

NMC UK Wide Quality Assurance Framework PROGRAMME MONITORING REPORT

	University of Surrey			
	In partnership with:			
	Ashford and St Peter's Hospitals NHS Trust			
	Central Surrey Health			
	Frimley Park Hospital NHS Foundation Trust			
	Western Sussex Hospitals NHS Trust			
Programme Provider Name:	Royal Surrey County Hospital NHS Foundation Trust Surrey and Borders Partnership NHS Foundation Trust			
(Education provider and				
associated practice placement				
providers)	Surrey and Sussex Healthcare NHS Trust			
	Surrey PCT			
	Sussex Community NHS Trust			
	Sussex Partnership NHS Trust			
	North Hampshire NHS Foundation Trust			
	Southern Health NHS Foundation Trust			
NMC Provider Code:	6166			
Programmes Monitored and clinical focus:	☐ Pre registration nursing ☐ Adult ☐ Child ☐ Mental health ☐ Learning disabilities ☐ Pre registration midwifery ☐ Specialist community public health nursing ☐ HV ☐ SN ☐ OH ☐ FHN ☐ Learning & assessment in practice ☐ Mentor ☐ Practice teacher ☐ Teacher ☐ Supervisor of midwives ☐ Midwifery ☐ Return to practice ☐ Nursing ☐ Midwifery ☐ Specialist practitioner ☐ Adult nursing ☐ Mental health ☐ Children's nursing ☐ Learning disability nurse ☐ General practice nurse ☐ Community mental health nursing ☐ Community learning disabilities nursing ☐ Community children's nursing ☐ Community children's nursing ☐ District nursing ☐ Overseas nurses programme ☐ Overseas midwives programme ☐ Overseas midwives programme ☐ V 100 ☐ V 150 ☐ V 300			





	Nurses part of				
	RNA	RNMH	☐ RNLD	RNC	
	Midwives part of the register				
Part of Register Programme/s Lead to:	⊠ RM				
	Specialist community public health nurses part of the register				
	RHV	RSN	ROH	RFHN	
	RSCP				
	Recorded qualifications				
	⊠ V100	☐ V150	☐ V 300		
	☐ Teacher				
	Specialist practitioner				
	SPA	SPMH	☐ SPC	☐ SPLD	
	SPGP	☐ SCMH	☐ SCLD	☐ SPCC	
	⊠ SPDN				
	Non recordable				
	☐ Supervisor of midwives				
Managing Reviewer / Reviewer(s):	Managing Reviewer: Dr Brenda Poulton				
	Reviewers:	Mrs Jan Denton - SPDN, V100			
		Mrs J	Mrs Judith Porch - Midwifery		
		Ms Michelle Lyne, NMC Observer			
Academic Year:	2011/12				
	06-07 December 2011				
Date of Monitoring Event:	00 07 December 2011				
Date of Report:	14 December 2011				





SUMMARY OF FINDINGS

The University of Surrey delivers a range of Nursing and Midwifery programmes along with preparation for Paramedics and Operating Department Practitioners. These programmes are located within the Division of Health and Social Care which is part of the Faculty of Health and Medical Sciences. From January 2012 this will become the School of Health and Social Care.

All registrant teachers contributing to NMC approved programmes hold, or are working towards, an NMC recorded teacher qualification. Programme leaders for Midwifery and Specialist Practice (SPQ) District Nursing (DN) with integrated nurse prescribing (V100) are NMC recorded teachers and have experience and qualifications commensurate with their roles. The SPDN programme is delivered by an enthusiastic and supportive team of lecturers. The V100 programme is delivered by a single module, and the pharmacological components are taught by a pharmacologist. There are sufficient midwifery lecturers and students receive excellent support from academic staff. Practice support for the SPDN programme is excellent and all students are supported by a qualified SPDN Practice Teacher (PT), for which there is currently just sufficient to match student numbers. Students spend at least 40% of time with their PT. There are robust strategies in place to monitor the numbers of Midwifery Mentors who work with students for 40% of their time in midwifery clinical practice. Midwifery clinical governance is addressed through supervision. National Clinical governance reports are posted on the supervision network and each Trust devises their own action plan and benchmark against their own services. There are regular face to face PT (for SPQ and SCPHN) updates which are well attended with registers taken and email information sent to those who cannot attend. There is strong support from Heads of Midwifery to enable mentors to attend annual mentor updates which are part of the service provider mandatory training programme.

The SPQ DN recruitment processes are robust and managed collaboratively between Trusts and the University, with CRB protocols in place. Recruitment and selection processes for pre-registration Midwifery programmes meet NMC requirements with all successful applicants having enhanced CRB clearance and health screening before commencement on the programme. All interviewers have equality and diversity training. Currently, there is no involvement of service users/carers in interviews but a few service users have been involved in setting interview questions. There are robust processes in place for applicants self declaring a conviction or caution. Students self declare continued good health and good character annually on re-enrolment. There is a clear Fitness to Practise (FtP) procedure which has been used on five occasions over the last year. The Cause for Concern process is clearly set out in Student Handbooks and Mentors and PTs are aware of the process. There is a recognised AP(E)L system. The numbers of students transferring into the three year midwifery programme from other AEIs is small.

There is very good collaboration between the University and its principal SHA partner and service providers. The Workforce Education Advisory Group includes programme leads from the University and Trust representatives, working across 3 county groups. There is a robust audit process with audits being carried out annually with input from the University and the relevant service partners. SPDN audits are up to date and Mentor register forms are sent to practitioners twice a year, to update the database, which managers have access to. Midwifery clinical learning environments meet NMC requirements and actions from previous audits have been addressed. The University provides a regular programme of Mentor and PT updates in conjunction with the Trusts. Both Mentor and PT programmes cover: failing students; accountability; role of the Mentor/PT; Code of Conduct. A Mentor Passport and a Triennial Review document have been developed. All mentors/PTs understand the process for triennial review. Mentor/PT databases are accurate and provide evidence that Mentor





preparation; updates and the majority of triennial reviews are up to date. There is a Service User and Carer Group which meets four times per year. For the SPDN programme representatives from the Expert Patient group have attended teaching sessions to meet the students. In the current Midwifery curriculum there is limited involvement of service users and carers. However, the new curriculum scheduled for re-approval in 2012 plans to address these issues. SPDN students and PTs have excellent links with tutors, and at least 3 visits per year per student. Midwifery lecturers are attached as Link Tutors to each of the Service Provider host sites; regularly visit placement areas; and are easily contacted by e-mail or telephone. Inter-rater reliability and validity of practice assessments are monitored through moderation of the practice portfolios and discussed at Mentor/PT development sessions. The SPDN portfolio is currently assessed as Pass/Fail. Midwifery assessment of practice includes the ongoing achievement record and a grid for grading of practice.

All SPDN students undertaking the modular route have considerable community staff nurse experience, and therefore are clinically very competent. There is emphasis upon public health, physical assessment and management skills within the curriculum content. Service commissioners and providers confirm that students exiting the SPQ DN programme are fit for purpose and practice. There is good integration of theory and practice within the Midwifery programmes which are well designed, enabling students to achieve learning outcomes. The relevance, appropriateness and currency of the programmes are secured by partnership working between practitioners and academic staff. The Standards for Pre-Registration Midwifery Education (NMC 2009) are clearly articulated in the practice learning documentation and understood by students and Mentors. The organisation and sequencing of clinical placements and the assessment of clinical practice allows the student to develop and achieve the required competencies. Mentors, employers and service commissioners are confident that the midwifery programmes are of good quality and confirm that students are fit to practise safely and competently at the point of registration.

Students complete an evaluation form at the end of each practice learning experience and submit it with their portfolio. The response rate is around 80% with information collated by the link tutor and fed back to practice. Any negative issues are picked up at this stage and dealt with or if necessary referred on to the Learning Environment Lead. There is student representation on the Programme Management Team and Board of Studies. The Staff Student Liaison group meets quarterly with representation from each cohort and each pathway. Notes are taken and a summary of actions is posted on the website. External examiner reports are detailed and informative and show engagement with clinical assessment work. The Midwifery external examiner met with students and mentors in the practice learning environment. All NMC programmes are approved through a conjoint validation event. Conditions and Recommendations from approval events are followed up and monitored. All NMC approved programmes have current approval status. There is a clear process for making minor modifications to programmes as required.

