

University Hospitals Plymouth NHS Trust

Monitoring visit report

Unique reference number: 2495048

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Inspection dates: 6–7 February 2019

Type of provider: Independent learning provider

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Monitoring visit: main findings

Context and focus of visit

From October 2018, Ofsted undertook to carry out monitoring visits to all newly directly funded providers of apprenticeship training provision which began to be funded from April 2017 or after by ESFA and/or the apprenticeship levy. This monitoring visit was undertaken as part of those arrangements and as outlined in the 'Further education and skills inspection handbook', especially the sections entitled 'Providers newly directly funded to deliver apprenticeship training provision' and 'Monitoring visits'. The focus of these visits is on the three themes set out below.

University Hospitals Plymouth NHS Trust (the Trust) started delivering levy-funded apprenticeships in October 2017. This was in addition to apprenticeships delivered by other providers. At the time of the monitoring visit, 70 apprentices were in employment with the Trust and are on a standard apprenticeship programme for level 2 healthcare support workers.

Themes

How much progress have leaders made in ensuring that the provider is meeting all the requirements of successful apprenticeship provision?

Reasonable progress

Leaders' and managers' use of their previous experience of delivering apprenticeships, in partnership with external providers, is proving successful in the establishment of the level 2 healthcare apprenticeship. Managers have secured appropriate resources and are promoting a strong learning culture.

Leaders' and managers' ambitions for their staff, apprentices and the organisation are evident in the way all act out the values they seek to promote. Staff are aware of the importance of the apprenticeship programme within the workforce development plans of the Trust. Clear values, including putting patients first and a care ethos, are at the centre of the provision.

The Trust board sets a clear vision, and leaders use their expertise well to support managers. For example, following concern about support for clinical staff in managing the apprenticeship programme, managers had the board's endorsement to increase the number of clinical staff to improve the training experience of apprentices.

Leaders' and managers' commitment is demonstrated in the way apprentices benefit from a worthwhile, well-organised programme that meets all the requirements of an apprenticeship. Apprenticeship managers, ward managers and matrons ensure that they communicate effectively about apprentices' training and welfare. They are clear about their responsibilities for ensuring that apprentices receive a good level of

support with their skill development and obtain release from duties to attend study days and off-the-job training.

Leaders' and managers' development of the apprenticeship programme is carefully considered so that it fits in very well with the overall workforce strategy. The Trust's apprenticeship strategy is part of a comprehensive plan for learning and development to meet the needs of the NHS. Ward managers and the apprenticeship team work hard to help apprentices progress. They talk of apprentices as 'members of the family'.

Managers maintain a high commitment to learning from practice and are keen to improve. They review the programme frequently and make good use of ward managers' feedback. For example, following changes in staff in October 2018, a review took place that resulted in a longer induction period, so that apprentices receive better preparation before they start work on the wards.

Although managers directly involved in the apprenticeship programme have a good understanding of the requirements of apprenticeships, their senior managers are less knowledgeable. Senior managers are right to be aware that they need to improve their knowledge and learn more about the standards required for successful apprenticeship provision. They have effective plans to strengthen the governance arrangements, but it is too early to see the impact.

Managers check the quality of the provision and apprentices' progress through discussions with staff and apprentices and in reviewing assignments, but observations have temporarily halted. Managers do not check sufficiently on the quality of the teaching, learning and assessment provided by the subcontractor that delivers functional skills. Consequently, they are not fully aware of the quality of training that apprentices receive.

What progress have leaders and managers made in ensuring that apprentices benefit from high-quality training that leads to positive outcomes for apprentices? Reasonable progress

A thorough recruitment process and assessment of English and mathematical skills ensures that apprentices are on the right programme. In the first few months of the apprenticeship, a few apprentices joined an apprenticeship that was too easy for them. Newer managers ensure that this no longer happens. They now take apprentices' previous experience and qualifications into account effectively when deciding the appropriate level of apprenticeship.

Staff know their apprentices well and check frequently if they need any extra help to be successful. Tutors quickly identify those who are not making their expected progress, and provide effective additional support, such as one-to-one teaching. This accelerates their progress, so that in most cases apprentices make good progress at developing new skills and knowledge. The apprentice team communicates well with

ward staff to make sure that apprentices have good support and receive their off-the-job training requirement.

Staff collect and evaluate apprentices' and their ward managers' views and use the findings to make improvements. Following such feedback, they introduced a new model of delivery that now includes a four-week teaching block at the beginning of the programme. Apprentices then complete a supported four-week ward placement before starting their roles on the wards. As a result, they gain the confidence and knowledge they need, and quickly become useful members of ward staff.

Tutors are clinically experienced and knowledgeable. They use their experience well to teach apprentices the skills and knowledge they need on the wards, such as how to take patients' temperatures and make necessary clinical observations. Ward managers are sensitive to the needs of the apprentices and take care when introducing them to work that is potentially traumatic or emotionally stressful.

Apprentices gain valuable new skills and knowledge early in their apprenticeships. For example, they can take catheter specimens, remove peripheral cannulas and use ketone meters for diabetic assessments. They gain new knowledge, such as the importance of infection control, patient nutrition and the use of personal protective equipment. Apprentices achieve a good standard of written work in their assignments. Tutors provide apprentices with useful feedback on their assignments, so that apprentices know what they need to do to improve.

Apprentices become ambitious, gain confidence and make a significant contribution to the work of the hospital. For example, apprentices confidently liaise with parents of young patients. They communicate effectively with patients who have had strokes and may not be able to talk. Most apprentices plan to stay working at the hospital when they complete the apprenticeship, and a few want to progress to registered nurse training or other related medical professions.

Apprentices enjoy attending functional skills lessons and they improve their skills in English and mathematics. Those studying mathematics calculate formulae using specific techniques and relate these to their work. Most apprentices pass their functional skills examinations at their first attempt.

The apprenticeship team monitors apprentices' progress effectively. Staff identify and support apprentices who fall behind for any reason. Where appropriate, staff direct apprentices to wider support systems, such as occupational health or the chaplaincy. They make suitable arrangements to ensure that apprentices' final assessments take place in a timely manner.

Although staff monitor apprentices' knowledge and skills development well, they do not have a clear overview of apprentices' progress in English and mathematics. Consequently, managers and apprentices cannot easily check on how well apprentices achieve all aspects of their apprenticeship. Managers are aware of these

shortcomings, including the instability of the system, and are planning a new process to monitor apprentices' development better than previously.

How much progress have leaders and managers made in ensuring that effective safeguarding arrangements are in place? Reasonable progress

Managers give the welfare and safety of staff, including apprentices, a high priority. They follow procedures on safe recruitment carefully in accordance with government guidance. Appropriate safeguarding policies are in place and staff promote them well. Staff training includes manual handling, risk management and bullying and harassment. Staff and apprentices are well aware of their duty in relation to safeguarding themselves and others.

Managers have good working relationships with the local authority and the police. They share information well and staff receive good information about local safeguarding protocols.

Staff and apprentices have good methods to report safeguarding concerns, such as bullying. They have access to independent 'freedom to speak up' guardians, who listen to concerns and follow up with senior managers if necessary. Apprentices know how to report concerns about themselves or patients and are confident that staff will resolve issues promptly.

Managers have introduced a 'Prevent' duty training implementation policy that includes staff training. However, staff do not recall their training or fully understand the dangers of radicalisation and extremism. Apprentices have training on the 'Prevent' duty at induction, but they do not remember the important messages. Consequently, apprentices have little awareness of the 'Prevent' duty and insufficient understanding of local issues, or radicalisation or extremism.

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