FITNESS TO PRACTISE RESEARCH: IS IT BEING ADOPTED INTO POLICY AND PRACTICE?

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Executive Summary

The Scottish Collaboration for the Enhancement of Pre-registration Nursing (SCEPRN) are seeking to identify the impact of the commissioned 2014 and 2015 research project work about Fitness to Practise (FtP). The objective of this report is to identify how two FtP research projects findings and recommendations for enhancing Fitness to Practise (FtP) are being adopted or adapted into HEI nursing education practice and policy. Information gathered through one focus group and 12 telephone interviews with HEI FtP nursing leads is analysed.

Key Findings identify that the majority of HEIs have worked with the FtP reports particularly the *Identifying Good Practice in Fitness to Practice Processes in Higher Education Institutes in Scotland* (Haycock-Stuart et al. 2014) to modify FtP policy and also processes. Concerns were raised about institutional memory within the HEIs around SCEPRN funded projects generally due to periodic SCEPRN membership changes. The newer members of SCEPRN are not familiar with the project work completed prior to their joining SCEPRN. The HEI FtP leads spoke in detail about how the reports have been used in HEIs to positively influence the development of FtP policy and processes in their HEIs. The FtP leads also indicated that FtP processes are now more developed and less ad hoc and that this is to some extent perceived to be as a consequence of the reports. However, the FtP leads acknowledged that there is considerable staff mobility and little succession planning in the HEIs around FtP and that expertise and institutional memory around FtP policy and processes is often ‘lost’. All the HEIs deemed FtP as a challenge for them and that FtP cases are complex and very individual in nature. The reports are perceived as enhancing FtP policy and some processes in the majority of the HEIs in Scotland. Most HEI FtP leads welcomed the development of national resources to help develop conceptualisation and understanding about FtP amongst HEI staff and student healthcare professionals.

Recommendations:

1) Given the identification of lack of Institutional memory- within both SCEPRN and HEI FtP leads about the project work undertaken and to address the work going into a vacuum, there is need for SCEPRN to have access to a shared portal of its work to be accessible to the SCEPRN membership. This would make projects and reports more strategically visible to successive members of SCEPRN and facilitate the work to have ongoing impact.

2) SCEPRN should consider developing an action implementation plan for each commissioned and approved project report to facilitate impact. This action plan can enable the ongoing impact of the work in HEIs and facilitate more formal monitoring of the impact of the projects and the reports.

3) SCEPRN should consider monitoring the ongoing relevance of the projects and their reports at an annual review point for five years (shorter if it is deemed that the work is no longer to be monitored). This revisiting of the projects and the reports and their relevance to the SCEPRN membership will help maintain and foster institutional memory of the project work and enable ongoing monitoring for impact.

4) There is a need to identify more formal information sharing mechanisms between SCEPRN and Council of Deans (CoD) around the work of SCEPRN generally and the dissemination of...
SCEPRN project reports and potential opportunities for impact of the commissioned project work. This more formal mechanism can give credence to the implementation of findings and recommendations of the project work of the group within the HEIs.

5) Going forward, there is an enthusiasm for learning opportunities within Scotland around FtP. Developing opportunities for shared learning across the HEIs in a confidential and safe environment is perceived to be valuable for improving best practice in FtP policy and processes. The potential for a national, accessible, online resource for academic staff and students about FtP based on best evidence and practice should be explored.

Introduction
The report examines how previously NHS Education (NES) funded research shaped and informed any revision of policy and/or practise processes in the Higher Education Institutions (HEIs) in Scotland to enhance Fitness to Practise (FtP) in pre-registration student education programmes. Two NES funded research studies previously examined the FtP policy, processes and practices across Scotland’s HEIs including mentors’ and student nurses’ understandings of fitness to practise as a concept and the policy and processes to safeguard the public. This report identifies the impact of those two previous research projects and their reports 1) Identifying Good Practice in Fitness to Practice Processes in Higher Education Institutes in Scotland (Haycock-Stuart et al. 2014) and 2) Students and mentors understandings of fitness to practice processes in pre-registration nursing programmes in Scotland: These terrifying three words (Haycock-Stuart et al. 2015).

Background to the current project development:
Fitness to Practise (FtP) of nursing students is key to patient safety in pre-registration nursing education programmes. Two multi-site research studies were conducted in 2014 and 2015 examining Fitness to Practise (FtP) understanding of concepts, policy and processes in Scotland through qualitative studies with nurse clinical mentors, student nurses and HEI providers of pre-registration nursing education. Two research reports were published on NHS Education Scotland (NES) websites (Haycock-Stuart et al. 2014 and 2015) and two research papers were published in the high ranking Nurse Education Today (NET) journal (Haycock Stuart et al. 2016, MacLaren et al. 2016). The NET journal tweeted about the papers after publication on a couple of occasions drawing attention to the relevance of the work to HEI readership. Two members of SCEPRN indicated that they had also tweeted about the journal publications. The work was disseminated at two International Conferences and the lead author was invited in 2018 to present at the Professional Standards Authority Academic and Research Conference on Fitness to Practise in Windsor. This event was attended by the regulators within the UK. It is important to note that the Nursing and Midwifery Council has announced NMC (2019) changes in FtP ‘to move away from a culture of blame and denial, to a system that puts more emphasis on learning from mistakes’.

The research reports upon completion were disseminated to the national group the Scottish Collaboration for the Enhancement of Pre-registration Nursing (SCEPRN) involving all eleven HEIs in
Scotland and the Open University with representation from NHS Education Scotland (who funded the projects). NHS Education Scotland placed the reports on its website with open access.

A number of key recommendations were made in the reports and publications from the research projects. Key insights from the research included the importance of a staged FtP process; of understanding the unique position of pre-registration nursing students as being in the process of developing as professionals; and the need for HEIs to educate students about FtP more generally in order to challenge misunderstandings and alleviate fears which might inhibit students from openly and honestly dealing with FtP issues.

**Aim of this project:**
To ascertain how the two FtP research projects findings and recommendations for enhancing Fitness to Practise (FtP) are being adopted or adapted into HEI nursing education practice and policy.

**How the information is gathered:**
Through a process of telephone discussions with the 12 FtP leads in the Universities providing pre-registration nursing education in Scotland and a group discussion with members of SCEPRN, identified how the completed FtP research reports are influencing FtP policy and processes in Scotland.

**Key Findings**

**The FtP projects impact on FtP policy development**
For most of the HEIs (9=) the work has definitely influenced the FtP policy development and to a lesser extent teaching with students. However this was not always institutionally strategically orchestrated, but due to the efforts of key individuals seeking and utilising the reports. The majority of HEIs utilised the detailed reports for FtP policy development. Four of the HEIs explained in depth, how small working groups within the HEIs analysed the reports particularly the first report *Identifying Good Practice in Fitness to Practice Processes in Higher Education Institutes in Scotland* (Haycock-Stuart et al 2014) to help formulate FtP policy within their institutions. Differences in the HEI institutions approach to FtP policy meant that for some this influence was at the University, Faculty or School level depending on where FtP policy and processes sit within the institution. The respondents indicated that they valued the depth and detail of the reports as this made them useful for shaping policy. Several FtP leads referred to specific developments and changes in policy and processes, for example, the non-involvement of personal tutors in the FtP process and the dedicated support for students involved in FtP processes, the inclusion of service users for FtP at stage 2 and the value of the reports for formulating templates for audit of FtP processes etc. The issue of student representation was an area of ongoing consideration in several of the HEIs as FtP policy development is perceived as iterative and several HEIs could see benefits and limitations to students being involved in their peers FtP processes.

Only one FtP lead said they would have like to have had more raw data presented as the findings were so interesting. There were no suggestions for alternative ways of presenting the findings and
recommendations from participants but once prompted to the possibility of utilising podcasts a small number of respondents indicated they would value a podcast in addition to the formal report, but not as an alternative.

The first project and report examining HEI FtP processes (Identifying Good Practice in Fitness to Practice Processes in Higher Education Institutes in Scotland 2014) had more impact with the HEIs and really shaped policy development and to a lesser extent student teaching around FtP policy and processes. The reports were used to help shape the policy and process at a variety of institutional levels including University, faculty and School level policy. Several FtP leads reported the importance of the reports beyond nursing and gave examples of how University FtP policy and the University secretariat had been influenced to refine FtP policy. The second project and report ‘Students and mentors understandings of fitness to practice processes in pre-registration nursing programmes in Scotland: These terrifying three words’ (Haycock-Stuart et al 2015) has had less impact on policy development and was referred to much less in the interviews, only 5 of the FtP leads referred to this report. Three of the HEIs indicated the iterative nature of FtP policy development and emphasised that both the reports are considered really useful currently as these HEIs revise their HEIs polices on an ongoing basis.

Four of the FtP leads alluded to concerns that the FtP policy and process development in their HEIs has been relatively under developed by way of organisational policy and process development prior to the reports and that there is still a sense of ‘the need to sharpen up policy and processes’ and ‘getting the house in order’ as some processes have been ‘all over the place’. Concerns were voiced in a small number of institutions that processes are still a ‘bit ad hoc’ and that there is ‘little succession planning’ for FtP leads in nursing and midwifery. A small number of FtP leads raised concerns that other professional organisations FtP requirements dominate the HEI processes of their institution and that nursing FtP is at times hindered to some extent by this. Several participants report Institutional challenges between School and University level FtP, the NMC requirements and University academic misconduct processes. However, by far the majority of participants indicated that the SCEPRN funded project reports had influenced FtP policy and processes positively within their HEI often helping to address the needs of students with in their Institutions (and at times beyond purely nursing and midwifery as the policy was improved for a variety of professional programmes).

Half of the HEIs indicated that the reports had motivated more in depth teaching in their HEI s about FtP with the students. This teaching varied between 20 minutes with each year group to workshops of approximately 1.5 hours with each year group and being integrated into wider professionalism discussions with students. Most of the HEIS do not share the reports with students or refer to them directly in their teaching but use the reports for teaching purposes. Several of the FtP leads were not familiar with the FtP educational preparation of the nursing students in their HEI.

**Poor Institutional Memory**

There is clear evidence that the two SCEPRN FtP reports were often cascaded, but turnover of staff both on the SCEPRN group and with the HEI FtP leads meant that the reports often become institutionally ‘lost’. In some HEIs there had been 2-3 changes of FtP leads within 4 years. These changes of FtP leads have led to loss of institutional memory about the FtP projects and their
reports. Some of the current FtP leads recounted how the FtP project reports might have been cascaded to their predecessors, but very few of the new FtP leads were guided to the reports by their predecessors. The current FtP leads came across or sought the reports out of their own interest in FtP or as a consequence of my contacting them about the projects and reports.

Change over in membership of the SCEPRN group for some of the HEIs has also meant that as the SCEPRN leads change there is loss of information around the SCEPRN project work and reports. There appears to be a lack of transmission from SCEPRN members to their successors and FtP leads to new FtP conveners about the project work undertaken. The project work goes into a vacuum. Arguably there is a need for a shared portal for SCEPRN members to have access to previous project reports and minutes of meetings being made consistently accessible to the membership of SCEPRN. Whether a platform such as TURAS has this facility could be explored by the SCEPRN group with NES.

There is a missed opportunity to cascade the work of SCEPRN within the membership of the group and beyond. A central repository is one step towards addressing the maintenance of institutional memory for sustained impact; however more strategic action planning around the project reports can foster better monitoring of the impact of the SCEPRN project work and the reports. Currently there is a missed opportunity regarding projects, the reports and impact on practise as they become lost as people change over roles and responsibilities within the HEI institutions.

Three participants commented on the opportunities for more explicit and strategic representation of the work of SCEPRN and the projects and the reports with the Council of Deans (CoD). The transmission of information from SCEPRN to CoD was thought to need more overt representation for a consistent and transparent process of information sharing at a strategic level. One participant noted that the status of the group (SCEPRN) ‘is more elevated and becoming more valued’ at senior level. Indeed the value of SCEPRN around implementing the new standards for nursing education is being increasingly recognised by senior nursing leadership. The formal mechanisms for representation and information sharing between SCEPRN and CoD are not entirely overt in the SCEPRN membership, terms of reference and remit documents. There has been representation from SCEPRN to CoD based on who in the SCEPRN group is also serving on CoD at the time, but this has been relatively informal. The formalising of the mechanism between SCEPRN and CoD is perceived to be valuable to have the opportunity to more strategically articulate the work of SCEPRN, the projects and reports for changing practice and influencing developments more coherently than through the current processes.

**FtP as complex**
All the HEIs deemed FtP as a challenge for them and that FtP cases are complex and very individual in nature. The FtP leads commented that they were always learning with each FtP case and that each case very different and that there is not a common theme for student FtP. The highly varied and individual cases meant that the HEIs would value learning more from each other. They indicated it would be valuable to confidentially discuss and learn from cases in other HEIs to help develop best practice. Several FtP leads mentioned how challenged the HEIs are between balancing support for the student as opposed to removal from the programme for patient safety. A few of the HEI representatives were concerned to offer supervision, but a few also identified that extending placement as a support for the student can be challenging; suggesting that some students do
develop and improve, but that others do not and this raises questions as to whether this extension of placement is always able to ensure it serves the purpose of ensuring that students are safe for practice. Concerns were raised by a small number of people that being supportive of student leaning may be detrimental as it is prolonging the FtP issues and concerns. A small number of FtP leads raised the importance of an incremental approach to students who are learners and the opportunities for action planning and learning as they develop into the professional. Student centeredness is important and the reports draw attention to this, but most HEIs are still not very clear about student centeredness or ‘fairness’ in the processes. A small number of HEIs (3) reported having developed audit tools for monitoring the FtP decision making process etc. and that the reports had facilitated the development of these audit tools.

Several FtP leads argue that it is hard to build a strong evidence base around FtP as it is often held confidential within institutions and that there is limited sharing of information due to the need to maintain confidentiality, but this inhibits the creation of collective understandings or a network professional best practice. There is limited collective sharing of expertise and learning about FtP within intuitions and even less across institutions due to the confidential nature of FtP. Opportunities for shared learning about FtP for strategic development of improved FtP decision making are perceived to be really helpful, but non-existent. FtP leads are challenged by how to share learning and expertise which can help in FtP complex decision making processes.

Going forward, there is an enthusiasm for learning opportunities within Scotland around FtP. Developing opportunities for shared learning across the HEIs in a confidential and safe environment are perceived to be valuable for improving best practice in FtP policy and processes. A national accessible, online resource for academic staff and student about FtP based on best evidence and practice could be developed on Turas. This resource would be valuable if it could consider FtP in an inter-professional context as nurses need to work with other health professionals and understand FtP with different professional groups. Any resource developed would need to offer a ‘consistent voice’ about FtP relevant to all the HEIs in Scotland and ensure it is not contradicting institutional processes.

Conclusion
The FtP project work and their reports have influenced FtP policy and processes in the majority of the HEIs in Scotland providing pre-registration nursing education. To a lesser extent the reports have influenced approaches to teaching undergraduate nursing and midwifery students about FtP. The project work and reports are seen as valuable in shaping positive developments in FtP policy in most HEIs and for some it also improved audit and processes for FtP meetings. The turnover of FtP leads in HEIs is seen to be a risk and potentially detrimental for learning and developing expertise around FtP policy and processes. There is an eagerness amongst HEI FtP leads to develop a more shared understanding of the enactment of policy and processes across the different HEIs as FtP is recognised as very individual to each case and complex. The development of opportunities for shared learning and the creation of a national resource to support student learning around FtP are encouraged by FtP leads.
Recommendations:

1) Given the identification of lack of Institutional memory- within both SCEPRN and HEI FtP leads about the project work undertaken and to address the work going into a vacuum, there is need for SCEPRN to have access to a shared portal of its work to be accessible to the SCEPRN membership. This would make projects and reports more strategically visible to successive members of SCEPRN and facilitate the work to have ongoing impact.

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5) Going forward, there is an enthusiasm for learning opportunities within Scotland around FtP. Developing opportunities for shared learning across the HEIs in a confidential and safe environment is perceived to be valuable for improving best practice in FtP policy and processes. The potential for a national, accessible, online resource for academic staff and students about FtP based on best evidence and practice should be explored.

Acknowledgements
Thank you to the institutional representatives for giving their time and sharing their experiences and perspectives.

References

http://nes.scot.nhs.uk/media/3288306/students__and_mentors__understandings_of_fitness_to_practise_processes.pdf


**SCEPRN Monitoring and Actions**

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<td>Review progress on the recommendations of the report in 12 months</td>
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Appendix 1

Topic Guide for telephone discussions with FtP Programme Leads SCEPRN

Are you aware of the reports from the SCEPRN FtP research from a couple of years ago?
Have you read the research reports? If yes- what did you think of them –could they have been more user friendly? If so how?

Have you read any of the publications in the journal about the findings from the research?
Have you shared the reports or research journal papers with your team?
Have you attended any of the FtP events where the research was presented? RCN conference etc.

Have the findings or reports or papers or presentations influenced you or your programme team in any way around FtP teaching or processes?
How have the reports been used in your HEI? Have you made any amendments to FtP processes subsequent to the reports being distributed? Did anything from the reports shape any aspect of your FtP processes?

Do you refer to the reports in teaching or do any of your programme team refer to the reports in teaching to your knowledge?
How might the findings/reports have been shared with you or your team to have had more impact?
How would you like to hear about the findings from NES funded research going forward and how would you like to share research with your team going forward?
How might findings be used to shape processes and teaching about FtP more?

What issues concerns you about FtP at the moment? What would you like to see happen?

Would you be interested in an event about FtP being held in Scotland?

Anything you would like to raise that has not been discussed already?

Thank you for your time!!