Quality assurance framework:
Summary overview

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Head of UK Quality Assurance
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This presentation will cover

• QA overview perspectives
• Approval highlights
• Monitoring highlights
• Earned autonomy
• Review plan 2011-2012
• Potential challenges for 2011-2012
QA overview perspectives: 1

- Decision to move QA operation in house
- Impact of SPNE approval events on QA
- Increased reviewer effort and activity in certain programmes
- Growing analysis of QA knowledge, results and lived experience
- Extraordinary review

QA perspectives: 2

Approvals

- State of readiness of programme developers
- Conditions and recommendations and the impact on timelines
- Responsiveness of Mott MacDonald
QA perspectives: 3

Monitoring

- Targeting and proportionality within monitoring
- Earned autonomy status and consistency of self reporting mechanisms
- Action plans following unsatisfactory grades

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<thead>
<tr>
<th>Monitoring year</th>
<th>Resources</th>
<th>Admissions and Progression</th>
<th>Practice Learning</th>
<th>Fitness for Practice</th>
<th>Quality Assurance</th>
<th>Programmes monitored</th>
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QA framework: The status of extraordinary reviews

- Inclusion within the QA handbook for 2011-2012 to ensure transparency
- Range of options for undertaking extraordinary review activity
- Impact on QA of education when adverse clinical governance occurs
- Reviewer preparation, experiences and reporting

QA perspectives: 2

- State of readiness of programme developers
- Conditions and recommendations and the impact on timelines
- Responsiveness of Mott MacDonald
Headlines from 2010-2011 results

- For the first time all four countries were monitored by Mott MacDonald
- 49 AEIs were monitored (59 percent of AEIs)
- 133 programmes were reviewed in total
- 34 (41 percent) AEIs with earned autonomy status so self reported and were not graded
Contributors to the monitoring process

- 1008 students
- 479 mentors and 92 practice teachers
- 103 practice education facilitators
- 95 clinicians
- 244 service managers
- 424 academic staff
- 34 education commissioners or education leads

Summary percentages against grades

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<tr>
<th>Grade awarded</th>
<th>Number of programme providers achieving each level of control</th>
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<tr>
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<tr>
<td>Outstanding</td>
<td>2 (4%)</td>
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<tr>
<td>Good</td>
<td>40 (82%)</td>
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<tr>
<td>Satisfactory</td>
<td>5 (10%)</td>
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<tr>
<td>Unsatisfactory</td>
<td>2 (4%)</td>
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Results summary

- 8 outstanding grades were awarded to 7 AEIs
- 24 + 1* AEIs gained good grades
- 12 AEIs gained satisfactory grades
- 5 AEIs gained unsatisfactory grades

* Single day event

Grades overview
Earned autonomy: England
- Bedfordshire
- Birmingham
- Birmingham City
- Bolton
- Brunel
- Canterbury Christ Church
- Central Lancashire
- Edge Hill
- Essex
- Greenwich
- Huddersfield
- Hull
- Kingston
- Lancaster
- Leeds
- Leeds Metropolitan
- Liverpool
- Oxford Brookes
- Sheffield Hallam
- Teesside
- Wolverhampton

Earned autonomy: Scotland
- Edinburgh
- Edinburgh Napier
- Stirling
- University of West of Scotland
Monitoring review plan 2011-2012

Resources

• Check all programme leaders hold recordable teacher status on NMC website
• Gather evidence on how clinical governance issues are communicated with AEIs and joint actions that arise from this
• Check for additional or other learner support demands made of clinical areas visited
• Student teacher support in both academic and practice settings

Monitoring review plan 2011-2012

Admission and progression

• Identify AEIs that are recruiting applicants whose registration as nurses and midwives are pending to SCPHN programmes
• Gather evidence of frequency of activated fitness to practise processes
• Gather evidence of adaptation student applications
Monitoring review plan
2011-2012 exemplars

Practice learning
• Determine how actions arising from educational audits are reported and completed
• Record process for withdrawal of placements due to conflicting or other pressures
• Check triennial review activity
• Review frequency and type of lecturer activity in practice

Fitness for practice
• Evidence regarding EU applicants
• Explore service providers’ confidence that poor performance is identified and addressed
• Determine employers’ and potential employers’ satisfaction with students exiting from programme
Monitoring review plan 2011-2012 exemplars

Quality assurance

- Review evidence of frequency of external examiner visits to practice placement settings
- Identify if official correspondent is a registrant
- Review extent of internal and professional scrutiny of documentation prior to presentation for approval

Potential challenges in 2011-2012

- Triangulation of standards of care with standards for education within QA
- Ongoing SPNE approval schedule
- Market forces and commissioning of nursing and midwifery commissioning
- Managing change:
  - Higher education sector
  - Service delivery and reconfiguration
  - QA framework
In summary: Our statutory objective

“The main objective of the NMC in exercising its functions shall be to safeguard the health and wellbeing of persons using or needing the services of registrants.”
We need your expertise to meet this obligation. Thank you.

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