

2016-17

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

Programme provider	University of Derby
Programmes monitored	Registered Nurse - Adult; Return to Practice Nursing
Date of monitoring event	30-31 Mar 2017
Managing Reviewer	Judith Porch
Lay Reviewer	Sarah Fishburn
Registrant Reviewer(s)	Gibson D'Cruz, Kevin Gormley
Placement partner visits undertaken during the review	<p>Pre-registration nursing (adult):</p> <p>Brimington Surgery, Chesterfield: district nursing team</p> <p>Chesterfield Royal Hospital: surgical areas, high dependency unit/ intensive care unit</p> <p>Royal Derby Hospital: surgical assessments unit, ward 209 (medical gynaecology), ward 408 (medical/cardiology)</p> <p>Stanley House Nursing Home</p> <p>Return to practice (nursing):</p> <p>Chesterfield Royal Hospital: Ashover Ward</p> <p>Derbyshire Health Care Foundation Trust: Hartington Unit</p> <p>Overdale Medical Practice, Breaston</p> <p>Ilkeston Community Hospital</p>
Date of Report	16 Apr 2017

Introduction to NMC QA framework

The Nursing and Midwifery Council (NMC)

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

Standards for nursing and midwifery education

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

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

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

QA and how standards are met

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

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

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

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

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

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

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

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

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

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

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

Summary of findings against key risks

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

Introduction to University of Derby's programmes

The University of Derby (UoD) is a well-established university which comprises of five colleges. Within the college of health and social care, the department of healthcare practice (the department) provides a range of NMC approved programmes. This includes the pre-registration nursing (adult and mental health) programme.

The three-year BSc (Hons) pre-registration nursing (adult and mental health) programme was approved on 20 June 2012. A postgraduate pathway was approved on 1 June 2016 and the first cohort of nine students commenced the pathway in September 2016. The pre-registration nursing programme has an extension to the approval granted by the NMC until 31 August 2019. The programme is delivered at the two university campus sites; Derby and Chesterfield. There are two intakes (September and March) per academic year at both sites.

The focus of this monitoring review is the pre-registration nursing (adult) programme and the return to practice (nursing) programme.

The return to practice (nursing) programme was approved on 23 May 2014 at academic level six. The department of healthcare practice provides the programme for lapsed nurses (adult and mental health) who apply to have re-admission to the NMC register. The programme is provided four times a year with a maximum of 30 students in each cohort and is run at both campuses. Following an agreement with the commissioners, the programme is also provided at Leicester and Nottingham in 2016-17.

The university works in partnership with several practice placement providers in the NHS and private voluntary and independent (PVI) sector in the midlands region of England and Health Education East Midlands (HEEM).

The monitoring visit took place over two days and involved visits to practice placements to meet a range of stakeholders. Particular consideration was given to students practice learning in Derbyshire Healthcare NHS Foundation Trust following concerns reported by the Care Quality Commission (CQC).

Summary of public protection context and findings

Our findings conclude that the University of Derby has systems and processes in place to monitor and control the risk themes: resources; admissions and progression; and, fitness for practice to assure protection of the public. The key risk areas practice learning and quality assurance require improvement.

Resources: met

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

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

Admissions and progression: met

We found admissions and progression procedures are robust and effectively implemented to ensure students entering and progressing on the pre-registration nursing (adult) and return to practice (nursing) programmes meet NMC standards and requirements which is fundamental to the protection of the public.

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

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

The university has effective policies and procedures in place for the management of poor performance in both theory and practice, which are clearly understood by all stakeholders. We are confident that concerns are investigated and dealt with effectively and the public is protected.

We found that robust systems are in place for the accreditation of prior learning and achievement.

Practice learning: requires improvement

We conclude that partnership working between the university and practice placement providers is strong and effective at both strategic and operational levels to ensure effective practice learning environments and experiences for students.

There is a collaborative, proactive approach to ensuring that clinical governance issues are controlled and well managed. We are assured that effective risk management approaches are adopted and actions are taken in partnership between the university and practice placement providers to ensure students' practice learning is not compromised when CQC reports have identified areas of concern. However, exceptional reporting to the NMC in a timely manner in accordance with the Quality Assurance framework part four (NMC, 2016) requires improvement.

We found that practitioners are involved in programme development and delivery. Service users and carers are involved in programme development, admissions processes and formative feedback on students' performance in practice. In the pre-registration nursing (adult) programme they contribute to teaching sessions. The return to practice (nursing) programme team should re-examine the rationale for not involving service users and carers in the delivery of the programme.

Our findings conclude that academic teams effectively support students in practice settings. There is considerable investment in the preparation and support of mentors and the completion of mentor annual updates is robust. All mentors are appropriately prepared for their role of supporting and assessing students. There is a clear

understanding held by sign-off mentors about assessing and signing-off competence to ensure students are fit for practice to protect the public.

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

Fitness for practice: met

We conclude from our findings that programme learning, teaching and assessment strategies, experience and support in practice placements enable pre-registration nursing (adult) and return to practice (nursing) students to meet programme and NMC competencies. Students report that they feel confident and competent to practise at the end of their programme and to enter/re-enter the NMC professional register. Mentors and employers describe successful students completing both programmes as fit for practice and employment.

Quality assurance: requires improvement

Our findings conclude that overall there are effective QA processes in place to manage risks, address areas for development and enhance the delivery of the pre-registration nursing (adult) programme and return to practice (nursing) programme.

External examiners act with due regard and engage in the assessment of theory and practice. We suggest that the university considers reviewing the external examiner report template to make explicit that the assessment of practice is reviewed.

We found evidence that the university ensures external examiners fulfil their role and responsibilities, and current NMC registration and due regard is confirmed on appointment. However, the university does not monitor the currency of external examiners' NMC registration and revalidation requirements during their tenure. This requires improvement.

We conclude from our findings that concerns and complaints raised in the practice setting are responded to effectively and appropriately dealt with and communicated to relevant partners.

Summary of areas that require improvement

The following areas require improvement:

- The university should ensure that exceptional reporting to the NMC takes place in a timely manner in accordance with the Quality Assurance framework part four (NMC, 2016).
- The university should introduce a procedure to monitor the currency of external examiners' NMC registration and that they meet revalidation requirements.

Summary of areas for future monitoring

- Exceptional reporting to the NMC takes place in a timely way.

- External examiners have current registration and meet revalidation requirements.

Summary of notable practice

Resources

None identified

Admissions and Progression

None identified

Practice Learning

None identified

Fitness for Practice

None identified

Quality Assurance

None identified

Summary of feedback from groups involved in the review

Academic team

Pre-registration nursing (adult)

The academic team told us they work closely with practice placement providers in supporting students through the theoretical and practice phases of the programme. They confirmed that the programme is rigorous and robust, and that successful students on completion of the programme are fit for purpose and employment. Links with practice partners are described as very good. The programme team confirmed that there are agreed and transparent processes in place to manage student issues if they arise.

Return to practice (nursing)

The academic team confirm an effective partnership with practice placement providers which is operationalised at several levels. The team are enthusiastic about the programme and confirmed the competence of students who successfully complete the programme. They informed us of the extensive support they provide to students to enable them to achieve the programme outcomes and competencies.

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

Mentors/sign-off mentors, practice education facilitators (PEFs), practice placement facilitators, and education leads confirmed that there is a high level of support for students during their practice placements. The programme of preparation for mentors and the mentor updates are well received and described as effective in explaining the

assessment of practice documentation and process and how to manage student issues. They confirmed that when issues arise with students they are satisfactorily dealt with, documentation is fully completed and learning opportunities are identified, as appropriate. Mentors and education leads told us that the students are well prepared for practice, and that they are enthusiastic and fit for practice on successful completion of the programme.

Sign-off mentors told us that they are appropriately prepared for their role in teaching, assessing and supporting the return to practice (nursing) students. They expressed confidence in the assessment process.

PEFs confirmed strong partnership working with the academic programme teams. They described their role in supporting students, mentors and sign-off mentors and their communication with academic staff and link tutors to manage student issues.

Students

Pre-registration nursing (adult)

Students are enthusiastic about the pre-registration nursing (adult) programme and the learning opportunities in the university and in practice placements. They confirmed that timetables, assessment information and other programme details are always available in advance and rarely changed. They receive timely constructive feedback from academic staff to develop their knowledge and skills for their next assignment. Students appreciate the support available from mentors and link tutors during practice learning. Students could identify what they would do and who they would report to when issues of concern about the programme or during practice placements arose.

Return to practice (nursing)

Students are confident, articulate and engaged with the review team in a professional manner. They were very complimentary of the university and spoke positively of the support provided to them by academic staff and from their sign-off mentor. Students spoke highly of the learning opportunities that are provided in the practice placements to enable them to develop their confidence and competence in practice. They confirmed that they had made the right decision to undertake the return to practice (nursing) programme to apply for re-admission to the NMC register.

Service users and carers

Service users and carers are involved in the programme as 'experts by experience'. They report very positive interactions with students and university staff. They told us they are prepared for their role and receive equality and diversity training prior to involvement with recruitment and selection of students. They are also involved in simulation activities in the university. We met service users in placement areas who told us that the students caring for them were kind and caring and provided a high standard of care.

Relevant issues from external quality assurance reports

The findings from CQC reports published between January 2016 and February 2017 for organisations that provide practice placements used by the university were reviewed. These external quality assurance reports provided the reviewing team with context and background to inform the monitoring review.

The following reports required action(s):

Ashgate House Care Home, Chesterfield. Date of report: 1 February 2017 (4)

The CQC carried out announced and unannounced visits, to check the essential standards of quality and safety were met. Overall, the care home was rated as requires improvement. It was rated as requires improvement for: safe; effective; responsive; well led; and, good for caring. The CQC issued a warning notice in relation to person-centred care and the management of medicines. The CQC also required the organisation to take actions to follow the principles of the Mental Capacity Act 2005 and the organisation is required to audit these actions (4).

Derbyshire Healthcare NHS Foundation Trust. Date of report: 29 September 2016 (5)

The CQC carried out the inspection to judge the quality of the service. Overall, the trust was rated as requires improvement. It was rated as inadequate for well led; requires improvement for safe, effective and responsive; and, good for caring. CQC set 52 areas that must be improved by the trust.

This NHS trust is currently used for practice learning by students undertaking the pre-registration nursing (mental health) programme. A student has recently completed the return to practice (nursing) programme at this trust (36).

Action taken:

Derbyshire Healthcare NHS Foundation Trust continues to work closely with the university to ensure student nurses' practice learning is not compromised. The head of education at the trust meets monthly with the university; a risk assessment has been completed and an action plan is in place. The head of education has met with student nurses (mental health) to discuss developments to enhance the services. The university is providing additional link tutor support for students and mentors (102).

Morton Grange residential and nursing home, Alfreton. Date of report: 3 February 2017 (6)

The CQC carried out an inspection to judge whether the service is meeting the requirements of the Health and Social Care Act 2008, the quality of the service and to provide a rating of the service under the Care Act 2014.

Overall the service was rated as requires improvement. It was rated as requires improvement for safe, effective, caring, responsive and well led. The nursing home must take action in four areas; dignity and respect, safe care and treatment, governance and staffing.

Oakhill Medical Practice, Dronfield. Date of report: 24 February 2017 (7)

The CQC carried out this inspection to judge the quality of the service.

Overall the service was rated as requires improvement. It was rated as requires improvement for safe and well-led and good for effective, caring and responsive.

Royal Derby Hospital, Derby Teaching Hospitals NHS Foundation Trust. Date of report: 3 February 2017 (8)

This was a focused follow up inspection from a comprehensive inspection visit in 2014. The services medical care (including care of the elderly) and maternity and gynaecology require improvement in the safe domain.

What we found at the monitoring visit:

The university works closely with all placement providers to monitor the outcomes of external monitoring reports. There is an effective two-way communication process in place between university senior management and directors of nursing in placement organisations. In response to concerns, risk assessments are undertaken and action taken, where necessary, to assure the quality of the placement learning environment. During the monitoring visit we found evidence of a collaborative, proactive approach to ensuring that clinical governance issues are controlled and well managed (102). However, we found no evidence of exceptional reporting to the NMC within the last year in accordance with the Quality Assurance framework part four (NMC, 2016).

Follow up on recommendations from approval events within the last year

Approval of the postgraduate pathway (MSc/PGDip) pre-registration nursing (adult) (10)

There were three recommendations:

- Appoint an external examiner with experience in scrutinising recognition of prior learning (RPL) for this programme (NMC Standard 3.11).
- The student handbook to include a diagrammatic representation of the programme showing weeks of study and practice, assessment periods and progression points (NMC Standard 2.1).
- The student handbook to offer more clarity on the hub and spoke placement structure (NMC Standard 6.5).

At the monitoring visit we confirmed all recommendations have been completed.

Specific issues to follow up from self-report

- An increase in student numbers on the adult field programme has required an increase in the number of academic staff (see section 1.1.1)
- The need to monitor placement capacity in the light of reconfiguration of services (see section 1.2.1)
- The need to make more use of placements in the PVI sector (see section

3.1.1)

- The need to ensure that there are sufficient appropriately prepared mentors to support the total number of students undertaking NMC approved programmes (see section 1.2.1)
- A student was discontinued from the return to practice (nursing) programme following the department's professional conduct and professional suitability (PCPS) policy and process. The department reported this student to the NMC (see section 2.1.2)

Findings against key risks

Key risk 1 – Resources

- 1.1 Programme providers have inadequate resources to deliver approved programmes to the standards required by the NMC**
- 1.2 Inadequate resources available in practice settings to enable students to achieve learning outcomes required for NMC registration or annotation**

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

What we found before the event

Academic staff members declare the currency of their NMC registration during annual appraisals, which is monitored by the head of department (3).

A process is in place to ensure that all staff meet the NMC revalidation requirements which include awareness sessions for staff and the appointment of confirmers (3).

The university uses a workload model which includes an allocation of 200 hours per year for scholarly activity, of which 40 hours are designated for professional development (12-13).

The university has a staff development policy and guidelines, which includes a strategy for research (14-21).

What we found at the event

We found the university has an effective process and database in place to ensure that all registrant nursing academic staff have current registration and meet revalidation requirements (60, 99).

We confirmed that the programme leaders for the pre-registration nursing (adult) and

the return to practice (nursing) programmes hold current NMC registration, have due regard and a recorded teaching qualification (59, 62).

Nursing lecturers supporting the programmes have current NMC registration, hold qualifications and experience commensurate with their role and the majority have a recorded teaching qualification. The university actively supports newly appointed nursing lecturers to achieve a NMC recordable teaching qualification within two years of employment. New lecturers must attend teaching and assessment workshops to ensure there is a quality and consistent approach to teaching and assessment processes (59, 62, 99).

A small number of nursing lecturers have dual qualifications. The pre-registration nursing (adult) programme team told us they do not have expertise in, for example; midwifery, children and learning disabilities nursing. We confirmed that this specialist knowledge is provided through remedial arrangements and the appointment of associate lecturers, as necessary, to contribute to the delivery of the programme and to ensure student nurses (adult) are supported to achieve EU requirements (59, 62, 96, 99, 104).

There are recognised challenges in delivering the return to practice (nursing) programme in Nottingham and Leicester but senior staff and the programme team reported that there are sufficient academic staff to deliver the programme in these locations (97, 99, 112).

There is an established staff development and performance review (DPR) process which commences in the autumn term with an initial meeting, an interim meeting six months later, and an end professional discussion. Senior staff told us this is a supportive approach to staff development but also contributes to the university workload planning. We found evidence through academic staff curricula vitae, staff publications and confirmation by the programme teams that academic staff engage in appropriate and relevant continuing professional development activities (14-21, 59, 61, 96-97, 99).

We were told that the nursing associate pilot programme is a discrete project with the appointment of additional supporting staff resources and does not impact on the NMC approved programmes (99).

We were assured by senior staff that there are sufficient appropriately qualified teaching staff to deliver the pre-registration nursing (adult) programme at both undergraduate and postgraduate level and the return to practice (nursing) programme. This was confirmed in our discussions with the programme teams, students and mentors (96-97, 99, 104, 106-109, 111-115).

We conclude from our findings that the university has adequate resources to deliver the pre-registration nursing (adult) programme and the return to practice (nursing) programme to meet NMC standards.

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

What we found before the event

The university provided evidence at the approval of the postgraduate pre-registration nursing (adult) pathway event in 2016 that there were sufficient mentors and sign-off mentors to support the numbers of students allocated to placements. The university works in partnership with placement providers to monitor placement capacity and mentor availability to support the numbers of students allocated to placements (1-2, 10-11).

Some of the placement provider organisations also provide placements for student nurses studying the pre-registration nursing (adult) programme at another approved education institution (AEI) (36).

What we found at the event

Practice placement learning environments are audited and monitored by PEFs and link tutors to ensure that mentor levels are adequate. We viewed educational audit documentation for each of the areas visited which clearly denotes the number of students able to be supported at any one time in the placement area. This was also confirmed in the ARC technology limited placement data system (50, 58, 80-81, 102, 106-108, 110-111, 113).

PEFs and education leads work closely with the university and a neighbouring AEI, who uses the same placements, to manage placement capacity. We observed the capacity planning grid which is used to plan placement capacity 18 months ahead of the planned allocation of students. This enables the required numbers of mentors to be prioritised and access the mentor preparation programme, if required (58, 79, 81-83, 102).

PEFs, students, mentors, and education leads confirmed that allocations of students from the neighbouring AEI does not impact upon the support and practice learning experience for the University of Derby students (58, 104, 106-108, 113).

There is a clear system in place for the allocation of student to mentor in each of the practice areas visited and students confirm that they are assigned a named mentor/sign-off mentor (and in many instances, an associate mentor) prior to commencing each practice placement. Students, mentors, sign-off mentors, and clinical managers confirmed that planning of placements is well organised, structured and appropriate and there are sufficient mentors to support the number of students allocated. Mentors act with due regard and students and mentors confirmed that students spend at least 40 percent of their time with their allocated mentor (102, 104, 106-115).

We confirmed that students on both the pre-registration nursing (adult) and return to practice (nursing) programme undertake spoke placements outside of their main hub placement. This arrangement is co-ordinated by the mentor in the hub placement who ensures that appropriate supervision is available in the spoke placement (54, 96-97,

106-115).

Return to practice (nursing) students and student nurses on their final placement are allocated a sign-off mentor and understand the significance and importance of this role to their progression onto the NMC register to ensure that the public are protected (104, 109-115).

We conclude that there are sufficient appropriately qualified mentors and sign-off mentors to support the number of students studying the pre-registration nursing (adult) programme and the return to practice (nursing) programme.

Outcome: Standard met

Comments:

No further comments

Areas for future monitoring:

None identified

Findings against key risks

Key risk 2 – Admissions & Progression

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

Risk indicator 2.1.1- selection and admission processes follow NMC requirements

What we found before the event

There is a university wide admissions policy which includes a process for the investigation and management of fraud. The department has a comprehensive admission procedure and checklist which includes a values-based recruitment and selection process. There is a clear process to review applications and invite successful candidates to attend a selection day. The selection day includes a group activity, a numeracy and literacy test and an individual values-based interview (22, 25-27, 63-64).

Successful candidates must have a satisfactory health check and an advanced DBS check at the point of entry to the programme. There is a process by which adverse outcomes following a DBS check are managed (26-28, 63-64).

There is a procedure and flowchart to manage the admission of a student who is under 18 years of age at programme commencement to protect the student and the public (23, 25).

What we found at the event

We found that recruitment and admissions processes comply with NMC standards and requirements. There is a robust process in place which includes the training of staff involved in admissions processes. Interviews for both the pre-registration nursing (adult) programme and the return to practice (nursing) programme are centred on a values-based recruitment philosophy (22, 25-26, 63-64, 116).

The university provides equality and diversity training for academic staff. Equality and diversity in the workplace online training must be completed followed by a relevant workshop every year. This was confirmed on the staff database (3, 67, 99).

We confirmed there is a robust procedure in place to manage the learning experiences of students less than 18 years of age going into practice placements and this ensures both protection of the student as well as protection of the public (22-23, 102, 116).

Pre-registration nursing (adult)

Interviews for the pre-registration nursing (adult) programme include: a group activity, assessment of literacy and numeracy, and one to one interview. The interview panel includes a member of academic staff, a practitioner, and an expert by experience. Students are involved in the recruitment process but do not make a decision regarding the selection of applicants. Students told us they felt reassured to meet year three students during the process. Several students have volunteered to become student ambassadors because of this positive experience (22, 25, 96-98, 104, 106-108, 113, 116).

Academic staff confirmed that they had completed equality and diversity training and that practitioners complete relevant training in the NHS trust which is checked by the programme leader prior to their involvement in selection processes. Experts by experience told us that they value the opportunity to be involved in selecting students, particularly observing the caring and compassionate element of the interaction with prospective students. They confirmed they had completed preparation for the role, including equality and diversity training which they evaluated very positively (67, 97-99).

Return to practice (nursing)

We found that recruitment and admissions processes comply with NMC standards and requirements. We confirmed that the selection panel consists of a member of the academic team and a practitioner. At the interview, the applicant's previous learning and experience is discussed and this information is used to establish the nature of placement learning the student will undertake. During the values-based interview, applicants are asked if they have been subject to an investigation by the NMC on any fitness to practise concerns. An applicant's entry on the NMC register is checked after

<p>the interview (22, 32, 63-65, 97, 112, 114, 137).</p> <p>The programme team informed us that service users contribute indirectly to the recruitment process by describing the essential characteristics and attributes that an applicant should demonstrate. This was confirmed by experts by experience (89, 97).</p> <p>We confirmed that safeguards are in place to prevent unsuitable students entering the programmes. The university ensures that each student undertakes an advanced DBS check and an occupational health declaration before going on placement to assure the suitability of students to be in placement areas and protect the public. PEFs and senior practice managers confirmed that the university shares this information prior to students commencing placements (28, 102-103, 106-110, 113-114, 116).</p> <p>We conclude from our findings that the admissions process for the pre-registration (nursing) programme and return to practice (nursing) programme meets the NMC requirements.</p>
<p>Risk indicator 2.1.2 - programme providers' procedures address issues of poor performance in both theory and practice</p>
<p>What we found before the event</p>
<p>The university has a policy on professional conduct and professional unsuitability to address concerns relating to the professional behaviour of students in both academic and practice settings. This policy embraces the NMC's fitness to practise requirements (10-11, 29, 33).</p> <p>Students are informed of this policy in the programme handbooks (10-11, 39-40).</p> <p>Students are required to declare their health and character status every year or if their circumstances change (37-40).</p> <p>Instances of plagiarism in academic work are investigated and managed in accordance with the university's regulations (24).</p>
<p>What we found at the event</p>
<p>Pre-registration nursing (adult) students confirmed that they complete annual self-declarations of good health and character as part of their re-enrolment processes and clearly understand the rationale for this. We viewed a sample of declarations completed by students at progression points and verified that records of compliance are retained (74, 104, 106-108, 113).</p> <p>Students on professional programmes are expected to comply with the university rights, responsibilities, and regulations (the 3Rs). There is a robust professional conduct and professional suitability (PCPS) policy which is discussed with students at the beginning of programme, detailed in programme handbooks and on the virtual learning environment (VLE) which was confirmed by students. Students on both the</p>

pre-registration nursing (adult) and return to practice (nursing) programmes told us that they sign a PCPS agreement at the commencement of the programme and understand the reason for this (24, 29, 31, 37-40, 76-77, 103-104, 106-109, 111-115).

We found there is a clear flowchart which supports a two stage process for alleged PCPS which is managed by the student complaints and conduct team in collaboration with the head of department. A senior representative from a placement provider organisation is involved in the decision making process as a panel member. The composition and role of the PCPS panel meets NMC requirements (29, 31, 77, 99, 102-103).

The PCPS panel considered one pre-registration nursing (adult) case and one return to practice (nursing) case in the academic year 2015-16; both students were discontinued from their programmes. In 2016-17 there have been two adult nursing cases considered; one case was reviewed at stage one and received an advisory note; one student was discontinued from the programme (78).

Key issues from fitness to practise cases are shared with programme and practice education teams. An example of a lesson learnt was implemented as an entry requirement of applicants for the return to practice (nursing) programme (97, 103, 116). We are confident that concerns are investigated and dealt with effectively and the public is protected.

We found the processes for addressing students' performance in their academic work are robust and enable close monitoring of progress when concerns have been identified. Academic staff are aware of the procedures to address issues of poor performance in either theory or practice (24, 32-33, 37-38, 96-97, 124).

For students who have failed theory or practice assessment components there is a clear re-assessment policy that considers progression points, as well as the NMC 12-week rule. There is a professional qualification board which reviews students' profiles and makes decisions about their progression on the programme. External examiners are involved in decisions relating to progression of students to the next stage and completion of programmes (24, 33, 75, 103, 127-130).

We confirmed the completion, achievement, and the signing-off process for admission of students to the NMC register is compliant with NMC requirements (129-130).

The department works closely with HEEM to reduce attrition on commissioned programmes. In addition, there is robust monitoring of the difference in attainment between black, minority ethnic (BME) students and British white students as part of the university's widening participation agenda. Assessment boards and programme committees review data on attrition at each progression point, identify any emerging themes and take action involving placement providers, as appropriate. Data confirms that attrition is below the national average. There is a robust plan which aims to reduce attrition rates to the minimum possible level consistent with maintaining academic standards and the requisite levels of competence to meet NMC standards to protect the public (71-73, 99-101).

Our findings confirm that the university has effective policies and procedures in place for the management of poor performance in both theory and practice which are clearly understood by all stakeholders. We are confident that concerns are investigated and

dealt with effectively and the public is protected.
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
<p>Programme handbooks and practice assessment documents provide information about addressing poor performance of students in practice (32-33, 37-40, 140).</p> <p>Information on the support available for students who declare a disability is documented in the programme handbooks (24, 32-33, 37-40).</p>
What we found at the event
<p>We found that mentors/sign-off mentors, PEFs and students are aware of the procedures to address issues of poor performance in practice. They confirmed their awareness of the department's PCPS policy (77, 102, 104, 106-115).</p> <p>Mentors and sign-off mentors reported clear procedures and guidance for dealing with poor student performance; there were also numerous examples provided of enacting the guidance with full effect and closure. One mentor gave an example of where a student was underperforming in practice. The link tutor had been contacted and an action plan implemented. The student is now making satisfactory progress. The mentor had felt well supported by the university and reported that they had responded quickly and appropriately (106-115).</p> <p>Sign-off mentors are confident to make balanced decisions regarding student progress. They understand the need to make the best use of available support when making pass/fail decisions and to ensure that students are competent and fit to practise in accordance with both the university and NMC requirements to protect the public (106-115).</p> <p>We conclude from our findings that practice placement providers implement university procedures to address issues of poor performance in practice settings.</p>
Risk indicator 2.1.4 - systems for the accreditation of prior learning and achievement are robust and supported by verifiable evidence, mapped against NMC outcomes and standards of proficiency
What we found before the event
There are university regulations and procedures for RPL which allow up to a maximum of 50 percent of programme academic credits for RPL which meets the NMC requirements. RPL has been used for entry to the pre-registration nursing

programme for students entering the undergraduate who have completed a foundation degree, entering the postgraduate pathway, and transferring from another AEI (3, 41-42).

RPL is not available for the return to practice (nursing) programme (32).

What we found at the event

The university has a clear process for RPL and supports students to join the pre-registration nursing (adult) programme in line with NMC standards. We confirmed robust mapping of the foundation degree science in professional development in health and social care (assistant practitioner) programme to year one of the pre-registration nursing programme (41-42, 66, 116).

There is a clear RPL checklist used by the programme leader for RPL claims into the MSc nursing programme. We viewed the portfolio of entry claim for completed theory and practice hours and confirmed RPL procedures are robust, reliably evidenced and well administrated. Claims are examined by an academic with due regard, external examiner and formally ratified by the assessment board (42, 67-70, 116).

We conclude that robust systems are in place for the accreditation of prior learning and achievement, which meet NMC standards and requirements.

Outcome: Standard met

Comments:

No further comments

Areas for future monitoring:

None identified

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

<p>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</p>
<p>What we found before the event</p>
<p>There is a strong partnership between the university and practice placement providers at a range of levels. Some of the activities include recruitment of students, educational audits, and support to students (1-3, 43-48).</p> <p>There are placement partnership agreements in place between the university and NHS trust placement providers and several independent organisations (87).</p> <p>Information on how students can report concerns in practice is detailed in the programme handbooks (32, 37-38).</p> <p>There is a process for undertaking educational audits of practice placements. These audits are shared with neighbouring AEs, as appropriate (49-50, 58).</p>
<p>What we found at the event</p>
<p>We found that partnership working between the university and practice placement providers is strong and effective at both strategic and operational levels to ensure effective practice learning environments and experiences for students. We found substantial evidence of well-established partnership groups and communication strategies for information exchange between the organisations (43-48, 87-88, 95, 102, 135).</p> <p>At a strategic level the health and social care education group ensures that health and social care programmes provided by the university are relevant and meet the needs of the regional current and future workforce (45, 95). The university works in partnership with the Derbyshire education health and social care network which is an interprofessional group of education leads which facilitate the implementation of workforce, organisational developments, and education agendas across the East Midlands (44, 95).</p> <p>The university works closely with HEEM in the governance, performance and evaluation of the commissioned pre-registration nursing (adult) and return to practice (nursing) programmes. The HEEM representative told us the university listens to, and is responsive to, workforce needs and is forward thinking in meeting education and training needs of the nursing workforce. The university is particularly commended by HEEM for its commitment to widening participation. We saw evidence of this in the local and regional partnerships with local colleges in advising and supporting the preparation of future applicants for the pre-registration nursing programme (44, 95, 101).</p> <p>An example of the responsiveness of the university to workforce demands is the provision of return to practice (nursing) programmes in areas outside its geographical</p>

boundary in Leicester, Nottingham, and Lincoln. The university successfully delivered one cohort in the latter area but recognised it had stretched its resources too far so withdrew. However, the programme team continued to support practice placement providers and another AEI to develop a return to practice programme which was successfully approved by the NMC (95, 97, 99, 101).

The Derbyshire nursing and midwifery review group works in partnership with the university and placement provider organisations to proactively plan placement capacity, practice learning opportunities, interprofessional learning opportunities, and provide a support network for practice learning leads to share best practice, ideas and innovation. At an operational level we found that the Derbyshire practice learning group, which meets six times a year, provides robust effective communication and coherent working practices between the practice placement providers and the university to provide and support effective learning environments for pre-registration nursing, return to practice (nursing) and mentor preparation programmes (43, 46, 48, 102).

We confirmed that there is a robust educational audit tool and procedures within the ARC placement system which meet NMC requirements. There is a robust online audit tracker which provides an alert system at intervals to ensure audits are completed in a timely way. The practice learning support unit (PLSU) team work in close partnership with other AEIs who use the same placements, and educational audits are conducted collaboratively (49-50, 57-58, 80-83, 102, 110, 113).

Link tutors, placement leads and PEFs work in partnership to ensure educational audits are completed every two years and during periods of changing circumstances; action plans are developed, as necessary, completion is monitored and audit records amended accordingly. Examples include the temporary closure or change to a designated service; or a reduced ratio of mentors to students. In all examples actions were clearly recorded and reported as resolved. We viewed educational audits for the placements visited and confirmed that the documentation and process meets NMC requirements (57, 102, 106-111, 113-114).

The university continues to develop partnerships and work effectively to increase and use placements in the PVI sector. We found evidence of this in the PVI audit database managed by the university, which demonstrates the placement areas in use and areas which are not in use due to staff shortages and/or poor practice learning opportunities (82, 102).

We are assured that effective risk management approaches are adopted and actions are taken in partnership between the university and practice placement providers to ensure students' practice learning is not compromised when CQC reports have identified areas of concern (5, 8, 82, 99, 102). However exceptional reporting to the NMC in a timely manner in accordance with the Quality Assurance framework part four (NMC, 2016) requires improvement.

There is a clear protocol and process for raising and escalating concerns related to patient care, which are clearly understood and confidently described by mentors and students. Students reported they were informed about the process for escalating concerns on programme commencement, at NHS trust induction, and they are aware that they can access information on the VLE Blackboard platform. They are confident

<p>that any concerns raised would be handled in a responsive and effective manner. Education leads reported that students are supported to write statements, if required, and clinical matrons write to students to thank them for their diligence in safeguarding patient care (30, 32-33, 37-38, 104, 106-109, 111-115).</p> <p>We conclude that there are strong and effective partnerships between the university and service providers at all levels. However exceptional reporting to the NMC in a timely manner in accordance with the Quality Assurance framework part four (NMC, 2016) requires improvement.</p>
<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>Practitioners and service users and carers (experts by experience) are involved in the development and delivery of the pre-registration nursing programme (3, 33, 90-92).</p>
<p>What we found at the event</p>
<p>We found evidence that practitioners are involved in the development and delivery of the pre-registration nursing (adult) and return to practice (nursing) programmes. Programme teams, students and practitioners gave examples of their involvement, and we observed their input into teaching activities in programme timetables (96-97, 104, 113, 118-121, 139).</p> <p>We found there is an established group of service users and carers, namely the experts by experience partnership group, which has developed significantly in the past two years. The group meets regularly and has its own terms of reference. There are currently 38 members who contribute to the educational activities of programmes within the college of health and social care (89-92).</p> <p>Pre-registration nursing (adult)</p> <p>Experts by experience told us that they are extensively involved in the pre-registration nursing (adult) programme. They described their involvement in recruitment and selection days and in simulated learning sessions, which was confirmed by students. Experts by experience evaluated their involvement very positively and described their interactions with student nurses and their enthusiasm and positive attitudes (51, 98, 104, 106-108, 113).</p> <p>Students told us service users complete testimonials in their practice assessment ongoing achievement record (OAR) about the care they have provided. They showed us several testimonials they had received and described how constructive and helpful they found this feedback for their professional development (104, 106-108, 113).</p> <p>We met with service users in some of the placement areas visited who gave us very positive feedback about the care they had received from students (107-108, 113).</p>

<p>Return to practice (nursing)</p> <p>Service users contribute to the assessment of practice by completing testimonials to be included in the student's OAR. Sign-off mentors confirmed they play a key role in gaining the consent and participation of service users in obtaining this feedback. Students do not recall service user involvement in the teaching of the programme. We were told by the programme team that service users are no longer involved in the delivery of the programme. The main reason provided for this non-involvement is that a number of lapsed nurses have often had carer roles and share this experience with peers on the programme and also there is limited opportunity within the timetable (97, 109-112, 114-115).</p> <p>The programme team are advised to review this rationale and consider re-introducing service users in the delivery of the programme.</p> <p>Our findings conclude that practitioners and service users and carers are involved in programme development and delivery.</p>
<p>Risk indicator 3.2.2 - academic staff support students in practice placement settings</p>
<p>What we found before the event</p>
<p>There are link tutors allocated to practice areas to support mentors/sign-off mentors and students. In addition, there is a rota of weekly visits undertaken by link tutors to placements in the two main NHS placement providers (2, 36).</p>
<p>What we found at the event</p>
<p>The role of the link tutor, described in the pre-registration nursing handbook, is to provide support for students and mentors in the practice learning environment (37-38).</p> <p>Pre-registration nursing (adult)</p> <p>Although not standardised in terms of their visit to practice settings, the link tutors are visible and an integral part of support for practice learning. Students told us that if they experienced any problems the link tutor responded very quickly and was very supportive. Several students gave us examples of when they contacted the university with a concern, and in each case the link tutor had visited the placement the same day and had resolved the problem (104, 106-108, 113, 138).</p> <p>The university have recently implemented a 'walk around clinical area' policy; this is a weekly visit where link tutors on a rota basis are available in placement settings for mentors and students. Mentors, sign-off mentors and service managers all reported having effective working relationships and support from link tutors (102, 106-108, 113, 141).</p> <p>Return to practice (nursing)</p>

<p>Sign-off mentors, PEFs and students confirmed that academic staff provide support to students in practice placement settings. We were provided with a document which evidenced the presence of academic staff in practice settings (109-112, 138).</p> <p>Students who undertake their placement outside of the geographical area reported that they have regular telephone contact with academic staff. They confirmed that they are confident that if they needed to see a member of the academic staff in the practice setting for an urgent or complex issue, this would occur (112, 114-115).</p> <p>We conclude from our findings that academic teams effectively support students in practice settings.</p>
<p>Risk indicator 3.2.3 – records of mentors/practice teachers in private, voluntary and independent placement settings are accurate and up to date</p>
<p>What we found before the event</p>
<p>The mentor records for the PVI sector are held by the university (3, 36).</p>
<p>What we found at the event</p>
<p>The mentor database for the PVI sector placements is maintained by the university. We viewed the mentor records and confirmed records of mentor preparation, annual updates and triennial reviews are consistently recorded and up to date (93, 101).</p> <p>We conclude records of mentors in the PVI sector placements are accurate and up to date.</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>The university provides an NMC approved mentor preparation programme (1-3). PEFs and link tutors provide annual mentor updates which include discussion about the mentor role in assessing practice. Mentors and sign-off mentors can either attend a face-to-face mentor update or complete an online mentor update package (36).</p>
<p>What we found at the event</p>
<p>Mentors told us that the NMC approved mentor preparation programme provided by the university effectively prepared them for their role in supporting learning and</p>

<p>assessment in practice learning environments (102, 106-111, 113-114).</p> <p>PEFs told us that they work closely with service managers to identify nurses to complete a mentor preparation programme and to support mentors to access mentor updates. Service managers confirmed that it was normally possible to release mentors to attend the updates, unless there was an emergency in clinical practice. We observed information in practice placements about mentor updates, including the availability of flexible modes of delivery and opportunities for face-to-face discussions. We viewed an example of part of the online mentor update during a placement visit and sampled teaching materials for the face-to-face mentor updates (84-86, 94, 102, 106-111).</p> <p>Mentors and sign-off mentors all reported high levels of satisfaction with the preparation and update programmes. They told us that the annual updates are informative and the content changes regularly to ensure they receive the latest changes to the pre-registration nursing (adult) and return to practice (nursing) programmes. In addition, lessons learnt from challenges and scenarios experienced by mentors when supporting and assessing students are shared (106-111).</p> <p>Mentors and sign-off mentors described their understanding and compliance with the practice assessment requirements. Students confirmed that their mentors have a clear understanding of their sign-off role, understand the assessment of practice documentation and support them very well (104, 106-111, 113).</p> <p>Our findings confirm that mentors and sign-off mentors are properly prepared for their role in assessing practice.</p>
<p>Risk indicator 3.3.2 - mentors, sign-off mentors and practice teachers are able to attend annual updates sufficient to meet requirements for triennial review and understand, and can reflect on, the process they have engaged with</p>
<p>What we found before the event</p>
<p>Mentors and sign-off mentors must attend an annual update session and meet the requirements of triennial review to meet the Standards to support learning and assessment in practice (NMC, 2008) (3).</p>
<p>What we found at the event</p>
<p>All mentors, sign-off mentors and service managers we met are aware of the NMC requirements for annual updates and triennial reviews and could correctly describe the purpose and process. They confirmed that they were released from practice to meet these requirements (106-111).</p> <p>The PLSU told us that they send a list of dates and times of mentor updates to managers when they inform them there is a mentor who requires updating. Mentor updates are provided as both face-to-face sessions and as an online learning</p>

<p>package; mentors are only allowed to complete the online package once every three years (84-86, 94, 101).</p> <p>Mentors and PEFs told us that mentors prefer to attend face-to-face sessions as these offer the opportunity to discuss scenarios and experiences with other mentors. The face-to-face sessions are normally held in a central area in the practice placement organisation facilitated by PEFs and link tutors. Staff from the PLSU told us that if there are challenges in releasing mentors to attend updates from a clinical area, the update will be held in the area to enable mentors to attend (101, 106-111).</p> <p>We conclude that mentors and sign-off mentors attend annual updates sufficient to meet requirements for triennial review and to support the assessment of practice.</p>
<p>Risk indicator 3.3.3 - records of mentors / practice teachers are accurate and up to date</p>
<p>What we found before the event</p>
<p>The register of mentors is held in each NHS trust (33).</p>
<p>What we found at the event</p>
<p>We viewed the mentor databases held by each practice placement provider and confirmed information was accurate and up to date. The databases contain information on the mentor preparation programme, the date of the annual mentor update and the triennial review (106-109, 113).</p> <p>PEFs and education leads informed us of the robust process for updating the information in the mentor databases and how information is used to ensure students are only allocated to a mentor or sign-off mentor who meets the NMC Standards to support learning and assessment in practice (NMC, 2008). The databases are held securely, are accessible only with a password and PEFs only have access to the database relevant to their own placement area (101, 106-110, 113-114).</p> <p>We conclude that records of mentors and sign-off mentors are accurate and up to date.</p>
<p>Outcome: Standard requires improvement</p>
<p>Comments:</p> <p>We are assured that actions are taken in partnership between the university and practice placement providers to ensure students' practice learning is not compromised when CQC reports have identified areas of concern. However, exceptional reporting to the NMC in a timely manner in accordance with the Quality Assurance framework part four (NMC, 2016) requires improvement.</p>

Areas for future monitoring:

- Exceptional reporting to the NMC takes place in a timely way.
- Service user carer involvement in the delivery of the return to practice (nursing) programme.

Findings against key risks

Key risk 4 - Fitness for Practice

4.1 Approved programmes fail to address all required learning outcomes in accordance with NMC standards

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

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

What we found before the event

Pre-registration nursing (adult)

The programme outcomes for the BSc (Hons) nursing programme and MSc/PgD nursing route have been mapped to the NMC standards and competencies (NMC, 2010). The generic and field standards for competence for all domains are addressed in the programme and embedded in the delivery and assessment of the programme (10-11, 33, 37-38).

A range of teaching strategies are employed. Information technology is used widely as an adjunct to face-to-face teaching (1, 33, 37-38).

A total of 150 hours of the undergraduate pathway is simulated practice and counts towards the practice learning hours of the programme. There are simulation sites at both campuses, equipped with a range of equipment and facilities (10-11, 36, 52-53).

Students engage in learning activities including simulation and hub and spoke placements to meet the EU directives and towards their practice competencies. The range of practice learning opportunities available is enhanced by insight visits to other practice areas. These insight visits are of a shorter duration and there is a maximum limit of 50 hours that a student can spend on this type of visit (33, 37-38, 52-54).

Students complete mandatory training annually. When they commence a placement, students have an orientation to the area and the activities that constitute orientation are described in the assessment of practice documents (37-40).

Students are provided with all relevant programme information in a programme handbook, module handbooks, and on the VLE Blackboard platform (37-40).

Students are eligible for two attempts in all theory assessments. A further attempt may be permissible but this is subject to approval by the board of examiners. The results of assessments are confirmed by the board of examiners, which are governed by the university's assessment regulations (24, 33, 37-38).

Return to practice (nursing)

The programme outcomes enable students to meet NMC (2011) return to practice (nursing) learning outcomes, and successful students can apply for re-admission to part one of the NMC register.

Successful students who register on part one of the NMC register have the opportunity to meet learning outcomes which are mapped to the Standards for specialist community public health nursing (NMC, 2004), enabling them to apply for re-admission to part three of the NMC register (32, 124).

What we found at the event

Pre-registration nursing (adult):

Students confirm their understanding of the programme aims and learning outcomes which are clearly stated in their programme handbook. They demonstrate a good understanding of the structure of their programme and the assessment strategy, and appreciated opportunities for formative and summative feedback to facilitate their development (104, 106-108, 113).

Effective teaching and learning strategies and approaches ensure that students can make clear links between theory and practice and students can develop their care skills in safe, simulated learning environments. Students reported making the best use of lectures and practical skills sessions including simulated learning (such as cardio-pulmonary resuscitation skills) to develop the requisite skills, knowledge and understanding of nursing theory and practice. Students and mentors informed us that theoretical concepts are closely aligned to practice learning. Overall, students are positive about the range and quality of learning materials available through the VLE Blackboard online platform (104, 106-108, 113).

Students are given opportunities to rehearse and develop caring and practical skills in a safe clinical environment in the simulation suite. We observed a group of first year students being supported by third year students to learn practical skills. Experts by experience told us that they participate in learning sessions for students in the simulation suite which are well received by students. There is a virtual learning suite which provides different care environments, for example a home environment. Students, mentors and service managers report these approaches to teaching and learning ensure students are well-prepared for practice placements (98, 104-108, 113, 122).

Students report that in each year of the programme, prior to commencement of placement, they must complete mandatory training in the university which they told us is thorough and prepares them for placement. Examples of mandatory training include hand washing, infection control, equality and diversity and basic life

support/resuscitation (104, 106-108, 113).

There is some shared teaching and learning with students studying the mental health field of practice, and interprofessional learning in theory and practice. Students reported interprofessional learning in the university with radiography and social work students and attending periodic seminars with medical students in practice settings (37-38, 95-96, 104, 106-108, 123).

We confirmed the university actively monitors both theory and practice hours to ensure that all students are meeting the NMC requirements in line with the EU directive. We also confirmed through duty rosters and speaking to students that students experience the 24-hour care cycle. Students record and have their practice hours counter-signed by mentors in the OAR. The OARs we observed confirmed hours are recorded and signed (96, 104, 107-108, 113).

We confirmed that students understand and meet the requirements and content of the EU directive which is achieved through simulated learning. Associate lecturers provide specialist knowledge, as required (see section 1.1.1). (104, 106-108, 113, 117).

We found that students emerging from the pre-registration nursing (adult) programme are considered fit for practice by employers and educational commissioners. External examiners confirm parity of experience for students on different campus sites; the achievement of the necessary requirements to move through progression points; and, statutory and academic requirements on programme completion (101, 106-108, 113, 126-130).

Return to practice (nursing)

We reviewed the timetables for the programmes delivered in the different locations and confirmed similarity of teaching sessions (97, 139).

Students confirmed that they completed mandatory training sessions provided by the NHS trust before they commenced their placements. They commented positively on the value of these sessions in preparing them for the placement. They report that the range of teaching sessions provided in the university; the content about contemporary issues in healthcare and nursing; study skills sessions; and, effective use of the university library effectively prepares them to meet their learning outcomes and assessments. A teaching session on the NMC Code (2015) is also included in the programme timetable. The former students that we met confirmed that they were informed about NMC revalidation requirements prior to completion of the programme (109, 111-112, 114-115).

The programme team told us that there is an opportunity for students to request specific sessions, and the requests are predominantly on current approaches to caring for specific client groups or disorders. Students are positive about these opportunities but reported they would prefer more sessions (97, 109, 111-112, 114-115).

Students undertake a drug calculation paper in the first week of the programme to assess the student's numerical understanding. The pass rate is 100 percent. There is no limit to the number of times the students can undertake the numeracy assessment. However, the student must have achieved a 100 percent pass by the end of the

<p>programme and this is documented in the portfolio (32, 97, 124).</p> <p>Practice assessment includes a reflective portfolio demonstrating achievement of the learning outcomes and portfolio activities informed by NMC practice competencies and essential skills clusters have been met. We found that formative and summative assessment processes are effective in confirming the required levels of achievement in theory and practice (32, 97, 124, 140).</p> <p>The university monitors students' attendance in theory sessions and in placement to ensure that the NMC requirements are met. Theory hours are monitored either by the university's electronic register or paper registers. Practice hours are recorded in the students' OARs and confirmed by the sign-off mentor (97, 109, 111, 114-115).</p> <p>Employers told us that students successfully completing the return to practice (nursing) programme are fit for practice and employment. The external examiner confirms that the programme meets NMC and academic requirements which is ratified at the assessment board. The programme leader confirms to the NMC that a student has met all the NMC and programme requirements (97, 109-111, 114, 126).</p> <p>The programme teams collect, analyse and collate feedback and data from the pre-registration nursing (adult) and return to practice (nursing) programmes to ensure the continued effectiveness of the approach to, and enhancement of, teaching strategies and learning opportunities. Derogations to assessment regulations are compliant with NMC requirements, detailed in programme specifications and programme handbooks and confirmed by programme teams (24, 32, 37-38, 96-97, 100, 131-134).</p> <p>We conclude from our findings that learning, teaching and assessment strategies in the pre-registration nursing (adult) programme and the return to practice (nursing) programme enable students to successfully meet the required programme learning outcomes, NMC standards and competencies.</p>
<p>Risk indicator 4.2.1 – documentary evidence to support students' achievement of all NMC practice learning outcomes, competencies and proficiencies at progression points and upon entry to the register and for all programmes that the NMC sets standards for</p>
<p>What we found before the event</p>
<p>Pre-registration nursing (adult)</p> <p>The pre-registration nursing (adult) programme assessment of practice documentation and OAR enables students to achieve NMC practice learning outcomes and competencies at progression points and for entry to the NMC register. In addition, the essential skills clusters which are assessed in practice placements, and the numerical/drug calculation which is assessed in the university are included in the assessment of practice documents (33, 39-40).</p> <p>Return to practice (nursing)</p> <p>There is a mandatory period of practice with a minimum number of clinical hours.</p>

Adjustments are made on an individual basis based on academic appraisal and the length of time the returner has had out of nursing practice (32, 124).

What we found at the event

Pre-registration nursing (adult)

Students experience a range of practice placements and practice learning opportunities to support the achievement of the NMC competencies and essential skills clusters. Students reported they receive information about their practice placements through the ARC placement system, which gives them information about the type of placement, their mentor and how to contact the ward. This is published two weeks before the placement starts and they are then responsible for contacting the placement to find out about their shifts. They told us that they receive a trust induction and orientation to the practice placement areas. Practice placements are generally well-prepared for students (104, 106-108, 113).

Mentors and students confirm their understanding of the practice assessment documentation that includes the OAR. They confirmed that effective support systems from link tutors, PEFs and education leads are available to them in practice settings (104, 106-108, 113).

We found clear evidence and understanding of the need for students to demonstrate competency at appropriate progression points. A traffic light system is used by either mentors or students to highlight areas for further development. We viewed a sample of OARs and records of essential skills cluster competencies completed by students and signed by mentors which confirmed the process. Mentors clearly described the process to follow if they have a concern regarding a student's ability to practise or their level of professionalism (104, 106-108, 113).

Return to practice (nursing)

An individualised practice experience programme is provided for students. The programme team informed us that the student's area of nursing practice is determined at the recruitment interview. This decision is made based on the student's past experience as a registered nurse. Students confirmed this, except for two, who requested a different nursing practice experience. They presented a strong case to the programme team who supported their request (97, 109, 111-112, 114-115).

The number of practice learning hours that must be completed during the programme is discussed with the student at the time of the recruitment interview. The programme team informed us that the number of hours a student must complete ranges between 150 to 450 hours, depending on the number of years that an applicant's NMC registration has lapsed and experience they had during the lapsed years. A formative interview between the student and sign-off mentor takes place after an initial 75 hours of practice learning and every 75 hours thereafter. The programme team informed us that the minimum number of practice learning hours that a student must complete before the first attempt at the summative assessment of practice is undertaken is 150 hours. Most of the former students we met had completed between 150 and 200 hours before the first summative assessment was undertaken and all these students

<p>were successful at the first attempt (97, 109, 111-112, 115).</p> <p>We found that the ongoing achievement record (OAR), which contains the assessment of practice documentation is clear and well-understood by students and sign-off mentors (109, 111-112, 114-115, 140).</p> <p>Students informed us that they feel confident and competent to practise and to return to the professional register on completion of the programme. This was confirmed by sign-off mentors, PEFs and service managers (109, 111-112, 114-115).</p> <p>We conclude from our findings that the pre-registration nursing (adult) programme and the return to practice (nursing) programme supports students' achievement of all learning outcomes and NMC competencies in both theory and practice at progression points and entry to the register. Mentors and employers describe students completing the programmes as fit for practice and purpose.</p>
<p>Outcome: Standard met</p>
<p>Comments:</p> <p>No further comments</p>
<p>Areas for future monitoring:</p> <p>None identified</p>

<p>Findings against key risks</p>
<p>Key risk 5 - Quality Assurance</p> <p>5.1 Programme providers' internal QA systems fail to provide assurance against NMC standards</p>
<p>Risk indicator 5.1.1 - student feedback and evaluation / programme evaluation and improvement systems address weakness and enhance delivery</p>
<p>What we found before the event</p>
<p>The Quality Assurance Agency (QAA) undertook a review to judge the quality of higher education provided at the university. The QAA review team concluded that the higher education provided meets UK expectations (9, 36).</p> <p>Pre-registration nursing (adult)</p> <p>Students provide evaluative data on their learning experiences at the end of a module as well as on completion of a placement (3, 33).</p>

Each cohort has a student representative who meets the programme team regularly to discuss any student issues and attends the programme committee. Feedback from these discussions and meetings is made available to the cohort through the VLE (3, 33).

The role and expectations of an external examiner are made explicit in the university regulations (55).

What we found at the event

The university has a comprehensive range of internal quality assurance systems in place. We found that evaluation processes are robust; students on both programmes confirmed informal feedback mechanisms and the completion of formal evaluations following theory modules and practice placements. Pre-registration nursing (adult) students on the undergraduate programme confirmed they complete an evaluation at the end of year one and year two of the programme and in year three they complete the national student survey (100, 104, 106-108, 113).

We sampled evaluations which were generally very positive and confirmed module and programme leaders collate the feedback and use this to enhance the delivery of the programmes, as appropriate. The programme teams and programme committees, which are held three times per academic year, monitor the equality of experience of students between the two delivery sites at both module and programme level. Programme committees include representatives from placement providers, experts by experience and students. They receive programme reports and generate and monitor action plans, as necessary (34-35, 56, 100, 131-135).

Students confirmed that they elect cohort representatives who feedback student issues to the programme leader and programme committees. Feedback on actions taken as a result of students' feedback and evaluations is posted on the VLE 'you said it, we did it' forum and from cohort representatives (100, 104, 106-108, 113).

Students on the return to practice (nursing) programme cited the increase in academic support for essay writing as an example of the responsiveness of the programme team to module evaluations (112, 115).

Pre-registration nursing (adult) students described enhancements which had been made to the teaching timetable following evaluations from previous cohorts (104, 106-108, 113).

We were told that the college is committed to an enhancement agenda and has recently introduced 'quality days' as a forum for professional disciplines to focus on a programme or a suite of programmes to share and disseminate best practice and enhancements (99-100).

We found the process to appoint an external examiner follows QAA requirements, internal QA processes and NMC requirements. External examiners engage with theory and practice elements at all academic levels of the programmes including meeting with students and mentors and monitoring OARs at each progression point. Annual external examiner reports for the pre-registration nursing (adult) and the return

<p>to practice (nursing) programmes are positive and the programme team clearly respond to feedback provided by the external examiners (55, 125-130). However, we suggest that the university considers reviewing the external examiner report template to make explicit that the assessment of practice is reviewed.</p> <p>We found evidence that the university ensures external examiners fulfil their role and responsibilities, and current NMC registration and due regard is confirmed on appointment. However, the university does not monitor the currency of external examiners' NMC registration and revalidation requirements during their tenure. This requires improvement.</p> <p>Senior staff in the department confirmed that updating the AEI requirements in the NMC portal is discussed at meetings held every three months between the head of department and discipline leads. Discussion includes information about policies and procedures which may require updating and the named person responsible for the upload (99-100).</p> <p>We confirm the AEI requirements are up to date and provide assurance of continuing AEI status. The university completes its annual self-report to the NMC in a timely manner and follows up and effectively concludes issues from previous monitoring reviews and annual self-reports (1-3).</p> <p>Our findings conclude that overall there are effective QA processes in place to manage risks, address areas for development and enhance the delivery of the pre-registration nursing (adult) programme and return to practice (nursing) programme. However, the university does not monitor the currency of external examiners' NMC registration and revalidation requirements during their tenure. This requires improvement.</p>
<p>Risk indicator 5.1.2 - concerns and complaints raised in practice learning settings are appropriately dealt with and communicated to relevant partners</p>
<p>What we found before the event</p>
<p>The university has comprehensive policies and procedures in place to enable students to raise complaints and concerns about practice learning. The complaints procedure is available in the handbooks provided to students and mentors and on the university website (30, 32, 37-38, 136).</p>
<p>What we found at the event</p>

Students told us that they are introduced to the process for raising concerns or complaints from the outset of the programme and that it is reiterated throughout the programme. We found that students, mentors, sign-off mentors, and PEFs are all familiar with the process for dealing with concerns and complaints raised in practice learning settings. They all reported an agreed process to report issues of concern or complaints in practice placement and had a clear appreciation of the need for a full and transparent investigation and follow through to a satisfactory completion (104, 106-115).

We were told that the formal complaints procedure has not been initiated by students studying the pre-registration nursing (adult) programme or return to practice (nursing) programme. Students, mentors and managers confirmed that concerns were raised with the link tutor or staff in the PLSU and responded to very quickly and resolved informally (104, 106-108, 113).

There is a 100 percent response rate to placement evaluations as students have to complete an evaluation before they see their next placement. Placement providers report receiving timely feedback from students' placement evaluations. Student feedback is collated then fed back to the PEF, link tutor and the service manager. Appropriate action is taken, where appropriate. Some placement providers request additional evaluation forms for students to complete which are NHS trust/placement specific. Evaluation data is provided to practice placement areas and the university (56, 100, 102, 107, 113, 135).

We conclude from our findings that concerns and complaints raised in the practice setting are responded to effectively and appropriately dealt with and communicated to relevant partners.

Outcome: Standard requires improvement

Comments:

The university confirms NMC registration and due regard on the appointment of external examiners. However, the university does not monitor the currency of external examiners' NMC registration and revalidation requirements during their tenure. This requires improvement.

Areas for future monitoring:

- The university should introduce a procedure to monitor the currency of external examiners' NMC registration and revalidation requirements.
- The university external examiner report template incorporates the review of assessment of practice.

Evidence / Reference Source

1. UoD NMC annual self-assessment programme monitoring report 2016-17, 25 November 2016
2. UoD NMC annual self-assessment programme monitoring report 2015-2016, 30 November 2015
3. UoD AEI requirements accessed 31 March 2017, 14 April 2017
4. CQC inspection report Ashgate House Care Home, Ashgate, 1 February 2017
5. CQC quality report Derbyshire Healthcare NHS Foundation Trust, Derby, 29 September 2016
6. CQC inspection report Morton Grange residential and nursing home, Alfreton, 3 February 2017
7. CQC quality report Oakhill Medical Practice, Dronfield, 24 February 2017
8. CQC quality report Royal Derby Hospital, Derby Teaching Hospitals NHS Foundation Trust, 3 February 2017
9. UoD QAA higher education review, July 2016
10. NMC approval report, registered nurse - adult (MSc), 14 June 2016
11. NMC approval report, registered nurse - adult, (BSc), 20 June 2012
12. UoD academic staff workload model, March 2006
13. UoD academic workload planning: guidelines for staff and managers, June 2016
14. UoD staff development and performance review cycle - online review toolkit, March 2007
15. UoD staff development workshops 2013-2015, undated
16. UoD staff development and performance review - revised guidance documents, October 2007
17. UoD college of health and social care: scholarship and research strategy, 12 October 2016
18. UoD development and performance review at Derby, January 2010
19. UoD department of nursing and health care practice: policy on supporting staff development activities, 28 April 2008
20. UoD scholarly activity for year undated
21. UoD research strategy 2020, 17 December 2014
22. UoD admissions policy 2016-17, August 2015
23. UoD flowchart for informing practice placement of a student who is under 18, undated
24. UoD the 3Rs (rights, responsibilities, and regulations) assessment regulations for undergraduate programmes, September 2016
25. UoD admission process, including pre-selection testing paper, shortlisting criteria, interviewer instructions, undated
26. UoD BSc (Hons) nursing (adult) pre-registration interview, undated
27. UoD BSc (Hons) nursing (adult) pre-registration admissions feedback, undated
28. UoD DBS flowchart pre-registration nursing programme, undated

29. UoD general regulations, professional conduct and professional suitability, undated
30. UoD raising concerns, undated
31. Placement partnership for PCPS incidents (including fitness to practise concerns), January 2012
32. UoD return to practice (nursing) programme handbook 2016 -17, undated
33. UoD BSc (Hons) nursing validation document, undated
34. UoD pre-registration nursing programme action plan 2016-17, undated
35. UoD annual monitoring action plan 2015-16, undated
36. Initial monitoring visit meeting, 7 March 2017
37. UoD BSc (Hons) nursing programme handbook 2016-17
38. UoD PgDip/MSc nursing (adult) with NMC registration programme handbook 2016-17
39. UoD BSc (Hons) nursing (adult) OARs, stage one, two and three, undated
40. UoD BSc (Hons) nursing (adult) and BSc (Hons) nursing (mental health) essential skills cluster; stage one, two and three, undated
41. UoD recognition of prior learning, September 2016
42. UoD application for academic credit; APL claim form, September 2006
43. UoD placement partnership group terms of reference, 12 November 2014
44. Derbyshire education health and social care network 2016 dates and venues, undated
45. UoD health and social care strategic education group, terms of reference, June 2014
46. Derbyshire nursing and midwifery review group meeting, 4 June 2014
47. Derbyshire health and social care education group minutes, 24 January 2017
48. UoD pre-registration nursing programme placement partnership meeting minutes, 14 July 2015
49. UoD educational audit tool and 20-month cycle for educational placement audits, 27 August 2014
50. UoD placement support procedures for practice lead, link tutor and educational audit process, 15 July 2014, October 2016
51. Service user and carer involvement in the PGDip/MSc nursing programme (adult and mental health), undated
52. UoD simulated practice framework and audit tool of simulated practice, 2012
53. UoD clinical skills suite portfolio of facilities, equipment and services, undated
54. UoD hub and spoke guidance document, 3 March 2012
55. UoD general regulations, section C, external examiners for taught programmes, September 2016
56. UoD placement evaluation process, and clinical placement evaluation form, 19 July 2013
57. UoD process for removal and re-approval of placement, November 2011
58. UoD educational audit process procedure individual audit and procedure for audit sharing between UoD and University of Nottingham, undated

59. Academic staff CVs, various dates
60. UoD NMC registrant tracker PIN and revalidation, undated
61. Academic staff engagement in professional development activities, sample of recent academic staff publications, various dates
62. NMC register accessed on 25 March 2017, 30 March 2017
63. UoD admission and selection process checklist return to practice (nursing), undated
64. UoD return to practice structured interview guide, undated
65. Equality and diversity database (academic staff and service users), undated
66. Foundation degree science, professional development health and social care (assistant practitioner) mapping to year one BSc (Hons) nursing programme, undated
67. Programme leader checklist to APL MSc nursing (theory and practice), undated
68. MSc nursing (adult and mental health) APL portfolio of entry practice hours template, undated
69. MSc nursing (adult) APL advanced standing examples, undated
70. MSc nursing (adult) APL portfolio of entry theory hours, undated
71. UoD BSc (Hons) nursing (adult) programme attrition audit and programme attrition from September 2012 cohort to present date, undated
72. UoD return to practice (nursing) attrition data September 2014 – June 2016, undated
73. BSc (Hons) nursing attrition action plan September 2015-2017, undated
74. Sample of DBS and health yearly declaration year one to two and year two to three, undated
75. Completions, progression and classification profiles assessment board minutes, 1 March 2017
76. Return to practice PCPS agreement, February 2017
77. UoD flowchart relating to student professional conduct and professional suitability, December 2015
78. PCPS cases, 2015-16 and 2016-17
79. Capacity planning grid, UoD and University of Nottingham, undated
80. UoD ARC practice placement settings, undated
81. Chesterfield Royal Hospital audit schedule NMC1, undated
82. PVI placements audit database, undated
83. NHS providers audit tracker, undated
84. Derby Hospital Foundation Trust mentor updates 2017, undated
85. Derbyshire combined mentor update, 2017-18
86. Pre-registration nursing mentor update presentation, 2017-18
87. Placement partnership agreement between the UoD, NHS trusts and other organisations, various dates
88. East Midlands HEE return to practice operations group nursing and allied health professions minutes of meetings, July 2016, September 2016, November 2016, January 2017, March 2017

89. *Experts by experience document, February 2012*
90. *UoD experts by experience training slides at creative carers, 24 February 2017*
91. *UoD expert by experience partnership group update, March 2017*
92. *UoD expert by experience forum terms of reference, February 2017*
93. *UoD PVI sector mentor list/register, March 2017*
94. *PVI sector mentor update, undated*
95. *UoD department of nursing and healthcare practice presentation, 30 March 2017*
96. *UoD meeting with pre-registration nursing (adult) programme team, 30 March 2017*
97. *UoD meeting with return to practice (nursing) programme team, 30 March 2017*
98. *UoD meeting with experts by experience, 30 March 2017*
99. *UoD meeting to discuss resources in the academic setting, 30 March 2017*
100. *UoD meeting to discuss quality assurance, 30 March 2017*
101. *UoD meeting with HEEM representative, 30 March 2017*
102. *UoD meeting to discuss partnerships and management of practice learning, 30 March 2017*
103. *UoD meeting to discuss fitness to practise processes, 30 March 2017*
104. *UoD meeting with pre-registration nursing (adult) students, 30 March 2017*
105. *UoD Chesterfield campus tour of clinical skills resources, 30 March 2017*
106. *Visit to Brimington Surgery, district nursing team, meeting with student, mentors, ward managers and PEF; review of educational audit, duty rosters and mentor database, 22 February 2017*
107. *Visit to Chesterfield Royal Hospital, surgical areas, HDU/ITU, meetings with students, mentors, ward managers and PEF; review of educational audit, duty rosters and mentor database, 30 March 2017*
108. *Visit to Stanley House Nursing Home meeting with adult nursing students, mentor, ward managers and PEF; review of educational audit, duty rosters and mentor database, 30 March 2017*
109. *Visit to Chesterfield Royal Hospital Ashover Ward, meeting with return to practice (nursing) student, sign-off mentor, ward manager and PEF; review duty roster and mentor database, 30 March 2017*
110. *Visit to Derbyshire Health Care Foundation Trust, Hartington unit, meeting with sign-off mentor, head of education and PEF, 30 March 2017*
111. *Visit to Overdale Medical Practice, Breaston meeting with return to practice (nursing) student and mentor/sign-off mentor; review of duty roster, 30 March 2017*
112. *Telephone calls with return to practice (nursing) students, mentors/sign-off mentors, 30 March 2017*
113. *Visit to Royal Derby Hospital, ward 307, surgical assessments unit, ward 209, gynaecology, ward 408 medicine: cardiology; meetings with adult nursing students, mentors, ward managers and PEF; review of duty rosters and mentor database, 31 March 2017*
114. *Visit to Ilkeston Community Hospital, meeting with former return to practice (nursing) student and PEF, 31 March 2017*

115. UoD Derby campus meeting with former return to practice (nursing) students, 31 March 2017
116. UoD meeting to discuss admission processes and APL, 31 March 2017
117. Evidence of teaching sessions to meet EU requirements BSc (Hons) nursing, simulated practice service user experiences timetable, undated
118. Simulation timetable for September 2016 cohort, undated
119. UoD care across the lifespan in adult nursing module timetable, undated
120. UoD public health timetable, March 2015
121. UoD foundations of nursing, September 2016 cohort timetable, undated
122. MSc nursing simulation weeks with service user input, September 2016 cohort
123. Interprofessional learning year one conference, invitation letter, 5 May 2016
124. Return to practice (nursing) module handbook, 2016-17
125. UoD external examiner/moderator nomination form x3, various dates
126. UoD external examiner report, return to practice (nursing), September 2015 (evidence to confirm parity between the different sites)
127. UoD BSc (Hons) adult nursing external examiner (programme examiner) report, 2015-16 and programme leader response letter, October 2016
128. UoD BSc (Hons) adult nursing external examiner (subject examiner) report, 2015-16, and programme leader response letter, October 2016
129. Pre-registration nursing assessment board (module/profile) minutes, 18 August 2015
130. Pre-registration nursing assessment board (module/profile) minutes, August 2016
131. Module evaluations June 2016, May 2016, July 2016, December 2016, January 2017
132. Placement evaluations, various dates
133. Programme action plan, return to practice (nursing), 2016-17
134. Programme action plan, pre-registration nursing, 2016-17
135. UoD BSc (Hons) nursing (adult and mental health) programme committee minutes; 13 April 2016, 20 July 2016, 5 October 2016
136. UoD 3Rs for students on taught programmes, appendix one: complaints procedure, September 2016
137. UoD return to practice (nursing) interviews in academic year 2016-2017, undated
138. UoD record of visits by academic staff to Chesterfield Royal Hospital, undated
139. UoD return to practice (nursing) timetables x4, undated
140. UoD return to practice programme (nursing), OAR assessment of practice documentation, undated
141. Chesterfield Royal Hospital clinical placement visit diary (walk around meetings), undated

Personnel supporting programme monitoring
Prior to monitoring event
Date of initial visit: 07 Mar 2017
Meetings with:
<p>UoD college of health and social care, department of health care practice: Head of department Two programme leaders: BSc nursing (adult) programme Assistant programme leader and practice lead Programme leader return to practice (nursing) programme Deputy administration office (college services) Derby Teaching Hospital NHS Foundation Trust: Practice learning support manager</p>
At monitoring event
Meetings with:
<p>Head of department Discipline lead post registration health care practice/CPD Programme leader, return to practice (nursing) programme. Programme team: return to practice (nursing) x4 lecturers Subject librarian for college of health and social care, UoD Discipline lead pre-registration healthcare, Chesterfield campus Discipline lead head of pre-qualifying programmes, Derby campus BSc nursing (adult) programme leader MSc/PgD nursing programme leader 10 x adult nursing lecturers Senior lecturer nursing/PVI placement lead Senior lecturer nursing, college inter-professional learning lead Senior lecturer, assistant programme lead/practice lead Senior lecturer, assistant programme lead Senior lecturer, community placement lead Senior admissions administrator x2 Senior lecturer and admissions tutor UoD college of health and social care: quality enhancement lead</p>

UoD head of student services
Admission/ APEL coordinator
Representative practice learning team, Derbyshire healthcare NHS Trust
Head of education, Derbyshire Healthcare Trust
Practice learning facilitator, Chesterfield Royal Hospital
Practice learning lead, Derbyshire Community Health Services
Practice learning manager, Derby Teaching Hospitals

Meetings with:

Mentors / sign-off mentors	13
Practice teachers	1
Service users / Carers (in university)	3
Service users / Carers (in practice)	3
Practice Education Facilitator	11
Director / manager nursing	3
Director / manager midwifery	
Education commissioners or equivalent	1
Designated Medical Practitioners	
Other:	9 3 x former return to practice nursing students 4 x ward managers/matrons 1 x database manager 1 x PLSU manager

Meetings with students:

Student Type	Number met
Registered Nurse - Adult	Year 1: 10 Year 2: 4 Year 3: 6 Year 4: 0
Return to Practice Nursing	Year 1: 7 Year 2: 0 Year 3: 0 Year 4: 0

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