



Nursing and Midwifery Council Quality Assurance Review

Major Modification Report for:

**Pre-registration nursing associate qualification
leading to:**

Nursing Associate

Coventry University

May 2025

Contents

Key institutional and programme details	1
Executive summary	2
Conditions and recommendations	4
Conditions	4
Recommendations for enhancement.....	4
Statements of good practice.....	4
Explanation of findings for Part 3	5
1: Selection, admission and progression	5
2: Curriculum	11
3: Practice learning.	16
4: Supervision and assessment	19
5: Qualification to be awarded.....	22

Key institutional and programme details

Name and location of Approved Education Institution (AEI)	Coventry University School of Health and Care Priory Street Coventry CV1 5FB				
AEI/EI Institution Identifier [UKPRN]	10013214				
Name and location of programme delivery partner(s) if not the AEI/EI noted above	N/A				
Name of new employer partners for apprenticeships	There are no new employer partners.				
Approval type	Major modification				
Name of programme					
NMC programme title	AEI programme title (in full)	Academic level(s)	Apprentice-ship	Full-time	Part-time
Nursing Associate	FdSc Nursing Associate Direct Entry Full Time	England <input checked="" type="checkbox"/> Level 5	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Nursing Associate	Foundation Degree Nursing Associate	England <input checked="" type="checkbox"/> Level 5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Proposed programme start date	15 September 2025				
Standard(s) under assessment	<input type="checkbox"/> Part 2: Standards for student supervision and assessment <input checked="" type="checkbox"/> Part 3: Standards for pre-registration nursing programmes Note that the AEI has taken an institutional approach to Part 2: Standards for student supervision and assessment and therefore compliance with Part 2 has been confirmed through a previous review.				
Date of visit	8 May 2025				
Visitor team	Registrant Visitors: Mr Adam Bennett Mrs Elizabeth Gormley-Fleming Lay Visitor: Professor John Pymm				

Executive summary

Quality Assurance Reviews (QARs) are undertaken for the specific purpose of making recommendations to the Nursing and Midwifery Council (NMC) in relation to the approval (or otherwise) of the above-named programme(s) or in relation to the approval (or otherwise) of major modifications to the above-named programme(s). Reviews follow the Gateway approach to programme approvals and major modifications, as outlined in QAA Guidance for Approved Education Institutions and Education Institutions on NMC Quality Assurance Reviews.

Reviews involve a period of desk-based analysis with the opportunity for NMC visitors to request further information, evidence or clarification and a conjoint visit with the Approved Education Institution (AEI) or Education Institution (EI) programme approval panel. All evidence submitted by the AEI or EI is reviewed by the visitors.

Visits enable both the NMC visitors and the AEI or EI programme approval panel to gather further evidence and clarifications to inform their judgements and make recommendations about the AEI or EI ability to meet the NMC standards. Visits will normally include meetings with a range of stakeholders such as students, people who use services and carers, employers, practice learning partners, the programme team and senior managers.

For programme approvals all standards within Part 3: Standards for pre-registration nursing associate programmes are reported upon. For major modifications only those Part 3 standards impacted by the modification are reported upon. The visitor team confirms with the AEI/EI which Part 3 standards are in scope for a major modification.

Following a review, a draft report is shared with the AEI/EI for the purposes of confirming factual accuracy before the report is finalised.

The conjoint visit with Coventry University's approval panel took place on 8 May 2025.

Context for the review

This review was conducted to approve the Coventry University (CU) Pre-registration Nursing Associate programme for which it has undertaken a periodic review to ensure that the programme continues to be effective, current and robust. The programme is moving from a traditional semester delivery (where students study three 20-credit modules concurrently) to block delivery with six entry points in each academic year. This change has triggered the current moderation process. The delivery pattern for theory and practice has been reviewed as has pedagogy, learning outcomes, indicative content and assessment. The assessment strategy has been revised, and all modules have been reviewed.

CU has ongoing processes to involve stakeholders in annual quality monitoring and development processes and there is documentary evidence of meetings with stakeholders including an NHS Head of Professional Nurse Education, hospital Practice Facilitators and Practice Education & Development Leads, Nurse Education Team Managers, and Senior Nurse Practice Placement Facilitator to discuss the modifications to the programme; there is also evidence of their participation in the ongoing development work associated with the changes to the programme. During the visit, the staff and stakeholder groups confirmed to the visitor team their involvement in and co-production of the programme modifications.

Stakeholders, including people who use services and carers (PSCs) have been involved in the redevelopment and in the planned operation for this nursing associate programme. This includes PSCs who are involved in Objective Structures Clinical Examinations (OSCEs) and

on other classroom sessions such as forum theatres. Feedback from PSCs on the nursing associate's performance is obtained in the Practice Assessment Document (PAD).

The visitor team met with a range of senior staff, programme development and teaching staff, and with practice assessors (PAs) and practice supervisors (PSs) from the practice learning partners (PLPs) and employer partners (EPs). They also met current students from a range of programmes and years, and representatives from CU's PSCs group. Current EPs and PLPs were present from:

- Guy's and St Thomas' NHS Foundation Trust
- George Eliot Hospital NHS Trust
- Coventry and Warwickshire Partnership NHS Trust
- York and Scarborough Teaching Hospitals NHS Foundation Trust
- Tees, Esk and Wear Valleys NHS Foundation Trust
- Humber Teaching NHS Foundation Trust.

The **final recommendation** made by the visitor team to the NMC is as follows:

Programme is recommended to the NMC for approval. The programme meets all standards and requirements and enables students to achieve stated NMC standards of proficiency and learning outcomes for theory and practice.

The findings of the visitor team's review are explained in more detail in the following sections. This includes a summary of any conditions of approval and confirmation of whether these have been satisfactorily addressed.

Conditions and recommendations

The **provisional judgement** of the visitor team following the visit was as follows:

Programme is recommended to the NMC for approval - the programme meets all standards and requirements and enables students to achieve stated NMC standards of proficiency and learning outcomes for theory and practice.

Conditions

Conditions				
No.	Condition details	Specific standard(s) not met	NMC only/ Joint	AEI/EI only
	None			

Recommendations for enhancement

Recommendations				
No.	Recommendation	Specific standards	NMC only/ Joint	AEI/EI only
	None			

Statements of good practice

Statements of good practice relating to the NMC standards			
No.	Details	Specific standard	NMC only/ Joint
GP1	The innovative approach to block delivery of the programme, which allows students to focus on one module and one assessment at a time. The use of standardised dates makes linking the teaching of different programmes much easier, and enables a mix of field-specific, cross-field and interdisciplinary modules in the programmes leading to real breadth of experiences.	2.4	Joint

Explanation of findings for Part 3

1: Selection, admission and progression

Approved education institutions, together with practice learning partners, must:		Met	Not Met	Met after conditions	Not applicable to this major modification
1.1	<p>Confirm on entry to the programme that students:</p> <p>1.1.1 meet the entry criteria for the programme as set out by the AEI and are suitable for nursing associate practice</p> <p>1.1.2 demonstrate values in accordance with the Code</p> <p>1.1.3 have capability to learn behaviours in accordance with the Code</p> <p>1.1.4 have capability to develop numeracy skills required to meet programme outcomes</p> <p>1.1.5 can demonstrate proficiency in English language</p> <p>1.1.6 have capability in literacy to meet programme outcomes</p> <p>1.1.7 have capability for digital and technological literacy to meet programme outcomes.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3	Ensure students are fully informed of the requirement to declare immediately any police charges, cautions, convictions or conditional discharges, or determinations that their fitness to practise is impaired made by other regulators, professional bodies and educational establishments, and ensure that any declarations are dealt with promptly, fairly and lawfully.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.4	Ensure that the registered nurse or registered nursing associate responsible for directing the educational programme or their designated registered nurse substitute or designated registered nursing associate substitute, are able to provide supporting declarations of health and character for students who have completed a pre-registration nursing associate programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.5	Permit recognition of prior learning that is capable of being mapped to the Standards of proficiency for nursing associates and programme outcomes, up to a maximum of 50 percent of the programme. This maximum limit of 50 percent does not apply to applicants to pre-registration nursing associate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	programmes who are currently a NMC registered nurse without restrictions on their practice.				
1.6	Support students throughout the programme in continuously developing their abilities in numeracy, literacy and digital and technological literacy to meet programme outcomes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Recognition of prior learning metrics

The maximum limit of recognised prior learning (RPL) that can be accepted is 50% as per the NMC guidance on maximum permitted accreditation of prior learning.

There is an exception to this RPL for applicants to pre-registration nursing associate courses who are currently an NMC-registered nurse without restrictions on their practice. The 50% restriction does not apply to these applicants.

Findings

1. The visitor team considered a range of evidence, including the programme selection criteria, recruitment process and entry requirements. During the visit, the visitor team met the Deputy Vice-Chancellor (Curriculum) as well as the faculty senior management team, the programme development team, students, and representatives of PSCs.
2. In considering Standards 1.1, 1.2 and 1.4, the visitor team reviewed documentation and spoke to stakeholders about the recruitment process. While the recruitment process is unchanged through the modification, the approach was considered in light of the change to block delivery of the programme, which is a major departure from the previous delivery in semesters. It was confirmed that arrangements remain appropriate.
3. The FD Nursing Associate programme is one of a range of courses delivered by the School of Health and Social Care at CU. The entry requirements are clearly set out, by pathway, on the university website and in CU's academic regulations. Specific admission requirements are documented in Part A of the course specification documentation and the apprenticeship admission process is detailed in the CU Apprenticeship Operational Handbook.
4. Robust admission processes, delivered in partnership with practice partners, are in place to ensure that students meet the entry requirements. Applicants are required to meet the entry criteria before being invited for an interview which ensures that all eligible applicants are given an equal opportunity to apply. The programme operates with an agreed interview schedule, and all applicants are asked standardised questions to maintain fairness and consistency. These relationships include an extensive network with the Integrated Care Board (ICB) and help to ensure fairness and consistency in the recruitment process, as well as enabling CU to use practice learning allocation gaps where these are underused by other providers.
5. Apprenticeship recruitment is undertaken in conjunction with EPs, which is underpinned by a clearly articulated practice governance framework that starts at the outset of the apprentice student learner journey. This collaborative approach ensures that recruitment and selection of students is open, fair and transparent and includes measures to understand and address underrepresentation as detailed in the Part 1: Standards framework.

6. In considering Standard 1.1.2, the visitor team found that applicants are assessed by means of a Values-Based Recruitment Framework. The NHS values and the Coventry Capabilities Framework have been mapped against the NHS '6Cs' to illustrate how these are supporting the selection and recruitment of suitable applicants. Interview questions are reviewed by the School of Health and Care Service User and Carer Engagement (SUCE) to ensure they meet the school's value-based recruitment principles.
7. CU has produced a bank of interview questions for the Nursing Associate interview in collaboration with practice partners across all partner organisations. These interview questions are mapped to the NMC (2018) Code and NHS Values. Each applicant is assessed on their verbal communication skills and defined aspects of the values-based recruitment process and applicants are scored on their personal response.
8. In considering Standard 1.1.3, the visitor team found that the interview and selection process is designed to help determine whether candidates have the capabilities to learn behaviours required by the Code. The interview process is informed by the School of Health and Care Equality, Diversity and Inclusion (EDI) training process for student recruitment interviews, which ensures that staff are appropriately prepared to conduct interviews in a fair and transparent manner, without discrimination based on any protected characteristic. This course training plan is mapped against the Living in Modern Britain values (LiMB) in line with the apprenticeship standards and there is a detailed plan in the course specification of how these values will be taught progressively throughout the course.
9. In considering Standard 1.1.4, the visitor team found that entry requirements include GCSE Maths grade 4/C (or equivalent) or Functional Skills level 2 (or equivalent) for international qualifications. Direct entry applicants follow the normal CU process, and apprenticeship applications are initially received and screened by the EP. Applicants identified as not having GCSE Maths or English or equivalent will be supported to undertake a functional skills course through North Warwickshire and South Leicester College. The Coventry University group responsible for apprenticeship provision, Better Futures, also screens all applicants to ensure course entry requirements are met as part of the on-boarding process as outlined within the Nursing Associate draft training plan.
10. At the request of CU's employer organisations, candidates complete a numeracy assessment as part of their interview activities. Those candidates that are not successful at this assessment are supported within their organisations to further develop their skills and can be reassessed for future cohorts. On-programme dedicated maths support is provided through CU's SIGMA service, thereby ensuring continuous support as required by the individual. During the course, learners use the Safe Medicate platform, which provides them with a range of opportunities to acquire key numerical skills related to safe nursing practice.
11. In considering Standard 1.1.5, the visitor team found that entry requirements include GCSE English grade 4/C (or equivalent) or Functional Skills level 2 (or equivalent) for international qualifications. Applicants identified as not having GCSE English or equivalent are supported to undertake a functional skills course at North Warwickshire or South Leicester College and an online learning package is created to suit the learner's needs.
12. Applicants whose first language is not English are normally required to have IELTS of 7.0, with no component less than 6.5 to ensure that on entry to the programme, applicants have an appropriate level of English writing, reading, listening and

speaking to support their learning and progression through the course. The CU group responsible for apprenticeship provision, Better Futures, also screens all applicants to ensure course entry requirements are met as part of the on-boarding process, as set out in the NA draft training plan. At the request of CU's employer organisations, candidates complete a literacy assessment as part of their recruitment.

13. In considering Standard 1.1.6, the visitor team found that individual learners are provided with dedicated support through the subject librarian and centre for academic writing service to ensure the level of continuous support required. Throughout the course, learners continue to receive both formative and summative feedback on their English language skills, both through theoretical elements but also as part of their practice assessments.
14. Part B of the course specification provides a detailed description of how literacy skills are developed throughout the course. All apprentices receive an initial knowledge, skills and behaviours (KSBs) skills scan, which is reviewed periodically during progress review meetings and allows the apprentice's KSBs to be closely monitored, and timely support to be implemented as required.
15. In considering Standard 1.1.7, the visitor team found that digital and technological skills development is a central feature of the course and is embedded throughout the learning journey. Applications are completed electronically, and most communications relating to the recruitment process are also managed electronically. Technological fluency is one of the six curriculum pillars that underpin the programme and this is clearly detailed in the course specifications. All NA students have an initial KSBs skills scan, which is reviewed periodically, and timely support can be provided as required. There is a range of dedicated support services such as the Digital Service Kitbag which apprentices can access for continuous support.
16. In considering Standard 1.2, the visitor team found that CU has a clear policy and procedure for courses requiring professional accreditation and/or mandatory clinical placement throughout the process. The process is undertaken by the University's occupational health provider (IDC) and is kept separate from the process of academic decision making. Applicants are made aware that an offer of a place is subject to satisfactory occupational health clearance. At the point of application, students are cleared by Occupational Health as being fit to undertake the course and go out on placement. Applicants are advised that failure to declare any health issues to the occupational health provider may lead to termination from the course. If a student acquires a health condition during the course, they will undertake further assessment, during which time they will not be eligible to go on practice learning allocations but may continue on theory-based modules. If all theory modules have been completed, the student may be required to take an interruption from the course until the matter is concluded.
17. If it becomes apparent at any point during the course that a student has a health condition that has not been declared, the case may be progressed to the Professional Suitability and Fitness to Practise Panel on the grounds of dishonesty to decide if the student is suitable to remain on the course. The student does not have a right of appeal against a negative decision for acceptance or continuation on the course of study.
18. In considering Standard 1.3, the visitor team found that learners are required by the Group Fitness to Practise document to complete a disclosure and barring service (DBS) check and are made aware they are required to self-declare any change to

their health, character and DBS status and formally declare this annually through the CU re-enrolment process and prior to registration.

19. Apprentices are also fully informed of the requirement to declare immediately any cautions, convictions, pending charges or adverse determinations made by other regulators, professional bodies and educational establishments and these are dealt with promptly, fairly and lawfully. Any declarations made by students are dealt with promptly and fairly by the Group Fitness to Practise and by associated EPs. Fitness to practise interviews are conducted with the apprentice and processes and actions documented and maintained confidentially.
20. In considering Standard 1.4, the visitor team found that the Course Director, managed by the Curriculum Lead, is accountable for ensuring all processes are strictly followed for those who meet the criteria to join the register. They serve as an NMC signatory for pre-registration Nursing Associates. The visitor team confirmed that all role requirements are fulfilled, and that their CV validates their qualifications and appropriateness for this role.
21. In considering Standard 1.5, the visitor team found that the CU Academic Regulations permit RPL at the point of entry only, and that arrangements are clearly explained. Formal applications must be submitted by the applicant. The process for RPL includes mapping of programme and modular learning outcomes. The NMC (2024) Standards of proficiency for registered nursing associates are clearly mapped across module content to allow for clear consideration of proficiency attainment at the point of RPL application. Applicants who seek to have RPL considered must also undertake the values-based interview.
22. For apprenticeships, the visitor team found that during the initial assessment with Better Futures, which is responsible for CU apprenticeship provision, prior learning is captured alongside a self-assessment of KSBs for the professional standard, supported by a member of staff from the workplace.
23. The course specifications confirm that there is maximum limit of 50% of RPL that can be mapped as per the NMC guidance on maximum permitted accreditation of prior learning and also identifies the exception to this RPL, where the 50% restriction does not apply to applicants to pre-registration nursing associate courses who are currently an NMC-registered nurse without restrictions on their practice.
24. In considering Standard 1.6, the visitor team found evidence in the course specifications that CU clearly outlines the course learning, teaching and assessment strategy and details how NA students' knowledge and skills in numeracy, literacy, and digital and technological skills will be developed progressively throughout the course. A mapping document demonstrates where numeracy and digital literacy will be considered and developed throughout the course through a range of classroom activities, practical activities in the clinical area, and formative assessment points. Technological fluency is one of the six curriculum pillars underpinning the nursing associates' course and continued digital skills development is embedded throughout the learning journey. All NA students have an initial KSB skills scan, which is reviewed periodically during progress review meetings and closely monitored so that timely support can be provided as necessary.
25. The visitor team found clear evidence in the course specifications that apprentices also have opportunities to develop their digital, technological, literacy and numeracy skills through their practice placement exposures across a range of health and care environments. CU has a wide range of Student Support services that students can access for individualised assistance and guidance.

26. The visitor team found that numeracy skill development is embedded within the course design. CU uses the Safe Medicate platform to offer students formative opportunities to engage with and learn key numerical skills related to safe nursing practice. Learners undertake a numeracy assessment during the second year of their course and are required to achieve a 100% pass grade as set out in Part 3 of the standards. There is a detailed description of how numeracy skills will be developed through the course in the Part B course specification. All apprentices will have an initial KSB skills scan, which is reviewed periodically during progress review meetings so that the apprentice's knowledge, skills and behaviours are closely monitored and timely support can be implemented as required.
27. Based on the information made available, the visitor team considers that CU has in place the appropriate arrangements for Standard 1: Selection, admission and progression to enable the NMC standards to be met.

2: Curriculum

Approved education institutions, together with practice learning partners, must:		Met	Not Met	Met after conditions	Not applicable to this major modification
2.1	Ensure that programmes comply with the NMC Standards framework for nursing and midwifery education.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.2	Comply with the NMC Standards for student supervision and assessment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.3	Ensure that programme learning outcomes reflect the Standards of proficiency for nursing associates.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4	Design and deliver a programme that supports students and provides an appropriate breadth of experience for a non-field specific nursing associate programme, across the lifespan and in a variety of settings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.5	Set out the general and professional content necessary to meet the Standards of proficiency for nursing associates and programme outcomes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.6	Ensure that the programme hours and programme length are: 2.6.1 sufficient to allow the students to be able to meet the Standards of proficiency for nursing associates, 2.6.2 no less than 50 percent of the minimum programme hours required of nursing degree programmes 2.6.3 consonant with the award of a Foundation degree (typically 2 years).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.7	Ensure the curriculum provides an equal balance of 50 percent theory and 50 percent practice learning using a range of learning and teaching strategies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.8	Ensure technology and simulation opportunities are used effectively and proportionately across the curriculum to support supervision, learning and assessment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.9	Ensure nursing associate programmes which form part of an integrated programme meet the nursing associate requirements and nursing associate proficiencies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Curriculum requirements

The course is two years in duration with a balance of theory and practice and of 2,300 hours' duration, with 1,260 hours of theory and 1,156 of practice.

This is confirmed by the module and programme specifications, programme planner, training plan and handbooks, which also demonstrate 50% theory and 50% practice learning.

Findings

28. The visitor team considered a range of evidence for this standard including programme specifications, course specifications, module descriptors, apprentices programme handbook, the curriculum strategy, mapping of Standards of proficiency and numeracy and digital skills, programme learning outcomes, staff lists and CVs, and stakeholder consultation documents. The visitor team also met with groups including the Senior Management team, the Programme Development team, Course Directors and Course Leads for the full range of programmes, teaching staff, students and stakeholder groups.
29. In considering Standard 2.1, the documentary evidence reviewed by the visitor team shows that there are robust and effective arrangements for governance through effective partnership working with a range of stakeholders. This has not changed during this modification. Stakeholders, including PSCs have been involved in the redevelopment and in the planned operation for this nursing associate programme. This includes PSCs who are involved in Objective Structures Clinical Examinations (OSCEs) and on other classroom sessions such as forum theatres. Feedback from PSCs on the nursing associate's performance is obtained in the Practice Assessment Document (PAD).
30. The roles and responsibilities of those who support student learning are clearly defined in the NA Handbook and policies are in place, for example the Fitness to Practise Policy, if the conduct or professional suitability of a student is in question. A range of learning support is available to enable the development of academic skills and to support students with pastoral care needs, and detail of this is clearly provided in the NA Handbook. Opportunities for students to share their feedback about their course are provided throughout their learning journey and a formal Complaints Policy is widely accessible.
31. No changes are proposed to Standard 2.2 as a result of this modification and the visitor team confirmed through documentary review and discussions at the visit that this standard is met. PLPs, students and the programme team were able to provide detail of how the role of practice assessor, practice supervisor and the academic assessor work and how they are prepared for these roles.
32. In considering Standard 2.3, the visitor team found that the documentary information provided including the School Curriculum Strategy demonstrates the approach taken in developing the curriculum. A collaborative approach to learning will be the educational approach taken to apply theory to practice and this is underpinned by two core themes: Global Citizenship and Equality, Diversity, Inclusion and Belonging. The content of the modules is based upon the 'six Platforms' of the NMC (2024) Standards of proficiency for nursing associates and the module descriptors provide details of these along with the PAD.
33. The visitor team found that practice learning has been at the core of this development. Placement learning will follow classroom block teaching and placement plans as described in the Placement Allocation Exemplar which provided further evidence that students will have a range of placements across the lifespan to enable them to meet the proficiencies for nursing associates. The visitor team found that module descriptors provide full further detail on where the Standards of Proficiency (SoPs) will be delivered and assessed.
34. The programme learning outcomes as presented in the programme specifications are mapped to the modules which are also mapped against the SoPs for nursing

associates. Further mapping of the KSBs of the nursing associate apprenticeship standard has also been provided as has mapping of the SoPs to the modules. PLPs confirmed to the visitor team details of the 'hub and spoke' model that is used to enable students to achieve their proficiencies, in particular, skills such as venepuncture and ECG recordings.

35. In considering Standard 2.4, the visitor team noted that this modification results from a move away from traditional semester delivery (where students study three 20-credit modules concurrently) to block delivery with six entry points in each academic year. The development creates a standardised structure for the programmes, helping students understand what to expect at each stage and manage the pressures on them. The separated delivery of modules allows students to focus on one module and one assessment at a time. The use of standardised dates makes linking the teaching of different programmes much easier, and enables a mix of field-specific, cross-field and interdisciplinary modules in the programmes leading to real breadth of experiences. The visitor team found that the innovative approach to block delivery was a feature of **good practice (GP1)**.
36. The visitor team found that the documentary evidence reviewed shows that the course specification and module descriptors are designed and delivered to provide apprentices and student nursing associates with a breadth of experience across the lifespan and all four fields of practice that they require to achieve the professional standard. The Placement Allocation Exemplar, the Apprentices placement plan and discussions with students, the programme team and practice partners confirmed that placements will enable students to meet the proficiencies for nursing associates. The already NMC-approved PAD and OAR will continue to be used to document the achievement of the SoPs.
37. The visitor team reviewed the CVs of the staff team and found that all hold both professional and academic expertise required to deliver the content of this programme. Staff were able to provide the visitor team with examples of how they are supported to continue to develop expertise in both their profession and as academics.
38. In considering Standard 2.5, evidence reviewed by the visitor team shows that mapping has been undertaken to show how the programme outcomes, module outcomes and content meets the Standards of proficiency for nursing associates and programme outcomes. The six platforms have underpinned the curriculum planning and development process for this programme. Module descriptors show this in more detail and course specifications and student-facing handbooks provide further information on the programme learning outcomes.
39. In considering Standard 2.6, documentary evidence reviewed by the visitor team and discussion at the event confirm that the course is two years in duration with an equal balance of theory and practice and is of 2,300 hours' duration. This is confirmed by the module and programme specifications, programme planner, training plan and handbooks, which also demonstrate 50% theory and 50% practice learning.
40. Theory hours are delivered through a range of face-to-face lectures, seminars, simulated learning and evidenced-based learning activities as detailed in the course specifications. Practice learning hours are recorded electronically and for apprentices this is managed via an apprenticeship management system. The programme team has oversight of the course hours as they are achieved. Programme learning is mapped to the Standards of proficiency for nursing associates (SPNA) and sufficient

time is allocated to allow students to meet the SPNA. The visitor team confirmed that the programme meets the requirements of a Foundation degree.

41. In considering Standard 2.7, the programme documentation reviewed by the visitor team confirmed that the programme structure has an equal balance of theory and practice learning, 50% theory and 50% practice, so meets the 1,150 hours of each, as noted above. Practice learning is managed collaboratively through the CU placement team and the PLPs/EPs who identify and arrange appropriate practice learning placements. The programme plans in the programme specifications include a clear theory and practice allocation model demonstrating how the required hours will be achieved.
42. The visitor team found that the module information descriptors include information regarding the hours included as part of the module, identifying theory and practice learning. Module aims, descriptors and outcomes are appropriately chosen and are at the appropriate academic level. Information on external placements is made available to students to ensure they meet the programme requirements.
43. At the visit, the visitor team confirmed that a range of opportunities exist to support students develop their digital capabilities. These include online learning resources, course work submission and portfolio development in pebble pad.
44. Modules and assessments use a range of teaching, learning and assessment strategies to allow students to develop a range of skills. These include presentations, exams, OSCEs and written assignments and assessment of practice, which is documented in the PAD. The learning and teaching strategies are aligned enabling a student-centred learning culture. Student-facing documentation such as the Apprentice Handbook provides information about the programme structure, timetables and module specifications.
45. In considering Standard 2.8, evidence reviewed by the visitor team demonstrated that opportunities for learning and developing technological skills and simulation-based learning are strategically integrated into the curricula and delivered proportionately as a blended approach. Simulation is embedded within the theory modules affording students the opportunity to build both skills and confidence in a safe space. This is aligned to the module learning outcomes across the programme and included in the programme learning outcomes. Simulation-based learning is included in module teaching and learning strategies and is part of formative learning.
46. There are no simulation practice hours included in the programme hours. Digital skills are developed throughout the course both in theory and in practice and the visitor team was informed by students that they felt they had developed confidence in the area of digital capability. Assessment of digital capability is formally recorded. Student-facing information is provided and students are informed of the range of support available to them to help develop these skills. The visitor team found that technology-enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment in the programme.
47. In considering Standard 2.9, the visitor team found that this programme is designed specifically to meet the standards of proficiency for Nursing Associate as an independent qualification and registration. It is not part of an integrated programme at CU.

48. Based on the information made available, the visitor team considers that CU has in place the appropriate arrangements for Standard 2: Curriculum to enable the NMC standards to be met.

3: Practice learning

Approved education institutions, together with practice learning partners, must:		Met	Not met	Met after conditions	Not applicable to this major modification
3.1	Provide practice learning opportunities that allow students to develop and meet the Standards of proficiency for nursing associates to deliver safe and effective care to a diverse range of people across the lifespan and in a variety of settings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.2	Ensure that students experience the variety of practice expected of nursing associates to meet the holistic needs of people of all ages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.3	Take account of students' individual needs and personal circumstances when allocating their practice learning including making reasonable adjustments for students with disabilities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.4	<p>Ensure that nursing associate students have protected learning time in line with one of the following two options:</p> <p>3.4.1 Option A: nursing associate students are supernumerary when they are learning in practice</p> <p>3.4.2 Option B: nursing associate students, via work-placed learning routes:</p> <p>3.4.2.1 are released for a minimum of 20 per cent of the programme for academic study</p> <p>3.4.2.2 are released for a minimum of 20 per cent of the programme time, which is assured protected learning time in external practice placements, enabling them to develop the breadth of experience required for a generic role, and</p> <p>3.4.2.3 for the remainder of the required programme hours, protected learning time must be assured.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Practice learning requirements

The direct entry course uses Option A while the apprentice course uses Option B for protected learning time.

For Direct Entry students, CU has a clear set of governance processes for practice education to ensure students have supernumerary status and this is also highlighted in the Student Course Handbook.

For Apprentice students, the Training Plan and Apprenticeship Hours Mapping outline a regular pattern of 26.5 hours off-the-job learning per week, normally split:

University-Based Learning: eight hours per week

Workplace Learning (self-directed): seven hours per week

Placement-Based Learning: 11.5 hours per week
Plus six weeks of specific off-the-job Workplace Learning: 26.5 hours per week.

Over the full programme, this pattern results in:

University-Based Learning: 672 hours (therefore greater than 20%)
Workplace Learning (self-directed): 747 hours
Placement-Based Learning: 966 hours (therefore greater than 20%)
Total learning hours: 2,385

Findings

49. The visitor team considered a range of evidence for this standard including programme and placement documentation, university governance processes and operational plans and met with the programme team and senior staff, students, EPs and PLPs.
50. In considering Standard 3.1 and 3.2, the visitor team found documentary evidence of the provision of practice learning opportunities that allow students to develop and meet the SoPs for nursing associates to deliver safe and effective care to a diverse range of people across the lifespan and in a variety of settings, and to experience the variety of practice expected of nursing associates to meet the holistic needs of people of all ages. There is documentary evidence that students are offered a broad range of placement opportunities in a variety of different settings working with people at different ages based around a 'hub and spoke' model. Students are assessed using nationally validated PAD and OAR documents, which are mapped to the NMC standards of proficiency for registered nursing associates.
51. CU has a clear set of governance processes for practice education which work alongside the employer practice partner monitoring processes for apprentices or are supported by university-led processes for direct entry. CU has appropriate tools and processes to monitor and support student practice learning experiences to ensure they are of suitable variety. Students are provided with clear information about practice learning through course and placement handbooks. The Module Information Descriptors demonstrate an appropriate and scaffolded focus on providing holistic care to support the practice learning.
52. Students the visitor team met confirmed that employers provided a good range of learning opportunities using 'hub and spoke' arrangements. The NHS Trusts have systems in place to provide varied learning opportunities to the students, and they are also aware of the simulation activities, which have been designed to help to support practice learning and less commonly used proficiencies.
53. In considering Standard 3.3, the visitor team found documentary evidence that CU takes account of students' individual needs and personal circumstances when allocating their practice learning, including making reasonable adjustments for students with disabilities. There is a clear student disability standard that outlines its commitment to equality as laid out in the Disabled Students Policy Statement, as well as a placement allocation standard that outlines processes in considering individual needs and reasonable adjustments. For apprentices, placement allocation is employer-led, and CU has ongoing processes to work with employers to support students. For direct entry, CU leads on allocation, supported by clear policies around reasonable adjustments and flexible working. Students undergo Occupational Health clearance and are encouraged to declare any learning needs at the start of the

course. CU employs Learning Support Tutors to offer proactive support to disabled students.

54. During the visit, the students confirmed that they were aware of the CU systems and felt that they worked well if a student had a diagnosis but raised the issue of delays in getting a formal diagnosis resulting in delaying official support. The CU team clarified that the university is working to develop the reasonable adjustment system to be supportive of individuals and less dependent on an official diagnosis. The apprentices felt that the new programme structure with smaller regular periods of dedicated annual leave would work better than the current system. The EPs and PLPs confirmed that they had appropriate processes in place and that they encourage students to disclose any support needs with the aim to manage any adjustments collaboratively with CU.
55. In considering Standard 3.4, the visitor team found documentary evidence that the nursing associate students have appropriate protected learning time. The two programmes use different options to meet this standard: the direct entry course uses Option A while the apprentice course uses Option B. Protected learning will be assured and evidenced to meet Option B and the apprentices will be supernumerary for the protected learning and external placements whilst on the course. Attendance records will be used to capture clinical practice hours totaling 1,150 hours.
56. The visitor team found that for apprentices there is clear guidance about the structure of the course and how on-the-job and off-the job learning is to be implemented. The course is structured with one university-based academic study day each week, ensuring it meets the minimum of 20% academic study requirement. Students should also be allocated external practice placements by their employer. The expectations on employers are set out clearly and the compliance with the 20% minimum external placement hours, as well as wider protected learning time, is monitored by the academic assessor and in progress review meetings. Students are made aware of the processes to raise concerns, including issues around their supernumerary status.
57. For direct entry students, CU has a clear set of governance processes for practice education to ensure students have supernumerary status and these are detailed through the Practice Governance processes and the Additional Hours Make up Pack. Students are made aware through their course handbooks of the processes to raise concerns, including issues around their supernumerary status. During the visit, students the visitor team met confirmed that they understood the role of supernumerary status in the programmes and confirmed that this status was treated appropriately by employers and practice partners. In general, they felt supported by the setup of the programmes.
58. Based on the information made available, the visitor team considers that CU has in place the appropriate arrangements for Standard 3: Practice learning to enable the NMC standards to be met.

4: Supervision and assessment

Approved education institutions, together with practice learning partners, must:		Met	Not met	Met after conditions	Not applicable to this major modification
4.1	Ensure that support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.2	Ensure that support, supervision, learning and assessment provided complies with the NMC Standards for student supervision and assessment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.3	Ensure they inform the NMC of the name of the registered nurse or registered nursing associate responsible for directing the education programme.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.4	Provide students with constructive feedback throughout the programme to support their development.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.5	Ensure throughout the programme that students meet the Standards of proficiency for nursing associates.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.6	Ensure that all programmes include a health numeracy assessment related to nursing associate proficiencies and calculation of medicines which must be passed with a score of 100%.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.7	Assess students to confirm proficiency in preparation for professional practice as a nursing associate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.8	Ensure that there is equal weighting in the assessment of theory and practice.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.9	Ensure that all proficiencies are recorded in an ongoing record of achievement which must demonstrate the achievement of proficiencies and skills as set out in Standards of proficiency for nursing associates.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Findings

59. The visitor team considered a range of evidence for this standard including programme and placement documentation, external subject specialist reports, and university governance processes and met with the programme team and senior staff, students, PSCs, EPs and PLPs.
60. In considering Standards 4.1 and 4.2, the visitor team was assured that the programmes' support, supervision, learning and assessment complied with the NMC Standards framework for nursing and midwifery education, and with the NMC Standards for student supervision and assessment. The nursing associate programmes have already been approved as meeting the Part 1 and Part 2 standards and have received confirmation that they are still compliant in the latest round of annual reporting. CU has indicated that the proposed changes do not impact on these standards.
61. The theory and practice modules have been reviewed and confirmed by an external subject specialist and there is documentary evidence of student preparation for

practice, standardised assessment documents and governance processes for practice learning.

62. CU has ongoing processes to involve stakeholders in annual quality monitoring processes and there is documentary evidence of meetings with stakeholders to discuss the modifications to the programme and of their participation in the ongoing development work associated with the changes. During the visit, the staff and stakeholder groups confirmed involvement in and co-production of the programme modifications.
63. In considering Standard 4.3, the visitor team found documentary evidence that CU provided documentary evidence that the NMC had been informed of the Course Directors for the Nursing Associate Apprenticeship the Direct Entry NA programme, and that the responsible people were nurses.
64. In considering Standard 4.4, the visitor team found documentary evidence that students are provided with constructive feedback throughout the programme to support their development. CU has a strong focus on providing students with appropriate constructive feedback to support their development. Students are expected to gather feedback during placements as outlined in the standardised assessment documents. Feedback on progress is an important element of the training for Practice Assessors/Supervisors and a defined part of student review meetings.
65. In considering Standard 4.5, the visitor team found documentary evidence that throughout the programme students meet the Standards of proficiency for nursing associates. There is mapping of the modules to the NMC Standards of proficiency for nursing associates, with multiple modules mapped to each specific proficiency. The Module Information Descriptors provide details of the content of the individual modules. The programmes are using standardised PADs and processes.
66. In considering Standard 4.6, the visitor team found documentary evidence that all programmes include a health numeracy assessment related to nursing associate proficiencies and calculation of medicines which must be passed with a score of 100%. Students will engage in medication calculations in practice and need to pass a practical assessment of their proficiency in each part. A drugs numeracy calculations assessment forms a core part of the assessment of Therapeutic Approaches in Nursing Associate Practice and the Nursing Associate Role in Safe Administration of Medication modules. The Module Information Descriptors explicitly state that a 100% pass mark is required, and the Assessment Brief highlights this requirement to the students.
67. In considering Standard 4.7, the visitor team found documentary evidence that students are assessed appropriately to confirm proficiency in preparation for professional practice as a nursing associate. There is documentary evidence of the mapping of the modules to the NMC standards of proficiency for nursing associates, with multiple modules mapped to each specific proficiency. The Module Information Descriptors provide details of the content of the individual modules. CU has a detailed assessment strategy with the course, modules and assessments checked by an external examiner. The programmes are using standardised PADs and processes.
68. In considering Standard 4.8, the visitor team found documentary evidence that there is equal weighting in the assessment of theory and practice. The course documentation outlines the equal weighting of theory and practice in terms of hours. There are both theory and practice modules in each year, which are given credit and

have the same number of attempts. All modules must be achieved to pass the programme; there is no compensation.

69. In considering Standard 4.9, the visitor team found documentary evidence that all proficiencies are recorded in an ongoing record of achievement which demonstrates the achievement of proficiencies and skills as set out in Standards of proficiency for nursing associates. The programmes are using standardised PADs, which cover the required proficiencies and there are appropriate processes in place to monitor student achievement of proficiencies.
70. Based on the information made available, the visitor team considers that CU has in place the appropriate arrangements for Standard 4: Supervision and assessment to enable the NMC standards to be met.

5: Qualification to be awarded

Approved education institutions, together with practice learning partners, must:		Met	Not met	Met after conditions	Not applicable to this major modification
5.1	Ensure that the minimum award for a nursing associate programme is a Foundation Degree of the Regulated Qualifications Framework (England), which is typically two years in length.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.2	Notify students during the programme that they have five years in which 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 is specified in our standards to register their award.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Findings

71. The visitor team considered a range of evidence for this standard including course specification Parts A and B, Apprenticeship Handbook and Apprenticeship Operational Handbook, Nursing Associate course Handbooks, Nursing Associate Training plans, Module Information Descriptors, and the Example Course plan and met with the programme team and senior staff.
72. In considering Standard 5.1, the visitor team found that the nursing associate course is a two-year foundation degree that meets the QAA Benchmarks and Characteristic Statements for a foundation degree. It is compliant with CU structure, level and credit requirement for a foundation degree as evidenced in the course specifications Part A, Part B and in the module descriptor. The course plan provides evidence of the two-year structure for apprentices. This is detailed in the Nursing associate course handbook, the apprenticeship handbook and the training plan.
73. Regarding Standard 5.2, the visitor team confirmed that the Nursing Associate course handbook outlines the five-year time frame within which apprentices must register with the NMC and the implications of not doing so. Information is also shared via Aula announcements. Apprentices have a Gateway meeting to achieve their apprenticeship award.
74. Based on the information made available, the visitor team considers that CU has in place the appropriate arrangements for Standard 5: Qualification to be awarded to enable the NMC standards to be met.

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