NMBI Site Inspection
of Nursing and Midwifery
Education Programmes

Monitoring Update Report

South East Technological University (SETU), Waterford

Contents

Introduction

This report is an update of the South East Technological University (SETU), Waterford site inspection report approved by the Nursing and Midwifery Board of Ireland on 29 May 2024. The monitoring update report is based on information provided by SETU in collaboration with their practice partners.

Monitoring Timelines

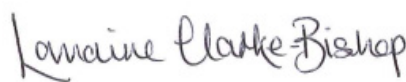|	
Board approval of site inspection report	29 May 2024
Response to conditions received from education body	14 August and 24 October 2024
Follow up correspondence with education body	22 January 2025
Monitoring report published	28 February 2025

Signed:

Carolyn Donohoe
Interim CEO, NMBI

Lorraine Clarke Bishop
Interim Director of Education, Policy and Standards

NAME OF EDUCATION BODY	South East Technological University (SETU), Waterford
HEAD OF SCHOOL	Dr Sara Kennedy

General Nursing

PROGRAMMES LEADING TO REGISTRATION	**BSc General Nursing**
PRACTICE PARTNER SITE INSPECTED	University Hospital Waterford
	Wexford General Hospital
	Waterford Residential Care Centre (Care of Older Persons)
	St Luke's General Hospital, Kilkenny
	UPMC Aut Even Hospital, Kilkenny
	Cahir Primary Care Centre, Tipperary (Public Health – Community)
	Tipperary University Hospital

Intellectual Disability Nursing

PROGRAMMES LEADING TO REGISTRATION	**BSc Intellectual Disability Nursing**
PRACTICE PARTNER SITE INSPECTED	Solas, Killean Resource Centre (Brothers of Charity Services, Waterford) - Day Service
	Sesame Early Years Specialist Day Service, Dungarvan (Pre-school)
	Carriglea Cairde Service- Tus Nua Day Service and Residential Services
	Sacred Heart Centre Early Intervention Services
	Hazelwood House (Brothers of Charity Services Waterford) - Community based retirement home
	Wexford Residential Services: Dawn House
	Wexford Residential Services: Florence House

Mental Health Nursing

PROGRAMMES LEADING TO REGISTRATION	BSc Mental Health Nursing
PRACTICE PARTNER SITE INSPECTED	Waterford/Wexford Mental Health Services:
	The Recovery Hub, Odhran Lodge, St Otterans Hospital (Community rehabilitation services)
	Grangemore, Residential House, St Otterans Hospital
	Department of Psychiatry, University Hospital Waterford
	Wexford Selskar House (Residential, Care of the Older Person)
	Wexford Millview (Residential Care)
	Wexford Havenview (Residential Care)
	Carlow/Kilkenny Mental Health Services:
	Lismore Hostel (Rehab residential care)
	Altamount House (Residential Care)
	Kilkenny Home Based Treatment Team
	St Dympna's Hospital (Carlow Community MHS, Day Hospital, Rehab and Recovery)

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 & PP)	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 & PP)	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
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 practice partners. (EB & PP)	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 practice partners, is submitted to NMBI by 30 June each year. (EB & PP)	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 & PP)	C	P	C
2.8 Teaching and learning resources and facilities support the delivery of the programme.	C	C	C
2.9 A Local Joint Working Group including representatives of the key stakeholders from the education body and practice partners, from acute and community settings, is in operation. (EB & PP)	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 & PP)	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	N/A	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 practice partner operate a fitness to practise mechanism for the protection of the public. (EB & PP)	C	C	C
2.15	The education body and practice partner have processes in place to support students with health problems. (EB & PP)	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 & PP)	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 & PP)	C	C	C
3.3	There are processes in place for students to evaluate and provide feedback on practice placements. (EB & PP)	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 & PP)	C	C	C
3.5	Fair and transparent systems are in place for the allocation of students to practice placements. (EB & PP)	P	P	P
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.	N/A	C	N/A

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
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

Continued

4.12	The curriculum articulates opportunities for intentional, shared, interprofessional learning that is designed to enhance collaborative practice with other health care professionals.	N	N	N

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
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

Practice partner 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 & PP)	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 & PP)	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.	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
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 & PP)	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	C
6.12	All placements, including specialist placements, are completed prior to the commencement of the 36-week internship placement. (EB & PP)	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

Education Body Commendations

Commendations
- The NMBI inspection team would like to acknowledge SETU for their hospitality and welcome received on campus and from their Practice Partners for the duration of the inspection.   - The support structures for the students were explicit and students reported feeling listened to and valued by the faculty. The study advisor was reported to be a useful support as well as the 'peer to peer mentoring' which students found beneficial in helping them to acclimatise to college.   - The 'Try Nursing' programme for TY students is to be commended; many of the students that the inspection team met had been influenced to choose nursing as a career after completing this programme.   - Students appreciated the variety of assessments that were available to them such as the Podcast assessment, the medication management OSCE and the Multiple-Choice Questions.   - The introduction to the new high fidelity simulation suite shows great potential as a learning opportunity for students on all programmes.

Response to Conditions and Current Status

Requirement No.	2.2
Programme inspection outcome	Non-compliant
Condition	Ensure that a periodic quality review is scheduled and submit details to NMBI.
Updated response	Department of Nursing and Health Care have reviewed all programmes through a comprehensive review process referred to as CE3 process. All programmes have been submitted to Academic Council Learning and Teaching Committee in August 2024. A full review of all programmes involved incorporating changes to learning outcomes, indicative outcomes, assessment and reading lists.
Updated outcome	Compliant

Requirement No.	2.9
Programme inspection outcome	Partially compliant
Condition	Review of Terms of Reference, with particular attention to stakeholder attendance from across all the disciplines to ensure that the requirement is met. Include students, patient representatives and members from all clinical partners on the Local Joint Working Group (LJWG).
Updated response	A review of the operational elements of the LJWG has been undertaken since the May 2024 audit. We have reviewed the Terms of Reference and included students, Public Partners, and also subgroups.
Updated outcome	Compliant - evidence sighted

Requirement No.	3.5
Programme inspection outcome	Partially compliant
Condition	Comprehensive review of the layout of clinical placements across each programme to ensure the students have summer holidays for June, July and August in stages one, two and three. Ensure students on the Intellectual Disability nursing programme are not allocated to school practice placement when placement is unavailable during statutory breaks.
Updated response	Department of Nursing and Health Care have reviewed the layout of clinical placements. All students now complete clinical placement by end of May in years 1 and 2. In year 3 the placement is completed by end of June. In year 4 students are on Internship. Further work will be completed on this with the proposed new changes to weeks and experiences underway. Intellectual Disability students will not be allocated to Schools during the holiday period in the future.
Updated outcome	Partially compliant - Students in Stage 3 continue to have placement in June.

Requirement No.	4.5 and 4.8
Programme inspection outcome	Non-compliant
Condition	An updated book of modules across all programmes needs to be submitted by August 2024.
Updated response	Course evaluation (CE3) including all Programmes and Modules review has been completed and approved.
Updated outcome	Compliant – book of modules submitted and reviewed by Professional Officers.

Requirement No.	5.2
Programme inspection outcome	Partially compliant
Condition	An updated book of modules across all programmes needs to be submitted by August 2024.
Updated response	Course evaluation (CE3) including all Programmes and Modules review has been completed and approved.
Updated outcome	Compliant – book of modules submitted and reviewed by Professional Officers.

Requirement No.	4.12
Programme inspection outcome	Non-compliant
Condition	Opportunities for interprofessional and interdisciplinary learning need to be incorporated into the curriculum.
Updated response	New revised Module Descriptors articulate interprofessional and interdisciplinary collaboration. Evidence of PPI has been commended by NMBI in relation to Mental Health Nursing. Interdisciplinary shared learning is in place with cross cover between ID and General programmes happening in year 3. Further opportunities for interdisciplinary learning will evolve and are being planned with Pharmacy and Veterinary as these new programmes are being currently validated.
Updated outcome	Non-compliant

Education Body Recommendations	
Recommendation	
While opportunities to develop teaching and learning skills are available, due consideration needs to be given to the heavy academic workload and the capacity of discipline members to gain from these opportunities. (linked to 2.10)	
Response	
Despite the heavy workload staff are interested and do pursue many of the CPD opportunities provided in SETU. Digital Learning Badges, Micro Credentials, Webinars and Pod Casts have been some of the more popular CPD opportunities which staff availed of.	
Noting	
Recommendation response accepted.	

Education Body Recommendations

Recommendation

Ensure there is personal and public involvement (PPI) in the review and evaluation of the programme. (linked to 2.13)

Response

Evidence of PPI has been demonstrated across the programmes. Some programmes have developed this more than others. Recovery College, Traveller Cultural Awareness, Organ Donation, and many other representatives from minority groups. It is the Department of Nursing and Health Care intention to strengthen and improve these links.

Noting

Recommendation response accepted.

Education Body Recommendations

Recommendation

Following discussion with students and given the geographical spread of placements stretching across counties in the South East, ensure flexibility where possible in the allocation of placement sites to students (i.e. facilitate students from specific areas to be placed within those areas if possible). (linked to 3.5)

Response

Students at SETU are aware of the geographical spread of our clinical placement sites. The priority when placing students is that the student gains the specific experience required to ensure compliance with the Requirements and Standards. We then consider the geographical location. We do this by asking students where would suit them and attempting to meet the students request. We also enquire about specific accommodations that students may need on placement and how to meet their needs. There are many reasons why a student should experience a placement in a different location such as providing students with an opportunity to move hospital and experience the benefits of change in acuity, staff and culture. We endeavour while on placement to ensure a fair rotation of clinical experiences and sites to also meet staffing support ratios. For example, another consideration is having equal quota of students are rotated through each service this means that staff are experienced with a fair an even distribution of students. If this was not done one area could have an over allocation while another area would not have any students. There are many and complex reasons in the allocation of students and obviously the student experience is central but not the only consideration. During internship, all students express preference in each discipline and rank their preference in order of choice 1, 2 or 3. Every reasonable effort is made to ensure that all requests are met.

Noting

Recommendation response accepted.

Education Body Recommendations

Recommendation

The Code of Professional Conduct and Ethics (NMBI 2021) needs to be embedded throughout the modules each year. (linked 4.7)

Response

The Code of Professional Conduct and Ethics NMBI (2021) have been specifically referred to throughout the programme review. They are now included as indicative content in the book of modules submitted to the Nursing Board for consideration and included where relevant in all module descriptors.

Noting

Recommendation response accepted.

Education Body Recommendations

Recommendation

While the nursing clinical skills logbook appears like a good idea, it is unclear of the purpose of this with students placing little value on it as it is unchecked/unmarked by SETU. Review the use of this booklet and how it can be retained in a more meaningful manner.

Response

The Clinical Skills Logbook is a highly valued tool for learning. It focuses the student, the preceptor and the academic staff on skill acquisition and opportunity. This book is used and examined before OSCE examinations and if it is not completed the student is not permitted to complete the assessment. The use and making this logbook more integrated across modules will be considered by our Teaching and Education Committee.

Noting

Recommendation response accepted.

General Nursing Programme

PROGRAMME LEADING TO REGISTRATION:	BSc General Nursing
PRACTICE PARTNER SITES INSPECTED:	**22 February 2024**
	University Hospital Waterford
	Wexford General Hospital
	Waterford Residential Care Centre (Care of Older Persons)
	23 February 2024
	St Luke's General Hospital, Kilkenny
	UPMC Aut Even Hospital, Kilkenny
	Cahir Primary Care Centre, Tipperary (Public Health – Community)
	Tipperary University Hospital

General Programme Commendations

Commendations
• The inspection team commend the culture of practice learning at all practice placement sites, students expressed how they felt welcomed and valued as part of the nursing team. The high level of preceptorship rates and support from highly motivated Clinical Placement Co-ordinators (CPCs) and Clinical Skills Facilitators play a significant part in providing a quality learning environment.
• Reflective hours were explicit and intern-facilitated reflection was welcomed, additionally, students liked the reflective journals developed for them.
• The students welcomed the development of the 'Enabling Framework' and spoke of how it enhanced their learning.
• Quality initiatives focused on student learning are commendable (e.g. Preceptor of the Year Award and the Clinical Learning Environment of the Year Award).
• The ongoing Continuing Professional Development (CPD) training, at University Hospital Waterford which includes simulation training for all nursing staff and students enabled by the Clinical Skills Facilitators is commended.
• The Career Pathway at the University Hospital Waterford is welcomed by graduates and highlighted as a positive initiative.
• Good demonstration of interprofessional learning and collaboration at St. Luke's e.g. Care Ceiling in Palliative care.
• Students at Wexford General Hospital had a strong sense of belonging within the organisation and were encouraged to participate in a variety of hospital committees by staff members.

Continued

Commendations
• The student forum facilitated by Directors of Nursing at both Wexford General Hospital and St. Luke's Hospital sites provided a positive opportunity for students to engage with senior management/staff.
• The approach to reflective practice at Tipperary University Hospital was impressive, the team noted that it was well-emphasised and implemented.

Response to Conditions and Current Status

General Nursing Programme Recommendations
Recommendation
Continue to ensure that there are sufficient academic staff numbers for the General programme to meet the ratio of academic staff 1:20 as per the requirement (linked to 2.7).
Response
New appointments have been made in two programmes (General BSc Nursing Programme).
Noting
Recommendation response accepted.

General Nursing Programme Recommendations
Recommendation
Discontinue the use of the "Aut Even Hospital Learning Outcomes booklet" and only use the approved National Competency Assessment Document (NCAD). (UPMC Aut Even Hospital) (linked to 6.8)
Response
The Aut Even Learning Outcomes was submitted in error and the updated booklet is in use.
Noting
Recommendation response accepted.

Intellectual Disability Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc Intellectual Disability Nursing
PRACTICE PARTNER SITES INSPECTED:	**22 February 2024**
	Solas, Killean Resource Centre (Brothers of Charity Services, Waterford) - Day Service
	Sesame Early Years Specialist Day Service, Dungarvan (Pre-school)
	Carriglea Cairde Service- Tus Nua Day Service and Residential Services
	23 February 2024
	Sacred Heart Centre Early Intervention Services
	Hazelwood House (Brothers of Charity Services Waterford) - Community based retirement home
	Wexford Residential Services: Dawn House
	Wexford Residential Services: Florence House

Intellectual Disability Programme Commendations

Commendations
• The NMBI inspection team would like to acknowledge SETU for their hospitality and welcome on campus and from their Practice Partners for the duration of the inspection. In particular, the inspection team would like to thank the individuals who permitted inspection of their homes, early intervention services and day services.
• In SETU, practice skills are well developed and applicable to practice as indicated by students. The new simulation suite is an exciting development and will be of benefit to the discipline when operational.
• Student support from Clinical Placement Co-ordinators (CPCs) during clinical placement is excellent, the relationship between the CPCs and students is to be commended, with CPCs available by phone or face to face regularly, irrespective of the location of placement.
• The preceptorship model is good, demonstrated by staff who are knowledgeable, with a positive attitude to student learning and preceptorship training up to date.
• In Killean Resource Centre/Solas the student undertook an innovative presentation on 'Eye gaze' and the development and implementation of this technology for a particular individual. This described the theory and practice of technology use.
• Sesame Early Years Specialist Day Service site offers great learning opportunities across the early developmental stages and is a positive learning environment of integrated mainstream and specialist Early Intervention services.
• Hazelwood, Dawn House and Florence House provide learning opportunities with exposure to complex care practices and environments with continually changing needs.

Response to Conditions and Current Status

Requirement No.	2.1
Programme inspection outcome	Partially compliant
Condition	Ensure that all MOUs are signed by the Chief Officer for the community area.
Updated response	This has since been rectified and going forward the CEO or equivalent will sign MOU's with SETU.
Updated outcome	Compliant

Requirement No.	2.7
Programme inspection outcome	Partially compliant
Condition	Ensure that there is a Nurse Practice Development Co-ordinator for Intellectual Disability nursing.
Updated response	The requisition for Nurse Practice Development Coordinator has been submitted to the HSE and is progress.
Updated outcome	Partially compliant

Intellectual Disability Nursing Programme Recommendations
Recommendation
Explore potential to develop Erasmus for Intellectual Disability nursing students. (linked to 2.12)
Response
Currently two staff are planning on participating in an exploratory trip to evaluate and Erasmus placement in Linz Austria and Malta. Students from year 3 BSc in Intellectual Disability will attend University of Linz in May for a preliminary visit. The theme of this placement is Diversity and Social Inclusion. Once this placement is assessed, it will be available following notification to the Nursing Board.
Noting
Recommendation response accepted.

Intellectual Disability Nursing Programme Recommendations

Recommendation

While there are mechanisms in place for student evaluations on practice placement and are completed by students, it is unclear how the feedback loop is maintained and how cohorts of students know there has been a response to concerns. Consideration should be given to how this loop can be completed. (linked to 3.3)

Response

The feedback loop for student evaluation involves written communication or verbal feedback to the student/placement/CPC and College in relation to any issue that is highlighted and requires an action. The CPC develops a QIP and informs all parties of the outcome this feedback has been strengthened since the audit.

Noting

Recommendation response accepted.

Intellectual Disability Nursing Programme Recommendations

Recommendation

Learning outcomes have been recently redeveloped, there should be a maximum of five per placement site making these more achievable. (linked to 6.2)

Response

All learning outcomes have been reviewed following the nursing board audit. Each site has no more than five learning outcomes.

Noting

Recommendation response accepted.

Intellectual Disability Nursing Programme Recommendations

Recommendation

Consider new ways to facilitate Reflective practice for stage 4 students. Internship students currently have no link (aside from assessment related) with SETU and this would enhance that relationship until the completion of the programme. e.g. A structured reflective practice between practice staff and academic colleagues. (linked to 6.11)

Response

As part of the Knowledge, Science, Values and Attitudes, Skills and Experience (KSVSE) module students are allocated a supervisor. This role involves reflecting on an area of practice and supporting an innovation in practice. In addition, all students attend SETU and part of this time is set aside for specific opportunities for reflection with academic staff. When academic staff visit clinical sites one to one opportunities to reflect with students are available.

Noting

Recommendation response accepted.

Mental Health Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc Mental Health Nursing
PRACTICE PARTNER SITES INSPECTED:	**22 February 2024** Waterford/Wexford Mental Health Services:
	The Recovery Hub, Odhran Lodge, St Otterans Hospital (Community Rehabilitation services)
	Grangemore, Residential House, St Otterans Hospital
	Department of Psychiatry, University Hospital Waterford
	Wexford Selskar House (Residential, Care of the Older Person)
	Wexford Millview (Residential Care)
	Wexford Havenview (Residential Care)
	23 February 2024 Carlow/Kilkenny Mental Health Services:
	Lismore Hostel (Rehab residential care)
	Altamount House (Residential Care)
	Kilkenny Home Based Treatment Team
	St Dympna's Hospital (Carlow Community MHS, Day Hospital, Rehab and Recovery)

Mental Health Programme Commendations

Commendations
• The collaboration between the NPDCs across the sites is exemplary and impacts positively on the student learning experience. • The practice placement sites provided a supportive learning environment with a variety of learning opportunities for student engagement. • High level of preceptorship training. • Students have more opportunities to work with some of the Advanced Nurse practitioners across the services, which will permit them access to their clinical expertise. • The clinical partners demonstrated how they are actively recruiting the newly qualified staff and acknowledged new graduates' desire to travel – by offering career breaks to attract them back following overseas experience. • The students found the case-based reflection facilitated by the CPCs particularly effective. • The Practice Development Nurses with clinical staff in partnership with the Regional Centres for Nursing and Midwifery Education (RCNME) South East have developed a suite of Continuing Professional Development (CPD) of short programmes that is responsive to the clinical staff's learning needs.

Continued

Commendations

- The link with the local recovery colleges /local community services (Waterford Healing Arts/ Mental Health Ireland) was exemplary and demonstrated a close partnership with the recovery college.
- Co-production projects such as the "Telling Tales"and "Ceramic work" a collaborative artwork to mark World Mental Health Day in Waterford/Wexford Mental Health Services are commendable.
- Great cohesion and collaboration are evident between the two practice development nurses which in turn provides consistency across all the services for the students' learning. An example of this is the medication record.
- The Medication Workshop is a collaborative initiative with faculty, clinical staff, students and PPI (personal and public involvement) is commendable and was mentioned by every student the inspection team met.
- Initiatives such as the Preceptorship Awards, signposting of the named preceptors and co-preceptors on the unit for students, the introduction of new student resource folders and student orientation booklet for enhanced student support are commendable along with the Unified Nurse Practice Development Strategy (MAPS policy portal).

Response to Conditions and Current Status

Mental Health Nursing Programme Recommendations

Recommendation

Continue to ensure that there are sufficient academic staff numbers for the Mental Health programme to meet the ratio of academic staff 1:20 as per the requirement (linked to 2.7).

Response

New staff member in Mental Health team has started.

Noting

Recommendation response accepted.

Mental Health Nursing Programme Recommendations

Recommendation

Consider the development of postgraduate education in SETU to provide access for clinical partners in the region.

Response

This is ongoing as we have two MSc programmes in Mental Health.

Noting

Recommendation response noted.

Mental Health Nursing Programme Recommendations

Recommendation

Strengthen the link lecturer role to focus on both the student and clinical staff.

Response

This is in progress.

Noting

Recommendation response noted.

Mental Health Nursing Programme Recommendations

Recommendation

Consider the sequencing of the theory modules for the introduction of Psychiatric Medication in stage one and early exposure to recovery and social isolation and delay the modules on physical illnesses and medication to stage 2 or stage 3.

Response

Medication and Pharmacology starts in year one with all nursing programmes, ensuring early exposure to regulation of medication management.

Strong modules on Social Inclusion and Recovery in year 3 presently. Will be reviewed with new changes in curriculum.

Noting

Recommendation response noted.

Mental Health Nursing Programme Recommendations

Recommendation

It is suggested that the word 'psychiatry' be removed from documentation as it is a medical discipline and the correct terms of Psychiatric Nursing or Mental Health Nursing be used.

Response

This will happen over the coming year.

Noting

Recommendation response noted.

Bord Altranais agus
Cnáimhseachais na hÉireann

Nursing and Midwifery
Board of Ireland