

2016-17

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

Programme provider	Liverpool John Moores University
Programmes monitored	Registered Nurse - Adult; Return to Practice Nursing
Date of monitoring event	28-29 Mar 2017
Managing Reviewer	Bernie Wallis
Lay Reviewer	Sophia Hunt
Registrant Reviewer(s)	Jill Foley, Diana De
Placement partner visits undertaken during the review	<p>Pre-registration nursing (adult)</p> <p>Bridgewater Community Healthcare NHS Foundation Trust, district nursing team</p> <p>Bridgewater Community Healthcare NHS Foundation Trust, heart failure team, Fingerpost Park Health Centre</p> <p>St Helens and Knowsley Teaching Hospitals NHS Trust, Whiston Hospital, ward 3E gynaecology surgery</p> <p>Liverpool Community Health NHS Trust, community nursing mobile team (treatment rooms), Riverside Centre for Health</p> <p>Community Integrated Care Ltd, St Patricks Care Home</p> <p>Royal Liverpool and Broadgreen University Hospital NHS Trust; The Royal Liverpool University Hospital, high dependency unit, ward 9</p> <p>Return to practice (nursing)</p> <p>St Helens and Knowsley Teaching Hospitals NHS Trust, Whiston Hospital, paediatric ward 4F, medical ward 2A</p> <p>Royal Liverpool and Broadgreen University Hospital NHS Trust, Broadgreen Hospital, surgical ward 2; The Royal Liverpool University Hospital, medical ward 2B</p> <p>Mersey Care NHS Trust, criminal justice liaison diversion team; Rathbone Hospital, Childwall ward</p>
Date of Report	10 Apr 2017

Introduction to NMC QA framework

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 Liverpool John Moores University's programmes

The school of nursing and allied health (the school), Liverpool John Moores University (LJMU) (the university) is part of the faculty of education, health and community. The school has a substantial range of NMC approved pre-registration and post-registration nursing and midwifery programmes.

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

The BSc (Hons) pre-registration nursing programme (adult, mental health and child) was approved on 21 July 2011 and granted an extension to the approval by the NMC until 31 August 2019. A major modification to the programme was approved on 1 June 2016 necessitated by changes to the university's academic framework. The programme has two intakes a year of approximately 300 students annually (1, 3).

The return to practice (nursing) programme is offered at academic level six and was approved on 30 September 2011. An extension to the approval was granted by the NMC until 30 September 2017. A major modification was approved 12 July 2016 due to changes to the university's academic framework. The programme has two intakes per year; a total of 21 students in 2015-16 and 16 students in 2016-17 (2, 4-5).

Both programmes are currently commissioned by Health Education North West (HENW). The university shares placements with three other universities; University of Chester, University of Liverpool and Edge Hill University.

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

The outcome of Care Quality Commission (CQC) reports has influenced the selection of practice placements for the monitoring visit. Consideration was given to the student experience in the placements in Bridgewater Community Healthcare NHS Foundation Trust, district nursing team and heart failure team and Liverpool Community Health NHS Trust, community nursing mobile team.

Summary of public protection context and findings

Our findings conclude that the resources, admissions and progression, and practice learning key risk themes require improvement to strengthen the risk control measures.

The resources key risk requires improvement in relation to the allocation of sign-off mentors to students on the return to practice (nursing) programme.

The admissions and progression key risk requires improvement in relation to the recording and monitoring of equality and diversity training completed by practitioners and service users involved in student selection processes.

The practice learning key risk requires improvement in relation to: the timely escalation to the NMC of risks to student learning; the involvement of service users

and carers throughout the programmes; and, the engagement of academic staff in practice learning through the link lecturer role.

Resources: requires improvement

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.

There is sufficient placement capacity and appropriately prepared mentors and sign-off mentors to support the number of students studying the programmes. We found several students on the return to practice (nursing) programme had been inappropriately allocated to sign-off mentors that were not up to date. The university had subsequently put in place appropriate risk control measures; however, the overall process requires improvement to strengthen the risk control.

Admissions and progression: requires improvement

We found the admissions and selection processes meet NMC requirements. However, the university does not monitor and effectively record equality and diversity training completed by practitioners and service users prior to engaging with student selection interviews. This requires improvement to strengthen the risk control

We conclude that disclosure and barring service (DBS) and health checks are completed before students can proceed onto placement and confirmation is provided to practice placement providers. These compulsory procedures are undertaken to assure public protection.

Our findings confirm that the university has effective systems in place for the management of poor performance of students in theory and practice. Practice placement providers have a clear understanding of and confidence to initiate university procedures to address students' poor performance in practice and ensure public protection.

We found the university has robust processes in place for the accreditation of prior learning/accreditation of prior experiential learning (APL/AP(E)L).

Practice learning: requires improvement

Our findings confirm the partnerships between the university and practice placement providers at all levels are robust and effective, including partnerships with other universities that share the same placements.

We found evidence of practitioner involvement in the programme, however there is limited evidence of service users and carers involvement' and this requires improvement.

We are assured that risks to students' learning are escalated and managed through local partnerships and reported to HENW. However, these risks have not been exceptionally reported to the NMC in a timely manner, in accordance with the Quality Assurance framework part four (NMC, 2016). This requires improvement.

We found some evidence of academic staff engagement with students' practice learning through link lecturer activity, however this varied significantly from no activity to regular engagement in some placement areas. This requires improvement.

Our findings confirm mentors/sign-off mentors are appropriately prepared for their role in assessing students in practice and are updated annually to meet the requirements of triennial review.

We found mentor records are accurate and up to date.

Fitness for practice: met

We found 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 confirm that students completing the programmes are fit for practice and purpose.

Quality assurance: met

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

We found that the university and their practice placement providers work closely together to respond effectively to concerns and complaints raised in practice settings. Placement providers receive feedback from students' evaluations enabling them to initiate developments to improve both service user and student experiences.

Summary of areas that require improvement

The following areas require improvement:

- The process of allocating return to practice (nursing) students to sign-off mentors should be reviewed to strengthen the risk control and to ensure public protection.
- A process of monitoring and recording the completion of equality and diversity training by practitioners and service users should be implemented to ensure that all interview selection panel members are appropriately prepared and the risk control is strengthened.
- The university should review their decision-making criteria and escalation process to 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 current service user/carer strategy should be reviewed to ensure there is a comprehensive and systematic implementation plan of service user/carer involvement in all aspects of the programmes.

- The engagement and visibility of link lecturers requires strengthening and monitoring to ensure all students and mentors have equitable access to this academic support in the practice setting.

Summary of areas for future monitoring

- Monitoring and recording of practitioner and service user/carer participation in pre-interview training, including equality and diversity training.
- Timely exceptional reporting to the NMC.
- Service user and carer involvement in the management and delivery of the programmes.
- Consistency of link lecturer activity across the practice placements.
- The effectiveness of the process of allocating active sign-off mentors to return to practice (nursing) students.
- Return to practice (nursing) content/exemplars in mentorship preparation training and annual update.
- The level of student engagement with the evaluation processes in the programme.
- Annual engagement of the external examiner with students and mentors in the return to practice (nursing) programme.

Summary of notable practice

Resources

None identified

Admissions and Progression

None identified

Practice Learning

None identified

Fitness for Practice

None identified

Quality Assurance

None identified

Summary of feedback from groups involved in the review

Academic team

The programme teams demonstrate a committed, enthusiastic and student centred approach to delivery of the programmes and to the development of confident and competent practitioners. They also articulated a commitment to personal and professional development and programme enhancement.

The academic teams told us that there are effective systems and partnership working in place to support students' learning in both theory and practice settings, to ensure that the relevant NMC programme requirements are met.

The individual needs of return to practice (nursing) students are clearly considered by the team who work closely with practice placement providers to deliver an individualised programme of practice learning.

The pre-registration nursing (adult) programme team told us they encourage students to take responsibility for their learning in practice and during taught elements of the programme.

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

Mentors/sign-off mentors, managers and practice education facilitators (PEFs) demonstrate a commitment to students' learning and are enthusiastic about their role and the learning opportunities for students in their area of practice.

Mentors and managers told us that the PEF and link lecturer would support them if they raised a concern regarding a student's progress or behaviour. Senior health service managers reported confidence in and experience with students who raised concerns about care. They told us that placement and mentor capacity is a challenge and gave examples of how they work effectively with the university in meeting this challenge.

We were told about the regular partnership meetings with the university at all levels, and joint collaborative working including working with other universities to manage any risks to practice learning. Employers and mentors provided examples of their involvement in various aspects of the programmes. The education commissioner described the university as having a real commitment to partnership working to ensure the education provision is the best it can be.

Employers, mentors/sign-off mentors told us that the programmes suitably prepare students for admission/re-admission to the NMC register. Employers and commissioners report that the students are of a very strong calibre. They find they are fit for practice and employment on successful completion of these programmes.

Students

The students told us that their programme effectively develops and supports their progression towards registration/re-registration and employment. They are given feedback on their academic work and support is provided to improve their performance both academically and in practice placements. They report having good relationships with lecturers and are aware of the personal tutor support and online/virtual resources available to supplement their learning. Students report that they are prepared for practice by the academic team prior to proceeding to their placement allocations.

Pre-registration nursing (adult)

The students told us that the programme promotes the key values of nursing, including dignity, compassion and respect. These values are well embedded within the programme and are taken with them into the practice learning environments. Students report that their academic tutors are supportive and they have good relationships with their personal tutors. The students are positive about the range of practice placement experiences and the hub and spoke approach. Some students told us that receiving visits from link lecturers varied.

Return to practice (nursing)

Return to practice students told us that engaging in clinical skills practice prior to undertaking practice placement helped rebuild their confidence and competence. They told us that the programme would be enhanced by increasing the opportunities for skills rehearsal.

Service users and carers

The three service users we met in the practice setting were very positive about the care they received from students and could give examples of their compassion and commitment to providing a high standard of care.

The service users/carers who are contracted by the university to co-ordinate engagement and involvement told us that there had been a marked reduction in the requests for service user involvement in the programmes over the last year, which may have aligned with a period of contractual renegotiation. When involved in the programmes the service user/carer groups experiences are positive, and they highlight the mutual benefits of being involved in enhancing the student learning experience. The lecturers provide clear instructions and good communication regarding the requirements and provide feedback following engagement, which is appreciated and valued by service users.

The service user/carer representatives told us that the university does not have a clear strategy for meaningful engagement of service users and carers throughout the programme cycle.

Relevant issues from external quality assurance reports

The following CQC reports which required action were considered for practice placements used by the university for pre-registration nursing (adult) and return to practice (nursing) students. These reports provided the review team with context and background to inform the monitoring review.

Bridgewater Community Healthcare NHS Foundation Trust had an announced inspection from 31 May to 3 June 2016 and an unannounced inspection on 16 June 2016. The report was published on 6 February 2017 and the organisation received an overall rating of requires improvement (6).

Action by the university:

A joint action plan was initiated following liaison with the NHS trust. Students remain

in placements and a medicine management policy is now in place. Monitoring of the student experience and evaluations is ongoing (16, 92).

Liverpool Community NHS Trust had an announced inspection from 2 to 4 February 2016 and an unannounced visit on 11 February 2016. The report was published on 8 July 2016. No ratings were given. Some legal requirements were not met (7).

Action by the university:

A joint action plan was initiated following liaison with the NHS trust. Students' evaluations were reviewed and were positive about practice learning. Students continue to have placements within the trust. Quality assurance monitoring of the student experience and practice learning environments continues (16, 92).

Wirral University Teaching Hospital NHS Foundation Trust (which incorporates Arrowe Park Hospital and Clatterbridge Hospital) was inspected from 15 to 18 September 2015 with an unannounced visit on 24 September 2015. The report was published on 10 March 2016. There were no ratings and requirement notices were given (8).

Action by the university:

Conjoint monitoring of the practice learning environments and student experience in this NHS trust is by an active educational governance group incorporating all universities using the placement areas. The LJMU link lecturer visits regularly and student evaluations are very positive about their learning experiences from Arrowe Park and Clatterbridge hospitals. There is ongoing close liaison between the university and trust PEFs (16, 92).

Avondale mental health centre was inspected on 23 and 29 March 2016 and the report was published on 13 May 2016. The organisation received an overall rating of requires improvement (9).

Action by the university:

This placement area was removed from the placement circuit to allow the staff to focus on the CQC action plan. There was a CQC inspection on 11 March 2017 with an overall rating of good. Once the centre is ready to resume as a student placement provider, an educational audit will be undertaken. The link lecturer will monitor the student experience (16, 92).

Dovehaven Home had an unannounced inspection on 19 July 2016 and the report was published on 21 September 2016. The organisation received an overall rating of requires improvement (10).

Action by the university:

An action plan was put in place and involved the link lecturer working closely with the care home staff and supporting students who remained on the placement. The action plan was reviewed in November 2016 to inform ongoing allocation of students. Student evaluations are very positive about practice learning. A further CQC inspection reported improvements in January 2017. The number and diversity of LJMU students allocated to this placement has now been reduced at the request of the care home (16, 92).

Finch Manor nursing home had an unannounced inspection on 3 November 2016 and the report was published on 24 January 2017. The organisation received an overall rating of requires improvement. Action was required (11).

Action by the university:

LJMU removed this placement on 29 November 2016 at the request of the home (92).

Hoylake Cottage had an inspection on 6-7 December 2016 and the report was published on 6 January 2017. The organisation received an overall rating of requires improvement. Action was required (12).

Action by the university:

An action plan was implemented. Students continue to be allocated to the area with monitoring of the student experience and learning environment by the link lecturer. Students' evaluations over the past 12 months have been positive (16, 92).

Ormskirk District General Hospital had an inspection on 12-14 April 2016 and Southport and Formby District General Hospital had an inspection on 12-15 April 2016. Southport and Ormskirk Hospital NHS Trust was also inspected on 12-15 April 2016 and the reports were all published on 15 November 2016. These organisations all received an overall outcome of requires improvement (13).

Action by the university:

This NHS trust is used for midwifery student placements only. A conjoint action plan was implemented with the NHS trust to provide support to midwifery students who continue to be allocated and to ensure ongoing monitoring of their experience (16, 92).

Red Rocks nursing home had an inspection on 23-24 March 2016 and the report was published on 30 June 2016. The organisation received an overall rating of requires improvement (14).

Action by the university:

This nursing home area has been removed as a student placement at the request of the home. Prior to re-joining the placement circuit, the home will be subject to an educational audit (16, 92).

St Joseph's Hospice was inspected on 25-26 October 2016 and the report was published on 1 December 2016. The organisation received an overall outcome of requires improvement (17).

Action by the university:

The hospice is used as a placement for first year pre-registration nursing students. An assessment of risk and action plan was implemented to provide monitoring and ongoing support. Students continue to be placed at the hospice and their evaluations are positive. The action plan has now been completed (16, 92).

One to One Midwives (North West)

A follow up CQC inspection was carried out in 2015 following concerns raised regarding the services provided (15).

<p>Action by the university:</p> <p>This practice placement provider had been used as an elective one-week placement for midwifery students. It has been removed from the placement circuit since 9 August 2015 (15).</p> <p>What we found at the monitoring visit:</p> <p>We found the university works in close partnership with practice placement providers to monitor the outcomes of external monitoring reports. There is open communication between the directors of nursing and senior staff of the school in response to any issues or concerns to manage and control risks (42, 92-98). However, we found no evidence of exceptional reporting to the NMC within the last two years in accordance with part four of the Quality Assurance framework (NMC, 2016).</p>
<p>Follow up on recommendations from approval events within the last year</p>
<p>BSc (Hons) pre-registration nursing major modification approved 1 June 2016</p> <p>Identified the following for future monitoring:</p> <ul style="list-style-type: none"> • Ensure sufficient placement and mentor capacity to meet the requirements of the number of students enrolled on the programme (3). <p>(see section 1.2.1)</p>
<p>Specific issues to follow up from self-report</p>
<p>None identified</p>

<p>Findings against key risks</p>
<p>Key risk 1 – Resources</p> <p>1.1 Programme providers have inadequate resources to deliver approved programmes to the standards required by the NMC</p> <p>1.2 Inadequate resources available in practice settings to enable students to achieve learning outcomes required for NMC registration or annotation</p>
<p>Risk indicator 1.1.1 - registrant teachers have experience / qualifications commensurate with role in delivering approved programmes.</p>
<p>What we found before the event</p>

<p>All newly appointed academic staff are required to complete the university postgraduate certificate in learning and teaching which incorporates the NMC teacher requirements. Revalidation is supported through the personal development and performance review (PDPR) process and staff scheduled to revalidate have been successful to date (23-24, 28).</p> <p>There is a statement of compliance confirming sufficiency of resources in theory and practice for the pre-registration nursing programme which includes details of the return to practice (nursing) programme (56).</p>
<p>What we found at the event</p>
<p>We found the university effectively monitors that all registrant academic staff hold and maintain current registration and are proactive in ensuring that they are actively preparing for revalidation with the NMC (22-23, 28).</p> <p>We confirmed that programme leaders have a teacher qualification and due regard. Those supporting the programmes possess current NMC registration, hold qualifications and experience commensurate with their role and most have a recorded teaching qualification. Teachers supporting the application of theory to practice have due regard. There is a small number of students accessing the return to practice (nursing) programme from the mental health and child field of practice and they have access to a lecturer with due regard in the programme team to provide them with any learning needs or resources (21-22, 24, 86-87).</p> <p>Senior managers and teaching staff confirm protected time is allocated for continuing professional development and staff are engaging in appropriate and relevant professional development opportunities (21, 24-26, 86-87, 93).</p> <p>The university workload allocation model includes a 20 percent time allocation for all nursing academic staff to engage with practice activities. There is a clear role descriptor for the link lecturer. Senior managers confirmed they have been increasing the academic staff resource to strengthen the staff/student ratio (26-27, 85-87, 93).</p> <p>We conclude from our findings that the university has adequate resources to deliver the pre-registration nursing (adult) and return to practice (nursing) programmes to meet NMC standards.</p>
<p>Risk indicator 1.2.1 - sufficient appropriately qualified mentors / sign-off mentors / practice teachers available to support numbers of students allocated to placement at all times</p>
<p>What we found before the event</p>
<p>Placement and mentor/sign-off mentor capacity is managed through a joint AEI and HENW strategic group which also considers the impact of any service re-configurations. Profile details of each placement and the number of mentors are held</p>

on a shared placement learning support system (PLSS) database. The educational audit process and action plans, where appropriate, ensure that the university has sufficient mentors/sign-off mentors. The practice learning support unit (PLSU) team is based in the university and allocates students to placements in collaboration with practice placement providers (5, 49, 67, 81).

What we found at the event

PEFs maintain the local live databases for mentors and educational audits. Changes to placement and mentor capacity within a placement area is monitored at the educational audit stage. The educational link nurse in each placement area allocates students to mentors. The PEFs work closely with educational link nurses, the university practice lead and PLSU team to monitor and ensure appropriate allocation of students to mentors/sign-off mentors (49, 86-87, 89-90, 101-108, 111).

The PLSU team told us that students are supported in practice placements by qualified mentors, and experienced sign-off mentors with due regard. This was evident in the student allocation system we viewed. Students and mentors/sign-off mentors we met also confirmed this (88-90, 99, 101-112).

Senior health service managers and the university confirm that placement and mentor/sign-off mentor capacity is managed collaboratively and monitored strategically through regular meetings which includes the other AEs who share the same placements. We were told by senior health service managers that the university has responded positively to requests to provide more mentor preparation programmes and annual updates to maintain capacity and to meet the challenges presented by staff changes and service reconfiguration (93, 95-96, 98).

Pre-registration nursing (adult)

Students and mentors report that the hub and spoke placement model is effective in facilitating student learning in practice and achievement of competence. However, some students report that the sequencing of spoke placements can on occasion result in consecutive allocations that limit the opportunities for practical skills development. A strength of the programme is identified as the range and number of community based placements students undertake as part of the hub and spoke approach (50, 66, 90, 107-111).

The mentor register and placement duty rotas confirm the appropriate allocation of students and mentors. Managers and mentors told us that there are sufficient mentors available to accommodate students in their area. They also report that adjustments are made to the educational audit student numbers to ensure mentor availability (107-111).

Mentors told us that they work with and support students 40 percent of the time, including sign-off mentors in the final placement. Reports from students we spoke to and a review of the mentor register and placement duty rotas confirms the 40 percent requirement is met (67, 90, 107-108, 110-111).

Students in the second and third year of the programme told us that during their final

placement they would be allocated a sign-off mentor and understood the significance and importance of this role to their progression on to the nursing register to ensure that the public are protected (89-90, 107-108, 111).

Return to practice (nursing)

The academic staff, mentors and managers told us there are sufficient mentors available to support child and mental health students (87, 101, 105).

We found historical evidence through the PLSS that a number of return to practice (nursing) students had been inappropriately allocated to sign-off mentors who were not up to date on the mentor register. This concern had been raised by one of the students and we were shown evidence that this had been promptly and decisively acted upon by the university at the time. However; the overall process should be reviewed to strengthen the risk control and prevent further occurrences to ensure public protection. This requires improvement. (88, 99, 101-102, 115, 122).

We conclude from our findings that there are sufficient appropriately qualified mentors and sign-off mentors to support the number of students studying the pre-registration nursing (adult) programme. However, the risk control measures used to ensure that return to practice (nursing) students are appropriately allocated to sign-off mentors should be strengthened to ensure that students have access to appropriate support to enable them to safely achieve the practice learning outcomes required for re-admission to the NMC register.

Outcome: Standard requires improvement

Comments:

We found that a number of return to practice (nursing) students had been inappropriately allocated to sign-off mentors who were not up to date on the mentor register. The team had put in place appropriate risk control measures however; the overall process should be reviewed to strengthen the risk control and prevent further occurrences to ensure public protection.

Areas for future monitoring:

- The effectiveness of the process of allocating up to date sign-off mentors to return to practice (nursing) students.

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

<p>Risk indicator 2.1.1- selection and admission processes follow NMC requirements</p>
<p>What we found before the event</p>
<p>The university has an admission policy, an admissions code of practice (2015), an under 18 years of age admissions policy and an equality and diversity policy. Students and service users are involved in the student selection process as well as practitioners. The selection interview includes a focus on value based care. Changes have been made to service user focused questions following service user feedback (30, 32, 74, 76).</p> <p>DBS and health checks are undertaken as part of the admission and selection process. Declared convictions are considered by the criminal conviction panel in relation to the applicant's suitability to continue through the admissions process. The panel includes representative from practice placement providers (29, 69).</p> <p>The disability policy for students details the support available including learning support services and a dyslexia guidance for practice staff. Reasonable adjustment guidance for the assessment of theory and practice are detailed in the student documentation (4, 34-36).</p>
<p>What we found at the event</p>
<p>The admissions and selection process is fair, robust and effectively implemented (30, 86-87, 92).</p> <p>The university provides equality and diversity training for academic staff. Pre-selection interview training is provided for practitioner, student and service user panel members which includes an emphasis on equality and diversity as well as understanding the ethos of values-based recruitment to protect the public. Students and practitioners we met who had been involved in selection interviews confirmed they had attended this training (32, 86, 90-91, 110, 125). However, the university was not able to show evidence that they monitored and recorded practitioners and service users' completion of equality and diversity training prior to their involvement in student selection interviews. This requires improvement.</p> <p>The university has a clear process for ensuring that each student undertakes a DBS check and occupational health clearance as part of the selection process and before proceeding to their first placement, to assure the suitability of students to be in clinical areas and to protect the public (29, 85, 118). This was confirmed by students, and practice placement providers report that confirmation of these checks are available to them (95-96, 98).</p> <p>Pre-registration nursing (adult)</p> <p>We saw evidence that service users and carers are involved in selection interviews (91-92, 123). Students and practitioners who had participated in selection interviews confirm the use of a scenario and values based approach (85, 89-92, 101, 108-111,</p>

123-124).

Return to practice (nursing)

The lapsed registration status and history of any convictions of return to practice (nursing) applicants is checked via the statement of entry letter (issued by the NMC) and further verified by the programme lead through the NMC's online employer confirmation service. The programme team, PEFs, and students we spoke to confirmed that the university completes this checking process (87-88, 101-102, 104-105).

There is no evidence that service user and carer perspectives have been considered in the admissions and selection process for the return to practice (nursing) programme, however we saw evidence that this is included in future selection events (87, 91).

Our findings conclude that the admissions and selection processes meet NMC requirements. However, the university does not monitor and effectively record equality and diversity training, completed by practitioners and service users prior to engaging with student selection interviews. This requires improvement.

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

What we found before the event

The university has academic misconduct, fitness to practise, safeguarding and criminal convictions policies and guidance. In the case of academic misconduct, a student can be referred to fitness to practise. The outcome of academic misconduct processes is considered at boards of examiners (29, 37, 39-41, 71).

The university fitness to practise policy clearly states students' fitness to practise will be assessed throughout the duration of their programme and any concerns raised will be investigated. Guidance notes are available to students. There is a faculty fitness to practise panel which meets NMC requirements and considers professional behaviour, health matters or criminal offences and includes practice placement provider representation (37).

Retention and attrition in the programmes is reported in the annual monitoring review report (AMR) for each programme and is also considered at the programme board of studies which are attended by practitioner and student representatives (73-74, 77-78).

Pre-registration nursing (adult)

Progression requirements and reassessment opportunities in theory and practice and the 12-week rule are applied at boards of examiners where students are required to step off the programme, if necessary. This information is also specified in the programme guide for students. Academic misconduct is also specified in the programme guide and monitored at progression points. Monitoring of health and good character declarations and programme hours requirements are evident with the

proceedings of boards of examiners. Students are not considered for progression or completion if any are outstanding (39, 64, 72).

There were 17 fitness to practise cases considered since April 2015 of which 15 cases have been concluded to date. Six cases were not referred to a fitness to practise panel hearing. Nine cases considered at a panel hearing had the following outcomes: six students were discontinued from the programme; two students had to complete action plans; and, one student proceeded on the programme with no actions. The cases ranged from irregularities in practice assessment documentation, professional behaviour, competence and safety. Found cases of academic misconduct can also be referred to fitness to practise. There have been 15 cases of academic misconduct since November 2015 for plagiarism of which 11 cases were found, none of which were referred to the fitness to practise process (20, 38).

Return to practice (nursing)

One fitness to practise case was considered for professional behaviour in October 2015 which was investigated and did not proceed to a panel hearing (38).

What we found at the event

The university has comprehensive systems in place for monitoring poor performance and the professional suitability of students. Personal tutors meet regularly with students and monitor progression and achievement in academic and practice settings (86-87, 92).

The university has a robust fitness to practise policy and procedure that is effectively communicated to all stakeholders. Feedback is given to practitioners and managers on individual cases as appropriate. The university provides annual feedback on lessons learnt to Cheshire and Merseyside practice education partnership (CMPEP) and at education link nurse days in local trusts. Key themes are shared with academic teams and in the mentor preparation programme. Students, mentors, PEFs, service managers and academic staff we spoke to were all able to describe the process for raising and escalating concerns regarding a student's fitness for practice (20, 87, 89-90, 101-102, 107-112).

Students confirm that they are required to make declarations of health and good character annually, in line with each progression point and prior to completion of the programme. The end of programme completion process is robust and compliant with NMC requirements to ensure that accurate information is provided to facilitate the admission/re-admission to the NMC register (54, 87-90, 114, 118). Directors of nursing told us of their involvement in cases of unclear DBS and health concerns and that lessons learnt are disseminated at partnership meetings (95-96, 98).

Retention and progression data is reported monthly and detailed in programme annual reports. We were told by the commissioner that the attrition rates for these programmes are improving. Retention for the return to practice programme in 2015-16 was 85.71 percent; the reasons were academic failure and personal circumstances. The retention rate for the pre-registration nursing programme is currently 93.4 percent within the norm for rates in the north west region (5, 82, 93,

<p>97).</p> <p>The academic staff address issues of poor performance in the theoretical components of the programme and provide support to students to improve. Students told us that they are given timely feedback from the programme team and that this feedback, whilst varying in depth, generally enables them to improve their performance academically (88-90).</p> <p>The pre-registration nursing (adult) students are aware of the 12-week progression rule. Students told us they have an opportunity to retrieve learning outcomes in theory and practice and this is built into the programme structure (86, 90, 117).</p> <p>Mentors confirm support is available through the PEFs and link lecturer if they have concerns about a student (101-112).</p> <p>We conclude the university has effective systems in place to protect the public from harm caused by the poor performance of students in both practical and academic elements of the programmes.</p>
<p>Risk indicator 2.1.3 - programme providers' procedures are implemented by practice placement providers in addressing issues of poor performance in practice</p>
<p>What we found before the event</p>
<p>Students are informed of the requirement for professional behaviour and attendance in theory and practice (64-67).</p> <p>Where a student has failed the programme they are withdrawn from practice (71-72).</p>
<p>What we found at the event</p>
<p>The university is committed to working collaboratively with HENW and the practice placement providers to ensure that student support is provided to address issues of poor performance in practice (89, 93, 97, 101-102, 112).</p> <p>Senior health service managers, managers, PEFs and mentors told us link lecturers are responsive to and provide effective support if they have concerns regarding a student. The mentors we met are confident that they are sufficiently well informed to act upon any concern that they have regarding a student's performance or fitness to practise (95-96, 98, 101-102, 107-112).</p> <p>Practice placement providers have clear guidance from the university regarding the process for raising and escalating concerns relating to a students' behaviour or performance. Mentors and practice placement managers are aware of how to contact the link lecturer and this was further evident through posters visible within the staff only areas of clinical practice environments we visited (101-102, 112).</p> <p>Mentors, managers and PEFs identify a supportive approach to help students to progress through the use of action planning. Students also told us about the use of</p>

<p>action plans in their practice assessment documents to support retrieval of competence if they are failing to progress (89-90, 101-112).</p> <p>Return to practice (nursing) students' progress in practice is monitored at tripartite meetings with the link lecturer and mentor and an individual development plan is recorded in the student's summative practice assessment and review (PAR)/ongoing achievement record (OAR). This is supplemented by targeted support activities where responsibilities for achieving learning can be clearly set out. None of the PAR documents we viewed required this type of intervention. However, students were aware of involving the PEF in learning opportunities with their mentors when necessary (64, 101-102, 105, 118, 122).</p> <p>We conclude that practice placement providers have a good understanding of, and implement, university procedures to address issues of poor performance of students in practice to ensure protection of the public.</p>
<p>Risk indicator 2.1.4 - systems for the accreditation of prior learning and achievement are robust and supported by verifiable evidence, mapped against NMC outcomes and standards of proficiency</p>
<p>What we found before the event</p>
<p>The university has a recognition of prior learning (RPL) policy and handbook. In 2014-15 there were 14 successful claims for RPL for the pre-registration nursing programme. In 2015-16 there were seven claims out of a total cohort of 379 students, enabling these students to enter the programme at level five (5). Successful claims included three transfers from other AELs and transfers between fields of practice (43).</p>
<p>What we found at the event</p>
<p>The university has a clear RPL process for accredited learning and the recognition of prior experiential learning (RPeL). We saw evidence of the support provided to applicants to the pre-registration nursing programme who are eligible for RPL, in line with NMC standards (43, 94).</p> <p>The claims we viewed detailed mapping between the programme learning outcomes and the relevant external programme the applicant had completed, illustrating the process meets NMC requirements. Claims included transfers from other universities, between fields and theoretical prior accredited learning (43, 94).</p> <p>All claims for theoretical based RPL are examined by an academic with due regard and, if accepted, up to 33 percent of the pre-registration nursing programme can be exempt through direct entry to academic level five. The recommendations for all RPL claim outcomes must be formally ratified at the faculty recognition panel. Students who have entered the programme through an RPL route are provided with individualised support from their personal tutor to ensure that they make good</p>

<p>progress (43, 94).</p> <p>The programme team have not received any formal claims for credit based upon experience through the RPeL policy, but stated that the programme external examiner would be engaged in verifying any claim of this nature (43, 94).</p> <p>We conclude the university has robust accreditation of prior learning systems in place.</p>
<p>Outcome: Standard requires improvement</p>
<p>Comments:</p> <p>2.1. The university does not effectively monitor and record completion of equality and diversity training by practitioners and service users prior to engaging in student selection interview processes. The team should establish a process of monitoring and recording completers of this training to assure themselves that all interview selection panel members are appropriately prepared and the risk control is strengthened.</p>
<p>Areas for future monitoring:</p> <ul style="list-style-type: none"> The monitoring and recording of practitioner and service user/carer participation in equality and diversity training.

Findings against key risks
<p>Key risk 3 - Practice Learning</p> <p>3.1 Inadequate governance of and in practice learning</p> <p>3.2 Programme providers fail to provide learning opportunities of suitable quality for students</p> <p>3.3 Assurance and confirmation of student achievement is unreliable or invalid</p>
<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 strategic and operational partnership working. The deans of the north west universities meet with HENW and there is a north west dean's strategic collaborative working group. There is a partnership agreement between HENW, the university and practice placement providers including those from the private, voluntary and independent (PVI) sector (48, 53, 55, 69).</p> <p>The placement allocation process ensures educational audits are up to date and the placement area has capacity to support the student before students are allocated.</p>

There is a multi-professional education audit tool used by all four universities that share the placement circuit and the information is held on the PLSS website (49, 55, 57, 67, 80-81).

There is a clear collaborative communication process between practice placement providers and the four local universities, and action plans for educational audits are implemented. The university provided assurance in the 2016-17 self-assessment report that any concerns about risks to practice learning are managed locally. There have been no risks raised via the exceptional reporting process to the NMC (5, 46).

There is a safeguarding policy and faculty and HENW guidance and support for students, academics and practice educators relating to raising and escalating concerns in the practice setting; this is readily available on the practice review and evaluation (PARE) website. The university reports this has been successfully utilised by a number of students (5, 41, 44-45, 47, 80).

What we found at the event

We found evidence of robust, open and effective partnership working at strategic and operational level between the university, practice placement providers, education commissioners and the other universities that share the same placement areas. The partnerships work to provide a high quality learning experience for students and ensure they are fit for purpose and fit for practice on registration/re-registration (18-19, 48, 93, 95-98).

The partnership groups and processes aim to identify and manage risks that may impact on students' practice learning and, share lessons learnt; provide appropriate capacity in placement; and, a variety of practice learning experiences for the students. Quarterly partnership meetings are held with the practice education leads, PEFs and the academic team. Feedback is shared and information relating to programme developments are provided at these meetings. The education links feed this information back to mentors in their areas. This is reported as a positive element of the partnerships between the organisations (85, 89, 92, 99, 110, 116).

Students and mentors are aware of processes and support available to raise and escalate concerns regarding their practice learning environments. Students told us that this has resulted in appropriate action being undertaken to protect the public and maintain, or improve, the quality of care and the student learning experience (89-90, 101-111, 115).

The university are well informed of external reviews including CQC inspections, undertaken in practice learning areas and the associated outcomes. Appropriate action plans are put in place including to rest or deactivate a placement area. Students' learning experience is monitored following clinical governance reports that require action from the health or social care provider. The senior management of the school ensure HENW are informed via the quality surveillance group of any significant student concerns (42, 93, 95-99). However, we found no evidence of escalation of these concerns to the NMC through the exceptional reporting process. This requires improvement.

<p>Practice and academic staff confirmed biennial educational audits of practice placement learning environments are done collaboratively involving a tripartite approach with the PEF, education link sign-off mentor and link lecturer. The audits may be conducted by other universities that use the same placement area and there are systems in place for sharing this information. Short term changes to placement provision, such as the decision to rest or remove a placement area, would require the placement is re-audited prior to its re-instatement into the placement circuit (5, 46, 49, 99, 101-112).</p> <p>We viewed the educational audit document for each practice learning environment that we visited and the associated database which we found to be up to date and meets NMC requirements (99, 101-112).</p> <p>Mentors and managers confirm that audits record the number and type of students that can be hosted by each placement area and take account of the availability of mentors. Adjustments are made to student numbers in accordance with their feedback and changes in health and social care service provision (99, 101-102, 104, 107, 108-111).</p> <p>Following the audit, actions are taken and recorded to ensure that the placement meets the requirements of a safe and effective learning environment (99). However, linking these activities to formal action plans that are recorded on the PLSS system would further enhance the effectiveness of this process.</p> <p>We conclude there are effective partnerships between the university and practice placement providers, and we are assured that risks to practice learning environments are escalated and managed through local partnerships and reported to HENW. However, these risks have not been exceptionally reported to the NMC in a timely manner in line with expectations outlined in the NMC Quality Assurance framework (2016). This 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>There is a faculty service user and carer strategy. The involvement of service users and carers in the selection of students and the development and delivery of programmes is primarily through two organisations: Focus on Involvement and Changes Plus, with an established service level agreement. These organisations have access to nearly 200 service users and carers with a diversity of ages and experiences in health and social care (33).</p>
<p>What we found at the event</p>

<p>The service users and carers strategy has not been shared with the two service user and carer involvement groups named within the strategy document (33, 91). We found limited evidence that service users and carers were involved in the development or delivery of the programme. However, the academic team did provide examples of how the experiences of service users were constructively embedded within the programmes (91, 123).</p> <p>The service user/carer leads we met in the university report a marked reduction in the involvement with the programmes over the last year. Those who have been involved with the pre-registration nursing programme were positive about their experiences. They appreciate and value the feedback from the academic team (91).</p> <p>It was evident from the student PARs we viewed and by what we were told by students and mentors that service users contribute to the assessment of competence through providing feedback to the student on their performance. Mentors gain consent and participation from service users in obtaining this feedback. Service users and carers are fully informed of the student's role in their care and their right to decline (50, 60, 87, 90, 102, 108-110, 121-122).</p> <p>Pre-registration nursing (adult)</p> <p>Students report minimal service user input within the taught element of the programme. They identify two examples of service users sharing their experiences within the third year of the programme (89-90).</p> <p>Directors of nursing and specialist nurses from practice contribute to the university teaching sessions (90, 95-96, 98).</p> <p>Return to practice (nursing)</p> <p>Service users have not participated in selection interviews, but have been invited to partake in a forthcoming return to practice (nursing) selection process. Vignettes developed by service users and carers are used as learning and teaching materials in the delivery of the programme (61, 69, 87, 102, 124).</p> <p>The academic staff and students confirmed practitioners contribute to the delivery of the programme (87-88).</p> <p>We found evidence of practitioner involvement in the programmes. However, there is limited evidence of service users and carers' involvement in the programmes and this requires improvement.</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>Each placement has an academic link lecturer. The role incorporates: visiting students and supporting mentors; working with PEFs and education leads to ensure a high quality learning environment; ensuring sufficient numbers of mentors to meet the allocated number of students; completing educational audits; following up placement</p>

<p>evaluations; contributing to mentor updates; and, triennial review. A record of link lecturer activities is kept (3, 27, 67, 82).</p>
<p>What we found at the event</p>
<p>The university incorporates time for teaching staff to engage with practice learning and the application of theory to practice within the university workload planning model, in line with NMC requirements. A clear descriptor for the academic link role is provided (26-27, 85, 93).</p> <p>We found the visibility and engagement of link lecturers within their assigned link areas is varied; ranging from minimal contact to routine monthly visits in some areas that are well documented in the student's PAR and on the PLSS system (60, 87, 99, 101-102, 107, 112, 114).</p> <p>Mentors and managers identify that generally the link lecturer provides support to students and the PEFs provide support to mentors. They confirm that a link lecturer is allocated to each placement but not all reported having regular visits. They confirmed that when they requested support from the university regarding a student it is promptly and appropriately acted upon by the link lecturer (101-112).</p> <p>Some of the students that we met had been visited on placement by the academic team, although this was not consistent across the pre-registration nursing (adult) and return to practice (nursing) student groups (89-90, 101, 103, 105-106, 110).</p> <p>The return to practice (nursing) PAR documents we viewed did not always show records of link lecturer visits (101, 106, 122). Pre-registration nursing (adult) students told us that the visits are not formalised and they may not see the link lecturer during a placement allocation period. We were told by the students that the study day during practice allocation weeks, rather than the link lecturer role, provides regular and consistent opportunities to meet with academic team members to discuss practice related issues (89-90, 110).</p> <p>There are regular meetings of the link lecturers which could be a forum for formally reporting on the outputs of link lecturer activity, which is not done at present (92, 99, 113).</p> <p>We found some evidence of academic staff engagement with students' practice learning through regular link lecturer activity, however this varied significantly between placement areas from no activity to regular engagement in some areas. This requires improvement.</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>Records of mentors in the PVI sector are held on the PLSS online support site. The mentor and educational audit information are secure and password protected (49, 67).</p>
<p>What we found at the event</p>
<p>We were unable to access the mentor register during the visit to the PVI placement, but the mentor allocated to the student confirmed attendance at annual mentor update and completion of triennial review (109).</p> <p>The records of PVI sector placements held by the university that were viewed via the PLSS system demonstrated that mentor records are accurate and up to date, including the requirements for annual updating and triennial review. The PLSS is password protected and different permission levels are set by HENW to ensure that information is shared on a need to know basis (49, 99).</p> <p>We conclude records of mentors in the PVI placement settings 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 a mentor preparation programme, workshops to prepare sign-off mentors and annual mentor updates. There is opportunity in interactive workshops for mentors to engage face to face (58-59).</p>
<p>What we found at the event</p>
<p>Mentors/sign-off mentors are well prepared for their role in supporting and facilitating learning in practice and in the assessment of practice. Mentors confirm that the mentor preparation programme prepares them well for their role. The PLSS system we viewed during practice visits and in the university provided evidence that all active mentors have achieved and maintained a recognised mentorship qualification (99, 101-102, 112).</p> <p>Practice educators and mentors told us that mentors participate in two sign-off simulations in preparation for the role of sign-off mentor prior to a supervised sign-off in practice. Subsequent annual mentor updates provide mentors with the opportunity to reflect upon and discuss their experiences (101-112, 126).</p> <p>The content of the update is reviewed annually via the CMPEP collaborative and includes; reflection by the mentors on managing student concerns, escalating concerns, managing the failing students and exploring challenging judgements.</p>

<p>However, we found that return to practice (nursing) rarely features in content or exemplars of the mentor preparatory process (58-59, 101-103, 105). The university is advised to consider ways in which the distinct features and requirements of students on the programme are captured in the mentor preparation programme and annual updates.</p> <p>The face-to-face mentor updates are delivered in placement areas by academic staff from any of the AElS within the collaborative, and mentors report the annual updates they attend are effective. Alongside this, an electronic mentor updating facility has recently been introduced to provide flexibility and choice to practitioners. Face-to-face discussion and reflection regarding student assessment and support is confirmed when e-learning mentor updates are used. This is done in team meetings or with the education lead for the area (99, 101-102, 107-112).</p> <p>Mentors and sign-off mentors are aware of their role in the formal assessment of practice learning and demonstrate a good working knowledge of the practice assessment documents to monitor a student's progress, which was confirmed by students (88-90, 101-112).</p> <p>Mentor/sign-off mentors for the pre-registration nursing (adult) programme are aware of their responsibilities at progression points and on programme completion to protect the public by preventing entry to the register of unsuitable individuals, and records in the PARs we viewed confirmed this (110, 121-122).</p> <p>We conclude that mentors/sign-off mentors are properly prepared for their role in assessing practice learning.</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>Annual mentor updates are made available and accessible to mentors in NHS and PVI sector placements including via electronic learning. Records of mentor attendance at annual updates and triennial review are detailed on the mentor registers via the PLSS password protected section of the database hosted by HENW (49, 58-59).</p>
<p>What we found at the event</p>
<p>The collaboration with other AElS in the area who share the same placements provide mentors across all sectors with multiple opportunities to attend face-to-face annual update throughout the year. The university is very proactive in providing opportunities for return to practice (nursing) sign-off mentors to update, to meet the needs of their students (99, 102).</p>

<p>All mentors, sign-off mentors and 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 (101-112).</p> <p>We conclude that mentors/sign-off mentors are able to attend annual updates to meet the requirements for triennial review and they understand and reflect on the mentoring process.</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>Records of mentors for all types of placements are held on the PLSS database and provide details of preparation, annual updates and triennial review. The website notes that there is ongoing collaborative work with the other four AEs that share the same placement circuit to ensure local live mentor registers are up to date (49, 67).</p>
<p>What we found at the event</p>
<p>A review of the mentor registers confirms the date of attendance at annual updates and completion of triennial review is recorded on the system (49, 99, 101, 103-105, 107-108, 110-111).</p> <p>The PEFs review the database in their organisation to identify mentors who are at risk of becoming out of date and notify the relevant practice education lead to ensure that the mentor cannot be allocated a student, and is moved to the inactive part of the register. Audit checks of mentor records in the students' PARs across the pre-registration nursing (adult) programme and the return to practice (nursing) programme, confirm mentors were live on the register and fully updated, including triennial review, at the time of the student's placement. We met students on practice placements who had allocated mentor/sign-off mentors who were all live on the register (88-90, 103-106, 110).</p> <p>Our findings 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>3.1.1 We are assured and have seen evidence that risks to practice learning environments are escalated and managed through local partnerships and reported to HENW. However, these risks have not been exceptionally reported to the NMC in a timely manner in line with expectations outlined in the NMC QA framework.</p>

3.2.1 We found limited evidence of service user/carer involvement throughout the programmes. The current service user/carer strategy should be reviewed to ensure there is a comprehensive and systematic implementation plan of service user/carer involvement in all aspects of the programmes.

3.2.2 We found some evidence of regular link lecturer activity, however this varied significantly between practice placement areas. The engagement and visibility of link lecturers requires strengthening and monitoring to ensure all students and mentors have equitable access to this academic support in the practice setting.

Areas for future monitoring:

- Timely exceptional reporting to the NMC.
- Comprehensive service user and carer involvement throughout the development and delivery of the pre-registration nursing (adult) and return to practice (nursing) programmes.
- Consistency of link lecturer visits to practice placements.
- Inclusion of return to practice (nursing) content/exemplars in mentor preparation training and annual update.

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

Programmes are mapped against NMC requirements, and assessment documents are mapped to the NMC standards and competencies (50-51, 60, 62-63, 65).

There is information in the programme guides on the range of support and specialist services available in the university (64, 66, 68).

Programme teams collect and analyse a range of data to enhance learning and teaching strategies and the student experience (76-78)

External examiners confirm the pre-registration nursing (adult) and the return to practice (nursing) programmes enable the students to meet the programme outcomes, competencies and NMC requirements (83).

What we found at the event

Students report that they receive feedback on their progress from the academic teams and that a personal tutor is allocated to provide ongoing support throughout their programme (88-90).

The board of studies and programme AMR reports demonstrate that data and feedback from students, academic staff, and practitioners, are reviewed by the programme teams to enhance learning, teaching and assessment strategies (73-74, 77-78).

Variances to university regulations are detailed in the programme specification, and academic staff confirm there is no compensation allowed (63, 65, 92).

Pre-registration nursing (adult)

Students report satisfaction with their programme. They told us that the programme aims and outcomes are clear and a range of appropriate and effective learning, teaching and assessment strategies are used to link theory and practice, and facilitate their achievement (66, 89-90, 110).

Interprofessional simulation learning with medical and pharmacy students in the third year of the programme, participation in international placements and a live link with students abroad are identified by students as positive learning opportunities. They are very complimentary about the 'scenario in a day' approach and how this develops understanding of the topic area explored, the NMC Code and a range of transferrable skills (65-66, 89-90).

Students are required to complete additional core skills each year as well mandatory skills training prior to proceeding onto placement. Students are not allowed to proceed onto placement until these have been completed to ensure the protection of the public and maintain the safety of the student on placement (5, 66, 89-90, 112).

Essential skills and domains are evident in the PARs we sampled and have been mapped to the programme learning outcomes, confirm adherence to the EU requirements and exposure to a range of client groups across the programme. Student progress towards meeting the EU requirements is actively monitored by the module tutor and personal tutor, to ensure that any difficulties in meeting the requirements are identified and addressed prior to the end of the programme (50, 66, 86, 90, 99, 110, 119, 121).

Students, mentors and the programme team confirm that theory and practice hours are monitored throughout the programme and any shortfalls are retrieved (50, 92, 110, 112).

Students complete night duty and experience of 24 hour seven-day care which is supported within the records and student time sheets (67, 81, 86, 90, 118, 121).

Students told us how the combination of assessment methods used help those who perceive themselves as less academically able to achieve. Mentors confirm that formative and summative feedback enables students to monitor progress and achievement (90, 107-108, 110-111, 121-122).

Return to practice (nursing)

Students told us that they benefit from contemporary content and innovative teaching

<p>and learning strategies, which include simulated learning, to aid them to meet the programme outcomes (101-102, 104).</p> <p>The NMC Code (2015) and NMC revalidation (2016) is made explicit from the beginning of the programme and is evident in the PAR document (60-61). Students confirmed that mandatory skills training and an online drug calculation package must be completed before proceeding into practice placement (31, 61, 63, 88, 101-102).</p> <p>Practice assessment incorporates a skills inventory and a portfolio containing reflection on how the learning outcomes have been met. We found the guided reflective PAR is effective in confirming the required levels of achievement in theory and practice (60, 62-63, 101-104, 122).</p> <p>The number of practice hours the student is required to complete varies and is dependent upon the length of time out of practice and their previous experience. We viewed a sample of class attendance registers and saw examples of when students are required to re-attend incomplete mandatory skills training (61, 87, 101-102, 104, 128).</p> <p>Our findings conclude there is robust evidence that students are supported to achieve all NMC learning outcomes and competencies at progression points and at the end of the programme.</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>Induction details and the role and requirements of students and mentors in practice learning and assessment, including poor performance, are evident in the practice assessment documentation (50, 60).</p>
<p>What we found at the event</p>
<p>Pre-registration nursing (adult)</p> <p>Employment rates are high, and mentors and managers report that students are well prepared for practice across the range of settings and are suitably prepared for registration on completion of the programme (85, 90, 93, 95-98, 107-111).</p> <p>The range and diversity of placements students undertake is viewed by students and practice staff as a strength of the programme. Students complete a 12-week final placement with a designated sign-off mentor (66, 90, 117).</p> <p>Mentors and students demonstrate a good understanding of the practice assessment document, the hub and spoke placement model, how to identify achievement of</p>

placement related EU directives and their role within the assessment process. Mentors and managers are clear about the process to follow if they are concerned about a student's performance. They are complimentary regarding the way in which PEFs and link lecturers respond when they report issues of poor performance relating to a student (90, 107-112, 119, 121).

Students report they are well prepared for their practice placements and supported to achieve their practice learning outcomes and competencies. They value the induction provided in the placement areas (89-90).

Students and mentors confirm that service user feedback is provided to the student via the mentor and we saw evidence of this in the PARs (50, 90, 107-111, 121).

Return to practice (nursing)

Joint decisions are made with practice placement partners for students with conditions from NMC fitness to practise panels to ensure appropriate support is in place during their practice experience. The programme team and PEF create a bespoke programme of study and clinical exposure for each individual return to practice (nursing) student based upon their previous experiences and preferred areas to undertake their clinical learning. However, students report that in some instances they had to wait a long time to be allocated to a practice placement and that this allocation was not consistently appropriate (4, 69, 88, 101-102).

Mentors/sign-off mentors and managers confirm that students are well prepared for their practice placements and feel well supported to raise any concerns relating to poor performance of students (95, 97, 101, 103-104, 106, 122).

Sign-off mentors and students understand how to use the PAR and the clinical skills inventory which includes the required OAR. The PARs showed evidence of service user feedback, individual objective setting and plans for spoke placement visits to supplement the learning processes in practice (60, 88-89, 101-106, 112, 121-122,).

Students and sign-off mentors confirm strategies for learning and support in practice are effective and aid confidence and competence building in preparation for the student's return to the NMC register. Undertaking the guided reflective portfolio has helped students embed reflective processing into everyday practice (101, 104, 106).

We found that the return to practice (nursing) action plan for future development within the PAR document feeds into the NMC (2016) revalidation process and students and sign-off mentors confirmed this (60, 101, 104, 122).

We conclude that the pre-registration nursing (adult) students and return to practice (nursing) students are supported to achieve all practice learning outcomes and competencies at progression points and upon entry/re-entry to the NMC register.

Outcome: Standard met

Comments:

No further comments

Areas for future monitoring:

None identified

Findings against key risks

Key risk 5 - Quality Assurance

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

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

What we found before the event

The university received positive outcomes from a Quality Assurance Agency (QAA) review in 2016, including two commendations related to the quality and enhancement of student learning opportunities. Outcomes of engagement, evaluation and feedback and associated programme enhancements is detailed in annual review and monitoring (ARM) action plans for HENW commissioners (53, 75-76).

University processes are explicit for monitoring of programmes including an AMR report completed by the programme leader and processes for programme approval, re-approval, and periodic review. The AMR incorporates analysis of internal and external feedback on the programmes including entry and progression data, student feedback and external examiners' reports (65, 77-79).

AEI requirements on the NMC portal are up to date. NMC annual self-assessment reports are completed and any previous issues from programme approvals, monitoring reviews and potential risks are identified to meet ongoing AEI status requirements (3-5, 77-80, 84).

What we found at the event

The university seeks feedback from students following every academic module and practice placement in a consistent manner. However, the level of student engagement with module evaluation varies significantly. The university has recently introduced the one-minute module evaluation to address this; early indication suggests this is proving successful (85, 88-89, 100, 116, 120, 127).

The online evaluation system is replicated in practice placements where student feedback is provided through the online PARE system to the PEF and the manager of the practice placement area. Student evaluations of practice experience are generally

very positive and students report practice learning has been varied and valued (87, 99, 101-102, 104, 108-112, 120).

The external examiners for the programmes act with due regard and hold an NMC current registration and a recorded teacher qualification. The school monitors the currency of the NMC registration and revalidation date of external examiners (21, 28, 100).

Annual external examiner reports for the pre-registration nursing (adult) and the return to practice (nursing) programmes are positive and demonstrate that practice as well as theoretical aspects of the programme are considered. The reports confirm student achievement of NMC requirements (52, 70, 73-74, 83, 100).

The programme teams respond to external examiner feedback and actions, and responses are captured in the AMR reports for each programme (77-78, 83, 100). Examination board minutes evidence the process of ensuring students meet the requirements at progression points and have met all programme requirements on completion of the programmes (72-74, 100).

Pre-registration nursing (adult)

Students are informed of the role and names of the external examiner for their programme/field. External examiners address all stages and levels of the programme including reviewing practice assessment documents. External examiners have had the opportunity to meet with students and mentors and some have met with students or undertaken visits to practice placements to discuss issues related to assessments with mentors/sign-off mentors and students (66, 83).

The student voice is heard through course representatives. Students confirm that they receive feedback on changes made in response to their evaluations. An example given was the further preparation for adult nursing students regarding working with people who have a learning disability is now included within year one of the programme. Examples of previous changes made to the programme following student feedback are detailed in the programme guides (65-66, 74, 86, 89-90, 110).

Return to practice (nursing)

Engagement with the student representative role is limited. The academic staff continue to encourage students to take up opportunities to engage in this role (69, 73, 87, 92, 100).

Students told us they prefer to feedback directly to their personal tutor or programme lead instead of completing formal evaluations, and the team confirmed this (87, 101-102, 104, 120, 122).

The external examiner annual reports for the last two years indicate that they have not met with students or mentors (71, 87). The academic staff are advised to make further arrangements for the external examiner to fulfil this aspect of their role.

We conclude that there are clear internal quality assurance and enhancement systems in place, the student voice is valued and action is taken to resolve any issues raised to address areas for development and enhance the delivery of the pre-registration nursing (adult) and return to practice (nursing) programme.

<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>There is a student complaints policy and process which is referred to in the student guide for practice (67). There is a clear process detailed in student documentation for raising and escalating concerns in practice learning settings (44-47, 81).</p>
<p>What we found at the event</p>
<p>Practice placement providers identify that feedback from students' practice experience is provided to them in a timely way via the PARE system (107-112, 116). Any concerns raised in practice learning settings follow the university concerns and complaints process which is a collaborative system within CMPEP. The partnership has a complaints procedure that is monitored through the operational placement meetings and lessons learnt are shared. Directors of nursing confirmed the two-way open communication with the university when concerns are escalated (44-46, 48, 95-96, 98).</p> <p>Students and practice staff demonstrated a clear understanding of the procedures and guidance to follow when concerns or complaints are raised in practice settings and escalation processes. They confirm that appropriate support is provided to students and mentors by practice and academic staff. We found examples of how concerns are tracked and acted upon, followed up and communicated in a timely manner and a conjoint approach to resolving matters is evident (88-90, 101-102, 104, 110-112, 115-116, 120).</p> <p>Students provided positive feedback to the recent HENW annual review meeting that they felt safe and supported and there is a visible process for reporting concerns (129).</p> <p>We conclude from our findings that the concerns and complaints raised in the practice setting are responded to effectively and are appropriately dealt with and communicated to relevant partners.</p>
<p>Outcome: Standard met</p>
<p>Comments: No further comments</p>
<p>Areas for future monitoring:</p> <ul style="list-style-type: none"> • The level of student engagement with the evaluation processes in the programmes.

- Annual external examiner engagement with students and sign-off mentors in the return to practice (nursing) programme.

Evidence / Reference Source

1. LJMUC NMC programme approval letter for BSc (Hons) nursing (adult, child and mental health), 2 September 2011 and extension letter, 1 February 2016
2. LJMUC NMC programme approval letter for return to practice (nursing), 17 October 2011 and extension letter 15 April 2016
3. LJMUC NMC programme major modification report BSc (Hons) nursing (adult, child and mental health), 19 September 2016
4. LJMUC NMC programme major modification report return to practice (nursing), 12 July 2016
5. LJMUC NMC annual self-assessment reports 2015-16, 26 November 2015 and 2016-17, 25 November 2016
6. CQC report Bridgewater Community Healthcare NHS Foundation Trust, 6 February 2017
7. CQC report Liverpool Community NHS Trust, 8 July 2016
8. CQC report Wirral University Teaching Hospital NHS Foundation Trust, 10 March 2016
9. CQC report Avondale mental health centre, 13 May 2016
10. CQC report Dovehaven Home, 21 September 2016
11. CQC Finch Manor nursing home, 24 January 2017
12. CQC report Hoyle Cottage, 6 January 2017
13. CQC reports: Ormskirk District General Hospital, 15 November 2016; Southport and Formby District General Hospital, 15 November 2016; Southport and Ormskirk Hospital NHS Trust, 15 November 2016
14. CQC report Red Rocks nursing home, 30 June 2016
15. One to One Midwives North West, LJMUC action plan related to 2015 CQC report, 16 October 2015 last updated 17 January 2017; internal email correspondence confirming midwives not placed, 17 June 2016
16. LJMUC monitoring of CQC outcomes summary of action plans, undated; action plan related to Bridgewater NHS Trust CQC report, 15 February 2017
17. CQC report St Joseph's Hospice, 1 December 2016
18. North west council of deans of health group, terms of reference and minutes, 15 May 2015, 19 April 2016, 19 October 2016
19. HE/HEE strategic partnership meeting minutes, 19 April 2016, 19 July 2016, 18 October 2016
20. LJMUC fitness to practise investigations, lessons learnt and feedback mechanisms, case files 2016
21. LJMUC academic staff and external examiner curricula vitae, NMC register check
22. LJMUC process for monitoring academic staff active registration and for due regard, undated
23. LJMUC NMC revalidation process, undated
24. LJMUC personal development and performance review policy, updated August 2016
25. LJMUC research strategic plan, undated

26. *LJMU faculty workload allocation model, 2016-17*
27. *LJMU descriptor for the academic link role for nursing programmes, undated; policy and process to enable academic nurses and midwives to meet NMC requirements for 20 percent of time in practice, undated*
28. *LJMU professional accreditation, undated; external examiner professional accreditation, undated*
29. *LJMU applicant and criminal conviction policy, 30 September 2015*
30. *LJMU admissions policy, and under 18 years of age admission policy, November 2016*
31. *LJMU fact file - return to practice (nursing) <https://www.ljmu.ac.uk/study/cpd/other-cpd-courses/returning-to-practice---nursing-and-health-visiting>*
32. *LJMU equality and diversity policy, April 2014; equality and diversity training academic staff, undated; equality and diversity training (for interviewers) and briefing for external staff, undated*
33. *LJMU strategy for involvement of carers and users of services in health and social care programmes, undated*
34. *LJMU disability policy (students), provision of support, undated*
35. *LJMU supporting students with dyslexia, guidance for practice staff, undated*
36. *LJMU learning needs assessment and reasonable adjustment for assessment of theory and practice, undated*
37. *LJMU fitness to practise policy, September 2015 and fitness to practice, guidance notes for students, September 2015*
38. *LJMU fitness to practise cases for return to practice programme, October 2015; and fitness to practise cases for BSc (Hons) nursing since May 2015, 8 March 2017*
39. *LJMU academic misconduct policy, updated September 2016; BSc (Hons) nursing programme academic misconduct cases since November 2015, undated*
40. *LJMU safeguarding policy, 12 January 2016*
41. *LJMU safeguarding in the practice setting, November 2016*
42. *LJMU process for exception reporting at senior management team (SMT), undated*
43. *LJMU recognition of prior (experiential) learning policy, September 2016; recognition of prior (experiential) learning and credit transfer handbook, August 2016; RPL statistics for BSc (Hons) nursing (adult) 2014-15, 2015-16*
44. *LJMU students raising concerns guidance, 2015*
45. *LJMU pathway to follow when student nurses have concerns on placement, undated*
46. *CMPEP collaborative communication process in relation to learners raising concerns about practice, 18 June 2015; terms of reference 24 September 2015 and minutes of the meeting of 14 September 2016*
47. *HENW postcard: using the learners voice for better learning and better care, undated*
48. *CMPEP operational placement meeting terms of reference, 5 February 2016*
49. *Practice learning support system, www.plss.org.uk*
50. *Joint HEI and practice partnership collaboration; BSc (Hons) nursing PARs year one; year two and year three, 8 August 2016*
51. *LJMU inter-professional learning in NMC accredited courses, undated*

52. LJMU guidance for engagement with professional, statutory and regulatory bodies (PSRBs), 22 April 2015
53. LJMU formal engagement with education commissioners and practice placement partners, undated
54. LJMU NMC completion guidelines, undated
55. Partnership agreement version three between HENW, education partners, PVI organisations involved in the provision of practice learning experience, 3 April 2016
56. LJMU statement of compliance with HENW for BSc (Hons) nursing, November 2016
57. LJMU placement allocation process, undated
58. CMPEP: pre-registration nursing; mentor update workshop descriptor, September 2014; suitably prepared supervisor workshop descriptor, October 2014; sign-off mentor preparation workshop descriptor, 27 November 2014
59. LJMU mentor update; supporting learning in practice (SLAiP) workshop presentation, undated; example of content in mentor update for private, voluntary and independent sector placements, undated
60. LJMU return to practice (nursing) PAR, example, undated
61. LJMU return to practice (nursing) programme timetable, October 2016 cohort
62. LJMU return to practice (nursing) student portfolio, undated
63. LJMU return to practice (nursing) programme specification, 1 August 2016
64. LJMU return to practice (nursing) programme guide 2016-17, October 2016
65. LJMU BSc (Hons) nursing: programme specification, September 2016
66. LJMU BSc (Hons) nursing (adult, child and mental health) programme guide, 2016-17
67. LJMU BSc (Hons) nursing: guide for practice, 2016-17
68. LJMU student mentoring scheme and the student quality ambassador role, undated
69. Managing reviewer initial visit to LJMU, 15 March 2017
70. LJMU guidelines for external examiners, 2015-16, 2016-17 June 2016; external examiner briefing pack, undated; external examiner induction and duties, undated
71. LJMU progression and award board minutes, return to practice (nursing), 8 August 2016, 2 September 2016, 7 December 2016
72. LJMU progression and award board minutes, BSc (Hons) nursing, 24 February 2016, 24 March 2016, 4 August 2016, 2 September 2016
73. LJMU board of studies minutes (including return to practice (nursing)), 12 March 2015, 15, October 2015, 17 March 2016
74. LJMU board of studies minutes BSc (Hons) nursing, 12 April 2016, 19 October 2016
75. LJMU QAA report: review undertaken 8-12 February 2016 report published May 2016
76. HENM LJMU ARM action plan, 26 August 2016
77. LJMU AMR report 2015-16 BSc (Hons) nursing, 10 October 2016
78. LJMU AMR report 2015-16 CPD return to practice (nursing), 23 January 2017

79. AEI requirements NMC portal, checked 27 February – 15 March 2017
80. HENW practice assessment and evaluation tool, undated <http://demo.onlinepare.net/>
81. LJMU PLSU information pre-registration nursing, midwifery and social work programmes, 2016-17
82. LJMU BSc (Hons) nursing programme statistics by cohort 2011 -2016, undated; retention data pre-registration nursing, 28 March 2017
83. LJMU external examiners reports x4 for BSc (Hons) nursing and return to practice (nursing), 2014-15, 2015-16
84. LJMU NMC monitoring review report, 2011
85. Initial meeting with university team and NMC review team and presentation, 28 March 2017
86. Meeting with pre-registration nursing (adult) programme team, 28 March 2017
87. Meeting with return to practice (nursing) programme team, 28 March 2017
88. Meeting and telecon x2 with return to practice (nursing) students, 28 March 2017
89. Meeting with pre-registration nursing (adult) students, years one and two, 28 March 2017
90. Meeting with pre-registration nursing (adult) students, year three, 29 March 2017
91. Meeting with service user/carers, 28 March 2017
92. Meeting with programme leaders, admissions tutor and practice lead including discussion of CQC report action plans, 28 March 2017
93. Meeting with director of school 28 and 29 March 2017; dean of faculty, 29 March 2017
94. Meeting with RPL lead, 28 March 2017; review sample of pre-registration nursing completed RPL claims various dates, 29 March 2017
95. Telecon with deputy executive director of nursing, Mersey Care NHS Foundation Trust, 28 March 2017
96. Telecon with director of nursing, St Helens and Knowsley Teaching Hospitals NHS Trust, 28 March 2017
97. Telecon with head of education transformation, health education England, 28 March 2017
98. Telecon with director of nursing, Royal Liverpool and Broadgreen University Hospital NHS Trust, 29 March 2017
99. Meetings with school practice lead and review of placement learning support system (mentor register, PVI mentor register, student allocation to placements, educational audits and action plans), 28-29 March 2017
100. Meeting with quality enhancement officer, academic registrar and faculty registrar, programme leads, placement lead, subject head of nursing and director of school, 28 March 2017
101. Placement visit one, Whiston Hospital, ward 4F, St Helens and Knowsley Teaching Hospitals NHS Trust, meeting with student, mentors, manager, service users, educational audit and mentor register checked, 28 March 2017
102. Placement visit two Whiston Hospital, ward 2A, St Helens and Knowsley Teaching Hospitals NHS Trust, meeting with student, mentors, manager, service users, educational audit and mentor register checked, 28 March 2017

103. Placement visit three, Broadgreen Hospital, Royal Liverpool and Broadgreen University Hospital Trust, ward 2, meeting with student, mentors, manager, service users, educational audit and mentor register checked, 28 March 2017
104. Placement visit four, the Royal Liverpool University Hospital, the Royal Liverpool and Broadgreen University Hospital Trust, ward 2B and 2Y, meeting with student, mentors, manager, service users, educational audit and mentor register checked, 28 March 2017
105. Placement visit five, criminal justice liaison service diversion team, Mersey Care NHS Trust, meeting with mentors, manager, service user, educational audit and mentor register checked, 29 March 2017
106. Placement visit six, Rathbone Hospital, Mersey Care NHS Trust, Childwall ward, meeting with student, mentors, manager, service user, educational audit and mentor register checked, 29 March 2017
107. Placement visit seven, Whiston Hospital, ward 3E, St Helens and Knowsley Teaching Hospitals NHS Trust, meeting with mentors, manager, service users, educational audit and mentor register checked, 28 March 2017
108. Placement visit eight, Liverpool Community Health, community nursing mobile team, meeting with mentors, manager, service users, educational audit and mentor register checked, 28 March 2017
109. Placement visit nine, St Patricks Care Home, Community Integrated Care Ltd, ward 2, meeting with mentors, manager, service users, educational audit and mentor register checked, 28 March 2017
110. Placement visit 10, the Royal Liverpool University Hospital, the Royal Liverpool and Broadgreen University Hospital Trust, ward 9 high dependency unit, meeting with student, mentor, manager, service users, educational audit and mentor register checked, 28 March 2017
111. Placement visit 11, Heart failure team, Bridgewater Community Healthcare NHS Foundation Trust, meeting with mentors, manager, service users, educational audit and mentor register checked, 29 March 2017
112. Placement visit 12, district nursing team, Bridgewater Community Healthcare NHS Foundation Trust, meeting with mentors, manager, service users, educational audit and mentor register checked, 29 March 2017
113. Link lecturer activity, October 2016-February 2017; academic link meeting, agenda and minutes, December 2016
114. LJMU return to practice (nursing) module guide, 2016/17
115. Email correspondence between link lecturer, practice lead and PEF regarding student/sign-off mentor issue and how it was resolved, 14, 16, 24 March 2017
116. Meeting with practice lead to view PARE sample of logging of student concerns, 29 March 2017
117. LJMU BSc (Hons) nursing programme structure, undated
118. Return to practice (nursing) student complete profile; pre-registration nursing (adult) student complete profile, undated
119. Meeting with pre-registration nursing programme lead, EU mapping document and maternity care content in the programme, 29 March 2017
120. LJMU collated practice evaluations, various dates
121. Review of nine pre-registration nursing (adult) practice assessment documents, 28-29 March 2017
122. Review of four return to practice (nursing), practice assessment documents and two clinical skills records, 28-29 March 2017

123. *Examples of service users/carers input into the pre-registration nursing programme, undated*
124. *Interview schedule for BSc (Hons) nursing programme, 26 October 2016-2 March 2017*
125. *LJMU admission training content including equality and diversity for interview panel members, undated*
126. *Triennial review mentor passport, undated; mentor quiz, 2016*
127. *Pre-registration nursing programme (adult), theory evaluations 2015-16*
128. *Return to practice (nursing) programme sample of completed attendance registers, 5 December 2016, 6 January 2017*
129. *LJMU annual review meeting with HENW, 6 September 2016*

Personnel supporting programme monitoring
Prior to monitoring event
Date of initial visit: 15 Mar 2017
Meetings with:
Quality enhancement officer Programme leader pre-registration nursing Programme leader return to practice (nursing) Subject head of nursing Subject head of allied health Director of school
At monitoring event
Meetings with:
Initial meeting with university team including presentation Meeting and teleconferences with current and recent return to practice (nursing) students Meetings with pre-registration (adult) nursing students, years one and two, and year three Meeting with service user/carers in university Meeting with RPL lead and faculty registrar Meeting with university practice lead Meeting with return to practice programme team Meeting with pre-registration nursing (adult) programme team Teleconference meetings with three director/deputy directors of nursing Meeting with director of school Meeting with dean of faculty and director of school Meeting with programme leaders, admissions tutor, practice lead, subject head of nursing Meeting with quality enhancement officer, academic registrar, faculty registrar, placement lead, programme leader (pre-registration nursing), subject head of nursing, director of school Teleconference meeting with HENW commissioner Meeting with service user/carers

Meetings with:

Mentors / sign-off mentors	16
Practice teachers	
Service users / Carers (in university)	3
Service users / Carers (in practice)	3
Practice Education Facilitator	10
Director / manager nursing	15
Director / manager midwifery	
Education commissioners or equivalent	1
Designated Medical Practitioners	
Other:	

Meetings with students:

Student Type	Number met
Registered Nurse - Adult	Year 1: 4 Year 2: 5 Year 3: 10 Year 4: 0
Return to Practice Nursing	Year 1: 8 Year 2: 0 Year 3: 0 Year 4: 0

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