



## **Programme Major Modification report**

## **Section one**

Programme provider name:	University of Sunderland		
In partnership with: (Associated practice learning	South Tyneside and Sunderland NHS Foundation Trust		
partners involved in the delivery of the programme)	Newcastle upon Tyne Hospitals NHS Foundation Trust		
programme)	Northumbria Healthcare NHS Foundation Trust		
	Sunderland Clinical Commissioning Group		
	County Durham and Darlington NHS Foundation Trust		
	Cumbria Northumberland Tyne and Wear NHS Foundation Trust		
	Harrogate and District NHS Foundation Trust		
Programmes reviewed:	Pre-registration nurse qualification leading to Registered Nurse – Adult Registered Nurse – Children's Registered Nurse - Learning Disabilities Registered Nurse - Mental Health  Nursing Degree Apprenticeship (NDA) route NDA Adult NDA Children's NDA Learning Disabilities NDA Mental Health  Dual award - pre-registration nursing Dual award - adult/mental health Dual award - adult/children's Dual award - adult/learning disabilities Dual award - mental health/learning disabilities Dual award - mental health/children's Dual award - learning disabilities/children's		
Title of current	Not applicable		
programme(s):	DCo (Hono) Children and Voung Doomle's Number		
Title of modified programme(s) if changed:	BSc (Hons) Children and Young People's Nursing Practice		





Academic levels of current programme:				
Registered Nurse – Adult	England, Wal ☐ Level 5		lreland ☐ Level 7	
	SCQF  Level 8	Level 9	Level 10	Level 11
Registered Nurse –	England, Wal		reland Level 7	
Children's	SCQF Level 8	Level 9	Level 10	Level 11
Registered Nurse - Learning	England, Wal		reland Level 7	
Disabilities	SCQF  Level 8	Level 9	Level 10	Level 11
Registered Nurse - Mental Health	England, Wal		reland Level 7	
	SCQF  Level 8	Level 9	Level 10	Level 11
NDA Adult	England, Wal	es, Northern l	reland Level 7	
	SCQF Level 8	Level 9	Level 10	Level 11
NDA Children's	England, Wal		reland Level 7	
NDA GIIIGIEII S	SCQF  Level 8	Level 9	Level 10	Level 11
	England, Wal			
NDA Learning Disabilities	SCQF ☐ Level 8	Level 9	Level 10	Level 11
NDA Mental Health	England, Wal	es, Northern   Level 6	reland Level 7	
	SCQF  Level 8	Level 9	Level 10	Level 11



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Dual award - adult/mental	England, Wal		Ireland ☐ Level 7	
health	SCQF  Level 8	Level 9	Level 10	Level 11
	England, Wal			
Dual award - adult/children's	SCQF Level 8	Level 9	Level 10	Level 11
Dual award - adult/learning	England, Wal			
disabilities	SCQF  Level 8	Level 9	Level 10	Level 11
Dual award - mental	England, Wal	es, Northern Level 6		
health/learning disabilities	SCQF Level 8	Level 9	Level 10	Level 11
Dual award - mental health/children's	England, Wal		lreland ☐ Level 7	
	SCQF  Level 8	Level 9	Level 10	Level 11
Dual award - learning	England, Wal	es, Northern Level 6	Ireland ☐ Level 7	
disabilities/children's	SCQF  Level 8	Level 9	Level 10	Level 11
Academic levels of modified programme(s) if changed:				
Registered Nurse – Adult	England, Wal			
	SCQF Level 8	Level 9	Level 10	Level 11
Registered Nurse – Children's	England, Wal			
	SCQF Level 8	Level 9	Level 10	Level 11



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Registered Nurse - Learning	England, Wal		lreland ☐ Level 7	
Disabilities	SCQF  Level 8	Level 9	Level 10	Level 11
Registered Nurse - Mental	England, Wal			
Health	SCQF Level 8	Level 9	Level 10	Level 11
NDA Adult	England, Wal		Ireland Level 7	
	SCQF  Level 8	Level 9	Level 10	Level 11
NDA Children's	England, Wal		Ireland ☐ Level 7	
NDA Children's	SCQF Level 8	Level 9	Level 10	Level 11
	England, Wal		Ireland Level 7	
NDA Learning Disabilities	SCQF Level 8	Level 9	Level 10	Level 11
	England, Wal		Ireland ☐ Level 7	
NDA Mental Health	SCQF Level 8	Level 9	Level 10	Level 11
Dual award - adult/mental	England, Wal		Ireland ☐ Level 7	
health	SCQF Level 8	Level 9	Level 10	Level 11
	England, Wal		lreland ☐ Level 7	
Dual award - adult/children's	SCQF  Level 8	Level 9	Level 10	Level 11
Dual award - adult/learning disabilities	England, Wal		lreland ☐ Level 7	



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	SCQF  Level 8	Level 9	Level 10	Level 11
	England, Wa	les, Northern I	reland	
	Level 5	Level 6	Level 7	
Dual award - mental	0005			
health/learning disabilities	SCQF	Level 9	Level 10	Level 11
	□ reveio	□ Level 9	□ revei io	□ reve⊓ i
	England, Wa	les, Northern I	reland	
	Level 5	Level 6	Level 7	
Dual award - mental				
health/children's	SCQF		□ I aval 40	
	Level 8	Level 9	Level 10	Level 11
	England, Wa	les, Northern I	reland	
		Level 6		
Dual award - learning				
disabilities/children's	SCQF			
	Level 8	Level 9	Level 10	Level 11
Programme start date:				
RN – Adult				
RN – Children's	26 April 202	<u>.</u>		
RN - Learning Disabilities	'			
RN - Mental Health				
NDA Adult				
NDA Children's				
NDA Learning Disabilities				
NDA Mental Health				
Dual award - Adult/Mental				
Health				
Dual award -				
Adult/Children's				
Dual award - Adult/Learning Disabilities				
Dual award – Mental				
Health/Learning Disabilities				
Dual award – Mental				
Health/Children's				
Dual award – Learning				
Disabilities/Children's				
Date of approval:	21-22 Septe	ember 2020		
Type of Modification:	Visit			
QA visitor(s):	Registrant \	/isitor: Rache	l Game	
· · · · · · · · · · · · · · · · · ·	Lay Visitor		. Janis	





### **Section two**

## Summary of review and findings

The University of Sunderland (UoS) is an approved education institution (AEI). UoS school of nursing and health sciences (the school) is seeking a modification of their pre-registration nursing programme originally approved on 27 January 2020. The modification is to add a children's nursing route titled BSc (Hons) children and young people's nursing practice approved against the Standards for pre-registration nursing programmes (SPNP) (Nursing and Midwifery Council (NMC), 2018) and Future nurse: Standards of proficiency for registered nurses (FNSPRN) (NMC, 2018). The route presented for approval is a full-time three-year BSc (Hons) degree which incorporates eligibility to register as a nurse with the NMC in children's nursing.

This modification visit was undertaken via remote means due to the COVID-19 pandemic.

Programme documentation and the modification process confirm evidence of partnership working between the AEI and key stakeholders. These include practice learning partners (PLPs), service users and carers (SUCs) (known by the UoS as patient, carer and public involvement (PCPI)) and students who contribute to the development and co-production of the programme. Partnership working is evident at both operational and strategic levels, with evidence of regular meetings and working groups during the development of the programme, which are scheduled to continue throughout the academic year to ensure both theory and practice is delivered at a high standard.

UoS collaborates with two other AEIs in the region. This partnership group provides a consistent approach to the implementation of the Standards for student supervision and assessment (SSSA) (NMC, 2018) with PLPs in the region. The pan-north east electronic practice assessment document (NEEPAD) and ongoing achievement record (OAR) developed by the group will be used in the proposed route for practice assessment. Plans are in place for preparing practice supervisors, practice assessors and academic assessors.

The school senior team, in partnership with PLPs, confirm any issues arising from Care Quality Commission (CQC) quality reviews which may impact on the practice learning environment are managed through a systematic partnership process.

The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) and the SSSA (NMC, 2018) aren't met at programme level as conditions apply.





The programme is recommended to the NMC for approval subject to two specific conditions. Two recommendations are made. The university review panel made one condition.

Update 20 October 2020:

The AEI has provided documentary evidence which demonstrates NMC conditions one and two are met.

Evidence is provided to confirm condition three is met.

The programme is recommended to the NMC for approval.

Recomme	nded outcome of the approval panel
Recommended outcome to the NMC:	Programme is recommended to the NMC for approval
to the NWC.	Programme is recommended for approval subject to specific conditions being met
	Recommended to refuse approval of the programme
Conditions:	Effective partnership working: collaboration, culture, communication and resources:
Conditions.	None identified
	Selection, admission and progression:
	None identified
	Practice learning:
	Condition two: The AEI must develop an implementation plan related to how they will prepare practice assessors for the children's nursing route to understand the role of the academic assessor in the SSSA, student progression and how the collaborative process will work. (SSSA R8.1.4, SPNP R4.2)
	Assessment, fitness for practice and award:
	Condition one: The AEI must formalise the allocation of spoke placements for children's nursing students to ensure they get experience of all four fields of nursing practice. (SFNME R2.2, SPNP R2.4, R3.1)





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	Education governance: management and quality assurance:
	Condition three: The AEI must correct typographical errors, inconsistency in terminology and where appropriate update reading lists. (University condition)
Date condition(s) to be met:	3 November 2020
Recommendations to enhance the programme delivery:	Recommendation one: Include a statement in the student handbook reminding students to inform the programme team of any changes to their good health and character as they occur. (SPNP R1.3)
	Recommendation two: Review simulation cases and interprofessional learning (IPL) to further incorporate children and young people's nursing practice. (SFNME R3.3)
Focused areas for future monitoring:	The inclusion of children and young people's nursing practice in simulation and IPL.
	Academic resource engaged in delivery of the children's nursing route.

# Programme is recommended for approval subject to specific conditions being met

### Commentary post review of evidence against conditions:

The programme team have provided documentary evidence that demonstrates how spoke placements are formalised in the programme to ensure students get experience in all four fields of nursing practice.

Condition one is now met.

The programme team have provided a development plan and associated presentations to evidence how practice assessors for the children's nursing route will be prepared to understand the role of the academic assessor in the SSSA and how they will collaborate with them in regard to student progression.

Condition two is now met.

The AEI have confirmed that the university condition is met.



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AEI Observations	Observations have been made by the education institution YES NO
Summary of observations made, if applicable	
Final recommendation made to NMC:	Programme is recommended to the NMC for approval  Recommended to refuse approval of the programme
Date condition(s) met:	20 October 2020

## **Section three**

## **NMC Programme standards**

Please refer to NMC standards reference points:

Standards for pre-registration nursing programmes (NMC, 2018)

Future nurse: Standards of proficiency for registered nurses (NMC, 2018) Standards framework for nursing and midwifery education (NMC, 2018)

Standards for student supervision and assessment (NMC, 2018)

The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates (NMC, 2015 updated 2018)

QA framework for nursing, midwifery and nursing associate education (NMC, 2018)

**QA Handbook** 

## **Partnerships**

The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.

Please refer to the following NMC standards reference points for this section:

Standards framework for nursing and midwifery education (NMC, 2018)

### Standard 1: The learning culture:

R1.12 ensure programmes are designed, developed, delivered, evaluated and coproduced with service users and other stakeholders

R1.13 work with service providers to demonstrate and promote inter-professional learning and working

## Standard 2: Educational governance and quality:





R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders

R2.4 comply with NMC <u>Standards for student supervision and assessment</u>

R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes

R2.6 ensure that recruitment and selection of students is open, fair and transparent and includes measures to understand and address underrepresentation

R2.7 ensure that service users and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection

## **Standard 3: Student empowerment:**

R3.3 have opportunities throughout their programme to work with and learn from a range of people in a variety of practice placements, preparing them to provide care to people with diverse needs

R3.16 have opportunities throughout their programme to collaborate and learn with and from other professionals, to learn with and from peers, and to develop supervision and leadership skills

R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning R3.18 have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice.

### Standard 4: Educators and assessors:

R4.7 liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment

R4.9 receive and act upon constructive feedback from students and the people they engage with to enhance the effectiveness of their teaching, supervision and assessment

R4.10 share effective practice and learn from others

#### Standard 5: Curricula and assessment:

R5.4 curricula are developed and evaluated by suitably experienced and qualified educators and practitioners who are accountable for ensuring that the curriculum incorporates relevant programme outcomes

R5.5 curricula are co-produced with stakeholders who have experience relevant to the programme

R5.14 a range of people including service users contribute to student assessment

Standards for student supervision and assessment (NMC, 2018)

## Standard 1: Organisation of practice learning:





R1.4 there are suitable systems, processes, resources and individuals in place to ensure safe and effective coordination of learning within practice learning environments

R1.7 students are empowered to be proactive and to take responsibility for their learning

R1.8 students have opportunities to learn from a range of relevant people in practice learning environments, including service users, registered and non-registered individuals, and other students as appropriate

## **Standard 2: Expectations of practice supervisors:**

R2.2 there is support and oversight of practice supervision to ensure safe and effective learning

## Standard 3: Practice supervisors: role and responsibilities:

R3.3 support and supervise students, providing feedback on their progress towards, and achievement of, proficiencies and skills

# Standard 4: Practice supervisors: contribution to assessment and progression:

R4.3 have sufficient opportunities to engage with practice assessors and academic assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising

#### Standard 7: Practice assessors: responsibilities:

R7.9 communication and collaboration between practice and academic assessors is scheduled for relevant points in programme structure and student progression

### Standard 9: Academic assessors: responsibilities:

R9.6 communication and collaboration between academic and practice assessors is scheduled for relevant points in programme structure and student progression

## Findings against the standard and requirements

Provide an <u>evaluative summary</u> about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders.

Documentary evidence and the modification process demonstrate effective collaboration with service users, students and PLPs in the development of the children's nursing route. A partnership agreement between the AEI and PLP organisations from the NHS and independent sector demonstrates collaboration at a strategic and operational level. Consultation documents and notes from meetings show stakeholders are involved with programme development. PLPs describe collaborative working to ensure the programme meets the needs of the future workforce. PLPs tell us they work in partnership with the AEI in the recruitment and selection of students. Discussion with the programme team and





PLPs confirms they adopt a partnership approach, with shared responsibility for theory and practice supervision, learning and assessment. This includes clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of the programme.

The AEI have a faculty wide model for engagement of PCPI. The programme team tell us they've engaged with professors from other AEIs to see how they've incorporated children and young people as service users on their programmes. They're looking at including children as service users and have contacted scouting groups, local support groups and sought opinions about the programme from some of the academic staff's children.

A strategy for SUC involvement (known as PCPI at UoS) is in place with opportunities embedded within the curriculum for PCPI participants to be involved in teaching, learning and assessment. Participants in PCPI activities attend dedicated training days, ensuring that those involved are aware of key issues such as equality and diversity, feedback and communication skills as well as specific responsibilities of the roles they adopt in assessment, recruitment and teaching. Regular communication takes place between AEI staff and those involved in PCPI activities to inform individuals of potential opportunities for further involvement in programmes. A recent initiative aimed at keeping PCPI participants informed and up to date is the development of online social coffee mornings which have proved useful in not only providing updates from AEI staff but also allowing the sharing of information between participants involved in PCPI activities.

A PCPI strategic reference group is in place, made up of PCPI participants involved with programmes and faculty staff, meeting four times a year. This provides a forum for matters concerning PCPI activity and oversees these activities within faculty governance structures. PCPI participants tell us they receive active encouragement to get involved in initiatives and that their voice is heard and acted upon. Academic staff tell us a key focus for future development of PCPI activity will be on broadening and deepening the engagement of PCPI participants in programmes.

PCPIs tell us they're involved in the development of the programme. They attended curriculum stakeholder events, and their opinion was sought from a parents' perspective on what they would want from a children's nurse. The AEI, students and PCPIs confirm SUC involvement in the recruitment and selection of students acting as panel members and listening to group discussions. We found PCPIs to be enthusiastic about their contribution on the programme. They tell us they're involved in objective structured clinical examinations (OSCEs), workshops, assessment of clinical skills, sharing their experience with students and providing feedback to students on the programme.

Students confirm that they had early involvement in the design of the programme, being actively involved in discussion groups about how the programme should be designed. The students give examples of where their feedback has been listened





to and acted upon in developing the new programme. Staff tell us that the involvement of students was based on a principal of co-production, particularly about IPL and simulation. Assessment was a key focus for consideration in discussion with students focusing on the optimal amount of assessment and tasks involved in assessment completion. The curriculum planning group has SUC and student representation to ensure the SUC and student perspectives contribute to ongoing module development.

Students say they evaluate their learning in both academic and practice settings. Practice placement facilitators (PPFs) and educational leads confirm that feedback comments are available to the placement area in a timely fashion via email or 'ARC' the placement management system. Educational audits are carried out by PPFs in collaboration with an academic member of staff. All findings are shared at a tripartite meeting with the PPF, clinical link tutor and the ward manager to share the report, outcomes and any actions. A quarterly report on audit results, issues and actions is shared with the AEI. Action plans are held within 'ARC' and regularly monitored by the PPF.

A student success strategy is in place which has a key focus for identifying responsibilities relating to student representation. Classes of students have student representatives who play a key role in raising issues and feeding back on aspects of the student voice in relation to their learning. Students and staff tell us the representation process works well and that there's effective training and support for the student representative role which is overseen by the university's student union. A student coordinator role is also in place which provides a direct link between students/student representatives and university governance committees. This ensures the student voice is heard at university level and that there's dissemination of information back to students, on action and responses to issues raised by students.

Robust policies and processes are in place for escalating concerns related to practice learning or unsafe practice and managing them in a prompt manner. Students confirm that they're supported by academic and practice staff in raising issues and are informed of outcomes. The programme team tell us they attend various collaborative meetings with PLPs and others that share the same practice learning environments, establishing joint ways of dealing with any issues which may arise. Any issues which may arise around CQC or other regulatory reporting are escalated to the PPF and shared with the programme team. Discussions at the modification visit confirm the effectiveness of the collaborative processes. Adverse issues can also be raised via the PLP, PPF, link lecturer, students, practice supervisor, or practice assessor at any point to trigger quality assurance processes. The programme team tell us that if students are removed from placement areas because of adverse incidents, the area is always re-audited before students are allocated there again.

PLPs tell us they've collaborated with the AEI in developing the plan for implementation of the SSSA. The programme team attend partnership events to





prepare PLPs for the new curriculum and new roles. There are plans in place for preparing practice supervisors, practice assessors and academic assessors. The NEEPAD, which is developed with other local AEIs, will be used for practice assessment.

The programme team tell us IPL is fundamental to the programme and that due to the number of health-related courses in the AEI, there are opportunities for the students to share simulated practice with medical students, occupational therapists, physiotherapists, social workers and pharmacists. A range of opportunities for IPL exist, with a broad strategy in place for developing and broadening further IPL initiatives within both the AEI and practice settings. IPL activities are timetabled either in the simulation suite or mock ward. Due to COVID-19 IPL is currently being undertaken via online resources. The programme team have developed cases for students to review with allied health profession students. The samples shown to us on 'Canvas', the UoS virtual learning environment (VLE), are mainly adult nursing scenarios. It's therefore recommended that the programme team review simulation cases and IPL to further incorporate children and young people's nursing practice. (Recommendation two).

The programme team and students tell us about opportunities students have for IPL, both within the university and during practice learning, involving other students on health and social care programmes. There are recently introduced initiatives with medical students as well as students on other programmes such as sport. We're assured the opportunities discussed at the modification visit will be available to students on the new children's nursing route.

Assurance is provided that the AEI works in partnership with their practice learning
partners, service users, students and all other stakeholders as identified in
Gateway 1: Standards framework for nursing and midwifery education
MET ⊠ NOT MET □
Assurance is provided that the AEI works in partnership with their practice learning
partners, service users, students and all other stakeholders as identified in
Gateway 2: Standards for student supervision and assessment
MET ⊠ NOT MET □
B (
Post Event Review
Post Event Review Identify how the condition is met:
Identify how the condition is met:
Identify how the condition is met: N/A
Identify how the condition is met: N/A
Identify how the condition is met:  N/A  Date condition(s) met:
Identify how the condition is met:  N/A  Date condition(s) met:  N/A





## Student journey through the programme

## Standard 1: Selection, admission and progression

Approved education institutions, together with practice learning partners, must:

- R1.1 Confirm on entry to the programme that students:
- R1.1.1 are suitable for their intended field of nursing practice: adult, mental health, learning disabilities and children's nursing
- R1.1.2 demonstrate values in accordance with the Code
- R1.1.3 have capability to learn behaviours in accordance with the Code
- R1.1.4 have capability to develop numeracy skills required to meet programme outcomes
- R1.1.5 can demonstrate proficiency in English language
- R1.1.6 have capability in literacy to meet programme outcomes
- R1.1.7 have capability for digital and technological literacy to meet programme outcomes.
- R1.2 ensure students' health and character are sufficient to enable safe and effective practice on entering the programme, throughout the programme and when submitting the supporting declaration of health and character in line with the NMC's health and character decision-making guidance. This includes satisfactory occupational health assessment and criminal record checks
- R1.3 ensure students are fully informed of the requirement to declare immediately any cautions or convictions, pending charges or adverse determinations made by other regulators, professional bodies and educational establishments, and that any declarations are dealt with promptly, fairly and lawfully
- R1.4 ensure the registered nurse responsible for directing the educational programme or their designated registered nurse substitute are able to provide supporting declarations of health and character for students who have completed a pre-registration nursing programme
- R1.5 permit recognition of prior learning that is capable of being mapped to the *Standards of proficiency for registered nurses* and programme outcomes, up to a maximum of 50 percent of the programme and comply with Article 31(3) of Directive 2005/36/EC (included in annexe one of programme standards document) R1.6 for NMC registered nurses permit recognition of prior learning that is capable of being mapped to the *Standards of proficiency for registered nurses* and programme outcomes that may be more than 50 percent of the programme R1.7 support students throughout the programme in continuously developing their abilities in numeracy, literacy, digital and technological literacy to meet programme outcomes. and
- R1.8 ensure that all those enrolled on pre-registration nursing programmes are compliant with Article 31(1) of Directive 2005/36/EC regarding general education length as outlined in annexe one in programme standards document.

  Standards framework for nursing and midwifery education specifically R2.6, R2.7, R2.8, R2.10





Proposed transfer of current students to the programme under review Demonstrate a robust process to transfer current students onto the proposed programme to ensure programme learning outcomes and proficiencies meet the Standards for pre-registration nursing programmes (NMC, 2018).

Proposed transfer of current students to the **Standards for student** supervision and assessment (NMC, 2018).

Demonstrate a robust process to transfer current students onto the **Standards for** student supervision and assessment (NMC, 2018).

## Findings against the standard and requirements

vide	nce provides assurance that the following QA app	roval criteria	are met:
•	Evidence that selection processes ensure entrants onto the programme suitable for the intended field of nursing practice and demonstrate values and have capability to learn behaviours in accordance with the Code. Evidence of service users and practitioners involvement in selection processes. (R1.1.1, R1.1.2, R1.1.3)		values de.
	processes. (rem., rem., rem.)	YES 🖂	NO 🗌
•	Evidence of selection processes, including statements literacy, numeracy, values-based selection criteria, ed standard required, and progression and assessment slanguage proficiency criteria specified in recruitment p. R1.1.7).	lucational en strategy, Eng	try Ilish
	•	YES 🖂	NO 🗌
•	There is evidence of occupational health entry criteria immunisation plans, fitness for nursing assessments, checks and fitness for practice processes detailed (R	Criminal reco	
	oneone and himese for practice processes detailed (it	YES 🖂	NO 🗌
•	Health and character processes are evidenced includ to applicants and students, including details of periodi review timescales. Fitness for practice processes evid information given to applicants and students are detail	ic health and denced and lled (R1.3)	character
		YES 🔀	NO 🗌
	R1.3 is met. Students complete a self-declaration of g character at the end of each part of the programme. Treminded and sent announcements via the VLE during learning module to immediately inform the programme changes that impact on their health and character. The included in the student handbook and its recommendation one)	hey're verbag each practies team if ther is information	illy ice e are any n isn't





•	Processes are in place for providing supporting declarations by a registered nurse responsible for directing the educational programme (R1.4) YES $\boxtimes$ NO $\square$		
evide	de an <u>evaluative summary</u> from your documentary analysis and nce AND discussion at the approval visit to demonstrate if assurance is ded that the QA approval criteria below is met or not met		
•	Evidence of recognition of prior learning processes, mapped against programme outcomes at all levels and against academic levels of the programme up to a maximum of 50 percent of the programme and comply with Article 31(3) of Directive 2005/36/EC (R1.5)  MET NOT MET		
R1.5 is met. Unchanged since original approval in January 2020. Current recognition of prior learning (RPL) processes will apply to the new route.			
•	Evidence that for NMC registered nurses recognition of prior learning is capable of being mapped to the <i>Standards of proficiency for registered nurses</i> and programme outcomes (R1.6)  MET  NOT MET		
	s met. Unchanged since original approval in January 2020. Current RPL sses will apply to the new route.		
•	Numeracy, literacy, digital and technological literacy mapped against proficiency standards and programme outcomes. Provide evidence that the programme meets NMC requirements, mapping how the indicative content meets the proficiencies and programme outcomes.		
	Ongoing achievement record (OAR) and practice assessment document (PAD) are linked to competence outcomes in numeracy, literacy, digital and technological literacy to meet programme outcomes. Detail support strategies for students throughout the programme in continuously developing their abilities in numeracy, literacy, digital and technological literacy to meet programme outcomes (R1.7)		
	MET ⊠ NOT MET □		
entry i meet l asses Micros techno engag	s met. Programme documentation and the approval process confirm the requirements for literacy, digital and technological literacy and numeracy NMC requirements. The AEI tell us digital literacy for candidates is initially sed via an online application. Interviews are currently being held using soft Teams, giving the candidates opportunity to demonstrate their digital and plogical literacy ability. At the start of the programme a dedicated lecturer les with all students regarding digital technology and the use of the VLE. This gressive and integrated within each module. Support services within the		





library offer personal and group support for digital technology and a dedicated information technology (IT) support line offers guidance relating to new technologies.

There's detailed mapping of the programme outcomes to the FNSPRN (NMC, 2018) which identifies indicative content and includes programme outcomes linked to numeracy, literacy, digital and technological literacy. Documentary analysis confirms technology is fundamental to the programme. Students are supported throughout the programme to develop these skills from the AEI library support services, the IT helpline and a dedicated lecturer.

Numeracy skills are addressed within the modules. Students are provided with practice formative assessments to develop numeracy skills. This is in preparation for completion of the summative health numeracy assessments, via safeMedicate, an online medicine calculations resource, in each year of the programme. These assessments are attached to the clinical experience modules in each year. In year one, students must achieve an 80 percent pass, in year two a 90 percent pass and in year three students must achieve a 100 percent pass. A maths support tutor is available in the library for all students.

The NEEPAD and OAR are linked to competence outcomes in numeracy, literacy, digital and technological literacy. Student progression and achievement in practice learning are recorded in the NEEPAD and OAR. Students are supported throughout the programme to develop these skills by the AEI library team.

### Evidence provides assurance that the following QA approval criteria are met:

 Evidence of processes to ensure that all those enrolled on pre-registration nursing programmes are compliant with Directive 2005/36/EC regarding general education length (R1.8)

YES 🛛	NO 🗌
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## Proposed transfer of current students to the programme under review

From your documentary analysis and your meeting with students, provide an <u>evaluative summary</u> to confirm how the *Standards for pre-registration* nursing programmes and *Standards of proficiency for registered nurses* will be met through the transfer of existing students onto the proposed programme.

This is a new route in the pre-registration nursing programme so there are no students to transfer.

Proposed transfer of current students to the <u>Standards for student</u> <u>supervision and assessment (SSSA)</u> (NMC, 2018).





From your documentary analysis and your meetings at the approval visit confirm if students will be transferring to the SSSA, and if so that they have informed choice and are fully prepared for supervision and assessment.

This is a new route in the pre-registration nursing programme so there are no students to transfer. The programme is already approved against the SSSA. Assurance is provided that Gateway 1: Standards framework for nursing and *midwifery education* relevant to selection, admission and progression are met YES  $oxed{oxtime}$ NO 🗌 **Outcome** Is the standard met? MET |NOT MET Date: 22 September 2020 Post event review Identify how the condition(s) is met: N/A Date condition(s) met: N/A Revised outcome after condition(s) met: NOT MET MET N/A

### Standard 2: Curriculum

Approved education institutions, together with practice learning partners, must:

- R2.1 ensure that programmes comply with the NMC *Standards framework for nursing and midwifery education*
- R2.2 comply with the NMC *Standards for student supervision and assessment* R2.3 ensure that programme learning outcomes reflect the *Standards of proficiency for registered nurses* and each of the four fields of nursing practice: adult, mental health, learning disabilities and children's nursing
- R2.4 design and deliver a programme that supports students and provides exposure across all four fields of nursing practice: adult, mental health, learning disabilities and children's nursing
- R2.5 state routes within their pre-registration nursing programme that allows students to enter the register in one or more of the specific fields of nursing practice: adult, mental health, learning disabilities or children's nursing R2.6 set out the general and professional content necessary to meet the *Standards of proficiency for registered nurses* and programme outcomes R2.7 set out the content necessary to meet the programme outcomes for each field of nursing practice: adult, mental health, learning disabilities and children's nursing





R2.8 ensure that field specific content in relation to the law, safeguarding, consent, pharmacology and medicines administration and optimisation is included for entry to the register in one or more fields of nursing practice

R2.9 ensure the curriculum provides an equal balance of theory and practice learning using a range of learning and teaching strategies

R2.10 ensure that programmes delivered in Wales comply with legislation which supports use of the Welsh language

R2.11 ensure pre-registration nursing programmes leading to registration in the adult field of practice are mapped to the content for nurses responsible for general care as set out in Annexe V.2 point 5.2.1 of Directive 2005/36/EC (included in Annexe 1 of programme standards document)

R2.12 ensure that all pre-registration nursing programmes meet the equivalent of minimum programme length for nurses responsible for general care in Article 31(3) of Directive 2005/36/EC (included in Annexe 1 of programme standards document) R2.13 ensure programmes leading to registration in two fields of nursing practice are of suitable length to ensure proficiency in both fields of nursing, and R2.14 ensure programmes leading to nursing registration and registration in another profession, are of suitable length and nursing proficiencies and outcomes are achieved in a nursing context.

Standards framework for nursing and midwifery education specifically: R1.9, R1.13; R2.2, R2.14, R2.15, R2.18, R2.19; R3.1, R3.2, R3.4, R3.9, R3.10, R3.15, R 3.16; R5.1 - R5.16.

Standards for student supervision and assessment specifically: R1.2, R1.3, R1.7, R1.10, R1.11

## Findings against the standard and requirements

Eviden	ce provides assurance that the following QA app	roval criteria	are met
<ul> <li>There is evidence that the programme complies with the NMC S framework for nursing and midwifery education (R2.1)</li> </ul>			ndards
•	· · · · · · · · · · · · · · · · · · ·	YES 🖂	NO 🗌
<ul> <li>There is evidence that the programme complies with the NMC for student supervision and assessment (R2.2)</li> </ul>		the NMC Star	ndards
,	or student supervision and assessment (N2.2)	YES 🖂	NO 🗌
<ul> <li>Mapping to show how the curriculum and practice learning content reflet the Standards of proficiency for registered nurses and each of the four of nursing practice: adult, mental health, learning disabilities and children pursing (P2.2)</li> </ul>		our fields	
ı	nursing (R2.3)	YES 🖂	NO 🗌





Provide an <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met.

	children's nursing (R2.4)  MET □ NOT MET ▷
	four fields of nursing practice: adult, mental health, learning disabilities and
	will support students in both theory and practice to experience across all
•	There is evidence to show how the design and delivery of the programme

R2.4 is not met. Documentary evidence and the approval process confirm the design of the programme supports students in theory to experience all four fields of nursing practice.

Throughout the programme there's field specific theory modules and cross field modules. The programme team confirm the academic team has expertise from across the four fields of nursing practice. The programme team and PLPs tell us programme content supports students to experience theory and practice learning across all four fields of nursing during practice learning experiences. A hub and spoke model is used within the programme to ensure students gain practice learning experiences in each nursing field; the programme team tell us that students will access a two week spoke placement in adult, learning disability and mental health within the programme. Information relating to these isn't documented on the placement planner and the students when asked didn't understand what spoke placements were on their programme. The AEI must formalise the allocation of spoke placements for children's nursing students to ensure they get experience of all four fields of nursing practice. (Condition one)

Allocation of practice learning experiences is undertaken by the placements unit in the AEI using an online allocation system (ARC). PLPs are involved in the placement allocation process and can make adjustments accordingly. PLPs tell us they plan ahead for the full three years and work with ward managers to ensure placements provide the learning opportunities needed.

Evidence that programme structure/design/delivery will illustrate specific fields of practice that allows students to enter the register in one or more specific fields of nursing practice. Evidence of field specific learning outcomes and content in the module descriptors (R2.5)
 MET NOT MET

R1.5 is met. The programme specification for the BSc (Hons) route for children's nursing confirms the design and delivery illustrates the specific route and field of nursing practice and allows students to enter the register in one specific field of nursing practice. Module descriptors detail how students will achieve field specific learning outcomes, skills and knowledge across the programme. There's a placement plan for the children's nursing field route.





Evidence provides assurance that the following QA approval criteria are met: There is evidence that mapping has been undertaken to show that the programme meets NMC requirements of the Standards of proficiency for registered nurses (R2.6) YES 🖂 NO 🗆 There is evidence that mapping has been undertaken to set out the content necessary to meet the programme outcomes for each field of nursing practice: adult, mental health, learning disabilities and children's nursing (R2.7) YES 🖂 NO 🗌 Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met. There is evidence that mapping has been undertaken to ensure that field specific content in relation to the law, safeguarding, consent, pharmacology and medicines administration and optimisation is included for entry to the register in one or more fields of nursing practice (R2.8) MET |NOT MET R2.8 is met. There's mapping of the field specific content in relation to the law, safeguarding, consent, pharmacology and medicines administration and optimisation. The field specific modules evidence that content is related directly to the field of practice that the student is undertaking and that there are opportunities to apply learning to their chosen field in the cross-field modules. The programme structure demonstrates an equal balance of theory and practice learning. This is detailed in the designated hours in the module descriptors and practice learning allocations. A range of learning and teaching strategies are detailed in the programme specification, programme handbook and module descriptors with theory / practice balance detailed at each part of the programme and at end point. There are appropriate module aims, descriptors and outcomes specified. There is a practice allocation model for the delivery of the programme that clearly demonstrates the achievement of designated hours for the programme detailed. (R2.9) MET 🖂 NOT MET

R2.9 is met. The BSc (Hons) programme has an equal balance of theory and practice learning. Documentation provided demonstrates that the BSc (Hons) is three years in length and includes a minimum of 4,600 hours with a 50 percent split across theory and practice learning. 2,475 hours are attributed to theory and 2,400 hours are attributed to practice learning. The programme specification





evidences the programme has appropriate module aims and learning outcomes for each route within the programme.

Programme documentation and evidence from discussion with students and the programme team at the visit indicates a range of learning and teaching approaches across each year of the programme. Teaching, learning and assessment methods are outlined in the programme specification which highlight a variety of teaching strategies that balance interaction, simulation, online and classroom learning. Teaching strategies include lectures, simulation, action learning sets, eLearning, groupwork and workshops. Module descriptors evidence appropriate aims, descriptors and outcomes supported by a range of teaching and learning strategies. Programme planners show when students will be based in practice and practice placements are allocated using the 'ARC' system. Processes are in place to enable students to retrieve any unmet theory and practice hours due to absence or other reasons. Students confirm practice learning opportunities working with a range of health and social care professionals enable them to develop skills and expertise within their specialist fields.

The AEI sees simulation as a useful aspect of its approach to teaching and learning which complements other approaches detailed in the university's strategy for teaching and learning. The programme team tell us a key focus for simulation is in the topic areas of transferable skills and communication and interaction with others. Academic staff confirm that simulation hours are calculated within overall teaching/theory hours and that simulation is a key emphasis in both IPL activities and those aspects of teaching and learning which involve PCPI participants in students' learning. Staff also confirm that support mechanisms are in place which emphasise guidance and support to staff about how simulation can be embedded within programmes.

## Evidence provides assurance that the following QA approval criteria are met: Evidence to ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language (R2.10) NO 🗌 $N/A \times$ YES This programme is delivered in England. Evidence that the programme outcomes are mapped to the content for nurses responsible for general care and will ensure successful students met the registration requirement for entry to the register in the adult field of practice (R2.11) YES 🖂 NO 🗌 Evidence that the pre-registration nursing programme will meet the equivalent of minimum programme length for nurses responsible for general care in Article 31(3) of Directive 2005/36/EC (R2.12)





		IVIA	CDUNALD
	YES		ПО 🗌
<ul> <li>Evidence that programmes leading to registration in two fields of nursing practice are of suitable length to ensure proficiency in both fields of nursing (R2.13)</li> </ul>			
YES		NO 🗌	N/A 🖂
The programme for approval is for registration in a single fie	eld onl	y.	
<ul> <li>Evidence to ensure that programmes leading to nurs registration in another profession, will be of suitable proficiencies and outcomes will be achieved in a nur YES</li> </ul>	length sing co	and nur	sing
This isn't applicable to the programme for approval.			
Assurance is provided that Gateway 1: <u>Standards framewo</u> midwifery education relevant to curricula are met	rk for r	nursing	and
	YES		NO 🖂
There's no formal allocation of spoke placements to ensure children's nursing students experience all four fields of nursing practice. The programme team must provide evidence to demonstrate spoke placements are allocated to provide exposure across all nursing fields. (Condition one)			
Assurance is provided that Gateway 2: <u>Standards for student supervision and assessment</u> relevant to curricula and assessment are met  YES  NO			
Outcome			
Is the standard met? MET		NOT	MET 🖂
There's no formal allocation of spoke placements to ensure children's nursing students experience all four fields of nursing practice.			
Condition one: The AEI must formalise the allocation of spoke placements for children's nursing students to ensure they get experience of all four fields of nursing practice. (SFNME R2.2, SPNP R2.4, R3.1)			
Date: 22 September 2020 Post event review			
Identify how the condition(s) is met:			
Condition one: The programme team have provided a plant spoke placements to ensure students gain experience in all	ner tha	it has fo	
practice.			





Evidence: M21 trust three-year planner – children and young people's nursing, 10 August 2020			
Date condition(s) met: 20 October 2020			
Revised outcome after condition(s) met:	MET 🖂	NOT MET	
Condition one is now met.			

#### **Standard 3: Practice learning**

Approved education institutions, together with practice learning partners, must:

R3.1 provide practice learning opportunities that allow students to develop and meet the *Standards of proficiency for registered nurses* to deliver safe and effective care to a diverse range of people, across the four fields of nursing practice: adult, mental health, learning disabilities and children's nursing R3.2 ensure that students experience the variety of practice expected of registered nurses to meet the holistic needs of people of all ages

R3.3 provide practice learning opportunities that allow students to meet the communication and relationship management skills and nursing procedures, as set out in *Standards of proficiency for registered nurses*, within their selected fields of nursing practice: adult, mental health, learning disabilities and children's nursing R3.4 ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment and preregistration nursing programmes leading to registration in the adult field of practice comply with Article 31(5) of Directive 2005/36/EC (included in Annexe 1 of programme standards document)

R3.5 take account of students' individual needs and personal circumstances when allocating their practice learning including making reasonable adjustments for students with disabilities

R3.6 ensure students experience the range of hours expected of registered nurses, and

R3.7 ensure that students are supernumerary.

Standards framework for nursing and midwifery education, specifically: R1.1, R1.3, R1.5; R2.9, R2.11; R3.3, R3.5, R 3.7, R3.16; R5.1, R5.7, R5.10, R5.12

Standards for student supervision and assessment, specifically: R1.1 – R1.11

Findings against the standard and requirements





Provide an <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met.

 Evidence that the practice learning opportunities allow students to develop and meet the Standards of proficiency for registered nurses to deliver safe and effective care, to a diverse range of people, across the four fields of nursing practice: adult, mental health, learning disabilities and children's nursing (R3.1)

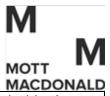
MET 🗌	NOT MET $oxed{ imes}$

R3.1 is not met. The programme documentation shows that students will have access to a variety of practice placements across the pan-Sunderland region. The AEI, in partnership with PLPs, have procedures in place to enable students to develop and meet the FNSPRN (NMC, 2018) and ensure students deliver safe and effective care, to a diverse range of people across the four fields of nursing practice whilst accessing children's nursing placements. A hub and spoke model is used within the programme to ensure students gain practice learning experiences in each nursing field; the programme team tell us that students will access a two week spoke placement in adult, learning disability and mental health within the programme. Information relating to these isn't documented on the placement planner and the students when asked didn't understand what spoke placements were on their programme. The AEI must formalise the allocation of spoke placements for children's nursing students to ensure they get experience of all four fields of nursing practice. (Condition one)

Students tell us they know how to raise and escalate concerns in practice learning environments. A flow chart identifying the process is in the NEEPAD. PLPs we met tell us they're aware of the process to follow if they have any concerns about a student's conduct and are aware of the UoS fitness to practise process.

Allocation of practice learning experiences is undertaken by the placements unit in the AEI using an online allocation system (ARC). Placement allocations can be adjusted, if necessary, to support individual student needs. The AEI uses a hub and spoke model for practice learning to enable students to meet specific learning outcomes they may not experience in their field specific placements. Students do four assessed practice learning experiences throughout the three-year BSc (Hons) programme and three spoke placements of two weeks in length across their programme to gain exposure to adult, mental health and learning disability nursing practice. All experiences are recorded in the NEEPAD. There's a collaborative partnership between the school and PLP organisations which, through a practice placement group, ensures that development and management of capacity and learning environments is maintained. Formal agreements are in place to facilitate this arrangement. Senior leaders in PLPs tell us they're confident they have capacity to support the children's nursing students in their practice areas.





Practice learning, progression and monitoring of attendance are recorded in the NEEPAD. Practice assessment is mapped against the FNSPRN and across the seven platforms and annexes. The NEEPAD is used to record achievement of the proficiencies and programme outcomes at specific points in the programme. It provides the opportunity for students to reflect on their learning and development of professional values and skills. SUCs provide feedback in the NEEPAD and students can record their reflection on this.

There is evidence of how the programme will ensure students experience
the variety of practice learning experiences to meet the holistic needs of
people in all ages. There are appropriate processes for assessing,
monitoring and evaluating these practice experiences (R3.2)

MET NOT MET

R3.2 is met. Documentary evidence and the modification process confirm the programme ensures that students experience a variety of practice learning experiences to meet the holistic needs of people in all ages. Programme documentation outlines initiatives which ensure that students experience a variety of practice learning environments. The programme team and PLPs tell us that these environments are of appropriate quality and will prepare students to meet the holistic needs of people across the lifespan. We found planning and allocation of practice learning experiences was done by the AEI placement unit in partnership with PLPs. Placements are used across the region within NHS, voluntary and private settings. Students we met confirm they've access to other care settings and are able to complete a variety of practice learning experiences that enhance the variety already provided. Students, practice supervisors and practice assessors identify and record learning opportunities, including those for IPL in the NEEPAD.

The OAR enables students to record, reflect on and evaluate their learning experiences. Student progress and achievement is communicated through the OAR. If a student isn't achieving in practice a meeting is held between the student, practice assessor and academic assessor and an action plan is agreed, identifying what the student needs to do to in order to achieve.

The AEI has processes in place to assess, monitor and evaluate practice learning experiences. These include educational audit and student evaluations of their practice experiences. An educational audit is undertaken every year and is completed by the PPF in partnership with the clinical link tutor. Outcomes of the audits are shared with academics, and for areas of improvement an action plan is developed in partnership. A quarterly report detailing audit results, issues and actions is shared with academics from UoS. The evidence demonstrates that reviews can be triggered outside of this timeframe in the event of a poor student evaluation or adverse CQC report. PLPs confirm that feedback comments are available to the placement area in a timely fashion and evaluations can be accessed through 'ARC', or if the PLP is a private or voluntary organisation they're shared by email.





Students tell us they evaluate their practice learning experiences via an online practice assessment and evaluation system (ARC) and tell us if they've any concerns, they speak to the link lecturer, personal tutor or practice assessor.

•	Evidence that the practice learning opportunities allow students to meet the
	communication and relationship management skills and nursing
	procedures, as set out in the Standards of proficiency for registered nurses
	within their selected fields of nursing practice: adult, mental health, learning
	disabilities and children's nursing (R3.3)

disabilities and children's nursing (R3.3)

MET ☑ NOT MET ☐

R3.3 is met. Programme documentation and the modification process confirm that students experience appropriate practice learning opportunities to enable them to develop communication and relationship management skills and the nursing procedures as set out in the FNSPRN (NMC, 2018) within their field of nursing practice.

The mapping document shows where communication and relationship management skills are taught in the AEI. Practice learning experiences require students to demonstrate communication and relationship management skills within a range of nursing procedures. This will be assessed by practice assessors and evidenced in the NEEPAD.

Practice supervisors and practice assessors support development in communication and relationship management skills along with nursing procedures. The programme team developed a mapping tool for nursing procedures in annexe B of the FNSPRN (NMC, 2018), identifying where these skills could be achieved in practice learning experiences. Where skills will be difficult to achieve these will be taught using simulation-based learning in the skills laboratory at the AEI in collaboration with PLPs.

There's a SUC feedback form in the NEEPAD that provides SUCs the opportunity to comment on the communication and relationship management skills of the student involved in their care.

 Evidence to ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment and pre-registration nursing programmes leading to registration in the adult field of practice comply with Article 31(5) of Directive 2005/36/EC (R3.4)

MET 🖂	NOT MET

R3.4 is met. Documentary evidence and the modification process confirm technology enhanced and simulation-based learning opportunities have been integrated throughout the programme and are used effectively and proportionately to support learning and assessment. Students have access to the Canvas VLE,





Microsoft Teams, clinical skills package online and safeMedicate. Digital and technological literacy are integrated into the modules and there's evidence that they're further developed across the duration of the programme. Technological and simulated-based skills learning opportunities are developed in partnership with PLPs and are mapped against the skills and procedures within annexes A and B of the FNSPRN (NMC, 2018).

SUCs describe their participation in simulation-based learning; students tell us they recognise the importance of this contribution as effective in preparation for practice learning.

• There are processes in place to take account of students' individual needs and personal circumstances when allocating their practice learning including making reasonable adjustments for disabilities (R3.5)

MET ⊠ NOT MET □

R3.5 is met. Processes are in place to take account of students' individual needs and personal circumstances. During open days and virtual university tours, academic staff and colleagues from student support are available to explore and explain the potential of support and adjustment available to all nursing students. From the beginning of the application process candidates are signposted to a variety of resources exploring reasonable adjustment and opportunities for support and guidance. This is further explored during the interview process and candidates are offered the opportunity to discuss privately any potential questions or support that can be managed within the programme.

Assessments for disabilities are undertaken at the start of the programme with regards to reasonable adjustments. Students are encouraged to disclose any disabilities from commencement of the programme to ensure early support. University wide student support services such as disability and dyslexia services are available, and students tell us they know of this support through their programme handbooks and from the programme team. Reports are received from disability services and occupational health; permission is sought from the student to share the information with the programme team. A disability support plan is in place for students requiring reasonable adjustments and, if students agree, are shared with PLPs so reasonable adjustments can be made. Students are encouraged to share information with PLPs when accessing practice learning experiences. If required, PLPs will do additional risk assessments for students with reasonable adjustments.

Discussion with the programme team, PLPs and students at the modification visit confirms students' individual needs and personal circumstances are considered when allocating practice learning experiences. Students we met spoke highly of support in practice learning environments and from academic staff in meeting their individual needs and circumstances. Evidence of reasonable adjustments in practice settings for students with individual needs is detailed in programme documentation. Students we met gave examples of when reasonable adjustments





had been made for them and tell us that they feel supported in this process by the AEI and practice staff.

The NEEPAD includes a prompt for the initial placement interview to encourage

students to discuss any reasonable adjustments required with their practice supervisor and/or practice assessor. PLPs we met provide assurance that they're involved with the reasonable adjustment process along with the student and this is made clear in the NEEPAD.		
Evidence provides assurance that the following QA	approval c	riteria are met:
<ul> <li>Evidence of how programme is planned to allow the range of hours expected of registered nurses days, night shifts planned examples) (R3.6)</li> </ul>		ur care, seven
Processes are in place to ensure that students a	are supernun <b>YES</b> [	
Assurance is provided that Gateway 1: Standards fram		ırsing and
<u>midwifery education</u> relevant to practice learning are m	et YES [	] NO⊠
There's no formal allocation of spoke placements to ensure children's nursing students experience all four fields of nursing practice. The programme team must provide evidence to demonstrate spoke placements are allocated to provide exposure across all nursing fields. (Condition one)		
Assurance is provided that Gateway 2: Standards for s	tudent super	rvision and
<u>assessment</u> relevant to practice learning are met	YES 🖂	
Outcome		
Is the standard met?	MET 🗌	NOT MET 🖂
There's no formal allocation of spoke placements to ensure children's nursing students experience all four fields of nursing practice.		
Condition one: The AEI must formalise the allocation of spoke placements for children's nursing students to ensure they get experience of all four fields of nursing practice. (SFNME R2.2, SPNP R2.4, R3.1)		
Date: 22 September 2020		
Post event review  Identify how the condition(s) is met:		





Condition one: The programme team have provided a planner that has formalised spoke placements to ensure students gain experience in all four fields of nursing practice.

Condition one is now met.		
Evidence: M21 trust three-year planner – children and young people's nursing, 10 August 2020		
Date condition(s) met: 20 October 2020		
Revised outcome after condition(s) met:	MET 🖂	NOT MET
Condition one is now met.		

## Standard 4: Supervision and assessment

Approved education institutions, together with practice learning partners, must:

R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC *Standards framework for nursing and midwifery education* 

R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC *Standards for student supervision and assessment* 

R4.3 ensure they inform the NMC of the name of the registered nurse responsible for directing the education programme

R4.4 provide students with feedback throughout the programme to support their development

R4.5 ensure throughout the programme that students meet the *Standards of proficiency for registered nurses* and programme outcomes for their fields of nursing practice: adult, mental health, learning disabilities and children's nursing R4.6 ensure that all programmes include a health numeracy assessment related to nursing proficiencies and calculation of medicines which must be passed with a score of 100%

R4.7 ensure that students meet all communication and relationship management skills and nursing procedures within their fields of nursing practice: adult, mental health, learning disabilities and children's nursing

R4.8 assess students to confirm proficiency in preparation for professional practice as a registered nurse

R4.9 ensure that there is equal weighting in the assessment of theory and practice R4.10 ensure that all proficiencies are recorded in an ongoing record of achievement which must demonstrate the achievement of proficiencies and skills set out in *Standards of proficiency for registered nurses*, and

R4.11 ensure the knowledge and skills for nurses responsible for general care set out in Article 31(6) and the competencies for nurses responsible for general care set out in





Article 31(7) of Directive 2005/36/EC for pre-registration nursing programmes leading to registration in the adult field of practice have been met. (included in Annexe 1 of programme standards document)

Standards framework for nursing and midwifery education, specifically: R2.11; R3.5, R3.6, R 3.8, R3.11, R3.13, R3.14, R3.17; R4.1, R4.2, R4.3, R4.4, R4.5, R4.6, R4.8, R4.11; R5.9

Standards for student supervision and assessment, specifically R4.1 - R4.11

## Findings against the standards and requirements

Provide an <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

•	There is evidence of how the programme will ensure how support,
	supervision, learning and assessment provided complies with the NMC
	Standards framework for nursing and midwifery education. (R4.1)
	MET ⊠ NOT MET □

R4.1 is met. Documentary evidence and the modification process confirm that support, supervision, learning and assessment complies with the SFNME (NMC, 2018). AEI academic regulations, moderation and external examiner processes ensure fairness of assessment processes. All students have a personal tutor assigned to them for pastoral care. Students tell us the personal tutor is supportive and provides a timely response to them if they require additional support. Students benefit from a range of both academic and practice staff to support their learning and these include the personal tutor, clinical link lecturer, academic assessor, practice supervisor, practice assessor and PPF. Students tell us they feel supported during practice learning experiences.

The NEEPAD outlines practice supervisor, practice assessor and academic assessor roles and responsibilities for practice learning. Role specifications within the staff practice learning handbook identify the responsibilities of the practice supervisor, practice assessor and academic assessor. There's a detailed process of how supervision and assessment in practice is undertaken. Partnership agreements are in place for resources, accountability and commitment to support students to meet the SFNME (NMC, 2018). Students are allocated a practice assessor and practice supervisor from a database held by the PPF. There are different models in practice with some PLPs allocating a different practice assessor for each placement or part and a different academic assessor for each part of the programme.

There are appropriately qualified and experienced academic staff from a range of clinical backgrounds to deliver the programme and support student learning and





assessment. To deliver the children's nursing specific content the AEI have employed two children's nursing lecturers. There are plans in place to employ more in the following academic year as students are recruited to the programme.

Educational audits undertaken in partnership between the AEI and PLPs ensure practice learning environments are approved against objective criteria. These include identifying sufficient and appropriately qualified and prepared practice supervisors and assessors to support student numbers.

 There is evidence of how the Standards for student supervision and assessment are applied to the programme. There are processes in place to identify the supervisors and assessor along with how they will be prepared for their roles. (R4.2)

MET  $\square$  NOT MET  $\boxtimes$ 

R4.2 is not met. The roles of practice supervisor and practice assessor are fully evidenced in the PLP and the student practice learning handbooks, which include how they will collaborate. The preparation of practice supervisors and practice assessors for their roles is delivered through an online package. The preparation content for practice supervisors, practice assessors and academic assessors is explicit within the SSSA documents and has been developed through collaborative processes. Mentors will take on the role of practice supervisor or practice assessor and will complete a self-declaration form mapped to the standards for each role. PLPs and the programme team confirm this at the modification visit.

The NEEPAD includes information on the roles of practice supervisor, practice assessor and academic assessor and guidance on the supervision and assessment process. It also contains action plans to enable students to identify and meet their learning needs. There's a robust process for the practice supervisor, practice assessor and academic assessor to work together. However, practice assessors we spoke to were unclear about the need to undertake discussion with the academic assessor about student progression to meet NMC requirements. The AEI must develop an implementation plan related to how they will prepare practice assessors for the children's nursing route to understand the role of the academic assessor in the SSSA, student progression and how the collaborative process will work. (Condition two)

Academic assessors are prepared for the role via training sessions within the AEI. Allocation of time to undertake the role is part of the AEI workload model and their progress in undertaking the role is discussed in staff appraisals. Academic assessors are required to be registered nurses and experienced academics with a clear understanding of the programme, field specific application of the proficiencies, the SSSA and assessment processes. The children's nursing lecturers will take on the academic assessor role for the children's nursing students, the programme team tell us a plan is in place to ensure the academic assessor is different for subsequent parts of the programme.





Evidence provides assurance that the following QA app	orovai c	riteria are met:
<ul> <li>There are processes in place to ensure the NMC is in the registered nurse responsible for directing the educed (R4.3)</li> </ul>		
()	YES 🗵	NO 🗌
Provide an <u>evaluative summary</u> from your documentary evidence AND discussion at the approval visit to demo provided that the QA approval criteria below is met or it	nstrate	
<ul> <li>There are processes in place to provide students with the programme to support their development. Format assessment strategy is detailed (R4.4)</li> </ul>		
		NOT MET
R4.4 is met. There's a range of summative and formative a programme which are detailed in the module descriptors. A and include online examinations, OSCEs, presentations and the programme students undertake formative assessments summative assessments. Mapping of assessments to module arning outcomes is explicit in the mapping documents and specification. Documentation shows that there are process students with feedback throughout the programme in both of Feedback information is included for each module in the program these have both formative and summative components.	ssessment of essays to prepare to program to program to be sin place theory are ogramments.	ents are varied s. Throughout are them for programme mme ce to provide and practice.
Students are provided with a three-year plan of their studies submission dates for assessed work as well as dates for seassessment boards where confirmation of student achiever tell us that these plans are useful, allowing them ample oppolacements. They confirm that they're able to make request adjustments where appropriate.	econd att ment is n portunitie	tempts and nade. Students es to plan for
SUCs, peers and other professionals give feedback to stud NEEPAD to aid student development. SUCs are part of the discussion for the OSCE assessment, providing feedback of	professi	ional
<ul> <li>There is appropriate mapping of the curriculum and placements to ensure throughout the programme the Standards of proficiency for registered nurses and p their fields of nursing practice: adult, mental health, I children's nursing (R4.5)</li> </ul> MET	at studen rogramm earning	nts meet the ne outcomes for
R4.5 is met. Appropriate mapping of the curriculum and pra		<del></del>
placements ensures students have opportunities to meet the		•



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programme outcomes for their field of nursing practice; adult, children and mental health and gain experience of the other fields including learning disabilities. Students tell us practice placements are varied, well managed and enable them to meet programme outcomes.

The NEEPAD is mapped to the FNSPRN and demonstrates that students will meet programme outcomes for their field of nursing practice: adult, mental health, or children's nursing.

	en's nursing.	it, montai no	aitii, Oi
Evide	ence provides assurance that the following QA app	roval criter	ia are met:
•	There is evidence that all programmes include a hea assessment related to nursing associate proficiencies medicines which must be passed with a score of 100	s and calcula	ation of
•	Processes are in place to ensure that students meet relationship management skills and nursing procedur nursing practice: adult, mental health, learning disabinursing (R4.7)	es within the	eir fields of
	naising (R4.7)	YES 🖂	NO 🗌
•	Evidence of processes to assess students to confirm preparation for professional practice as a registered in		
•	There is an assessment strategy with details and we all credit bearing assessments. Theory and practice and detailed in award criteria and programme handbe	weighting is	
•	There is evidence that all proficiencies are recorded achievement which must demonstrate the achievement skills as set out in the <i>Standards of proficiency for reg</i>	ent of proficie	encies and
•	Evidence to ensure the knowledge and skills for nurs general care set out in article 31(6) and the competer responsible for general care set out in article 31(7) of for pre-registration nursing programmes leading to re- field of practice have been met (R4.11)	ncies for nur Directive 20	ses 005/36/EC
		YES 🖂	NO 🗌
	rance is provided that Gateway 1: <u>Standards framewor</u>		g and
<u>miawi</u>	<u>ifery education</u> relevant to supervision and assessmen	it are met YES ⊠	NO 🗌





Assurance is provided that Gateway 2: <u>Standards for</u> assessment are met	<u>student supe</u>	<u>ervision and</u>
assessment are met	YES	$\square$ NO $\boxtimes$
Practice assessors tell us they're unclear how the collaborative process with academic assessors will work related to discussion of student progression. The AEI must develop an implementation plan related to how they will prepare children's nursing practice assessors to understand the role of the academic assessor in the SSSA, student progression and how the collaborative process will work. (Condition two)		
Outcome		
Is the standard met?		NOT MET $oxed{oxed}$
Practice assessors at the modification visit were uncleacademic assessor in the SSSA, related to student properties to the process will work.		
Condition two: The AEI must develop an implementation plan related to how they will prepare practice assessors for the children's nursing route to understand the role of the academic assessor in the SSSA, student progression and how the collaborative process will work. (SSSA R8.1.4. SPNP R4.2).		
Date: 22 September 2020		
Post event review		
Identify how the condition(s) is met:  Condition two: The programme team have provided a they'll prepare practice assessors for the children's nurole of the academic assessor in the SSSA, student p collaborative process will work.	ursing route t	to understand the
Condition two is now met.		
Evidence: Practice assessor/academic assessor development plan, September 2020 SSSA academic assessor preparation, undated SSSA practice PowerPoint presentation children UoS, undated		
Date condition(s) met: 20 October 2020		
Revised outcome after condition(s) met:	MET 🖂	NOT MET
Condition two is now met.		

## Standard 5: Qualification to be awarded





Approved education institutions, together with practice learning partners, must:

R5.1 ensure that the minimum award for a pre-registration nursing programme is a bachelor's degree, and

R5.2 notify students during and before completion of the programme that they have five years to register their award with the NMC. In the event of a student failing to register their qualification within five years they will have to undertake additional education and training or gain such experience as specified in our standards.

R2.20	
Findings against the standards and requirements	
Evidence provides assurance that the following QA approval criteria are met	t:
<ul> <li>The pre-registration nursing programme award to be approved is clearly identified in all programme documentation and is a minimum of a bachelor's degree (R5.1)</li> <li>YES ⋈ NO □</li> </ul>	S
Documentary evidence that the registered nurse responsible for directing the educational programme or their designated registered nurse substitute have advised students during and before completion of the requirement to register their qualification within five years of the award. (R5.2)  YES □ NO □	
Fall Back Award  If there is a fall-back exit award with registration as a nurse all NMC standards and proficiencies are met within the award  YES □ NO □ N/A □	
There's no fall-back exit award with registration as a nurse.	
Assurance is provided that the <u>Standards framework for nursing and midwifery</u>	
education relevant to the qualification to be awarded are met YES ☑ NO ☐	
Outcome	
Is the standard met?  MET  NOT MET	
Date: 22 September 2020	
Post event review	
Identify how the condition(s) is met:	
N/A	



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Date condition(s) met:		
( )		
N/A		
Revised outcome after condition(s) me	et: MET 🗌	NOT MET
` ,		<del></del>
N/A		





## Sources of evidence

The following documentation provided by the AEI/education institution was reviewed by the visitor(s):

Key documentation	YES	NO
Programme document, including proposal, rationale and	$\boxtimes$	
consultation		
Programme specification(s) include fields of nursing	$\boxtimes$	
practice: adult, mental health, learning disabilities and		
children's nursing		
Module descriptors	$\boxtimes$	
Student facing documentation including: programme	$\boxtimes$	
handbook		
Student university handbook	$\boxtimes$	
Practice assessment documentation	$\boxtimes$	
Ongoing record of achievement (ORA)	$\boxtimes$	
Practice learning environment handbook	$\boxtimes$	
Practice learning handbook for practice supervisors and	$\boxtimes$	
assessors specific to the programme		
Academic assessor focused information specific to the	$\boxtimes$	
programme		
Placement allocation / structure of programme	$\boxtimes$	
PAD linked to competence outcomes, and mapped	$\boxtimes$	
against Standards of proficiency for registered nurses		
Mapping document providing evidence of how the	$\boxtimes$	
education institution has met the Standards framework for		
nursing and midwifery education (NMC, 2018) (Gateway		
1)		
Mapping document providing evidence of how the	$\bowtie$	
Standards for student supervision and assessment (NMC,		
2018) apply to the programme(s) (Gateway 2)		
Mapping document providing evidence of how the		
education institution has met the Standards for pre-		
registration nursing programmes (NMC, 2018) (Gateway		
3)		
Curricula vitae (CV) for relevant staff	$\boxtimes$	
CV of the registered nurse responsible for directing the	$\boxtimes$	
education programme		
Registrant academic staff details checked on NMC		
website		
External examiner appointments and arrangements		
Written placement agreement(s) between the education	$\boxtimes$	
institution and associated practice learning partners to		



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support the programme intentions, including a signed supernumerary agreement.			
Written agreement(s) to support the programme		$\boxtimes$	
intentions between the education institution and employer partners for apprenticeship routes (if applicable).			
If you stated no above, please provide the reason and mitigation:			
No apprenticeship routes were considered as part of this modification therefore written agreements from employer partners weren't required.			
List additional documentation:			
M20 year one assessment planner, 10 March 2020			
Adult nursing interviews, 9 March 2020 Interview cycle adult, undated			
BSc (Hons) mental health and learning disability nursing interviews, 2019			
Accreditation of prior learning document, June 2020			
Response to initial draft programme approval report, September 2020 Programme handbook statement for supernumerary practice, undated			
Post visit evidence:			
M21 trust three-year planner – children and young people's nursing, 10 August 2020			
Practice assessor/academic assessor development plan, September 2020 SSSA academic assessor preparation, undated			
SSSA practice PowerPoint presentation children UoS, undated			
Academic development subcommittee course approval children and young people's nursing practice approved, 8 October 2020			
Nursing title change approved, 28 September 2020			
Additional comments: None identified			

# During the event the visitor(s) met the following groups:

	YES	NO
Senior managers of the AEI/education institution with		
responsibility for resources for the programme		
Senior managers from associated practice learning		
partners with responsibility for resources for the		
programme		
Senior managers from associated employer partners		$\boxtimes$
with responsibility for resources for the programme		
(applicable for apprenticeship routes)		
Programme team/academic assessors		
Practice leads/practice supervisors/practice assessors		
Students		
If yes, please identify cohort year/programme of study:		





Two second year pre-registration adult nursing students		
Three third year pre-registration adult nursing students		
Two third year pre-registration mental health nursing students		
One newly qualified adult nurse		
Service users and carers		
If you stated no above, please provide the reason and mitigation:		
No apprenticeship routes were considered as part of this modification there	fore	
there were no employer partners to meet with.		
Additional comments:		
None identified		

## The visitor(s) viewed the following areas/facilities during the event:

	YES	NO	
Specialist teaching accommodation (e.g. clinical skills/simulation suites)			
Library facilities			
Technology enhanced learning/virtual learning environment			
Educational audit tools/documentation	$\boxtimes$		
Practice learning environments	$\boxtimes$		
If yes, state where visited/findings: Remote visit via video links to: South Tyneside and Sunderland Royal Hospital Great North Children's Hospital			
System regulator reports reviewed for practice learning partners			
If yes, system regulator reports list CQC report City Hospitals Sunderland NHS Foundation Trust, 23 August 2018			
If you stated no above, please provide the reason and mitigation:			
Additional comments: None identified			

## **Mott MacDonald Group Disclaimer**

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Issue record			
Final Report			
Author(s):	Rachel Game	Date:	24 September
	Doug Carr		2020
Checked by:	lan Felstead-Watts	Date:	4 October 2020
Submitted by:	Amy Young	Date:	11 November
_			2020
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			2020