NMBI Site Inspection
of Nursing Education Programmes Leading to Registration

Monitoring Update Report

Atlantic Technological University, Donegal (ATU)

(Formerly Letterkenny Institute of Technology (LYIT))

Contents

Introduction

This report is an update of the Atlantic Technological University, Donegal (ATU, Donegal) site inspection report approved by the Nursing and Midwifery Board of Ireland (NMBI) on 21 September 2022. The monitoring update report is based on information provided by ATU, Donegal in collaboration with their practice partners. At the time of the initial site inspection, the education body was still known as Letterkenny Institute of Technology (LYIT) and had not yet integrated into ATU. As such many of the findings in the report refer to LYIT.

Monitoring Timelines

Board approval of site inspection report	21 September 2022
Response to conditions received from education body	13 March 2023
Follow up meeting with education body	1 June 2023
Monitoring report published	26 June 2023

Signed:

Sheila McClelland
Nursing and Midwifery Board of Ireland, CEO

Carolyn Donohoe
Director of Education, Policy and Standards

NAME OF EDUCATION BODY	Atlantic Technological University, Donegal (Formerly Letterkenny Institute of Technology, LYIT)
HEAD OF NURSING/MIDWIFERY	Dr Louise McBride

Registered General Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in General Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	Letterkenny University Hospital Ramelton Community Hospital

Registered Intellectual Disability Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in Intellectual Disability Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	Ard Greine Court, Stranorlar (Residential) Abbey Village, Kilmacrennan (Community)

Registered Mental Health Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in Mental Health Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	Sligo Mental Health Services Rehab and Recovery, Sligo Town Donegal Mental Health Services (LUH) Child and Family Mental Health Service 2022

Required Compliance

Key C – Compliant, P – Partially Compliant, N – Non-compliant

Education body requirements

1. **Student Admission and Progression**		**General**	**Intellectual Disability**	**Mental Health**
1.1	Clear and comprehensive information about the programme is available for prospective students.	C	C	C
1.2	Admission requirements are in line with those specified by NMBI and detail procedures for recognition of prior learning and other inclusion mechanisms.	C	C	C
1.3	The criteria for students' progression through and successful completion of the programme are explicit and made known to students, in writing, at the beginning of the programme.	C	C	C
1.4	Attendance requirements for students are specified and procedures are in place to monitor students' attendance. Procedures to address non-compliance with attendance requirements are available. (EB & AHCP)	C	C	C
1.5	Supports for students in relation to academic or personal guidance or practical supports are available and made known to students at the outset of the programme.	C	C	C
1.6	Learning supports including reasonable accommodations are available to students who require them. (EB & AHCP)	C	C	C
1.7	There are documented procedures for students transferring to or from another education body to ensure that the student meets all the requirements of the programme. These procedures ensure collaboration between the education bodies.	C	C	C
1.8	Procedures for a student exiting a programme before completion are explicit, including exit awards if appropriate.	C	C	C

		General	Intellectual Disability	Mental Health
1.9	Procedures are in place to inform NMBI, in writing, annually of student/s who exit a programme prior to completion.	C	C	C
1.10	Records of student retention, progression, completion and attrition rates, conferment of academic awards and graduate first destinations are maintained and reviewed.	C	C	C

2.	Governance and Management	General	Intellectual Disability	Mental Health
2.1	There is a signed Memorandum of Understanding (MOU) between the education body and each of its Associated Health Care Providers. (EB & AHCP)	C	C	C
2.2	The school of nursing/department and individual programmes are subject to periodic quality reviews.	C	C	C
2.3	Programmes are subject to annual monitoring through the external examiners process.	C	C	C
2.4	An Annual Report, inclusive of all NMBI approved programmes and prepared in partnership with the AHCPs, is submitted to NMBI by 30 June each year. (EB & AHCP)	C	C	C
2.5	The management structure supporting the delivery of the programme/s is explicit. It includes the named person with lead responsibility who holds appropriate academic and professional nursing qualifications and experience.	C	C	C
2.6	The education body demonstrates financial planning and resource allocation to support the delivery of the programmes for a rolling 5-year period.	C	C	C
2.7	Staffing allocations to support the delivery of the programme are maintained, at the following staff to student ratios: academic staff 1:20, allocations liaison officer 1:50, nurse practice development coordinator (minimum of 1), and clinical placement coordinator 1:30. (EB & AHCP)	C	C	C
2.8	Teaching and learning resources and facilities support the delivery of the programme.	C	C	C

Continued

		General	Intellectual Disability	Mental Health
2.9	A Local Joint Working Group including representatives of the key stakeholders from the education body and AHCPs, from acute and community settings, is in operation. (EB & AHCP)	C	C	C
2.10	Staff are provided with opportunities to develop their teaching and learning skills and deepen their knowledge of their areas of expertise. (EB & AHCP)	C	C	C
2.11	Formal grievance, complaints, and appeals policies are available and made known to students.	C	C	C
2.12	Arrangements are in place with Erasmus and international host institutions that comply with NMBI standards and requirements, and do not exceed 13 weeks placement duration.	C	C	C
2.13	There is public and patient involvement in the review and evaluation of programmes by the education body.	C	C	C
2.14	The education body and AHCP operate a fitness to practise mechanism for the protection of the public. (EB & AHCP)	C	C	C
2.15	The education body and AHCP have processes in place to support students with health problems. (EB & AHCP)	C	C	C

3. Practice Placements

		General	Intellectual Disability	Mental Health
3.1	New practice placement sites are audited for their suitability as a quality learning environment, that will support the achievement of the learning outcomes, in advance of students' commencing placements. Notification of new sites is included in the Annual Report submitted to NMBI. (EB & AHCP)	C	C	C
3.2	Existing practice placement sites are subject to 5-year cyclical audits, or when significant clinical changes occur, to ensure their continued suitability as a quality learning environment for students. (EB & AHCP)	C	C	C
3.3	There are processes in place for students to evaluate and provide feedback on practice placements. (EB & AHCP)	C	C	C

Continued

		General	Intellectual Disability	Mental Health
3.4	There are procedures in place for students to raise concerns about the perceived safety of a practice placement and follow up with relevant clinical partners. (EB & AHCP)	C	C	C
3.5	Fair and transparent systems are in place for the allocation of students to practice placements. (EB & AHCP)	C	C	C
3.6	Where a student is being supervised by health and social care professionals, the setting and achievement of learning outcomes is monitored by a registered nurse.	C	C	C

Programme requirements

4. Curriculum		General	Intellectual Disability	Mental Health
4.1	Curriculum development processes ensure that the programme meets all statutory and regulatory requirements of NMBI and where applicable, the European Directives for nurse registration education programmes (2013/55/Recognition of Professional Qualifications).	C	C	C
4.2	The programme meets the requirements of the relevant award on the National Framework of Qualifications (NFQ).	C	C	C
4.3	Safety of the person and protection of the public is a fundamental, explicit, and continuing component of the programme.	C	C	C
4.4	The curriculum model chosen is dynamic, flexible, and evidence-based and utilises a range of teaching and learning strategies.	C	C	C
4.5	The curriculum is comprehensively and systematically documented and in line with the programme learning outcomes and domains of competence specified in Section 2 of the relevant Programme Standards and Requirements.	C	C	C
4.6	Clinical placements are integral to the programme.	C	C	C

Continued

		General	Intellectual Disability	Mental Health
4.7	The curriculum embeds a culture of professionalism and ensures that students understand the implications of professional regulation including adherence to NMBI's Code of Professional Conduct and Ethics.	C	C	C
4.8	Module descriptors identify the aims, learning outcomes, ECTS credits, indicative content, student contact hours, student effort/self-directed learning hours and assessment strategy.	C	C	C
4.9	The curriculum demonstrates a balance between theory and practice leading to the development of reflective practitioners.	C	C	C
4.10	The curriculum development team is led by academic staff who are Registered Nurses in the relevant division of the register and comprises representative members of key academic and clinical stakeholders.	C	C	C
4.11	Registered nurses with appropriate professional and academic qualifications and teaching experience deliver the nursing modules.	C	C	C
4.12	The curriculum articulates opportunities for intentional, shared, interprofessional learning that is designed to enhance collaborative practice with other health care professionals.	C	C	C

5. Assessment		General	Intellectual Disability	Mental Health
5.1	The assessment strategy is designed to ensure the student meets all the required theoretical and clinical learning outcomes before they can progress to the next stage or complete the programme.	C	C	C
5.2	The selection of assessment techniques assesses achievement of learning outcomes at both module and programme level.	C	C	C

Continued

		General	Intellectual Disability	Mental Health
5.3	Students are informed about the assessments employed for their programme and about the requirements for progression, including the grading criteria.	C	C	C
5.4	Policies governing absence, failure to submit assessment work, non-attendance at examinations, mitigating circumstances, repeat arrangements, appeals procedures are explicit and available to students and staff.	C	C	C
5.5	Processes are in place for early detection and feedback on student performance and supports are available for students at risk of not progressing.	C	C	C
5.6	The assessment strategy for the programme makes clear that compensation between theoretical and clinical practice components is not allowed.	C	C	C
5.7	External examiners appointed to the programme are appropriately qualified and experienced.	C	C	C

Associated Healthcare Provider (AHCP) requirements

6. Clinical Learning Environments		General	Intellectual Disability	Mental Health
6.1	The Clinical Learning Environment (CLE) Audit is completed and available for review. (EB & AHCP)	C	C	C
6.2	Learning outcomes are specific to the practice placement environment and developed collaboratively by clinical and academic staff. Learning outcomes are aligned to the stage of the programme. (EB & AHCP)	C	C	C
6.3	Each student is allocated a named preceptor and associate preceptor while on practice placement. The preceptor or associate preceptor is available to supervise and assess the student for two thirds of the student's time on placement.	P	C	C

Continued

		General	Intellectual Disability	Mental Health
6.4	The number of preceptors/associate preceptors/registered nurses in a clinical placement available to students meet the requirements set by NMBI.	C	C	C
6.5	Practice based learning is supported by preceptors from the relevant division of nursing or have suitable experience.	C	C	C
6.6	Preceptors have completed a competency assessment programme that has been approved by NMBI. Preceptors engage in continuing professional development. (EB & AHCP)	C	C	C
6.7	Arrangements are in place for protected time to facilitate practice placement assessments by preceptors.	C	C	C
6.8	Assessment of the achievement of learning outcomes and competence development is undertaken in accordance with the National Competence Assessment Document (NCAD).	C	C	C
6.9	The supernumerary status of the student is explicit for preceptors and students.	C	C	C
6.10	Internship practice placements provide experience of the 24-hour care cycle.	C	C	C
6.11	Students have a minimum of 4 hours protected time for reflection each week throughout the undergraduate programme or as specified in the relevant Standards and Requirements.	C	C	P
6.12	All placements, including specialist placements, are completed prior to the commencement of the 36-week internship placement. (EB & AHCP)	C	C	C
6.13	Evidence based policies, procedures and guidelines are available to support students in care delivery.	C	C	C
6.14	Practice placements implement relevant NMBI professional guidance documents.	C	C	C

Monitoring Update

General Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in General Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	Letterkenny University Hospital 28 March 2022 Ramelton Community Hospital 29 March 2022

Commendations

NMBI wishes to recognise the numerous initiatives and activities underway at LYIT and its clinical partners to support and enhance the learning experience of student nurses. The teams have selected a representative sample for commendation.

- There is a very strong partnership between the education body and the AHCPs. Sites visited appear to be very well supported by link lecturers, allocation officers and CPCs with the student at central focus. Student have fed back very positively on the level of support they receive. The interviews with students, general hospital and community hospital staff (CPCs, Nurse Managers, Nurse Preceptors) evidenced strong and functional links with the General Nursing academic team at LYIT, in particular those with the link lecturers to the respective sites.

- Students displayed a sense of pride in and enjoyment of their education journey, the students feel well supported and enjoy being part of the LYIT student body. They expressed that the faculty are approachable, accessible and supportive. They expressed enthusiasm at being part of the imminent Atlantic Technological University.

- Students evidenced a sense of positive engagement with the student body in curricula upgrading/design. They believe that the curricula upgrades include the student voice and welcomed the 360 feedback they received as part of this process.

- The Head of Department in LYIT outlined the plans for students to engage in the Erasmus exchange programme. This is scheduled to commence in September 22. NMBI commend the team on their background work in realising this.

- The opportunity for students to reflect and provide feedback on their clinical learning experience during scheduled recall days was positively commended.

- It was evident that training of preceptors in sufficient numbers remains a challenge and reflects the national picture. The DON, Practice development/ CNME and CPCs at LUH gave an outline of the recent approach to preceptorship training. The eLearning module provides a more flexible, accessible and self-paced training solution that is hoped will support and encourage more nurses to engage with preceptorship training. To date, over 250 staff have completed this version.
- The DON of LUH and her team presented an overview of the clinical services there including the recent and ongoing challenges of Covid-19 and staff retention, preceptor availability and how these challenges are being addressed in relation to workforce planning to improve patient/staff, preceptor/student and CPC/student ratios.
- The involvement of LUH in the MAGNET4EUROPE project (twinned with Miriam Hospital, Rhode Island) represents a particularly exciting initiative underway.
- The effort to create interdisciplinary placement was also noted. All interns have the opportunity to engage in venepuncture and cannulation training.
- The team noted the use of an eRoster which also has capacity to map/track staff mandatory training and preceptorship training and can include student clinical rotas and preceptor/co-preceptor to student.
- Based on the clinical site visit to Ramelton Community Hospital, it was clear it is potentially an underused resource. Consider the option of facilitating up to two students at the one time and more increased frequency of general nursing student placements, in particular year 3 and 4 students.

Response to Conditions and Current Status

Requirement No.	2.7
Programme Inspection outcome	Non-compliant
Condition	Recruit and appoint sufficient CPC positions to support the existing programme. Further recruitment for academic positions to support the student population required also. Evidence is to be provided of successful appointments to the regulator.
Updated response	ATU Donegal confirm current recruitment of academic staff. BSc Hons General Nursing Degree Letterkenny University Hospital has appointed SALO and two CPCs - Sept 2023 This equates to 4x WTE CPCs and 1x WTE SALO which is compliant with current student numbers.
Updated outcome	Fully Compliant

Requirement No.	5.5
Programme Inspection outcome	Partially Compliant
Condition	Review the learning support plan system available for students that are at risk of not progressing in line with the national competency assessment document.
Updated response	Ongoing review with potential to further incorporate student and preceptor feedback. This is being undertaken with the other two ATU nursing campuses once faculty restructuring has occurred. Feedback process in place for full review.
Updated outcome	Fully Compliant

Requirement No.	6.3
Programme Inspection outcome	Partially Compliant
Condition	Ensure students are rostered for at least 2/3 of their clinical placement time with their named preceptor/co-preceptor.
Updated response	Ensure that staff are enabled to take up preceptorship training offered to maintain preceptorship percentages ensuring that there is enough preceptor cover allowing students to be rostered for 2/3 of time. CPC to maintain oversight of preceptor ratio and ensure promotion of training and continuity of preceptorship.
Updated outcome	Partially Compliant – noting ongoing continuous improvement process.

Requirement No.	6.11
Programme Inspection outcome	Partially Compliant
Condition	Internship students should only be rostered for 35 hours per week in clinical practice. The four hours of protected reflective time needs to be organised/delivered in a structured manner to focus on key issues pertaining to transition to practice and preparation for assuming the role of registered general nurse.
Updated response	Internship students are rostered for 33.5hours on site and 4 hours protected time. CPCs are engaging with the students in identifying key issues and areas for knowledge development. Students also attend structured reflection with their Year Lead (3 x 8hour days) during the Internship period.
Updated outcome	Fully Compliant

General Programme Recommendations	Updated Response	Noting
Explore possibility to further develop clinical-academic appointments across acute and community settings (as per requirement 2.7).	Will liaise with AHCP to determine future possibilities. Ongoing discussions and exploration in place for future new placements across Primary care and communities.	Recommendation response accepted
Re ePortfolio pilot project – it was noted in the student focus group, a degree of hesitation regarding the proposed move of the student placement records online. Their particular concern was that it posed the risk of reduced direct in-person engagement with their preceptors which they believe is already limited due to the 3-day working week and the issue of staff shortages. It was noted that this was a pilot project implemented by LYIT, NMBI suggest incorporating this student feedback as part of the project.	Currently ePortfolio has been implemented across 1-4 years. Ongoing feedback has been part of this implementation process and changes adopted accordingly. Excellent relationships with the CPCs, SALO, LL and Axia have supported this well. Students have been providing feedback on a regular basis. Now integrated across the three disciplines and feedback to date positive. Ongoing recall training and updates for students' clinical staff and preceptors. Shortlisted and won Education Awards April 2023 as best collaboration engagement project.	Recommendation response accepted with commendation
Please review module assessment structure for years 1 and 2 and consider streamlining assessment strategy to reduce student burden.	Programmatic review has revised and reduced overall assessment quantity in line with strategy and streamlining across the three disciplines to minimise burden on students.	Recommendation response accepted
Learning outcomes to be reviewed to ensure they are clinical site specific and relevant to the year of programme and expected level of learning of stage of student on site. Address inconsistency in formatting of the student orientation booklets between units	Currently LOs are in the process of being updated to reflect the clinical area with a total of no more than 5 LOs as determined by the NMBI Inspection Team. Anticipated all LOs to be completed by end of this semester (June 2023).	Recommendation response accepted

Intellectual Disability Programme

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in Intellectual Disability Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	Ard Greine Court, Stranorlar (Residential) 28 March 2022 Abbey Village, Kilmacrennan (Community) 29 March 2022

Commendations

- The support provided to students by LYIT staff is excellent, NMBI noted that there is a psychologist onsite one day per week.
- The flexibility of staff at LYIT is to be commended, the programme lead structure is very supportive for students.
- The involvement of link lecturers with the practice placements is highly commendable as there are very high levels of engagement.
- The Recall Day structure works well to support reflective practice, opportunities for debriefing and strengthen peer-to-peer support.
- The student voice was heard in curriculum changes according to the student groups.
- The initiative of recorded education sessions during Covid-19 was welcomed by students.
- The support provided by the nurse practice development team for students and LYIT was excellent and noted by the NMBI team.
- Great exposure and experience in Ard Greine for students with the multidisciplinary team.
- Abbey Village staff prioritised student learning opportunities by facilitating movement of students around the houses within the village.
- Staff involved students in updating evidence-based practice while on placement for the benefit of maintaining high standards of care.
- Excellent supervision of students on placement in both Ard Greine and Abbey Village sites and students stated that they felt welcomed as part of the team.
- Residents enjoyed having the students in their homes and welcomed their involvement in their daily lives.

Response to Conditions and Current Status

Requirement No.	2.7
Programme Inspection outcome	Partially Compliant
Condition	Nursing Practice Development post (1wte) to be filled as a priority to provide leadership support for the programme and services.
Updated response	Nurse Practice Development Coordinator in post.
Updated outcome	Fully Compliant

Requirement No.	3.5
Programme Inspection outcome	Partially Compliant
Condition	Develop a system for students to request placement locations with formal feedback provided to students on the outcome of their request, to have a record of fairness and transparency in allocations across a large geographical area.
Updated response	Nurse practice development team to implement a policy/guideline devised in conjunction with ATU Allocations and ID SALO to address requests from students in respect of allocations/changes, so that such requests can be managed in a more structured and transparent manner. Currently careful consideration is given to extenuating/mitigating circumstances in line with transparency and equity of such students applying for consideration.
Updated outcome	Fully Compliant

Requirement No.	3.6
Programme Inspection outcome	Non-Compliant
Condition	Develop and implement a protocol/guideline for placements not supervised with a registered nurse on site, so there is oversight from a registered nurse to devise appropriate learning outcomes and discuss the achievement of the outcomes with the staff in the area and the student on completion of the placement. The registered nurse could be a link lecturer or CPC.
Updated response	Nurse practice development team work collaboratively with ATU regarding protocol/guideline in relation to placements not supervised by a registered nurse. ATU link lecturers are assigned to each setting and have a role in oversight of attaining LOs. Year tutors verify and sign off NCAD with further oversight that LOs have been achieved prior to ratifying at examination boards per semester/year.
Updated outcome	Fully Compliant

Requirement No.	5.5
Programme Inspection outcome	Partially Compliant
Condition	Review the learning support plan system available for students that are at risk of not progressing in line with the national competency assessment document.
Updated response	Ongoing review with potential to further incorporate student and preceptor feedback. This is being undertaken with the other two ATU nursing campuses once faculty restructuring has occurred. Feedback process in place for full review.
Updated outcome	Fully Compliant

Requirement No.	6.11
Programme Inspection outcome	Partially Compliant
Condition	To ensure separate work time and reflective time is captured on the roster. More structure for reflective time to be introduced for supernumerary and internship reflection, involving both academic and clinical staff input.
Updated response	Nurse Practice Development Team will consider reflective time off site for supernumerary nursing student as is individual to each student. Structured reflective practice session will furnish the students with the necessary skills to utilise reflective practice time effectively. Clinical placement coordinators offer onsite reflection to students during their weekly support. Students also reflect in action with the preceptor/registered nurse.
Updated outcome	Fully Compliant

Intellectual Disability Programme Recommendations	Updated Response	Noting
NMBI recommends that there are measures employed to ensure a greater engagement in the feedback process by students on practice placements.	There is a current mechanism in place whereby students are invited to provide feedback by way of hardcopy/paper evaluation templates. Any feedback received that identify any areas in need of improvement are reported to the managers of the sites in a prompt manner. Where no areas of improvement are identified, the manager is given overall feedback at the end of the academic year. Students do not always avail of this invitation. Nurse practice development are currently reviewing this mechanism and an online feedback system is under consideration. ATU student survey captures feedback online from all students on clinical placements and discussed at programme boards. Recall and consolidation days facilitated by ATU also allow greater engagement and feedback.	Recommendation response accepted
There is a wide variety of academic assessments, but students were noted to be over assessed, particularly in year 2, so a review of the module assessment structure is recommended.	5 Year Programmatic review has reviewed assessment across the three disciplines in line with ECTS weighting and theory weeks in university.	Recommendation response accepted
Consider improving student's exposure to the person-centred plans/individual personal plans and official documentation before their first placement, so they can incrementally build their knowledge of how residents are assessed, and care is captured.	Nurse practice development have introduced care planning workshops whereby students attend an offsite venue to work through specific scenarios and the relevant care planning process using the relevant templates. Nurse practice development are currently working on scheduling these workshops for each semester.	Recommendation response accepted with commendation

Intellectual Disability Programme Recommendations	Updated Response	Noting
Consider scenarios/problem-based learning with information based on examples of previous residents (anonymised) and their care plans, Ard Greine staff volunteered to work with link lecturers to explore this option for learning for students.	This is being considered by ATU, Donegal and the Director of Nursing.	Recommendation response accepted
Clinical staff to consider discussing with students what they are reflecting on so students may get benefit of the clinical staff's expertise. The clinical area discussions on reflection could be integrated into learning for in-service for all staff.	Supernumerary nursing students currently avail of reflective practice off site. Students are encouraged to reflect using a model of reflection and have a reflective piece to complete as part of their Competency Assessment which is signed off by the preceptor.	Recommendation response accepted
Communication regarding support for students requiring reasonable accommodations could be strengthen between the college and the practice placement. We recommend pre-placement meetings for information purposes for the student, between lecturer, CPC and student where the student could be encouraged to disclose their support needs to clinical staff to ensure reasonable accommodations are provided for.	Nurse practice development welcome this recommendation and the clinical placement coordinator for the allocated placement is happy to attend a preliminary meeting with the student, lecturer, and learning support service, for example, CURVE in ATU so that reasonable accommodation for the student can be addressed. This is subject to the student's full consent in line with ATU Policy and procedures and Disability Officer. NPD team suggest that a guideline be implemented in relation to this so that the student and staff are clear on the process and roles/responsibilities.	Recommendation response accepted
Suggest scoping out Erasmus placement opportunities for ID students.	This is being considered by ATU, Donegal.	Recommendation response accepted

Mental Health Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in Mental Health Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	Sligo Mental Health Services 28 March 2022
	Rehab and Recovery, Sligo Town 28 March 2022
	Donegal Mental Health Services (LUH) 29 March 2022
	Child and Family Mental Health Service 29 March 2022

Commendations

- Preparation done by all for NMBI visit. Excellent documentation provided ahead of time.
- Amalgamating the NMBI and programmatic review process proved very beneficial for all concerned.
- Links between AHCPs and EB are excellent and to be commended.
- Students took great pride in being associated with LYIT which is always wonderful to hear.
- CPCs are providing excellent support to students and staff despite the shortfall in CPC resources.
- Clinical Nurses Managers were very supportive of students learning on placement.
- Excellent documentation viewed on practice placements.
- Erasmus programme is very well set up. A great example for other sites.
- Excellent student services in LYIT, including CURVE.

Response to Conditions and Current Status

Requirement No.	2.7
Programme Inspection outcome	Non-Compliant
Condition	Appointment of additional CPC required for the Sligo Mental Health Services. A minimum of four CPCs in total needed to meet requirements given increasing student numbers and the geographical spread of clinical placements over 3 counties.
	One SALO for 116 students. Additional SALO to be appointed.
Updated response	CPC for SLMH appointed, start date 13 June 2023.
Updated outcome	Fully Compliant

Requirement No.	5.5
Programme Inspection outcome	Partially Compliant
Condition	Review the learning support plan system available for students that are at risk of not progressing in line with the national competency assessment document.
Updated response	Ongoing review with potential to further incorporate student and preceptor feedback. This is being undertaken with the other ATU nursing campuses once faculty restructuring has occurred. Feedback process in place for full review.
Updated outcome	Fully Compliant

Requirement No.	6.6
Programme Inspection outcome	Partially Compliant
Condition	A sufficient number of Registered Nurses (above 80%) must complete a teaching and assessing course approved by the NMBI to enable them support, guide and assess students' learning and competence.
Updated response	Training workshops offered as required and additional workshops delivered subject to service needs and demands. Ongoing commitment for releasing registered nurses is important to maintain this standard.
Updated outcome	Fully Compliant

Requirement No.	6.11
Programme Inspection outcome	Partially Compliant
Condition	Arrangements must be put in place to ensure that all internship students get their reflective time. Ideally reflective time should be rostered.
Updated response	Await formal resolution to this condition from HSE. Feedback to NPDC and DON.
Updated outcome	Partially Compliant

Mental Health Programme Recommendations	Updated Response	Noting
More practical training time for development of psychosocial intervention skills during theoretical training.	This has been incorporated into the timetable and a thread of skills which focus on interventions/ therapeutic communication is evident and resourced across all specialist modules.	Recommendation response accepted
Specific Learning outcomes for clinical placements. This will help highlight the specialist expertise they are part of on these sites e.g., CAMHs or Recovery.	Learning outcomes are specific for each site. With specific reference to CAMH, some terminological issues regarding 'person' and 'child' has been addressed.	Recommendation response accepted
Community placements should once again facilitate nursing students' exposure to service users to ensure achievement of learning outcomes and a positive clinical learning experience whilst respecting Covid-19 regulations.	Clinical partners report that community placements and subsequent exposure occurs as pre-COVID while respecting any regulations in place. Some community mental health placement/settings have client and data sensitivity to consider and restricts student exposure to certain settings as identified/ restricted by DONs.	Recommendation response accepted
All students should have a placement on CAMHs during their training.	This is incorporated to the best of allocations capacity, given the limited CAMHs capacity to take students only in year 2/3 and number of students across mental health services. Year 4 semester 7 students currently exposed to CAMHS placements where required.	Recommendation response accepted
Clerical support for CPCs and Practice Development Team.	Await response from HSE. Internal HSE HR resource issue that requires consideration.	Recommendation response accepted
It would be very beneficial to have the NPDC in Mental Health on the LJWG.	NPDC is a named proxy for the DON MH on the LJWG terms of Reference.	Recommendation response accepted
All year 1 students should have aggression management training prior to commencing placement.	Students in year 1 generally have this training prior to placement. On the particular year of inspection, Covid-19 restrictions (September/ October 2022) caused delay and online resources supplemented this training under Covid-19 extenuating circumstances.	Recommendation response accepted

Matters Arising from the Site Inspection

An in-depth discussion on student attrition rates was held between the education body team and NMBI inspection team as part of the in-person site inspection, in relation to the BSc Nursing in Intellectual Disabilities programme. The education body noted that attrition is a nationwide issue but that there are opportunities to address attrition at a local level. Updates provided by ATU, Donegal include:

- Engagement with the Department of Further and Higher Education, Research Innovation and Science (DFHERIS) to establish tertiary routes of entry into the undergraduate programmes. This may entail establishing a dedicated number of places for entry into ATU nursing programmes for students who have completed 1yr locally at an Education and Training Board (ETB) college level 5 health programme, known as the 1+4 model. This would potentially assist in securing a supply option for local students.
- Considering a pilot to be agreed with NMBI for a bridging programme for entry into places lost through attrition in 1st year of the programme.

**Bord Altranais agus
Cnáimhseachais na hÉireann**

Nursing and Midwifery
Board of Ireland