

INSPECTION REPORT

University Hospital Birmingham NHS Trust

09 July 2001



ADULT LEARNING
INSPECTORATE

Grading

Inspectors use a seven-point scale to summarise their judgements about the quality of learning sessions. The descriptors for the seven grades are:

- *grade 1 - excellent*
- *grade 2 - very good*
- *grade 3 - good*
- *grade 4 - satisfactory*
- *grade 5 - unsatisfactory*
- *grade 6 - poor*
- *grade 7 - very poor.*

Inspectors use a five-point scale to summarise their judgements about the quality of provision in occupational/curriculum areas and in New Deal options. The same scale is used to describe the quality of leadership and management, which includes quality assurance and equality of opportunity. The descriptors for the five grades are:

- *grade 1 - outstanding*
- *grade 2 - good*
- *grade 3 - satisfactory*
- *grade 4 - unsatisfactory*
- *grade 5 - very weak.*

The two grading scales relate to each other as follows:

SEVEN-POINT SCALE	FIVE-POINT SCALE
grade 1	grade 1
grade 2	
grade 3	grade 2
grade 4	grade 3
grade 5	grade 4
grade 6	grade 5
grade 7	

Adult Learning Inspectorate

The Adult Learning Inspectorate (ALI) was established under the provisions of the *Learning and Skills Act 2000* to bring the inspection of all aspects of adult learning and work-based training within the remit of a single inspectorate. The ALI is responsible for inspecting a wide range of government-funded learning, including:

- work-based training for all people over 16
- provision in further education colleges for people aged 19 and over
- the University for Industry's *learnirect* provision
- adult and community learning
- training given by the Employment Service under the New Deals.

Inspections are carried out in accordance with the *Common Inspection Framework* by teams of full-time inspectors and part-time associate inspectors who have knowledge of, and experience in, the work which they inspect. All providers are invited to nominate a senior member of their staff to participate in the inspection as a team member.

Inadequate provision

A provider's provision will normally be deemed to be less than adequate where

- one third or more of published grades for occupational/curriculum areas and New Deal options are judged less than satisfactory, or
- leadership and management are judged to be less than satisfactory

The final decision as to whether the provision is inadequate rests with the Chief Inspector of Adult Learning. The overall judgement as to whether the provision is adequate or inadequate is included in the summary section of the inspection report.

SUMMARY

The provider

The University Hospital Birmingham NHS Trust consists of two large training hospitals located about one mile apart in the centre of Birmingham. The contracts for the training are held by the vocational development department, which is part of the organisation and strategic development division. There is a contract for advanced modern apprenticeships in health, care and public services from Birmingham and Solihull Learning and Skills Council (LSC). There is also a contract with the Employment Service for Gateway to Work courses and the full-time education and training option of New Deal for 18-24 year olds. There are four advanced modern apprentices and nine clients on Gateway to Work. There were too few clients on the full-time education and training option for it to be inspected. All advanced modern apprentices are employed by the University Hospital of Birmingham NHS Trust.

Overall judgement

The quality of the provision is adequate to meet the reasonable needs of those receiving it. More specifically, the quality of the work-based learning in health, social care and public services is satisfactory. The leadership and management of the vocational development department of the University Hospital Birmingham NHS Trust are also satisfactory. The quality of the Gateway to Work programme is good.

Work-based learning for young people

All modern apprentices are employed as nursing auxiliaries and are part of a career progression route leading to nurse training. The trainers are well qualified and appropriately experienced and good use is made of specialist visiting speakers. Much of the assessment is carried out by work-based assessors. Key skills training and assessment is fully integrated with the vocational training and assessment. The programme is new and no young people have yet achieved the full advanced modern apprenticeship framework. Retention and achievement rates are poor, but most of those who leave stay employed within the health sector.

New Deal

The Gateway to Work programme is good. The structured two-week timetable includes varied and comprehensive jobsearch activities. Good use is made of visiting speakers to broaden clients' knowledge of local employment opportunities and New Deal options. The tutors are competent and experienced. They use a wide variety of training techniques. Since the programme started in 2000, 49 per cent of clients have completed the full two-week programme. In 2000-01, out of 127 starters, 29 per cent gained employment within 13 weeks of the end of the

course.

Leadership and management

The leadership and management of the University Hospital Birmingham NHS Trust are satisfactory. There is highly developed team support, with staff working closely together and sharing information on a daily basis. This has led to many informal quality assurance systems developing. Consideration has been given to the long-term recruitment and training needs of the health sector and good work is taking place on collaborative partnerships and ongoing development of a specialist NHS Gateway. There are comprehensive policies relating to equal opportunities and all learners are well aware of their rights and responsibilities. There is no structured staff training for equal opportunities. Data are collected for contractual reasons but there is little data analysis. The self-assessment process did not take into account the views of workplace staff and learners. The self-assessment report did not cover the New Deal training.

GRADES

Health, social care & public services	3
Contributory grades:	
Work-based learning for young people	3

Foundation programmes	2
Contributory grades:	
New Deal	2

Leadership and management	3
Contributory grades:	
Equality of opportunity	3
Quality assurance	4

KEY STRENGTHS

- well-structured career progression for advanced modern apprentices
- well-structured, comprehensive training
- excellent use of different training techniques in foundation programmes
- effective development of collaborative partnerships
- highly developed team support
- good range of policies for equal opportunities

KEY WEAKNESSES

- poor retention and achievement rates for advanced modern apprentices
- inadequate recording of reviews for advanced modern apprentices
- inappropriate facilities for New Deal clients
- no systematic analysis of data
- informal quality assurance arrangements
- weak self-assessment

OTHER IMPROVEMENTS NEEDED

- more effective recruitment and training of work-based assessors
- more detailed recording of training in the workplace
- better monitoring system for New Deal clients
- wider range of work tasters for New Deal clients
- use of exit questionnaires
- more effective involvement of area managers

THE PROVIDER AND ITS CONTEXT

1. University Hospital Birmingham NHS Trust (UHBT) comprises two large training hospitals; The Queen Elizabeth Hospital, which shares a site with the University and Medical School in Edgbaston, and Selly Oak Hospital. The two hospitals are located about 1 mile apart, in the centre of Birmingham. Training and education within UHBT has, in the past, been run to meet the needs of individual areas of the organisation. The growth of a training and education centre has been strategically planned to bring together the various disciplines of training, and to broaden opportunities for all groups of staff. Training towards national vocational qualifications (NVQs) has expanded enormously over the past two years and NVQ training programmes are now available in care, catering and hospitality, diagnostic and therapeutic support, dialysis support, training and development, counselling, customer service, administration, and management. The vocational development department has a contract for advanced modern apprenticeships in health, care and public services from Birmingham and Solihull Learning and Skills Council. It also has a contract with the Employment Service for Gateway to Work courses and the full-time education and training option on New Deal. There are currently too few clients on the full-time education and training option for it to be inspected. There are nine New Deal clients on Gateway to Work courses. There are four advanced modern apprentices, who are all employed by the UHBT.

2. The vocational development department is situated on the Selly Oak Hospital site and shares training facilities with other training areas within the training and education centre. There is a head of vocational development and a deputy head, who are assisted by 13 members of staff. There are four vacancies within the team at present. Training takes place within the training centre or in the workplace.

3. Birmingham has seen a drop in manufacturing industry and a growth in the service sector. Employment opportunities within retailing and warehousing are increasing, in line with national trends. There has also been considerable investment and growth in the leisure and tourism industry. In May 2001, unemployment in Birmingham was 5.9 per cent, compared with a national average of 3.1 per cent and an average in the West Midlands of 3.8 per cent. Young people aged between 18 and 24 account for 25.9 per cent of the city's unemployed people. Birmingham has a relatively high number of people from minority ethnic groups and, in particular, a large Asian community. The proportion of people from minority ethnic groups was 21.5 per cent in the 1991 census, compared with a national average of 6.2 per cent. Thirteen per cent of the 5000 staff employed by the UHBT are from minority ethnic groups. In 2000, the proportion of school leavers in Birmingham achieving five or more general certificates of secondary education (GCSEs) at grade C and above was 41 per cent, compared with the national average of 49.2 per cent. The percentage of school leavers who gained no GCSEs in Birmingham was 6 per cent, compared with the national average of 5.6 per cent.

THE INSPECTION

4. A team of three inspectors spent a total of nine days at the UHBT during July 2001. They interviewed six trainees and eight New Deal clients and conducted seven interviews with the UHBT's staff. They interviewed four of UHBT's workplace supervisors/managers. They observed and graded three training sessions. Inspectors examined trainees and clients' individual learning plans, records of their progress reviews, personal files and portfolios of evidence. A wide range of other paperwork was examined, including contracts, external reports, internal reports, minutes of meetings, staff personnel records, policies and procedures. Inspectors studied UHBT's self-assessment report, which had been updated in May 2001 in preparation for inspection.

Grades awarded to learning sessions

	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Total
Health, social care & public services	0	0	1	0	0	0	0	1
Foundation programmes	0	2	0	0	0	0	0	2
Total	0	2	1	0	0	0	0	3

OCCUPATIONAL AREAS

Health, social care & public services

Grade 3

Programmes inspected	Number of learners	Contributory grade
Work-based learning for young people	4	3

5. There are four advanced modern apprentices working towards NVQs at levels 2 and 3 in care. They are all employed on full-time, permanent contracts with the UHBT, as nursing auxiliaries. There are three care scheme co-ordinators and three tutors. A full-time assessor has recently been recruited. One scheme co-ordinator takes responsibility for all the level 2 NVQ training. Another looks after the level 3 NVQ and key skills training and assessment as well as dialysis, diagnostic and therapeutic support. Both are registered general nurses and are qualified assessors and internal verifiers. Apprentices are recruited through local advertisements and by word of mouth. They are assessed for their suitability for training at an interview and during their induction period. Apprentices attend a general induction to UHBT and then receive a two-week induction to their workplace. They attend a three-day introductory course followed by a study day each month for the NVQ and study days twice a month for two years for their key skills award. The study days include taught sessions as well as opportunities for apprentices to work on their portfolios and receive help from the training department's staff. The scheme co-ordinators teach the level 2 and level 3 NVQ care programmes, assisted by other staff with relevant expertise. Apprentices are given time off work to attend the training. Apprentices have work-based assessors where possible. If there is not a work-based assessor, the training department uses the full-time assessor.

The following tables show the achievement and retention rates available up to the time of inspection.

Work-based learning for young people										
Foundation modern apprenticeships (FMA)										
	1997-98		1998-99		1999-2000		2000-01		2001-02	
	No.	%	No.	%	No.	%	No.	%	No.	%
Number that started			10		2					
NVQ level 2 completed			6	60	1	50				
Left without completing the framework			10	100	2	100				

Work-based learning for young people										
Advanced modern apprenticeships (AMA)										
	1997-98		1998-99		1999-2000		2000-01		2001-02	
	No.	%	No.	%	No.	%	No.	%	No.	%
Number that started					13		2		0	0
Still in training					2	15	2	100	0	0
Left without completing the framework					11	85	0	0	0	0

STRENGTHS

- well-structured career progression
- well-planned training programme
- good integration of key skills training with vocational training

WEAKNESSES

- poor retention and achievement rates
- inadequate recording of progress reviews

OTHER IMPROVEMENTS NEEDED

- more detailed recording of training in the workplace
- recording of meetings of internal verifiers
- better training environment
- better support for apprentices in the workplace
- more effective recruitment and training of work-based assessors

6. There is a clear and well-structured career progression. Young people are either recruited directly onto advanced modern apprenticeships or can transfer from New Deal by way of the National Health Service (NHS) Gateway programme. UHBT has an agreement with the University of Birmingham to allow direct access to nurse training to those who have achieved their advanced modern apprenticeship. They are interviewed and offered places during their apprenticeship and this encourages them to make good progress. On completion of their modern apprenticeship, they are seconded to UHBT, with guaranteed employment when they have qualified. Apprentices benefit from a 12-week programme which prepares them for secondment, where they attend weekly sessions to improve their writing and critical evaluation skills. This career structure benefits apprentices who wish to become nurses, by enabling them to maintain financial stability and gain study skills, both of which will lessen the likelihood of them abandoning their training. Some advanced modern apprentices who are over the age of 25, and who therefore no longer attract government funding, have been supported by the UHBT

to continue with their studies.

7. The training programme is well planned. Apprentices are taught in the workplace by their workplace supervisor and tutors, who cover the practical skills relating to each NVQ unit. Some of the training which takes place in the workplace is not clearly recorded in apprentices' files. Apprentices have a planned programme of study days. If they miss a day, they are immediately given the next available date for the study day to enable them to catch up. The training programme is clearly linked to the NVQ units and is designed to provide the knowledge base for the NVQ and the theory required in the workplace. Time during the study days is used to help apprentices develop comprehensive portfolios of evidence. Work-based assessment is thorough and internal verification includes observation of work-based assessors. Internal verifiers meet regularly, but there are no minutes of recent meetings. A wide range of experts with relevant knowledge and experience teaches about 50 per cent of the programme. Key skills training sessions are clearly linked to the key skills units. As with the care training, apprentices are able to catch up quickly on missed sessions. The rooms used for training are used for a variety of other purposes and so no displays can be set up specifically for apprentices. Some of the rooms are small and cluttered.

8. Key skills training is fully integrated with the vocational training. Key skills are taught and assessed at the same time as the NVQ qualification. The key skills study days allow apprentices to identify how the key skills link in with their work and how they can identify evidence. This evidence is gathered by a variety of methods, including exercises that have been devised to link in with workplace activities. Apprentices have a clear understanding of key skills and how they fit into the training programme and complement their NVQs.

9. The advanced modern apprenticeship training is fairly new to UHBT and only 15 young people have joined since it started. Initially, young people were recruited as foundation modern apprentices, with the intention that they would transfer to an advanced modern apprenticeship when their achievements showed them to be ready. More recently, young people have been recruited directly as advanced modern apprentices, starting on an NVQ at level 2 or 3, depending on the results of their initial assessment. Retention and achievement rates are poor. No apprentices have yet completed the full modern apprenticeship framework, less than 50 per cent have achieved an NVQ at level 2 and none an NVQ at level 3. Many apprentices leave the programme early. Some decide that they do not want to continue with a nursing career path but remain in employment and continue with work-related studies under a less demanding timescale. Some leave to begin training as nurses or to take up other posts within the UHBT. For some apprentices, the recruitment process has not been appropriate. New Deal clients originally progressed directly to advanced modern apprenticeships, but the low retention rates indicated that they were not fully prepared for the career path it entailed. The four-week NHS Gateway programme was developed and former New Deal clients are now able to make more informed choices about their career route within the health sector. Those apprentices still in training are making satisfactory progress towards completing the qualification framework.

10. The recording of progress reviews is inadequate. Apprentices meet the scheme co-ordinator every 12 weeks, or more often if a need has been identified. At this meeting, any problems or needs are identified and recorded and the apprentice's individual development plan is amended accordingly. These meetings are briefly recorded on a contact sheet and are not clearly identified as reviews. Some apprentices receive extra support from UHBT's staff, often of a pastoral nature, but this is not always recorded and there is no review of the effectiveness of additional assistance. Progress reviews are not used to set or monitor targets. The scheme co-ordinator talks regularly to workplace managers and supervisors about apprentices' progress but there is no formal input to the review process by these staff.

11. Some apprentices receive good support from the training department's staff, such as extra tutorials or more frequent workplace visits. Others have received less support. Shortages of staff in the department have contributed to this problem. The identification of the need for, and recent recruitment of, a roving assessor is helping to alleviate this situation. Most apprentices have work-based assessors. If an assessor leaves, another is recruited as soon as possible. Some assessors are well motivated and value the role that assessment has in the development of their workforce. Other assessors feel that the assessment duties are too onerous on top of their existing workload.

Foundation programmes

Grade 2

Programmes inspected	Number of learners	Contributory grade
New Deal	9	2

12. UHBT has a contract with the Employment Service to run two-week Gateway to Work courses. These start every three weeks. Seventeen courses have been run so far. Up to 26 clients are referred to each course and the average number starting each course is 12. There are currently nine clients. The course is designed to increase the number of clients getting jobs, to improve clients' employability and to prepare those who do not get immediate employment to choose the most appropriate New Deal option. There are two full-time staff; a scheme co-ordinator and a tutor. Visiting speakers are used to talk about local employment opportunities and the New Deal options. In 2000-01, out of 127 starters, 29 per cent found jobs within 13 weeks of the end of the course and 50 per cent completed the two-week course. Forty-six per cent returned to New Deal Gateway or moved on to one of the options. In 2001-02, out of 58 starters, nine are still in training. Twenty-four per cent gained employment, 48 per cent completed the two-week course and 10 per cent returned to the Gateway or moved on to one of the options. Foundation programmes were not included in the self-assessment report.

The following table shows the achievement and retention rates available up to the time of inspection.

New Deal										
New Deal (18-24)										
	1997-98		1998-99		1999-2000		2000-01		2001-02	
	No.	%	No.	%	No.	%	No.	%	No.	%
Number that started							127		0	0
Still in training							0	0	0	0
Gained job and/or planned learning completed							77	61	0	0
Gained job							37	29	0	0
Planned learning completed							64	50	0	0

STRENGTHS

- well-structured, comprehensive training programme
- excellent use of different training techniques
- good individual support for clients

WEAKNESSES

- inappropriate facilities

OTHER IMPROVEMENTS NEEDED

- ongoing development of handbooks and overhead projector slides
- better system for monitoring clients' progress
- wider range of work tasters

13. There is a well-structured, comprehensive training programme which covers all the requirements of the Gateway to Work contract. The days are broken down into short sessions with different activities planned for each session, so that clients' interest is maintained. The order of the sessions has recently been revised following feedback from clients. The programme includes an induction, work on health and safety issues, an assessment of basic skills and comprehensive jobsearch activities. A team-building exercise takes place on the second day. The clients are very supportive of each other and often identify employment opportunities for other members of their group. Visiting speakers widen clients' ideas of the possibilities for work and visits to the jobcentre ensure that all clients carry on applying for jobs. Clients develop more self-confidence during the course. On the final day, they each give a short presentation to the group.

14. The two members of staff are competent and experienced tutors. They use a wide variety of training techniques, adapting them well to the needs of the group and of individual clients, and maintain clients' interest. They successfully encourage clients to contribute to discussions. Clients are given well-produced written notes to accompany the session. The tutors make creative use of games, especially in demonstrating the importance of communication.

15. The combination of two tutors and visiting speakers ensures that individual attention can be given to clients. The tutors meet at the end of each day and discuss the activities that have taken place and clients' individual needs. They adjust their plans for the following day accordingly. Individual appointments are made for interviews and, where appropriate, a tutor will go with the clients. Clients are encouraged to talk about their interests. The tutors then work with them, both individually and in the group, to encourage them to consider all the options that are available. There is a good balance between individual and group work and individual and group support. Clients can gain experience of different areas of work within UHBT, but, for health and safety reasons, there are no opportunities for external work tasters. A tutor is to attend a health and safety course to gain the expertise necessary to set up and monitor external work tasters.

16. The main room used for Gateway to Work courses is small and cramped. The furniture consists of chairs with writing boards, rather than tables. This means that clients have to balance all their paperwork on a small surface. It is difficult to use newspapers

or a variety of reference documents. The size of the room means that the chairs all have to face forward and although the tutors attempt to put them into a circle, some clients have to turn round if they want to talk with other members of the group. There is no space to lay out resources and there is little wall space to put up posters and information. Another room can be booked if the group size is large and this is available for the next few months. This weakness was identified in the self-assessment report and more appropriate accommodation will be permanently available soon. The handbooks are comprehensive but are all text and are difficult for clients with poor literacy to use. They do not contain space for notes. Some overhead projector transparencies are laid out well and have graphics on them. Others have too much text.

17. The client monitoring system consists of a text document identifying the client and what happens to them when they leave the programme. Although information is kept on ongoing developments over the next 13 weeks, this is not included on the monitoring sheet and the picture of the client is not complete.

LEADERSHIP AND MANAGEMENT

Grade 3

18. The UHBT is split into several divisions. The vocational development department is part of the organisation and strategic development division. A full-time member of staff manages the department, although four days a week are spent in other areas of UHBT. A full-time deputy manager is responsible for the day-to-day running of the department. This position is currently vacant. The management team is assisted by 13 members of staff. Three of these positions are vacant. The department is set annual corporate objectives, which are reviewed every month by the acting director of human resources. A staff appraisal system operates for senior management. This is to be extended to all staff by March 2002. Financial management is the responsibility of the head of the vocational development department and monitored by line managers. UHBT has a range of policies covering equal opportunities. UHBT operates a complaints procedure and the vocational development department has an appeals procedure, which has been agreed by the awarding bodies. There are some quality assurance procedures. Targets are set for the retention, progression and achievement of trainees to meet the contractual requirements of the local LSC. UHBT is working toward the Investors in People award. It produced its most recent self-assessment report in May 2001.

STRENGTHS

- good development of collaborative partnerships
- ongoing development of NHS Gateway
- highly developed team support
- diversity of policies for equal opportunities

WEAKNESSES

- no systematic analysis of data
- no structured staff training in equal opportunities
- informal quality assurance structure
- weak self-assessment

OTHER IMPROVEMENTS NEEDED

- use of exit questionnaires with learners
- more effective involvement of area managers

19. The UHBT has worked hard to develop internal and external collaborative partnerships. Members of staff from other divisions within UHBT contribute to the training given to the advanced modern apprentices by designing and running specific training sessions on topics such as health and safety. A training and education centre has recently been set up. The head of vocational development works closely with the Employment Service's Large Organisations Unit to look at the role of the UHBT in

working with unemployed adults. UHBT is also developing links with other NHS Trusts, a local education consortium and the local authority. An example of this collaboration is an open day arranged for prospective NHS Gateway clients. A long-term project is being negotiated with a local university to enable a smooth transition from achievement of NVQs at level 3 to higher education. These partnerships ensure that the opportunities for learners are maximised and that the good practice developed by the UHBT is shared with other organisations.

20. The NHS Gateway is aimed at New Deal clients and has been developed and evaluated by the UHBT. It enables clients to join the UHBT in a range of occupations, including cleaning and portering as well as nursing. It started in 1998, as part of a move to develop the cadet training programme through New Deal. Several programmes were run by external providers, with an increasing level of success, until July 2000. The UHBT then won the contract to run New Deal Gateway. The programme now lasts for four weeks, after which time the client is able to make an informed decision as to whether to continue with training and employment opportunities within the UHBT. This programme is continuing to be developed in response to both clients' needs and the recruitment and progression needs of the UHBT.

21. The training team are located in small offices on the Selly Oak site. They have an exceptionally close working relationship and are highly supportive of each other's roles. An example of this occurred when a potentially disruptive New Deal client returned to the offices after being referred back from the Gateway to Work programme to the Employment Service. All the staff worked together to make sure that the client was satisfied with the final outcome. The style of leadership and management in the vocational development department is instrumental in developing this close relationship.

22. Systems for recording data are inadequate. Information is kept to meet the contractual requirements of the local LSC and the Employment Service, but there is little monitoring and evaluation of retention and achievement data. Accurate statistical data were not produced until the final stages of the inspection. Low retention rates on the advanced modern apprenticeship programme are recognised by the training team, but no detailed analysis of the reasons behind this problem has been done. Many advanced modern apprentices leave their training early, but there is no structured system for following up these young people. UHBT uses exit questionnaires for all the staff who leave its employment. The vocational development department does not use an exit questionnaire with learners who leave training programmes early. Little data are available to identify reasons for leaving the programme, although information is often obtained as a result of informal discussions. Views of the area managers are not actively sought as part of the review and assessment process.

Equality of opportunity

Contributory grade 3

23. UHBT has a very detailed policy covering equal opportunities in employment. It covers all the relevant legislation, identifies the nature of discrimination, outlines the responsibilities of the employer and employees and details how the policy will be implemented and monitored. There is a separate harassment policy, which is widely and effectively promoted. The vocational development department has produced an equal opportunities statement for the advanced modern apprentices and trainees taking NVQ programmes, which refers to the main policy and then sets out the requirements for the NVQ and assessment process including the appeals procedure. This is laid out clearly and written in simple language so that everyone can understand it. New Deal clients are given a simpler version of the equal opportunities policy and their rights and responsibilities are discussed during the course.

24. Learners are fully aware of equal opportunities and their rights and responsibilities. The NVQ training in care includes equal opportunities topics. Study days are used to discuss equal opportunities issues, often by using case studies. The UHBT advertises its vacancies widely and appropriately in the local community. It collects data on learners' gender, ethnicity and disability, but there is little analysis of this data to compare the retention and achievement rates of different groups. Staff are fully updated on new legislation and current thinking on equal opportunities issues, usually in writing, but few staff have been on specific training courses and no training is planned.

Quality assurance**Contributory grade 4**

25. Quality assurance practices meet the requirements of the awarding bodies. Roles and responsibilities are defined, but only to a limited extent. The UHBT relies too heavily on informal systems of recording, monitoring and evaluation across the training provision. This works because the staff work closely together and discuss issues as they arise and how to deal with them. All staff are aware of what is required and what they should do if there are any problems. None of the strengths identified during the inspection related specifically to the quality assurance arrangements within the department. There is no formal quality assurance structure. A number of quality assurance policies do exist, such as an internal verification strategy. This is a comprehensive strategy. Detailed records of internal verification are kept and identified actions are carried out on time. Assessment practices are satisfactory. However, the policies do not cover every aspect of training. Limited details are included on the monitoring, evaluation and subsequent action-planning of training. Many of the procedures comprise solely of guidance issued by the awarding bodies and the Qualifications and Curriculum Authority. Many of the policies are undated, so it is impossible to determine whether action plans contained within them are due for review.

26. The self-assessment report produced by UHBT did not give a good description of the training provision and was insufficiently self-critical. The significance of poor retention and achievement rates was severely underestimated. Staff were consulted as part of the self-assessment process, but the views of workplace managers and learners were not sought.

Good Practice

A support group has recently been established to aid communication between apprentices following similar programmes across the two hospital sites. The group is being developed by one of the assessors and is supported by nursing auxiliaries across different areas of the UHBT. Information boards are being set up at each site to aid the communication process and a quarterly newsletter is planned.

An A3-sized laminated poster has been produced outlining the policy on harassment at work and the role of the contact officers. There are photographs of the officers and a brief description of their work role and background, including family and hobbies. This poster is displayed around the hospital and acts as a reminder of the rights of the individual and enables employees to select the most appropriate contact officer.