



# **Nursing and Midwifery Council Quality Assurance Review**

## **Major Modification Report for:**

**Pre-registration nurse qualification leading to:**

**Pre-registration Nursing - Mental Health  
Pre-registration Nursing - Learning Disabilities  
Pre-registration Nursing - Adult**

**University of Gloucestershire**

**June 2025**

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## Key institutional and programme details

<b>Name and location of Approved Education Institution (AEI)</b>	The University of Gloucestershire The Park Cheltenham Gloucestershire GL50 2RH				
<b>AEI Institution Identifier [UKPRN]</b>	10007145				
<b>Name and location of new programme delivery partner(s) if not the AEI noted above</b>	NA				
<b>Name of new employer partners for apprenticeships</b>	There are no new employer partners				
<b>Approval type</b>	Major modification				
Name of programme					
NMC programme title	AEI programme titles	Academic levels	Apprenticeship	Full-time	Part-time
<b>Pre-registration nursing - Adult</b>	BSc (Hons) Nursing (Adult)	England, Wales, Northern Ireland <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Pre-registration nursing - Adult</b>	BSc (Hons) Nursing (Adult) (Apprenticeship)	England, Wales, Northern Ireland <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Pre-registration nursing - Learning Disabilities</b>	BSc (Hons) Nursing (Learning Disabilities)	England, Wales, Northern Ireland <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Pre-registration nursing - Learning Disabilities</b>	BSc (Hons) Nursing (Learning Disabilities) (Apprenticeship)	England, Wales, Northern Ireland <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Pre-registration nursing - Mental Health</b>	BSc (Hons) Nursing (Mental Health)	England, Wales, Northern Ireland <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Pre-registration nursing - Mental Health</b>	BSc (Hons) Nursing (Mental Health) (Apprenticeship)	England, Wales, Northern Ireland <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<b>Interim awards available</b> There are no interim awards for this qualification that lead to NMC registration	
<b>Proposed programme start date</b>	8 September 2025
<b>Standard(s) under assessment</b>	<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.
<b>Date of visit</b>	4 June 2025
<b>Visitor team</b>	Registrant Visitors: Dr David Coyle Mrs Alison James  Lay Visitor: Mrs Jayne Walters



## 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 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 the University of Gloucestershire's approval panel took place on 4 June 2025.

### Context for the review

This major modification was undertaken to consider proposed changes to the BSc (Hons) Nursing programme across the adult, mental health, and learning disabilities' fields at the University of Gloucestershire (UoG). The review also considered the introduction of a revised three-year Registered Nurse Degree Apprenticeship (RNDA) route and a new blended learning model. The proposed changes include a transition from the existing four-year apprenticeship model to a three-year co-taught structure delivered alongside direct entry students. All three routes, direct entry, apprenticeship, and blended learning will share a common curriculum, delivered and assessed through a unified programme framework.

The scope of the modifications includes redesigned programme learning outcomes, revised module structures, updated assessment strategies, and enhanced field-specific content. The programme team has also sought to strengthen simulation-based learning, interprofessional education, and digital literacy development to align with contemporary practice. While the overall structure of the programme remains within the existing credit parameters, the changes represent a significant curriculum refresh in response to regulatory developments, institutional ambitions, and the evolving needs of students and employers.

The proposed modifications have been mapped to the current Nursing and Midwifery Council (NMC) Standards of proficiency (SoP) for registered nurses and Standards framework for nursing and midwifery education (SFNME). UoG confirmed that all gateway requirements continue to be met. The modifications are driven by multiple factors, including

a desire to improve accessibility and flexibility, strengthen field identity, and address stakeholder feedback on placement sequencing, assessment workload, and digital learning support. Institutional drivers include UoG's strategic commitments to inclusive education, widening participation, and employer-responsive curriculum delivery. The revision also supports alignment with broader workforce and policy initiatives, including the NHS Long Term Workforce Plan and regional apprenticeship targets.

The development of the proposed changes has been informed by stakeholder consultation and co-production activity, although the extent of involvement varied across groups. Students, including current learners and alumni now working in partner organisations, contributed feedback during curriculum review stages, particularly around workload, assessment formats, and field-specific content. People who use services and carers (PSCs) were consulted on programme revisions and continue to contribute to delivery and governance, particularly in values-based learning. Practice learning partners (PLPs) and employer partners (EPs) were engaged through feedback meetings and partnership discussions, influencing both placement design and simulation integration. The visitor team noted that stakeholder input during the design phase was primarily consultative rather than collaborative.

During the onsite visit, the visitor team met with a wide range of stakeholders involved in the delivery and oversight of the nursing programme. This included members of the programme leadership team, module and programme leaders, academic staff, and professional services personnel responsible for admissions, student support, and placement coordination. The visitor team also engaged with PLPs, including senior clinical educators, practice assessors (PAs), and practice supervisors (PSs), with representation from acute, community, and primary care settings. EPs involved in apprenticeship delivery were also present. PSCs contributed insights through a dedicated session, and students from across all routes, including direct entry, and apprenticeship pathways, shared their experiences of the programme.

The visitor team was able to triangulate key areas of evidence with input from stakeholders. However, the visitor team noted the absence of some roles typically involved in placement governance, including practice education facilitators (PEFs) and placement coaches (PCs), which may have limited insight into certain aspects of quality assurance in practice settings. No other significant stakeholder absences were recorded.

The **final recommendation** made by the visitor team to the NMC, following consideration of UoG's response to any conditions required by the approval panel, 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** following the visit and prior to the consideration of UoG's response to any conditions was as follows:

**Programme is recommended to the NMC for approval after conditions are met to ensure 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
C1	Ensure that the international placement in Croatia is fully compliant with the NMC Standards for education and training. Specifically, the provider must demonstrate that all periods of learning undertaken outside the UK meet the Standards for student supervision and assessment (SSSA), including appropriate auditing, governance and oversight.	2.1, 2.2, 2.9, 2.12, 3.4, 4.1, 4.2 & 4.9  [SFNME R2.14, R2.16 & R5.3]  [SSSA 1.3 & 1.4]	NMC only	
Date for all conditions to be met to meet intended delivery date		16 July 2025		

Joint conditions relate to both NMC standards and UoG's programme approval outcomes. All conditions must be met in order for a programme to be recommended to the NMC for final approval.

### Recommendations for enhancement

Recommendations				
No.	Recommendation details	Specific standard(s)	NMC only/ Joint	AEI/EI only
R1	Develop a strategy to ensure consistent stakeholder engagement in student selection.	1.1 and 2.1  [SNFME R2.7]	Joint	
R2	Implement a formal and consistent process for evidencing student engagement in guided independent study, ensuring structured recording and monitoring in alignment with programme requirements.	2.1, 2.5, 2.9 & 2.12  [SNFME 2.12]	NMC only	

Recommendations are to be addressed and reported in the annual self-assessment report.

## Statements of good practice

Statements of good practice relating to the NMC standards			
No.	Details	Specific standard(s)	NMC only/ Joint
	None		

## Response to conditions

The visitor team reviewed in full the response(s) and evidence from UoG to the conditions set. The findings of the visitor team with regard to responses to individual conditions are recorded below.

### Response to NMC conditions

Response to conditions		
No.	Condition details	Findings
C1	Ensure that the international placement in Croatia is fully compliant with the NMC Standards for education and training. Specifically the provider must demonstrate that all periods of learning undertaken outside the UK meet the Standards for student supervision and assessment (SSSA), including appropriate auditing, governance and oversight.	<p>The visitor team reviewed the additional evidence submitted by UoG in response to condition C1.</p> <p>UoG has taken the executive decision to remove the Croatia placement from its list of NMC-approved placements with associated practice learning hours. Students may still choose to undertake the Croatia experience; however, no NMC placement hours will be allocated for this activity and will remain an experiential learning opportunity only. All students electing to attend will be informed of this decision and will be allocated alternative practice learning hours within a UK-based PLP. This ensures that all students will achieve the minimum 2,300 SSSA-compliant NMC practice learning hours by the end of their programme.</p> <p>The visitor team considers that for condition C1, the University of Gloucestershire has fully addressed the requirements of the condition, and therefore condition C1 is met.</p>

The **final recommendation** made by the visitor team to the NMC, following consideration of the UoG's response to any conditions set, is therefore as follows:

All conditions relating to this programme have been addressed and **the 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.

## 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 their intended field of nursing practice: adult, mental health, learning disabilities and children's nursing</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 the registered nurse responsible for directing the educational programme or their designated registered nurse substitute is able to provide supporting declarations of health and character for students who have completed a pre-registration nursing 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 registered nurses and programme outcomes, up to a maximum of 50% of the programme.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.6	For NMC registered nurses, permit recognition of prior learning that is capable of being mapped to the Standards of proficiency for registered nurses and	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	programme outcomes that may be more than 50% of the programme.				
1.7	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

For undergraduate routes, UoG permits recognition of prior learning (RPL) for up to 50% of the programme (180 credits), typically comprising 120 credits at Level 4 and 60 credits at Level 5. Students admitted on this basis are required to complete the remaining 180 credits within the programme, including 60 credits at Level 5 and 120 credits at Level 6, where the recognised prior learning is demonstrably mapped to the Standards of proficiency for registered nurses and the programme learning outcomes.

Applicants who are already registered nurses may be considered for RPL in excess of 50% where detailed evidence is provided to show that prior learning fully maps to both the programme learning outcomes and the Standards of proficiency for registered nurses. These cases are reviewed individually by UoG and must include mapping across both academic and practice elements.

## Findings

1. A range of evidence was submitted by UoG to demonstrate compliance with Part 3 Standards for pre-registration nursing, Standards 1.1 to 1.7. This included programme specifications, applicant guidance, professional suitability procedures, academic support strategies, RPL documentation, and digital learning materials.  
The visitor team also reviewed student-facing documentation such as handbooks, simulation, and artificial intelligence (AI) integration content, and the digital numeracy and medication platform guidance. During the onsite visit, meetings were held with the programme team, senior university staff, current students, PSCs, PLPs and an EP to triangulate the submitted evidence. Initial and subsequent lines of enquiry were raised to clarify the roles of PSCs and PLPs in admissions, the monitoring of good health and character, and the communication and application of RPL policies. The visitor team found that UoG has established robust and inclusive processes that align with NMC expectations for student selection, academic support, and progression monitoring.
2. These changes form part of a comprehensive curriculum review across three fields of nursing - adult, mental health, and learning disabilities - and are intended to enhance field identity, ensure compliance with current NMC requirements, and provide greater flexibility in delivery. The key structural change is the replacement of the existing four-year apprenticeship route with a new three-year co-taught model that integrates direct entry, apprenticeship, and blended learning pathways. This has direct implications for student selection, ensuring consistent entry requirements and interview processes across all routes. Modifications also include improved clarity and accessibility around RPL for both nursing associates and registered nurses, and an updated approach to monitoring good health and character declarations through strengthened processes at entry, annually, and at progression points. Further enhancements include structured support for numeracy, literacy, and digital capability, embedded in the curriculum and

reinforced through targeted academic and wellbeing interventions. Overall, these changes reflect UoG's strategic aim to modernise delivery, promote parity across routes, and uphold high standards of student support and regulatory alignment.

3. In considering Standard 1.1, the visitor team reviewed a range of evidence including programme information, applicant guidance materials, the service user handbook, interview documentation, and the programme website. Additional evidence was reviewed following formal lines of enquiry to confirm the involvement of PSCs and PLPs in student selection, and to verify how equality, diversity, and inclusion (EDI) training is delivered, monitored, and recorded. The visitor team also explored how the admissions process evaluates applicants' digital and technological literacy and how support is embedded within the programme. During the onsite visit, the visitor team met with a range of stakeholders, including the programme team, current students, PSC representatives, and senior practice learning staff. These discussions confirmed that UoG operates a consistent and structured admissions process. Entry requirements are clearly defined and publicly available, including mandatory GCSE qualifications in English and mathematics. International applicants must demonstrate English language proficiency equivalent to IELTS 7.0. All applicants are interviewed using a structured, values-based interview process mapped to the NMC Code. Interview scoring is moderated to ensure consistency, and offers are conditional upon satisfactory occupational health and enhanced Disclosure and Barring Service (DBS) clearance. Applicants who do not meet the standard entry requirements in literacy or numeracy may access alternative routes through the Foundation Year, which includes modules in academic writing and applied numeracy mapped to programme entry outcomes. In addition, UoG requires applicants to complete a digital self-assessment, and digital literacy development is embedded into the early stages of the curriculum to ensure preparedness for contemporary learning and practice environments. The visitor team explored the involvement of PSCs and PLPs in student selection and confirmed that both groups are actively engaged in the interview process. All individuals contributing to interviews are required to undertake EDI training in advance of participation, and UoG maintains central records to verify compliance. It was confirmed that no person takes part in interviews without having completed this mandatory training. PSCs receive additional training for their interview role and contribute to applicant scoring. However, the specific mechanism through which their input informs final selection decisions could be more explicitly articulated and understood. This observation informs **recommendation (R1)**, which suggests enhancing the transparency and documentation of EP, PLP and PSC contributions in the decision-making process.
4. In considering Standard 1.2, the visitor team considered a range of evidence including the programme website and applicant-facing materials, the online admissions guide, the process roadmap for DBS and health clearance, the professional suitability and fitness to practise procedures, and the Health Abilities Passport, which was submitted following a formal evidence request. Further evidence was requested prior to the onsite visit to confirm the mechanisms by which students declare good health and character at the point of entry and throughout the duration of the programme, and to evaluate how reasonable adjustments are identified, supported, and monitored. Programme documentation confirms that applicants are required to declare their good health and character as part of the admissions process. This requirement is made explicit through UoG's online admissions portal and associated guidance materials. Pre-entry guidance also clearly outlines DBS requirements, associated costs, and expectations regarding fitness

to practise. UoG has in place a structured process for managing health and conduct concerns, as documented in the DBS and health clearance roadmap, which sets out escalation pathways and decision-making points, including referral for fitness to practise consideration where necessary. During the visit, the visitor team raised a specific query regarding applicant awareness of the online admissions guide. The programme team clarified that all applicants are formally directed to this material during the application journey, ensuring transparency and accessibility. Post-enrolment, students are required to complete annual declarations of good health and character. In response to the visitor team's request, an example declaration was provided and reviewed, and the visitor team was satisfied that the format and process are appropriate to meet NMC expectations. The programme team explained that any issues arising from these declarations are systematically tracked, with the placement coordinator and relevant support teams notified promptly. Assurance was provided that monitoring is comprehensive and not reliant on sampling. To evaluate how reasonable adjustments are enacted and supported, the visitor team reviewed the Health Abilities Passport, which applies to both direct entry and apprenticeship routes. This document reflects an individualised and supportive approach, enabling students to disclose relevant health or learning needs and to access appropriate academic and placement-based support. The process allows for proactive planning, involving relevant staff across academic, practice, and professional services teams.

5. In evaluating the evidence submitted in relation to Standard 1.3, the visitor team considered documentation including the programme website, UoG's professional suitability and fitness to practise procedures, the student handbook, and the module pro forma for NU6001. The visitor team also reviewed the responses to formal lines of enquiry raised to clarify how students are informed of their responsibilities to declare good health and character throughout the programme, including requirements outside of annual declaration cycles. The visitor team sought specific assurance regarding how students are informed of their obligation to immediately declare any changes to their health or character status, including police charges, cautions, or conditional discharges. A further enquiry requested confirmation of the mechanisms by which students are reminded of these responsibilities during the academic year and how they can access relevant guidance in the absence of a scheduled checkpoint. The programme website provides accessible information for applicants about the need to make good health and character declarations prior to enrolment. The professional suitability and fitness to practise procedures outline the processes by which such declarations are managed once students are enrolled, with clear expectations for both direct entry and apprenticeship routes. The narrative submitted by UoG confirms that all students are required to complete both annual and three-monthly declarations during their programme. At the onsite visit, the visitor team met with the programme team and senior university staff to triangulate the approach taken to ensure that students are aware of and comply with these requirements. The visitor team received confirmation that students are introduced to these responsibilities during induction and that they are reminded on a regular basis via multiple platforms, including the virtual learning environment, programme handbooks, and academic tutorials. The visitor team was assured that appropriate mechanisms are in place to support students in making mid-year declarations, and that staff are trained to guide students through the process should concerns arise between formal declaration intervals.
6. In considering Standard 1.4, the visitor team reviewed UoG's professional suitability and fitness to practise procedures and explored the systems used to

support and manage student declarations of good health and character. An initial line of enquiry was raised to confirm which members of staff are responsible for making and supporting the required declarations. A subsequent line of enquiry sought clarification on the specific roles involved in uploading and formally supporting these declarations within the UoG placement management system (ARC) and the guidance mechanisms available to staff and students at the point of submission. The professional suitability and fitness to practise procedures clearly outline how health and character concerns are handled and confirm that these processes apply equally to students across all routes, including direct entry and apprenticeship pathways. The documentation identifies several key staff roles involved in the review and escalation of concerns arising from student declarations, including the Associate Head of School (Outreach and Engagement), the Academic Course Lead, the Deputy Course Lead, and the Head of School. At the onsite visit, the visitor team met with the programme team and senior university staff to examine the operationalisation of these processes. The programme team confirmed that academic leads are responsible for completing the formal supporting declarations. These declarations are made in accordance with the institution's defined procedures and are embedded within a structured system of student declarations, which occur at entry, annually, and again at the point of registration. The visitor team was further assured that appropriate governance structures are in place, including oversight and procedural guidance for academic staff involved in managing and supporting student submissions. The ARC placement system is used to record and monitor declarations, with appropriate access controls and support pathways for students and staff.

7. To assess assurance in relation to Standard 1.5, the visitor team reviewed a range of documentation including the BSc Nursing Programme Information, the RPL guidance for the BSc (Hons) Nursing programme, and the Higher Skills Centre APL mapping tool for Advanced Credit Learners. An initial line of enquiry and subsequent evidence request were submitted to confirm how prospective applicants are informed about the opportunity to apply for RPL, the clarity and accessibility of the guidance provided, and whether nursing associates are required to submit individual applications through the formal process. The documentation reviewed confirms that applicants are eligible to apply for RPL for up to 50% of the programme, in accordance with NMC requirements. A formal process is in place, supported by written guidance and a detailed mapping tool designed to help applicants align their prior experience and learning to programme outcomes. The programme documentation also includes specific guidance for applicants pursuing advanced standing and outlines the procedures for both academic and experiential claims. In response to the visitor team's queries, UoG confirmed that nursing associates are required to submit individual RPL applications, and that these are assessed through the same standardised process as other applicants. The documentation initially referenced an email contact for enquiries, but it was unclear how proactively this opportunity was promoted throughout the admissions journey. At the onsite visit, the programme team confirmed that RPL information is integrated into admissions-facing materials, including the UoG website, and that applicants are made aware of this opportunity during both pre-application enquiries and formal interviews. The visitor team was assured that the RPL process is robust, clearly documented, and appropriately communicated to applicants.
8. In evaluating the evidence submitted in relation to Standard 1.6, the visitor team reviewed a range of documentation, including the BSc (Hons) Nursing Programme Information, RPL guidance, the Higher Skills Centre APL mapping

tool for advanced credit learners, and presentation materials provided by the programme team. The documentation confirms that applicants who are already registered nurses may apply for RPL of up to 240 credits, in line with UoG's academic regulations. A clear and structured RPL process is in place, supported by written guidance and mapping tools to enable individual assessment. During the visit, the programme team explained how RPL applications are considered on a case-by-case basis, with appropriate academic oversight and quality assurance. The visitor team was assured that the process is robust, consistently applied, and aligned with institutional policy and NMC regulatory requirements.

9. In the assessment of Standard 1.7, the visitor team reviewed a range of documentation to evaluate how the programme supports students in developing academic and digital capabilities throughout their studies. Key evidence included the safeMedicate© process and information document, academic support guidance, the academic support sessions flyer, student support materials, the simulation and interprofessional learning information for the BSc (Hons) Nursing programme, and the AI spiral content map. The documentation outlines a structured and progressive approach to developing student numeracy, most notably through the use of the safeMedicate© platform. Students are provided with multiple formative opportunities to practise dosage calculations and receive targeted feedback prior to their summative assessment. A clear support process is in place for students who require additional assistance in this area, enabling early identification and tailored intervention. In addition to numeracy, the programme offers robust academic support through a series of scheduled workshops, writing clinics, and skills-based sessions. These activities cover academic writing, referencing, reflective practice, and presentation skills and are actively promoted through student-facing guidance materials. The academic support framework is designed to be accessible, preventative, and responsive to student need. The visitor team also considered how digital skills are developed throughout the programme. In response to an initial line of enquiry, UoG confirmed that digital literacy is embedded across the curriculum. Simulation is used extensively to support the development of clinical decision-making, delivered through high and medium-fidelity patient simulators. Technology-enhanced learning is integrated consistently across modules, and the AI spiral content map demonstrates a planned, sequenced introduction of digital health tools to support students' engagement with evolving healthcare technologies. At the visit, these findings were triangulated through discussions with students, academic staff, and professional services, providing further assurance of the structured and well-signposted support in place.
10. Based on the information made available, the visitor team considers that UoG 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.2	Comply with the NMC Standards for student supervision and assessment.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.3	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.	<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 exposure across all four fields of nursing practice: adult, mental health, learning disabilities and children's nursing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.5	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.6	Set out the general and professional content necessary to meet the Standards of proficiency for registered nurses and programme outcomes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.7	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.8	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.9	Ensure the curriculum provides an equal balance of 50% theory and 50% practice learning using a range of learning and teaching strategies.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.10	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"/>
2.11	Ensure that programmes delivered in Wales comply with legislation which supports use of the Welsh language.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.12	Ensure that all pre-registration nursing programmes meet the equivalent of minimum length of three (academic) years for full time programmes, which consist of a minimum of 4,600 hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.13	Ensure programmes leading to registration in two fields of nursing practice are of suitable length to ensure proficiency in both fields of nursing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

2.14	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.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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## Curriculum requirements

For the undergraduate routes, the programmes are delivered over three academic years and comprise a total of 4,605 programme hours. The theory-to-practice ratio for these routes is 2302.5 theory hours to 2,302.5 practice hours.

## Findings

11. A range of evidence was submitted by UoG to demonstrate compliance with Standards 2.1 through to 2.10 and 2.12, including programme specifications, handbooks, module descriptors, course planners, assessment strategies, field-specific mapping documents, and supporting evidence such as the AI Spiral, Practice, Simulation and Interprofessional Education (IPE) Strategy, Final Planner 2025/6, and modules mapped to the SoP. Additional evidence was also provided through student journey planners, digital learning tools, and documentation related to PSC involvement and apprenticeship delivery. During the onsite visit, meetings were held with senior institutional leads, members of the course and simulation teams, digital learning representatives, students from across fields and cohorts, PSCs, and PLPs. These meetings supported triangulation of the submitted documentation and provided insight into the pedagogic and operational approaches underpinning programme delivery. Two ad hoc evidence requests were made to clarify the approach to curriculum mapping and the status of the UoG case studies, and further discussion was held regarding the tracking of student engagement with the NMC SoP. While many aspects of the curriculum are well conceived and align with NMC expectations, the visitor team sought greater clarity around the monitoring and recording of total programme hours, particularly in relation to guided independent study. Although discussions with the programme team and supporting documentation provided some assurance, direct evidence of consistent recording mechanisms was not seen. The visitor team acknowledges that this area was broadly triangulated but recommends that UoG further develop and formalise processes to ensure consistent monitoring and documentation across the programme.
12. The proposed modifications to the UoG pre-registration nursing programmes impact Standards 2.1 through to 2.10 and 2.12. These changes form part of a strategic redesign intended to update and future-proof the nursing curriculum in response to regulatory expectations, workforce needs, and advances in pedagogical practice. Additionally, the revised curriculum introduces a streamlined structure of shared core modules (NU4001, NU5001, NU6001), enhanced simulation-based learning, AI integration, and IPE involving learners from across the School of Health and Social Care, including nursing, allied health professions, and other disciplines. These developments are designed to strengthen field-specific identity while maintaining a consistent and collaborative educational experience across all routes. The changes are also intended to ensure improved clarity in module progression, greater transparency in assessment strategy, and more robust alignment to each field's required programme outcomes. These developments were described by the provider as

necessary to support quality assurance, inclusivity, and graduate readiness for practice.

13. In considering Standard 2.1, the visitor team reviewed a range of evidence including the IFATE Apprenticeship Mapping document, the 2020-2025 Mapping with Contingency Planning document, the BSc (Hons) Nursing Practice, Simulation and Interprofessional Learning Information, the Nursing Major Modification Stakeholders document, and the BSc Nursing Programme Information. An initial line of enquiry was raised to confirm the mapping of IFATE outcome K21, the tracking of practice hours, and the monitoring of appropriate learning experiences. A second line of enquiry focused on the completion and currency of contingency documentation, as well as the quality assurance of simulation and guided independent study activities. As part of this review, the visitor team considered evidence relating to stakeholder involvement in programme development and delivery. While the programme team outlined mechanisms for engaging PLPs and PSCs in various aspects of programme governance.
14. During discussions with students at the onsite visit, the visitor team learned that a two-week international placement in Croatia is offered in years two and three. Students reported that this experience was drawn from their existing practice learning allocation. The programme team subsequently confirmed that 52.5 hours were allocated to this placement and included in the total 2,302.5 hours of planned practice learning. Further clarification with the programme and senior staff confirmed that the Croatia placement had not been subject to a formal educational audit, as required under UoG's own governance processes and the NMC's expectations for approved practice learning environments (PLEs). The experience is not formally assessed, but the programme team indicated that academic staff from UoG accompany students and act in the roles of PS and PA, primarily to record clinical hours. This approach was adopted because placement staff in Croatia have not received formal PS/PA preparation in line with the SSSA. However, the visitor team found a lack of clarity around how these roles are enacted in practice, including whether non-UG staff contribute to supervision, and whether any local staff have received or require PS/PA preparation. In the absence of a formal audit, it is not possible to confirm whether appropriate oversight, governance, or role preparation is in place to ensure compliance with regulatory expectations.
15. While the visitor team recognises the potential experiential value of this opportunity, its unaudited status, lack of formal partnership arrangements, and unclear supervisory model mean it cannot currently be recognised as an approved practice learning environment. As such, the placement does not meet the requirements set out in SFNME Standard 2.2, Requirements 2.14 and 2.16, or the SSSA Standards 1.3 and 1.4, which collectively require that learning environments are subject to regular review, are safe and effective, and that all those supporting students are suitably prepared and supported. Consequently, the 52.5 hours attributed to this unaudited and unverified placement cannot be counted towards the practice learning hour total. Once excluded, the programme falls below the NMC's required minimum of 2,300 practice learning hours, as set out in Standard 2.1, and is no longer compliant with SFNME Standard 5.1, Requirement 5.3, which mandates an equal balance of theory and practice. The visitor team concluded that Standard 2.1 cannot be deemed met unless **condition (C1)** is addressed in full. In addition, to strengthen assurance around

the monitoring of total programme hours, particularly in relation to guided independent study, the visitor team makes **recommendation (R2)** to support the implementation of a formal and consistent process for evidencing student engagement in guided independent study, ensuring structured recording and monitoring in alignment with programme requirements.

16. In reviewing Standard 2.2, the visitor team reviewed a range of evidence including the BSc (Hons) Nursing Practice, Simulation and Interprofessional Learning Information, the BSc Nursing Programme Information, the Draft 2025 Nursing Skills Maps, and documentation outlining the training and preparation for PAs and PSs, including booking processes, course content, and role responsibilities. These materials demonstrate that UoG has established a strong infrastructure to support high-quality practice education, with documented processes aligned with the SSSA. Governance documents confirm the presence of systems for placement quality assurance, interprofessional collaboration, and the development of a positive learning culture. For audited UK-based placements, these arrangements appear robust and fit for purpose. However, during the onsite visit, the visitor team became aware of a semi-elective international placement in Croatia, offered in either year two or year three, to which 52.5 practice learning hours are attributed. Upon further investigation, the visitor team confirmed with the programme team and senior university staff that this placement had not undergone a formal educational audit in line with UoG's established placement quality assurance procedures. While the placement was described as a valuable experiential learning opportunity, the absence of audit means there is no documented evidence that the PLE has been evaluated against the requirements set out by the NMC. Specifically, there is no assurance that the setting is safe and effective, or that appropriate governance and oversight arrangements are in place. Consequently, the placement does not meet the expectations of SSSA Standard 1.3, which requires that all learning environments be subject to audit and ongoing quality assurance.
17. The visitor team was informed that academic staff from UoG accompany students on the placement and fulfil the roles of PS and PA. This was presented as a mitigation due to the absence of PS/PA preparation for local placement staff. However, because the setting has not been audited, there is no clarity about the wider supervisory arrangements in place. It is unknown whether local staff contribute to the students' learning or supervision, what preparation, if any, has been provided for them, or how responsibilities are shared. The lack of audit also means there is no evidence that the PLE is appropriately governed, or that all individuals involved in supervision and assessment are prepared in line with SSSA Standard 1.4, which requires that students are supported by individuals who are appropriately trained and understand their role. While the visitor team recognises that the international placement may offer a valuable experiential learning opportunity, the absence of formal audit, a documented governance structure, and assurance of appropriate supervision and preparation means the 52.5 hours associated with the placement cannot currently be assured as meeting the NMC's SSSA. As such, the placement cannot be recognised as a compliant PLE. The visitor team concluded that Standard 2.2 cannot be deemed met unless **condition (C1)** is addressed in full.
18. In reviewing Standard 2.3, the visitor team considered a broad range of evidence to assess the alignment of programme learning outcomes with the SoP for registered nurses across the adult, mental health, and learning disabilities fields. This included the BSc Nursing Programme Information, NU4002 Module Map -

My Professional Journey, the UoG Families Case Study Document, the Draft 2025 Nursing Skills Maps, the BSc (Hons) Nursing Practice, Simulation and Interprofessional Learning Information, the IFATE Apprenticeship Mapping, and the Nursing Apprenticeship Handbook. The Year 1–3 BSc Journey Planners were also reviewed to confirm developmental alignment over time. Initial and subsequent lines of enquiry focused on the visibility and use of the SoP within student-facing documentation and the extent to which students are actively guided to engage with them throughout their learning journey. The visitor team also sought clarification on how statutory safety legislation, such as the Health and Safety at Work Act, Control of Substances Hazardous to Health, and Reporting of Injuries, Diseases and Dangerous Occurrences Regulations is taught and assessed across the programme. The submitted documentation demonstrated a clear intent to embed the SoP across the programme structure, with module outcomes, assessment strategies, and simulation-based learning activities mapped against the platforms and annexes. The programme specifications and module descriptors reviewed provide appropriate coverage of the proficiencies, with evidence of progressive development over the three programme years. Simulation and Nursing Skills Maps confirm the planned integration of required proficiencies, while the UoG Families Case Study document outlines eight structured scenarios that contextualise learning in diverse and realistic care settings.

19. The visitor team initially noted an absence of explicit reference to health and safety legislation in the documentation. This was subsequently addressed through follow-up evidence and verbal confirmation at the visit, which clarified that these topics are delivered through modules NU4002 and NU5303. In addition, although the Nursing Apprenticeship Handbook did not include comprehensive module content, the visitor team was assured that this resource is used in conjunction with standard programme materials to support student understanding of progression, assessment expectations, and learning outcomes. A further line of enquiry explored how the SoP are made meaningful to students in relation to their professional identity formation and progress tracking. During the onsite visit, the programme team confirmed that the SoP are embedded within the electronic Practice Assessment Document (ePAD), integrated into module content and reflective assignments, and revisited during structured discussions with personal tutors. Students are encouraged to actively engage with the SoP through formative and summative activities that support professional development and self-assessment. The visitor team was satisfied that the programme learning outcomes are appropriately mapped to the NMC's SoP for registered nurses and that they are clearly differentiated across the three fields of practice. Clarifications provided during the visit strengthened the visitor team's assurance that the SoP are not only embedded in the curriculum, but are also used meaningfully to support student progression, reflection, and professional identity development.
20. In considering Standard 2.4, the visitor team reviewed a wide range of evidence to evaluate whether the programme is designed and delivered in a way that supports students and provides appropriate exposure to all four fields of nursing practice. This included the BSc (Hons) Nursing Programme Information, NU4003 Module Map - Health and Wellbeing, NU4002 Module Map - My Professional Journey, BSc Year 1-3 Student Journeys, Modules Mapped to the SoP, the Practice, Simulation and Interprofessional Learning Information, the UoG Families document, the PLP list, the Draft Sustainability Content, and the Academic Support Sessions Flyer. Initial and follow-up lines of enquiry were issued to clarify the integration and

completeness of case study resources, the version control procedures for module NU4003, and the use and accessibility of the PLP list. The evidence submitted demonstrated that

the programme is structured to ensure all students, regardless of their field of registration, are exposed to each of the four fields of nursing. Core and shared modules across all three years are explicitly mapped to the NMC SoP, with field-specific content integrated into modular outcomes and placement arrangements. Module descriptors introduce foundational knowledge in year one, including anatomy, physiology, and pharmacology, progressing to advanced, field-aligned competencies in years two and three. This spiral curriculum design was confirmed in the written narrative and through discussion with the programme team during the onsite visit. The UoG Families resource was initially presented with three of five intended case studies; however, the visitor team received confirmation during the visit that eight fully developed scenarios were in use. These case studies support structured, meaningful exposure to each field through simulation, placement preparation, and academic assessment activities, enhancing the inter-field relevance of the student learning experience.

21. With regard to practice learning experiences (PLEs), the PLP list was revised in response to the visitor team's request and now includes a key denoting field specificity. During the visit, the programme team clarified that the list is primarily used by placement coordination staff but also informs student understanding of field exposure during planning and personal tutor meetings. Additional academic and pastoral support is available to guide students, particularly those less familiar with local services. Although NU4003 was initially presented in draft form, the programme team confirmed that this version is managed within a defined version control process and subject to internal quality assurance. The visitor team was assured through mapping documentation that programme learning outcomes are aligned to module learning outcomes and to the NMC SoP. The process described was considered robust and appropriate for ensuring consistency of delivery. The programme also evidences a clear commitment to interprofessional education, with collaborative learning activities involving other health and care professions embedded within core modules. These include joint simulation sessions and scenario-based activities conducted across professions, enhancing students' understanding of integrated care. Sustainability and environmental health are similarly embedded, extending the scope of learning beyond acute care settings. The visitor team was assured that the programme is both designed and delivered in a way that effectively supports students and ensures consistent, appropriate exposure to all four fields of nursing practice.
22. In reviewing Standard 2.5, the visitor team reviewed a broad suite of evidence to evaluate whether the programme is clearly structured and consistently described, including the BSc Nursing Programme Information, the BSc (Hons) Nursing Practice, Simulation and Interprofessional Learning Information, the Year 1–3 Student Journeys, the PLP list, the UoG Families document, the NU4003 Module Map, and the Major Modifications and Transformation Plan. Initial and follow-up lines of enquiry were raised in response to inconsistencies in the way routes of entry and delivery modes were presented across materials. Some documents referred to 'blended' alongside 'direct' and 'apprenticeship' as though it were a separate route of entry, while others used the terms 'standard' and 'extended' without a clear definition. Additional clarification was sought regarding how programme hours, particularly guided independent study, and the 300 hours of simulated practice learning (SPL) are timetabled, monitored, and assured. The visitor team also requested clarification on the function and accessibility of the list of PLPs. During the onsite visit, the programme team confirmed that the three

recognised routes of entry are direct entry, apprenticeship, and extended study, the latter supporting learners requiring alternative progression timelines. 'Blended' was clarified as a mode of delivery, not a distinct route of entry. All students follow a single, mapped curriculum with appropriate differentiation in delivery, support, and learning modality. UoG confirmed that documentation would be revised to ensure consistent terminology is used across internal and external materials.

23. With regard to programme hours, the visitor team reviewed systems in place to record and monitor student activity across placement, simulation, taught sessions, and guided independent study. Attendance and engagement are tracked using ARC for practice learning and JISC analytics for online engagement with academic content. Where taught sessions are missed, students are expected to complete independent learning declarations, reviewed with academic advisors as part of the reflective process. The 300 hours of SPL are fully timetabled, appropriately supervised, and distributed across the programme using high and medium-fidelity approaches, as outlined in the BSc (Hons) Nursing Practice, Simulation and Interprofessional Learning information. Although expectations for guided independent study vary across modules, staff provide clear structure and support to help students understand their responsibilities and how these activities contribute to total programme hours. To strengthen consistency and enhance assurance of student engagement in this area, the visitor team makes **recommendation (R2)**, advising the implementation of a formal and consistent process for evidencing guided independent study across all routes and delivery models. The updated PLP list, now including a key denoting field specificity, was confirmed to be primarily used by placement coordination teams. However, it also supports student understanding of field exposure during placement planning discussions, particularly for students unfamiliar with local service providers. Based on the evidence reviewed and discussions held during the visit, the visitor team was assured that the programme is clearly structured, that routes of entry and delivery are appropriately defined and differentiated, and that effective systems are in place to monitor student progress and engagement across all delivery models.
24. In considering Standard 2.6, the visitor team reviewed a wide range of evidence to evaluate whether the programme includes the general and professional content required to meet the SoP for registered nurses across the adult, mental health, and learning disabilities' fields. Key evidence included the BSc Nursing Programme Information, the Nursing Practice, Simulation and IPE content, the Student Journeys for Years 1–3, UoG Families, module maps and descriptors, the IFATE apprenticeship mapping, and the modules mapped to SoP document. The submitted materials demonstrate that all seven platforms and the associated annexes of the SoP are addressed within the programme. The mapping document explicitly aligns proficiencies with module content, assessments, and simulation-based learning. Module descriptors and programme specifications reflect a coherent balance of theory, simulation, and practice, with clear links between learning outcomes and NMC professional requirements. The integration of simulation, interprofessional education, and placement-based learning supports student achievement of the programme outcomes across all fields of practice. The student journey planners outline the structure and sequencing of learning across the three years and confirm how each route supports progressive

development. The visitor team noted that adding explicit references to the SoP within these planners could further strengthen student engagement with professional standards.

25. During the onsite visit, the visitor team explored how students are supported to track their progress against the SoP and was assured that this is facilitated through the ePAD, the My Professional Journey modules, and structured academic tutor discussions. A specific line of enquiry focused on IFATE Outcome K21, which was not initially evident in the mapping. During the visit, the programme team confirmed where K21 is taught, reinforced in practice, and assessed summatively. This clarification was reflected in the revised mapping document, which was shared with the visitor team during the visit and confirmed as accurate. The Nursing Apprenticeship Handbook, while less detailed than other programme handbooks, was confirmed to be used in conjunction with standard programme materials. UoG also outlined version control procedures to ensure consistency and clarity across all routes of delivery. The UoG Families case studies were identified as a developing resource. While not fully complete at the time of initial submission, the visitor team was assured during the visit that eight case studies are now in use and effectively enhance field-specific exposure and contextualised learning. Based on the evidence reviewed and discussions held during the visit, the visitor team was satisfied that the programme includes the general and professional content required to meet the SoP across all fields of nursing.
26. In reviewing Standard 2.7, the visitor team considered a range of documentation to evaluate whether the programme includes the necessary content to meet the programme outcomes for each of the three fields of nursing practice: adult, mental health, and learning disabilities. The evidence reviewed included the BSc Nursing Programme Information, the modules mapped to the SoP, the Service User Handbook, and the UoG Families case study resource. The programme specification and associated module descriptors provide clear detail regarding modular content, field-specific learning outcomes, and assessment strategies. The documentation evidences a balance between shared learning and differentiated field-specific modules, with tailored assessments designed to ensure students develop the proficiencies relevant to their chosen field of practice. The mapping document offers comprehensive alignment between the curriculum and the NMC SoP, demonstrating how field-specific learning is embedded across all three years of the programme. Field-specific content is further supported through active engagement with PSCs, as outlined in the Service User Handbook. This resource details how individuals with lived experience contribute to SPL teaching and assessment activities, providing authentic insights into the varied needs of PSCs across the different fields of nursing. Their involvement strengthens the real-world relevance and inclusivity of field-specific learning. The UoG Families case study resource was also reviewed as an emerging asset designed to reinforce the application of knowledge across fields. At the time of the review, three of the five intended case studies were available; however, UoG confirmed during the onsite visit that eight fully developed scenarios are now in use. These case studies are being integrated into simulation-based learning, academic delivery and formative and summative assessment activities, enhancing students' ability to contextualise knowledge within their field of practice. Based on the documentation reviewed and discussions held during the visit, the visitor team was assured that the programme includes the content necessary to meet the outcomes for each field of nursing practice.

27. In considering the evidence submitted for Standard 2.8, the visitor team reviewed a range of documentation to evaluate whether the programme includes field-specific content in relation to law, safeguarding, consent, pharmacology, and medicines administration and optimisation. Key materials included the BSc Nursing Programme Information, the Modules Mapped to the SoP, and the Draft NU6005 Module Map - Medicines and Public Health. The programme adopts a spiral curriculum model, with these five core areas embedded progressively across all three years of study. Dedicated spirals for medicines management and safeguarding are clearly articulated in the documentation, underpinned by cross-referenced tables that map each area to specific modules and corresponding learning outcomes. This mapping confirms that law, safeguarding, consent, pharmacology, and medicines optimisation are addressed consistently and with increasing complexity in each field of nursing. The module descriptors for NU4001, NU5001, and NU6001 illustrate how foundational concepts are introduced, built upon, and applied through assessment. The draft NU6005 module demonstrates how pharmacology and medicines optimisation are drawn together in the final year of study, providing a capstone learning experience that reflects the culmination of earlier content. Together, these documents confirm that students are systematically prepared to meet the field-specific legal, ethical, and clinical requirements associated with registration. Based on the evidence reviewed, the visitor team concludes that the programme appropriately incorporates the required field-specific content in these five key areas.
28. In reviewing the evidence submitted for consideration in relation to Standard 2.9, the visitor team sought assurance that the programme provides an equal balance of 50% theory and 50% practice learning, using a range of learning and teaching strategies. The visitor team reviewed a range of evidence including the BSc Nursing Programme Information, the BSc (Hons) Nursing Practice, Simulation, and IPE Information, the Final Planner 2025/6, and the Draft Nursing Skills Maps. The programme documentation outlines the structure of theoretical and practice components across the three years of study, including indicative breakdowns of contact hours, placement hours, simulation hours, and guided independent study. Simulation is positioned as a core component, delivered in both academic and practice settings, with an intended allocation of 300 hours, equating to approximately eight weeks of learning at 37.5 hours per week. The use of JISC analytics, ARC, and Student Declaration Forms is described to support attendance tracking and student accountability, with reflective conversations between students and academic advisors used to support independent study engagement. However, the visitor team noted that the systems for formally verifying and recording independent study and protected learning time could be strengthened, as the documentation provided did not consistently demonstrate how these elements are assured across all routes. While student responsibility for tracking hours is acknowledged, the oversight mechanisms, particularly relating to tutor engagement, consistent institutional processes, and quality assurance, are not clearly articulated in the documentation.
29. Additionally, the programme includes a semi-elective international placement in Croatia which, according to the programme team, contributes 52.5 practice hours. As detailed under Standards 2.1 and 2.2, this placement has not been subject to a formal audit and therefore does not meet the requirements of the NMC SSSA. As a result, the hours associated with this placement cannot be counted toward the total practice hour requirement. When these unaudited hours are removed from the calculation, the programme no longer meets the 50:50 theory-to-practice

balance mandated by the NMC, nor does it maintain the minimum 2,300 practice hours required for registration. While the programme demonstrates a pedagogically coherent model grounded in spiral learning and simulation-enhanced strategies, these innovations must be underpinned by robust systems that provide assurance of alignment with core regulatory requirements. Although the curriculum includes planned simulation and guided independent study components, the visitor team did not see sufficient evidence of formal, auditable mechanisms for scheduling, verifying, and tracking these activities across the programme. In particular, the absence of a system to formally evidence guided independent study contributed to the visitor team making **recommendation (R2)** to strengthen the consistency and quality assurance of total programme hours. Alongside this, the confirmed shortfall in practice learning hours for students undertaking the unaudited Croatia placement constitutes a material issue. As a result, the visitor team concluded that Standard 2.9 cannot be deemed met unless **condition (C1)** is addressed in full.

30. In considering Standard 2.10, the visitor team sought assurance that the programme ensures technology and simulation opportunities are used effectively and proportionately across the curriculum to support supervision, learning and assessment. The documentation reviewed including the BSc (Hons) Nursing Practice, Simulation and IPE Information, the Safe Medicate Process and Information, the AI Spiral and the BSc Nursing Programme Information provides a clear account of how simulation, digital tools, and online platforms are embedded throughout the programme. Collectively, these documents provide a clear and coherent account of how simulation, digital tools, and virtual learning platforms are embedded throughout the programme. The use of SPL is planned across institutional, clinical, and interprofessional contexts, aligning with the programme's spiral curriculum model. Tools such as the digital numeracy and medication platform, AI-informed nursing resources, and digital learning environments are employed to enhance student readiness for clinical practice. Simulation-based learning is mapped to the NMC SoP and annexes and is delivered in a manner that reflects contemporary pedagogical principles.
31. The programme documentation also demonstrates effective integration of interprofessional education and a consistent approach to technology-enhanced learning. The visitor team noted that the programme outlines a total of 300 hours of simulation, equivalent to approximately eight 37.5-hour weeks. As noted in previous standards (2.1, 2.5, and 2.9), this volume requires careful planning to ensure that it is timetabled appropriately and fully achievable within the academic structure. However, those concerns relate to scheduling and assurance processes rather than the strategic or pedagogical use of technology. In response to the visitor team's lines of enquiry, the programme team confirmed that systems such as ARC, JISC analytics, and Student Declaration Forms are used to monitor engagement with simulation, guided study, and supervised learning activities. Digital platforms referenced in the AI Spiral Document were confirmed to be covered by valid institutional licences and subject to appropriate UK GDPR-aligned data governance. Clarification was also provided regarding student access to the ePAD, with internal policies ensuring students are advised on how to download or export records before access ends.

32. In reviewing the evidence submitted in consideration of Standard 2.12, the visitor team sought clarification that the pre-registration nursing programmes meet the equivalent of a minimum of three academic years of full-time study and a total of 4,600 programme hours, comprising 2,300 theory and 2,300 practice hours. The documentation submitted, including the Final Planner, the BSc Nursing Programme Information, and the Nursing Practice, Simulation, and IPE document, illustrates UoG's intention to meet the required programme length, and minimum and total hours. The programme planners detail the distribution of theory and practice hours across the curriculum and suggest that, in principle, students following both standard and extended routes have access to the necessary hours.
33. However, during the onsite visit, the programme team confirmed that students may undertake a semi-elective international placement in Croatia, which is currently allocated 52.5 practice hours. Upon further examination, the visitor team determined that this placement does not comply with the NMC SSSA and therefore cannot be recognised as a valid PLE. As a result, these 52.5 hours cannot be counted toward the required 2,300 practice learning hours. The removal of these hours reduces the achievable practice total from 2,302.5 to 2,250 hours for students electing this placement and consequently reduces the overall programme hours from 4,605 to 4,552.5, below the NMC's required threshold. In addition to this shortfall, the visitor team identified a lack of clarity regarding the assurance of guided independent study hours. While the curriculum design includes independent learning as a planned component, and tools such as JISC analytics, Student Declaration Forms, and personal tutor discussions are cited as mechanisms to support engagement, the visitor team was not shown physical evidence of how independent study hours are recorded. Only reflective records were provided. As a result, the documentation did not demonstrate a formal, consistently applied, and auditable process for verifying guided study time. It remains unclear how missed sessions are systematically tracked, how recovery plans are implemented, or where responsibility lies for oversight and assurance of study time compliance. While successful completion of assessments may indicate engagement, this alone does not provide the explicit evidence required to demonstrate fulfilment of the NMC's expectations for total programme hours.
34. Although the visitor team acknowledges the provider's stated intention to meet the NMC's minimum requirements, the current provision does not provide assurance that all students, specifically those undertaking the Croatia placement, are supported to complete the mandated 2,300 practice hours and 4,600 total programme hours. In the absence of a verified replacement for the non-compliant Croatia placement hours and a formal system to evidence independent study, a material gap remains. The visitor team concluded that Standard 2.12 cannot be deemed met unless **condition (C1)** is addressed in full. To support ongoing quality assurance of total programme hours and strengthen consistency in programme delivery, the visitor team also makes **recommendation (R2)** in order to establish a formal and consistent process to evidence student engagement in guided independent study, with structured recording and monitoring in place to ensure alignment with programme requirements.
35. Based on the information made available, the visitor team considers that UoG has in place the appropriate arrangements for Standard 2: Curriculum to enable the NMC standards to be met subject to meeting **condition (C1)**.

### 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 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.	<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 registered nurses 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	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.4	Provide no less than 2,300 practice learning hours, of which a maximum of 600 hours can be in simulated practice learning.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.5	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"/>
3.6	Ensure students experience the range of hours expected of registered nurses.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.7	Ensure that students are supernumerary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Practice learning requirements and simulated learning hours

For undergraduate routes, the programme provides 2302.5 practice learning hours, of which 300 hours are delivered through simulated practice learning (SPL).

#### Findings

36. The visitor team reviewed a comprehensive range of documentation in relation to 3: Practice learning, including the BSc (Hons) Nursing Programme Information Document, BSc (Hons) Nursing Practice, Simulation and Interprofessional Learning Information, Nursing Skills Maps, Module Mapping to SoP document, Final Planner document, Practice Learning Partnership Agreement, EPPG Terms of Reference and Minutes, Gateway Evidence, and the Practice Evaluation example 2023-24. These were used to confirm alignment with the NMC's requirements on placement design, student support, and exposure across the lifespan and four fields of nursing practice. The visitor team also considered key strategy documents relating to equality, diversity, and inclusion, including the Gender Equality Plan, EDI Strategy, and Reasonable Adjustments Flowchart. Supplementary documentation such as Preparation for Practice PowerPoint (Year 1) and Student Support Presentations further supported evaluation of

student readiness for practice learning. These findings were triangulated during the onsite visit through meetings with the programme leadership team, members of the practice education team, placement partners, and students from both direct-entry and apprenticeship routes. The visitor team also discussed service-level agreement processes, the operationalisation of reasonable adjustments in practice settings, and governance mechanisms for maintaining quality and equity across placements.

37. The proposed modifications to UoG's pre-registration nursing programmes impact Standards 3.1 through to 3.7. Central to the rationale for modification is the restructuring of programme routes, including revised timelines and curriculum delivery models across direct-entry, blended learning, and apprenticeship pathways. These changes affect how students are allocated to PLEs, how parity of field exposure and lifespan experience is assured, and how practice learning hours are distributed and verified, including simulated practice. Additionally, the visitor team considered how reasonable adjustments for students with individual needs would be managed consistently across different modes of delivery and contractual arrangements. The visitor team explored whether sufficient oversight mechanisms are in place to monitor and enhance the inclusivity and suitability of placements, particularly in relation to equality legislation and NMC expectations. Assurance was sought on how the revised programme model supports student development through supernumerary status, appropriate shift patterns, and structured practice learning that aligns with the required SoP. The quality and scope of practice learning under the proposed modifications was therefore a key area of scrutiny in evaluating whether these seven standards remain fully met.
38. In considering Standard 3.1, the visitor team reviewed the BSc (Hons) Nursing Major Modification document: University Level Information 25/26, Students' Experience report 2024, Student Voice document, BSc (Hons) Nursing Practice, Simulation and Interprofessional Learning Information, EPPG Terms of Reference and Minutes, Gateway Evidence, Final Planner document, and the PLP document. These materials were considered to determine whether UoG provides practice learning opportunities that allow students to develop and meet the SoP for registered nurses across the four fields of nursing: adult, mental health, learning disabilities, and children's nursing. The documentation outlines a network of PLEs designed to ensure students encounter the breadth of care experiences necessary to deliver safe and effective care to a diverse range of PSCs. The Practice, Simulation and Interprofessional Learning Information confirms an integrated model, where placement learning is supplemented with structured simulation and university-led initiatives, such as the Families Support team, to ensure cross-field awareness and capability.
39. During the onsite visit, the programme team and PLPs confirmed that students are monitored to ensure exposure to all four fields, and that any identified gaps, particularly in learning disabilities or children's nursing, are addressed through simulation and targeted field-specific activities. PLPs and EPs described collaborative mechanisms for reviewing placement suitability and ensuring students encounter diverse PSC groups. Students also shared examples of shared learning days and spoke positively about opportunities to learn across fields, including 'spoke' placements and interprofessional simulation scenarios. In meetings with the programme team and PLPs, the visitor team was assured that the three fields offered - adult, mental health, and learning disabilities - met the standard in ensuring students achieve the SoP for registered nurses in their field.

This assurance was underpinned by the structured support and monitoring provided through the ePAD. Further, the management team highlighted how simulation is strategically used not only to supplement direct placement experience but also to assess proficiencies required for registration. This triangulation of practice, simulation, and portfolio monitoring contributed to the visitor team's confidence that all students are supported to develop and demonstrate proficiency in their field. The EPPG Terms of Reference and meeting minutes demonstrate that UoG maintains a regular cycle of placement review and evaluation through collaborative partnership meetings. However, the visitor team noted that while UoG asserts all students gain exposure across all fields, the documentation is not always explicit about which populations individual PLEs serve. Student-facing reports, such as the Students' Experience Report 2024, Student Voice Document, and NSS/ACE action plans, highlight some variability in perceived placement relevance and variety. Notwithstanding these issues, the visitor team was assured, through triangulated review of documentation and stakeholder discussions, that students are provided with sufficient opportunities across the programme to develop the required proficiencies. While concerns regarding the Croatia placement were noted under Standard 4.1, they do not undermine overall compliance with Standard 3.1.

40. In considering Standard 3.2, the visitor team reviewed a range of documents including the PLP document, EPPG Terms of Reference and Minutes, Nursing Skills Maps, BSc (Hons) Nursing Practice, Simulation and Interprofessional Learning information, and the Module Mapping to SoP document. These materials were assessed to determine whether the programme ensures students experience the variety of practice expected of registered nurses to meet the holistic needs of people of all ages. The documentation confirms that the programme structure enables students to gain experience across the lifespan, supported by a network of four primary PLEs and additional spoke placements. These environments provide access to a diverse range of healthcare settings, including acute, community, mental health, and voluntary sector services, ensuring breadth and depth of care experience. The Nursing Skills Maps and BSc (Hons) Nursing Practice, Simulation and Interprofessional Learning information further evidence the integration of theory, SPL, and practice, and demonstrate how both general and field-specific learning needs are addressed across the curriculum. Interprofessional education activities involving students from other health and care professions enhance collaborative learning and support the development of professional behaviours. The Module Mapping to SoP document provides clear alignment between the required skills and the student journey through a range of clinical and simulated settings, confirming that learning across the lifespan is embedded in the programme design.
41. During the onsite visit, the visitor team met with the programme team, senior management, and PLPs. These discussions confirmed that students experience a wide variety of practice settings and that simulation is used effectively to ensure comprehensive coverage of needs across all life stages. The Simulation Lead described how simulation-based scenarios are designed to expose students to complex and specialist care needs, thereby supporting development of a holistic approach to care. Students also shared examples of joint learning opportunities that enabled them to develop field-specific knowledge while simultaneously gaining insight into the needs of PSCs across all fields and age groups. These shared learning activities were viewed by the panel as an important mechanism for augmenting student understanding of holistic and lifespan-focused care. PLPs described a collaborative approach to ensuring students encounter a

representative range of PSC experiences and confirmed that preparation and induction support is tailored to each placement context. The programme team further confirmed that these principles apply across all routes of study, including blended and apprenticeship pathways, with placement mapping and simulation logs used to track and supplement student experience. Based on the triangulated evidence and discussions held during the visit, the visitor team was assured that students will experience sufficient variety in their practice learning to meet the holistic needs of people of all ages.

42. In considering Standard 3.3, the visitor team reviewed the Nursing Skills Maps and a Practice Evaluation Example from 2023-2024 to assess whether the programme provides sufficient practice learning opportunities for students to meet the communication and relationship management skills and nursing procedures required by the SoP for registered nurses. These documents clearly demonstrate how the programme enables students to engage with, apply, and consolidate the skills and procedures outlined in Annexe A and Annexe B across all four fields of nursing practice: adult, mental health, learning disabilities, and children's nursing. The Nursing Skills Maps explicitly identify where each required proficiency and procedure is encountered in the curriculum, including through direct practice learning, simulation, and interprofessional activities.
43. During the onsite visit, the programme team confirmed that SPL is used to support skills acquisition where direct clinical exposure may be variable, including for less frequently encountered procedures or field-specific scenarios such as caring for people with autism and learning disabilities. Students and PLPs confirmed that assessment of these skills is supported by the ePAD and electronic Ongoing Achievement Record (eOAR), which track performance across multiple placements and ensure proficiencies are signed off through the tripartite model involving PSs, PAs, and academic assessors (AAs). Students reported that the curriculum provided repeated opportunities to engage with these skills over time, building confidence and competence incrementally. The spiral curriculum design supports this developmental approach by enabling students to revisit and refine core skills at increasing levels of complexity as they progress through the programme. This structure ensures both field-specific competence and broader proficiency in communication, relationship management, and core nursing procedures. Based on the documentary evidence and triangulated discussions during the visit, the visitor team was assured that students are provided with appropriate and sufficient opportunities to meet the communication, relationship management, and nursing procedures required within their selected fields of practice.
44. In considering Standard 3.4, the visitor team reviewed a range of documentation including the BSc (Hons) Nursing Practice, Simulation and Interprofessional Learning information, Nursing Skills Maps, and an example Practice Evaluation from 2023-2024. The submitted materials describe UoG's simulation suite, which supports technology-enhanced and simulation-based learning opportunities integrated throughout the curriculum. The programme outlines a spiral learning approach, with simulation embedded throughout Parts 1 to 3 to reinforce knowledge acquisition, clinical decision-making, and professional behaviours. Simulation is used not only to consolidate taught content but also to offer structured exposure to field-specific scenarios and underrepresented PSC groups, including caring for people with learning disabilities and people with autism. During the onsite visit, the programme team confirmed that simulation is

proportionately embedded and contributes 300 hours to the total 2,302.5 hours of required PLE. PLPs and programme staff explained that simulation attendance and learning outcomes are formally recorded and verified by PAs or PSs in accordance with the South ePAD requirements. Students shared positive reflections on simulation activities, describing how they helped prepare them for complex or unfamiliar situations before attending placement. Simulation was valued for developing clinical confidence, communication skills, and interprofessional teamwork. However, as noted under Standard 2.1, the inclusion of 52.5 hours of practice learning attributed to an international placement in Croatia has not been subject to formal audit or appropriate quality assurance processes and is not compliant with the SSSA or SFNME requirements. Once these hours are excluded, the total practice learning hours fall below the NMC-mandated minimum of 2,300 hours.

45. In considering Standard 3.5, the visitor team reviewed a range of documents including the Student Support PowerPoint, Equity, Diversity and Inclusion Strategy, Gender Equality Plan, Reasonable Adjustment Flowchart, BSc (Hons) Nursing Programme Information, Preparation for Practice PowerPoint Year 1, and relevant content from the 2020 submission. These materials were reviewed to evaluate whether students are provided with appropriate support in PLEs, including the implementation of reasonable adjustments. An initial line of enquiry was raised to clarify how reasonable adjustments are contractually and practically supported in PLEs, given limited detail in the original submission. In response, UoG submitted examples of current signed PLE agreements, along with supplementary documentation outlining how legal obligations under equality legislation are operationalised at placement level. The visitor team sought assurance in three areas: that PLEs are contractually required to implement agreed adjustments; that EDI principles are embedded within placement agreements; and that systems are in place to monitor and report on the implementation of adjustments. The BSc (Hons) Nursing Programme Information describes the use of a Health Abilities Passport, which is developed with students requiring support to ensure that reasonable adjustments are arranged prior to placement. However, earlier documents did not fully demonstrate how this process was consistently enacted across all settings, nor whether formal placement agreements mandated compliance. One flowchart submitted lacked detail regarding escalation, confidentiality, and enforcement. Following a further evidence request, UoG submitted updated documentation confirming that revised placement agreements now explicitly include clauses mandating the implementation of reasonable adjustments. These changes were confirmed during the onsite visit by the programme team and senior staff. It was also highlighted that standard NHS contracts in use now covered this obligation.
46. PLPs confirmed collaborative implementation of adjustments in practice and their role in supporting students through the Health Abilities Passport process. Students similarly confirmed that adjustments had been enacted appropriately and described the school as proactive and supportive. The visitor team was satisfied that current contractual agreements, governance structures, and reporting mechanisms now align with regulatory expectations. The visitor team's discussions with programme staff, students, and placement partners confirmed that processes for identifying and supporting students with individual needs are robust and collaborative, with evidence of effective communication and responsiveness. However, the visitor team advises that ongoing monitoring and the continued refinement of guidance for placement providers would further enhance consistency and quality across all environments.

47. In considering Standard 3.6, the visitor team reviewed the BSc (Hons) Nursing Programme Information document, which outlines the structure and expectations of students' PLEs. The documentation confirms that students are required to undertake placements that reflect the full range of shift patterns and working hours expected of registered nurses, including early, late, night, weekend, and bank holiday shifts. This approach is designed to prepare students for the realities of contemporary clinical practice and ensure compliance with the NMC's expectations for exposure to the breadth of service delivery. During the onsite visit, the visitor team heard from students, the programme team, and PLPs who confirmed through panel discussions that students routinely participate in varied shift patterns as part of their placement activity. It was also confirmed that reasonable adjustments are made for students with specific needs or circumstances, such as caring responsibilities, while maintaining the requirement to gain experience across the full range of hours expected within the profession. Based on the documentary evidence and triangulated discussions with stakeholders, the visitor team was assured that students will experience the full range of working hours expected within the nursing profession.
48. In considering Standard 3.7, the visitor team reviewed the BSc (Hons) Nursing Programme Information document, which outlines the expectations for student status in PLEs. Section 16 of the document, titled Learning and Teaching Methods clearly states that students are considered supernumerary while undertaking PLEs. It also confirms that students will work under both direct and indirect supervision, in line with their stage of learning, to support safe and effective professional development. During the onsite visit, the visitor team explored this area with students, PLPs, and the programme team. All groups confirmed that students are treated as supernumerary in practice and that this status is understood by placement staff. PLPs provided examples of how students are enabled to gain sufficient hands-on experience while remaining outside of the formal staff rota, ensuring that their learning is prioritised over service delivery. Rostering practices, placement audits, and supervisory structures were described as supporting the preservation of supernumerary status throughout placements.
49. Based on the documentary evidence and triangulated stakeholder feedback, the visitor team was assured that UoG meets the requirement for students to be supernumerary in practice settings. Based on the information made available, the visitor team considers that UoG has in place the appropriate arrangements for Standard 3: Practice learning to enable the NMC standards to be met, subject to meeting **condition (C1)**.

## 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.3	Ensure they inform the NMC of the name of the registered nurse 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 registered nurses and programme outcomes for their fields of nursing practice: adult, mental health, learning disabilities and children's nursing.	<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 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	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.8	Assess students to confirm proficiency in preparation for professional practice as a registered nurse.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.9	Ensure that there is equal weighting in the assessment of theory and practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.10	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Findings

50. A comprehensive range of documentation was reviewed in relation to Supervision and assessment of the NMC Standards for Pre-registration Nursing Programmes. This included the BSc (Hons) Nursing Programme Information document, BSc (Hons) Nursing Practice Simulation and Interprofessional Learning information, the South eOAR, and the South ePAD for Parts 1 to 3. These materials detailed the programme's approach to supervision, learning, assessment, and the roles and responsibilities of PSs, PAs, and AAs. During the onsite visit, the visitor team met with members of the programme team, senior academic leadership, and representatives from PLEs to triangulate and explore the implementation of supervision and assessment arrangements. This engagement provided insight into how institutional and placement-based processes operate in practice and informed the visitor team's judgements on the standards under review.

51. The rationale for the proposed major modification to UoG's pre-registration nursing programmes directly impacts Standards 4.1 through to 4.10. The revised curriculum introduces changes to the structure and delivery of supervision and assessment, including a greater emphasis on interprofessional simulation, the integration of AI and digital tools, and the expansion of placement options, including elective international opportunities. These changes require careful consideration of how support, supervision, and assessment comply with the SSSA and the SFNME. In particular, the continued inclusion of the Croatia placement, while described as a valuable international learning opportunity, prompted the visitor team to explore its alignment with regulatory requirements for audited learning environments and the preparation and oversight of those undertaking assessor and supervisor roles. Additionally, changes to placement design, the use of SPL to contribute to practice hours, and the introduction of new digital platforms required scrutiny of how parity, record-keeping, and proficiency sign-off are maintained across all routes and fields. As such, the rationale for modification has material implications for the assurance of student supervision, equitable assessment, and the validity of proficiencies across all aspects of the programme.
52. In considering Standard 4.1, the visitor team reviewed a range of documentation, including the BSc (Hons) Nursing Programme Information document, the BSc (Hons) Nursing Practice, Simulation and Interprofessional Learning Information, the South eOAR, and the South ePAD for Parts 1 to 3. These were triangulated through discussion with the programme team during the onsite visit. The programme documentation outlines a curriculum model underpinned by appropriate mechanisms for supervision, learning, and assessment in line with the SFNME. It clearly sets out the roles of PAs and PSs, and describes how student learning is supported in academic, simulated, and practice-based environments. The visitor team noted a structured approach to simulation and interprofessional education activities involving other health and care disciplines, which contributes to the programme's collaborative learning design.
53. During the onsite visit, the visitor team also explored how supervision is operationalised in practice learning environments. PLPs confirmed their awareness of their responsibilities, including maintaining learning logs and supporting student supernumerary status. However, some variation was reported in the preparation and documentation of PSs and PAs across placement settings, particularly within smaller PLPs and independent sector organisations. While this variation did not amount to non-compliance, it highlighted the need for greater consistency and transparency in local oversight mechanisms. Further clarification was also sought in relation to a cohort of students undertaking an elective international placement in Croatia. The programme team confirmed that this placement is not subject to a formal educational audit and that academic staff from UoG accompany students and act in the roles of both PS and PA. However, there is no documented local partnership agreement or governance structure to ensure that this placement meets the NMC's expectations for quality assurance, student safety, or parity of learning experience. As such, the placement does not meet the requirements of the SSSA, nor is it aligned with SFNME Standard 2.1, requirements 2.14 and 2.16, and Standard 5.1, requirement 5.3, which require that all learning environments, including international settings, are subject to equivalent educational governance arrangements as those within the UK. Specifically, there is no evidence of regular review of the learning environment to confirm its safety and effectiveness, and no assurance that the setting supports achievement of the proficiencies required for registration.

54. The lack of formal audit and quality assurance processes means that the 52.5 hours associated with the Croatia placement cannot be counted toward the programme's practice learning hour total. Students who elect to attend the Croatia placement therefore do not meet the overall practice hours as they fall below the NMC-mandated minimum of 2,300, as outlined in Standard 2.1, and disrupt the required balance of theory and practice learning under Standard 5.3. In the absence of formal governance and external oversight, the visitor team was unable to gain assurance regarding the suitability of this placement as part of a regulated nursing programme. To further support the quality assurance of total programme hours, and in particular the use of guided independent study, the visitor team also makes **recommendation (R2)**, advising the implementation of a formal and consistent process for evidencing student engagement with guided independent study, ensuring alignment with programme requirements. The visitor team determined that Standard 4.1 cannot be fully met until **condition (C1)** addressing the governance and audit requirements of the Croatia placement is satisfied.
55. In considering Standard 4.2, the visitor team reviewed a suite of documentation, including the BSc (Hons) Nursing Programme Information document, the BSc (Hons) Nursing Practice, Simulation and Interprofessional Learning Information, the South eOAR, and the South ePAD for Parts 1 to 3. These were triangulated with information provided during the onsite meeting with the programme team. The documentary evidence outlines UoG's proposed supervision and assessment structures across theory, simulation, and clinical practice, with defined roles for PAs, PSs, and AAs, in line with the SSSA. The programme team confirmed that no structural modifications are proposed to the current SSSA-aligned model, and the ePAD documentation reflects compliance in its expectations for supervision, sign-off, and ongoing review. This was reinforced through discussion with the programme team, who affirmed the continuation of current supervisory arrangements. PLPs described mechanisms for PS and PA preparation, including the use of records maintained at trust level. However, variability in uptake and documentation was noted, particularly in smaller settings and the independent sector.
56. During the onsite visit, the visitor team was also informed that a cohort of students undertakes a semi-elective international placement in Croatia. Members of the UoG academic team accompany students and fulfil the roles of PS and PA during the placement. However, the placement has not been subject to a formal educational audit and is not supported by a partnership agreement with a placement provider. Consequently, it does not meet the requirements of SSSA Standard 1.3, which mandates that all practice learning environments must be subject to appropriate quality assurance processes. In addition, SSSA Standard 1.4 requires that individuals responsible for student supervision and assessment are appropriately prepared and supported. In the absence of a formal audit or documented preparation process specific to the international context, the visitor team could not gain assurance that these standards are being met. The programme team stated that 52.5 practice learning hours are currently attributed to the Croatia placement. Given the unaudited status of this placement, these hours cannot be counted toward the programme's total practice learning hours in line with NMC regulatory expectations. This has implications for compliance with Standard 2.12, which requires programmes to provide students with a minimum of 2,300 practice hours and limits the ability of UoG to assure the effectiveness of the supervision and assessment framework in all settings. Until an appropriate educational audit and governance structure is established for this placement, including mechanisms to support and quality

assure supervisory roles, the visitor team determined that Standard 4.2 cannot be deemed met until **condition (C1)** is satisfied.

57. In assessing Standard 4.3, the visitor team requested confirmation that UoG had assigned a registered nurse responsible for directing the education programme. Following the initial desktop review, the visitor team issued a request for the CV of the named individual, including confirmation of live NMC registration and a role description. This evidence was subsequently provided and verified ahead of the onsite visit. The documentation confirmed the individual's current NMC registration status and their designation as the person with overall responsibility for directing the programme.
58. In considering Standard 4.4, the visitor team reviewed how the programme ensures that students receive constructive feedback throughout their studies to support their ongoing development. The BSc (Hons) Nursing Programme Information document outlines a range of assessment methods used across the programme, including summative assessments as well as non-credit bearing reflective and discursive tasks. The documentation confirms that students are supported by module lecturers and academic staff who provide timely and constructive feedback aligned with the programme's Learning and Teaching Strategy.
59. During the onsite visit, the visitor team heard from students that feedback was generally accessible and supportive, and that mechanisms for formative feedback had improved over time. Several students described a clearer understanding of reflective practice from Level 5 onwards, indicating a scaffolded and developmental approach to academic writing and analysis. The programme team confirmed that a registered nurse is responsible for directing the education programme and demonstrated a clear understanding of the responsibilities associated with this role. Discussions with both staff and students confirmed that the programme is evolving to include a broader range of assessment methods, particularly in Part 3. Students will be supported to select the most appropriate medium or route for assessment from a set of structured options, and a formal framework is being developed to ensure parity, academic integrity, and alignment to appropriate level descriptors. Students welcomed this approach and confirmed that it supported their engagement and development. Meetings with the programme team and senior management further demonstrated UoG's commitment to supporting students, with evidence of continuous enhancements to both assessment design and academic support. The curricular model enables students to engage progressively with increasingly complex concepts and professional knowledge as they move through the programme. Based on the documentation and triangulated discussions during the visit, the visitor team was assured that the mechanisms in place are sufficient to support the academic and professional development of students.
60. To assess compliance with Standard 4.5, the visitor team reviewed how the proposed programme ensures that students meet the SoP for registered nurses and the specific programme outcomes for their chosen field of nursing practice throughout the duration of their studies. The Final Planner, BSc (Hons) Nursing Programme Information document, and Module Mapping to SoP document collectively demonstrate that both the direct entry and blended learning routes provide structured and coherent opportunities for students to meet these requirements. The curriculum outlines a shared Part 1 experience, with students then progressing to field-specific modules from Part 2 onward. Learning

outcomes, proficiencies, and placement activity are mapped to ensure developmental progression toward field-specific capabilities.

61. During the onsite visit, the visitor team explored how exposure to all four fields is maintained and assured across the curriculum. The programme team confirmed that simulation is used strategically to ensure students develop knowledge and awareness of all fields, including where direct placement exposure may be limited. Field exposure to ensure caring for people with learning disabilities, and people with autism, was highlighted as being embedded in simulation and interprofessional case review activities. The programme team and senior management also confirmed that simulation plays a key role in enabling students to achieve and be assessed against field-specific proficiencies, with simulation hours formally verified and counted in accordance with NMC requirements. The visitor team sought clarification on how the apprenticeship route upholds equivalence in terms of field-specific outcomes, placement opportunities, and access to specialist teaching. While apprenticeship students remain with a single cohort throughout the programme, mechanisms are in place to track placement exposure and identify any field-specific gaps, which are then addressed collaboratively with placement providers. These arrangements were clearly outlined and evidenced by both the programme team and senior leadership during the visit. The visitor team also reviewed how achievement of proficiencies across all routes is monitored and supported through the use of the ePAD, which provides structured oversight and documentation of student progress. PLPs confirmed that field-specific experiences are reviewed jointly and supplemented where necessary to ensure compliance with the SoP. Based on the triangulated documentation and discussions held during the visit, the visitor team was assured that the programme enables all students to meet the relevant standards and field-specific outcomes across all routes.
62. In assessing Standard 4.6, the visitor team reviewed how the programme ensures that all students undertake a health numeracy assessment related to nursing proficiencies and the calculation of medicines, which must be passed with a score of 100%. The Final Planner and BSc (Hons) Programme Information document confirm that students are assessed on health numeracy throughout the programme. Formative opportunities are provided in each part to support student development, and the summative assessment in Part 3 requires a 100% pass mark to meet NMC expectations. During the onsite visit, the programme team confirmed that UoG uses a digital platform to deliver and assess health numeracy, and that all students, including those on the blended learning route, undertake induction and preparation for these assessments. Students are made aware of the expectations regarding numeracy early in the programme and are offered structured support through library and academic services, as well as through their personal tutors. Discussion with students confirmed that numeracy support was accessible and timely, and that clear preparation was provided ahead of assessment points. The programme's design ensures progressive development in numeracy, culminating in the required summative 100% pass rate.
63. In reviewing Standard 4.7, the visitor team considered whether the programme ensures that students meet all communication and relationship management skills, as well as nursing procedures, appropriate to their field of nursing practice - adult, mental health, learning disabilities, or children's nursing. The Module Mapping to SoP document and the BSc (Hons) Nursing Programme Information

document provide a comprehensive overview of how these skills and procedures are embedded throughout the curriculum. The South PAD eOAR, along with the South ePAD for Parts 1, 2 and 3 offer structured and progressive assurance that students are meeting the required field-specific proficiencies and procedures. These documents reflect the tripartite assessment model, ensuring appropriate oversight from PSs, PAs, and AAs.

64. During the onsite visit, the programme team described how simulation is used to supplement direct field exposure and embed essential communication and relationship management skills in safe, structured environments. These opportunities evolve in complexity across the programme and are tailored to field-specific contexts, including learning disabilities and autism care. The Nursing Skills Maps, although in draft form at the time of the review, provided clear planning for when and how students are introduced to and assessed on specific nursing procedures through simulation and practice-based learning. Stakeholder feedback from students and PLPs confirmed that the combination of simulation, interprofessional learning, and real-world scenarios effectively supports the development and demonstration of these proficiencies. The ePAD was consistently cited as a key tool for tracking and verifying the achievement of required skills, with PLPs confirming that students are appropriately supported and assessed in accordance with their field. The management team also highlighted the role simulation plays in enabling students to meet the required proficiencies, especially where placement exposure may vary. Based on the triangulated evidence from documentation, practice learning stakeholders, and onsite discussions, the visitor team was assured that students are enabled to meet all required communication and relationship management skills and field-specific nursing procedures.
65. In considering Standard 4.8, the visitor team reviewed how students are assessed to confirm proficiency in preparation for professional practice as a registered nurse. The programme adopts a spiral curriculum model, enabling progressive development and assessment of knowledge, skills, and professional behaviours across all stages of learning. The BSc (Hons) Nursing Programme Information document outlines the programme's key assessment points and progression requirements, which are clearly aligned with the NMC SoP for registered nurses. The South eOAR, alongside the South ePAD for Parts 1, 2 and 3 provide comprehensive frameworks to support, monitor, and evaluate student development in PLEs. These documents clearly delineate the responsibilities of the PS, PA, AA, and student, ensuring the tripartite model of assessment is fully operationalised.
66. During the onsite visit, students, particularly those in Part 3, described the developmental nature of the programme and spoke positively about the support and feedback received from both academic and practice staff. They reported feeling increasingly confident and prepared to meet the requirements for registration. Programme staff explained that student progression is formally monitored through scheduled review points, with early escalation pathways for concerns built into quality assurance processes. PLPs confirmed that the ePAD is used consistently to verify student progress, with robust input from PAs and AAs. The programme team reinforced that student proficiency is assessed through both formative and summative mechanisms, with opportunities for remediation and structured support where needed. Stakeholder feedback from across all groups assured the visitor

team that the programme exposes students to sufficient opportunities to develop, demonstrate, and be assessed against the SoP. The visitor team was assured that the approach to assessment is rigorous, systematically applied, and explicitly designed to ensure students are safe, proficient, and fit for professional practice upon completion of the programme.

67. In assessing Standard 4.9, the visitor team reviewed the BSc (Hons) Nursing Programme Information document, which states that the programme is designed to provide equal weighting in the assessment of theory and practice. The documentation indicates that both direct entry and apprenticeship routes are structured to deliver 2,302.5 hours of theory and 2,302.5 hours of practice, with parity in learning outcomes, assessment methods, and credit allocation. Further supporting evidence, including the IFATE standards mapping, the Module Mapping to SoP document, and the Validation Document All Fields 2019-2020 (updated), confirms that the programme embeds parallel assessment strategies across academic and clinical components. This includes the use of summative academic assessments alongside structured practice assessment via the South PAD, ensuring both domains are weighted equivalently in determining progression and programme completion.
68. However, during the onsite visit, the programme team confirmed that the planned international placement in Croatia contributes 52.5 practice hours toward the 2,302.5 total. The visitor team determined that these hours do not meet the SSSA Standards 1.3 and 1.4 and therefore cannot be counted toward the minimum practice requirement. Students who attend the Croatia placement have an imbalance between theory and practice hours across the programme and therefore do not meet the regulatory threshold. While assessment methods for theory and practice are designed to carry equal academic weight, the visitor team cannot be assured of full compliance with Standard 4.9 where the underlying practice hour shortfall undermines parity in actual learning opportunity and student experience. As such, the visitor team determined that Standard 4.9 cannot be deemed met until **condition (C1)** is satisfied, offering assurance that the principle of equal weighting in assessment is not compromised by structural deficiencies in practice learning provision.
69. In considering Standard 4.10, the visitor team reviewed key programme documentation including the BSc (Hons) Nursing Programme Information, the Module Mapping to SoP, and the BSc (Hons) Nursing Practice, Simulation, and Interprofessional Learning Information (all routes). Collectively, these documents confirm that UoG utilises an ePAD aligned with the South of England model, with separate documents in place for each part of the programme. An associated eOAR is used to document the development and final attainment of the NMC SoP. The ePAD and eOAR clearly define the roles of PSs, PAs, and AAs, and provide a transparent framework for evidencing student progression and achievement. SoP are mapped against the required NMC platforms and annexes, and students are required to demonstrate achievement of all proficiencies prior to completion of the programme.
70. During the onsite visit, the visitor team heard from the programme team and PLPs that the ePAD and eOAR are used consistently across placement settings and inform summative decision-making at key progression points. PLPs described robust approaches to ensuring student access to PAs, particularly in settings where availability may be constrained. The tripartite review model was confirmed to be in active use, supporting holistic and evidence-informed

judgements about student progress. Students also confirmed their awareness of how the ePAD supports their development and provides a clear structure for reflecting on progress and identifying areas for improvement. The use of the eOAR was described as integral to confirming readiness for registration and ensuring all NMC outcomes have been met. It was also confirmed that the ePAD and eOAR processes are implemented consistently across all routes to registration, including direct entry, apprenticeship, and blended learning pathways. Based on the documentation reviewed and the triangulated feedback from stakeholders, the visitor team was assured that the assessment processes in place provide a clear, auditable record of student achievement.

71. Based on the information made available, the visitor team considers that UoG has in place the appropriate arrangements for Standard 4: Supervision and assessment to enable the NMC standards to be met subject to meeting **condition (C1)**.

## 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 pre-registration nursing programme is a bachelor's degree.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.2	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Findings

72. A range of documentary evidence was reviewed in relation to Section 5 of the NMC Standards for Pre-registration Nursing Programmes, including the BSc (Hons) Nursing Programme Information, which outlines the intended award and registration pathway for students. The documentation provided detail on the qualification to be conferred upon successful completion and included reference to students' responsibility to register with the NMC within the required five-year period. During the onsite visit, the visitor team met with members of the programme team, senior leadership, professional support staff, and current students to triangulate this information. These meetings enabled the visitor team to verify how information about professional registration is shared with students and how key academic milestones are managed in practice. The evidence reviewed and discussions held were sufficient to assess compliance with the applicable standards under 5: Qualification to be awarded.
73. The proposed major modifications to the pre-registration nursing programmes at UoG do not alter the final academic award or qualification title. Students will continue to graduate with a BSc (Hons) Nursing degree, which remains fully aligned with the requirements of Standard 5.1. Similarly, the modifications paperwork retains the information which highlights the five-year window for students to register their qualification with the NMC, as outlined in Standard 5.2. While the structure and content of the programme have been revised to reflect updated curriculum design and delivery models, these changes do not impact the nature or level of the qualification awarded, nor the students' eligibility to register with the NMC within the specified timeframe. The rationale for the modifications is therefore consistent with the overarching academic and professional expectations set out in Standards 5.1 and 5.2.
74. In considering Standard 5.1, the visitor team reviewed the BSc (Hons) Nursing Programme Information, which outlines the structure, content, and academic outcomes of the programme. The documentation confirms that the award under consideration is an honours degree and that all routes lead to a minimum academic qualification at bachelor's level, in line with NMC requirements. The programme specification clearly identifies the award title that students will receive upon successful completion of the full programme.

75. In assessing the evidence submitted in support of Standard 5.2, the visitor team reviewed the NMC Registration Letter Template, which outlines the requirement for students to register their qualification with the NMC within five years of programme completion. The document clearly states that failure to do so may result in the need to undertake additional education, training, or relevant experience, in line with NMC standards. During the onsite visit, the visitor team met with current students who confirmed that while they were aware of forthcoming sessions on the NMC registration process, they had not yet received formal information about the five-year registration timeframe. The visitor team was assured that this information is scheduled to be delivered after students complete their final assessments.
76. Based on the information made available, the visitor team considers that UoG 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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