

2013-14

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

Programme provider	University of Wolverhampton
Programmes monitored	Registered nurse - adult; Registered specialist community public health nursing – health visiting
Date of monitoring event	5 -6 March 2014
Managing Reviewer	Val Heath
Lay Reviewer	Ruth Jones
Registrant Reviewer(s)	Kevin Gormley, Eleri Mills
Placement partner visits undertaken during the review	Sandwell and West Birmingham Hospitals NHS Trust (SWBH) Yew Tree Healthy Living Centre. Queen’s Hospital, Burton upon Trent Shropshire NHS Trust Alrewas Surgery Walsall Manor Hospital Royal Wolverhampton Hospitals Trust (RWHT)
Date of Report Publication	4 July 2014

Introduction to NMC QA framework

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

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

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

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

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

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

This annual monitoring report forms a part of this year's review process. In total, 16 AEIs and 32 programmes were reviewed. The programmes have been reviewed by a review team including a managing reviewer, nurse and midwifery reviewers and a lay reviewer. The review takes account of feedback from many stakeholder groups including academics, managers, mentors, practice teachers, students, service users

and carers involved with the programmes under scrutiny. We report how the AEI under scrutiny has performed against key risks identified at the start of the review cycle. Standards are judged as “met”, “not met” or “requires improvement” When a standard is not met an action plan is formally agreed with the AEI directly and is delivered against an agreed timeline.

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

Introduction to University of Wolverhampton's programmes

The University of Wolverhampton, Faculty of education, health and wellbeing was approved in 2011 to deliver the pre-registration nursing programme which met the NMC Standards (2010). The programme is reported as successful to date by the students.

This monitoring review focuses on pre-registration nursing, adult field and the specialist community public health nursing (SCPHN), health visiting (HV) programmes.

The pre-registration nursing adult field programme is delivered through two intakes across three campuses (City, Burton and Walsall). The SCPHN HV programme, which was approved in 2011, is based at the City campus and has two intakes.

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

Summary of public protection context and findings

We found robust processes to ensure there are sufficient appropriately qualified mentors with whom pre-registration nursing students spend a minimum of 40% of their time. The HV implementation plan has necessitated an increase in HV students. In the interests of public protection and to ensure the quality of practice learning, for HV students, the university has increased its provision of the number of practice teacher programmes. Student HVs confirm there are a sufficient number of practice teachers available to effectively support their learning.

Our findings demonstrate that the university has effective procedures for recruitment and selection of students. Students, service users and practice placement providers are satisfied that the interview process is effective in selecting candidates with the appropriate values and attitudes for nursing and HV.

We found that procedures for addressing poor performance in theory and practice are robust. As part of its suitability for practice procedure the faculty has developed a termination and suspension of placement policy that supports the immediate suspension of students if it is considered they pose a risk to the safety of service users. Policies and procedures relating to fitness to practise (FtP) are comprehensive and fully meet the requirements of the NMC. The outcomes of the fitness to practice panels confirm that cases are dealt with fairly and proportionately and further enhance public protection.

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

We found effective partnerships between the university, commissioners and practice

placement partners. In line with NMC requirements, educational audits are undertaken biennially to determine the suitability of the placement learning environment. This is undertaken jointly with practice placement partners. When a placement has been removed from the circuit it will not be reinstated until a satisfactory audit is completed.

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

Four of the practice placement partners: Burton Hospitals NHS Foundation Trust; the Dudley Group NHS Foundation Trust; the Royal Wolverhampton NHS Trust; and, Manor Hospital received adverse Care Quality Commission (CQC) and Keogh reviews in 2013. We found that effective partnership working between the academic teams, the practice placement providers and the commissioners has ensured that concerns had been addressed and appropriate levels of response agreed and implemented. The students and practice placement managers reassured us that students had not been disadvantaged due to the additional activity involved following the Keogh and CQC visits. In some instances students have helped with the initiated developments, which improved the situation, this has been a good learning experience for all concerned.

Summary of areas that require improvement

None identified.

Summary of areas for future monitoring

- The transparency of processes to manage and share information related to escalating concerns by all stakeholders.
- Documentation to support the self-declaration process at the end of the SCPHN HV programme.
- The practice teacher workload model ensures all practice teachers have their own case load.
- Information is provided in documentation about the part time structure in the SCPHN health visitor programme.

Summary of notable practice

None identified.

Summary of feedback from groups involved in the review

Academic team

The academic team gave assurances that they have confidence in the quality of the delivery for the pre- registration nursing (adult field) and SCPHN HV programmes. They reported that the actions completed from external reports, approval conditions, previous monitoring, self- assessment evaluation and national student survey action plans have further enhanced the education provision.

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

Mentors and practice teachers engage effectively with students and the implementation of the programmes and the university. This is further confirmed by the practice placement managers who are supporting the mentors, sign off mentors, practice teachers and students across a wider context and engaging with the personal tutors. Employers report their understanding and involvement in the student journey and identify sound relationships with the university. They regard students completing the programmes as fit for practice and purpose.

Students

Students told us they feel well prepared and supported in both theory and practice during their programme.

Service users and carers

We found that the faculty value service user and carer involvement as was reported by service user and carer representatives as “making a difference”. Service user and carer engagement is demonstrable throughout the curriculum and reported by them and the students as highly valued.

Relevant issues from external quality assurance reports

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

The following reports require action(s):

Burton Hospitals NHS Foundation Trust (Keogh 2013)

Some issues needed urgent action as they could be detrimentally impacting on patient experience and continuity of care. These included;

- Concern about some ward rotas and rest days.
- The rigour of equipment checks applied at ward level.
- Issues with clinical practice including escalation.
- Delegation and supervision.
- Examples of poor communication and lack of trust wide understanding of quality objectives.

The Dudley Group NHS Foundation Trust (Keogh 2013)

Issues identified as needing urgent attention included;

- Improved clinical leadership.
- Equipment checks applied at ward level.
- Inadequate staffing levels.
- Shortfalls in learning from complaints and serious incidents.
- Complaints process not fit for purpose.
- The need to simplify governance processes.

The Royal Wolverhampton NHS Trust CQC (2012)

Issues identified as needing attention included;

- Shortage of midwives and concerns about the responsiveness of care for older people and staffing in surgical wards.

Manor Hospital CQC (2012)

Issues identified as needing attention included;

- Nursing care service users were not protected against the risks of unsafe or inappropriate care and treatment arising from a lack of proper information about them.
- An accurate record in respect of the care and treatment provided to each service user was not available.

At the monitoring visit we found that the university has liaised with Burton Hospitals NHS Foundation Trust, the Dudley Group NHS Foundation Trust, the Royal Wolverhampton NHS Trust and Manor Hospital and actioned appropriate plans to ensure students' practice learning experiences and support were not compromised.

The plans are robust, detailed and collaborative and the majority of the actions are complete. Evidence was demonstrable in practise as to the management of some specific issues including ward level equipment checks being undertaken; ward rotas and rest days being appropriate; and, good quality communication in verbal and documentary form.

Practice placement partners shared evidence of the attention to the action plans and outcomes achieved following external quality assurance reports.

The students and practice placement managers reassured us that students have not been disadvantaged due to the additional activity involved following the Keogh visits. In some instances students have helped with the developments initiated, to improve the situation, which has been a good learning experience for them.

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

<p>further discussion as part of this review.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. Review into the quality of care and treatment provided by 14 hospital trusts in England: overview report. Keogh, July 2013. 2. CQC report: Manor Hospital, December 2012. 3. CQC report: The Royal Wolverhampton NHS Trust, 2012. 4. University of Wolverhampton, partnership working in relation to external quality reviews of healthcare services (action plan). 5. Initial Meeting, 17 February 2014. 6. Meeting with Health Education West Midlands, 05 March 2014. 7. Governance and safeguarding meeting, 05 March 2014.
<p>Follow up on recommendations from approval events within the last year</p>
<p>There were no approval events within the last year to report.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. University of Wolverhampton self report 2013/14.
<p>Specific issues to follow up from self-report</p>
<p>All actions highlighted in the self- report are complete. Specific issues followed up include:</p> <p>Roll out the pilot of service user and carer engagement in selection of pre-registration adult nursing students to all fields of nursing and to midwifery.</p> <p>We found the faculty has built on achievements from the previous academic year in relation to service users and carers contribution to recruitment activity through their involvement with the interview process for the pre-registration nursing, adult field programme. Positive feedback has been received about this project. The service user and carer hub group now has representation from all subject areas in the faculty.</p> <p>Effectiveness of course journals</p> <p>We found that the university has revised its quality assurance processes. This is now focussed on continuous monitoring and enhancement instead of annual monitoring. All</p>

awards have a dedicated course management committee and a course journal. Online course journals are used to make a contemporary record of exceptions and good practice throughout the year, commenting on: recruitment; admissions; progression and achievement; placement learning; employability; curriculum review and development; learning; teaching; and, assessment.

Confirmation of the occupational health provider

The Royal Wolverhampton NHS Trust is confirmed as the provider for occupational health services.

Evaluate the hub and spoke model of placement allocation (nursing)

We found that students are all enabled to achieve their learning outcomes and competencies through placement learning. This includes the use of hub and spoke models and students and mentors report considerable support for this approach from the university.

Placement capacity (health visiting, mental health and learning disability nursing)

We found that placement capacity is a challenge due to rapid NHS change. Particular challenges have been experienced in the fields of health visiting, mental health and learning disability nursing. To ensure placements are secured for mental health and learning disability nursing, a dedicated appointment is to be made. The post holder will explore placement opportunities both traditional and outside of normal placement settings. Capacity has been effectively managed for health visiting placements and is reported as such by HV students.

Ongoing monitoring of sufficiency of practice teachers to support the increase in commissioned students in health visiting.

See section 1.2.1

Evidence / Reference Source

1. University of Wolverhampton self report 2013/14

Findings against key risks

Key risk 1 – Resources

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

<p>Risk indicator 1.1.1 - registrant teachers hold NMC recordable teaching qualifications and have experience/qualifications commensurate with role.</p>
<p>What we found before the event</p>
<p>All registrant teachers hold a NMC recordable teaching qualification and experience commensurate with the role. There is sufficient academic staff to enable students to meet their learning outcomes.</p> <p>To support the HV programme the university has appointed two additional lecturers with a health visitor background. Students have evaluated this positively.</p>
<p>What we found at the event</p>
<p>We found staff curriculum vitae (CVs) demonstrate that lecturers have appropriate qualifications and experience to support the programmes effectively.</p> <p>The NMC register database confirms that programme leaders have maintained their appropriate active registration and that they have NMC recordable teacher qualifications. Details of staff NMC registration are held by the faculty and currency of staff qualifications is monitored regularly. We found the academic teams are proactive and motivated.</p> <p>Workload allocation identifies protected staff time to support learning and assessment in practice.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. University of Wolverhampton, Faculty of Education Health and Wellbeing. Recording a teaching qualification with the NMC 2. NMC Website. 3. Initial Meeting, 17 February 2014 4. Staff CVs 5. Statement of Compliance 6. NMC programme approval reports: pre- registration nursing adult (2011) and specialist community public health nursing: health visiting (2011) 7. Job specification, Adult Nursing 8. Job specification, Head of Community Practice 9. Workload allocation guidelines 10. Faculty staffing structure

<p>11. Welcome and opening presentation, 05 March 2014</p>
<p>Risk indicator 1.2.1 - sufficient appropriately qualified mentors/sign-off mentors/practice teachers available to support numbers of students</p>
<p>What we found before the event</p>
<p>There are sufficient mentors/practice teachers for each student. Due regard is upheld. Practice placement managers are employed by the practice placement providers and work with a team of lecturers across geographical areas. University staff report there are sufficient practice teachers to support all commissioned students.</p>
<p>What we found at the event</p>
<p>Students told us they receive support from the academic staff, mentors, sign off mentors and practice teachers in the practice learning environments and greatly value the experienced personnel involved.</p> <p>Students are allocated a mentor/sign off mentor/practice teacher with due regard prior to commencing placement. Mentors work with pre-registration nursing (adult) students for a minimum of 40% of the time. Our findings demonstrate there are sufficient numbers of sign-off mentors.</p> <p>The faculty have worked in partnership with placement providers to prepare an increased number of practice teachers to support the commissioned increase in HV students. HV students report there are a sufficient number of practice teachers available to effectively support their learning.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. University of Wolverhampton self report, 2013/14 2. Sample placement evaluations, 2013 3. Guidance for hub mentors 4. Guidance for pathway (spoke) placement mentors/supervisors 5. Resources review plan. 6. Interviews with practice teachers and mentors, 05-06 March 2014. 7. Interviews with students, 05-06 March 2014.

8. Computer viewing of practice placement provider mentor/ practice teacher databases, 05 -06 March 2014.

Outcome: Standard met

Comments: no further comments.

Areas for future monitoring: none.

Findings against key risks

Key risk 2 – Admissions & Progression

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

Risk indicator 2.1.1 - admission processes follow NMC requirements

What we found before the event

Adult nursing

There are clear selection and admission criteria in place. Numeracy and literacy testing is required for prospective candidates to meet the entry criteria.

There are processes in place to ensure that students meet the requirements of good health and good character. All students have a Disclosure Barring Service (DBS) and occupational health check on admission and are required to self-report their status annually. Character references are taken up. The six C's are embedded in the selection process.

There is equality and diversity training for all involved in the selection of candidates.

Health visiting

Recruitment processes have been centrally co-ordinated and managed for health visiting as part of the HV implementation plan.

What we found at the event

The university has effective and robust procedures for the recruitment and selection of all students. There is a programme of training for all involved in the selection of candidates which includes equality and diversity training.

Adult nursing

Entry requirements are made clear to applicants using a range of communication channels: written, online and verbal through open days.

Applicants who are short listed have a face to face interview and are assessed against agreed criteria to ensure they possess the caring qualities required of a nurse. Service users and practice placement providers confirmed that the interview process is effective in selecting candidates with the appropriate values and attitudes for nursing.

We found there is effective collaboration between the university, practice colleagues and service users in the selection and interviewing process.

All nursing students have a DBS and occupational health check on admission and are required to sign a declaration of good health and good character annually at progression points.

Health visiting

HV students are either sponsored (given employment and a placement for the duration of their programme) or seconded from their current role and local employment and recruited once successful. Until recently recruitment processes have been centrally co-ordinated and managed for HVs as part of the implementation plan. Subsequently the recruitment is now managed in the NHS with input from the university.

The application process for health visiting is described to candidates in publicity material. All applicants apply to the university and the application form is screened against the admission criteria by the university HV programme team.

Applicants apply to the respective practice placement provider in order to secure sponsorship or secondment. Interviews for HV are undertaken in employing trusts in partnership with employers and the university.

Some trusts include service users within the initial interview process and also involve them in the final interviews for qualified HV posts. We found Wye Valley NHS has had a young person's representative as part of the interview panel.

Students undertaking HV programme have DBS and occupational health clearance completed by the employing organisation and confirm their DBS status to the university. Student occupational health clearance is identified in a letter to the university.

The university currently has a self-declaration process in place to assure DBS and occupational health changes are acted upon at progression points and at the conclusion of the programme prior to the student registering on part three of the NMC register.

The university may wish to consider introducing a documentary approach to self declaration of good health and good character to replace the current approach.

<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. NMC programme approval report, pre-registration nursing, adult, 2011 2. AEI Requirements Report 1.2 3. University of Wolverhampton, School of Health and Wellbeing, Risk assessment of good character on entry to professional programmes 4. University of Wolverhampton, Policy Statement on Equality and Diversity, 1.2.Explanatory notes 5. Health Visiting Checklist 6. University of Wolverhampton Policy on Safeguarding Children, Young People and Vulnerable Adults within the university - Version 4, 20th August 2012 7. Admission and progression review plan 8. Initial visit meeting, 17 February 2014 9. Appointment of student health visitor letter and check list 9. Meetings with service users, mentors, students, employers 05 -06 March 2014
<p>Risk indicator 2.1.2 - programme providers procedures address issues of poor performance in both theory and practice</p>
<p>What we found before the event</p>
<p>Faculty and university policies and processes are in place to manage FtP. These include clear guidelines are to deal with incidents of misconduct.</p> <p>The fraud response plan details how academic staff may disclose their concerns about actual or suspected fraudulent activity within the university and how these will be handled.</p>
<p>What we found at the event</p>
<p>We found that the faculty suitability panel has responsibility for managing FtP of students throughout the programmes including:</p> <ul style="list-style-type: none"> • On admission to the programme. • Annual self-declaration of good character and health. • Professional conduct throughout the programme. • At the end of the programme prior to entry to the NMC register. <p>The suitability panel which includes practice placement providers meets monthly to conduct its business.</p>

<p>As part of its suitability for practice procedure the faculty has developed a termination and suspension of placement policy that supports the immediate suspension of students if they pose a risk to the safety of service users. This was introduced as a formal procedure for removing students from placement separate to assessment regulations for summative assessment of practice.</p> <p>Twelve adult nursing students and one SCPHN student were referred to the suitability panel in 2012-13. Of twenty two referrals in 2012/13 for all professions seven students were excluded, most for fraudulent activity.</p> <p>Anti-fraud policy and processes are evidenced as robust. The NHS counter fraud service has provided training to admissions staff to further minimise the risk of fraud in relation to false claims for the NHS bursary.</p> <p>The outcomes of the fitness to practice suitability panels, anti-fraud policies and processes confirm that cases are dealt with fairly and proportionately and contribute to public protection.</p> <p>Where students have failed theory or practice assessment components, processes are initiated to ensure NMC standards for progression points and the twelve week rule are met.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. University of Wolverhampton fraud policy and fraud response 2. AEI requirements 1.3 3. NMC programme approval report, pre-registration nursing, adult, 2011 4. NMC programme approval report SCPHN, 2011 5. Wolverhampton Fitness to practice report for the NMC, Feb 2014 6. University of Wolverhampton, Fitness to practise policy and procedure 7. Faculty Suitability Procedures 8. University of Wolverhampton programme handbooks: BNurs (Hons) Registered Nurse: Adult, 2013/14
<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>The faculty has developed procedures for addressing poor practice.</p>
<p>What we found at the event</p>

<p>We found that mentors and practice teachers are fully aware of the procedures to implement addressing concerns regarding poor performance or inappropriate behaviour of students.</p> <p>They were able to provide examples of when they had used the procedure to raise concerns about a student's practice. All identified that they had been well supported by the programme team.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. University of Wolverhampton, School of Health and Wellbeing, Escalating Concerns 1, Procedure and Guidance 2. Initial Visit, 17 February 2014 3. Discussion with HEWM 4. Shropshire Community Health NHS Trust flow chart for escalation of concerns 5. Meetings with mentors, practice teachers, students, employers 05 - 06 March 2014
<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>There is an established process for accreditation of prior learning (APL) in place.</p>
<p>What we found at the event</p>
<p>We found that all APL claims are considered by the faculty's APL committee. APL procedures are consistent with the QAA Code of Practice and take account of NMC requirements. The APL committee is chaired by an NMC registrant.</p> <p>We viewed evidence of successful APL claims, by nursing students (adult) and concluded there is effective management of APL for the pre-registration nursing (adult) programme.</p> <p>There were no APL claims by HV students.</p>
<p>Evidence / Reference Source</p>

1. University of Wolverhampton, Guidelines for accreditation of prior learning Version 2.0
2. APL claim database

Outcome: Standard met

Comments:

- We are satisfied that the university has an effective self-declaration process of good health and character at progression points and at the conclusion of the HV programme, prior to the student registering on part 3 of the NMC register. However, this might be strengthened by introducing a documentary process.

Areas for future monitoring:

- Documentation to support the self-declaration process at the end of the SCPHN HV programme.

Findings against key risks

Key risk 3- Practice Learning

3.1 Inadequate governance of and in practice learning

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

3.3 Assurance and confirmation of student achievement is unreliable or invalid

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

What we found before the event

Effective partnerships are demonstrated with NHS practice placement providers and the independent sector and these have been commended at approval events and previous monitoring events.

Programme committees and development groups include senior practice placement providers.

Early findings revealed that the hub and spoke model for pre-registration students has evaluated well. It is reported in the university 2013/14 self-assessment report that

students were not always able to return to the same mentor in the hub placement due to service reconfiguration/organisational changes. However, all students have been supported to achieve all placement learning outcomes, and been able to progress to their next year of study.

There have been challenges in the local NHS community to improve patient care delivery. It was reported that there is a close working relationship with practice placement providers ensuring that, as changes occur, implications for student placements can be monitored and appropriate action taken.

Escalating concerns policies and procedures meet NMC requirements. The faculty has developed these further to include the sharing of information following adverse outcomes of third party reviews and responding to concerns about poor practice.

HV placements are supported by practice placement managers and practice teachers.

Attempts to secure additional local placements to support return to practice (RtP) nursing students, seeking to meet competencies for HV, have been unsuccessful as priority is given to SCPHN HV students. The university confirms they will not support RtP nursing students to complete health visiting competencies unless a placement is assured before commencing the RtP nursing programme.

What we found at the event

We found that recent approval reports commended the faculty on their excellent partnership arrangements with practice placement providers and service users/carers and this continues to be demonstrated. Partnership working extends to a wide range of activities, beyond programme design and delivery, including; selection of students, management of student concerns, educational audit, placement evaluation and conjoint projects.

The former West Midlands strategic health authority (SHA) developed an education and practice partnership agreement that sets out a joint commitment by the practice placement provider and university to enhance placement learning. These 'pledges' continue to be embedded in the education commission quality standards which are central to the annual review of the university.

The placement working group is a robust partnership involving university and placement provider representatives. This group reviews the quality of all practice learning environments; ensures placement capacity for student numbers and link tutor allocation to placements. This process is on-going, and manages outcomes of health and care service redesigns.

In line with NMC requirements, educational audits are undertaken biennially, in partnership, to determine the suitability of practice learning environments.

When a placement area has been removed from the placement circuit it will not be reinstated until a satisfactory audit is completed. The hub and spoke placements, in pre-registration nursing programmes, are reported as successful. Mentors work in partnership across placements to support this activity.

We found there are clear and effective processes in place to protect service users, including FtP and escalation of concerns processes and procedures. These are well articulated and understood by the students, mentors, practice teachers and employers.

In situations in which third party reviews have specific implications for approved programmes, these are discussed at the relevant course management committee. Students, mentors, sign off mentors and practice teachers identify how, and to whom, to escalate concerns regarding poor care delivery.

We found that there are effective strategic and operational partnerships in place.

Four of the practice placement partners: BHFT; the DGFT; the RWT; and, Manor Hospital received adverse CQC and Keogh reviews in 2013. We found that effective partnership working between the academic teams, the practice placement providers and the commissioners has ensured that concerns have been addressed and appropriate levels of response agreed and implemented. The students and practice placement managers reassured us that students have not been disadvantaged due to the additional activity involved following the Keogh and CQC visits.

An area identified for enhancement and collegiate development is to bring together the activity already in place to manage escalating concerns. We heard all stakeholders have their own processes in place but to date these processes have yet to ensure complete transparency for all stakeholders. Discussion with HE West Midlands and the university identifies a need to better share information that will enhance the transparency of actions taken to concerns raised and promote best practice.

Evidence / Reference Source

1. NHS West Midlands education and practice partnership agreement (EPPA), 2010
2. University of Wolverhampton, School of health and wellbeing, practice management strategy group; Terms of reference
3. University of Wolverhampton, School of health and wellbeing: placement audits
4. University of Wolverhampton, self report, 2013/14
5. University of Wolverhampton, simulated learning statement
6. University of Wolverhampton, nursing elective placement experience
7. School of Health & Wellbeing, Code of conduct for users of the practical skills teaching zones
8. Discussion with Health Education West Midlands, 05 March 2014
9. Guidance for the removal of a student following escalation of concerns regarding bad practice/adverse outcomes of a third party review
10. NMC programme monitoring report: pre-registration nursing , 2011
11. Meetings with mentors, practice teachers, students, employers 05 - 06 March 2014

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

What we found before the event

The NMC programme approval: pre-registration nursing (2011) identified future monitoring was required of the service user strategy throughout the curriculum.

Building on the achievements from the previous academic year, service users and carers have contributed to recruitment activity through their involvement with the interview process for pre-registration adult nursing. Positive feedback has been received from service users and the programme team about this project. The service user and carer hub group now has representation from all subject areas in the faculty.

What we found at the event

We found that a service user/carers co-ordinator has been appointed to lead the implementation of the service user and carer strategy. The strategy is reported as highly effective by the service users and carers and HE West Midlands.

Service users and carers feel valued as a central component of the university team. They commended the inter-professional nature of the student experience and identified the value of their contribution to the problem based learning module.

Adult nursing

Service users and carers contribute the review of the selection process for nursing. They are involved in selection interviews for all fields of nursing and gave examples of how their contribution was valued by the candidates as well as the faculty.

Practitioners contribute to the design and the evaluation of the curriculum and contribute to teaching sessions.

Health visitor

We were given examples of how service users and carers contribute to the SCPHN HV programme delivery. They are supported by a member of the academic team and contribute to the perspectives of public health and social policy module and the specialist practice module.

Practice teachers routinely contact families/clients to gain feedback about students' contribution to their public health needs. Whilst this is informal, it contributes to formative and summative assessments, recorded within the practice assessment documentation. The HV students practice assessment document has a user feedback page with comments about the students' performance within the home.

Evidence / Reference Source
<ol style="list-style-type: none"> 1. University of Wolverhampton self report, 2013/14 2. Working together toolkit 3. Service user and carer meeting, 05 March 2014 4. Meetings with mentors, practice teachers, students, employers 05 and 06 March 2014
Risk indicator 3.2.2 - academic staff support students in practice.
What we found before the event
Academic staff support students in practice and are visible in placements. Their role in practice is considered important and functions well alongside the practice placement managers' and practice teachers' activity.
What we found at the event
<p>Adult nursing</p> <p>We found there are ten academic staff who are allocated half time to work with practice placement managers across geographic locations and also the private, voluntary and independent sector. Students report that this team provides effective and available support in practice.</p> <p>All students have progress review meetings in practice with their designated mentor and their personal tutor is also involved in this activity.</p> <p>Health visiting</p> <p>Health visiting link lecturers are allocated to every practice learning environment and visit at least once every semester. Students are aware of their link lecturer and have their contact details. Students gave examples of discussing actual cases with the link lecturer during the visit. The effectiveness of this process was well evaluated by students who report that the link lecturer enhances learning by the application of theory to practice. We found link lecturers are always contactable and highly valued by the students, practice teachers and mentors.</p>
Evidence / Reference Source
<ol style="list-style-type: none"> 1. Practice learning review plan.

2. Workload allocation guidelines.
3. Meetings with mentors, practice teachers, students, 05 - 06 March 2014.

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

What we found before the event

Programmes for mentor preparation and mentor updates are in place. Monitoring reports and practice documents provide evidence that those who supervise students in practice are properly prepared.

Due to the increase in the commissions for HV numbers the university has increased its number of the practice teacher preparation programmes. A timetable of practice teacher updates is publicised at the beginning of the academic year. These events are held in the university and are well attended and valued by practice teachers.

What we found at the event

Adult nursing and health visiting

Students, mentors, sign off mentors, practice teachers and employers report students are supervised in practice by properly prepared and supported mentors/practice teachers. This is confirmed by the placement management system which ensures that students are only allocated to mentors/sign off mentors and practice teachers who are on the mentor register.

Employers told us that there is a strong focus on mentorship and that all stakeholders place priority on good and effective mentorship and practice teacher preparation.

A reward and recognition system is in place in some of the practice learning environments for mentors who have excelled in their responsibilities.

Mentors and practice teachers confirm there are strong links with the faculty and representatives from practice meet regularly with programme staff and provide face-to-face updates within the placements.

Mentors and practice teachers informed us that communication and liaison with the practice placement managers and the university staff is very important and concerns are frequently discussed jointly and decisions acted upon.

Inter assessor reliability is maintained and this is confirmed by students, mentors and practice teachers.

External examiner feedback about the assessment processes confirms effective preparation of mentors and practice teachers who apply fair and appropriate

assessment of practice learning outcomes and competencies/proficiencies.

Health visiting

Increased numbers of HV students allocated to a practice teacher has resulted in the 'long arm' mentoring model which has been implemented successfully. We found this model is effective but has an impact on the type of case load the practice teacher might hold.

The university should review this to ensure all practice teachers have their own case load rather than accessing case loads of colleagues.

Evidence / Reference Source

1. Mentor Toolkit.
2. Teaching in Professional Practice (practice teacher) Level 6, 7, PG Cert Education for health, social care and allied professionals
3. University of Wolverhampton practice learning unit: SITS & e:Vision processing and practice learning strategy, 2012 – 2017
4. External examiner report nursing, 2012/13
5. University of Wolverhampton self report, 2013/14
6. NMC programme approval report: Learning and assessing in practice programme, 2011
7. Practice evidence portfolio (PEP) BSc (Hons) Specialist Community Public Health Nursing Health Visiting/School Nursing, 2013
8. Practice teacher update PowerPoint presentation, 2014
9. Meetings with mentors, practice teachers, students, 05 and 06 March 2014.

Risk indicator 3.3.2- mentors, sign off mentors and practice teachers are able to attend annual updates sufficient to meet requirements for triennial review

What we found before the event

Previous monitoring reports noted triennial reviews are completed and recorded on the mentor database however; records of triennial reviews do not use a standardised report format. The principal lecturer for practice learning and innovation has worked with all practice placement managers and practice teachers to ensure that information about triennial review is held centrally on the local mentor registers.

What we found at the event

Mentors and practice teachers told us they were able to attend training and annual updates to meet requirements for triennial review. Peer discussion and support was described as an important and effective part of the updates.

All sign off mentors and practice teachers were able to describe the triennial review process and their progress to achieve NMC requirements.

Evidence / Reference Source

1. University of Wolverhampton Self Report , 2013/14.
2. Computer viewing of practice placement mentor database.
3. Meetings with mentors, practice teachers, 05- 06 March 2014.

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

What we found before the event

The NMC programme approval: SCPHN HV 2011 identified the process for co-ordination and management of practice teacher updates and triennial review required future monitoring.

Live registers of mentors are managed in the placement setting, they are accurate, and are considered in the context of the identified capacity on the audit.

Triennial review is captured on the register for mentors, sign off mentors and practice teachers.

Sign off mentors, practice teachers and teacher annotation is captured on the register.

What we found at the event

We supported the confirmation by practice placement managers that the mentor/practice teacher databases are up to date, accurate and reflected in the educational audits. Triennial review is coordinated effectively.

Mentor registers inform audit capacity and the database is used as a training needs analysis to determine the number of mentors and practice teachers required by the practice placement provider.

We found that mentor registers are shared with the university on a three monthly basis, and are reviewed by the Principal lecturer for practice learning and innovation. This activity is supported by a newly appointed administrator to the practice learning unit.

The local registers of mentors for the independent sector are held by the university. We viewed a sample of mentors and confirmed the records as accurate and complete.

Evidence / Reference Source

1. NMC programme approval report: SCPHN HV, 2011
2. Practice learning review plan
3. Mentor / practice teacher registers/databases
4. Meeting with practice placement manager, 06 March 2014

Outcome: Standard met

Comments:

- We found that the university has an effective escalating concerns process. However, discussion with HE West Midlands and the university suggests that better sharing of information across all stakeholders will enhance the transparency of actions taken to concerns raised and promote best practice.
- To accommodate increased health visiting students the university has successfully implemented the 'long arm' mentoring model. This involves students being supervised by a qualified HV mentor on a day to day basis with overall supervision from a qualified practice teacher. This model is effective but has an impact on the type of case load the practice teacher might hold. The university should review this to ensure all practice teachers have their own case load rather than accessing case loads of colleagues.

Areas for future monitoring:

- The transparency of processes to manage and share information related to escalating concerns by all stakeholders.
- The practice teacher workload model ensures all practice teachers have their own case load.

Findings against key risks

Key risk 4 - Fitness to Practice

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

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

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

What we found before the event

NMC programme approval reports (2011) for pre-registration nursing (adult field) and SCPHN HV (2011) and approved programme documentation identify learning and teaching strategies and student support to enable students to achieve NMC learning outcomes, competencies and proficiencies at progression points and for entry to the register.

Adult nursing

Progress is being made in the areas identified as areas for improvement in the National Student Survey (NSS) 2013. Issues include assessment and feedback and an action plan has been implemented and will be monitored to address students concerns.

What we found at the event

We found that programme outcomes are well articulated and comprehensively mapped to the modules and NMC standards. These are appropriate for achieving the programme aims and to ensure the student is fit for practice and award.

A range of learning and teaching strategies facilitates students' achievement of the programme outcomes. These include appropriate opportunities to rehearse practice and simulated learning, with some excellent examples demonstrated on Wolf (the student IT platform).

Preparation for placement is included in the taught content which also addresses working in primary and secondary care settings and lone working.

Students complete all theoretical and clinical assessments in order to progress to the next level of the programme, and ultimately to qualify for the final award. The programme team confirmed that the norm for a student would be to undertake two attempts and go through the examination board prior to progression. The standard is reflected in the student handbook.

External examiners report effective outcomes in both theoretical and practical assessments.

Commissioners and employers report the success of the preparation of the students who are fit for practice and purpose and this is reflected in the high percentage of students who are employed locally.

Adult nursing

Progression points occur at the end of each year, and students are assessed against progression criteria, which are recorded in the practice assessment document and the ongoing record of achievement.

The NSS results continue to show overall improvement in student satisfaction. The programme team has developed action plans in response to the NSS, to further enhance the student experience.

Health visiting

The progression point for health visiting occurs at the end of the programme for entry to the professional register.

Part time enrolment to the programme is infrequent. The faculty however, may wish to introduce additional information in the course guide and programme timetable of the structure of part time route for the students. This will clearly demonstrate how the students will be assured of the ten weeks placements experience on conclusion of their programme in line with NMC requirements.

Evidence / Reference Source

1. NMC programme approval report: pre-registration nursing, adult. (2011).
2. NMC programme approval report: SCPHN HV / School Nursing. (/2011)
3. School of health and wellbeing , strategy for the development of inter-professional education 2010 – 2013
4. University of Wolverhampton, programme modification Letter: BNurs (Hons) registered nurse: adult/ mental health/ learning disabilities/children, January 2013
5. University of Wolverhampton, self report, 2012
6. Fitness to practise review plan
7. External examiner Reports, 2012/13
8. Wolf Student Portal
9. Programme handbooks: BNurs (Hons) registered nurse: adult 2013/14
10. Meetings with students, mentors, practice teachers, commissioners, employers, 05 and 06 March 2014

Risk indicator 4.2.1 - students achieve NMC practice learning outcomes, competencies and proficiencies at progression points and for entry to the register for all programmes that the NMC sets standards for

What we found before the event

NMC programme approval reports (2011) for pre-registration nursing (adult field) and SCPHN HV (2011) and approved assessment of practice documentation identifies the practice learning outcomes, competencies and proficiencies students have to achieve.

A recommendation was made at the pre-registration nursing (adult) approval event that the assessment processes should enable students to demonstrate fitness for practise.

Subsequently a standardised action plan has been developed for use on nursing and midwifery programmes. Guidance for students and staff about the completion and review of action plans is incorporated into the continuous assessment of practice documents. This information has been incorporated into the practice learning handbooks, and is included within mentor updates. Failing students are monitored at locality practice team meetings (nursing) and course monitoring. This revision is reported as successful.

What we found at the event

Adult Nursing

We found that learning opportunities in practice are pre-planned well in advance to ensure the student has a good mix of primary and secondary care experience. Pathways of care are well planned and effective to enhance students practice learning experiences. Planning for placements students report a diverse and valuable range of placement learning opportunities which are effective to ensure an appropriate range of placements to achieve programme outcomes, competencies and proficiencies.

Essential skills clusters are mapped across the programme. European Union (EU) directive requirements are comprehensively addressed with experience gained in all fields.

Placement hours are clearly articulated in the handbook and weeks of study and placement are evidenced on the plans of training.

The student's achievement of clinical competence is confirmed by a sign off mentor who has successfully completed a sign off mentorship preparation programme. There are opportunities to discuss inter-assessor reliability and mentors report their confidence in this.

Our findings demonstrate the assessment, annual progress review, the portfolio, external examiner scrutiny and sign-off mentor processes are effective and used to confirm achievement of NMC standards and programme outcomes.

HE West Midlands and employers confirm students are fit for purpose. This is evidenced by the employment destination details.

Health visiting

We found that there is a comprehensive practice evidence portfolio which covers all of the NMC proficiencies.

Learning opportunities provided by practice teachers and mentors in practice are reported by the students to be well structured by the practice teachers and mentors in placement. HV workshops and supervision sessions are organised on a weekly basis.

The three weeks (15 days) alternative practice in different public health settings was described by practice teachers, mentors and students as a valuable and effective learning experience. Students confirmed that they complete a ten week practice consolidation period.

The supervising practice teacher completes a declaration form confirming that the student has successfully completed 125 days in clinical practice (including 15 days alternative public health practice); achieved all the NMC standards of proficiency; and, is competent for entry on to the third part of the NMC register.

HV students who are registered midwives are able to describe how they maintain their intention to practise as a midwife.

Practice teachers and employers are confident that HV students are fit for purpose on and employment on completion of the programme. This is evidenced by the employment destination details.

Evidence / Reference Source

1. NMC Programme approval report: pre-registration nursing: adult. (2011).
2. NMC Programme approval report: SCPHN HV and school nursing. (2011).
3. University of Wolverhampton, programme modification letter: BNurs (Hons) Registered Nurse: adult/ mental health/ learning disabilities/children. June 2013
4. Ongoing achievement record
5. Pre-registration nursing B Nursing (Hons) practice assessment document Year 1, adult field
6. Pre-registration nursing B Nurs (Hons) practice assessment document Year 2, adult field
7. Pre-registration nursing B Nurs (Hons) practice assessment document Year 3, adult field
8. Practice evidence portfolio (PEP) BSc (Hons) Community public health nursing HV/SN 2013
9. BSc (Hons) Specialist Community Public Health Nursing (Health Visiting) (School Health) Course Guide 2103/14
10. NMC review- The mapping of the six 'C's and quality assurance across the curriculum for the B. Nurse (Hons) programme.
11. Meetings with students, mentors, practice teachers, commissioners, employers, 05 and 06 March 2014

12. Outcome: Standard met

Comments:

- Whilst few health visiting students access the part time option, for those that do, we found limited

information about the programme structure for this option and how the ten weeks practice consolidation period, at the conclusion of the programme, is assured.

Areas for future monitoring:

- Information provided in documentation about the part time structure in the SCPHN HV programme.

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

Internal QA systems are robust. There is an annual internal review of all modules.

All programmes have a dedicated course management committee and a course journal. Online course journals are used to make a contemporary record of exceptions and good practice throughout the year. Commenting on recruitment, admissions, progression and achievement, placement learning, employability, curriculum review and development, learning, teaching and assessment.

The university self report 2012/13 identified student evaluation and external examiner feedback on the pre-registration nursing programme indicated that students had an excessive assessment workload. This was reviewed and changes have been made to the module assessment. These modifications were approved by the faculty validation panel and the modifications were endorsed by the faculty quality and enhancement committee in November 2012. Approval to make the modifications was obtained from the NMC and has been positively evaluated by students.

The university has reviewed the effectiveness of the online module evaluation. A range of promotional activities were introduced and have been effective in improving the response rate to online evaluations. In addition, to the end of module online evaluation, all module leaders are required to carry out mid-module evaluation to enhance the learning experience of students whilst they are still studying the module.

<p>What we found at the event</p>
<p>Adult nursing and health visiting</p> <p>We found all students are requested to complete a practice learning environment evaluation. If issues arise that require prompt action these are discussed, with the relevant practice placement team and appropriate actions implemented.</p> <p>All remaining evaluations are collated by link lecturers; discussed with the practice placement managers; and, the outcomes are communicated to mentors and placement managers on a regular basis and are used as evidence during the educational audit of the placement.</p> <p>The student voice is heard through a number of mechanisms and students acknowledge that changes have been made in light of their feedback particularly with regard to the previous excessive assessment workload.</p>
<p>Evidence / Reference Source</p>
<ol style="list-style-type: none"> 1. University of Wolverhampton self report, 2013/14 2. University of Wolverhampton. Self assessment programme monitoring report. March 2012 3. University of Wolverhampton student evaluation screen shots 4. Nursing course level NSS action plan 2013 5. Course Journals 6. NMC (Mott MacDonald) Letter confirming programme modifications 7. Meetings with students, 05 and 06 March 2014
<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>External examiners report that the processes and standards in the faculty are good and comparable with other institutions UK wide.</p> <p>External examiners are invited to meet with students and mentors/practice teachers.</p> <p>Escalating concerns are identified in section 3.1.1.</p>
<p>What we found at the event</p>

We found evidence of effective partnership working and collaboration between all stakeholders. Strategic and operational communication and engagement between the university, practice placement providers and commissioners in response to placement concerns is discussed in section 3.1.1.

External examiners hold due regard for the field/programme they are examining. They review theory and practice and have the opportunity to talk to the students, practice teachers and mentors.

External examiners annual report is responded to by the programme team and monitored by the faculty quality and enhancement committee, that reports to the university quality and enhancement committee. An exception report of any key issues is submitted to the university academic board. No concerns were raised by external examiners in relation to the programmes being monitored.

Evidence / Reference Source

1. University of Wolverhampton Self Report 2013/14
2. Quality assurance review plan
3. External examiners reports 2012/13
4. NHS West Midlands education and practice partnership agreement (EPPA), 2010
5. Guidance for the removal of a student following escalation of concerns regarding bad practice/adverse outcomes of a third party review
6. Meetings with commissioners, employers, 05 and 06 March 2014

Outcome: Standard met

Comments: no further comments.

Areas for future monitoring: none.

Personnel supporting programme monitoring
Prior to monitoring event
Date of initial visit: 17 February 2014
Meetings with:
<p>Head of adult nursing (City NHS Trust)</p> <p>Head of community practice</p> <p>Head of Quality: Professional standards and service user engagement</p> <p>Head of mental health nursing</p> <p>Associate Dean, quality and enhancement</p>
At monitoring event
Meetings with:
<p>Head of adult nursing (City NHS Trust)</p> <p>Head of adult nursing (Walsall and Burton)</p> <p>Head of quality and professional standards</p> <p>Head of community practice</p> <p>Course leader, health visiting</p> <p>Senior lecturer, health visiting</p> <p>Associate Dean, undergraduate and enterprise</p> <p>Associate Dean, quality and enhancement</p> <p>Service user and carer co-ordinator</p> <p>Head of mental health nursing</p> <p>Head of home and EU recruitment,</p> <p>Service users and carers</p> <p>Head of nursing, education & safeguarding, Royal Wolverhampton Trust</p> <p>Practice placement manager, Dudley Group of Hospitals,</p> <p>Dean of Faculty</p> <p>Health Education West Midlands Education, commissioning and quality programme lead</p> <p>Queen's Hospital, Burton upon Trent, academic practice team</p> <p>Queen's Hospital, Burton upon Trent, Director of nursing</p>

Walsall Manor Hospital, Director of nursing
Royal Wolverhampton Hospitals Trust, Director of nursing

Meetings with:

Mentors / sign-off mentors	47
Practice teachers	16
Service users / Carers	5
Practice Education Facilitator	12
Director / manager nursing	9
Director / manager midwifery	0
Education commissioners or equivalent	2
Designated Medical Practitioners	0
Other:	0

Meetings with students:

Student Type	Number met
Nursing - Adult	Year 1: 27 Year 2: 28 Year 3: 20
SCPHN - HV	29