



CENTRAL MANCHESTER UNIVERSITY HOSPITALS NHS FOUNDATION TRUST

MULTI-PROFESSIONAL EDUCATIONAL AUDIT AND MONITORING TOOL IMPLEMENTATION WITHIN A LARGE NHS ACUTE FOUNDATION TRUST

SUMMARY

During 2012 **Central Manchester University Hospitals NHS Foundation Trust (CMFT)** developed a single multi-professional educational audit and monitoring tool which is used across all non-medical Health Professions to standardise the educational audit process and provide a consistent quality assurance standard. Within the Learning and Development Agreement (LDA) with NHS Northwest, all organisations are required to be able to evidence how they quality assure the clinical placements they provide. Clinical placements are required to ensure that placement learning supports the principles and values of the NHS in England, as set out in the NHS Constitution (DH March 2012).

The trust identified that whilst there were quality assurance processes embedded within nursing and midwifery placement areas, there were differing processes and standards in areas providing placements for other professional groups. The purpose of this improvement work was to enable the development of one educational audit and quality assurance process which could be implemented across all non-medical clinical placement areas.

CMFT is an established teaching hospital, with strong academic links to the University of Manchester, Manchester Metropolitan University, University of Salford, University of Bolton, Edge Hill University, Lancaster University, University of Cumbria and University of Liverpool as part of the NHS North West provision. It is a Clinical Placement Training Provider for pre-registration and post registration students including Nurses, Midwives, Allied Health Professionals and Healthcare Scientists from a number of affiliated universities.

KEY OUTCOMES

- Prior to the implementation of this tool 97% of placements had a recognised audit tool in place. Since the implementation of the single audit tool and monitoring process all clinical placement areas have been quality assured to ensure they meet the identified standards. This provides all stakeholders with assurance that the quality of clinical placements is audited and monitored on an on-going basis to ensure achievement of LDA and professional regulatory standards.
- The learning environment in which students are placed is recognised as being conducive to learning and the development of safe, competent practitioners of the future.
- Collaboration and engagement with multi-professional programme leads within Universities and heads of professions within the Trust has improved communication between the Trust and the Universities.
- Having the assurance that clinical placement areas meet set standards will ultimately improve student satisfaction and reduce attrition. It is planned to monitor student evaluations and attrition as part of the continued evaluation of this improvement work.





GOOD PRACTICE CASE STUDY

BACKGROUND

Central Manchester NHS Foundation Trust

Central Manchester University Hospitals NHS Foundation Trust (CMFT) is the leading provider of tertiary and specialist healthcare services in Manchester and treats more than a million patients every year. The Trust has an overall workforce in excess of 12,000 staff and is committed to developing the workforce of the future, preparing these individuals to deliver the best care and experience to patients. CMFT has 329 clinical placement areas and a capacity for 934 multi-professional students placed in clinical placements at any one time.

Quality Assurance Framework

The Quality Assurance Framework, which forms part of the LDA, is aligned to the Standard National Contract between the SHA and Higher Education Providers, and is structured around the Education Commissioning for Quality (ECQ) metrics (DH 2009). The ECQ indicators are embedded within the NHS Education Outcomes Framework and are integral to the review of Learning and Development Agreements via the Local Education and Training Boards (LETBs). The agreement sets the standards for practice learning in pre-registration and pre-qualification (non-profession specific) programmes in all healthcare professions funded by Department of Health. In order to enhance multi-professional Quality assurance the LDA requires organisations to have mechanisms in place to enable the local monitoring of practice placement areas.

AIMS & OBJECTIVES

- Introduce a single Multi-professional educational audit tool and monitoring process across all clinical practice placement areas, prioritising those areas that currently do not have a quality assurance process.
- Ensure that the Trust can meet the requirements of the LDA in terms of quality assurance for clinical placement areas.
- Develop an implementation process that offers guidance and support for clinical placement areas to ensure ownership of the process.

HOW IT WORKS

- All clinical placements have been briefed on the educational audit and monitoring process as part of the implementation plan.
- The relevant PEF for the clinical placement area works with the senior team within the placement to support the completion of the audit and collation of evidence.
- The educational audit processes reviews the placement areas compliance with the Placement Charter.
- An agreed timescale for completion of the audit is set.
- PEF and University Link assess the placement area against the self-declaration audit.

- Where areas for improvement are identified action plans are agreed with specific timescales. The completion of action plans is monitored by the PEF for the clinical placement and any issues are escalated to the relevant Head of Nursing or Head of Service.
- Once a placement area has provided all the evidence required it is awarded a Certificate of Achievement, which it is then required to display clearly as evidence of successful verification.
- Compliance will be monitored by the PEF team and reported to Educational Governance Forum and Nursing and Midwifery Professional Forum.
- Each placement areas will be re-audited every 2 years, unless there are indicators to undertake an audit earlier (i.e. poor student evaluation)

(See Appendix 2 – Flow Chart)

The audit tool has been mapped to the following professional standards

- NMC – Standards to support Learning and Assessment in Practice
- NMC – Standards for Pre-registration Nursing Education
- HCPC – Standards of Education and Training
- ECQ – Education Commissioning for Quality
- EOF – Education Outcomes Framework (currently in draft form)





GOOD PRACTICE CASE STUDY

KEY STAGES OF SET-UP

May 2012- A baseline scoping exercise was undertaken across CMFT's multi-professional placement areas to identify the level and quality of audit information available and to identify those placements where audits were not undertaken. The findings of the scoping exercise identified inconsistencies amongst the multi-professional groups in regards to the educational audit and quality monitoring processes.

In order to meet the principles within the LDA which is to align quality assurance processes across all professions to enable learning and continuous improvement to take place it was identified that further work on the process within CMFT was required. A review of the various professional specific educational audit tools available nationally was undertaken in order to develop one single audit tool and monitoring process. The PAN Manchester (agreed cross-university site) audit document was reviewed and compared to documentation from other Trusts as a benchmark.



June 2012- Following meetings within the Practice Education Facilitator (PEF) Team and discussions with key stakeholders, it was agreed that the PAN Manchester audit document could be utilised as a single multi-professional educational audit tool with minor additions to address gaps identified from the review process. (see Appendix 1).



July 2012 – The CMFT educational audit tool was finalised, with implementation commencing in areas identified who had not undertaken quality assurance monitoring.



August 2012- New documentation and process was launched Trust wide. The PEF team provided bespoke support to clinical placement areas in the completion of the audit tool and evidence identification. A pre-completed tool and user guide were created to give clear guidance on how placement areas should complete the tool and the evidence required.



September 2012 – By the end of September the outstanding 3% of clinical placement areas who had not previously utilised the audit tool were introduced to the documentation by the PEF and given a deadline for completion.



October 2012 – A Placement certificate was produced and awarded to each placement area that had achieved full quality assurance. The Trust has also developed a Placement Charter which outlines the roles and responsibilities of both students and the Trust.



November 2012- The findings from the report were integrated into the Trust reporting structure for Educational Governance and the PEF outcome evidence to NHS North West.



GOOD PRACTICE CASE STUDY

RESOURCES

The only resource required was that of the Practice Education Facilitator's (PEF) time, who devised, implemented and supported the process in the trust throughout its required duration.

The tool is sent to areas as an electronic version and may be initially returned in this way. However to achieve a robust verification process PEFs and /or ULLs will visit the placement area and work through the document with those staff who have completed it.

KEY CHALLENGES

- Nursing students within the Trust remain the largest population group and therefore much of the work carried out regarding training and support has been based on this group. Traditionally Allied Health Professions and Healthcare Scientists have remained relatively independent. Persuading key multi-professional team members that whilst the tool was originally based on the Nursing Model this is not just for nursing staff was a key challenge.
- It is sometimes difficult for PEFs to coordinate meetings within placement areas, in order to offer support and guidance within the action plan timeline. However this challenge is overcome with flexibility, persistence and by reiterating the purpose and importance of the tool.
- There was a little resistance from team leads from some placement areas, who saw this tool as one of many changes. However, it was essential that they were engaged if this project were to be successful. The PEF team were thus tenacious in ensuring team leads were aware of the project so that effective leadership would steer its progression.
- Even though staff are relatively used to change at CMFT, as it is an innovative large trust where change is continuous, and this is a relatively small change, the PEF team was aware that this could cause fear and concerns. Therefore there was a need for staff engagement during the change process and sustainable energy was needed to maintain change

momentum. The PEF team also provided information as to purpose of the tool and its positive implications for the areas.

KEY LEARNING

On realisation that some of the multi-professional tools in place were not auditing the information required within the LDA a tool had to be developed immediately. This involved a scoping exercise and using the information gained a tool was developed by the PEF team.

However, following this work a North West wide tool has been developed against which this tool will be mapped to ensure all requirements are included. On reflection productivity may have been better utilised waiting for the WEF group tool to be published and utilisation of such models already in place thus, 'don't reinvent the wheel'. However from a novice PEF perspective it proved to be a useful exercise to have undertaken.

Within a trust like CMFT, where the strategic structure is clearly defined and any changes must be approved and accepted, it is vital that a robust report is presented to the Educational Governance Forum and agreed, in order to secure senior level buy-in.

SUSTAINABILITY

Initial completion of the document only requires completion of essential criteria and therefore placement areas do not feel overwhelmed by the process. This ensures that they are not set up to fail before they have even begun. Continual support offered using pre-completed tools, and PEFs going out to placement areas to assist where necessary makes the process easier and helps placement areas to complete other sections of the document, thus ensuring that the tool continues to work.

Those placement areas which already have the audit process embedded need to be re-audited every two years however in order to maintain momentum the next audit is planned in twelve months.

NEXT STEPS

- A Mission Statement for the Trust is being currently discussed at senior level
- An evaluation audit of project success and utilisation of the tool has been developed in the form of a questionnaire. This will be disseminated following completion of the audit.

SUPPORTING MATERIAL

- **Appendix 1** - CMFT Multi-professional Audit tool
- **Appendix 2** - Flow Chart



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