

NMBI Site Inspection of Nursing and Midwifery Programmes Leading to Registration and Specialist Practice

Monitoring Update Report

University College Cork (UCC)



**Bord Altranais agus
Cnáimhseachais na hÉireann
Nursing and Midwifery
Board of Ireland**

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This report is an update of the University College Cork (UCC) site inspection report approved by the Nursing and Midwifery Board of Ireland on 21 September 2022. The monitoring update report is based on information provided by UCC in collaboration with their practice partners.

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	6 June 2023
Monitoring Report Published	XX July 2023

Signed:



Sheila McClelland
Nursing and Midwifery Board
of Ireland, CEO



Carolyn Donohoe
Director of Education, Policy
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01

**Nurse Education
Programmes**

NAME OF EDUCATION BODY	University College Cork
HEAD OF NURSING/MIDWIFERY	Professor Josephine Hegarty

Registered General Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in General Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	Cork University Hospital Bon Secours Hospital

Registered Children's and General Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) Integrated Children's and General Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	Paediatric Services, Cork University Hospital Child Surgical, South Infirmary Victoria University Hospital

Registered Intellectual Disability Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in Intellectual Disability Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	COPE Foundation, Glasheen COPE Le Cheile, Mayfield Respite

Registered Mental Health Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in Mental Health Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	Cork Mental Health Services, St Finbarr's Hospital St Michael's, Mercy University Hospital

Required Compliance

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

Education body requirements

1. Student Admission and Progression

		General	Integrated	Intellectual Disability	Mental Health
1.1	Clear and comprehensive information about the programme is available for prospective students.	C	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	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	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	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	C
1.6	Learning supports including reasonable accommodations are available to students who require them. (EB & AHCP)	C	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	C

Continued

		General	Integrated	Intellectual Disability	Mental Health
1.8	Procedures for a student exiting a programme before completion are explicit, including exit awards if appropriate.	C	C	C	C
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	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	C

2. Governance and Management

		General	Integrated	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)	P	C	C	C
2.2	The school of nursing/department and individual programmes are subject to periodic quality reviews.	C	C	C	C
2.3	Programmes are subject to annual monitoring through the external examiners process.	C	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	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	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	C

Continued

		General	Integrated	Intellectual Disability	Mental Health
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	P
2.8	Teaching and learning resources and facilities support the delivery of the programme.	C	C	C	C
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	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	C
2.11	Formal grievance, complaints, and appeals policies are available and made known to students.	C	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	C
2.13	There is public and patient involvement in the review and evaluation of programmes by the education body.	C	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	C
2.15	The education body and AHCP have processes in place to support students with health problems. (EB & AHCP)	C	C	C	C

3. Practice Placements

		General	Integrated	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	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	C
3.3	There are processes in place for students to evaluate and provide feedback on practice placements. (EB & AHCP)	C	C	C	C
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	C
3.5	Fair and transparent systems are in place for the allocation of students to practice placements. (EB & AHCP)	C	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	C

Programme requirements

4. Curriculum

		General	Integrated	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	C
4.2	The programme meets the requirements of the relevant award on the National Framework of Qualifications (NFQ).	C	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	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	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	C
4.6	Clinical placements are integral to the programme.	C	C	C	C
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	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	C
4.9	The curriculum demonstrates a balance between theory and practice leading to the development of reflective practitioners.	C	C	C	C

Continued

		General	Integrated	Intellectual Disability	Mental Health
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	C
4.11	Registered nurses with appropriate professional and academic qualifications and teaching experience deliver the nursing modules.	C	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	C

5. Assessment

		General	Integrated	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	C
5.2	The selection of assessment techniques assesses achievement of learning outcomes at both module and programme level.	C	C	C	C
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	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	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	C

Continued

		General	Integrated	Intellectual Disability	Mental Health
5.6	The assessment strategy for the programme makes clear that compensation between theoretical and clinical practice components is not allowed.	C	C	C	C
5.7	External examiners appointed to the programme are appropriately qualified and experienced.	C	C	C	C

Associated Health Care Provider (AHCP) Requirements

6. Clinical Learning Environments

		General	Integrated	Intellectual Disability	Mental Health
6.1	The Clinical Learning Environment (CLE) Audit is completed and available for review. (EB & AHCP)	C	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	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	C
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	C
6.5	Practice based learning is supported by preceptors from the relevant division of nursing or have suitable experience.	C	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	C

Continued

		General	Integrated	Intellectual Disability	Mental Health
6.7	Arrangements are in place for protected time to facilitate practice placement assessments by preceptors.	C	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	C
6.9	The supernumerary status of the student is explicit for preceptors and students.	C	C	C	C
6.10	Internship practice placements provide experience of the 24-hour care cycle.	C	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	C	C
6.12	All placements, including specialist placements, are completed prior to the commencement of the 36-week internship placement. (EB & AHCP)	C	C	C	C
6.13	Evidence based policies, procedures and guidelines are available to support students in care delivery.	P	C	C	C
6.14	Practice placements implement relevant NMBI professional guidance documents.	C	C	C	C

Monitoring Update

Education Body Organisational Condition

Requirement No.	2.2
Programme Inspection outcome	Partially Compliant
Condition	The education body will advise of confirmed dates scheduled for a quality review of its programmes.
Updated response	Dates confirmed for scheduled quality review. Note of completion to be included in the relevant annual report on completion of process.
Updated outcome	Fully Compliant

General Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in General Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	Cork University Hospital 4 May 2022 Bon Secours Hospital 5 May 2022

Commendations

- UCC provides a very impressive range of undergraduate and postgraduate programmes, along with having a very strong research profile, supported by state of the art, purpose-built facilities.
- There is a great offering of interdisciplinary education and involvement of service users in the delivery of the programme, supported by an experienced team.
- The governance structures and communication pathways within the team are to be commended.
- A wide range of alternative and innovative assessment strategies are employed across modules, including simulation, podcasting, video recording etc.
- Innovative teaching methods are employed such as problem-based learning, simulation.
- Strong move towards automated and digitalising systems, for example Link Lecturer notification to students, COVID app, digital CAD project, form authorising and distribution system.
- The placement evaluation process (survey followed by qualitative feedback sessions) is to be commended.

- Students expressed gratitude for the support provided throughout practice placements by both CPCs and clinical staff.
- Effort of Nurse Practice Development team and CPCs in providing ongoing support for a large number of students in both Cork University Hospital and Bons Secours Hospital Cork, in addition to the satellite sites, particularly during the COVID-19 pandemic, is to be commended.
- The Protected Reflective Education Practice (PREP) weeks are highly valued by students.
- The practice placement sites provide a very supportive learning environment with a variety of learning opportunities for students to engage with.
- The innovative practice development initiatives, in particular the Magnet4Europe Research Project; safety huddle; graduate and mentorship programmes, are commendable.
- Recognition of the Hospital green flag award CUH and Nursing Care strategic Framework (Bon Secours Hospital, Cork), among other awards.
- Interprofessional Education (IPE) initiative between the Office of Nursing and Midwifery Service Director and the College of Medicine and Health, UCC to support the development of models of integrated care and more multidisciplinary approaches to the delivery of healthcare in acute and community services is a highly commendable pilot project. NMBI look forward to hearing more about the initiative as it progresses.

Response to Conditions and Current Status

Requirement No.	2.1
Programme Inspection outcome	Partially Compliant
Condition	The education body will create and agree a MOU with each of its Associated Health Care Providers and a copy submitted to NMBI.
Updated response	MOUs are currently being updated, once all signed MOUs are returned from practice partners, UCC will notify NMBI.
Updated outcome	Partially Compliant

Requirement No.	6.3
Programme Inspection outcome	Partially Compliant
Condition	The AHCP will ensure that each student is allocated a named preceptor and associated preceptor while on practice placement and be available to supervise and assess the student for two thirds of the student's time on placement.
Updated response	Ongoing continuous improvement process to increase trained preceptorship numbers. It continues as a standing item on relevant committees.
Updated outcome	Partially Compliant

Requirement No.	6.13
Programme Inspection outcome	Partially Compliant
Condition	The AHCP, in collaboration with the Education Body, must update relevant PPPGs and ensure they reflect current, evidence-based practice.
Updated response	Health Service Providers endeavour to ensure PPPGs are available to support students in care delivery. HSPs acknowledge that some PPGS were out of date, due in the main, to the impact of COVID. Work has commenced on reviewing and updating the PPGS as appropriate. Upskilling of staff is ongoing within the HSPs.
Updated outcome	Partially Compliant

General Programme Recommendations	Updated Response	Noting
Implement an SOP/algorithm to communicate reasonable accommodation needs between UCC and the AHCP (linked to requirement 1.6).	Following a clinical needs assessment for a student who is registered with the University Disability office, the agreed reasonable accommodations will be documented in the CAD (Competence Assessment Document) with permission from the student.	Recommendation response accepted – consider a different record method.
The process of Clinical Learning Environment Audits should be reviewed. It appears that two audits are undertaken in each site. Use of the new Clinical Learning Environment Tool should commence as soon as possible. It is recommended that Clinical Learning Environment Audits should be completed for specialist areas (linked to requirement 3.1).	We have now moved to using the NMBI Clinical Learning Environment Audits on an online platform. Only this form will be used going forward in line with NMBI recommendations.	Recommendation response accepted
Please consider the recently changed profile of SIVUH in relation to surgical placements, general interns expressed a reduced exposure in medical placements. Suggest rotating students to practice placements in other UCC partner sites.	Meetings are ongoing to examine the expansion of surgical and medical placement rotations across our partner HSPs including SIVUH.	Recommendation response accepted

General Programme Recommendations	Updated Response	Noting
<p>Review and amend the module learning outcomes, particularly for stages 3 and 4 of the programme, to ensure they meet the requirement of the Level 8 award of the National Framework of Qualifications (linked to requirement 4.2).</p>	<p>The current curriculum has just completed its first roll out. This curriculum is now due for review. This review will include the evaluation of all learning outcomes, ensuring they meet the requirements of the Level 8 award of the National Framework of Qualifications.</p>	<p>Recommendation response accepted</p>
<p>The education body, in conjunction with the AHCP, will review and amend clinical learning outcomes to be stage and site specific. Learning outcomes need to be reduced in number. The learning outcomes should be developed in collaboration with the academic staff from UCC/Link Lecturer and should use a recognised format e.g., SMART to ensure they are measurable, achievable (linked to requirement 6.2).</p>	<p>Going forward the NMBI A Guide to Writing Learning Outcomes for Practice Placements (2022) and Kennedy (2007) Writing and Using Learning Outcomes; A practical Guide will be utilised in the development of learning outcomes.</p>	<p>Recommendation response accepted</p>
<p>The education body and AHCP to record evidence of trained preceptor numbers and evidence of training updates (linked to requirement 6.4).</p>	<p>Preceptor percentages provided.</p>	<p>Recommendation response accepted</p>
<p>To ensure equity and fairness to students of varying socioeconomic backgrounds registered on the nursing programmes at UCC, arrangements are made for the purchase of the iPads for all students, consider linking this to the UCC pilot programme.</p>	<p>The SoNM have committed to making provision in their annual IT budget to support students who can demonstrate that they or their family do not have the means to purchase a device themselves. No student will be disadvantaged. In addition, a student in receipt of the SUSI maintenance grant will automatically be provided with a device. All students who requested support from the SONM for this academic year, were provided with a device.</p>	<p>Recommendation response accepted</p>

General Programme Recommendations	Updated Response	Noting
<p>Greater engagement of Link Lecturers with students on practice placement and clinical staff, outside of CLE audits and development/ support plan meetings. Students and clinical staff often unaware of the named Link Lecturer for the practice placement site. There appears to be some overlap with the clinical placement module lead role.</p>	<p>All students receive an email on day 1 of each placement identifying the LL attached to that area. The LL is also identified within the clinical information provided to each student on the clinical information (ARC) System. All students are introduced to the ARC system on introduction to the programme.</p>	<p>Recommendation response accepted</p>
<p>Students reported not being aware of the relevant people to escalate issues to (for example, students reported raising academic issues with CPCs). More frequent meetings with class representative recommended throughout the academic year to evaluate student cohort progress and identify and address any issues in a timely manner.</p>	<p>Each academic year, students have meetings with their Year co-ordinators, Programme Leaders, Practice Module Leader and Module leads where they are informed of the relevant report processes. In addition, they are provided with a student handbook which outlines reporting structures within school. Students also have an opportunity through class reps to bring issues to Student Experience Committee, Allocations and Clinical Practice Committee. In addition, students are provided with monthly open-door sessions with the Director of Undergraduate Nursing and Midwifery Education, Dr Caroline Dalton.</p> <p>Students are encouraged to discuss specific module issues with the module leader. Details of modules leaders are available on Canvas for students. Discussion boards are also available on Canvas. Where student raise academic issues with CPCs, CPCs are encouraged to make the academic team aware and ask the student to link with module leaders. Efforts will continue to inform students of all relevant communication channels and to encourage students to be proactive in engaging with the supports available to them.</p>	<p>Recommendation response accepted</p>

General Programme Recommendations	Updated Response	Noting
<p>Review and consider the workload and assessment requirements across semesters to ensure they are as equally distributed as possible. Students raised the imbalance of assignments across semesters (especially year 3) and during practice placement.</p>	<p>The workload and assessment requirements are considered at the start of each academic year. Each year co-coordinator in conjunction with the Director of Undergraduate Nursing and Midwifery Education and the respective Programme Leads reviews the timetable and the assessment grids and modifications are made based on the feedback from the team and from requests made by students through the Student Experience Committee. With respect to 3rd year, during the current academic year, a 5-credit module, NU3083 Research for Evidence-based Nursing and Midwifery Care, was moved from semester 2 to semester 1. This move has been positively received by 3rd year students in this academic year and the workload and assessment structures across semesters will continue to be monitored.</p>	<p>Recommendation response accepted</p>
<p>The issue of providing venepuncture/IV training in CUH demonstrates there in an inequity across the student body depending on the ACHP placement.</p>	<p>This issue has been resolved. The provision of venepuncture is now being facilitated across all General HSPs. We recognise there will be challenges with implementing Peripheral Intravenous Cannulation, the introduction of this will be explored in 2024.</p>	<p>Recommendation response accepted</p>
<p>Students require clear planned and documented opportunities to be involved in medication management across all years. 1st, 2nd and 3rd years should have a more active role in medication management. Students identified lack of opportunity to participate in medication preparation and administration under direct supervision of the RGN.</p>	<p>Medication management is taught in the pharmacology module NU2003 but is also integrated in discipline specific modules: NU2057, NU2058, NU3067, NU3079, NU4077. In addition, students receive a medication worksheet in year 2 in module NU2003. NU2003 and are encouraged to use this on all clinical placements going forward to aid their learning and understanding.</p>	<p>Recommendation response accepted</p>

Continued

	<p>This item was discussed at the Clinical Practice Committee on 1st March and UCC/HSP Local Joint Working Group (Steering Group) Committee Meeting on 3rd March 2023.</p> <p>Health Service Providers endeavour to always ensure that students are provided with opportunities to participate in medication preparation and administration under direct supervision of the RGN. HSPs will continue to ensure these opportunities are maximised.</p>	
<p>Recommend the use of simulation facilities for community-based scenarios, similar to the DARE module in 4th year.</p>	<p>A working group has been established to ensure the development of community orientated simulation facilities, to ensure that the developed space will be a useful resource across a number of different programmes at undergraduate and postgraduate level.</p>	<p>Recommendation response accepted</p>

Integrated Childrens and General Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) Integrated Childrens and General Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	Paediatric Services, Cork University Hospital 4 May 2022 Child Surgical, South Infirmary Victoria University Hospital 5 May 2022

Commendations

- It is evident there is a strong partnership between the Clinical partners and the Education Body in particular supporting new sites and sharing of resources.
- Students commended the support they receive on practice placements from the clinical staff and the CPC who works solely for the integrated programme.
- Excellent linkage of students with preceptors, evident in the rosters. Students gave positive feedback on this.
- Preceptors have a good understanding of how to support a student who is at risk of not progressing to achieve clinical competency.
- Students are listened to, good evidence of this is demonstrated when students expressed a wish for future academic assessment schedules to be changed to facilitate a better spread of workload, e.g., field trip portfolio.
- Innovative assessment approaches, for example, a real-life simulation experience with a parent and their child, provide excellent learning strategies for nursing students.

Response to Conditions and Current Status

Requirement No.	2.7
Programme Inspection outcome	Partially Compliant
Condition	Outstanding roles for CPCs to be filled, particularly in CUH to ensure that the workload is evenly spread and there is a contingency plan in the event of leave.
Updated response	At the time of the site inspection, one whole-time CPC in CUH was on sick leave and has since returned. A second part-time CPC had been recruited and has commenced the CPC role.
Updated outcome	Fully Compliant

Requirement No.	2.13
Programme Inspection outcome	Partially Compliant
Condition	This needs to be implemented to meet the NMBI requirements. This evaluation process can be developed involving the patient and public to voice/channel their opinions.
Updated response	The SoNM executive committee has agreed to fund the development and implementation of a strategy to meaningfully embed PPI in all school endeavours.
Updated outcome	Fully Compliant

Requirement No.	6.2
Programme Inspection outcome	Partially Compliant
Condition	Learning outcomes to be revised and rewritten specific to the practice placement for supernumerary and intern groups in collaboration with the education body.
Updated response	Area and year specific learning outcomes are being completed, they are being circulated and approved by the joint UCC/CUH team. Once finalised they will be made available in the placement area and on ARC.
Updated outcome	Fully Compliant

Integrated Programme Recommendations	Updated Response	Noting
Consider an increased emphasis on medication management in the education body and clinical practice, to encourage active participation by the student in medication management and inspire confidence during practice placement.	<p>Medication management is taught in the pharmacology module NU2003 but is also integrated in discipline specific modules: NU2057, NU2058, NU3067, NU3079, NU3091, NU4062, NU4077 and NU4086. All Interns complete the 'Double Checking of Medication in Children Competency Assessment' which was most recently updated in May 2022. In addition, students receive a medication worksheet in year 2 in module NU2003 and are encouraged to use this on all clinical placements going forward to aid their learning and understanding.</p> <p>Health Service Providers endeavour to always ensure that students are provided with opportunities to participate in medication preparation and administration under direct supervision of the RGN. HSPs will continue to ensure these opportunities are maximised.</p>	Recommendation response accepted

Integrated Programme Recommendations	Updated Response	Noting
<p>Implement an SOP/algorithm to communicate reasonable accommodation needs between UCC and the AHCP (linked to requirement 1.6). Please consider removing the direct link to the Fitness to Practice page in the PPA document.</p>	<p>Following a clinical needs assessment for a student who is registered with the University Disability office, the agreed reasonable accommodations will be documented in the CAD (Competence Assessment Document) with permission from the student.</p>	<p>Recommendation response accepted – consider a different record method.</p>
<p>Review the established feedback/evaluation processes on practice placements to allow for more anonymous responses and ensuring openness. A greater transparency on how feedback is actioned would be welcomed.</p>	<p>The evaluation process used for the integrated programme uses an anonymous online questionnaire.</p>	<p>Recommendation response accepted</p>
<p>Integrated students would benefit from the opportunity to complete their ICU placement in the NICU learning environment.</p>	<p>The Allocations and Integrated teams are in discussions regarding the potential for placing Integrated Students in the NICU. They plan to hold further meetings with relevant stakeholders, including clinical management, to explore the possibility of expanding capacity.</p>	<p>Recommendation response accepted</p>
<p>Review evidence-based policies, procedures and guidelines to ensure that they are available to support students. It is recommended that these guidelines are localised to the site.</p>	<p>This item was discussed at the Clinical Practice Committee on 1st March and UCC/HSP Local Joint Working Group (Steering Group) Committee Meeting on 3rd March 2023. Health Service Providers will continue to endeavour to always ensure PPPGs are available to support students in care delivery.</p>	<p>Recommendation response accepted</p>

Intellectual Disability Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in Intellectual Disability Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	COPE Foundation, Glasheen 4 May 2022 COPE Le Cheile, Mayfield Respite 5 May 2022

Commendations

- Strong evidence of a good working relationship between the Healthcare Partnerships and the Education Body.
- During the visit, residential houses, day programmes and a respite house was visited. All of these areas were welcoming, person centred and valued learning experiences for student nurses.
- There is a great demonstration of leadership within the COPE Foundation from the Director of Nursing.
- The skill of venepuncture was piloted this year with 4 internship students. This skill can be difficult to achieve in this discipline and COPE Foundation have developed a core pathway for achieving this.
- Student support from CPCs during practice placement was reported as excellent, the relationship between the CPCs and students is to be commended.
- The number of ANPs and CNSs in the service is evidence of the importance placed on CPD within COPE Foundation. These offer specialist placement opportunities for student nurses and are great role models for RNIDs.
- The Registered Nurse Tutor position is an integral part of the COPE Foundation and provides support for staff in achieving CPD.

Response to Conditions and Current Status

Requirement No.	2.7
Programme Inspection outcome	Non-Compliant
Condition	These posts must be filled with appropriately qualified personnel.
Updated response	Confirmation that posts are filled.
Updated outcome	Fully Compliant

Requirement No.	2.12
Programme Inspection outcome	Partially Compliant
Condition	A new ERASMUS arrangement to be explored and if possible, made available to intellectual disability nursing students.
Updated response	Erasmus opportunity is being developed with the University of Malta with the first exchange scheduled for Sept. 2023. Currently exploring options of an exchange with Université de Rouen, France and Hanze University in Groningen.
Updated outcome	Fully Compliant

Requirement No.	3.5
Programme Inspection outcome	Partially Compliant
Condition	All intellectual disability internship nursing students should be offered longer placements to provide opportunities for consolidated learning.
Updated response	Internship was amended in the year of the audit due to Covid-19. A number of students had to take very short placements to meet minimum requirements. Plans are in progress for longer placements. Internship students currently undertaking rostered placement have longer placements.
Updated outcome	Fully Compliant

Intellectual Disability Programme Recommendations	Updated Response	Noting
There is a small team of lecturing staff in the education body with specific responsibility for intellectual disability nursing related content with a clear shortfall of 1 WTE. Notably none of the positions held are at Senior Lecturer or above in the discipline. Consideration should be given to a variety of promotional grades as this is important in supporting research agendas as an integral part of nurse education.	All lecturing posts affiliated with the intellectual disability nursing programme are currently occupied; thus there is no vacancy to fill. This recommendation will be borne in mind should recruitment to the intellectual disability nursing programme lecturing team be required in the future. This recommendation has also been brought to the attention of the Schools Executive team.	Recommendation response accepted

Continued

	<p>UCC promotions to senior lecturer is now a 'rolling call' with two 'cycles' per year, thus lecturers in the Intellectual Disability Nursing team who have completed at least three years continuous service in post as a Lecturer and have a Doctorate from a recognised institution (or equivalent evidence of high-level research achievement) can apply for promotion.</p>	
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Mental Health Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in Mental Health Nursing
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	Cork Mental Health Services, St Finbarr's Hospital 4 May 2022 St Michael's, Mercy University Hospital 5 May 2022

Commendations

- Students report feeling supported by academic and clinical staff.
- Excellent variety of practice placement sites for students.
- There is evidence of a good relationship between the University and clinical partners.
- Students report being very well supported by Clinical Placement Coordinators whilst on practice placement.
- Throughout the site inspection visit all academic and clinical staff were very accommodating and engaged enthusiastically with the inspection team.
- Excellent teaching and learning facilities in UCC.

Response to Conditions and Current Status

Requirement No.	2.7
Programme Inspection outcome	Partially Compliant
Condition	The ratio of mental health lecturers and Clinical Placement Coordinators to mental health nursing students needs to be confirmed.
Updated response	Business cases for additional CPC and SALO posts have been submitted to the Head of Service – Mental Health, Cork Kerry Community Area and the NMPDU /ONMSD are aware of the needs. 3.5 SALO posts and 2.5 CPC posts have been applied for and a positive response to these requests is expected. Support structures for students and preceptorship are an ongoing item at the Allocations Committee and the Local Joint Working Group (Steering Group) and is discussed at each committee meeting.
Updated outcome	Partially Compliant

Requirement No.	4.8
Programme Inspection outcome	Partially Compliant
Condition	Review module learning outcomes wording to ensure that they articulate the academic level of the module/programme.
Updated response	Module learning outcomes across the four years of the programme have been reviewed by the entire mental health team in the context of the QQI framework.
Updated outcome	Fully Compliant

Mental Health Programme Recommendations	Updated Response	Noting
The process of Clinical Learning Environment Audits should be reviewed. It appears that two audits are undertaken in each site. Use of the new Clinical Learning Environment Tool should commence as soon as possible. It is recommended that Clinical Learning Environment Audits should be completed for specialist areas (linked to requirement 3.1).	Clinical Learning Environment Audits are conducted for specialist placements. The new Clinical Learning Environment Tool will be used for all audits going forward.	Recommendation response accepted
Site specific learning outcomes and year specific learning outcomes should be available in each practice placement site (linked to requirement 6.2).	Site specific learning outcomes and year specific learning outcomes have been developed. These are available through the ARC system.	Recommendation response accepted
Opportunities exist for new clinical sites to be developed for internship students, particularly in the community setting (linked to requirement 6.12).	The internship plan has been reviewed by the Mental Health Allocations Liaison Officer and community mental health nursing placements are included in the internship plan this year.	Recommendation response accepted
It is recommended that Link Lecturers visit practice placement sites when students are on placement.	All students receive an email on day 1 of each placements identifying the LL attached to that area. The link lecturer is also identified within the clinical information provided to each student on the clinical information (ARC) System. All students are introduced to the ARC system on introduction to the programme.	Recommendation response accepted

Mental Health Programme Recommendations	Updated Response	Noting
<p>Consideration should be given to the development of a skills book for mental health nursing students.</p>	<p>The learning outcomes include the relevant skills for each clinical site.</p>	<p>Recommendation response accepted</p>
<p>Venepuncture and cannulation training should be introduced for Year 4 mental health nursing students.</p>	<p>Venepuncture training was piloted in the 2021/2022 Internship year and was positively evaluated by the students involved. Students are currently provided with an opportunity to undertake venepuncture training in this academic year. We recognise there will be challenges with implementing Peripheral intravenous cannulation, the introduction of this will be explored in 2024.</p>	<p>Recommendation response accepted</p>
<p>It is recommended that the pharmacology module should include more content on medications used to manage mental health illnesses. There are Registered Nurse Prescribers in mental health services who could contribute to the pharmacology lectures for mental health nursing students.</p>	<p>Pharmacology content is not limited to NU2003 – pharmacology is also covered under the following discipline specific modules: NU2066, NU2098, NU3053, NU3089, NU4094. In this regard, medication learning is scaffolded.</p> <p>Under NU4094, as part of PREP, students undertake a two-day medication management workshop which has input from registered nurse prescribers. PREP hours are recorded in the internship students' CADs.</p> <p>Students on practice placement (NU2068, NU3054, NU4094) also have access to a medication worksheet that they can use on each placement to assist their learning and understanding. Students are also assessed under Domain 3 (Nursing knowledge and cognitive competences) in the CAD.</p>	<p>Recommendation response accepted</p>

Mental Health Programme Recommendations	Updated Response	Noting
<p>A review of the practice placement schedule during internship is recommended. It appears that an internship student can complete a number of assessments in the same practice placement site during the internship period.</p>	<p>This schedule is based on student feedback – internship students demonstrate a preference for completing an acute placement, availing of other placement opportunities, and then returning to acute to further develop their skills and competence. We find that that there is a benefit to revisiting domains, scaffolding their learning throughout internship. For example, student’s complete domains at internalisation level, demonstrating evidence that they can make informed decisions. Once they gain further experience as their internship progresses, they have the opportunity to revisit these domains at dissemination level, using critical analysis to determine the outcomes of their actions, and demonstrate an ability to provide a rationale for their actions to others. Students often report enhanced confidence upon returning to the same clinical areas as a consequence of this scaffolded approach to learning. Oversight of the practice placement schedule remains with the ALO in conjunction with the AO in UCC.</p>	<p>Recommendation response accepted</p>



02

**Post-graduate
Nursing
Programmes**

Post-graduate Nursing

POST-GRADUATE PROGRAMMES

Registerable Post-graduate Programmes

- MSc Advanced Practice Nursing
- Certificate in Nurse Prescribing
- Post-graduate Diploma in Public Health Nursing

Post-graduate Programmes with a Clinical Component

- Post-graduate Diploma in Trauma and Emergency
- Post-graduate Diploma in Intensive Care Nursing
- Post-graduate Diploma and Post-graduate Certificate in Gerontological Nursing
- Post-graduate Diploma in Mental Health Nursing
- Post-graduate Diploma in Neonatology
- Post-graduate Diploma and Post-graduate Certificate in Medical Surgical
- Post-graduate Diploma and Post-graduate Certificate in Oncology
- Post-graduate Diploma in Cognitive Behavioural Therapy

Continuous Professional Development

- National Foundation Module in Critical Care Nursing (NU5098)
- Evidence Based Cervical Screening (NU6158)
- Authority to Refer for Radiological Procedures (NU6169)

ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED

Cork University Hospital	4 May 2022
Mercy University Hospital	5 May 2022
Carrigaline Primary Care Centre	5 May 2022

Required Compliance

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

Education body requirements

1. Education Providers		Post-graduate
1.1	Educational providers have a Post–Registration Nursing and Midwifery Education Committee/local joint working group, with representatives of the key stakeholders including service users.	C
1.2	The staff resource supports the delivery of the education programmes/units of learning at the stated professional, clinical and academic level.	C
1.3	Lecturers/tutors are involved in clinical practice and its development.	C
1.4	The mechanism for learner support in relation to student services, facilities and academic and clinical guidance is explicit. (EB & AHCP)	C

Programme requirements

2. Programmes/Units of Learning Design and Development		Post-graduate
2.1	Theoretical and clinical learning experiences and the learning environment must support the achievement of the aims and objectives/outcomes of the programmes/units of learning (EB & AHCP)	C
2.2	Programmes/units of learning design and development are led by registered nurse tutors or nurse/midwifery lecturers with a teaching qualification and is supported by academic and clinical experts including inter-disciplinary professionals as appropriate in collaboration with others and is guided by professional nursing/midwifery knowledge which is evidence/research based.	C
2.3	The programmes/units of learning development team comprise representative members of key stakeholders in nursing/midwifery education and practice and service users.	C
2.4	The programmes/units of learning design reflect various methods of teaching/learning and provides a balance between lectures, tutorials, workshops, small group interactions, demonstrations, practical work/clinical; and self-directed study.	C

Associated Health Care Provider (AHCP) Requirements

3. Practice Experience		Post-graduate
3.1	Practice experience provides learning opportunities that enable the achievement of competence in clinical nursing/midwifery practice and the stated learning outcomes (EB & AHCP)	C
3.2	Clearly written learning outcomes/objectives appropriate to the clinical area are developed and are available to ensure optimal use of valuable practice experience. These learning outcomes/objectives are revised as necessary.	C
3.3	Lecturers and nurse/midwifery tutors, in liaison with the appropriate clinical staff (clinical facilitators, preceptors, clinical managers and practice development co-ordinators) guide and support the learners in ensuring that the practice placement provides an optimum quality learning environment. (EB & AHCP)	C

Commendations

- NMBI would like to thank all the nursing teams for their welcome and their work in preparing for this site visit.
- Post-graduate programmes are well supported at UCC and in the associated clinical partner sites. NMBI would like to acknowledge the postgraduate team and in particular their leader, their investment in their students is exemplary for fulfilling the service need of the community.
- The significant support and dedication to ongoing provision of supports for graduate education in the clinical sites visited is to be commended.
- At CUH there is strong leadership in supporting ongoing and continuing education. The development of nursing grand rounds to provide an opportunity to share nursing innovations is to be applauded.
- At MUH a strong culture of learning is evident and this stems from the leadership team. The development of a nursing research strategy and the subsequent establishment of a nursing research committee is to be commended.
- NMBI would like to acknowledge the excellent development of the ANP consortium programme at UCC, the implementation of this programme was dynamic and innovative to support students at this advanced level.
- A key focus of inspection is also to promote good practice. To this end, since inspection, the ANP Inclusion Health has been linked to a newly established Inclusion Health Research Group established through St James Hospital in Dublin.
- The establishment of a Joint Professorial appointment with UCC and SSWHG to develop and support clinical research in ageing and health is to be commended.

Public Health Nursing Commendations

- Many of the Public Health Nurses were trained as PHN preceptors and there was an enthusiasm demonstrated by the group in relation to preceptoring both PHN students and undergraduate students. Both DPHN and student representatives acknowledged the importance of the PHN preceptor.
- The NMBI acknowledges the quality initiatives developed by the PHN team in Carrigaline Primary Care screening patients with chronic wounds for anxiety and depression, in particular the “Person Behind the Wound Initiative”.
- In addition, the NMBI commends the quality initiative of the MAPS portal which provides all nursing staff (inclusive of student PHN) with easy access to national and local policies, procedures and guidelines.
- The module NU6054 (Maternal and Child Health Nursing) is very informative and comprehensive.

Response to Conditions and Current Status

Post-graduate Programme Recommendations	Updated Response	Noting
The Standards and Requirements for Post Registration Education Programmes, indicate the need for inclusion of a philosophy of education; curriculum model and nursing and midwifery educational theories underpinning programmes are to be explicit. We recommend that this needs to be more explicit in curriculum documents.	Extensive amendments made to programme documents to make these recommendations explicit.	Recommendation response accepted
Clinical Learning Booklets are provided to students. While the objectives outlined are appropriate, they are generic as the document is used across a range of programmes. In discussions with students, we learned that the student in consultation with their facilitator and/or mentor identifies personal learning outcomes related to placements. The process for development of personal learning outcomes by student for practice placement needs to be explicitly set out in the relevant materials used.	Extensive amendments made to programme documents to make this process explicit.	Recommendation response accepted
Steinaker and Bell's (1979) taxonomy is used to measure clinical competence. Greater clarity as to expected level is needed as there was some difference in understanding between university and practice site for achievement of 'dissemination' level.	Extensive amendments made to programme documents to provide clarity of expected level.	Recommendation response accepted

Post-graduate Programme Recommendations	Updated Response	Noting
<p>While some clinicians are involved in the provision of theoretical material for modules, further involvement of clinical experts in the provision of teaching would enhance the credibility of programmes provided. It would also be worth considering appointing clinical colleagues to Adjunct positions to further enhance collaborative links between UCC and associate practice partners. This would also help to support the continued development for clinical nursing research, already well established through Joint professorial appointment.</p>	<p>Evidence of adjunct positions provided where applicable.</p>	<p>Recommendation response accepted</p>
<p>There is a benefit in ensuring greater links with other Public Health programme providers, opportunities for collaboration and sharing of best practice in programme delivery is recommended.</p>	<p>The UCC PHN programme co-ordinator discussed the recommendation with the programme coordinators at the two other HEIs where the PGDip PHN is delivered, and we have agreed to meet to discuss the recommendation.</p>	<p>Recommendation response accepted</p>
<p>Maternity placements for students PHNs who do not have midwifery training would benefit from coinciding with the theoretical component of Maternal and Child Health Nursing.</p>	<p>The dates for the PGDip PHN student placements at the maternity hospitals are determined by the Allocations Liaison Officer (ALO) at the Cork University Maternity Hospital (CUMH). While the UCC PHN programme co-ordinator recommends clinical placement dates that best align with the delivery of the theoretical component of the programme, the placements dates are decided by the ALO.</p>	<p>Recommendation response accepted</p>



03

**Midwifery
Programmes**

Midwifery

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in Midwifery
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	University Hospital Kerry 3 May 2022 Cork University Maternity Hospital 4 May 2022

Required Compliance

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

Education body requirements

1. Student Admission and Progression		Midwifery
1.1	Clear and comprehensive information about the programme is available for prospective students.	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
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
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
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
1.6	Learning supports including reasonable accommodations are available to students who require them. (EB & AHCP)	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
1.8	Procedures for a student exiting a programme before completion are explicit, including exit awards if appropriate.	C
1.9	Procedures are in place to inform NMBI, in writing, annually of student/s who exit a programme prior to completion.	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

2. Governance and Management		Midwifery
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
2.2	The school of nursing/department and individual programmes are subject to periodic quality reviews.	C
2.3	Programmes are subject to annual monitoring through the external examiners process.	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
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
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
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
2.8	Teaching and learning resources and facilities support the delivery of the programme.	C
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
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
2.11	Formal grievance, complaints, and appeals policies are available and made known to students.	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
2.13	There is public and patient involvement in the review and evaluation of programmes by the education body.	C
2.14	The education body and AHCP operate a fitness to practise mechanism for the protection of the public. (EB & AHCP)	C
2.15	The education body and AHCP have processes in place to support students with health problems. (EB & AHCP)	C

3. Practice Placements		Midwifery
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
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
3.3	There are processes in place for students to evaluate and provide feedback on practice placements. (EB & AHCP)	C
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
3.5	Fair and transparent systems are in place for the allocation of students to practice placements. (EB & AHCP)	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

Programme requirements

4. Curriculum		Midwifery
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
4.2	The programme meets the requirements of the relevant award on the National Framework of Qualifications (NFQ).	C
4.3	Safety of the person and protection of the public is a fundamental, explicit, and continuing component of the programme.	C
4.4	The curriculum model chosen is dynamic, flexible, and evidence-based and utilises a range of teaching and learning strategies.	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
4.6	Clinical placements are integral to the programme.	C
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

Continued

		Midwifery
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
4.9	The curriculum demonstrates a balance between theory and practice leading to the development of reflective practitioners.	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
4.11	Registered nurses with appropriate professional and academic qualifications and teaching experience deliver the nursing modules.	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

5. Assessment

		Midwifery
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
5.2	The selection of assessment techniques assesses achievement of learning outcomes at both module and programme level.	C
5.3	Students are informed about the assessments employed for their programme and about the requirements for progression, including the grading criteria.	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
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
5.6	The assessment strategy for the programme makes clear that compensation between theoretical and clinical practice components is not allowed.	C
5.7	External examiners appointed to the programme are appropriately qualified and experienced.	C

Associated Health Care Provider (AHCP) Requirements

6. Clinical Learning Environments		Midwifery
6.1	The Clinical Learning Environment (CLE) Audit is completed and available for review. (EB & AHCP)	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
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.	C
6.4	The number of preceptors/ associate preceptors/registered nurses in a clinical placement available to students meet the requirements set by NMBI.	C
6.5	Practice based learning is supported by preceptors from the relevant division of nursing or have suitable experience.	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
6.7	Arrangements are in place for protected time to facilitate practice placement assessments by preceptors.	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
6.9	The supernumerary status of the student is explicit for preceptors and students.	C
6.10	Internship practice placements provide experience of the 24-hour care cycle.	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
6.12	All placements, including specialist placements, are completed prior to the commencement of the 36-week internship placement. (EB & AHCP)	C
6.13	Evidence based policies, procedures and guidelines are available to support students in care delivery.	C
6.14	Practice placements implement relevant NMBI professional guidance documents.	C
6.15	Evidence of Clinical Risk management systems are embedded in the maternity service.	C

Commendations

- The education body and its AHCPs are to be commended for their ongoing support of student education and the facilitation of the NMBI site inspection despite a cyber-attack and the ongoing Covid-19 pandemic.
- UHK use the pinnards stereoscope when commencing fetal monitoring to allow student midwives to obtain experience using all methods of fetal monitoring.
- CUMH and UHK are to be commended for the educational opportunities and the support provided to their staff.

Response to Conditions and Current Status

Requirement No.	2.7
Programme Inspection outcome	Non-Compliant
Condition	<p>The condition is that UCC review their midwifery lecturer establishment noting their current undergraduate and post graduate student numbers and address the requirement for there to be one lecturer to 20 undergraduate students.</p> <p>That the ALO establishment is increased, so that there is a ratio of 0.5 WTE to 50 students.</p> <p>That CUMH address their CPC establishment so that there are 1wte CPC to 15 undergraduate student midwives</p>
Updated response	<p>With the appointment of 1 new post in Jan 2023, there are currently 5 WTE Midwifery Lecturers for 104 UG midwifery students. The lecturer/student ratio for undergraduate students is currently 1 lecturer to 20.8 students and 14 HDIM students.</p> <p>CPC and ALO staffing ratios have been confirmed and compliant.</p>
Updated outcome	Fully Compliant

Requirement No.	2.13
Programme Inspection outcome	Non-Compliant
Condition	That public patient and /or service users are appointed to the UCC public advisory panel and are involved in the evaluation of the BSc and Higher Diploma midwifery programmes.
Updated response	The School of Nursing and Midwifery (SoNM) Executive Committee has agreed to fund the development and implementation of a strategy to meaningfully embed PPI in all school endeavours.
Updated outcome	Fully Compliant

Requirement No.	6.3
Programme Inspection outcome	Partially Compliant
Condition	CUMH provide assurance that each student is provided with an allocated preceptor while on practice placements.
Updated response	Students are allocated a preceptor during each clinical placement. Associate preceptors are also named to assist with continuity of learning. The student is allocated on the duty (electronic copy) an allocated preceptor and CPC's follow up on this within the 1st week of placement.
Updated outcome	Fully Compliant

Requirement No.	6.13
Programme Inspection outcome	Partially Compliant
Condition	The AHCP are required to have a plan to update the PPGs that are overdue for to be updated by May 2023. The AHCP are also to ensure that all staff in clinical areas can access PPGs from the Q Pulse system.
Updated response	Ireland South Women's and Infants Directorate (ISWID) has established a Maternity Directorate PPPG committee. ISWID comprises 4 Maternity Units in the SSWHG (CUMH, UHK, TUH and UHW). A review and prioritisation of all PPPGs is currently being undertaken across the Directorate. A new document control system has been developed for the PPPG process of Development, Implementation and Dissemination to have one location for the approved PPPGs across the Maternity Directorate (Q-Pulse).
Updated outcome	Fully Compliant

Requirement No.	6.15
Programme Inspection outcome	Partially Compliant
Condition	That UHK and CUMH develop a programme to ensure that all staff complete their mandatory and emergency skills training by May 2023.
Updated response	As part of the Q-Pulse system ISWID invested in a Trainscan Module whereby all training in CUMH and UHK is recorded and updates the individual profile so that the hospital has an overarching view of training completed. The Centre for Midwifery Education have completed Phase 1 Training Needs Analysis (TNA) for staff in OPD, Antenatal, and Postnatal wards to address further training requirements.
Updated outcome	Fully Compliant

Midwifery Programme Recommendations	Updated Response	Noting
<p>Students would have found it beneficial to 'follow their preceptor' by working a weekend shift or night duty. The HEI and ACHP should try and facilitate that this is requested by the student.</p>	<p>Night duty placement has been facilitated for supernumerary in Birthing Suite, CUMH on a limited, student request basis. Cognisance is taken of the available out- of-hours clinical supports and relevant School policies:</p> <ul style="list-style-type: none"> • Athena Swan Report: Flexible Placement Hours • Weekend and Night Duty Clinical Placement Guidelines for Supernumerary Students • Clinical Practice Placement Guidelines 	<p>Recommendation response accepted</p>
<p>An opportunity should be taken at UCC and UHK to review the signage of their premises and virtual technology to ensure that midwifery is recognised as a distinct profession to nursing in line with the Nurses and Midwives Act 2011, as amended.</p>	<p>Professor Hegarty has escalated the issue to the facilities management function within Brookfield Health Sciences Complex and is envisaging some remedial actions in Summer 2023. Maternity Services, UHK has escalated this issue to the General Manager of UHK to provide signage by Q2-Q3, 2023.</p>	<p>Recommendation response accepted</p>
<p>That UCC consider a neonatal unit and gynaecology placement for undergraduate students in UHK.</p>	<p>Student allocations have begun to UHK NNU and Gynaecology. Cognisance is given to the site acuity and student learning needs. UHK has a Level 2 NNU and CUMH a Level 3 NNU. To achieve learning outcomes students are offered blended placements between CUMH and UHK.</p>	<p>Recommendation response accepted</p>



04

**Post-graduate
Midwifery
Programmes**

Post-graduate Midwifery

PROGRAMME LEADING TO REGISTRATION:	MSc in Midwifery Higher Diploma in Midwifery
ASSOCIATED HEALTHCARE PROVIDER SITES INSPECTED:	University Hospital Kerry 3 May 2022 Cork University Maternity Hospital 4 May 2022

Required Compliance

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

Education body requirements

1. The Respective Educational Providers		H-Dip	MSc
1.1	Educational providers have a Post–Registration Nursing and Midwifery Education Committee/local joint working group, with representatives of the key stakeholders including service users.	C	C
1.2	The staff resource supports the delivery of the education programmes/units of learning at the stated professional, clinical and academic level.	C	C
1.3	Lecturers/tutors are involved in clinical practice and its development	C	C
1.4	The mechanism for learner support in relation to student services, facilities and academic and clinical guidance is explicit. (EB & AHCP)	C	C

2. Programmes/Units of Learning Design and Development		H-Dip	MSc
2.1	Theoretical and clinical learning experiences and the learning environment must support the achievement of the aims and objectives/outcomes of the programmes/ units of learning (EB & AHCP)	C	C
2.2	Programmes/units of learning design and development are led by registered nurse tutors or nurse/midwifery lecturers with a teaching qualification and is supported by academic and clinical experts including inter-disciplinary professionals as appropriate in collaboration with others and is guided by professional nursing/midwifery knowledge which is evidence/research based.	C	C
2.3	The programmes/units of learning development team comprise representative members of key stakeholders in nursing/midwifery education and practice and service users.	C	C

Continued

		H-Dip	MSc
2.4	The programmes/units of learning design reflect various methods of teaching/learning and provides a balance between lectures, tutorials, workshops, small group interactions, demonstrations, practical work/clinical; and self-directed study.	C	C

3. Clinical Practice Experience

		H-Dip	MSc
3.1	Clinical practice experience provides learning opportunities that enable the achievement of competence in clinical nursing/midwifery practice and the stated learning outcomes (EB & AHCP)	C	C
3.2	Clearly written learning outcomes/objectives appropriate to the clinical area are developed and are available to ensure optimal use of valuable clinical experience. These learning outcomes/objectives are revised as necessary.	C	C
3.3	Lecturers and nurse/midwifery tutors, in liaison with the appropriate clinical staff (clinical facilitators, preceptors, clinical managers and practice development co-ordinators) guide and support the learners in ensuring that the clinical placement provides an optimum quality learning environment. (EB & AHCP)	C	C

Commendations

- CUMH and UHK are to be commended for the educational opportunities and the support provided to their staff.
- There is a good working relationship with UCC and AHCP.

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