

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

Monitoring Update Report

**Technological University of the Shannon,
Athlone (TUS)**



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

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Introduction

This report is an update of the Technological University of the Shannon, Athlone (TUS) site inspection report approved by the Nursing and Midwifery Board of Ireland on 22 March 2023. The monitoring update report is based on information provided by TUS in collaboration with their practice partners.


Monitoring Timelines

Board approval of site inspection report	22 March 2023
Response to conditions received from education body	31 October and 30 November 2023
Follow up meeting with education body	17 January 2024
Monitoring report published	30 January 2024

Signed:



Sheila McClelland
NMBI CEO



Carolyn Donohoe
Director of Education, Policy and
Standards, NMBI



01

**Nurse
Education
Programmes**

NAME OF EDUCATION BODY	Technological University of the Shannon, Athlone
HEAD OF NURSING/MIDWIFERY	Dr Desmond Cawley
NMBI INSPECTION LEAD	Mary Devane

General Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in General Nursing
PRACTICE PARTNER SITES INSPECTED:	Midlands Regional Hospital, Tullamore Tullamore Primary Care Centre Midlands Regional Hospital, Portlaoise Midlands Regional Hospital, Mullingar Cluin Lir, Community Nursing Unit, Mullingar

Mental Health Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in Mental Health Nursing
PRACTICE PARTNER SITES INSPECTED:	Longford/Westmeath Mental Health Services Laois/Offaly Mental Health Services An Trui Aois, Portlaoise

Required Compliance

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

Education body requirements

1. Student Admission and Progression		General	Mental Health
1.1	Clear and comprehensive information about the programme is available for prospective students.	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
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
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
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
1.6	Learning supports including reasonable accommodations are available to students who require them. (EB & PP)	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
1.8	Procedures for a student exiting a programme before completion are explicit, including exit awards if appropriate.	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
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

2. Governance and Management

		General	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
2.2	The school of nursing/department and individual programmes are subject to periodic quality reviews.	C	C
2.3	Programmes are subject to annual monitoring through the external examiners process.	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
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
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
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	N
2.8	Teaching and learning resources and facilities support the delivery of the programme.	C	C
2.9	A Local Joint Working Group including representatives of the key stakeholders from the education body and practice partner, from acute and community settings, is in operation. (EB & PP)	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
2.11	Formal grievance, complaints, and appeals policies are available and made known to students.	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
2.13	There is public and patient involvement in the review and evaluation of programmes by the education body.	N	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
2.15	The education body and practice partner have processes in place to support students with health problems. (EB & PP)	C	C

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

Programme requirements

4. Curriculum		General	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
4.2	The programme meets the requirements of the relevant award on the National Framework of Qualifications (NFQ).	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
4.4	The curriculum model chosen is dynamic, flexible, and evidence-based and utilises a range of teaching and learning strategies.	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

Continued

		General	Mental Health
4.6	Clinical placements are integral to the programme.	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
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
4.9	The curriculum demonstrates a balance between theory and practice leading to the development of reflective practitioners.	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
4.11	Registered nurses with appropriate professional and academic qualifications and teaching experience deliver the nursing modules.	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.	P	P

5. Assessment

		General	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
5.2	The selection of assessment techniques assesses achievement of learning outcomes at both module and programme level.	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
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
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
5.6	The assessment strategy for the programme makes clear that compensation between theoretical and clinical practice components is not allowed.	C	C
5.7	External examiners appointed to the programme are appropriately qualified and experienced.	C	C

Practice Partner (PP) Requirements

6. Clinical Learning Environments		General	Mental Health
6.1	The Clinical Learning Environment (CLE) Audit is completed and available for review. (EB & PP)	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
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
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
6.5	Practice based learning is supported by preceptors from the relevant division of nursing or have suitable experience.	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
6.7	Arrangements are in place for protected time to facilitate practice placement assessments by preceptors.	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
6.9	The supernumerary status of the student is explicit for preceptors and students.	C	C
6.10	Internship practice placements provide experience of the 24-hour care cycle.	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
6.12	All placements, including specialist placements, are completed prior to the commencement of the 36-week internship placement. (EB & PP)	C	C
6.13	Evidence based policies, procedures and guidelines are available to support students in care delivery.	C	C
6.14	Practice placements implement relevant NMBI professional guidance documents.	C	C

Monitoring Update

Education Body Commendations

- The President was very welcoming of the team, and it was evident that the nursing department is well-positioned and recognised as a valued member of the wider TUS community.
- The governance structures demonstrated a significant commitment to the development of nursing in TUS, including support both financially and in time allocation for candidate PhDs to complete their programme.
- Strategy for senior role career progression for the newly developed university with support from NMPDU funding of 2 post-doctoral and a research assistance post will contribute positively to academic development within the school.

Education Body Organisational Recommendation

Recommendation	Response	Noting
Explore opportunities for shared interprofessional learning considering engineering, dental nursing, biochemistry and pharmaceutical technicians also studying at the same education body. (Linked to 4.12 Partial Compliance).	This will be reviewed in this academic year, through programme boards and where possible shared learning opportunities with other disciplines will be implemented. An example of this might be modules such as Psychology and Communication which are core to all Nursing and Dental Nursing curricula.	Recommendation response accepted – Partial compliant with an update requested in Annual Report
Learning outcomes require further development and to be reduced in number. The learning outcomes should be developed in collaboration with the academic staff from TUS and should use a recognised format, e.g., SMART, to ensure they are measurable and achievable (Linked to 6.2 Partial Compliance).	The Documentation Assessment Working Group (DAWG) have addressed this point and collaborative work is ongoing in development between the team in TUS and Associated Health Care Providers (Practice partners). Evidence provided of how site- specific learning outcomes have been refined in line with this recommendation. This process will be replicated across all sites in this and subsequent academic years.	Recommendation response accepted – compliant

Education Body Organisational Recommendation		
Recommendation	Response	Noting
Very positive reception to increasing student exposure to primary care and increasing the number of students across primary care sites; we recommend that TUS explores these opportunities.	Agree and will continue to work closely with our placement colleagues to explore further opportunities to include placements in health promotion, school settings, social care and NGO's. Increased exposure to primary care will require additional staff resources e.g. CPCs to support increasing student numbers.	Recommendation response accepted
There is a great opportunity to develop a strong suite of postgraduate courses to suit the regional partners. The stakeholders are all very engaged and willing to contribute.	There is a suite of Postgraduate Programmes provided by TUS, and further development is ongoing. In 2023 in conjunction with HSE colleagues regionally and nationally, the department developed a MSc in Digital Health.	Recommendation response accepted
Consider adjunct appointments for clinical staff to contribute to teaching and learning and to facilitate the involvement of CNSs and ANPs in research support.	Currently the appointment of adjunct clinical staff is not an option at TUS. However, the University and Department have significant input as guest lecturers from Advanced Nurse Practitioner's (ANP's) and Clinical Nurse Specialist's (CNS's). A detailed list of these sessions from 2021 and 2022 were previously submitted to the NMBI.	Recommendation response accepted

General Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in General Nursing
PRACTICE PARTNER SITES INSPECTED:	<p>Midlands Regional Hospital, Tullamore 1 December 2022</p> <p>Tullamore Primary Care Centre 1 December 2022</p> <p>Midlands Regional Hospital, Portlaoise 2 December 2022</p> <p>Regional Hospital, Mullingar 2 December 2022</p> <p>Cluin Lir, Community Nursing Unit, Mullingar 2 December 2022</p>

Commendations

- NMBI would like to extend huge gratitude to the nursing faculty at TUS for the warm and hospitable welcome to the inspection team.
- The role of Programme Lead is very beneficial to aid the student feedback mechanism and is to be commended.
- The lecturers demonstrated a strong commitment to nurse education and research and development of evidence to inform the profession.
- The 'open door' approach from the lecturers to students is highly commended. The students are supported and nurtured throughout their education preparation.
- There was strong evidence of mutual respect between the learners and educators, and this is to be commended.
- There was collaborative communication between TUS and the practice placement sites.
- Innovative teaching strategies such as simulation and case studies are to be commended and were well received by students.
- Assessment scheduling was considerate of student workload.
- CPCs were viewed as very approachable and supportive to students at all placement sites.

MRH Tullamore

- NMBI commends the quality initiatives evidenced at the placement sites (e.g., Telemetry throughout the hospital, frailty intervention team (FIT) in ED with patient streaming directly to Geriatric Hub in OPD, deteriorating patient committee, designated frailty ward is to be commended.
- A strong focus on a culture of learning, quality improvement, innovation and research.
- The emphasis on staff health and well-being is to be commended.
- Senior nurse management are proactive in succession planning involving the mentorship and promotion of staff nurses to CNM 2 grades across the hospital.

RH Mullingar

- The high number of quality initiatives to be commended, e.g. Stroke service: pitstop/thrombolysis pathway, paediatric, diabetes new service developed.
- The championing of staff health and well-being at practice placements is to be acknowledged.
- Annual training needs analysis has identified plans for a skills training lab on-site to support CPD.

MRH Portlaoise

- Excellent leadership in providing a stable nursing workforce with a hospital-wide focus on filling all vacancies to support the delivery of quality nursing care.
- Great example of shared care management of children attending the oncology/haematology ward in collaboration with CHI @ Crumlin.
- Strong emphasis on continuous professional development for staff in the hospital, providing access to short courses up to full academic programmes.

Cluain Lir Community Nursing Unit

- The commitment of the Director of Nursing and staff to student learning is to be commended.
- The number of trained preceptors available for student learning enables high levels of one-on-one quality supervision.
- The quality of care being modelled to the students was wonderful to see.

Tullamore Primary Care Centre

- Wide geographic area covered providing excellent opportunities for students to learn.
- Strong culture of continued professional development fostered within the health centre by management.
- Great examples of quality improvement initiatives with integrated nursing teams of Public Health Nurses, Community RGNs, ANPs and CNSs working together resulting in true person-centred care.

Response to Conditions and Current Status

Requirement No.	2.13
Programme Inspection outcome	Non-Compliant
Condition	The education body to ensure that there is public and patient representation in the review and evaluation of programmes.
Updated response	Despite requests to patient organisations since 2020 we have been unsuccessful in securing patient/ public representation on the LJWG. We will continue to engage with patient representation bodies to meet this condition in this academic year (2023/24).
Updated outcome	Non-Compliant – work is ongoing, update to be provided in the Annual Report

General Programme Recommendations		
Recommendation	Updated Response	Noting
The link lecturer, student, and Clinical Nurse Manager/Preceptor are included in the completion of the clinical learning environment audit. (Linked to 3.1 and 6.1 Partial Compliance).	Link lecturers are provided with copies of the Educational Audits of Clinical Learning Environment to which they are link lecturers. Nurse tutor employed as clinical skills coordinator conducts the clinical audits.	Recommendation response accepted – compliant
Explore opportunities for shared interprofessional learning considering engineering, dental nursing, biochemistry and pharmaceutical technicians also studying at the same education body. (Linked to 4.12 Partial Compliance).	This will be reviewed in this academic year, through programme boards and where possible shared learning opportunities with other disciplines will be implemented. An example of this might be modules such as Psychology and Communication which are core to all Nursing and Dental Nursing curricula.	Recommendation response accepted – partially compliant with an update in AR
The education body to explore further arrangements for Erasmus and international host institutions. (Linked to 2.12).	This is ongoing. The First Erasmus plus visit took place in February 2023 with 15 second year nursing students visiting from HAMK University and Associated Health Care providers in Finland. Third year students participated in the Student Mobility Programme with HAMK Finland and NHL Stenden Netherlands as part of the Regional Universities Network (RUN) in April 2023.	Recommendation response accepted – compliant
Students are currently using the TMS system in addition to recording attendance manually. We would recommend that a single system is chosen for students. (Linked to 1.4).	This has been addressed at our Documentation Working Group. In the interim period, students will manually record their attendance until all placement sites can be afforded equity in using the TMS system to support student attendance.	Recommendation response accepted
NMBI suggests that there is student representation on committees such as documentation and/or internship committees that report to the local joint working group. (Linked to 2.9).	It has been agreed that student representatives' will be invited to all working groups and student representation has been updated in the Terms of Reference for each group.	Recommendation response accepted

Recommendation	Updated Response	Noting
Ensure students are aware of the formal grievance, complaints, and appeals policies. (Linked to 2.11).	This is included in the TUS student handbook available to all students and is included in the student's induction pack.	Recommendation response accepted
The process of student evaluation of practice placement should be streamlined and explicit. (Linked to 3.3).	This is currently a paper-based process and TUS in consultation with PPs will explore the options of online completion through Microsoft encrypted platforms such as Microsoft forms through Virtual Learning Environment.	Recommendation response accepted
The education body should ensure there is a standardised approach to reflection across practice placement sites (Linked to 6.11).	The Reflective Practice Policy previously submitted the NMBI articulates a standard approach to reflection. All placement sites have received updates on this policy since the start of this academic year.	Recommendation response accepted
1 st -3 rd year students complete four short days, consider having a flexible approach to students working long days to improve opportunities to work with a preceptor and expose the student to the evening work practice environment (all clinical sites).	All students from this academic year onwards will be afforded the opportunity to undertake long days where appropriate.	Recommendation response accepted
Consider optimising placement opportunities for students in various areas (e.g., endoscopy, interventional radiology/CT, MAU/AMAU).	From January 2023 to date, 20 sites have been approved including rapid access clinics, minor injuries clinics, endoscopy and emergency departments. It is envisaged that students will be exposed to interventional radiology in UPMC sites in the future.	Recommendation response accepted
Very positive reception to increasing student exposure to primary care and increasing the number of students across primary care sites; we recommend that TUS explores these opportunities.	Agree and will continue to work closely with our clinical colleagues to explore further opportunities. including placements in health promotion, school settings, social care and NGO's.	Recommendation response accepted

Mental Health Nursing

PROGRAMME LEADING TO REGISTRATION:	BSc (Hons) in Mental Health Nursing
PRACTICE PARTNER SITES INSPECTED:	<p>Longford/Westmeath Mental Health Services: Admissions Unit, St Loman's Mullingar 1 December 2022</p> <p>Laois/Offaly Mental Health Services: Triogue Community MHC, Portlaoise 2 December 2022</p> <p>An Trui Aois, Portlaoise 2 December 2022</p>

Commendations

- The NMBI team appreciated the warm welcome and hospitality received from TUS and the practice placements visited.
- Students expressed feeling very supported by the two exceptional CPCs and their lecturers.
- Student representatives that met with the NMBI team in TUS showed exemplary professionalism and integrity, which is reflective of the teaching and learning received from the clinical partners and lecturers.
- The NMBI team acknowledges the student involvement in research group activities displayed in the nursing building.
- Great demonstration of leadership from ADONs in St. Loman's, leading an innovative and quality initiative clinical area with staff involvement, e.g., staff quiet area and library.
- Practice placement sites provide a very supportive learning environment with a variety of learning opportunities for student engagement.
- There was evidence of nurse-led initiatives displayed on posters throughout the learning environment in Portlaoise.

Response to Conditions and Current Status

Requirement No.	2.7
Programme Inspection outcome	Non-Compliant
Condition	One WTE CPC is required to meet programme standards. One WTE SALO is required specifically for the mental health programme.
Updated response	The Head of Department of Nursing and Healthcare TUS and the Area Director of Nursing Midlands Louth Meath Mental Health Service Community Healthcare Organisation, CHO8, have communicated with the Office of the Nursing and Midwifery Services Director (ONMSD) on the requirement for these positions for the BSc (Hons.) in Mental Health Nursing programme. This matter has been included with this years' service plan proposal.
Updated outcome	Non-Compliant

Requirement No.	3.5
Programme Inspection outcome	Partially Compliant
Condition	Students are to get an acute placement within the first two years of the programme.
Updated response	This point has been actioned in this academic year (2023/24) with all first- and second-year students receiving placement in acute sites
Updated outcome	Compliant

Mental Health Programme Recommendations

Recommendation	Updated Response	Noting
Review the established feedback/evaluation processes on practice placements to allow for more anonymous responses and ensure openness. Greater transparency on how feedback is actioned between academic and clinical areas would be welcomed (Linked to 3.3 Partial Compliance)	This is currently a paper-based process and TUS in consultation with PPs will explore the options of online completion through Microsoft encrypted platforms such as Microsoft forms through Virtual Learning Environment.	Recommendation response accepted - compliant

Recommendation	Updated Response	Noting
St. Loman's reported not always being kept abreast of new student developments. The example provided during the site inspection was venepuncture. St. Loman's expressed that they would welcome measures to improve communication between TUS and the clinical sites. (Linked to 4.12 Partial Compliance).	Nurse Practice Development Coordinator for Mental Health Services has provided assurance that all sites are informed of and are updated on student developments in line with agreed mechanisms of communications. St Loman's has assigned link lecturer who provides support to the clinical area through regular in person and online meetings with CPC and preceptors.	Recommendation response accepted
Mental health students to have representation in the local Joint working group, internship group and documentation and assessment group (Linked to 2.9).	It has been agreed that student representatives' will be invited to all working groups and student representation has been updated in the Terms of Reference for each group.	Recommendation response accepted
Consider a member of St Loman's staff being included on the LJWG to improve the working partnership between the EB and St Loman's. (Linked to 2.9).	The positions of Area Director of Nursing Midlands Louth Meath Mental Health Service Community Healthcare Organisation CHO8 and Nurse Practice Development Coordinator Mental Health Services hold ex officio membership of the Local Joint Working Group. These positions represent staff in the Mental Health Services used for clinical placements within CHO Area 8 (Laois, Offaly Longford, Westmeath) including St Loman's staff.	Recommendation response accepted
The education body to explore further arrangements for Erasmus and international host institutions. (Linked to 2.12).	This is ongoing. The First Erasmus and visit took place in February 2023 with 15 second year nursing students visiting from HAMK University and Associated Health Care providers in Finland. Third year students participated in the Student Mobility Programme with HAMK Finland, NHL Stenden Netherlands as part of the Regional Universities Network (RUN).	Recommendation response accepted

Recommendation	Updated Response	Noting
The practice partners suggested that interns be placed in community settings. This could allow more supernumerary students in acute settings (Linked to 3.5).	As outlined in 3.5 above this point has been actioned since the NMBI site visit for supernumerary students and discussion are on-going with the Director of Nursing regarding the placement of Interns in Community Settings.	Recommendation response accepted
Clinical Learning Environment (CLE) Audit process requires review. Need for transparency in the clinical audit process between academic and clinical partners (Linked to 6.1).	The audit process is currently conducted in collaboration between TUS and PP. Those involved in the audit are NPDC or designated person from the PP, TUS designated person, CNM, and nursing student. The audit reports are signed by relevant stakeholders and available for inspection on the clinical sites and in TUS.	Recommendation response accepted
On discussion with CPCs, re-introducing the Clinical Academic Sub-group would be welcomed.	Full review of LJWG and sub committees will be completed in this academic year to ensure all updates from NMBI inspection are completed – this is an agenda item for LJWG November 2023.	Recommendation response accepted



02

**Post-graduate
Nursing
Programmes**

POST-GRADUATE PROGRAMMES – Reapproval		
MSc Master of Science (90 ECTS)	PGDip Post Graduate Diploma (60 ECTS)	PGCert Post Graduate Certificate (30 ECTS)
Nursing in Leadership and Quality Healthcare (MSc, PGDip, PGCert)		
Emergency Nursing (Level 8 Certificate – 20 ECTS)		

EDUCATION BODY INSPECTION	Technological University of the Shannon, Athlone Onsite Inspection 29 and 30 November
PRACTICE PARTNER SITES INSPECTED:	Midlands Regional Hospital, Tullamore 1 December 2022 Tullamore Primary Care Unit 1 December 2022 Midlands Regional Hospital, Portlaoise 2 December 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.	P
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 & PP)	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 & PP)	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

Practice Partner (PP) 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 & PP)	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.	P
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 & PP)	P

Commendations

- The NMBI team wish to acknowledge and thank the TUS team for the work and preparation conducted prior to and during the site inspection process.
- The strong focus on supporting and developing staff research journeys is to be commended.
- It should be recognised that 12-15 staff members have completed or are completing their PhD. The President award programme to support this completion is to be commended.
- There are well-developed core modules on the master's programme in Leadership which can be used as the foundation for developing additional programmes.

Response to Conditions and Current Status

Requirement No.	1.1
Programme Inspection outcome	Non-Compliant
Condition	TUS to establish a post-registration education committee/local joint working group with practice partners to identify research opportunities and priorities for developing post-graduate curricula.
Updated response	A post-registration education committee/local joint working group is currently being established with Terms of Reference to be agreed. Its initial remit will be the ED programme but in line with NMBI feedback, this remit will expand to additional post graduate programmes and research priorities. It is important to note that, in this academic year, the NMPDU Midlands and TUS Athlone have signed a Service Level Agreement to develop one research assistant and two post-doc posts under the Innovation Funding stream.
Updated outcome	Partially compliant – update to be provided in Annual Report

Post-graduate Programme Recommendations	Updated Response	Noting
The involvement of lecturers and tutors in clinical practice and its development would be welcomed. (Linked to 1.3 Partial Compliance)	Close working relationships are in place and promoted through collaboration between link lectures and ED clinical skills facilitators in the delivery of the Certificate in Emergency Nursing programme.	Recommendation response accepted – Compliant
There is a need to establish curriculum teams to support the development and delivery of post-graduate programmes. (Linked to 2.3 Partial Compliance)	Currently the ED programme curriculum team consists of academic staff, clinical facilitators, expert practitioners and Nurse Practice Development Co-Ordinators. This model will be adapted for the development of future post graduate programmes.	Recommendation response accepted – Compliant
The site visit coincides with a timely opportunity to enhance existing postgraduate courses with updated and reusable teaching materials. All parties were excited about opportunities to explore this further. (Linked to 3.2 and 3.3)	We welcome this recommendation and work is ongoing to explore these opportunities.	Recommendation response accepted – Partially Compliant

Post-graduate Programme Recommendations	Updated Response	Noting
It is recommended that TUS explore career progression opportunities for faculty; this will encourage future research growth within the education body.	<p>TUS currently affords its staff the opportunity to:</p> <ol style="list-style-type: none"> 1. Undertake doctoral preparation with an enhanced support scheme for staff on this pathway. 2. Doctorally prepared staff have the opportunity to apply for research seed funding from the President's' Office and/or buy out time from teaching and administrative activities to develop research initiatives. <p>With regard to Point 1, there are four members of staff in receipt of funding for this initiative and three members of staff in receipt of funding in this academic year in relation to Point 2.</p>	Recommendation response accepted
Clinical research pathways need to be developed for example as outlined in the Future of Nursing Report 2020-2030.	The department has worked closely with the National Chief Nursing and Midwifery Information Officer in collaboration with the NMPDU regionally to progress research initiatives in the digital health pathway in line with the Future of Nursing Report 2020-2030. This has culminated with the appointment of two post-docs in this field.	Recommendation response accepted
Consider the inclusion/ involvement of CNS in ANP forums.	Expert input from CNSs and ANPs is pivotal in the delivery of the post graduate suite of programmes offered by TUS.	Recommendation response accepted
There is a significant opportunity to explore the development of a Postgraduate Diploma in Emergency Nursing with the three clinical partners.	This will be included for discussion as part of the remit of the post-registration education committee/local joint working group.	Recommendation response accepted

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