

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

Programme provider	University Campus Suffolk
Programmes monitored	Registered Nurse - Adult; Registered Nurse - Mental Health
Date of monitoring event	11-12 Feb 2015
Managing Reviewer	Judith Porch
Lay Reviewer	Caroline Thomas
Registrant Reviewer(s)	Gordon Mitchell, Charmagne Barnes
Placement partner visits undertaken during the review	<p>Adult placements in: Ipswich Hospital NHS Trust:- Stradbroke ward (Surgical); Kirton ward (Respiratory medicine); Accident and emergency Suffolk Community Health:- Stowlodge Woodlands Unit. Independent sector: St Elizabeth's Hospice West Suffolk Hospital NHS Foundation Trust (Bury St Edmunds):- Surgical, medicine &amp; critical care services</p> <p>Mental health placements in: Norfolk and Suffolk NHS Foundation Trust:- Ipswich integrated delivery team Poppy ward (acute in-patient unit) Lark ward (psychiatric intensive care unit) Ipswich hospital: Foxhall house (forensic unit at St Clements site). Coastal Integrated delivery team Wedgewood Unit (Bury St Edmunds), Northgate ward (Acute admissions unit) Abbeygate ward (Later life/acute unit) Bury South: South integrated delivery team</p>
Date of Report	13 Mar 2015

## 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.

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

## Introduction to University Campus Suffolk's programmes

University Campus Suffolk (UCS) is a unique collaboration between the University of Essex (UoE) and the University of East Anglia (UEA) which was established in 2007. This collaboration is designed to meet the higher education needs of Suffolk and the wider community. UCS had a significant organisational restructure in 2014 when schools were merged to become two faculties. The pre-registration nursing programme sits within the Faculty of Health and Science within the department of nursing studies. The programme leads to a registered nurse qualification in the fields of adult, mental health and children's nursing.

The pre-registration nursing programme has two intakes in the academic year, September (adult and child) and February (adult and mental health). The last intake of the NMC 2004 nursing curriculum, the Dip HE/BSc nursing, was in February 2013. The new programme developed to meet the NMC 2010 standards for pre-registration nursing commenced in September 2013. This monitoring review focuses on the pre-registration nursing (adult and mental health) programme.

The Department of nursing studies works in partnership with a number of NHS Trusts across Suffolk and Norfolk who provide practice placements for student nurses. The main campus for teaching is at UCS at the Waterfront in Ipswich and because of the large geographical area there are also teaching centres at Bury St Edmunds and Great Yarmouth.

The programme leads to good employment opportunities, with more than 95% of successful students obtaining employment with local partner NHS trusts. UEA and UoE are joint awarding bodies at programme completion. UCS is in the midst of seeking Taught Degree Awarding Powers (TDAP).

The commissioner and employers confirm that the programme prepares nurses who are fit for practice at the point of registration.

The monitoring visit took place over two days and involved visits to practice placements to meet a range of stakeholders. Placement visits covered a large geographical area in Norfolk and Suffolk which include urban and rural communities. Adult nursing services were visited in Ipswich Hospital NHS Trust, Suffolk community health team and West Suffolk Hospital NHS Foundation Trust (Bury St Edmunds).

Particular consideration was given to the student experiences in the placement areas which were subject to adverse Care Quality Commission (CQC) reports in 2014 including; St Elizabeth Hospice; and mental health services in Norfolk and Suffolk NHS Foundation Trust.

## Summary of public protection context and findings

We found the following NMC key risk is currently not controlled: admission and progression. The lack of equality and diversity training for all personnel involved in the selection and recruitment of student nurses is a risk to the integrity of the admission and progression process and does not meet NMC standards. UCS must identify and implement an action plan to address this key risk.

UCS identified and implemented an action plan to ensure that systems and processes are in place to ensure the pre-registration nursing adult and mental health programme meets NMC standards to protect the public.

18 August 2015 - A review of the evidence against the action plan under the risk area admissions and progression confirmed that actions have all been met.

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

There are sufficient appropriately qualified mentors and sign-off mentors available to support the number of students studying the pre-registration (adult and mental health) programme.

There is considerable investment in the preparation and support of mentors and the completion of mentor annual updates is robust. All mentors are appropriately prepared for their role of supporting and assessing students. There is a clear understanding held by sign off mentors about assessing and signing off competence to ensure students are fit for practice to protect the public.

Disclosure and 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.

The faculty has procedures in place to address issues of poor performance in both theory and practice. The robust professional misconduct/professional unsuitability procedure manages issues of concern about a student's behaviour whether academic, or practice related. We found evidence of the effective implementation of these procedures and examples of where students have been discontinued from the programme which demonstrates the rigour of the process in ensuring public protection.

We found that UCS has well established and effective working relationships with Health Education East of England, and its partner NHS trusts and placement providers at both a strategic as well as operational level.

There is an escalating concerns policy in place for students and/or practitioners to raise issues of concern arising in practice placements which is clearly understood by students and mentors. We are confident that concerns are investigated and dealt with effectively and the public is protected.

The service user forum has been established since 2007 and we conclude that whilst some progress has been made in the engagement of service users and carers this area requires improvement.

We found that there is a good network of direct support for students in practice placements from mentors and clinical practice facilitators (CPFs). However, with the exception of the private, voluntary and independent (PVI) sector, there is a lack of clarity about the role of the link lecturer (LL). Our findings conclude that the role of the LL supporting students in practice placement settings requires improvement.

Our findings conclude that learning, teaching and assessment strategies in the pre-registration nursing programme enables students to meet the required programme learning outcomes, NMC standards and competencies. However, the programme team

(adult nursing) are required to review the effectiveness of the teaching and learning strategies to ensure students understand the application of theory to practice skills and feel confident to practice these skills in practice placements.

Sign off mentors and employers confirmed that students successfully completing the programme are competent, fit for purpose and employment.

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

We did not find any evidence to suggest there are any adverse effects on students' learning as a result of CQC reviews in placements in Norfolk and Norwich NHS Foundation Trust and St Elizabeth Hospice which were subject to adverse Care Quality Commission (CQC) reports.

### Summary of areas that require improvement

- All personnel involved in the selection and recruitment process must complete equality and diversity training.

18 August 2015 - A review of the evidence against the action plan under the risk area admissions and progression confirmed that all personnel involved in the selection and recruitment process have completed equality and diversity training.

- The engagement of service users and carers in programme development and delivery requires improvement.
- The role of the LL supporting students in practice placement settings requires improvement.
- The programme team (adult nursing) are required to review the effectiveness of the teaching and learning strategies to ensure students understand the application of theory to practice skills and feel confident to practice these skills in practice placements.
- Monitor the quality assurance processes specific to external examiner reporting in relation to theory and practice of the approved programmes.
- Review the checking process to confirm external examiners' NMC registration is active at and during the period of their appointment.

### Summary of areas for future monitoring

- Review to ensure equality and diversity training for all personnel involved in the selection and recruitment process is completed.
- Monitor progress in the engagement of service users and carers in the delivery of the programme and the assessment of students.
- Review the visibility of the LL within placement areas to support students learning.



- Review the learning and teaching strategies in relation to the development and rehearsal of practice skills required in all years of the adult nursing programme.
- Monitor the quality assurance processes specific to external examiner reporting in relation to theory and practice of the approved programmes.
- Review the checking process to confirm external examiners NMC registration is active at and during the period of their appointment.
- Monitor academic staff resources (mental health).
- Monitor the governance structures in relation to the mentor data base for the PVI sector, if this area of provision continues to grow as a provider for practice placements.

### 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

We found the academic team and senior managers are enthusiastic about the delivery of the pre-registration nursing (adult and mental health) programme. They told us about various mechanisms and strategies used to listen and respond to student nurses.

Liaison between the academic nursing lecturers and placement providers is well established. They informed us about effective systems which are in place to support both nursing and midwifery students in relation to theory and practice learning.

We were told that there are adequate staff resources to deliver the pre-registration nursing programme. There is one whole time equivalent (WTE) vacancy in the mental health team which is going out to advert; discussion is ongoing that this may be a lecturer/practitioner post with the local NHS mental health trust.

Academic staff members are clinically active or engage in research to promote their roles. We found there is variation in the number of visits LLs make to practice

placements to support the delivery of the pre-registration nursing (adult and mental health) programme but lecturers perceive that they are responsive to any concerns or complaints placement providers raise about students.

We heard that not all nursing lecturers have completed equality and diversity training, but at least one member of an admissions panel has received this training. UCS is working towards ensuring all staff members involved in the recruitment and admission of students complete this training.

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

We found that all mentors/sign off mentors, and employers are very positive about the pre-registration nursing (adult and mental health) programme delivered by UCS. They are confident that on completion of the programme, the students are fit for purpose and employable. One NHS trust guarantees all student nurses (adult) a job on successful completion of the programme.

Mentors and sign off mentors told us that they can contact the link tutor if required. We heard that the trust CPF is used as the first point of contact for student issues. The CPF liaises with the link tutor/personal tutor on matters relating to poor performance or any issues of concern about students.

We found that mentors/sign off mentors are committed to ensuring that student nurses are supported in both theory and practice learning. Mentors/sign off mentors told us that they receive good preparation for their role by attending annual updates either face to face or via an online update programme and that they are developed to meet the requirements of triennial review.

### **Students**

All students are aware of the learning outcomes and NMC competencies that they are expected to achieve. They confirmed their understanding of the policy for escalating concerns stating it is clearly communicated in the practice assessment documentation (PAD). Students are highly satisfied with the teaching and support provided by mentors in practice placements.

All the students are unsure about the named link tutor for their area of practice but feel they could call on their mentor and CPF if they had concerns relating to practice learning.

#### **Nursing (adult)**

Most student nurses (adult) convey a sense of being prepared in theory and practice for registration as a nurse. We found that students in year one of the programme are highly satisfied with their progress on the programme to date. Some second and third year students told us they perceived that the programme lacked organisation and examples cited are, in relation to timetables and communication about assessment criteria.

They expressed concerns in relation to their skills development and progression within the programme. They told us that they do not have sufficient opportunities to rehearse and develop skills within the university, which would enable them to develop confidence and help them to be more prepared for practice.

All students we met are highly enthusiastic of their practice placement learning and they



confirmed that they are well supported by their mentors and CPFs. The CPF in one acute NHS trust runs a weekly, multi-professional workshop relating to skills and topics chosen by the students which they confirmed is very beneficial for their learning.

#### Nursing (mental health)

We found student nurses (mental health) are articulate and objective in their feedback. The students confirmed that their practice learning experience is very positive. The majority of third year student nurses we met have already secured employment within the local trust on successful completion of the programme.

The first year students told us that they enjoyed their simulation learning experience. They commented that teaching of nursing (mental health) is of a high standard. Although they thought the assessment workload was not spread out evenly within the programme. The vast majority of students commented upon the late notification they receive about their practice placement.

#### Service users and carers

We were told about a service user forum, which meets once every other month and has been in existence since 2007. They had been involved in the development of the 2013 pre-registration nursing programme particularly the practice assessment documentation. Service users and carers contribute to two sessions related to service user care and are involved in selection interviews. However, they perceive that their contribution to the programme could be strengthened. Service users told us they have not received equality and diversity training required for recruitment and selection of students.

### Relevant issues from external quality assurance reports

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

The following reports require action(s):

On 22 and 29 January 2014 and 5 February 2014, the CQC undertook a routine inspection at St Elizabeth Hospice, Ipswich (1).

The inspection outcomes reported the following standard was not met:

Records - action needed.

On 8 September 2014 the CQC undertook an unannounced visit to Kingfisher House Care Home to check whether action had been taken to meet the following essential standard which was not met:

Management of medicines with enforcement action taken. A warning notice was served to be met by 10 October 2014 (2).

On 16 February 2014 the CQC undertook an unannounced visit to Anglesea Heights Nursing Home. The inspection outcomes reported the following standards were not met:

- respecting and involving people who use services - action required

- staffing - action needed

The provider was requested to submit a report to the CQC by 24 September 2014, setting out the action they will take to meet the standards (3).

On 15 August 2014 the CQC undertook an unannounced visit to Beccles Hospital in response to concerns that one or more of the essential standards of quality and safety were not being met (4).

The inspection outcomes reported the following standard was not met:

- Assessing and monitoring the quality of service provision – action needed

The hospital was requested to submit a report to the CQC by 24 September 2014, setting out the action they will take to meet the standards

There have been no UCS students placed in Beccles Hospital since October 2014. UCS confirmed that students will not be placed in Beccles Hospital until all the risks are managed (9).

On 7 January 2014 and 8 January 2014 the CQC undertook an unannounced visit to Ipswich Hospital (5). The inspection outcomes reported the following standard was not met:

Consent to care and treatment - action needed.

The hospital was requested to submit a report to CQC by 19 February 2014, setting out the action they will take to meet the standards.

On 12 November 2013, the CQC undertook a routine inspection at Woodlands, Ipswich Hospital (6). The inspection outcomes reported the following standard was not met:

Records - action needed.

The hospital has been asked to send CQC a report by 08 January 2014, setting out the action they will take to meet the standards.

On 28 and 31 October 2013, the CQC undertook a routine inspection at Lothingland. The inspection outcomes reported the following standard was not met:

Respecting and involving people who use services – action needed

Staffing – action needed

The provider must send CQC a report that says what action they are going to take to meet these essential standards (7).

On 16 December 2013 the CQC undertook a routine inspection at Wedgwood House, West Suffolk Hospital Site. The inspection outcomes reported the following standard was not met:

Staffing – action needed

Records - action needed.

The provider was required to send CQC a report confirming the action they are going to take to meet these essential standards (8).

Other CQC compliance reports relevant to placement areas used by UCS for approved nursing and midwifery programmes were considered but did not require further

discussion as part of this review.

We found all actions in the above reports are completed with the exception of the quality of checking mechanisms within Beccles Hospital (September 2014). There have been no UCS students placed in Beccles Hospital since October 2014, no students will be placed in Beccles Hospital until all the risks are managed.

From the 20 to 25 October and 6 November 2014 the CQC visited Norfolk and Suffolk NHS Foundation Trust. The report was published 3 February 2015 (67).

The inspection outcomes reported the following:

- overall rating of inadequate for the services provided
- inadequate with regard to whether services were safe and well-led
- requires improvement with regard to whether services were effective and responsive
- good with regard to whether services are caring.

The trust has been put into special measures for failing to meet standards relating to leadership and safety. Leadership related to low staff morale and the top team having a strategic direction which was not shared with practitioners. Care was seen as good but safety issues related to restraint methods, safety seclusion and medicine management (67).

The trust called a quality summit meeting of all stakeholders, including UCS and the UEA. The AElS met with the executive team CEO, director of nursing, medical director and chair. The trust has been working on its action plan since the CQC visit and members of the senior management team have been replaced during the year. UCS is assessing the risks for students using the placement (69).

UCS is working with commissioners and the trust, and all affected placement areas will have a risk assessment before a decision is made about students going into the placements week commencing 22 February 2015. A report form has been produced to demonstrate how the quality of student learning and support in one of those areas will be assured (68).

The department has postponed clinical recovery placements for all except four students so that resources can be focussed on visiting placement areas the second week in February 2015 to determine their suitability to continue as student placements (70).

UCS reports the placement area has a significant amount of positive practice and systems are in place to ensure that students have the appropriate learning experience in line with expected domains of the CQC report.

An overall action plan is in place at trust level and there is also one at local level being developed by the modern matron. The decision of the programme team is that students should remain in this placement. Students will be encouraged to read the CQC report and reflect on it in relation to their learning experience (69).

What we found at the monitoring visit:

The department continues to work closely with all practice placement partners to monitor the outcomes of external monitoring reports. There is an effective two way

communication process in place at university senior management level with nurse directors. At the monitoring visit we found that all clinical governance issues are controlled and well managed (67,69 -70, 97).

### Evidence / Reference Source

1. CQC inspection report St Elizabeth Hospice, Ipswich, March 2014
2. CQC inspection report Kingfisher House Care Home, October 2014
3. CQC inspection report Anglesea Heights Nursing Home, March 2014
4. CQC inspection report Beccles Hospital, September 2014
5. CQC inspection report Ipswich Hospital, February 2014
6. CQC inspection report Woodlands Ipswich Hospital, December 2013
7. CQC inspection report Lothingland, November 2013
8. CQC inspection report Wedgwood House, January 2014
9. University Campus Suffolk self-report, 2014/15
67. CQC report Norfolk and Suffolk NHS Foundation Trust, 3 February 2015
68. Visit to poppy ward in response to NSFT CQC report, 5 February 2015
69. Press release CQC report Norfolk and Suffolk NHS Foundation Trust, 3 February 2015
70. Email from Executive Dean UCS, 5 February 2015
97. Meeting with service representatives, 11 February 2015

### Follow up on recommendations from approval events within the last year

BSc (Hons) Specialist District Nursing/Home Nursing major modification desk top event July 2014. Recommendations include:

- Continue to develop the proposal to include service user and carer contribution to the selection process.
- Maintain and further develop arrangements for practice learning support, ensuring a sufficiency of practice teachers and mentors are available to support students.

At the monitoring visit we found that a new model for interviewing which involves service users is to be introduced in April 2015.

Two more practice teachers (PTs) have been recruited in 2014/15 with a further four PTs expected in 2015/16. A two day preparation session; a practice visit each term and a PT and mentor forum each term have been introduced (102).

Return to Practice (Nursing) approval event July 2014

Recommendations included:

- Review the PAD content and process.
- Explore opportunities to provide more innovative formative activities to inform summative assessment.

At the monitoring visit we found an additional guidance sheet for students and mentors has been developed which complements information in the PAD.

A podcast has been developed for formative activities to support PAD outcomes. This will be used for the February 2015 intake (103).

All modifications and changes to programmes are approved by the Course Approval Group (CAG), which meets monthly and the Joint Academic Committee (JAC) (9).

### Evidence / Reference Source

9. *University Campus Suffolk self-report, 2014/15*

102. *Update on recommendations for BSc (Hons) Specialist District Nursing/Home Nursing, dated 11 February 2015*

103. *Update on recommendations for Return to Practice (Nursing), dated 11 February 2015*

### Specific issues to follow up from self-report

All actions highlighted in the 2014/15 self-report are complete (9).

Specific issues followed up include:

A new DBS internal process is in place which is in addition to NMC requirements for the annual declaration of good health and good character.

Since June 2014 UCS now pays for all students to register with the online DBS update system. All students receive an annual calendar alert two months before expiry of their DBS. The commissioner, Health Education East of England (HEEoE) told us UCS had been open and transparent in identifying an issue and confirmed that the process is now very robust. HEEoE rated the quality indicator on the Quality Improvement and Performance Framework (QIPF) from amber to green in November 2014 (101).

The National Student Survey (NSS) score for the theme organisation and management in the pre-registration nursing programme fell below the university benchmark. Focus groups were held with students, clinical stakeholders and academic staff. A stakeholder event was held and an action plan agreed and implemented (64). See section 5.1.1

Key issues for 2014/15 monitoring

Reconfiguration of services at Norfolk and Suffolk Foundation Trust (NSFT) is now complete. All placements have been re-audited to review the impact of any changes resulting from this reconfiguration on students' placement support and learning. The NSFT convener and link tutor (mental health nursing) works closely with the NSFT clinical education lead for the pre-registration nursing programme to monitor and respond, when necessary, to ensure appropriate standards are in place to address

placement capacity and mentor support. See section 3.1.1.
<b>Evidence / Reference Source</b>
<p>9. <i>University Campus Suffolk self-report, 2014/15</i></p> <p>64. <i>National student survey action planning 2013 - 15</i></p> <p>101. <i>Meeting with commissioner, Health Education East of England, 12 February 2015</i></p>

Findings against key risks
<p><b>Key risk 1 – Resources</b></p> <p><b>1.1 Programme providers have inadequate resources to deliver approved programmes to the standards required by the NMC</b></p> <p><b>1.2 Inadequate resources available in practice settings to enable students to achieve learning outcomes</b></p>
<p>Risk indicator 1.1.1 - Registrant teachers have experience / qualifications commensurate with role.</p>
<p>What we found before the event</p>
<p>The majority of lecturers and all course leaders have a NMC recorded teaching qualification (10-11, 13). Lecturers are employed according to their clinical experience to ensure due regard regarding teaching in fields of practice. All academic staff members are appropriately qualified and updated as evidenced in their CVs (13).</p> <p>A central register of academic staff members' NMC registration numbers (including their register entry and recordable qualification) is maintained by the department of nursing's business administrator who monitors all staff PIN numbers and renewal dates monthly to ensure registration is maintained (10, 12).</p>
<p>What we found at the event</p>
<p>UCS monitors academic staff members' NMC registration monthly to ensure registration is active. All newly appointed nurse lecturers, as a requirement of the contract of employment, must achieve teacher status within two years of commencement of employment (66). We confirmed programme leaders act with due regard and have current registration and a teacher qualification recorded with the NMC (12).</p>



Staff CVs confirm that nurse lecturers (adult and mental health) have experience and qualifications commensurate with their role (12). Academic staff members are entitled to 18 days for staff development to maintain their scholarly activity. We heard that some lecturers use this time to update their clinical skills and undertake projects within practice placements (71).

We were told that the university's re-organisational structure in 2014 was disruptive for a short period of time when a number of staff took voluntary severance and academic posts were replaced. We found that there are adequate staff resources to deliver the pre-registration nursing programme (adult and mental health). There is currently one whole time equivalent (WTE) vacancy in the nursing (mental health) team. An advert for this post is to be circulated and discussion is ongoing that this may be a lecturer/practitioner post with the local NHS mental health trust (71).

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

- 10. NMC confirmation of registration, 25 November 2013
- 11. Proportion of staff with NMC recordable teacher qualifications
- 12. CVs and professional registration process, 4 December 2013, NMC web site checked
- 13. Register of NMC-accredited academic staff, 19 January 2015
- 66. Percentage of registrants with NMC recorded teaching qualification, February 2015
- 71. Meeting with Faculty Executive team and course leaders, UCS 11 February 2015

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

All pre-registration nursing students have a designated home trust, where their practice placements will take place. Community placements are county wide and are allocated taking into account where students live, whether they have access to a car and the availability of public transport (14).

Placements are allocated and disseminated to practice placement providers by the UCS allocation team. Students are allocated specific placements in accordance with the structure and learning requirements of the pre-registration nursing programme and in collaboration with practice placement partners (15).

The allocation of students to placement areas takes into consideration the current audit status of placements, mentor/ sign off mentor availability and the agreed capacity of the placement (14).

Each student is allocated a designated mentor for the period of the practice placement. The mentor will support no more than three students at any point in time and will work the same shifts as the student for at least 40% of the placement (16, 17).

There is an agreed process in place to ensure mentorship meets NMC Standards for learning and assessing in practice (SLAiP) (NMC, 2008) when the designated mentor becomes unavailable due to unforeseen circumstances (31).

The mentor register is kept up to date by each NHS Trust. Any issues which arise regarding capacity, mentor availability and audit status are resolved by liaison with placements, CPFs, practice education facilitators (PEFs) and UCS practice link tutors and convenors (14).

#### What we found at the event

We confirmed that UCS has a service level agreement in place with placement providers to ensure that placements are allocated to students in good time and audited in line with NMC requirements (15, 97).

Service managers and the commissioner informed us that UCS has a partnership approach to their resource and capacity planning process to support the pre-registration nursing programme (97,101).

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 (72- 74, 80). This was confirmed by viewing off duty rotas and mentor registers (72 – 74, 78, 80).

The hours and shifts completed are recorded by the student, confirmed by the mentor and monitored by the student's personal tutor when the practice documentation is taken to UCS for verification (83 – 92).

We were informed that a hub and spoke model of allocation is used to support student nurses' placement learning and provides appropriate mentorship arrangements (72 - 88).

In the pre-registration nursing (adult and mental health) programme, placements are informed of students allocation at least two months in advance: mentors are informed of the students assigned to them in advance but a number of students reported insufficient notice about their placements (73,77-78,89,91-92). However, one student confirmed that following a cancelled placement she was provided with a new placement in good time avoiding any long delay, which potentially could have impeded her progression on the programme (92). We found communication with students about their placement allocation could be strengthened.

Students told us that mentors act as effective role models; are competent in their roles, and provide feedback which is constructive, fair and useful for their development (73,75,77-78,89,92).

We conclude from our findings that there are sufficient appropriately qualified mentors and sign-off mentors available to support the number of students studying the pre-

registration (adult and mental health) programme. All mentors/sign off mentors act with due regard.

#### Evidence / Reference Source

14. *Pre-registration nursing and midwifery placement allocation principles, 28 November 2013*
15. *Schedule 2 partnership agreement between University Campus Suffolk (the education provider) and the placement provider undated*
16. *<http://www.ucs.ac.uk/practicelearning> accessed 31 January 2015*
17. *Mentor handbook 2014/15*
31. *Guidance on consistency of mentoring pre-registration nursing programmes, undated.*
72. *Meeting with CPF and mentor, Ipswich Hospital NHS Trust- Stradbroke ward, 11 February 2015*
73. *Meeting with mentor and charge nurse, Ipswich Hospital NHS Trust -Kirton ward, 11 February 2015*
74. *Meeting with CPF and Lead nurse, Ipswich Hospital -A & E, 11 February 2015*
75. *Meeting with six students at Ipswich Hospital NHS Trust, 11 February 2015*
76. *Meeting with students (mental health) UCS, 11 February 2015*
78. *Meeting with mentor and student, St Elizabeth's Hospice, 11 February 2015*
80. *Meeting with CPF, mentors and students, ward manager , wards F6, G9 and Critical care, West Suffolk NHS Foundation Trust, 11 February 2015*
83. *Meeting with mentors, Poppy ward (acute in-patient), 11 February 2015*
84. *Meeting with mentors, Lark ward (psychiatric intensive care unit), 11 February 2015*
85. *Meeting with service managers, Woodlands unit, 11 February 2015*
86. *Meeting with mentors and manager Foxhall House (forensic unit), 11 February 2015*
87. *Meeting with mentors, manager costal integrated delivery team, 11 February 2015*
88. *Meeting with mentor, Northgate ward Wedgewood unit (acute admissions unit), 12 February 2015*
- 88a. *Meeting with student Northgate ward Wedgewood unit (acute admissions unit), 12 February 2015*
89. *Meeting with mentor Abbeygate ward Wedgewood unit (later life/acute unit), 12 February 2015*
90. *Meeting with mentors, Bury South Integrated delivery team, 12 February 2015*
91. *Meeting with student Home treatment team, Wedgewood unit , 12 February 2015*
92. *Meeting with student Southgate ward, Wedgewood unit , 12 February 2015*
97. *Meeting with service representatives, 11 February 2015*
101. *Meeting with commissioner, Health Education East of England, 12 February 2015*

**Outcome: Standard met**

#### Comments:

- There is a current vacancy in the pre-registration nursing (mental health) team. An advert for this post is to be circulated and discussion is ongoing that this may be a lecturer/practitioner post with the local NHS

<p>mental health trust.</p> <ul style="list-style-type: none"> <li>A number of students reported receiving insufficient notice about their placements. UCS could strengthen communication with students about their placement allocation.</li> </ul>
<p>Areas for future monitoring:</p> <ul style="list-style-type: none"> <li>Monitor academic staff resources (mental health).</li> </ul>

Findings against key risks
<p><b>Key risk 2 – Admissions &amp; Progression</b></p> <p><b>2.1 Inadequate safeguards are in place to prevent unsuitable students from entering and progressing to qualification</b></p>
<p>Risk indicator 2.1.1 - admission processes follow NMC requirements</p>
<p>What we found before the event</p>
<p>UCS has a recruitment and retention group that meets every month and involves course leaders for all NMC and Health Care Professions Council (HCPC) programmes, service users and placement providers in monitoring and evaluating recruitment processes.</p> <p>During 2013/14 a review of all programmes indicated a need to standardise processes and improve selection that included a consideration of values and behaviours. All programmes have developed a series of mini stations to include group activities, numeracy and literacy tests and a face to face interview (Mini Multiple Interviews). The process has also embedded NHS values (9).</p> <p>As part of the development of those involved in recruitment and selection a series of training events on NHS values were provided in conjunction with HEEoE (9).</p> <p>Academic staff and practitioners must have appropriate experience within their field to participate in the interview process and have completed interview training within the last three years. In addition, one member of each interview panel will have completed equality and diversity training within the last two years and safeguarding training relevant to the role (23, 29 and 30).</p> <p>Service users and carers (SUC) are part of the recruitment and selection process for the pre-registration nursing (adult and mental health) programme (9). A feedback sheet for SUCs to complete has been developed to assist consistency in decision making (32).</p> <p>Nursing (adult)</p> <p>There is a two day selection and recruitment strategy; day one includes a range of activities such as numeracy and literacy tests and a group task. This gives applicants</p>

the opportunity to interact with students, service users and practitioners (15,19,22).

Candidates who are successful on day one will be invited to attend an individual interview with an academic and a practitioner on day two.

Nursing (mental health)

There is a one day selection and recruitment strategy; the morning includes a range of activities such as numeracy and literacy tests and a group task. Those who are successful in the numeracy and literacy tests are invited to attend an individual interview with a nurse lecturer and a practitioner in the afternoon (22).

A satisfactory Disclosure and Barring Service (DBS) enhanced disclosure and satisfactory occupational health check are required for all applicants prior to commencing placements (19 -22). Any DBS concerns are reviewed by the faculty's admissions panel, which includes a practitioner, who make a recommendation regarding the application (25- 26).

There is a policy for the protection of vulnerable adults and those under 18 years of age which protects both the public and students (29-30).

What we found at the event

We heard that the approach to selection and recruitment is working well. There is a two day selection for adult nursing and one day selection for mental health nursing which includes literacy and numeracy tests and multiple mini interviews which include practitioners and service users (9). We heard the mental health recruitment was only over one day due to smaller numbers of applicants and the geographical distance candidates had to travel as both days is not always consecutive, however this is being reviewed (71).

The strengthening of a tripartite approach to decision making for selection of students includes nurse lecturers, service users/carers and practice placement representatives (9, 20, 23, 71). We viewed an interview schedule which confirmed this process and this was verified by service providers and service users (97, 104).

However, we heard that not all personnel involved in the recruitment and selection process have completed equality and diversity training. We were informed that the faculty has offered service users equality and diversity training but this has been declined.

The faculty confirmed that they are working towards achievement of equality and diversity training for all interviewers to meet NMC standards (71, 105).

UCS ensures that each student has a satisfactory DBS and health status check before going into practice placement. Students confirmed that they sign an annual declaration of good health and good character. (22, 71, 75, 77).

We found that there are processes in place to monitor students' attrition at each progression point in the pre-registration nursing (adult and mental health) programme. Attrition data is analysed by the faculty health performance group with common themes identified and appropriate action taken, as necessary. Reports are considered by the

<p>faculty executive group and the recruitment and retention group (71).</p> <p>The commissioners also monitor attrition and report that the attrition rate has reduced and is below the national average (101).</p> <p>We conclude that recruitment and admissions processes are not robust and effectively implemented to ensure students entering the nursing programme meet NMC standards and requirements. The lack of equality and diversity training for all personnel involved in the selection and recruitment of student nurses is a risk to the integrity of the process.</p>
<p>Evidence / Reference Source</p>
<ul style="list-style-type: none"> <li>9. <i>University Campus Suffolk self-report, 2014/15</i></li> <li>19. <i>Applicant guidelines 2015 adult nursing</i></li> <li>20. <i>Admissions policy (AEI requirements, 1.3) accessed January 2015</i></li> <li>22. <i>Applicant guidelines 2015 mental health nursing</i></li> <li>23. <i>UCS department of nursing studies – selection interview form</i></li> <li>25. <i>Paperless criminal convictions process – courses requiring a CRB check (V1)</i></li> <li>26. <i>Criminal convictions policy version 1.2.0 (February 2013)</i></li> <li>29. <i>Safeguarding children and young people: code of conduct version 1.1 (September 2009)</i></li> <li>30. <i>Safeguarding policy and code of conduct version 2 (December 2014)</i></li> <li>32. <i>Service user feedback sheet for selection</i></li> <li>71. <i>Meeting with Faculty Executive team and course leaders, UCS, 11 February 2015</i></li> <li>75. <i>Meeting with six students at Ipswich Hospital NHS Trust, 11 February 2015</i></li> <li>77. <i>Meeting with mentors and students, Suffolk Community Health –Stow Lodge, 11 February 2015</i></li> <li>97. <i>Meeting with service representatives, 11 February 2015</i></li> <li>104. <i>Dates for adult nursing selection day January 2014 – January 2015</i></li> <li>105. <i>Equality and diversity and safeguarding training, list of attendees, 4 February 2015</i></li> </ul>
<p>Risk indicator 2.1.2 - programme providers' procedures address issues of poor performance in both theory and practice</p>
<p>What we found before the event</p>
<p>The minimum requirements, responsibilities and entitlements of the department and its service provider partners are agreed in signed partnership agreements (15).</p> <p>Processes for reporting and supporting concerns regarding students' underachievement of competence are key to learning and development agreements with all practice placement partners (15, 33). The processes are implemented where there are concerns about a student's performance in practice. This policy is also used in conjunction with</p>



the faculty's fitness to practise procedure (34-35, 37).

The academic misconduct student guide outlines processes which apply to all forms of assessment (36).

During 2013/14 two professional misconduct and unsuitability panels were convened in accordance with the UCS policy. The first was in response to an allegation that a nursing student had falsified the signature of their mentor on the PAD and the second that a nursing student had falsified their practice attendance log (time sheet). In both instances the allegations were proven and the students were subsequently withdrawn from their programmes (9).

#### What we found at the event

We found that there is a clear policy and process for re-assessment and progression points. The programme team confirmed that the 12 week rule is only used for exceptional cases as the assessment and re assessment period are within the programme year (71). This was confirmed by students (75, 80).

We heard personal tutors discuss any concerns related to academic performance and develop and implement an action, if required (71, 75, 92). Students may be directed to UCS support services for additional support. One student positively reported having used these services (92).

We confirmed that the university has a robust professional misconduct/professional unsuitability procedure to manage issues of concern about a student's behaviour whether academic, or practice related. There is a fitness to practise review group aligned to the professional misconduct/professional unsuitability procedure which considers, within the limits of its delegated authority, any health or character issues related to students to ensure that public protection is maintained (34-35).

We found the professional misconduct/ professional unsuitability procedure is effectively communicated to all stakeholders. Students, mentors, service managers and nurse lecturers are able to describe the process for raising concerns regarding a student's performance or behaviour (71-75, 78 – 80).

We confirmed that, in 2013/14 there were two cases considered by the professional misconduct/ professional unsuitability committee for student nurses (adult). Both cases were proven and the students were discontinued from the pre-registration nursing programme (106).

We reviewed the process and confirm it is clear and consistent with rational decision-making based upon the seriousness of the concerns. Service providers are involved in the fitness to practice process as members of the professional misconduct/professional unsuitability panel (35-36). The faculty also has a DBS panel, which includes practice placement partners in the decision-making process.

This gives us reassurance that concerns are investigated and dealt with effectively and that the public is protected.

Our findings confirm the university has effective policies and procedures in place for the management of poor performance in both theory and practice which are clearly

understood by all stakeholders. We are confident that concerns are investigated and dealt with effectively and the public is protected.

Evidence / Reference Source

- 9. *University Campus Suffolk self-report, 2014/15*
- 15. *Schedule 2 partnership agreement between University Campus Suffolk (the education provider) and (the placement provider) undated.*
- 33. *Generic guidelines for mentors for all pre-registration undergraduate nursing programmes assessment process flowchart record of achievement final version 13 August 2013*
- 34. *Professional misconduct / professional unsuitability procedure, September 2014*
- 35. *Fitness to Practise Panel: Role and function of fitness to practise review groups, December 2014*
- 36. *Academic misconduct: a student guide, 2013*
- 37. *BSc (Hons) adult, child and mental health nursing assessment regulations 2013*  
*Students suspended from placement during 2013/14 and 2014/15*
- 71. *Meeting with Faculty Executive team and course leaders, UCS, 11 February 2015*
- 72. *Meeting with CPF and mentor, Ipswich Hospital NHS Trust- Stradbroke ward, 11 February 2015*
- 73. *Meeting with mentor and charge nurse, Ipswich Hospital NHS Trust -Kirton ward, 11 February 2015*
- 74. *Meeting with CPF and Lead nurse, Ipswich Hospital -A & E, 11 February 2015*
- 75. *Meeting with six students at Ipswich Hospital NHS Trust, 11 February 2015*
- 78. *Meeting with mentor and student, St Elizabeth's Hospice, 11 February 2015*
- 79. *Meeting with Trust Education Team, West Suffolk NHS Foundation Trust, 11 February 2015*
- 80. *Meeting with CPF, mentors and students, ward manager , wards F6, G9 and Critical care, West Suffolk NHS Foundation Trust, 11 February 2015*
- 106. *Students suspended from placements during 2013-14 and 2014-15, and FtP outcomes*

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

Mentor preparation includes assessment of competence; the use of the student ongoing record of achievement and management of poorly performing students (38).

What we found at the event

We found that poor performance of students in practice is managed collaboratively by practice placement providers and academic staff (33-34).

Practice mentors/sign off mentors and service managers are able to clearly articulate the procedure for dealing with a poorly performing student in practice (71-75, 78- 80). Mentors described the support of the CPF or PEF for the trust and involvement of the personal tutor or LL, to support the student and develop and monitor an action plan. If deemed necessary the student will be removed from the practice area.

Mentors are able to give examples of how they dealt with poorly performing students (83- 90). Mentors and service providers are all confident that the university procedures are robust and an incompetent student would be removed from the programme (83- 90,97).

The mentor/sign off mentors told us that at mentor updates they discuss poorly performing students and what actions are required to support the student. The process is also outlined in the mentor handbook (17, 83-90).

We conclude from our findings that practice placement providers have a clear understanding of and are confident to initiate procedures to address issues of students' poor performance in practice. This process, whilst supportive, also ensures that students are competent and fit to practise in accordance with both university and NMC requirements to protect the public.

#### Evidence / Reference Source

- 17. *Mentor handbook 2014-15*
- 33. *Generic guidelines for mentors for all pre-registration undergraduate nursing programmes assessment process flowchart record of achievement final version 13 August 2013*
- 34. *Professional misconduct / professional unsuitability procedure September 2014*
- 38. *UCS The preparation for mentorship course*
- 71 *Meeting with Faculty Executive team and course leaders, UCS, 11 February 2015*
- 72. *Meeting with CPF and mentor, Ipswich Hospital NHS Trust- Stradbroke ward, 11 February 2015*
- 73. *Meeting with mentor and charge nurse, Ipswich Hospital NHS Trust -Kirton ward, 11 February 2015*
- 74. *Meeting with CPF and Lead nurse, Ipswich Hospital -A & E, 11 February 2015*
- 75. *Meeting with six students at Ipswich Hospital NHS Trust, 11 February 2015*
- 78. *Meeting with mentor and student, St Elizabeth's Hospice, 11 February 2015*
- 80. *Meeting with CPF, mentors and students, ward manager , wards F6, G9 and Critical care, West Suffolk NHS Foundation Trust, 11 February 2015*
- 83. *Meeting with mentors, Poppy ward (acute in-patient), 11 February 2015*
- 84. *Meeting with mentors, Lark ward (psychiatric intensive care unit), 11 February 2015*
- 85. *Meeting with service managers, Woodlands unit, 11 February 2015*
- 86. *Meeting with mentors and manager Foxhall House (forensic unit), 11 February 2015*
- 87. *Meeting with mentors, manager costal integrated delivery team, 11 February 2015*
- 88. *Meeting with mentor, Northgate ward Wedgewood unit (acute admissions unit), 12 February 2015*

88a Meeting with student Northgate ward Wedgewood unit (acute admissions unit), 12 February 2015

89. Meeting with mentor Abbeygate ward Wedgewood unit (later life/acute unit), 12 February 2015

90. Meeting mentors Bury South Integrated delivery team, 12 February 2015

97. Meeting with service representatives, 11 February 2015

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

Approval of an accreditation of prior learning claim is conducted by a formally approved sub-group of the relevant assessment board and subsequently reported to a full meeting of the assessment board. If the claim is agreed, the student will be awarded the credit and this will be noted on the transcript issued with notification of results (39, 41, 42).

#### What we found at the event

We found the university has a clear process for the accreditation of prior learning (APEL) and provided evidence to demonstrate how the process has supported students to join the nursing programme, in line with NMC standards (107).

We found numbers of APEL claims are small. We viewed an APEL claim for a student who had completed a Foundation degree in health care practice who joined year two of the BSc (Hons) nursing (adult) programme. We confirmed a robust process was followed which demonstrated mapping outcomes to NMC standards and programme learning outcomes. The successful claim was ratified at the assessment board in line with the university's QA systems prior to enrolling on year two of the pre-registration nursing (adult) programme (108).

We found systems for the accreditation of prior learning and achievement are robust and well managed within the department.

#### Evidence / Reference Source

39. UCS APL policy, November 2014

41. Accredited prior learning a student guide, November 2014

42. Accreditation of prior (experiential) learning (ap(e)), November 2014

107. APEL claim mapping of FD Healthcare practice into BSc (Hons) Nursing, December 2012

108. Minutes of assessment board, 23 January 2013

**Outcome: Standard not met**

Comments:

- Not all personnel involved in the recruitment and selection process have completed equality and diversity training. The university confirmed that they are working towards achievement of equality and diversity training for all interviewers to meet NMC standards.

**18 August 2015: Follow up Documentary Evidence from University Campus Suffolk. Standard now met**

Updated 18 August 2015

UCS identified and implemented an action plan to ensure that systems and processes are in place to ensure the pre-registration nursing adult and mental health programme meets NMC standards to protect the public.

18 August 2015 - A review of the evidence against the action plan under the risk area admissions and progression confirmed that actions have all been met.

UCS staff development database shows all NMC registered staff have undertaken E&D training within the last 12 months. New starters will complete E&D training within six weeks of commencing employment. They will not be involved in selection until training has been completed.

Service users have all completed the on-line E&D training.

All interview panels are scrutinised to ensure only staff who have had E&D training are involved in student interviews. A proforma is signed by all those involved in interviewing prospective students to confirm they have had equality and diversity training. This includes placement provider representatives.

The Recruitment & Retention Group terms of reference identify their responsibility for meeting recruitment requirements of regulatory bodies. An audit of the completed proforma will be audited three times per year.

All actions completed 18 August 2015.

2.1.1 Admissions and progression – risk theme now met 18 August 2015

Evidence:

Extract from the HR database academic staff completion of E&D training, dated 01 July 2015

Extract from HR database service users completion of on-line E&D training (individual completions dates, last date entered 08 August 2015).

Sample proforma for interviewers to sign confirming completion of E&D training.

Samples of signed proforma for interview selection days dated 22 April 15 and 16 July 15

Recruitment and retention, membership and terms of reference, updated February 2015

Recruitment and retention meeting notes, dated 06 May 2015

Minutes of the Faculty Executive meeting, 01 July 2015

Areas for future monitoring:

- All personnel involved in the selection and recruitment process have completed equality and diversity training.

### Findings against key risks

#### Key risk 3- Practice Learning

**3.1 Inadequate governance of and in practice learning**

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

**3.3 Assurance and confirmation of student achievement is unreliable or invalid**

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

What we found before the event

There are placement agreements in place between UCS, the commissioners and practice placement providers (9, 15).

Partnership is demonstrated between UCS and key stakeholders through a range of meetings at strategic and operational levels including: the quarterly strategic review (QSR) group facilitates strategic discussion between senior partners of the faculty, Norfolk and Suffolk workforce partnership and HEEoE, to encourage partnership working, share strategic plans, develop portfolios and discuss contractual changes (21).

The operational contract monitoring (OCM) group chaired by the HEEoE includes representatives from the UCS, practice placement providers and local employers. They monitor the quality, performance and development of the pre and post-registration AEI contracts; review quarterly performance reports and the Quality improvement and performance framework (QIPF) action plans; identify risks and issues and work together to formulate action plans (21).

The Education partnership forum (EPF) is where academic and practice education facilitators meet to discuss wider issues impacting on student education and behaviour (21, 40).

There is a pre-registration operational group (PROG) which includes representatives from the academic programme teams and educational leads who meet to discuss programme issues (21).

All placements have an educational audit completed every two years in partnership



between academic LLs and placement providers (21, 44, 46-47).

There is a securing education standards process for issues raised in practice placements that affect the learning environment which are the discussed by the pre-registration operational group (45). In addition, wider issues are discussed at the EPF meetings (21, 40,43).

The department has a process for students to raise and escalate concerns and another procedure to address potential issues of concern in practice identified in students' submitted academic work (48, 49-50). Any issues raised through escalating concerns are managed through the LL team and reported via the PROG committee and EPF (21, 40, 44).

There is a joint clinical education steering group that meets bi monthly where both UCS and the UEA representatives discuss issues of shared audit and student issues. In addition, there is a bi-monthly clinical forum chaired by the educational lead at Norfolk and Suffolk NHS Foundation Trust (21, 51).

#### What we found at the event

Our findings demonstrate that the university has well established and effective working relationships with HEEoE, and its partner NHS trusts and placement providers.

This is confirmed by all stakeholders who told us that the effective partnership works at both a strategic and operational level. Examples include: strategic meetings involving the Executive Dean with Directors of Nursing/Chief Nurses from NHS trusts on a quarterly basis (76, 79) and the education partnership forum which includes senior academic staff, senior trust staff and commissioners. At an operational level the education lead within each trust and CPFs are members of the pre-registration nursing operations group (97).

Communication systems and information exchange between the trusts and the university is well established including responsiveness to external monitoring. There are clear processes for communicating and managing clinical governance issues with UCS in the event of any untoward incidents occurring. We found that when a CQC inspection visit reports standards are not met the trust will notify UCS and involvement includes HEEoE (69,70).

There is a joint process for reviewing the risks to students' learning utilising an educational risk assessment process. We reviewed evidence of the use of the risk assessment process following recent concerns in Norfolk and Suffolk NHS Foundation Trust. The tool used by the LL was developed specific to the main concerns identified in the CQC outcomes. The report found that there is no risk to student nurses placement learning (96). The faculty may wish to formalise an educational risk assessment tool to ensure consistency of reporting of risk.

Student nurses (mental health) told us they have been fully informed about the outcomes of the CQC report (83-86). UCS are re-auditing all placement areas on a rolling programme (71).

In the event of risks requiring the resting of placements or withdrawal of placements we

were informed that joint working between the trust and the link tutor takes place to support mentors and students. This includes a clear action plan jointly developed and documented on an education standards form, which is shared and monitored by UCS and the trust pre-registration education forum (79).

PVI placement provision is relatively small and communication processes are between the placement lead and the organisation. The PVI placements have a placement learning agreement but no learning development agreements to ensure safe and supportive practice learning resources are in place (71, 76, 79).

We found that direct questions about external monitoring visits and outcomes are included in the educational audit tool. The placement lead/LL is pivotal in gaining and sharing this information in relation to the PVI organisations (100). However, if the PVI provision grows we recommend that further review of the governance structures will be beneficial.

There are clear procedures for approval of practice placements and the procedure for the educational audit of practice placements. The educational audit process is clearly understood and reflects the NMC requirements. All placements are audited every two years in partnership between academic LLs and placement providers. The link tutor reviews issues from the audit, highlights good practice and agrees activities to enhance placement learning. We confirmed that all audits reviewed were in date (109-112).

Any action plan required following the audit is monitored by the link tutor /lecturer convenors and the academic placement lead (21, 44, 46- 47,). One acute NHS trust engages in a capacity audit every six months and informs the UCS placement team about mentor availability, including sign off mentors (79).

Placement allocation is the responsibility of UCS and NHS trust partners and is managed by the faculty's allocations team who record all details of placements; the status of each placement area; the alerts to complete audits when due and do not allocate a student to a non-audited area. (74,78, 90,99). All CPFs confirm strong links with the allocations team at UCS and receive notifications of student placements at least two months in advance.

There is an escalating concerns policy in place for students and/or practitioners to raise issues of concern arising in practice placements which is clearly understood by students and mentors (71, 75, 78-80, 90). We found the policy is in the front of students' PAD documents and students told us that they would report concerns to a university tutor (73, 75, 77).

We heard an example about a student nurse (mental health) who had been effective in raising a concern about an infection control issue regarding the disposal of medication. The student told us how they were empowered by their mentor to contribute to addressing the issue. The student had contacted the pharmacy department and arranged for a pharmacist to visit the ward to instruct staff about the safe disposal of medication (82).

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

Evidence / Reference Source

9. *University Campus Suffolk self-report, 2014/15*
15. *Schedule 2 partnership agreement between University Campus Suffolk (the education provider) and (the placement provider), undated*
21. *AEI requirements accessed January 2015*
40. *UCS and practice education partners joint education forum (JEF) terms of reference 2013*
43. *Pre-registration operational group terms of reference, May 2009*
44. *Link lecturing strategy review placement learning teams, October 2013*
45. *Securing education standards - a guide to managing concerns in practice learning, January 2012*
46. *Educational audit flow chart, undated*
47. *James Paget University Hospitals NHS Foundation Trust UCS UEA shared educational audit 2013/14*
48. *Concerns raised through academic assessments, April 2013*
49. *Raising and escalating concerns student guide, March 2013*
50. *Pre-registration nursing student handbook 2014/15*
51. *UEA/UCS joint education meeting agenda 6 November 2013*
69. *Press release CQC report Norfolk and Suffolk NHS Foundation Trust, 3 February 2015*
70. *Email from Executive Dean UCS, 5 February 2015*
71. *Meeting with Faculty Executive team and course leaders, UCS, 11 February 2015*
73. *Meeting with mentor and charge nurse, Ipswich Hospital NHS Trust -Kirton ward, 11 February 2015*
74. *Meeting with CPF and Lead nurse, Ipswich Hospital -A & E, 11 February 2015*
75. *Meeting with six students at Ipswich Hospital NHS Trust, 11 February 2015*
76. *Meeting with Service managers, Ipswich Hospital NHS Trust, 11 February 2015*
78. *Meeting with mentor and student, St Elizabeth's Hospice, 11 February 2015*
79. *Meeting with Trust Education Team, West Suffolk NHS Foundation Trust, 11 February 2015*
80. *Meeting with CPF, mentors and students, ward manager, wards F6, G9 and Critical care, West Suffolk NHS Foundation Trust, 11 February 2015*
82. *Meeting with students, 11 February 2015*
83. *Meeting with mentors, Poppy ward (acute in-patient), 11 February 2015*
84. *Meeting with mentors, Lark ward (psychiatric intensive care unit), 11 February 2015*
85. *Meeting with service managers, Woodlands unit, 11 February 2015*
86. *Meeting with mentors and manager Foxhall House (forensic unit), 11 February 2015*
90. *Meeting mentors Bury South Integrated delivery team, 12 February 2015*
96. *Additional meeting with adult nursing course leaders, 12 February 2015*
97. *Meeting with service representatives, 11 February 2015*
99. *Meeting with placement team, 12 February 2015*
100. *Meeting with PVI placement lead, 11 February 2015*
109. *Educational audit The Ipswich Hospital NHS Trust Emergency department educational audit, 23 May 2014*
110. *Educational audit The Ipswich Hospital NHS Trust: Stradbroke ward educational audit, 23 May 2014*
111. *Educational audit The Ipswich Hospital NHS Trust Kirton ward educational audit, 10 February 2014*
112. *Educational audit St Elizabeth's Hospice educational audit, 23 May 2014*

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

programme development and delivery
What we found before the event
The involvement of service users and carers in educational and research activities under the auspices of the service user forum is viewed as integral to the department's activities. This includes programme planning and approval; delivery of learning and teaching; student selection; practice learning; assessment; management of evaluations and research activities (52).
What we found at the event
<p>We found that UCS has a long established service user and carer forum, in place since 2007. Service users and carers informed us that they were once consulted about the development of the curriculum via email and responded as individuals (81).</p> <p>They told us that they have spoken to groups of pre-registration nursing students and reported that the students treated them with dignity and respect and asked lots of questions. They also confirmed their involvement in the interview process; they were involved in the multi mini interview schedule, but they were unsure which field of nursing the applicants wished to study (81).</p> <p>We heard that a carer had spoken to students on two occasions about her experience of caring for terminally ill family members and issues related to care to help students empathise with needs of service users (81). The representatives of the service user forum informed us that service user engagement in the pre-registration nursing programme was very limited and that they were underutilised as a resource.</p> <p>Nursing (adult)</p> <p>We are informed by the programme leaders that practice placement representatives are involved in curriculum development and delivery and that service users teach on two modules within the pre-registration nursing (adult) programme (71). CPFs confirmed their involvement in programme development for the pre-registration nursing (adult) programme (76, 79).</p> <p>Service users confirmed they do sessional work on these two modules and expressed a desire to have more involvement in all activities that involve nursing students (81).</p> <p>Nursing (mental health)</p> <p>The programme team have involved service users in the world mental health day and an information event within the Norfolk and Suffolk NHS Foundation Trust. The team confirmed that they are working towards regular timetabling of sessions involving service users and carers within the pre-registration nursing (mental health) programme (71).</p> <p>The programme team told us that experienced expert practitioners contribute to the pre-registration nursing (mental health) programme; examples include involvement in specialist days on acute mental health conditions and child and adolescent mental</p>

health (71). During community-based placements students have access to experienced practitioners to aid breadth of learning (78, 90).

Nurse practitioners (mental health) are invited to talk to student nurses on the “insight” days and there is also joint teaching with the mental health lecturers. Mentors confirmed they had been asked or knew practitioners who had taught on the pre-registration nursing programme at the university (71, 88-89).

Students and mentors told us that service users provide feedback to year one student nurses (adult) as part of the assessment process but this has not occurred in other years of the programme or in the pre-registration nursing (mental health) programme (73, 75-76, 92). Students reported that service user involvement was important for their personal and professional development. Mentors perceived that students need more feedback from service users as part of the assessment process (78, 90).

Our findings confirm that practitioners and service users and carers are involved in the development and delivery of the pre-registration nursing (adult and mental health) programme. The service user forum has been in place since 2007 and we conclude that whilst some progress has been made in the engagement of service users and carers this area requires improvement.

#### Evidence / Reference Source

- 52. *Service user forum, undated*
- 71. *Meeting with Faculty Executive team and course leaders, UCS, 11 February 2015*
- 73. *Meeting with mentor and charge nurse, Ipswich Hospital NHS Trust -Kirtton ward, 11 February 2015*
- 75. *Meeting with six students at Ipswich Hospital NHS Trust, 11 February 2015*
- 76. *Meeting with students (mental health) UCS, 11 February 2015*
- 78. *Meeting with mentor and student, St Elizabeth’s Hospice, 11 February 2015*
- 79. *Meeting with Trust Education Team, West Suffolk NHS Foundation Trust, 11 February 2015*
- 81. *Meeting with service users, 12 February 2015*
- 88. *Meeting with mentor Northgate ward Wedgewood unit (acute admissions unit), 12 February 2015*
- 89. *Meeting with mentor Abbeygate ward Wedgewood unit (later life/acute unit), 12 February 2015*
- 90. *Meeting mentors Bury South Integrated delivery team, 12 February 2015*
- 92. *Meeting with student Southgate ward, Wedgewood unit , 12 February 2015*

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

#### What we found before the event

Effective links between the department and practice placements is managed through the LL strategy which aims to ensure students are supported whilst on placement, and mentors have a named contact within the department. The LL is responsible for arranging and undertaking educational audits and mentor annual updates. LL duties are



allocated through the academic workload and monitored through the LL attendance log (44).

Students are allocated a personal tutor for the duration of the programme. The department ensures that the progress of students on placement (both academic and pastoral) is monitored during the placement allocation (50).

#### What we found at the event

We found that the LL role model differs in the acute sector which is team based approach with the practice learning team overseeing the provision and a named first contact LL for each area. The community and independent sector model has named lecturers linking with individual areas (44).

Guidance for mentors and stakeholders regarding the LL role is available in the 'Supporting students in practice' area of the UCS website (113)

CPFs and mentors confirm that LLs are involved in mentor updates (72, 79-80)

There is a LL log to document their contact with the placement areas; the reasons for the visit, and to monitor LLs workload (71). The LL strategy identifies the support offered to trusts which includes; monthly tour of placements; monthly practice learning surgeries, completion of educational audits and bi-monthly triangulation meetings (44).

#### Nursing (adult)

We are told by the programme team (71) that all students are allocated a personal tutor. CPFs confirm that the personal tutor and the mentor work together to develop an action plan, following issues identified in relation to poor performance of a student during practice placement (72, 79).

The programme team informed us that all academic staff are members of the Placement learning teams, which have recently been reviewed as part of the link lecturing strategy review (71). The LL model includes a convenor and two / three LLs, depending on the size of the trust; LLs visit the placement area once a month (71).

We found that mentors and students are not clear about the LL model and most mentors we met could not name the convenor or LL who is associated with the trust (72 – 76, 80). They told us that they would always contact the CPF, if needed.

We found that the PVI placement we visited has its own named LL and this is confirmed by the mentor and student (78). The LL is involved in the educational audit and action planning, as necessary.

#### Nursing (mental health)

All mentors we interviewed confirmed that they knew they had to contact the university if they had any concerns regarding a student's performance, some were unsure if this would be the LL or the student's personal tutor, although they did feel supported by the nurse lecturers (mental health) if they needed to contact them (83 - 90).

Students told us that they have never seen a LL in the placement areas (82, 88a, 91-92).



The LL role in supporting students in practice is specified in the nursing programme handbooks indicating that there is a system of link-lecturing in place. However, there is a variation in expectations amongst the academic staff team concerning the frequency of expected visits and time nurse lecturers should spend in practice (71).

We found that the majority of nurse students (adult and mental health) are unclear about the role of the LL to support their learning. In addition, the majority of students we met told us that they never receive a visit from nurse lecturers from the UCS whilst on placement (75-77,92).

We found that there is a good network of direct support for students in practice placements from mentors and CPFs. However, whilst LLs are involved in the educational audit of practice placements provision, with the exception of the PVI sector, we found that there is lack of clarity about their role and very few LLs visit placements to offer support to students and mentors.

Our findings conclude that the role of the LL supporting students in practice placement settings requires improvement.

#### Evidence / Reference Source

- 44. *Link lecturing strategy review October 2013 / reviewed January 2015*
- 50. *Pre-registration nursing student handbook, 2014*
- 71. *Meeting with Faculty Executive team and course leaders, UCS, 11 February 2015*
- 72. *Meeting with CPF and mentor, Ipswich Hospital NHS Trust- Stradbroke ward, 11 February 2015*
- 73. *Meeting with mentor and charge nurse, Ipswich Hospital NHS Trust -Kirton ward, 11 February 2015*
- 74. *Meeting with CPF and Lead nurse, Ipswich Hospital -A & E, 11 February 2015*
- 75. *Meeting with six students at Ipswich Hospital NHS Trust, 11 February 2015*
- 76. *Meeting with students (mental health) UCS, 11 February 2015*
- 77. *Meeting with mentors and students, Suffolk Community Heath –Stowlodge, 11 February 2015*
- 78. *Meeting with mentor and student, St Elizabeth's Hospice, 11 February 2015*
- 79. *Meeting with Trust Education Team, West Suffolk NHS Foundation Trust, 11 February 2015*
- 80. *Meeting with CPF, mentors and students, ward manager, wards F6, G9 and Critical care, West Suffolk NHS Foundation Trust, 11 February 2015*
- 82. *Meeting with students, 11 February 2015*
- 83. *Meeting with mentors, Poppy ward (acute in-patient), 11 February 2015*
- 84. *Meeting with mentors, Lark ward (psychiatric intensive care unit), 11 February 2015*
- 85. *Meeting with service manager, Woodlands unit, 11 February 2015*
- 86. *Meeting with mentors and manager, Foxhall House (forensic unit), 11 February 2015*
- 87. *Meeting with mentors and manager, Costal integrated delivery team, 11 February 2015*
- 88. *Meeting with mentor, Northgate ward, Wedgewood unit (acute admissions unit), 12 February 2015*
- 88a. *Meeting with student, Northgate ward, Wedgewood unit (acute admissions unit), 12 February 2015*
- 89. *Meeting with mentor, Abbeygate ward, Wedgewood unit (later life/acute unit), 12 February 2015*
- 90. *Meeting with mentors, Bury South Integrated delivery team, 12 February 2015*

91. Meeting with student, Home treatment team, Wedgewood unit, 12 February 2015

92. Meeting with student Southgate ward, Wedgewood unit, 12 February 2015

113. Guidance for mentors and stakeholders regarding the LL role is available in the 'Supporting students in practice' area of the UCS website <http://www.ucs.ac.uk/Faculties-and-Centres/Faculty-of-Health-and-Science/Supporting-Students-in-Practice/Link%20lecturers.aspx>

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

All mentorship modules at UCS are NMC approved for the preparation of stage two mentors to meet the requirements of the NMC SLAiP (NMC, 2008) (16).

Mentors/sign off mentors are supported in their role by HEEoE funded practice education facilitators.

The placement office allocates students to placements areas in accordance with the programme structure agreed by UCS programme teams in conjunction with practice placement providers. Mentor numbers and the verification of active mentors is confirmed via the PEFs (53).

What we found at the event

The university provides an NMC approved mentor preparation module at academic level 6 and level 7 and also a non-accredited module.

We found CPFs, PEFs and employers support mentors to complete the university's NMC approved mentor preparation module to enable them to support and assess student nurses (73-74,78, 90).

Mentors and sign off mentors supporting students studying the pre-registration nursing (adult and mental health) programme confirmed they are well prepared for their role in assessing practice (83 - 85, 87- 90).

We viewed mentor databases and verified that all listed mentors hold a mentor qualification and there are adequate numbers of sign-off mentors (79, 95).

Evidence / Reference Source

16. <http://www.ucs.ac.uk/practicelearning> accessed 31 January 2015

53. Pre-registration nursing and midwifery placement allocation principles

73. Meeting with mentor and charge nurse, Ipswich Hospital NHS Trust -Kirtton ward, 11 February 2015

74. Meeting with CPF and Lead nurse, Ipswich Hospital -A & E, 11 February 2015

78. Meeting with mentor and student, St Elizabeth's Hospice, 11 February 2015

79. Meeting with Trust Education Team, West Suffolk NHS Foundation Trust, 11 February 2015

- 83. Meeting with mentors, Poppy ward (acute in-patient), 11 February 2015
- 84. Meeting with mentors, Lark ward (psychiatric intensive care unit), 11 February 2015
- 85. Meeting with service managers, Woodlands unit, 11 February 2015
- 87. Meeting with mentors, manager costal integrated delivery team, 11 February 2015
- 88. Meeting with mentor, Northgate ward Wedgewood unit (acute admissions unit), 12 February 2015
- 89. Meeting with mentor Abbeygate ward Wedgewood unit (later life/acute unit), 12 February 2015
- 90. Meeting with mentors, Bury South Integrated delivery team, 12 February 2015
- 95. Meeting with acting education clinical lead and viewed live mentor data base, Norfolk and Suffolk Foundation NHS trust, 11 February 2015

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

Ipswich hospital NHS trust includes mentor update activities as part of mandatory training days. UCS provides regular mentor update events for mentors from other NHS trusts and PVI organisations who are placement providers (16). Mentors are required to sign a specimen signature page in the student practice assessment documentation. This is also a declaration that they have attended an update in the last 12 months and that their triennial review is up to date which serves to protect the public (54 -59).

Any changes to the number of available mentors or placement experience may require a re-negotiation of student numbers with the PEF/CPF and allocations office/practice lead at UCS (9).

What we found at the event

Mentor updates are part of mandatory training at NHS trusts. Mentors told us that they attend a local annual update session at their nearest hospital education centre or CPFs/ PEFs or LLs attend the clinical areas to update them. UCS holds regular mentor update events (83 -85, 87-90).

The PVI mentors access mentor updates via the LL or access the online mentor update (72, 77- 78). There is also a university online mentor update which is marked and feedback given. Mentors can only do an online update every two years. Mentors and ward managers are sent an electronic reminder about updates (79).

We are told that there is a commitment at senior level to ensure mentors and sign off mentors are able to attend annual updates and supported to meet the requirements of triennial review (76, 79). This was confirmed by mentors (72-74, 75-78, 80)

Mentors are required to sign a specimen signature page in the student practice assessment documentation. This is also a declaration that they have attended an

update in the last 12 months and that their triennial review is up to date (54 -59).

We verified the record of the updates and triennial review for each mentor on the 'live' register for mentors supporting student nurses in NHS trusts and the PVI (95). We confirmed that student nurses (adult and mental health) are supported by mentors who work with them for a minimum of 40% of the time in practice and this was supported by viewing the placement areas off duty (83-85, 87- 90).

We conclude that mentors and sign off mentors attend annual updates sufficient to meet requirements for triennial review and to support the assessment of practice.

#### Evidence / Reference Source

- 9. *University Campus Suffolk self-report, 2014/15*
- 16. *<http://www.ucs.ac.uk/practicelearning> accessed 31 January 2015*
- 54. *Practice assessment documentation adult nursing year one, August 2013*
- 55. *Practice assessment documentation adult nursing year two, August 2013*
- 56. *Practice assessment documentation adult nursing year three, August 2013*
- 57. *Practice assessment documentation mental health nursing year one, August 2013*
- 58. *Practice assessment documentation mental health nursing year two, August 2013*
- 59. *Practice assessment documentation mental health nursing year three, August 2013*
- 72. *Meeting with CPF and mentor, Ipswich Hospital NHS Trust; Stradbroke ward, 11 February 2015*
- 73. *Meeting with mentor and charge nurse, Ipswich Hospital NHS Trust, Kirton ward, 11 February 2015*
- 74. *Meeting with CPF and Lead nurse, Ipswich Hospital -A & E, 11 February 2015*
- 75. *Meeting with six students at Ipswich Hospital NHS Trust, 11 February 2015*
- 76. *Meeting with students (mental health) UCS, 11 February 2015*
- 77. *Meeting with mentors and students, Suffolk Community Health; Stowlodge, 11 February 2015*
- 78. *Meeting with mentor and student, St Elizabeth's Hospice, 11 February*
- 79. *Meeting with Trust Education Team, West Suffolk NHS Foundation Trust, 11 February 2015*
- 80. *Meeting with CPF, mentors and students, ward manager, Wards F6, G9 and Critical care; West Suffolk NHS Foundation Trust , 11 February 2015*
- 83. *Meeting with mentors, Poppy ward (acute in-patient), 11 February 2015*
- 84. *Meeting with mentors, Lark ward (psychiatric intensive care unit), 11 February 2015*
- 85. *Meeting with service managers, Woodlands unit, 11 February 2015*
- 87. *Meeting with mentors, manager costal integrated delivery team, 11 February 2015*
- 88. *Meeting with mentor, Northgate ward Wedgewood unit (acute admissions unit), 12 February 2015*
- 88a. *Meeting with student Northgate ward Wedgewood unit (acute admissions unit) 12 February 2015*
- 89. *Meeting with mentor Abbeygate ward Wedgewood unit (later life/acute unit), 12 February 2015*
- 90. *Meeting mentors Bury South Integrated delivery team, 12 February 2015*
- 95. *Meeting with acting education clinical lead and viewed live mentor data base, Norfolk and Suffolk Foundation NHS trust, 11 February 2015*

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

<p>What we found before the event</p>
<p>Each trust manages their mentorship database. This was audited in November 2013 by HEEoE to ensure the robustness of the mechanisms for active mentors/sign off mentors, updates and triennial review were demonstrated. The outcome was reassurance of the robustness of the mechanisms to ensure mentors meet the NMC standards (9).</p>
<p>What we found at the event</p>
<p>We found the learning development agreement requires NHS placement providers to keep and maintain a database for mentors/sign off mentors (15). We viewed the registers and confirmed mentors/sign off mentors; mentor qualifications and those who have undertaken their triennial review are clearly annotated and up to date (72 -74, 78-80, 90).</p> <p>There is a colour coding system to indicate when the mentor is current or inactive and their triennial review date (95). Mentors are sent an email from the trust to inform them that their annual update is due; their manager is also informed. If mentors/sign off mentors do not attend an annual update or complete their triennial review in a timely manner they are 'deactivated'.</p> <p>UCS LLs monitor live mentor registers when completing educational audits of practice learning environments (90).</p> <p>The mentor register for the PVI is held and maintained by the organisation and overseen by the university. Current provision of placements for student nurses in the PVI sector is small; however, if there is a growth in this area the governance arrangements for the maintenance of the mentor data base will have to be reviewed.</p> <p>Our findings conclude that the records of mentors and sign off mentors are accurate and meet the NMC requirements.</p>
<p>Evidence / Reference Source</p>
<p>9. <i>University Campus Suffolk self-report, 2014/15</i></p> <p>15. <i>Schedule 2 partnership agreement between University Campus Suffolk (the education provider) and (the placement provider) undated</i></p> <p>72. <i>Meeting with CPF and mentor, Ipswich Hospital NHS Trust- Stradbroke ward, 11 February 2015</i></p> <p>73. <i>Meeting with mentor and charge nurse, Ipswich Hospital NHS Trust -Kirton ward, 11 February 2015</i></p> <p>74. <i>Meeting with CPF and Lead nurse, Ipswich Hospital -A &amp; E, 11 February 2015</i></p> <p>78. <i>Meeting with mentor and student, St Elizabeth's Hospice, 11 February 2015</i></p> <p>79. <i>Meeting with Trust Education Team, West Suffolk NHS Foundation Trust, 11 February 2015</i></p> <p>80. <i>Meeting with CPF, mentors and students, ward manager , wards F6, G9 and Critical care, West Suffolk NHS Foundation Trust, 11 February 2015</i></p> <p>90. <i>Meeting mentors Bury South Integrated delivery team, 12 February 2015</i></p>

95. Meeting with acting education clinical lead and view of trust live mentor data base, Norfolk and Suffolk NHS Foundation Trust, 11 February 2015

**Outcome: Standard requires improvement**

Comments:

- The service user forum has been in place since 2007 and we conclude that whilst some progress has been made in the engagement of service users and carers this area requires improvement
- There is a lack of clarity in the role of the link tutor in the acute settings for adult nursing.
- There is a good network of direct support for students in practice placements from mentors and CPFs. However, with the exception of the PVI sector, we found that there is lack of clarity about the role of the LL supporting students in practice placement settings. We conclude that the role of the LL supporting students in practice placement settings requires improvement.
- The mentor register for the PVI is held and maintained by the organisation and overseen by the university. Current provision of placements for student nurses in the PVI sector is small; however, if there is a growth in this area the governance arrangements for the maintenance of the mentor data base will have to be reviewed.

Areas for future monitoring:

- Review progress in the engagement of service users and carers in the delivery of the curriculum and assessment of students.
- Review the visibility of the LL within placement areas to support the students learning
- Monitor the maintenance of the mentor register for the PVI sector.

**Findings against key risks**

**Key risk 4 - Fitness to Practice**

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

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

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

What we found before the event

The pre-registration nursing (adult and mental health) programme is designed to be responsive to NMC standards (2010), changing needs, developments, priorities and expectations in health, healthcare practice and education thus facilitating protection of



the public (50).

Practice competencies and essential skills are incorporated into the PAD and ongoing record of achievement and are integral to the assessment strategy (18, 54 - 59).

EU requirements for adult nursing students are annotated and met through the provision of hub and spoke placements; the achievement of these requirements are recorded in the student's ongoing record of achievement (18,50). Mental health students are also expected to meet EU requirements within the approved curriculum (18,50).

What we found at the event

We found the pre-registration nursing (adult and mental health) programme has been developed in conjunction with practitioners and service users to enable students to achieve learning outcomes and NMC standards and competencies for progression and entry to the NMC register (54- 56, 72, 79).

Learning outcomes for key progression points are specified in the programme handbook and PAD and students confirmed that they understand these (73, 75, 77, 92).

Students confirmed that their personal tutor monitors their attendance in theory and practice on at least two occasions for each year of the programme to ensure they meet the attendance requirements for the programme (75, 78, 80).

The faculty has a simulation centre where students have the opportunity to learn and develop practice skills prior to practice placements (71).

Nursing (adult)

We found EU requirements are met and recorded in the student's on going record of achievement (54-56).

Whilst information on teaching and learning strategies in the programme documentation indicates that time is spent on rehearsing skills and medications management, many students feel that insufficient time is devoted to this to prepare them for practice placements. They feel that when skills are rehearsed, for example, through simulation exercises, whilst these are beneficial there is a gap in the way theory is related to practice.

An example given relates to the teaching of anatomy and physiology which students described as not relating to the teaching of a related skill. The students told us this contributes to their lack of confidence in their ability to perform skills during practice placements (75, 77, 80).

We reviewed the programme timetable with programme leaders and observed that teaching and rehearsal of skills is linked to the essential skills clusters (96). However, we conclude that learning and teaching strategies need to be reviewed, to ensure students understand the application of theory to practice and feel confident to practice these skills in practice placement.

The course handbook illustrates a variety of assessment methods used within the adult nursing programme (50). However, all student nurses (adult) perceive that theoretical assessments lack variety with a concentration on essays (75). They told us that they

would benefit from receiving assessment criteria earlier in the semester and a more balanced assessment workload.

#### Nursing (mental health)

We found that both theory and practice outcomes enable students to achieve NMC learning outcomes and competences at progression points and on completion of the programme (18, 50). Year one student nurses confirmed the use of simulation and the rehearsal of clinical skills which they enjoyed. They verified that teaching sessions linked theory and practice.

Students told us the assessment strategy could be more evenly spread out over the academic year and have fed this back to the programme team and are waiting for a response. Year three students confirmed that they feel fit for purpose and ready to complete the programme and register as a nurse (76, 88a, 91- 92).

Our findings conclude that learning, teaching and assessment strategies in the pre-registration nursing programmes enable students to meet the required programme learning outcomes, NMC standards and competencies. However, the programme team (adult nursing) are required to review the effectiveness of the teaching and learning strategies to ensure students understand the application of theory to practice skills and feel confident to practice these skills in practice placements.

#### Evidence / Reference Source

18. *University Campus Suffolk, faculty of health and science, department of nursing, pre-registration nursing programmes: BSc (Hons) adult, mental health, child nursing on-going record of achievement, 2014/15*

50. *Pre-registration nursing student handbook 2014/15*

54. *Practice assessment documentation adult nursing year one final August 2013*

55. *Practice assessment documentation adult nursing year two final August 2013*

56. *Practice assessment documentation adult nursing year three final August 2013*

57. *Practice assessment documentation mental health nursing year one final August 2013*

58. *Practice assessment documentation mental health nursing year two final August 2013*

59. *Practice assessment documentation mental health nursing year three final August 2013*

71. *Meeting with Faculty Executive team and course leaders, UCS, 11 February 2015*

72. *Meeting with CPF and mentor, Ipswich Hospital NHS Trust- Stradbroke ward, 11 February 2015*

73. *Meeting with mentor and charge nurse, Ipswich Hospital NHS Trust -Kirton ward, 11 February 2015*

75. *Meeting with six students at Ipswich Hospital NHS Trust, 11 February 2015*

76. *Meeting with students (mental health) UCS, 11 February 2015*

77. *Meeting with mentors and students, Suffolk Community Health –Stowledge, 11 February 2015*

78. *Meeting with mentor and student, St Elizabeth's Hospice, 11 February 2015*

79. *Meeting with Trust Education Team, West Suffolk NHS Foundation Trust, 11 February 2015*

80. *Meeting with CPF, mentors and students, ward manager , wards F6, G9 and Critical care, West Suffolk NHS Foundation Trust, 11 February 2015*

88a. Meeting with student Northgate ward Wedgewood unit (acute admissions unit) 12 February 2015

91. Meeting with student Home treatment team, Wedgewood unit , 12 February 2015

92. Meeting with student Southgate ward, Wedgewood unit , 12 February 2015

96. Additional meeting with adult nursing course leaders, 12 February 2015

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

The pre-registration nursing (adult and mental health) programme PAD and ongoing record of achievement identifies the learning outcomes and competencies, including essential skills clusters students have to achieve. Students complete an ongoing record of achievement and submit it for summative assessment at specified intervals (18, 54-59).

What we found at the event

Achievement of practice competencies and essential skills are clearly demonstrated in the practice assessment documentation which includes the ongoing record of achievement (54 -56, 72-75, 77- 78, 80).

Student nurses (adult and mental health) confirmed that their mentors are good role models and that they provide fair and constructive feedback (72-73,75-78,90,92).

Nursing (adult)

Student nurses (adult) are highly enthusiastic about their practice placement learning, which they feel allows them to develop skills, meet EU requirements and achieve the competencies required at each progression point and at the end of the programme (72, 75, 80).

Mentors and employers describe students completing the pre-registration nursing (adult) programme as fit for practice and employment (72, 76, 79).

Nursing (mental health)

We found mentors/sign off mentors clearly understand the practice assessment documentation (57, 58, 59).

Sign off mentors and employers confirmed that students successfully completing the programme are competent, fit for purpose and employment (72, 74, 76, 78, 82, 88a, 91, 92).

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

## Evidence / Reference Source

18. University Campus Suffolk, faculty of health and science, department of nursing, pre-registration nursing programmes: BSc (Hons) adult, mental health, child nursing on-going record of achievement, 2014/15
54. Practice assessment documentation adult nursing year one final August 2013
55. Practice assessment documentation adult nursing year two final August 2013
56. Practice assessment documentation adult nursing year three final August 2013
57. Practice assessment documentation mental health nursing year one final August 2013
58. Practice assessment documentation mental health nursing year two final August 2013
59. Practice assessment documentation mental health nursing year three final August 2013
72. Meeting with CPF and mentor, Ipswich Hospital NHS Trust- Stradbroke ward, 11 February 2015
73. Meeting with mentor and charge nurse, Ipswich Hospital NHS Trust -Kirton ward, 11 February 2015
74. Meeting with CPF and Lead nurse, Ipswich Hospital -A & E, 11 February 2015
75. Meeting with six students at Ipswich Hospital NHS Trust, 11 February 2015
76. Meeting with students (mental health) UCS, 11 February 2015
77. Meeting with mentors and students, Suffolk Community Health –Stowlodge, 11 February 2015
78. Meeting with mentor and student, St Elizabeth's Hospice, 11 February 2015
79. Meeting with Trust Education Team, West Suffolk NHS Foundation Trust, 11 February 2015
80. Meeting with CPF, mentors and students, ward manager, wards F6, G9 and Critical care, West Suffolk NHS Foundation Trust, 11 February 2015
- 88a. Meeting with student Northgate ward Wedgewood unit (acute admissions unit) 12 February 2015
90. Meeting mentors Bury South Integrated delivery team, 12 February 2015
91. Meeting with student Home treatment team, Wedgewood unit, 12 February 2015
92. Meeting with student Southgate ward, Wedgewood unit, 12 February 2015

### Outcome: Standard requires improvement

#### Comments:

- Whilst information on teaching and learning strategies in the programme documentation indicates that time is spent on rehearsing skills and medications management, many students feel that insufficient time is devoted to this to prepare them for practice placements. They feel that when skills are rehearsed, for example, through simulation exercises, whilst these are beneficial there is a gap in the way theory is related to practice.

#### Areas for future monitoring:

- Review the learning and teaching strategies in relation to the development and rehearsal of practice skills required in all years of the adult nursing programme.

Findings against key risks
<p><b>Key risk 5 - Quality Assurance</b></p> <p><b>5.1 Programme providers' internal QA systems fail to provide assurance against NMC standards</b></p>
<p>Risk indicator 5.1.1 - student feedback and evaluation / Programme evaluation and improvement systems address weakness and enhance delivery</p>
<p>What we found before the event</p>
<p>The course committee includes student representatives who provide formal feedback from student cohorts studying the pre-registration nursing programme. Module evaluations are completed by students at the end of each taught module; inform module reviews and the future delivery of the module, as appropriate.</p> <p>Students complete exit questionnaires for UCS and the national student survey (NSS) (50). An action plan has been implemented in response to the NSS 2013 results in relation to organisation and management with expected completion in March 2015 (64).</p> <p>All student placement evaluations are reviewed and a summary provided to each practice placement by the practice lead (9, 62).</p> <p>External examiners are appointed to ensure the quality of the programme meets the required academic and professional standards. External examiners are required to attend examination boards; visit practice learning environments; moderate academic and practice assessments; complete a report following each attendance at the department and complete an annual report (60- 61).</p>
<p>What we found at the event</p>
<p>We found the university has comprehensive systems for student feedback and evaluation to enhance programme delivery. Students complete evaluations for both theory and practice elements of the pre-registration nursing (adult and mental health) programme which includes evaluations of modules, practice placements and the programme (71, 73, 75-77,80).</p> <p>There is evidence of actions being taken to address programme weaknesses and enhance delivery. However, feedback mechanisms need to be strengthened so that students are clear about the actions taken to enhance programme delivery in response to their evaluations (50, 75-78, 80 82, 88a, 90 -92).</p> <p>One student at end of year one of the pre-registration nursing (adult) programme gave us an example of the programme team's responsiveness. The timing for submission of</p>

course assessments was altered as students experienced anxiety completing an assignment whilst on placement (73). This change was confirmed by the programme leaders (71).

The programme team told us that they actively listen to student feedback and act on this as required and that actions from students' evaluations are fed back via 'You said, we did' on notice boards and on the programme virtual learning environment (71,94).

Students are aware of the national student survey (NSS) and of the issues raised in the NSS 2013 surrounding organisation and management. They told us that the university has an action plan in place in response to the NSS (71, 80).

We found that the external examiner has due regard; is a registrant with the NMC. The external examiner's annual report confirms that the programme meets the NMC requirements for pre-registration nursing (adult) (114-5).

#### Nursing (mental health)

We found that the external examiner has due regard; is a registrant with the NMC. The external examiner's annual report confirmed that the programme met the NMC requirements for pre-registration nursing (mental health) (116). The university is currently recruiting a new external examiner for the pre-registration nursing (mental health) programme.

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

#### Evidence / Reference Source

- 9. *University Campus Suffolk self-report, 2014/15*
- 50. *Pre-registration nursing student handbook 2014/15*
- 60. *External examiner policy, August 2014*
- 61. *External examiner appointment, March 2013*
- 62. *East coast community healthcare student feedback graphs: semester two 2011/2012*
- 64. *National student survey action planning 2013 - 15*
- 71. *Meeting with Faculty Executive team and course leaders, UCS, 11 February 2015*
- 73. *Meeting with mentor and charge nurse, Ipswich Hospital NHS Trust -Kirtton ward, 11 February 2015*
- 75. *Meeting with six students at Ipswich Hospital NHS Trust, 11 February 2015*
- 76. *Meeting with students (mental health) UCS, 11 February 2015*
- 77. *Meeting with mentors and students, Suffolk Community Health –Stowlodge, 11 February 2015*
- 78. *Meeting with mentor and student, St Elizabeth's Hospice, 11 February 2015*
- 80. *Meeting with CPF, mentors and students, ward manager, Wards F6, G9 and Critical care, West Suffolk NHS Foundation Trust, 11 February 2015*
- 94. *Additional meeting with programme leaders (adult nursing), 12 February 2015*



- 82. Meeting with students (mental health), 11 February 2015
- 88a Meeting with student, Northgate ward Wedgewood unit (acute admissions unit) 12 February 2015
- 90. Meeting with mentors Bury South Integrated delivery team, 12 February 2015
- 91. Meeting with student, Home treatment team, Wedgewood unit , 12 February 2015
- 92. Meeting with student, Southgate ward, Wedgewood unit , 12 February 2015
- 95. Meeting with acting education clinical lead and view Norfolk and Suffolk Foundation NHS trust live mentor data base, 11 February 2015
- 114. External examiner report BSc (Hons) Nursing (adult) 2013/14 and programme team response
- 115. External examiner report BSc (Hons) Nursing (adult) 2013/14 and programme team response
- 116. External examiner report Dip HE/BSc (Hons) Nursing (mental health) 2013/14 and programme team response

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 comprehensive procedures for the resolution of student concerns and issues which includes an appeals process and advice regarding the role of the office of the independent adjudicator if the student remains unsatisfied with any outcome of their complaint (63). A raising and escalating concerns policy clearly outlines protection for both staff and students who wish to raise concerns regarding matters of unsafe practice (49).

External examiners are appointed to ensure the quality of the programme meets the required academic and professional standards. External examiners are required to complete a report following each attendance to the department. They are required to attend exam boards; visit practice learning environments; moderate academic and practice assessments and complete an annual report (60 and 61).

The external examiners confirmed that the programmes are meeting the learning outcomes and NMC standards.

What we found at the event

All students and mentors report being aware of how to raise concerns and complaints in practice settings. They are aware of the escalating concerns policy in the PAD documents. We found any concerns and complaints raised are appropriately dealt with and communicated to relevant partners (see section 3.1.1).

Overall practice learning environments are evaluated positively by students (71-72, 75-76, 79-80). The vast majority of students perceive that their mentors and sign-off mentors are effective role models and support them well in their learning and

development in practice settings (73,75-78, 92).

CPFs confirmed that they receive summaries of practice placement evaluations on a four monthly basis which they then feedback to placement areas via the managers (72, 79). There are mixed views from mentors about receiving feedback from the university on any issues arising from student evaluations (73, 83-90).

We found the appointed external examiners act with due regard. External examiner reports confirm that the pre-registration nursing (adult and mental health) students meet programme learning outcomes and NMC standards and competencies (97- 99). Programme leaders are responsive to external examiner comments (71, 97 - 99).

Whilst the faculty reported that external examiners have access to samples of practice assessment documents there is no evidence that external examiners meet with mentors or visited placement areas. This was confirmed by CPFs and mentors (72, 79, and 80). Placement providers confirmed they receive feedback from external examiner reports at course committees (97).

We found the two external examiners for the pre-registration nursing (adult) and the former mental health external examiners have current NMC registration (114 -116).

We found no evidence of checking to confirm external examiners NMC registration is active during the period of their appointment. The faculty acknowledges that the appointment process for new external examiners needs to be strengthened to include confirmation of active NMC registration.

We conclude from our findings that the university has processes in place to ensure issues raised in practice learning settings are appropriately dealt with and communicated to relevant partners. However, the role of the external examiner in relation to practice placements needs to be consistently applied.

#### Evidence / Reference Source

- 49. *Raising and escalating concerns student guide March 2013*
- 60. *External examiner policy, August 2014*
- 61. *External examiner appointment March 2013*
- 63. *Complaints procedure version 1.1.1 November 2012*
- 71. *Meeting with Faculty Executive team and course leaders, UCS, 11 February 2015*
- 72. *Meeting with CPF, students and mentors at Ipswich Hospital NHS trust, 11 February 2015*
- 73. *Meeting with mentor and charge nurse, Ipswich Hospital NHS Trust -Kirton ward, 11 February 2015*
- 75. *Meeting with the six students at Ipswich Hospital NHS Trust, 11 February 2015*
- 76. *Meeting with students (mental health) UCS, 11 February 2015*
- 77. *Meeting with mentors and students, Suffolk Community Heath –Stowlodge, 11 February 2015*
- 78. *Meeting with mentor and student, St Elizabeth's Hospice, 11 February 2015*
- 79. *Meeting with clinical education team at West Suffolk NHS Foundation Hospital Trust, 80. Meeting with CPF, mentors and students, ward manager, Wards F6, G9 and Critical care, West Suffolk NHS Foundation Trust, 11*

February 2015

- 83. Meeting with mentors, Poppy ward (acute in-patient), 11 February 2015
- 84. Meeting with mentors, Lark ward (psychiatric intensive care unit), 11 February 2015
- 85. Meeting with service managers, Woodlands unit, 11 February 2015
- 86. Meeting with mentors and manager Foxhall House (forensic unit), 11 February 2015
- 87. Meeting with mentors, manager costal integrated delivery team, 11 February 2015
- 88. Meeting with mentor, Northgate ward Wedgewood unit (acute admissions unit), 12 February 2015
- 88a Meeting with student Northgate ward Wedgewood unit (acute admissions unit), 12 February 2015
- 89. Meeting with mentor Abbeygate ward Wedgewood unit (later life/acute unit), 12 February 2015
- 90. Meeting mentors Bury South Integrated delivery team, 12 February 2015
- 97. Meeting with service representatives, 11 February 2015
- 99. Meeting with placement team, 12 February 2015
- 114. External examiner report BSc (Hons) Nursing (adult) 2013/14 and programme team response
- 115. External examiner report BSc (Hons) Nursing (adult) 2013/14 and programme team response
- 116. External examiner report Dip HE/BSc (Hons) Nursing (mental health) 2013/14 and programme team response

**Outcome: Standard requires improvement**

Comments:

- There is evidence of actions being taken to address programme weaknesses and enhance delivery. However, feedback mechanisms could be strengthened so that students are clear about the actions taken to enhance programme delivery in response to their evaluations.
- We found no evidence of checking to confirm external examiners NMC registration is active during the period of their appointment. The faculty acknowledges that the appointment process for new external examiners needs to be strengthened to include confirmation of active NMC registration.
- The quality assurance process specific to external examiners reporting in relation to the assessment of practice of the approved programme needs to be strengthened.

Areas for future monitoring:

- Monitor the quality assurance processes specific to external examiner reporting in relation to theory and practice of the approved programmes.
- Review the checking process to confirm external examiners NMC registration is active at and during the period of their appointment.

### Personnel supporting programme monitoring

**Prior to monitoring event**

Date of initial visit: 27 Jan 2015

**Meetings with:**

UCS Executive Dean, Faculty of Health and Science  
UCS Acting Head of Department (Nursing Studies)  
Placement learning lead

**At monitoring event**

**Meetings with:**

UCS Executive Dean, Faculty of Health and Science  
UCS Acting Head of Department (Nursing Studies)  
Adult nursing programme leaders x 3  
Placement learning lead  
Module leader for Mentorship preparation  
Link tutors  
Programme leader mental health  
Lecturer adult nursing  
Clinical Practice Facilitator West Suffolk hospital  
Practice development facilitator Suffolk Community Healthcare  
Education lead Norfolk & Suffolk NHS FD trust  
Clinical Learning Environment Manager HEEoE  
Deputy Director of nursing Norfolk & Suffolk NHS FD Trust  
Head of education & practice development James Paget University Hospitals NHS FDT  
Clinical education & workforce development lead, Ipswich Hospital NHS Trust

**Meetings with:**

Mentors / sign-off mentors	20
Practice teachers	
Service users / Carers	3
Practice Education Facilitator	3
Director / manager nursing	2
Director / manager midwifery	

Education commissioners or equivalent	1
Designated Medical Practitioners	
Other:	<p>16</p> <p>1 Chief Executive 1 Deputy Chief nurse 1 Deputy Director of Nursing 2 Lead nurses 3 Clinical lead nurses for Education</p> <p>Chief Executive Officer at Ipswich NHS Trust Deputy Director Nursing Clinical Education Workforce Lead Head of management information Faculty director of workforce development Service managers (7) Acting clinical education lead (1)</p>

Meetings with students:

<b>Student Type</b>	<b>Number met</b>
Registered Nurse - Adult	Year 1: 5 Year 2: 2 Year 3: 12 Year 4: 0
Registered Nurse - Mental Health	Year 1: 4 Year 2: 3 Year 3: 4 Year 4: 0