners confirmed that the college has robust resource and capacity planning processes in place.

Evidence / Reference Source
<ol style="list-style-type: none"> 1. UWL self- assessment report ,2013/14 2. NMC programme monitoring report, 2011 3. UWL programme annual reports, 2013 4. Registers of mentors 5. Audit reports 6. Off duty rotas 7. Interviews with managers, mentors, students, ONP practice development nurses, lead for placements and clinical skills and manager of practice education support unit, 12-13 February 2014 8. Telephone interviews with commissioners
Outcome: Standard met
<p>Comments:</p> <ul style="list-style-type: none"> • The college currently has the resources to deliver the pre-registration children’s nursing programme and child field students are satisfied with the programme delivery and availability of children’s nursing lecturers. However we concluded that delivery of this programme with a small core team of child lecturers on two sites might not be sustainable in the future.
<p>Areas for future monitoring:</p> <ul style="list-style-type: none"> • Sustainability of the model for delivering the children’s nursing programme on two sites with a small core team consisting of a programme leader and 2.6 wte lecturers

Findings against key risks
<p>Key risk 2 – Admissions & Progression</p> <p>2.1 Inadequate safeguards are in place to prevent unsuitable students from entering and progressing to qualification</p>
<p>Risk indicator 2.1.1 - admission processes follow NMC requirements</p>
<p>What we found before the event</p>

Interview panel members undergo equality and diversity training.

The selection processes for ONP are not clearly articulated and need to be mapped and discussed at the monitoring event. EU / overseas applicants have to meet the requirements of NMC decision letters.

Each international applicant from outside the EEA is required to demonstrate an overall IELTS score of at least 7.0 for nursing programmes and not less than 7.0 in any one section (NMC, 2010). The IELTS score for midwifery is at least 7.0 in the listening and reading sections, at least 7.0 in the writing and speaking sections, and an overall average score of at least 7.0.

What we found at the event

We found the selection processes are robust, follow NMC requirements and are enhanced by a newly introduced values-based approach.

For pre-registration nursing child field programmes practice placement providers support academic staff in facilitating well organised selection events. Students undertake numeracy tests and literacy tests and then, if successful, progress to participate in problem solving activity, values-based group exercises and face to face interviews. Admission processes include checks of good health and Disclosure and Barring (DBS) screening. Students on the programme complete annual disclosure requirements for good health and good conduct which are monitored at yearly progression interviews with personal tutors.

ONP candidates are selected in partnership with the sponsoring trust. Initially, they are employed as health care assistants; are subjected to UK DBS screening; and, observed in practice. Selection is then carried out through face to face interviews by the programme lead and the trust-based practice development nurse.

There is a DBS panel which scrutinises issues arising from DBS screening in communication with placement providers and appropriate decisions are made for the protection of the public.

Evidence / Reference Source

1. UWL Self-assessment report , 2013/14
2. UWL Admissions policy and guidance, page 1, section 1.1, 2013
3. DBS flow chart, 2013
4. DBS panel returns, 2012/14
5. Student handbooks, 2014
6. Interviews with managers, mentors, students, ONP practice development nurses and programme teams, 12-13 February 2014
7. Telephone interview with deputy director of nursing and head of education and development, NWLHT, 12-13

February 2014
Risk indicator 2.1.2 - programme providers' procedures address issues of poor performance in both theory and practice
What we found before the event
<p>The procedures for addressing poor performance in both theory and practice are robust. Regulations for fitness to practise are clearly outlined in the student handbook and in a supplementary document.</p> <p>Lecturers address poor performance at the earliest opportunity through the link and personal tutor framework. In addition, they can signpost students who are struggling with their academic work to the university's study skills course and counselling services. There is clear policy guidance for staff in raising concerns, which has been supported by training workshops.</p>
What we found at the event
<p>We found that procedures to address issues of poor performance in both theory and practice are comprehensive.</p> <p>Students on the pre-registration child field programme are aware of their responsibilities to meet self-declaration requirements which are checked annually at progression points. Systems are in place to monitor the conduct of students on the programme both in theory and practice.</p> <p>Procedures and practices in relation to fitness to practise are comprehensive and fully meet the requirements of the NMC. Our findings conclude that the outcomes of the cases considered by the fitness to practise panel are appropriate to support the student but most importantly decisions made protect the public.</p> <p>Academic staff, service managers, mentors, sign-off mentors, CPFs and LELs are all aware of the fitness to practise procedures and have confidence in the rigour of the process.</p>
Evidence / Reference Source
<ol style="list-style-type: none"> 1. External examiner reports, 2012/13, 2. UWL Fitness to Practise regulations and student handbook supplement, 2013/14 3. UWL Fitness to Practise flow chart and reporting template, 2013 4. Fitness to Practise committee returns, 2013/14

5. Guidance and support for mentors, 2013
6. Assessing fitness to practise study day attendance, 2013
7. Speak Out Safely (SOS): Staff raising concerns policy, 2014
8. Interviews with managers, mentors and students, 12-13 February 2014

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 procedures for addressing poor performance in practice are robust. Regulations for fitness to practise are clearly outlined.

Mentors have clear guidelines for addressing poor performance of students and fitness to practise issues. The procedure to follow is addressed in mentorship training and in the annual updates. The guidelines for referral to fitness to practise are also available via the placement environment portal. A strong feature of staff preparation for addressing poor performance is the conjoint workshops held for practice and academic staff which are well attended.

What we found at the event

Managers and mentors are confident in implementing the procedures for fitness to practise and addressing poor performance in practice. They have clear written guidelines and mentor updating reinforces measures to manage poor performance of students in practice. Managers and mentors confirmed that there is a good level of support from the link lecturers and from the university.

Senior practice placement providers confirm that they or senior delegated staff are members of the DBS and fitness to practise panels and the outcomes of the panels are made in partnership with university staff.

Evidence / Reference Source

1. UWL Fitness to practise regulations and student handbook supplement ,2013/14
2. UWL Fitness to practise flow chart, 2013
3. Fitness to practise reporting template
4. Fitness to practise committee returns, 2013/14
5. Guidance and support for mentors, 2013
6. Assessing fitness to practise study day attendance, 2013

<p>7. Speak Out Safely (SOS): Staff raising concerns policy, 2014</p> <p>8. Interviews with managers, mentors and students 12-13 February 2014</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 university and college accreditation of prior learning (APL) processes are clearly articulated. Students are only accredited with prior learning for theoretical hours and applications are considered on an individual basis.</p> <p>Within the college APL is considered in relation to admission to the postgraduate diploma of nursing. An online support site guides candidates in the preparation of a portfolio of evidence that is submitted as a claim for 40 credits at academic level 6. Credit is awarded only for theory learning outcomes. The credit awarded permits remission against one generic module within the postgraduate diploma programme which has no requirement to be mapped against field specific NMC standards for competence.</p>
<p>What we found at the event</p>
<p>We found that APL systems are clear and robust. All applications are reviewed by the college's APL board and ratified at assessment boards. All applicants are required to provide original, authenticated transcripts of previous learning together with details of assessments undertaken. Examples of portfolios confirm rigour in marking that included internal moderation.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. Summary of APL claims, February 2014 2. UWL Admissions policy, section 2.1.4, page 9, 2013 3. Samples of APL claim portfolios, 2013/14 4. APL board minutes, 2012/13
<p style="text-align: center;">Outcome: Standard met</p>

Comments: no further comments

Areas for future monitoring: none

Findings against key risks

Key risk 3- Practice Learning

3.1 Inadequate governance of and in practice learning

3.2 Programme providers fail to provide learning opportunities of suitable quality for students

3.3 Assurance and confirmation of student achievement is unreliable or invalid

Risk indicator 3.1.1 - evidence of effective partnerships between education and service providers at all levels, including partnerships with multiple education institutions who use the same practice placement locations

What we found before the event

There are service level agreements with practice partners to ensure safe and supportive practice learning resources.

The educational audit tool is accessed online in practice learning environments and reflects the NMC standards. Placement agreements between universities and practice placement providers across London enable a consistent approach to educational audit.

The college director of practice and work-based learning meets with the practice education leads from each university who have shared placements. In the event of withdrawal of placements, reinstatement or addition of placements all universities that use the placements are involved in the decision making process.

What we found at the event

We found that governance of practice learning is achieved through effective partnership working at strategic and operational levels. Service level agreements are agreed annually with practice placement partners through the annual quality monitoring process.

The college has a practice education support unit (PESU) which manages placements

through liaison with CPFs and LELs. Quarterly meetings serve to agree capacity and the availability of qualified mentors. There is a twice yearly review meeting to monitor the quality of the practice learning environment. This is attended by lead link lecturers and CPFs /LELs, mentors and students and provides a forum to discuss: CQC reports, patient satisfaction surveys; staff surveys; quality accounts; and, educational audits of placements.

An annual quality in practice learning day is attended by practice representatives and link lecturers to review issues arising from educational audit activity, share good practice and agree activities for enhancing the quality of placement learning.

UWL uses the pan-London educational audit tool which complies with the NMC 2013 quality assurance framework. Audits are completed biennially but placements supporting ONP students are audited every 12 months. CQC reports and concerns are identified within the audit processes which require six monthly reviews to ensure action plans have been implemented and to check on any changes to placement quality in between the biennial audits.

The college's responses to adverse CQC reports affecting student practice learning environments are informed by risk assessment and are appropriate and effective. The action taken is fully consistent with the requirement to protect student learning and to ensure students are not subjected to either poor educational or patient care practices.

Link lecturers review issues arising from educational audit activity, share good practice and agree activities for enhancing the quality of placement learning. There are clear criteria for the selection and preparation of new placement areas and for the withdrawal of placements. There are five instances where placements were withdrawn from the placement circuit in 2013-2014.

Our findings conclude that the UWL has responded to adverse CQC reports by working collaboratively with relevant practice placement providers to address issues that may impact on student learning. This activity needs to be sustained.

The university process for reporting incidents and accidents is embedded in students' assessment documents for practice learning and students are given clear guidance on raising concerns. Processes for responding to concerns are clear and involve close working procedures between the university, practice placement providers and commissioners.

Evidence / Reference Source

1. UWL self-assessment report, 2013/14
2. UWL responses to adverse CQC reports
3. Review of placement agreement monitoring tool, 2013
4. Quality assurance and on-going monitoring of the practice learning environment, 2013
5. Record of closure of practice placement / withdrawal of students: Fielding ward Nov 2013 and Ryeish Green Dec 2013

<ol style="list-style-type: none"> 6. Checklist for opening placements, 2013 7. Completed audits for child field and ONP placements 8. Policy and guidance booklet for practice, 2013; 9. Completed practice assessment documents (PADS) 10. Interviews with PESU staff, programme teams, service managers and mentors, 12-13 February 2014 11. Telephone interviews with commissioners, 13 February 2014
<p>Risk indicator 3.2.1 -practitioners and service users and carers are involved in programme development and delivery</p>
<p>What we found before the event</p>
<p>The college revised its service user and carer strategy in 2013 and appointed a service user co-ordinator. Service users and carers were involved in strategy development; contribute to the development of materials for the values-based selection activities; provide feedback to students in practice through contributions made in the PADs; and, contribute to planned simulation sessions in the university. The college has a pool of expert practitioners who hold the post of associate lecturer. They work with module and programme teams in developing teaching sessions, scenarios and assessment questions that are contemporary and promote inter-professional working.</p>
<p>What we found at the event</p>
<p>We found that practice placement providers are involved in curriculum development and delivery. Students value their contribution. Our findings were reinforced when during the visit a specialist health visitor and two members of staff from the Shooting Star hospice were observed teaching in the simulation suite. Mentors contribute to preparing students for their placements and participate in objective structured clinical examinations (OSCEs) and simulated learning.</p> <p>Service users, known as ‘public involvement partners’, are involved in all aspects of the students’ journey during the programme. We concluded that areas of note are their involvement in devising the scenarios to enable values-based selection of students; their feedback to students in the PADS; and, their involvement as volunteers within simulation sessions.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. UWL self-assessment report ,2013 2. UWL service user and carer involvement strategy, 2013/17

3. Values-based scenarios for student selection.
4. Completed PADs
5. Interviews with programme teams, service user coordinator, managers, mentors and students, 12-13 February 2014

Risk indicator 3.2.2 - academic staff support students in practice

What we found before the event

The university uses a team approach to supporting students in practice. Each practice learning support team is attached to an NHS placement provider or independent sector group and consists of a senior education manager, lead link lecturer and one or more link lecturers. A mobile phone number is given to the providers enabling them to contact whichever member of the team is on a rota to carry the phone. The team member responds to calls within 48 hours.

Link lecturers visit placement areas weekly and respond promptly when contacted. The visiting schedule is posted on the notice board within placement areas. Link lecturers may cover one or more trusts and a number of wards.

The link lecturer standard was reviewed and agreed in partnership with practice placement providers in 2013. It sets out the expectations of the link lecturer role and is monitored via the senior manager link meetings, trust annual reports and customer satisfaction survey as well as through completion of educational audits.

What we found at the event

Managers, mentors and students told us that link lecturers regularly visit practice placements. This aspect of their role is clearly defined within their workload allocation, requiring 20% of their time, and it is directed through an agreed standard for link lecturers. Mentors and students confirm they are well supported by link lecturers.

Evidence / Reference Source

1. UWL Practice learning support teams, 2013
2. Quality assurance and monitoring of the practice learning environment, 2013,
3. UWL College partnership board minutes,
4. Workload distribution and monitoring processes,
5. UWL academic employment framework, 2013
6. Duties and responsibilities handbook for lecturers and senior lecturers, 2013

<p>7. Education audit reports of practice placements</p> <p>8. Interviews with programme teams, ONP practice development nurses, link lecturers, managers, mentors and students, 12-13 February 2014</p> <p>9. Telephone Interviews with commissioners, 13 February 2014</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>UWL offers a mentor preparation programme which adequately prepares mentors for their role.</p> <p>Specific information and preparation sessions are provided for mentors supporting students on smaller programmes e.g. ONP. UWL link lecturers support mentors in practice and participate in mentor updating.</p>
<p>What we found at the event</p>
<p>We were told by mentors and sign-off mentors that they are properly prepared for their role in supporting and assessing students in practice.</p> <p>Our findings demonstrate practice learning environments are well prepared for students through mentor preparation and updating. The mentor updating process provides opportunities to discuss the PAD and to use scenarios to initiate discussion around specific issues. Mentors particularly appreciate the discussions of how the progressive levels of achievement can be identified to demonstrate that practice learning outcomes are met.</p> <p>Mentors stated they are well supported in fulfilling their role. Students informed us that their mentors understand their assessment needs and could differentiate between the needs of different types and levels of students.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. UWL nursing and midwifery mentor update strategy, 2013 2. UWL Strategy for preparation of sign-off mentors, 2013 3. UWL Guidance and support for mentors on practice related issues, 2013, 4. Mentors' information booklet, 2013 5. Interviews with managers, ONP practice development nurses, mentors and students, 12-13 February 2014 6. Telephone interviews with commissioners, 13 February 2014

<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.</p>
<p>What we found before the event</p>
<p>Documentary evidence articulates a clear strategy for mentor, sign-off mentor and practice teacher updating. Attendance at annual updates is monitored and documented on the live registers.</p>
<p>What we found at the event</p>
<p>We found that mentors and managers are enthusiastic about the mentor role and attendance at mentor updates is prioritised and usually synchronised with trust mandatory updating schedules. Mentors who are unable to attend are followed up by the CPFs and LELs and additional updates are provided when required. The increase in ONP student numbers triggered the provision of additional mentor updates to ensure mentor availability.</p> <p>Our findings demonstrated additional approaches to mentor updating which include newsletters, annual conferences and discussion forums which are well attended.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. UWL Nursing and midwifery mentor update strategy, 2013 2. UWL Strategy for preparation of sign-off mentors, 2013 3. UWL Guidance and support for mentors on practice related issues, 2013 4. Mentors information booklet, 2013 5. Interviews with programme teams, CPFs, LELs, managers and mentors 12-13 February 2014
<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>The practice placement providers' 'live' registers are maintained by CPFs or LELs within trusts. The registers for the independent sector are maintained by the university.</p> <p>Each mentor and sign-off mentor is expected to maintain a record of mentorship and updating activity. This is integrated into annual appraisal discussions and for triennial review. The record documents preparation as a mentor/sign-off mentor and regular</p>

updating.
What we found at the event
We found that the records of mentors are accurate and up to date. The details are confirmed in the educational audits for each practice placement visited. Sign-off mentors and those who have undertaken their triennial reviews are clearly annotated on the register held within trusts or, for the independent sector, at the university.
Evidence / Reference Source
<ol style="list-style-type: none"> 1. Collaboration UWL and NHS and independent healthcare partners, 2011 2. Interviews with PESU team, managers, CPFs, LELs and mentors , 12- 13 February 2014 3. Mentor databases, Royal Berkshire Hospital, Shooting Stars Hospice and Northwick Park Hospital 4. UWL PESU, mentor database
Outcome: Standard met
<p>Comments:</p> <ul style="list-style-type: none"> • Our findings conclude that the UWL has responded to adverse CQC reports by working collaboratively with relevant practice placement providers to address issues that may impact on student learning. This activity needs to be sustained.
<p>Areas for future monitoring:</p> <ul style="list-style-type: none"> • Continued monitoring of adverse CQC reports, joint action plans and quality assurance processes.

Findings against key risks
<p>Key risk 4 - Fitness to Practice</p> <p>4.1 Approved programmes fail to address all required learning outcomes that the NMC sets standards for</p> <p>4.2 Audited practice placements fail to address all required learning outcomes in practice that the NMC sets standards for</p>

<p>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</p>
<p>What we found before the event</p>
<p>There is a wide range of learning strategies to enable students to achieve the NMC learning outcomes and competencies.</p> <p>External examiners confirm that the programmes meet national and NMC standards. Learning outcomes are met through module content and the assessment of both theory and practice.</p>
<p>What we found at the event</p>
<p>We found that all students achieve the NMC learning outcomes and competencies for entry to the register. Students emerging from the programme are considered fit for practice by employers.</p> <p>A range of effective learning and teaching approaches facilitates learning for all students. Students understand the progression points in their programme and what is required for them to progress.</p> <p>Within the ONP students receive 10 protected study days delivered in the university and 10 within the trust. This enables them to integrate theory and practice. In particular they appreciated the small group skills development workshops delivered in the trust.</p> <p>Within the pre-registration child field programme senior academic staff are aware of the generic nature of the curriculum which was approved in 2012. Staff are actively increasing the input from child care specialists to ensure that there is more child orientated content. This input includes involvement of a health visitor to consider safeguarding issues for children; and a health visitor with a learning disability background facilitates learning relating to children with special needs. The dean of the college, who is a children's nurse, confirms that she and another member of the college executive team, also a children's nurse, have significant teaching roles within the leadership and management of care module.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. UWL Embedding and developing high quality patient care skills through clinical skills teaching and simulation in the pre-registration nursing curriculum, 2013 2. UWL Programme annual reports, 2012/13 3. External examiner's annual reports, 2012/13

<p>4. Student handbooks, 2013/14</p>
<p>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</p>
<p>What we found before the event</p>
<p>There is a wide range of learning strategies to enable students to achieve the NMC learning outcomes and competencies in practice placements. Opportunities to rehearse and develop skills are available in the form of OSCEs, simulation and role play which are appreciated by all students. The essential skills clusters (ESC) and the standards of proficiency for pre-registration nursing are embedded in the practice assessment documentation.</p> <p>Students are prepared for practice through preparation of practice sessions in the classroom and through trust induction programmes which are also supported by UWL link lecturers.</p>
<p>What we found at the event</p>
<p>We found that the NMC standards for the pre-registration nursing, child field programme and for the ONP are clearly articulated in the practice assessment documentation and understood by students and mentors. The mechanisms to assess clinical practice allow students to develop skills and achieve competence with opportunities to receive feedback from mentors.</p> <p>Students and mentors told us there are clear guidelines to support the use of the PAD. They confirm that they find the assessment documentation straightforward to use.</p> <p>The external examiner for the pre-registration child field programme confirms that students achieve practice learning outcomes and competencies.</p> <p>The external examiner for the ONP programme is due to scrutinise PADs for the first time for the student cohort completing in March 2014.</p> <p>Mentors and employers describe students completing the programmes as fit for practice and purpose.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. UWL programme leader annual reports, 2012/13 2. External examiner reports, 2012/13

3. Completed PADs
4. Interview with programme leader, programme teams, ONP practice development manager, service managers, mentors and students , 12-13 February 2014
5. Telephone interviews with commissioners, 13 February 2014

Outcome: Standard met

Comments: no further comments

Areas for future monitoring: none

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

The academic quality and standards office is responsible for the overall quality monitoring and enhancement of programmes.

Each programme board meets a minimum of once each semester to discuss governance issues. It is chaired by the programme leader and includes module leaders, library staff, students and relevant stakeholders. Programme leaders complete an annual report at the end of each academic year.

Each programme and cohort of students elects a representative who is inducted and trained by the university and students' union.

Annual reports indicate discussion of student progression and evaluations with evidence of action plans being developed.

<p>What we found at the event</p>
<p>We found all modules and programmes are subject to evaluation and there is clear evidence that issues are followed through to resolution and that feedback is provided to students on action taken.</p> <p>Student experience forums are run twice a year at both the London and Berkshire sites and are followed up using a 'you said we did' approach which directly addresses any concerns raised in students' feedback.</p> <p>The university self-assessment report for the NMC provides a high quality analysis of the education provision and supports this monitoring process.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. UWL self-assessment report, 2013/14 2. UWL Programme leaders' annual reports 2012/13 3. Notes of student experience forum, London and Berkshire, 2013 4. "You said we did" feedback report, January 2013 5. LEL and CPF meeting reports 2012/14
<p>Risk indicator 5.1.2 - concerns and complaints raised in practice learning settings are appropriately dealt with and communicated to relevant partners</p>
<p>What we found before the event</p>
<p>Evaluation of practice occurs at the end of each placement. Evaluations are on line and consist of quantitative and qualitative data. Placement managers and link lecturers can access evaluations via the practice experience portal, and these are reviewed as part of educational audit activity. Qualitative comments are downloaded biannually and copies sent to CPFs, LELs and the lead link for mentors in the trusts. Link lecturers are sent those for the independent sector. Placement areas have been withdrawn in response to evaluations.</p> <p>The external examiner for children's nursing is engaged in scrutiny of theory and practice.</p> <p>The external examiner for ONP has yet to sample practice.</p> <p>UWL has a clear policy for students so that they know how to raise concerns in practice. This is managed by the lead for practice education and is communicated directly to senior placement providers.</p>

What we found at the event

We found external examiners are involved in module and programme scrutiny and provide external perspectives to assessment boards. Their reports are comprehensive and are supportive of the good quality of the programmes and of the academic support given to students.

The external examiner for the pre-registration nursing, child field programme has commented positively on the effectiveness of assessment of theory and practice.

The external examiner for the ONP programme has commented favourably on the assessment of practice process but had not had opportunities to sample completed practice assessment documents. At the time of monitoring the programme leader had actively arranged for a sample of the practice assessment documentation to be made available in March 2014 for external scrutiny. This is a requirement of the NMC and non-compliance is a potential risk for future monitoring

UWL have agreed to make external examiner engagement in practice mandatory in all NMC programmes by revising the external examiner contract and are considering a proposal to enhance the fees to allow time for placement visits.

We conclude from our findings that procedures for raising and escalating concerns are fully implemented and effective. Students told us that they are fully informed of the importance of and process for raising concerns while on practice placements and would not hesitate to do so. They had no current complaints or concerns about their practice placement learning and are well supported in both the theoretical and practice elements of their programme.

Evidence / Reference Source

1. UWL Raising concerns policy, November 2013
2. Master time table for introduction to practice, 2012/13
3. UWL Accident or incident guidance, 2013
4. Mentors information booklet, 2013
5. External examiner reports, 2012/13
6. External examiner appointments committee, February 2013
7. Email from ONP programme lead to external examiner, February 2013
8. Interviews with managers, mentors and students, 12-13 February 2014

Outcome: Standard met

Comments:

- We were assured that the external examiner for ONP will assess a sample of completed practice

assessment documents in the near future. However, this should be followed up in future monitoring.

Areas for future monitoring:

- External examiner engagement with practice and scrutiny of practice assessment documentation is a requirement of the NMC. Non-compliance is a potential risk for the ONP.

Personnel supporting programme monitoring

Initial visit on 16 January 2014 prior to monitoring event. Meetings with:

Dean of College of Nursing and Midwifery
 Director Berkshire Institute For Health and Student Experience
 Head of Pre-Qualifying Nursing, Lead for Simulated Learning
 Programme Leader for Overseas Nursing Programme

During monitoring event. Meetings with:

Dean of College of Nursing and Midwifery and Healthcare (CNMH)
 Director Berkshire Institute For Health and Student Experience
 Head of Pre-Qualifying Nursing, Lead for Simulated Learning
 Programme Leader for Overseas Nursing Programme, (CNMH)
 Programme Leader for Pre-registration, Children's Nursing, (CNMH)
 Lead for Recruitment and Selection, (CNMH)
 Lead for Practice Education, CNMH
 Lecturers in Child Health, CNMH
 Head of Post-Qualifying Education, CNMH
 Director of Contracts, CNMH
 Manager, Practice Education Support Unit, CNMH
 Head of Learning and Development , Berkshire Healthcare Foundation Trust
 Clinical Education and Practice Lead, Central London Community Services
 Director of Education and Quality, Health Education, Thames Valley
 Interim Director of Nursing, Heatherwood and Wexham Park
 Commissioning Manager, Health Education, North West London
 Deputy Director of Nursing and Patient experience, NWLHT
 Service User Coordinator, CNMH
 Programme Leader PG Diploma in Nursing;
 Researcher, Service User Development, CNMH

Meetings with:

Mentors / sign-off mentors	23
Practice teachers	0
Service users / Carers	0
Practice Education Facilitator	8
Director / manager nursing	1
Director / manager midwifery	0
Education commissioners or equivalent	0
Designated Medical Practitioners	0
Other:	<p>16</p> <p>Matron</p> <p>Learning and Development Manager</p> <p>Head of Health Visiting</p> <p>Head of Practice</p> <p>Practice Development Nurses x 3</p> <p>Education and Quality</p> <p>Senior Care Team Leader</p> <p>Clinical Governance Facilitator</p> <p>Chief Executive</p> <p>1 x MDT Skills Trainer/ Technician</p> <p>4 x Matrons</p>

Meetings with students:

Student Type	Number met
Nursing - Child	Year 1: 4 Year 2: 4 Year 3: 4