



2014-15 Monitoring report of performance in mitigating key risks identified in the NMC Quality Assurance framework for nursing and midwifery education

Programme provider	Glyndwr University
Programmes monitored	Registered Nurse - Adult; Registered Nurse - Mental Health
Date of monitoring event	21-22 Jan 2015
Managing Reviewer	Peter Thompson
Lay Reviewer	Sophia Hunt
Registrant Reviewer(s)	Andy Mercer, Sue Ryle
Placement partner visits undertaken during the review	Betsi Cadwaladr University Health Board: Ysbyty Glan Clwyd – Ward 10 Ysbyty Glan Clwyd – Enfys Ward Cancer Care Coedpoeth – District Nurses Wrexham Maelor Hospital – Accident and Emergency Department Wrexham Maelor Hospital - Theatre Wrexham Maelor Hospital - Prince of Wales Wrexham Maelor Hospital - Orthopaedics Wrexham Maelor Hospital - Orthopaedics Wrexham Maelor Hospital - Bedwen Ward Chirk Community Hospital - Elderly Ward Tan y Castell Rehabilitation Unit Tegid Ward Ablett Unit Dinas Ward Ablett Unit Tim Dyffryn Clwyd Flintshire Older Persons Community Mental Health Team Wrexham Maelor Hospital - Dyfrdwy Ward Heddfan Wrexham Maelor Hospital - Tryweryn Ward Heddfan Wrexham Maelor Hospital - Hafan Wen
Date of Report	30 Jan 2015

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Introduction to NMC QA framework

The Nursing and Midwifery Council (NMC) is the professional regulator for nurses and midwives across the United Kingdom (UK) and Islands. Our primary purpose is to protect patients and the public through effective and proportionate regulation of nurses and midwives. 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 Quality assurance (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 monitoring report forms a part of this year's review process. In total, 17 AEIs were reviewed. 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.

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	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	experien	gistrant teachers have ce /qualifications surate with role.			
Resc	1.2 Inadequate resources available in practice settings to enable students to achieve learning outcomes	qualified practice t	ficient appropriately mentors / sign-off mentors / eachers available to support of students			
Admissions & Progression	2.1 Inadequate safeguards are in place to prevent unsuitable students from entering and progressing to qualification	NMC requirements providers' procedures address issues of poor performance in both theory and practice providers' procedures are implemented by practice placement providers in addressing issues of poor performance in standards.		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		
	3.1 Inadequate governance of and in practice learning	partnersh service p including education	dence of effective hips between education and roviders at all levels, partnerships with multiple hinstitutions who use the actice placement locations			
Practice Learning	3.2 Programme providers fail to provide learning opportunities of suitable quality for students	and care	ctitioners and service users rs are involved in me development and	3.2.2 Academic staff support students in practice placement settings		
Practice	3.3 Assurance and confirmation of student achievement is unreliable or invalid	mentors, properly	dence that mentors, sign-off practice teachers are prepared for their role in g 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 the process they have engaged with	3.3.3 Records of mentors / practice teachers are accurate and up to date	
r Practice	fail to address all required	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				
Fitness for Practice	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	internal QA systems fail to	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 Imp	rovement	Standa	ard Not met

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Introduction to Glyndwr University's programmes

The Division for Psychology, Sports Sciences and Health is one of seven divisions within Glyndwr University. It has four subject area areas: psychology, sports science, land based studies and health sciences. Nursing programmes are delivered by the health sciences department.

This monitoring review focuses upon the pre-registration nursing (adult) and pre-registration nursing (mental health) programmes which were approved in March 2012 and commenced in September 2012 and student nurses studying the previously approved nursing programme.

The last intake of the previously approved pre-registration nursing (adult) programme commenced in March 2012 and at the time of the monitoring visit the students are midway through year two of the programme.

There were contractual changes to pre-registration nursing programmes in Wales in February 2013 and Glyndwr University's contract to deliver pre-registration nursing was terminated. The last intake to the pre-registration nursing programme was in April 2013.

Students are very positive about the programmes and the support they receive from the university and practice placement partners.

The commissioner and employers confirm that the programmes prepare nurses and midwives who are fit for practice at the point of registration. All NMC key risks are currently controlled.

The monitoring visit took place over two days and involved visits to practice placements to meet a range of stakeholders. Placements visited were undertaken in a range of practice areas in Betsi Cadwaladr University Health Board (BCUHB).

Summary of public protection context and findings

We found that key risks in relation to programme resources are adequate and appropriate to meet NMC standards. Student nurses on the approved nursing programmes are being adequately supported despite the challenges of the closure of the pre-registration nursing programme contract.

Whilst there have been no admissions to the nursing programme since 2012, we found admission and progression procedures are robust and effectively implemented to ensure students entering and progressing on the pre-registration nursing programmes meet NMC standards and requirements which is fundamental to protection of the public.

Disclosure barring service (DBS) checks, occupational health clearance and mandatory training are completed before a student can proceed to placement. These compulsory procedures are undertaken in order to protect the public.

We found that mentors are well prepared for their role in supporting and assessing students and managers ensure that mentors/ sign-off mentors are able to achieve the NMC requirements for updating and triennial review. Mentors are aware of the importance of their role and ensure that students are fit for practice in order to protect

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the public.

The department has good policies and procedures in place to address issues of poor performance in both theory and practice. There is a robust suitability to practise procedure which manages incidents of concern, both academic and practice related. We found evidence of the effective implementation of these procedures; examples of where students have been subject to remedial action, or their programme terminated, which demonstrates the rigour of the process in ensuring public protection.

We found the university has effective partnership working and governance arrangements at a strategic and operational level to ensure shared responsibility for students' learning in the practice placement environments.

The university demonstrates responsibility in response to external quality reviews and has effective partnerships with practice placement providers to address any areas of concerns to ensure students' learning is not compromised.

We found that effective teaching and learning strategies are in place to ensure that students are able to make clear links between theory and practice; students develop their skills in simulated learning environments and complete mandatory training, prior to going into practice placements.

Students successfully meet the required programme learning outcomes, and competencies at progression points and meet NMC standards for entry to the NMC register.

The commissioner, employers and managers confirm that students successfully exiting the nursing programmes are safe, competent and fit for practice.

We found that there are effective quality assurance processes in place to identify risk, address areas for improvement and enhance the delivery of pre-registration nursing programmes.

Our findings conclude that the university has effective mechanisms and strategies in place to deliver the approved nursing programme and to ensure the protection of the public.

Summary of areas that require improvement

None identified.

Summary of areas for future monitoring

- The on-going support for student nurses
- Opportunities for mentors/sign-off mentors to continue to achieve the NMC Standards in Learning and assessing in practice (SLAiP) (NMC, 2008), in light of the reduction in student nurses.

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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 academic team are enthusiastic; nursing lecturers (mental health) work closely with nursing lecturers (adult) to ensure that the programme remains vibrant and successful. We saw good evidence of effective working partnerships with practice placement providers. Practitioners and service users support the programme team as visiting lecturers to provide a range of diverse expertise within the classroom.

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

Mentors, sign-off mentors and employers expressed confidence in the programmes. Mentors told us that they receive good preparation for their role and support from the programme team and link lecturers.

The mentors are motivated and willing to support students. They understand their role and responsibilities in the assessment of practice. Some mentors/sign-off mentors expressed concern about the reduction in student numbers which impacts on their opportunities to continue to meet NMC SLAiP standards.

Employers and commissioners report students were fit for practice and purpose on successful completion of the programmes.

Students

All students told us that the programme promotes the key values of nursing, including dignity, compassion and respect, and that these values are used in the practice learning environments. Students reported supportive relationships with lecturers and mentors who provide feedback and encouragement for them to develop academically and in practice placements. They describe practice placement experiences as positive and

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they have good opportunities to undertake short 'spoke' placements.

Mental health students

The 11 remaining student nurses (mental health) are articulate and happy to share their experiences. They reflected on a number of concerns relating to the closure of the programme. They have discussed these issues with the programme team and they are appreciative of the individualised support provided. Students are well motivated to complete the programme and achieve NMC registration.

Adult students

We found that student nurses (adult) are articulate and objective in their feedback. They reported good quality teaching and learning and evaluate their practice learning experiences very positively. They are very complimentary about the support that they receive from the programme team and confirmed that there had been minimal impact as a result of changes within the teaching team. Many of the third year students have successfully applied for a post in the health board where they are working or plan to apply on successful completion of the programme.

Recently qualified nurses reported high levels of satisfaction with the programme, and described a seamless transition from student to staff nurse as a result of good quality preparation.

Service users and carers

We found evidence of direct and indirect service user and carer involvement in the recruitment of students. Service users and carers contribute to teaching and aspects of practice assessment for nursing programmes. They described their relationship with the Glyndwr University as being one of 'open friendship' and feel that they are equal partners in the education of nurses. They confirmed that they are adequately prepared for their role; supported in a very caring way by academic staff and feel appreciated by staff and students.

Relevant issues from external quality assurance reports

External quality assurance inspections are carried out by the Healthcare Inspectorate Wales (HIW). A range of HIW reports were scrutinised (2 -5).

The following reports require action:

HIW: The provision of mental health care and treatment provided to Mr M by Betsi Cadwaladr University Health Board (BCUHB), prior to committing homicide in May 2011, Report and Action plan, (November 2014) (2).

The investigation made recommendations in relation to conduct of ward rounds; setting standards for agreeing the consultant reviews and physical examination timescales; engaging with the family; clinical records relation; physical health assessment; leadership and multidisciplinary working; standards of care and practice and clinical audit; staff and culture; arrangements for discharge. Glyndwr University is working with the commissioners to review and take appropriate action as a result of the

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recommendations of the report. This includes a review of the curriculum to identify any areas of content which could be further developed. The pre-registration nursing (mental health) teaching team explicitly use this enquiry as case study material when teaching forensic care to students.

Trusted to Care (2014). Independent Review of Princess of Wales Hospital and of Neath Port Talbot Hospital at Abertawe Bro Morgannwg University Health Board Introduction (2014) (6).

This report sets out the content and conclusions of an independent review into aspects of elderly care services at the Princess of Wales and Neath Port Talbot Hospitals, which form part of Abertawe Bro Morgannwg University Health Board (ABMU). The review was undertaken between December 2013 and April 2014 by the Dementia Services Development Centre (DSDC) and The People Organisation (TPO) at the request of the Minister for Health and Social Services, Welsh Government.

Following publication of the report the Department of Health and Social Services carried out a series of spot checks and confirmed concerns related to: poor medicines management; issues around hydration and inadequate record-keeping. All providers of medical and healthcare education were required to review teaching within the curricula and update students on practice placements. Glyndwr University carried out a full review of the nursing programme and addressed the areas which needed to be improved. In response to an email received from an NMC compliance officer 12 December 2014, the university sent a detailed response to the NMC confirming key risks identified in the Trusted to Care report were managed (9).

What we found at the event

Betsi Cadwaladr University Health Board works closely with the university to identify any concerns in practice placement areas used for student nurses. The university reports collaborative working with placement providers to take action in areas where concerns arose which has included risk assessment of placement areas and the removal of students from the area, if the concern is likely to impact on students learning experience. Practice placement areas withdrawn from use for students are only reinstated after a satisfactory educational audit (1).

The university's self-assessment report 2014/15 has identified placement areas where concerns have been escalated and clear details of actions taken and outcomes are provided. There is a robust escalating concerns policy, with flow diagrams, that describe concerns that may be raised in practice areas by all levels of personnel, from student to health board members (1,7)

Evidence / Reference Source

- 2. Healthcare Inspectorate Wales announced visit to St Kentigern Hospice, 15 July, 2014
- 3. Healthcare Inspectorate Wales announced visit to Nightingale House Hospice, 15 April 2014
- 4. Healthcare Inspectorate Wales (HIW): The provision of mental health care and treatment provided to Mr M by Betsi Cadwaladr University Health Board (BCUHB), prior to committing homicide in May 2011, Report and Action plan, November 2014
- 5. Healthcare Inspectorate Wales (HIW): An Independent Review of Patient Care at Ysbyty Glan ClwydIn, 2012

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- 6. Trusted to Care (2014). Independent Review of Princess of Wales Hospital and of Neath Port Talbot Hospital at Abertawe Bro Morgannwg University Health Board Introduction 2014
- 7. Management and escalating concerns, 2014
- 9. Glyndwr report to NMC compliance, 12 December, 2014

Follow up on recommendations from approval events within the last year

There were no NMC programme approval events in 2013 – 2014. (1)

Evidence / Reference Source

- 1. Glyndwr University self assessment report 2014-2015 (approval event outcomes 2013 2014)
- 43. Discussions at initial visit, 6 January 2015

Specific issues to follow up from self-report

Academic staff resources

The impact of the withdrawal of the North Wales pre-registration nursing contract from Glyndwr University, together with a university restructure in 2013/2014, has led to a voluntary reduction in nurse lecturers due to early retirement or taking up posts elsewhere. There has been a reduction of six full-time equivalent nurse lecturers and the early retirement of the academic head of department and the principal lecturer for the undergraduate nursing programme.

This impacted upon academic staff resources and student nurses have raised concerns about the number of remaining lecturers to support the delivery of their programme (1, 10). We found that the department is trying to recruit a fixed term practice educator to support mental health nursing and recruit permanent replacements for senior staff that have left.

The department is confident that the staffing structure in place is sufficient to manage the nursing contract (7)

Learning resources

The National Student Survey (NSS) 2013-2014 demonstrated low scores for learning resources. Access to simulation and skills suites are shared with Bangor University (1). Glyndwr University is currently carrying out a review of resources across subjects and divisions.

Students did not voice any concerns about learning resources during the review. The management team confirmed that a strategy is in place to enhance the simulation and clinical skills facilities on the Maelor hospital site. An additional resource on the Glyndwr University site has been identified to develop a high dependency clinical skills laboratory to support specialist practice programmes. These developments were confirmed by the department managers and evidenced in the Divisional board minutes.

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Pre-registration nursing progression issues

A consequence of closure of the pre-registration nursing contract is that student nurses (adult) in the April 2013 cohort and student nurse (mental health) in the September 2012 cohort do not have a subsequent student group to join if they need to suspend their studies and re-join the programme. The department is providing students with information about APEL; the commissioner is monitoring the situation with the university, and is prepared to provide resources and additional financial support, as necessary, to facilitate all students completing the programme (43, 45).

Raising and escalation of concerns in practice

15 practice placement areas were subject to raising and escalating of concerns (1, 50 - 51). This is reported in a very detailed way with clear action plans and target outcomes and demonstrates clear partnership working between the university and the placement providers.

Evidence / Reference Source

- 1. Glyndwr University self-assessment report, 2014-2015
- 7. Management and escalating concerns policy (Glyndwr University), 2014
- 10. SSCC minutes, health studies, 19 November 2013
- 43. Discussions at initial visit,21 January 2014
- 45. Meeting to discuss academic resources and quality assurance (senior managers), 21 January 2015
- 50. Meeting with practice placements team, 21 January 2015
- 51. Meeting with employers/senior clinical managers, 22 January 2015

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

Risk indicator 1.1.1 - Registrant teachers have experience /qualifications commensurate with role.

What we found before the event

The department maintains a database of qualified teachers to reflect personal development and research activity. Staff CVs confirm that registrant teachers have

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experience and qualifications commensurate with the role and that policies are in place to facilitate continuing professional development and the acquisition of teacher status. (11, 75).

What we found at the event

The university monitors academic staff members NMC registration annually to ensure registration is active. All newly appointed nurse teachers, as a requirement of the contract of employment, must achieve teacher status. We found programme leaders act with due regard and have current registration and a teacher qualification recorded with the NMC (45, 53-54, 75).

A research and scholarship policy is in place whereby academic staff are entitled to 25 days for scholarship and research (11). This enables academic staff to keep up to date to deliver the nursing programme.

Nursing (adult)

We found that all lecturers supporting the pre-registration nursing (adult) programme hold current NMC registration and hold or are working towards a teaching qualification that can be recorded with the NMC. They hold qualifications and experience commensurate with their role (74, 75).

Nursing (mental health)

The reduction in the numbers of student nurses (mental health) and the consequence of closure of the pre-registration nursing contract has led to a decline in the number of lecturers available to deliver the pre-registration nursing (mental health) programme.

The mental health route is led by part time nursing lecturer (mental health) who has due regard and a NMC recorded teaching qualification. A full time nursing lecturer (mental health) is waiting for confirmation from NMC that her teaching qualification has been recorded (76).

The university is aware of the potential challenges in maintaining the nursing academic staff (mental health) resource within a declining student population and have contingency plans which include recruiting to the current vacancy for a full time practice educator to support nursing (mental health). There are negotiations with Bangor University to arrange secondment of an appropriate lecturer practitioner in the event of further resignations of nursing lecturers (mental health) (45).

The commissioner informed us that he is aware of the situation and will locate extra resources, if needed, to ensure the successful completion of all students undertaking the programme (47).

We conclude from our findings that the university has adequate appropriately qualified academic staff to deliver the pre-registration nursing (adult and mental health) programme to meet NMC standards.

Evidence / Reference Source

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- 11. Division of psychology, sports, science and health nursing Department: research, scholarship and CPD policy (2015-2016)
- 45. Meeting to discuss academic resources and quality assurance (senior managers), 21 January 2015
- 47. Telephone conversation with commissioners, 22 January 2015
- 48. Meeting to discuss fitness to practice and complaints, 21 January 2015
- 53. Meeting with programme lead (adult), 21 January 2015
- 54. Meeting with programme lead (mental health), 21 January 2015
- 74. Academic staff CVs, 2014-2015
- 75. NMC online registration checking facility, 21 January, 2014
- 76. External examiners report (adult) and summary of visit to clinical placements, 12 December 2014

Risk indicator 1.2.1 - sufficient appropriately qualified mentors / sign-off mentors / practice teachers available to support numbers of students

What we found before the event

Placements are managed and allocated by Bangor University as part of a service level agreement which sets out clearly the responsibilities of the AEI, placement providers and students. Senior managers at Glyndwr University and Bangor University hold bi monthly meetings to monitor placement capacity, link lecturing activity and any concerns or escalations raised. This information then feeds into a steering group which is developing a pan Wales service level agreement for all placement providers (14).

What we found at the event

We confirmed that Glyndwr University has a strategic agreement in place with Bangor University to ensure that placements are allocated to students in good time and audited in line with NMC requirements (44 -5,71-2, 86 -7).

We found that there are adequate numbers of mentors and sign-off mentors to support and facilitate students' learning in practice placements. We confirmed that students are supernumerary and work a minimum of 40% of the time with their named mentor who acts with due regard.

We were informed that a hub and spoke model of allocation is used to support student nurses placement learning and provides appropriate mentorship arrangements (56-7, 59-62, 64 -67, 86-7).

Nursing (adult)

Student nurses (adult) confirmed support from mentors/ sign-off mentors and link lecturers during placement learning experiences (57,58, 84). They told us that during hub and spoke placements the allocated mentor in the hub is responsible for agreeing the student's learning experience in the 'short' allocation to the spoke placement and also provides on-going support. Students demonstrated a clear understanding about hub and spoke placements and confirmed mentor support is effective (53, 57, 59-60, 63, 71, 80, 86).

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Nursing (mental health)

We found a high number of mentors in all placement areas that we visited and in some areas there are more mentors than students. Some mentors told us they are concerned about the lack of students as this had implications for mentors to become sign-off mentors, and also for the completion of triennial reviews (61 -2, 96).

We found that sign-off mentors support final year students and that all students on their consolidation placements have a sign-off mentor available (61-2, 69-70, 96).

In several units a system of team mentoring, or deputy mentoring is in place (98). We confirmed that all mentors have due regard, and that appropriate arrangements are in place for the consistent assessment of practice.

We conclude from our findings that there are sufficient appropriately qualified mentors / sign-off mentors available to support the numbers of pre-registration nursing students (adult and mental health) and all mentors/ sign-off mentors act with due regard.

Evidence / Reference Source

- 14. SLA contract live copy, 2014
- 44. Introduction presentation, monitoring, 21 January 2015
- 45. Meeting to discuss academic resources and quality assurance (senior managers), 21 January 2015
- 53. Meeting with programme lead (adult), 21 January 2015
- 57. Meetings with pre-registration adult students in placement, 21 January, 2015
- 58. Meeting with pre-registration adult students in placement, 22 January, 2015
- 59. Meeting with adult mentors and sign-off mentors in practice, 21 January, 2015
- 60. Meeting with adult mentors and sign-off mentors in practice, 22 January, 2015
- 61. Meeting with mental health mentors and sign-off mentors in practice, 21 January, 2015
- 62. Meeting with mental health mentors and sign-off mentors in practice, 22 January, 2015
- 63. Meeting with managers (adult) in practice, 21 January, 2015
- 64. Meeting with managers (adult) in practice, 22 January, 2015
- 64. Meeting with managers (mental health) in practice, 21 January, 2015
- 65. Meeting with managers (mental health) in practice, 22 January, 2015
- 66. Meetings with recent adult qualifiers in practice, 21 January, 2015
- 67. Meetings with recent adult qualifiers in practice, 22 January, 2015
- 71. Mentors database (mental health), 22 January 2015
- 80. Adult student files (N = 4)
- 86. Audits (mental health), 2014
- 87. VLE Moodle pages
- 96. Student induction information files held on ward, 22 January 2015
- 98. Assessment Board minutes. October 2014

Outcome: Standard met

Comments:

Some mentors are concerned about the lack of student nurses (mental health) as this had implications for mentors to become sign-off mentors, and also for the completion of triennial reviews.

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Areas for future monitoring:

 Opportunities for mentors/sign-off mentors to continue to achieve the NMC SLAiP (NMC, 2008), in light of the reduction in student nurses.

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

The department has robust admission and progression policies and procedures in place to ensure public protection.

There is an all Wales principle for admission to pre-registration nursing programmes which meet meets NMC requirements (15).

Checks on literacy, numeracy, health, and academic attainment are made. A statement of good character is required as part of selection process. DBS checks are made and there are annual checks to confirm good health and character (14-15,18).

There is a robust procedure to consider issues relating to professional conduct and DBS checks (22 - 24, 19, 20).

There is a clear policy and procedure for AP(E)L (17) .The department will support students to prepare APEL claims for transfer to other AEIs, if required (1).

What we found at the event

During the event we viewed an interview schedule which confirmed that practitioners, mentors and service users are part of the interview process (46, 49, 81-2).

The university provides a pre-interview training event for the panel members, which includes equality and diversity training and elements of values-based recruitment for the appropriate selection of student nurses which contributes to protection of the public (46, 49, 93).

The university ensures that each student has a satisfactory DBS check and health status before going into practice placement. Students confirmed that they sign an

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annual declaration of good health and good character (14, 55 -6,91).

Nursing (adult)

We were told that there have been no selection activities since the recruitment to the adult nurse cohort in 2013. Students confirmed that the service user perspective was included in their selection and interview experience and we found selection processes are compliant with NMC requirements (46, 55, 81).

Nursing (mental health)

Students reported that service users were part of the admission process when they went through selection processes; this finding was based on their own recollections because the mental health programme has not recruited since 2012 (56,69).

We found student nurses are aware of the potential for use of APL processes for transfer to another AEI, if required. They told us that they have been kept well informed since the contract for the preregistration nursing programme was moved to Bangor University, as the single provider for North Wales (56, 73, 80).

We conclude the department has robust admission and progression policies and procedures in place to ensure public protection.

Evidence / Reference Source

- 14. SLA contract live copy, 2014
- 15. Selection and admission principles, 2012
- 17. G. U. APEL chapter. 2014
- 18. Suitability for practice admissions, 2012
- 19. Policy statement on recruitment of ex offenders, 2014
- 20. GU fraud policy, 2014
- 22. Student Handbook, 2014-2015
- 23. Academic misconduct procedure, 2014
- 24. Flowchart for students causing concern, 2014
- 46. Meeting to discuss admissions and progression, 21 January 2015
- 49. Meeting with service users and carers, 21 January 2015
- 55. Meeting with pre-registration adult students (University), 21 January, 2015
- 56. Meeting with pre-registration mental health students. (University), 21 January 2015
- 69. Meetings with recent mental health qualifiers in practice, 22 January, 2015
- 80. Adult student files (N = 4)
- 81. Mental health student files (N = 6)
- 82. Student Handbooks. 2014-2015
- 91. Bachelor of nursing assessment board results, March 2014
- 93. Off duty, Mental health 22 January 2015

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

What we found before the event

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There is a clear and robust fitness to practise (FtP) procedure and process to address concerns relating to academic or clinical performance. There is a flowchart which outlines the procedure for managing concerns related to academic misconduct. Preregistration nursing student handbooks provide information about FtP procedures (1, 18-9, 20 - 24).

What we found at the event

We confirmed that the university has a robust fitness to practise procedure to manage issues of concern about a student whether academic, or practice related. The university describes this procedure as a 'suitability to practise procedure' which is a university-wide procedure covering all professional programmes and has a two staged approach which enables clear investigation and decision making (1,18-24).

Stage one is held at programme level and the outcome is noted in student records. Stage two is managed by a university wide panel which includes senior health board representatives (48). Proven cases of academic misconduct are automatically escalated to stage one if the offence is judged to be minor or to stage two if considered a major concern.

We confirmed that, in 2013 to 2014 there were nine stage one cases considered that included six cases of proven minor academic misconduct. There were two cases considered at stage two and both students were given reprimands and allowed to continue their studies (1, 48, 51).

We reviewed examples of suitability to practise investigation records and found they demonstrate clear, consistent processes and rational decision-making based upon the seriousness of the concerns (79). This gives us reassurance that concerns are investigated and dealt with effectively and that the public is protected.

We found the suitability to practise procedure is effectively communicated to all stakeholders, students, mentors, service managers and academic staff (including link lecturers) who are all able to describe the process for raising and escalating concerns regarding a student's performance (44, 55 -6, 63-4, 59, 61).

For students who have failed theory or practice assessment components there is a clear policy of reassessment that takes into account progression points and the NMC 12 week rule (77-8, 84-5, 89)

We found that there are clear processes to monitor students' attrition rates at each of the progression points; these are analysed and reported to assessment board and included in annual monitoring review reports. Attrition, progression and achievement of students is reported on a monthly basis to the Workforce education and development services (WEDS) who commission the programme on behalf of the Welsh government. (44 -5, 47). Current data demonstrates attrition is between 4% and 5% which includes all instances of inactivity from the programme, including suspensions and interruptions (46, 99).

We viewed robust progression data and action plans developed in response to discussion of data at assessment boards, annual monitoring reviews, and meetings held

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with placement stakeholders (41-2, 46, 51, 89).

Students told us that they are given honest and appropriate feedback from the programme team which enables them to improve their performance both academically and in practice (55-6, 69)

Evidence / Reference Source

- 1. Glyndwr University self-assessment report, 2014-2015
- 18. Suitability for practice admissions, 2012
- 19. Policy statement on recruitment of ex offenders, 2014
- 20. GU fraud policy, 2014
- 21. G.U. suitability for practice, 2013
- 22. Student Handbook 2014-2015
- 23. Academic misconduct procedure, 2014
- 24. Flowchart for students causing concern, 2014
- 44. Introduction presentation, monitoring, 21 January 2015.
- 46. Meeting to discuss admissions and progression, 21 January 2015
- 47. Telephone conversation with commissioners, 22 January 2015
- 48. Meeting to discuss fitness to practice and complaints, 21 January 2015
- 51. Meeting with employers/senior clinical managers, 22 January 2015
- 55. Meeting with pre-registration adult students (University), 21 January, 2015
- 56. Meeting with pre-registration mental health students (University), 21 January, 2015
- 59. Meeting with adult mentors and sign-off mentors in practice, 21 January 2015
- 61. Meeting with mental health mentors and sign-off mentors in practice, 21 January, 2015
- 63. Meeting with managers (adult) in practice, 21 January, 2015
- 64. Meeting with managers (adult) in practice, 22 January, 2015
- 69. Meetings with recent mental health qualifiers in practice, 22 January, 2015
- 89. Process for collating student evaluations of clinical practice, 2014
- 99. Service level agreement in Hafan-We 2014

Risk indicator 2.1.3- Programme providers procedures are implemented by practice placement providers in addressing issues of poor performance in practice

What we found before the event

Mentors and sign-off mentors follow procedures to address issues of poor performance and are supported by the link lecturer or personal tutor (14, 26). The practice portfolios clearly identify a three stage approach to assessing students' performance in practice and include personal and on-going development plans (25, 27).

What we found at the event

We found practice placement providers receive clear guidance from the university regarding the process for raising and escalating concerns about a student's behaviour or performance (24). Mentors and ward managers are able to describe the process and

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are confident that they are sufficiently well informed to act upon any concern that they may have regarding a student (59, 60 - 66).

We observed the cause for concern flow chart which is clearly explained in students' practice assessment documents and in the student handbook (22, 24, 83-4).

We found that mentors, managers and link tutors supporting student nurses in the preregistration nursing (adult and mental health) programme have a clear understanding about the procedure that will be followed if poor performance in practice is identified. The placement areas we visited all had copies of the flow chart to raise concerns about students' performance. This process includes clear reference to the role of the link tutor in managing failing students and instigating fitness to practice issues (24, 26, 57-9, 61-4, 66).

Evidence / Reference Source

- 22. Student Handbook, 2014-2015
- 25. Mental health portfolio 2014
- 26. Link tutor role specification, 2014
- 27. Student portfolio nursing (new pre-registration programme), 2014
- 57. Meetings with pre-registration adult students in placement, 21 January 2015
- 58. Meeting with pre-registration adult students in placement, 22 January 2015
- 59. Meeting with adult mentors and sign-off mentors in practice, 21 January 2015
- 60. Meeting with adult mentors and sign-off mentors in practice, 22 January 2015
- 61. Meeting with mental health mentors and sign-off mentors in practice, 21 January 2015
- 62. Meeting with mental health mentors and sign-off mentors in practice, 22 January 2015
- 63. Meeting with managers (adult) in practice, 21 January 2015
- 64. Meeting with managers (adult) in practice, 22 January 2015
- 64. Meeting with managers (mental health) in practice, 21 January 2015
- 65. Meeting with managers (mental health) in practice, 22 January 2015
- 66. Meetings with recent adult qualifiers in practice, 21 January 2015
- 83. Completed practice assessment documentation and portfolio (adult), 2014
- 84. Completed practice assessment documentation and portfolio (mental health), 2014

Risk indicator 2.1.4 - systems for the accreditation of prior learning and achievement are robust and supported by verifiable evidence, mapped against NMC outcomes and standards of proficiency

What we found before the event

There are clear procedural guidelines and documentation relating to the accreditation of prior learning and achievement (30, 73).

What we found at the event

We found the university has a clear process for the accreditation of prior learning (APL)

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and provided evidence to demonstrate how the process has supported students to join the nursing programme, in line with NMC standards (52, 73, 80).

We met with a student who had transferred to the Glyndwr University from another AEI and we confirmed a robust process was followed providing guidance and support in mapping outcomes to NMC standards and programme learning outcomes to successfully complete the claim (58).

The programme team told us the numbers of APL claims are small and all successful claims are subject to scrutiny at APL committee/assessment boards and ratified by programme boards in line with the university's QA systems prior to enrolling on the preregistration nursing (adult) programme (52 -3).

We were told that existing students are aware of the potential for APL transfer (55 -6). The commissioner confirmed that financial support would be available to support students if claims were required (47).

Evidence / Reference Source

- 30. Mentors newsletter, April 2013
- 47. Telephone conversation with commissioners , 22 January 2015
- 52. Meeting to discuss APL, 21 January 2015
- 53. Meeting with programme lead (adult), 21 January 2015
- 55. Meeting with pre-registration adult students (University), 21 January, 2015
- 56. Meeting with pre-registration mental health students. (University), 21 January 2015
- 58. Meeting with pre-registration adult students in placement (22 January 2015)
- 73. Terms of reference, programme board, 27th November 2014
- 80. Adult student files (N = 4)

Outcome: Standard met

Comments: No further comments.

Areas for future monitoring: None identified.

Findings against key risks

Key risk 3- Practice Learning

- 3.1 Inadequate governance of and in practice learning
- 3.2 Programme providers fail to provide learning opportunities of suitable quality for students
- 3.3 Assurance and confirmation of student achievement is unreliable or invalid

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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

Clinical governance frameworks are in place (7, 13 -14, 28-32, 35). There is formal engagement between education commissioners and practice placement providers who meet three times per year (29).

There is a joint education group comprising strategic educational leads from universities and the workforce and organisational development lead.

There is evidence of partnership working in response to HIW inspection reports that have raised concerns (1, 8, 9). Effective communication between the university and placement providers enables responses to be made to address areas of concern in a timely manner. Risk assessments are carried out to assess the impact of the concerns upon the student learning experience (1, 14).

There have been 15 instances reported where concerns were raised in practice placements by a range of individuals including; students, mentors, link teachers, personal tutors and members of BCUHB following a HIW inspection report (5). Joint actions are taken, as appropriate, and include risk assessment, educational audit and the relocation of students.

There is a clear escalating concerns policy, with clear flow diagrams, that describe concerns that may be raised in practice and the process to follow (7).

Glyndwr University has a joint escalation policy with Bangor University and BCUHB; this is also shared with Powys Teaching Health Board, which also provides placement opportunities for pre-registration nursing students.

Service level agreements are in place between Glyndwr University, Bangor University and placement providers. Placements are managed centrally and agreed through regular monitoring meetings (1,14)

The educational audit strategy uses an all Wales educational audit tool and complies with NMC standards (28, 34, 35).

Audits are shared between Glyndwr University and Bangor University. There are robust procedures for audit and approval of placements and the removal of placements in response to concerns (7).

What we found at the event

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We found that the university has well established and effective working relationships with BCUHB and practice placement providers (1, 14, 48, 50)

There are a range of forums at strategic and operational level, which ensure that appropriate information is shared (47 -8, 50-1). We were informed that the process for joint actions arising from adverse clinical governance issues places patients and students' safety at the forefront of all action plans.

A raising and escalating concerns policy is in place in the university and placement provider organisations (7). Issues of concern arising in practice placements are monitored and escalated, as appropriate, within the placement organisation and university. Employers, mentors and students confirmed that the process is effective in ensuring that concerns are fully investigated and supported (47, 51, 53, 55 -7, 59, 89, 91).

An all Wales educational audit tool is used across all the placement areas. This facilitates a streamlined approach to managing the quality assurance of practice placements and to enhance students' practice learning. The audit tool ensures information is shared with other universities who use the same placement areas; avoiding duplication of audits by link teachers who manage the audit process (28,31-2, 86-7).

Each practice learning environment we visited provided a copy of their educational audit document and all met NMC standards (62, 64, 86). All educational audits are reviewed within a two-year period or more frequently if there are action plans or issues raised through the escalation processes (14, 31-2, 50,58,60).

We were informed that independent placement providers are engaged through a tripartite service level agreement to ensure practice placement areas meet the NMC requirements for practice learning. This agreement is supported by an informative practice guide, containing FAQs, that have been designed to promote consistency in practice learning environments (62, 70, 100 -1).

Nursing (adult)

Students, mentors and managers told us about the withdrawal of a placement following concerns expressed by students. After completion of an action plan and an educational audit, the placement area was reinstated. Students confirmed that the practice placement area involved now provides a good learning experience and is being very proactive in identifying learning opportunities (58, 62, 64).

Nursing (mental health)

We found constructive relationships between education and service providers, and evidence of collaboration between Glyndwr University and Bangor University in managing mental health nursing placements across North Wales. (54, 61-2, 85, 81,102)

We conclude that there are well established and effective partnerships between education and service providers at all levels and NMC risks are effectively managed.

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Evidence / Reference Source

- 1. Glyndwr University self-assessment report, 2014-2015
- 5. Healthcare Inspectorate Wales: an independent review of patient care at Yabyty Glan Clwyd in, 2012
- 7. Management and escalating concerns policy (Glyndwr University), 2014
- 8. Glyndwr University contract meeting minutes, 5 June, 2014
- 9. University compliance report to NMC, 12 December 2014
- 13. AEI requirements 2014
- 14. SLA contract live copy, 2014
- 28. All Wales audit tool, 2012
- 29. WEDS Glyndwr agenda October 2014
- 30. Mentors newsletter, April 2013
- 31. Spoke educational audit, 2014
- 32. All Wales nursing and midwifery preregistration group, hub and spoke placements, quality assurance principles, 2013
- 33. Programme approval report, nursing, March 2012
- 35. Strategic and operational approach to SLAiP, 2014
- 47. Telephone conversation with commissioners, 22 January 2015
- 48. Meeting to discuss fitness to practice and complaints, 21 January 2015
- 50. Meeting with practice placements team, 21 January 2015
- 51. Meeting with employers/senior clinical managers, 22 January 2015
- 53. Meeting with programme lead (adult), 21 January 2015
- 55. Meeting with pre-registration adult students (University), 21 January 2015
- 56. Meeting with pre-registration mental health students. (University), 21 January 2015
- 57. Meetings with pre-registration adult students in placement, 21 January 2015
- 58. Meeting with pre-registration adult students in placement, 22 January 2015
- 59. Meeting with adult mentors and sign-off mentors in practice, 21 January 2015
- 60. Meeting with adult mentors and sign-off mentors in practice, 22 January 2015
- 62. Meeting with mental health mentors and sign-off mentors in practice, 22 January 2015
- 64. Meeting with managers (adult) in practice, (22 January, 2015)
- 70. Mentors database (adult) 22 January 2015
- 71. Mentors database (mental health) 22 January 2015
- 81. Mental health student files (N = 6)
- 85. Audits (adult) 2014
- 86. Audits (mental health) 2014
- 100. FAQs regarding student placements, joint Bangor university and Glyndwr university initiative 2014
- 101. Student evaluations 2012 -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

There is an on-going commitment to service user and carer involvement demonstrated within the pre-registration nursing programme and detailed in the service user strategy (1, 16). The course planning team were commended at the programme approval event for the quality and nature of service users and practitioners' involvement in the programme and in the responsiveness of the team to their views and opinions. There is

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evidence that five service users and five practitioners attended the approval event (33). The approval report confirmed that service users, carers and clinicians supplement teaching.

What we found at the event

We found that service users and practitioners were involved in development of the programme. They are effectively engaged in the delivery of the programme and students told us they value their input (1, 16, 44, 46, 49, 98, 103).

Nursing (adult)

In the pre-registration nursing (adult) programme students and managers confirmed that service users provide verbal feedback on the care that they receive from students (53, 59, 91)

Nursing (mental health)

Student nurses (mental health) told us about a range of service user and carer contributions to the delivery of the programme, and students confirmed that these sessions provide a very useful component of their overall learning and understanding (56).

Students and mentors commented on service user contributions to practice assessment processes; given the nature of mental health care these are often informal comments offered by service users following episodes of care where students have been involved in delivery. Comments are fed back to students and incorporated in practice assessment documentation (56, 61-2, 85).

Our findings confirm compliance with NMC standards.

Evidence / Reference Source

- 1. The Glyndwr University self-assessment report, 2014-2015
- 16. Service user strategy, (2015-2017)
- 33. Programme approval report, nursing March 2012
- 43. Discussions at Initial visit, 21 January 2014
- 44. Introduction presentation, monitoring, 21 January 2015
- 45. Meeting to discuss academic resources and quality assurance (senior managers), 21 January 2015
- 46. Meeting to discuss admissions and progression, 21 January 2015
- 49. Meeting with service users and carers, 21 January 2015
- 53. Meeting with programme lead (adult), 21 January 2015
- 54. Meeting with programme lead (mental health), 21 January 2015
- 56. Meeting with pre-registration mental health students (University), 21 January 2015
- 59. Meeting with adult mentors and sign-off mentors in practice, 21 January 2015
- 61. Meeting with mental health mentors and sign-off mentors in practice, 21 January 2015
- 62. Meeting with mental health mentors and sign-off mentors in practice, 22 January 2015
- 75. NMC online registration checking facility, 21 January 2014

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- 85. Audits (adult) 2014
- 91. Bachelor of nursing assessment board results, March 2014
- 98. Assessment Board minutes, October 2014
- 99. Service level agreement in Hafan-Wen, 2014
- 100. FAQs regarding student placements, joint Bangor university and Glyndwr university initiative, 2014 103. Mentor database (adult). 22 January 2015

Risk indicator 3.2.2 - academic staff support students in practice placement settings

What we found before the event

All practice placement areas have a named link lecturer who is a member of the academic staff (14). This is managed jointly with Bangor university (1, 26,). The department sets clear parameters for workload management and identifies a 20% allowance for practice-based activity (11). The link lecturer role is integral to the management and escalation of concerns, educational audit and support of failing students in practice (7, 13-14). Incident reporting identifies instances where link lecturers have raised concerns and managed the risk assessment in practice (1).

What we found at the event

We found that the system of link tutors is coordinated by Bangor University, but engages nursing lecturers from both Glyndwr University and Bangor University.

We confirmed that the system effectively and efficiently ensures that there is a visible presence of academic staff in practice placements and that all mentors and students from each of the respective universities are provided with the same level of support (42, 53, 55, 59).

Mentors, students and service managers in the placement areas confirmed that they are all aware of who their link lecturer is and the role that they play in maintaining the quality of the education experience of students (55, 57, 90, 92).

The link lecturer's contact details are clearly displayed in each placement area. We heard that link lecturers routinely leave messages for students if they have visited the placement area but were unable to speak to them due to shift patterns (55, 57, 59). Students from Glyndwr University informed us that they are able to contact their link lecturer regarding any questions or concerns even if the lecturer is based at Bangor University (53, 55).

Senior managers confirmed that link lecturers are highly visible and effective in their role (51). Mentors and students affirmed that the link lecturers, assigned through the Bangor

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University placement department, support whichever students are placed within their link areas and liaise through the department to escalate concerns (50, 55-6, 59, 60).

Evidence / Reference Source

- 1. Glyndwr University self-assessment report, 2014-2015
- 16. Service user strategy (2015-2017)
- 33. Programme approval report, nursing, March 2012
- 43. Discussions at initial visit,21 January 2014
- 44. Introduction presentation, monitoring, 21 January 2015
- 45. Meeting to discuss academic resources and quality assurance (senior managers), 21 January 2015
- 46. Meeting to discuss admissions and progression, 21 January 2015
- 49. Meeting with service users and carers, 21 January 2015
- 53. Meeting with programme lead (adult), 21 January 2015
- 54. Meeting with programme lead (mental health), 21 January 2015
- 56. Meeting with pre-registration mental health students (University), 21 January 2015
- 59. Meeting with adult mentors and sign-off mentors in practice, 21 January 2015
- 61. Meeting with mental health mentors and sign-off mentors in practice, 21 January 2015
- 62. Meeting with mental health mentors and sign-off mentors in practice, 22 January 2015
- 75. NMC online registration checking facility, 21 January 2014
- 85. Audits (adult) 2014
- 91. Bachelor of nursing assessment board results, March 2014
- 98. Assessment Board minutes, October 2014
- 99. Service level agreement in Hafan-Wen, 2014
- 100. FAQs regarding student placements, joint Bangor university and Glyndwr university initiative, 2014 103. Mentor database (adult), 22 January 2015

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

We found that employers support mentors to complete the university's NMC approved mentor preparation module which is delivered by Bangor University (35).

We confirmed that mentors and sign-off mentors are well prepared for their role in supporting learning and assessment in practice learning environments. All mentors have achieved a mentorship qualification that meets the NMC standards to support learning and assessment in practice (NMC, 2008) (55-6, 60 -5).

Sign-off mentors undergo preparation that meets the SLAiP standards and act with due regard (38). Mentors and sign-off mentors are aware of their respective roles at progression points (59, 60).

What we found at the event

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We found that employers support mentors to complete the university's NMC approved mentor preparation module which is delivered by Bangor University (35).

We confirmed that mentors and sign-off mentors are well prepared for their role in supporting learning and assessment in practice learning environments. All mentors have achieved a mentorship qualification that meets the NMC standards to support learning and assessment in practice (NMC, 2008) (55 -6, 60 -5).

Sign-off mentors undergo preparation that meets the SLAiP standards and act with due regard (38). Mentors and sign-off mentors are aware of their respective roles at progression points and at the end of the programme (59, 60).

Evidence / Reference Source

- 1. Glyndwr university self-assessment report, 2014-2015
- 7. Management and escalating concerns policy (Glyndwr) University), 2014
- 11. Division of psychology, sports, science and health nursing Department: research, scholarship and CPD policy (2015-2016)
- 13. AEI requirements, 2014
- 14. SLA contract live copy, 2014
- 26. Link tutor role specification, 2014
- 42. External examiners annual report, adult programme, 2013-2014
- 51. Meeting with employers/senior clinical managers, 22 January 2015
- 53. Meeting with programme lead (adult), 21 January 2015
- 55. Meeting with pre-registration adult students (University), 21 January 2015
- 56. Meeting with pre-registration mental health students (University), 21 January 2015
- 57. Meetings with pre-registration adult students in placement, 21 January 2015
- 59. Meeting with adult mentors and sign-off mentors in practice, 21 January 2015
- 60. Meeting with adult mentors and sign-off mentors in practice, 22 January 2015
- 90. University Glendower processes relating to the disclosure and barring services check, 2014
- 91. Bachelor of nursing assessment board results, March 2014
- 92. Equality and diversity training for service users and practitioners, schedule of training (learning at NHS, Wales), 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 and understand the process they have engaged with

What we found before the event

The service level agreement confirms that mentors will be released to attend annual updating. This is confirmed in the AEI requirements report and in the strategic and operational approach to SLAiP (13, 14, 35).

Glyndwr University and Bangor University jointly carry out mentor updates. Mentors are updated annually and informed about the process for dealing with students causing

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concern in practice (33).

There is a clear strategic and operational approach to preparing and updating mentors and sign-off mentors (31). A quarterly mentor bulletin is published to inform mentors of preparation and update courses and both universities provide an intranet site of mentor information, which includes contact details of practice educators. Mentors and sign-off mentors are required to keep a record of evidence to demonstrate eligibility to stay on the database (34). Mentors and practice teachers are required to complete a self-declaration for the purpose of triennial review in preparation for a three yearly meeting with their line manager. There is a clear process for preparation of sign-off mentors (35, 36).

What we found at the event

We found the collaboration between Glyndwr University and Bangor University provides ample opportunities for mentors to attend a face-to-face annual update training day. An online resource provides adequate updating for those who are unable to attend a scheduled training. Mentors, sign-off mentors and managers confirmed that they are able to meet the requirements for annual updating in line with NMC standards and are able to correctly describe the purpose and process for this quality assurance mechanism (51, 59, 60 -6,104).

Most mentors are able to meet their triennial review requirements however in one placement area, where there is a high number of mentors within the team, mentors stated that they had not had sufficient contact with students to be able to maintain their mentor status due to now being considered a 'spoke' placement, rather than a 'hub'. These mentors were not acting as sign-off mentors (62).

Evidence / Reference Source

- 31. Spoke educational audit, 2014
- 32. All Wales nursing and midwifery preregistration group, hub and spoke placements, quality assurance principles, 2013
- 33. Programme approval report, nursing, March 2012
- 34. Student portfolio nursing, (new preregistration programme), 2014
- 35. Strategic and operational approach to SLAiP, 2014
- 36. Student evaluation of clinical experience, 2012-2014
- 37. Mentors and sign-off mentor record, 22 January 2015
- 38. The assessment process, 2014
- 55. Meeting with pre-registration adult students (University), 21 January 2015
- 56. Meeting with pre-registration mental health students (University), 21 January 2015
- 59. Meeting with adult mentors and sign-off mentors in practice, 21 January 2015
- 60. Meeting with adult mentors and sign-off mentors in practice, 22 January, 2015
- 61. Meeting with mental health mentors and sign-off mentors in practice, 21 January 2015
- 62. Meeting with mental health mentors and sign-off mentors in practice, 22 January 2015
- 63. Meeting with managers (adult) in practice, 21 January 2015

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- 64. Meeting with managers (adult) in practice, 22 January 2015
- 64. Meeting with managers (mental health) in practice 21 January 2015
- 65. Meeting with managers (mental health) in practice 22 January 2015

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

What we found before the event

A database of all placements is updated by the placement allocation team at Bangor University following completion of the educational audit by the link tutor (12). The mentor / sign-off mentor and practice teacher database is held by the health board and linked to an electronic rostering system which can be viewed at ward level. The community placements database is paper based and updated by BCUHB. Processes are in place for recording triennial review (12).

What we found at the event

The educational audit documentation includes a list of mentors and sign-off mentors available within each placement area. This information is also available in a mentor file in the placements we visited (86-7).

'Live' records of mentors are integrated within the e-rostering system in use in most placement areas we visited and includes information on the current status of qualified mentors (104). We found this to be a very useful way of verifying information contained in educational audit documents (86 -7).

In community and independent practice placements we found clear and accurate paperbased records of mentors enabling service managers to effectively plan for student placements (37, 57, 59, 89, 92).

Our findings conclude that records of mentors and sign-off mentors are accurate and up to date and meet NMC requirements.

Evidence / Reference Source

- 13. AEI requirements, 2014
- 51. Meeting with employers/senior clinical managers, 22 January 2015
- 59. Meeting with adult mentors and sign-off mentors in practice, 21 January 2015
- 60. Meeting with adult mentors and sign-off mentors in practice, 22 January 2015
- 61. Meeting with mental health mentors and sign-off mentors in practice, 21 January 2015
- 62. Meeting with mental health mentors and sign-off mentors in practice, 22 January 2015
- 63. Meeting with managers (adult) in practice, 21 January 2015

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- 64. Meeting with managers (adult) in practice, 22 January 2015
- 64. Meeting with managers (mental health) in practice, 21 January, 2015
- 65. Meeting with managers (mental health) in practice, 22 January, 2015
- 66. Meetings with recent adult qualifiers in practice, 21 January, 2015
- 86. Audits (mental health) 2014

87. VLE Moodie pages. 104.E-rostering (off duty rotas-mental health – 22 January 2015
Outcome: Standard met
Comments: No further comments.
Areas for future monitoring: None identified.

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
- 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

Pre-registration nursing programme documentation (adult and mental health) identifies learning, teaching and assessment strategies that enable and support students to achieve NMC learning outcomes and competencies at progression points and for entry to the register (24, 30, 38). Successful achievement is confirmed by the external examiner (39). On completion of the programme all successful students achieve 100% employment (38).

What we found at the event

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We found that effective teaching and learning strategies are in place to ensure that students are able to make clear links between theory and practice; students develop their skills in simulated learning environments and complete mandatory training, prior to going into practice placements (51, 53, 55, 75-6, 78).

Students told us that they receive excellent feedback on their progress from the programme team and that their personal tutors are responsive in providing support and guidance (55-6).

Students told us that despite their initial concerns regarding the change in academic staff members at the university, there has been very little disruption to their programme. Students consistently praised the efforts of the programme team and the university to ensure the high quality of their education was continuously upheld. The programme team and students confirmed that there have been no cancellations of any taught sessions (53 -6).

Nursing (adult)

Student nurses informed us that they benefit from a broad range of input from specialist lecturers and that they are able to make clear links between theory and practice. They told us that teaching strategies include the use of on line drug calculations to help them to reach the requirements for the 100% pass required by the end of the programme. Students articulated that they had gained in confidence throughout the programme and confirmed they are very well supported by the teaching team (55, 57-8, 68).

We found that students understand EU requirements; they have exposure to a wide range of placements and client groups in line with the EC directive, and record experiences in their practice portfolios (51, 53, 55, 73 - 78).

Students informed us that they have experienced short 'spoke' placements; including health visiting and mental health short placements (53). The allocation plan ensures that EU directives are met and students' attainment is monitored at each progression point. The programme leader works closely with the placements team to arrange alternative placements if students are unable to meet placement allocations through sickness and absence (53, 46, 50, 84).

Nursing (mental health)

We found that managers and mentors are confident that students' knowledge and skills are appropriate to their stage of the programme (61-2, 65-6). Practice assessment documentation details achievement of competencies in support of progression points within the programme (85). Graduates from the programme are in demand, they are seen as readily employable; recent graduates from the programme reported a smooth transition from student to registered practitioner, and confirmed that their degree course provided a sound basis for professional nursing practice. (69-70)

We found the annual programme monitoring reports and external examiner reports for adult and mental health nursing confirm that all assessments are conducted within the required time frame and meet NMC requirements. (53 -6, 68-9, 77-8, 89).

Student nurses' level of attainment demonstrates a good range off degree classifications from second class to first class honours degrees (89, 92).

Student nurses achievement of NMC learning outcomes and competencies is verified

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by external examiners who confirm achievement in both theory and practice elements of the pre-registration nursing programmes (77-8).

Employers and commissioners confirmed that student nurses successfully completing the pre-registration nursing programmes are fit to practise and the majority of students commence employment locally (47, 51).

Our findings conclude that learning, teaching and assessment strategies in the approved programmes enable students to successfully meet the required programme learning outcomes, NMC standards and competencies.

Evidence / Reference Source

- 24. Flowchart for students causing concern, 2014
- 30. Mentors newsletter, April 2013
- 38. The assessment process, 2014
- 39. Triennial review of mentors practice teachers self declaration, 2014
- 46. Meeting to discuss admissions and progression, 21 January 2015
- 50. Meeting with practice placements team, 21 January 2015
- 51. Meeting with employers/senior clinical managers, 22 January 2015
- 53. Meeting with programme lead (adult), 21 January 2015
- 54. Meeting with programme lead (mental health), 21 January 2015
- 55. Meeting with preregistration adult students (University), 21 January 2015
- 56. Meeting with preregistration mental health students (University), 21 January 2015
- 57. Meetings with pre-registration adult students in placement, 21 January 2015
- 58. Meeting with pre-registration adult students in placement, 22 January 2015
- 61. Meeting with mental health mentors and sign-off mentors in practice, 21 January 2015
- 62. Meeting with mental health mentors and sign-off mentors in practice, 22 January 2015
- 65. Meeting with managers (mental health) in practice, 22 January 2015
- 66. Meetings with recent adult qualifiers in practice, 21 January 2015
- 68. Meetings with recent mental health qualifiers in practice, 21 January 2015
- 69. Meetings with recent mental health qualifiers in practice, 22 January 2015
- 70. Mentors database (adult)
- 75. NMC online registration checking facility, 21 January 2014
- 76. External examiners report (adult) and summary of visit to clinical placements, 12 December 2014
- 77. External examiners report (mental health) and summary of visit to clinical placements, 12 December 2014
- 78. Suitability for practice files (N = 4)
- 84. Completed practice assessment documentation and portfolio (mental health), 2014
- 85. Audits (adult) 2014
- 86. Audits (mental health), 2014
- 89. Process for collating student evaluations of clinical practice, 2014
- 92. Equality and diversity training for service users and practitioners, schedule of training (learning at NHS Wales), 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

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The pre-registration nursing programme documentation (adult and mental health) identifies learning, teaching and assessment strategies that enable and support students to achieve NMC learning outcomes and competencies at progression points and for entry to the NMC register (24, 30, 38).

What we found at the event

Students confirmed that they are well prepared by the university based programme for practice placements and that the programme team effectively supports and facilitates them to meet the learning outcomes in practice placements. We found students are given opportunities to rehearse their caring skills through simulated learning, prior to commencing placements (55-6).

Mentors and managers told us they are well supported by the programme team. Signoff mentors have a clear understanding of the assessment of practice and their role in signing off competencies at progression points and at the end of the programme. They confirmed that any concerns they have about students are taken seriously by the university and poor performance of students in practice is effectively addressed (59-66).

Achievement of practice competencies is confirmed by the external examiners who visited placements, scrutinised portfolios and spoke to students, mentors and sign-off mentors (77-8).

Students in the final year of the programme reported that they feel well prepared and ready to commence employment. We heard that some students have already been made conditional job offers. Students have an awareness of the preceptorship requirements on commencing employment. Three students told us they plan to continue their professional education at Glyndwr University at post-graduate level (55-6).

We spoke with recent graduate nurses from the University who are now employed in nursing roles (adult and mental health) who told us that the nursing programme had prepared them well for registration as a nurse and for employment The graduate nurses recognise the value of their preceptorship year in consolidating their learning and are committed to supporting students and sharing their experiences (67-70).

The commissioner, employers and managers confirmed that students successfully exiting the nursing programmes (adult and mental health) are safe, competent and fit for practice (47,51).

We conclude that students on the pre-registration nursing programme achieve NMC practice learning outcomes and competencies at progression points and meet NMC standards for entry to the NMC register.

Evidence / Reference Source

- 24. Flowchart for students causing concern, 2014
- 30. Mentors newsletter, April 2013
- 38. The assessment process, 2014

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- 55. Meeting with pre-registration adult students (University) 21 January 2015
- 56. Meeting with pre-registration mental health students (University) 21 January 2015
- 59. Meeting with adult mentors and sign-off mentors in practice, 21 January 2015
- 60. Meeting with adult mentors and sign-off mentors in practice, 22 January 2015
- 61. Meeting with mental health mentors and sign-off mentors in practice, 21 January, 2015
- 62. Meeting with mental health mentors and sign-off mentors in practice, 22 January, 2015
- 63. Meeting with managers (adult) in practice, 21 January, 2015
- 64. Meeting with managers (adult) in practice, 22 January, 2015
- 64. Meeting with managers (mental health) in practice, 21 January 2015
- 65. Meeting with managers (mental health) in practice, 22 January 2015
- 66. Meetings with recent adult qualifiers in practice, 21 January 2015
- 67. Meetings with recent adult qualifiers in practice, 22 January 2015
- 68. Meetings with recent mental health qualifiers in practice, 21 January 2015
- 69. Meetings with recent mental health qualifiers in practice, 22 January 2015
- 70. Mentors database (adult) 21 January 2015

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

Students' views and evaluations about the theoretical and practice elements of the programme are sought in a number of different ways (13).

Students complete module evaluations which are collated and feed into module leader's reports, which are discussed at annual monitoring reviews (41). In addition, the department holds staff student consultative committees (SSCC) (10). Each cohort has an elected student representative who, in the first instance, approaches the programme

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leader with any concerns; particular concerns are fed into the educational management liaison group for consideration and action.

Students are given an opportunity to evaluate their experiences at the end of each placement. Placement evaluations are fed back to placement area via link tutors and inform the educational audit cycle. Information form students' evaluations from placements are also fed back via the mentors' quarterly newsletter (30).

There have been particular concerns raised in response to the impact of losing the preregistration nursing contract related to the academic staff members leaving the university and the potential impact of the delivery of the programme. The department has responded to this by designating a principal lecturer as communication point for students until the last student nurse cohort completes the programme (41).

What we found at the event

We found that the university has a consistent approach to obtaining formal feedback from students following every module and practice placement. Module and programme leaders collate feedback from students' evaluations and use this to modify the programme, as appropriate (45, 48, 53-4).

Link lecturers compile students' feedback about practice placements. A summary of placement feedback from student nurses studying at the Glyndwr University and Bangor University is fed back to the manager of the practice placement area (45, 50, 63, 65).

Managers disseminate feedback to mentors and keep a copy of the feedback in the placement area (59 - 66). Students were not able to give us any examples of where their feedback had influenced a practice learning environment. However, they told us that their experiences in practice placements had been "overwhelmingly and consistently positive (55-6).

Collated reports form students' evaluations are shared with the commissioners at contract monitoring; service managers and reported in module and annual programme review reports. The module coordinator collates theory and practice evaluations and implements action plans to address any required developments, as necessary (45).

External examiner reports provide evidence that the programme team (adult and mental health) are fully engaging with quality assurance mechanisms in both theory and practice and the programme team respond to feedback provided by the external examiner year on year (77, 78).

Our findings conclude that there are effective quality assurance processes in place to identify risk, address areas for improvement and enhance the delivery of pre-registration nursing programmes.

Evidence / Reference Source

10. SSCC minutes, health studies, 19th, November 2013

13. AEI requirements, 2014





- 30. Mentors newsletter, April 2013
- 41. AMR minutes, October 2014
- 45. Meeting to discuss academic resources and quality assurance (senior managers), 22 January 2015
- 48. Meeting to discuss fitness to practice and complaints, 21 January 2015
- 50. Meeting with practice placements team, 21 January 2015
- 53. Meeting with programme lead (adult), 21 January 2015
- 54. Meeting with programme lead (mental health), 21 January 2015
- 55. Meeting with pre-registration adult students (University), 21 January 2015
- 56. Meeting with pre-registration mental health students, (University), 21 January 2015
- 63. Meeting with managers (adult) in practice, 21 January 2015
- 65. Meeting with managers (mental health) in practice, 22 January 2015
- 77. External examiners report (mental health) and summary of visit to clinical placements, 12 December 2014
- 78. Suitability for practice files (N = 4)

Risk indicator 5.1.2 - concerns and complaints raised in practice learning settings are appropriately dealt with and communicated to relevant partners

What we found before the event

The university has a managing and escalating concerns policy developed in collaboration with other universities that share the same practice placements and with BCUHB (7). Information for students about escalating concerns is included in student handbooks; as part of the practice placement induction and provided on the VLE moodle site (24, 83, 88).

What we found at the event

We found that students, mentors and managers understand the escalating concerns policy and the procedure is available in placement areas.

The small number of placement areas that had used the procedure told us about the responsiveness of the university. We heard that in every instance appropriate action plans had been put in place to ensure that students learning was not affected and that public protection was paramount (55-6, 59 -66).

External examiners confirm that students studying the pre-registration nursing programmes meet learning outcomes and competencies to meet NMC standards. External examiner reports are clear and detailed, and confirm that they had been involved in scrutiny of theoretical and practice elements of programmes. External examiners have opportunities to visit practice placements, speak to mentors and to meet with students. The department is responsive to and constructively responds to external examiner reports (76-7).

We conclude from our findings that the university has robust processes in place to ensure issues raised in practice learning settings are appropriately dealt with and communicated to relevant partners.

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Evidence / Reference Source

- 7. Management and escalating concerns policy (Glyndwr University), 2014
- 24. Flowchart for students causing concern, 2014
- 55. Meeting with pre-registration adult students (University), 21 January 2015
- 56. Meeting with pre-registration mental health students (University), 21 January 2015
- 59. Meeting with adult mentors and sign-off mentors in practice, 21 January 2015
- 60. Meeting with adult mentors and sign-off mentors in practice, 22 January 2015
- $61. \ \textit{Meeting with mental health mentors and sign-off mentors in practice}, 21 \ \textit{January 2015}$
- 62. Meeting with mental health mentors and sign-off mentors in practice, 22 January 2015
- 63. Meeting with managers (adult) in practice, 21 January 2015
- 64. Meeting with managers (adult) in practice, 22 January 2015
- 64. Meeting with managers (mental health) in practice, 21 January, 2015
- 65. Meeting with managers (mental health) in practice, 22 January, 2015
- 66. Meetings with recent adult qualifiers in practice, 21 January, 2015
- 76. External examiners report (adult) and summary of visit to clinical placements, 12 December 2014
- 77. External examiners report (mental health) and summary of visit to clinical placements, 12 December 2014

Outcome: Standard met

Comments: No further comments.

Areas for future monitoring: None identified.

Personnel supporting programme monitoring

Prior to monitoring event

Date of initial visit: 06 Jan 2015

Meetings with:

Monitoring coordinator, Glyndwr University

Route leader, mental health, Glyndwr University

Head of academic, business division, health, Glyndwr University

Programme leader for pre-registration nursing, Glyndwr University

Communications lead for pre-registration programme, Glyndwr University

Head of regulation, and professional development, BCUHB

Head of education, research and professional practice, BCUHB

At monitoring event

Meetings with:

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Monitoring coordinator, Glyndwr University

Route leader, mental health, Glyndwr University

Head of academic, business division, health, Glyndwr University

Programme leader for pre-registration nursing, Glyndwr University

Communications lead for pre-registration programme, Glyndwr University

Commissioner for Workforce Education and Development Services (All Wales)

Head of regulation, and professional development, BCUHB

Head of education, research and professional practice, BCUHB

Deputy Director of nursing - education, BCUHB

Meetings with:

	T
Mentors / sign-off mentors	18
Practice teachers	
Service users / Carers	2
Practice Education Facilitator	
Director / manager nursing	15
Director / manager midwifery	
Education commissioners or equivalent	1
Designated Medical Practitioners	
Other:	15
	link lecturers X 12
	Recent graduates X 3

Meetings with students:

Student Type	Number met
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Registered Nurse - Adult	Year 1: 0 Year 2: 0 Year 3: 7 Year 4: 0
Registered Nurse - Mental Health	Year 1: 0 Year 2: 0 Year 3: 11 Year 4: 0

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