

Programme approval visit report

Section one

<p>Programme provider name:</p>	<p>Solent University</p>
<p>In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i></p>	<p>Southern Health NHS Foundation Trust Ashley Grange Residential Care and Nursing Home Camelot Care Home Millstream Medical Centre Oak Haven Hospice Trust Salisbury Medical Practice Stoneham Lane Surgery St Michael's Hospice Wiltshire Health and Care Hampshire Hospitals NHS Foundation Trust University Hospital Southampton NHS Foundation Trust Three Chequers medical practice The Adam Practice GP surgery Portsmouth City Council Solent NHS Trust Colten Care St Ronans nursing home Poole Hospital NHS Foundation Trust Portsmouth Hospitals NHS Trust Salisbury NHS Foundation Trust Isle of Wight NHS Trust Cross Plain Health Centre Derby Road Group Practice Portsmouth Group Practice Julia's House Naomi House and Jacksplace The Rowans Christchurch Medical Practice St Magnus Hospital / Rosemary Park Forest Care Lovemead Practice Sussex Community NHS Foundation Trust Avon Valley Practice</p>
<p>Programme(s) reviewed: Programme: Nursing associate apprenticeship Title of programme: FdSc Health & Social Care (Nursing Associate) Programme start date: 2 March 2020</p>	

Academic level(s): England, Wales, Northern Ireland: Level 5	
Date of approval	12 November 2019
QA visitor(s):	Registrant Visitor: Rachel Game Lay Visitor: Denise Baker

Section two

Summary of review and findings

Solent University (the approved education institution (AEI)), school of sport, health and social sciences (the school) has presented for approval the foundation degree (FdSc) health and social care nursing associate apprenticeship against the Standards for pre-registration nursing associate and Standards of proficiency for nursing associates (NMC 2018). This two-year full-time programme is developed in partnership with regional health and social care employers from Wessex and Poole partnership working groups. The following organisations are supporting the nursing associate apprenticeship route: The Adam practice GP surgery, Poole Hospital NHS Foundation Trust, Salisbury NHS Foundation Trust, Colten care, Southern Health NHS Foundation Trust, the Victory re-ablement unit, Kestrel learning disability community service, Portsmouth rehabilitation and re-ablement community service (Victory, Kestrel and Portsmouth rehabilitation are part of Portsmouth city council services), Isle of Wight NHS Trust, St Ronans nursing home, Portsmouth Hospitals NHS Trust, Hampshire Hospitals NHS Foundation Trust, St Michael's hospice, Solent NHS Trust, University Hospital Southampton NHS Foundation Trust, Stoneham Lane Surgery, Oak Haven Hospice Trust, Three Chequers medical practice, Millstream medical centre, Wiltshire health and care, Salisbury medical practice, Camelot care home, Cross plain health centre, Ashley grange residential care and nursing home, Derby road group practice, Portsdown group practice, Julia's house, Naomi house and Jack's place, the Rowans, Christchurch medical practice, St Magnus Hospital, Rosemary park, Forest care limited, Lovemead practice and Sussex Community NHS Trust.

Partnership working is evident at operational and strategic levels, with evidence of regular meetings and working groups with practice learning partners (PLPs), service users and students during the development of the programme. These meetings will continue throughout the academic year to ensure both theory and practice is delivered at a high standard. Solent and their PLPs have developed the proposed programme through established partnership arrangements. Consideration is given to the unique nature of the nursing associate programme in relation to practice learning; this is supported by the AEI practice placement team and PLPs.

We found arrangements at programme level do not meet the Standards framework for nursing and midwifery education (SFNME). The Standards for student supervision and assessment (SSSA) are not met at programme level.

The programme is recommended to the NMC for approval subject to four specific conditions. The university made one condition and three recommendations. Visitors made three recommendations.

Updated 20 December 2019:

Solent University has provided documentation to meet the NMC and university conditions. All conditions are met. The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	Programme is recommended for approval subject to specific conditions being met
<p>Conditions:</p> <p><i>Please identify the standard and requirement the condition relates to under the relevant key risk theme.</i></p> <p><i>Please state if the condition is AEI/education institution in nature or specific to NMC standards.</i></p>	<p>Effective partnership working: collaboration, culture, communication and resources:</p> <p>None identified</p> <p>Selection, admission and progression:</p> <p>Condition one: The AEI must produce an implementation plan of how they intend to incorporate service users and carers into the recruitment and selection of nursing associate students. (SFNME R2.7; Standards for pre-registration nursing associate programmes (SPRNAP) R1.1, R2.1)</p> <p>Condition two: The AEI must clearly articulate within student application documentation the process for recognition of prior learning (RPL) showing mapping to the Standards of proficiency for nursing associates and programme outcomes. (SFNME R2.8; SPRNAP R1.5, R2.1)</p> <p>Practice learning:</p> <p>Condition three: The AEI must include detailed information relating to protected learning time, including examples of potential experiences in the student facing documentation. (SFNME R2.9, R3.2, R3.7; SPRNAP R3.5)</p> <p>Assessment, fitness for practice and award:</p> <p>Condition four: The AEI must develop a mapping document that demonstrates allocation of a different nominated academic assessor for each part of the programme. (SFNME R3.8; SSSA R6.1; SPRNAP R4.2)</p>

	<p>Education governance: management and quality assurance:</p> <p>Condition five: The programme team must ensure parity across the course documentation, addressing any issues noted by the panel, including but not limited to learning outcomes, assessment lengths/duration and typographical errors. (University condition)</p>
<p>Date condition(s) to be met:</p>	<p>16 December 2019</p>
<p>Recommendations to enhance the programme delivery:</p>	<p>Recommendation one: Consider developing an implementation plan for transition of current students onto the SSSA. (SFNME R2.4, R3.2, R3.15)</p> <p>Recommendation two: The AEI is advised to increase transparency for how students are supported to gain appropriate breadth of experience for none field specific settings whilst on a hub and spoke placement. (SFNME R3.3; SPRNAP R2.4, R3.1, R3.2)</p> <p>Recommendation three: Consider strengthening interprofessional learning (IPL) working within the programme. (SFNME R1.13)</p> <p>Recommendation four: Reconsider the appropriateness of the title and content of the leadership, supervision and assessment in practice module. (University recommendation)</p> <p>Recommendation five: Review the generic nature of the following learning outcome, 'apply theoretical knowledge to your professional practice'. (University recommendation)</p> <p>Recommendation six: Ensure marketing material clearly articulates potential cost implications related to travel for placements and this is echoed in the interview process and student handbook. (University recommendation)</p>
<p>Focused areas for future monitoring:</p>	<p>Service user and carer involvement in recruitment and selection.</p>

	Transparent processes for protected learning time.
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Programme is recommended for approval subject to specific conditions being met	
<p>Commentary post review of evidence against conditions:</p> <p>The programme team have provided an implementation plan demonstrating how service users and carers will be involved in recruitment and selection of nursing associate students. Revised student application documentation provides a process for RPL which maps to the Standards of proficiency for nursing associates. Updated information is provided detailing protected learning time, including examples of potential learning experiences in the student facing documentation. A mapping document is provided demonstrating allocation of a different nominated academic assessor for each part of the programme. The programme team have provided documents demonstrating the university condition is met. The university confirms the university condition is met. All NMC conditions are met.</p>	
AEI Observations	<p>Observations have been made by the education institution</p> <p>No</p>
Summary of observations made, if applicable	
Final recommendation made to NMC:	Programme is recommended to the NMC for approval
Date condition(s) met:	20 December 2019

Section three

NMC Programme standards
<p>Please refer to NMC standards reference points</p> <p><u><i>Standards for pre-registration nursing associate programmes (NMC, 2018)</i></u></p> <p><u><i>Standards of proficiency for nursing associates (NMC, 2018)</i></u></p> <p><u><i>Standards framework for nursing and midwifery education (NMC, 2018)</i></u></p> <p><u><i>Standards for student supervision and assessment (NMC, 2018)</i></u></p> <p><u><i>The Code: Professional standards of practice and behaviour for nurses, midwives</i></u></p>

and nursing associates

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

QA Handbook

Partnerships

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

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

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

Standard 1: The learning culture:

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

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

Standard 2: Educational governance and quality:

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

R2.4 comply with NMC Standards for student supervision and assessment

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

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

Standard 3: Student empowerment:

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

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

R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning

R3.18 have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice.

Standard 4: Educators and assessors:

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

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

R4.10 share effective practice and learn from others

Standard 5: Curricula and assessment:

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

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

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

Standards for student supervision and assessment (NMC, 2018)

Standard 1: Organisation of practice learning:

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

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

Standard 2: Expectations of practice supervisors:

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

Standard 3: Practice supervisors: role and responsibilities:

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

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

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

Standard 7: Practice assessors: responsibilities:

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

Standard 9: Academic assessors: responsibilities:

R9.6 communication and collaboration between academic and practice assessors

is scheduled for relevant points in programme structure and student progression

Findings against the standard and requirements

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

Documentary evidence demonstrates collaboration and co-production by the AEI with service users, students and PLPs in the development of the programme. Consultation documents and notes from meetings show stakeholders are involved with programme development. PLPs describe collaborative working with the AEI to ensure the programme meets the needs of the future workforce. Partnership agreements between the AEI and PLP organisations demonstrates collaboration at strategic and operational levels. There's a robust plan to implement the SSSA. This is developed in partnership with PLPs in collaboration with health education England (HEE) (HEE Wessex). The nursing associate practice assessment document (NAPAD) will be used in practice assessment. There are plans for developing practice supervisors, practice assessors and academic assessors. The AEI is developing an in-house training package for link lecturers to undertake who will transition into the role of academic assessor.

There's documentary evidence showing how PLPs are involved with selection of students. At the approval visit we found shortlisting criteria, interview questions and processes are developed collaboratively with PLPs. The AEI tells us they've not yet involved service users and carers in recruitment and selection of nursing associate students. (Condition one)

Service users are enthusiastic about their involvement in this programme and feel their contributions are valued. They tell us they're prepared for their role in the programme and briefed on what it'll entail. Some service users have worked in pre-registration nursing programmes previously and have some experience. They tell us they receive training on equality and diversity. Service users understand their role in delivery of teaching and contributions to assessing nursing associate students; they tell us they receive training for assessment. They contribute to objective structured clinical examinations (OSCEs) and are given opportunity to provide feedback to students. They're involved in marking processes with academic module team members. There are mechanisms in place to develop service users for their role in the programme and a service user and carer forum is planned to strengthen their participation further.

We found students are enthusiastic about the role of nursing associate and know how it contributes to care delivery. Current students on the HEE programme say they receive excellent support from the programme team and particularly link lecturers. Students believe the programme team listen to them. Students tell us

they've contributed to new programme development; they know changes are made because of their feedback. For example, the programme team has changed the medicines management module resulting from their feedback. Students tell us service users are involved in a variety of modules in the programme. They find service user involvement a valuable learning experience. Current year one students will move onto the SSSA from March 2020. They tell us they're not consulted about this and are unclear about roles of practice supervisor, practice assessor and academic assessor, although some acknowledge they've heard these roles mentioned in practice. (Recommendation one). The programme team tell us students are informed of moving to the SSSA.

A number of core modules are taught alongside student assistant practitioners and there's opportunity to work with other healthcare professionals in practice. The programme team tell us they're expanding programmes on offer at the AEI so there'll be opportunity to develop interprofessional learning in future. (Recommendation three)

Robust processes are in place for escalating concerns related to practice learning or unsafe practice and managing them in a prompt manner. One student describes how a colleague escalated a practice concern, which was resolved by the AEI and PLP, and practice improved as a result.

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 1: Standards framework for nursing and midwifery education

Not Met

Service users and carers are not currently involved in recruitment and selection of nursing associate students. (Condition one)

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 2: Standards for student supervision and assessment

Met

If not met, state reason

Service users and carers are not currently involved in recruitment and selection of nursing associate students.

Condition one: The AEI must produce an implementation plan of how they intend

to incorporate service users and carers into the recruitment and selection of nursing associate students. (SFNME R2.7; SPRNAP R1.1, R2.1)

Post Event Review

Identify how the condition is met:

Condition one: The programme team have provided an implementation plan demonstrating how service users and carers will be involved in recruitment and selection of nursing associate students.

Evidence:

Trainee nursing associate reference 74 condition one response, service user and carer, undated

Condition one is met.

Date condition(s) met: 20 December 2019

Revised outcome after condition(s) met:

Met

Condition one is met.

Student journey through the programme

Standard 1 Selection, admission and progression

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

R1.1 Confirm on entry to the programme that students:

R1.1.1 demonstrate values in accordance with the Code

R1.1.2 have capability to learn behaviours in accordance with the Code

R1.1.3 have capability to develop numeracy skills required to meet programme

outcomes

R1.1.4 can demonstrate proficiency in English language

R1.1.5 have capability in literacy to meet programme outcomes

R1.1.6 have capability for digital and technological literacy to meet programme outcomes

R1.2 ensure students' health and character allows for safe and effective practice on entering the programme, throughout the programme and when submitting the supporting declaration of health and good character in line with the NMC's health and character decision-making guidance. This includes satisfactory occupational health assessment and criminal record checks.

R1.3 ensure students are fully informed of the requirement to declare immediately any cautions or convictions, pending charges or adverse determinations made by other regulators, professional bodies and educational establishments and that any declarations are dealt with promptly, fairly and lawfully.

R1.4 ensure that the registered nurse or registered nursing associate responsible for directing the educational programme or their designated registered nurse substitute or designated registered nursing associate substitute, are able to provide supporting declarations of health and character for students who have completed a pre-registration nursing associate programme.

R1.5 permit recognition of prior learning that is capable of being mapped to the Standards of proficiency for nursing associates and programme outcomes, up to a maximum of 50 percent of the programme. This maximum limit of 50 percent does not apply to applicants to pre-registration nursing associate programmes who are currently a NMC registered nurse without restrictions on their practice, and

R1.6 provide support where required to students throughout the programme in continuously developing their abilities in numeracy, literacy, digital and literacy to meet programme outcomes

Standards framework for nursing and midwifery education specifically:

R2.6, R2.7, R2.8, R2.10

Proposed transfer of current students to the programme under review

Demonstrate a robust process to transfer students studying Health Education England curriculum onto the proposed programme to ensure programme learning outcomes and proficiencies meet the Standards for pre-registration nursing associate programmes (NMC, 2018).

Evidence provides assurance that the following QA approval criteria are met

There is evidence of selection processes, including statements on digital literacy, literacy, numeracy, values-based selection criteria and capability to learn behaviour according to the Code, educational entry standard required, and progression and assessment strategy, English language proficiency criteria is specified in recruitment processes. Service users and practitioners are involved in selection processes. (R1.1.1 – R1.1.6)

No

R1.1 is not met. There's documentary evidence showing how PLPs are involved with selecting students. At the approval visit we found shortlisting criteria, interview questions and process are developed collaboratively with PLPs.

The AEI tell us service users and carers are not involved in recruitment and selection of nursing associate students. (Condition one)

There is evidence of occupational health entry criteria, inoculation and immunisation plans, fitness for nursing assessments, Criminal record checks and fitness for practice processes are detailed. (R1.2)

Yes

Health and character processes are evidenced including information given to applicants and students including details of periodic health and character review timescales. Fitness for practice processes are evidenced and information given to applicants and students are detailed. (R1.3)

Yes

Processes are in place for providing supporting declarations by a registered nurse or registered nursing associate responsible for directing the educational programme (R1.4)

Yes

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

There is evidence of recognition of prior learning processes that are capable of being mapped to the Standards of proficiency for nursing associates and programme outcomes, up to a maximum of 50 percent of the programme. This maximum limit of 50 percent does not apply to applicants to pre-registration nursing associate programmes who are currently a NMC

registered nurse without restrictions on their practice. (R1.5)

Not Met

R1.5 is not met. There's documentary evidence of RPL processes and an established RPL policy. The AEI sets minimum limits on the proportion of study a student must undertake relating to academic credit. The programme team confirm 50 percent RPL is permissible and this maximum does not apply to applicants to pre-registration nursing associate programmes who are NMC registered nurses without restrictions on their practice.

The programme team tell us there's limited use of RPL to date. Documentary evidence states applicants seeking RPL are given a copy of the AEI guide and claims must be in the form of a portfolio. The portfolio is subject to academic scrutiny and are the responsibility of a subcommittee of a relevant examination board. At the visit we found RPL process lacks clarity, the portfolio is not provided or mapping documentation. The AEI and PLPs lead this process and do not involve the applicant unless they perceive an applicant has an RPL claim. No information is provided in the applicant information regarding RPL. This information must be presented in a format which is easily accessible to applicants. (Condition two)

Numeracy, literacy, digital and technological literacy are mapped against proficiency standards and programme outcomes. Provide evidence that the programme meets NMC requirements, mapping how the indicative content meets the proficiencies and programme outcomes. Ongoing achievement record (OAR)/practice assessment document (PAD) linked to competence outcomes in literacy, digital and technological literacy to meet programme outcomes. (R1.6)

Met

R1.6 is met. Documentary analysis confirms applicants require general certificate of education at grade c or four and above or equivalent at entry to the programme. There's evidence literacy, numeracy and digital capabilities are assessed prior to entry to the programme and opportunity to build on these during the programme. Diagnostic testing for maths and English is carried out early in the programme to identify strengths and weaknesses and enable early plans to initiate student support if needed. The AEI has recently subscribed to an online package for medicines.

There's detailed mapping of programme outcomes to the Standards of proficiency for nursing associates identifying indicative content and programme outcomes. In practice, the NAPAD and ongoing achievement record (OAR) document student progression and competence in numeracy, literacy, digital and technological literacy. These are mapped against the Standards of proficiency for nursing associates. Digital and technological literacy is found in several modules of the

programme.

Proposed transfer of current students to the programme under review

There is evidence that students learning in theory and practice on the HEE curriculum is mapped to the programme standards and Standards for pre-registration nursing associate programmes and support systems are in place.

N/A

Existing students on the HEE nursing associate programme will not transfer to the new programme standards.

Students on the existing HEE programme will transfer to the SSSA from March 2020 for year two of their study. They say they're not consulted about this and are unclear about the roles of practice supervisor, practice assessor and academic assessor, although some acknowledge hearing about these roles in practice. (Recommendation one)

Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to selection, admission and progression are met

No

Service users and carers are not involved in recruitment and selection of nursing associate students. (Condition one)

RPL process is unclear with no evidence of mapping and how this information is communicated to applicants. (Condition two)

Outcome

Is the standard met?

Not Met

Service users and carers are not involved in recruitment and selection of nursing associate students.

Condition one: The AEI must produce an implementation plan of how they intend to incorporate service users and carers in the recruitment and selection of nursing associate students. (SFNME R2.7; SPRNAP R1.1, R2.1)

The RPL process is unclear with no evidence of mapping and how this information

is communicated to applicants.

Condition two: The AEI must clearly articulate within the student application documentation the process for RPL showing mapping to the Standards for pre-registration nursing associate programmes and programme outcomes. (SFNME R2.8; SPRNAP R1.5, R2.1)

Date: 12 November 2019

Post Event Review

Identify how the condition is met:

Condition one: The programme team have provided an implementation plan demonstrating how service users and carers will be involved in recruitment and selection of nursing associate students.

Evidence:

Trainee nursing associate reference 74 condition one response, service user and carer, undated

Condition one is met.

Condition two: The programme team have provided a process for RPL within student application documentation which maps to the Standards of proficiency for nursing associates.

Evidence:

Trainee nursing associate reference 75 condition two response, RPL guidance, undated

Trainee nursing associate reference 85 condition two mapping document, Standards of proficiency to programme learning outcomes, undated

Trainee nursing associate reference 86 entry criteria Solent 2020 (with RPL), undated

Condition two is met.

Date condition(s) met: 20 December 2019

Revised outcome after condition(s) met:

Met

Conditions one and two are met.

Standard 2 Curriculum

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

R2.1 ensure that programmes comply with the NMC Standards framework for nursing and midwifery education

R2.2 comply with the NMC Standards for student supervision and assessment

R2.3 ensure that all programme learning outcomes reflect the Standards of proficiency for nursing associates.

R2.4 design and deliver a programme that supports students and provides an appropriate breadth of experience for a non-field specific nursing associate programme, across the lifespan and in a variety of settings

R2.5 set out the general and professional content necessary to meet the Standards of proficiency for nursing associates and programme outcomes

R2.6 ensure that the programme hours and programme length are:

2.6.1 sufficient to allow the students to be able to meet the Standards of proficiency for nursing associates,

2.6.2 no less than 50 percent of the minimum programme hours required of nursing degree programmes, currently set under Article 31(3) of Directive 2005/36/EC (4,600 hours)

2.6.3 consonant with the award of a foundation degree (typically 2 years)

R2.7 ensure the curriculum provides an equal balance of theory and practice learning using a range of learning and teaching strategies, and

R2.8 ensure nursing associate programmes which form part of an integrated programme meet the nursing associate requirements and nursing associate proficiencies.

Standards framework for nursing and midwifery education specifically:

R1.9, R1.13; R2.2, R2.14, R2.15, R2.18, R2.19; R3.1, R3.2, R3.4, R3.7, R3.9, R3.10, R3.15, R 3.16;

R5.1 - R5.16.

Standards for student supervision and assessment specifically:

R1.2, R1.3, R1.7, R1.10, R1.11

Evidence provides assurance that the following QA approval criteria are met

There is evidence that the programme complies with the NMC Standards framework for nursing and midwifery education (R2.1)

No

Service users and carers are not involved in recruitment and selection of nursing associate students. (Condition one)

The RPL process is unclear with no evidence of mapping and how this information is communicated to applicants. (Condition two)

There is evidence that the programme complies with the NMC Standards for student supervision and assessment (R2.2)

Yes

Mapping has been undertaken to show how the curriculum and practice learning content meets the Standards of proficiency for nursing associates and programme outcomes. (R2.3)

Yes

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

There is evidence to show how the design and delivery of the programme will support students in both theory and practice to experience a non-field specific nursing associate programme, across the lifespan and in a variety of settings. (R2.4)

Met

R2.4 is met. There's documentary evidence demonstrating students will have a non-field specific nursing associate programme. Programme documents reflect generic cross field content and health conditions across the lifespan. Theoretical content is fully mapped to the Standards for pre-registration nursing associate programmes.

Students tell us support received from the programme team is always helpful and particularly from link lecturers. Timely responses are received whenever they

contact the programme team. A specialist librarian is available for individual students to help them access research materials at the AEI and they can access PLP libraries.

Documentary analysis confirms practice learning is structured for students to gain experience which is non-field specific and across the lifespan. The AEI practice placement team co-ordinate practice learning allocations with PLPs ensuring a breadth of experience. The AEI placement team monitor student practice placement allocations. The AEI is in the process of purchasing specialist software which will improve the allocation process.

The AEI adopt a hub and spoke model whilst students are in their primary practice placement, however there's some inconsistency in applying this if students have difficulty accessing an area and processes for accessing spoke placements vary across PLPs. (Recommendation two)

Evidence provides assurance that the following QA approval criteria are met

There is evidence that mapping has been undertaken to show how the programme outcomes, module outcomes and content meets the Standards of proficiency for nursing associates and programme outcomes. (R2.5)

Yes

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

There is evidence that:

- the programme meets NMC requirements on programme hours and programme length;
- programmed learning is sufficient to allow the students to be able to meet the Standards of proficiency for nursing associates. (R2.6)

Met

R2.6 is met. Documentary evidence and the approval process confirms the length of the programme is 2300 hours. Programme documents give a breakdown of what constitutes programme hours and demonstrate hours for theory and practice learning meet the Standards of proficiency for registered nursing associates. Students confirm they're released for study and external practice learning placements and the programme prepares them for registration with the NMC as a nursing associate.

Students must attend taught university sessions and attendance is monitored via an electronic swipe card system. There are arrangements for retrieval of unmet programme hours which are managed by the programme leader or link lecturer

and employer.

Practice learning allocation is undertaken by the AEI practice placement team in collaboration with PLPs. Practice learning hours are monitored by the link lecturer and students record their hours in the NAPAD and OAR.

The programme structure demonstrates an equal balance of theory and practice learning. This is detailed in the designated hours in the module descriptors and practice learning allocations. A range of learning and teaching strategies are detailed in the programme specification, programme handbook and module descriptors with theory / practice balance detailed at each part of the programme and at the end point.

There are appropriate module aims, descriptors and outcomes specified. There is a practice allocation model for the delivery of the programme that clearly demonstrates the achievement of designated hours for the programme detailed. (R2.7)

Met

R2.7 is met. The programme handbook and teaching timetables indicate an equal split between theory and practice learning. Module descriptors provide clear aims and learning outcomes. Programme and learning outcomes are mapped to the Standards of proficiency for nursing associates. Teaching strategies include lectures, small group work and clinical skills. The programme will use both block practice learning and hub and spoke practice learning placements.

Practice placement hours are achieved through two external block placements each year; the remainder of student time will be in their primary practice placement. Whilst students are on their primary practice placement, they'll have spoke placements in their own organisation. These can be arranged by students themselves if their learning needs indicate a short experience in another area within their placement circuit.

The AEI regularly reviews student practice learning hours. When students are in their primary placement they will have 'protected learning time' one day each week. For this allocated day they'll work with their practice supervisor and/or their practice assessor. Students wear a nursing associate student uniform.

Students tell us they're informed of protected learning time on induction to the programme and arrangements regarding protected learning time vary across PLPs.

Evidence provides assurance that the following QA approval criteria are met

There is evidence that programmes leading to nursing associate registration and registration in another profession, will be of suitable length and nursing

associate proficiencies and outcomes will be achieved in a nursing associate context. (R2.8)

Yes

Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to curricula and assessment are met

No

Service users and carers are not involved in recruitment and selection of nursing associate students. (Condition one)

The RPL process is unclear with no evidence of mapping and how this information is communicated to applicants. (Condition two)

Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to curricula and assessment are met

Yes

Outcome

Is the standard met?

Not Met

Service users and carers are not involved in recruitment and selection of nursing associate students.

Condition one: The AEI must produce an implementation plan of how they intend to incorporate service users and carers in the recruitment and selection of nursing associate students. (SFNME R2.7; SPRNAP R1.1, R2.1)

The RPL process is unclear with no evidence of mapping and how this information is communicated to applicants.

Condition two: The AEI must clearly articulate within the student application documentation the process for RPL showing mapping to the Standards for pre-registration nursing associate programmes and programme outcomes. (SFNME R2.8; SPRNAP R1.5, R2.1)

Date: 12 November 2019

Post Event Review

Identify how the condition is met:

Condition one: The programme team have provided an implementation plan demonstrating how service users and carers will be involved in recruitment and selection of nursing associate students.

Evidence:

Trainee nursing associate reference 74 condition one response, service user and carer, undated

Condition one is met

Condition two: The programme team have provided a process for recognition of prior learning within student application documentation which maps to the Standards of proficiency for nursing associates.

Evidence:

Trainee nursing associate reference 75 condition two response, RPL guidance, undated

Trainee nursing associate reference 85 condition two mapping document, Standards of proficiency to programme learning outcomes, undated

Trainee nursing associate reference 86 entry criteria Solent 2020 (with RPL), undated

Condition two is met.

Date condition(s) met: 20 December 2019

Revised outcome after condition(s) met:

Met

Conditions one and two are met.

Standard 3 Practice learning

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

R3.1 provide practice learning opportunities that allow students to develop and meet the Standards of proficiency for nursing associates to deliver safe and effective care, to a diverse range of people, across the lifespan and in a variety of settings

R3.2 ensure that students experience the variety of practice expected of nursing associates to meet the holistic needs of people of all ages

R3.3 ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment

R3.4 take account of students' individual needs and personal circumstances when allocating their practice learning including making reasonable adjustments for students with disabilities, and

R3.5 ensure that nursing associate students have protected learning time in line with one of these two options:

3.5.1 Option A: nursing associate students are supernumerary when they are learning in practice

3.5.2 Option B: nursing associate students who are on work-placed learning routes:

3.5.2.1 are released for at least 20 percent of the programme for academic study

3.5.2.2 are released for at least 20 percent of the programme time, which is assured protected learning time in external practice placements, enabling them to develop the breadth of experience required for a generic role, and

3.5.2.3 protected learning time must be assured for the remainder of the required programme hours.

Standards framework for nursing and midwifery education specifically:

R1.1, R1.3, R1.5; R2.9, R2.11; R3.3, R3.5, R 3.7, R3.16; R5.1, R5.7, R5.10, R5.12

Standards for student supervision and assessment specifically:

R1.1 – R1.11

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

Evidence that the practice learning opportunities allow students to develop and meet the Standards of proficiency for nursing associates to deliver safe and effective care, to a diverse range of people, across the lifespan and in a variety of settings. (R3.1)

Met

R3.1 is met. There are sufficient practice learning opportunities to allow students to develop and meet the Standards of proficiency for nursing associates to deliver safe and effective care. Practice learning opportunities are outlined in programme documentation. All practice learning experiences and achievement of proficiencies are documented in the NAPAD. Practice learning is mapped against the Standards of proficiency and for safe and effective care. There's a structured plan for practice learning allocation across the programme. The primary practice placement is the student's usual place of work. Whilst in their primary practice placement, students are able to access spoke placements to enhance the diverse range of people care is delivered to. Students have two external block practice placements each year delivering care in a variety of settings. These are from hospital, close to home and at home placements. Students confirm they access a diverse range of people, across the lifespan through their practice learning placements. (Recommendation two)

Students tell us the process for raising concerns is in the NAPAD. One student's experience of raising a concern shows appropriate application and resolution using this process.

There's effective communication between the AEI and PLPs regarding fitness to practise (FTP) processes when students are in the role of student or employee. The FTP process is clear to students and included in the programme handbook. Students are given information on conduct, behaviour and the FTP process at their induction.

Students and PLPs believe the link lecturer role is invaluable to students and their progress on the programme. Student progress is communicated to the AEI and employer PLP. Documentary evidence and the approval process assure us adequate support arrangements are in place for students if they are not achieving in practice.

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

Met

R3.2 is met. There's an exemplar practice learning placement plan which shows how practice experiences are co-ordinated to ensure each student can meet the holistic needs of people in all ages. We found planning and allocation of practice learning placements is done by the AEI practice placement team in collaboration with PLPs. (Recommendation two). The AEI has created a new placement lead post, the role includes co-ordination of existing practice learning placements and exploring potential for different practice learning opportunities.

NAPAD records where students, practice supervisors and practice assessors identify learning opportunities. The OAR enables students to record their experiences, reflect on and evaluate them.

Current students evaluate their practice placements and say if they have any concerns, they can speak to their link lecturer, programme leader or mentor. They say the AEI responds to concerns in a timely manner and keeps them informed of progress for any concern raised. The link lecturer undertakes ongoing quality monitoring and liaises with students and staff and this can include addressing concerns. Practice placement evaluations are completed by each student at the end of their placement; these are analysed by the placement lead who liaises with the programme leader, link lecturer and PLP if an action plan is needed. Practice learning placements are audited by the AEI every two years; this is a joint process with PLPs. As part of this process PLPs do a self-assessment which includes student feedback. Action plans are developed if practice learning placements are not meeting requirements. If the assessed risk is too great, they will move students to another practice learning placement.

There is evidence of plans for effective and proportionate use of technology enhanced and simulation-based learning opportunities and to support learning and assessment in the curriculum (R3.3)

Met

R3.3 is met. We found documentary evidence of simulation-based learning opportunities. Students will undertake clinical skills days as part of simulation-based learning in each part of the programme, for example, taking blood pressure, venepuncture, pulse oximetry and respirations. Service users tell us they're involved in simulation days by acting as patients for students to practice their practical and communication skills. Service users give feedback to students in simulation-based learning activities. Students say they enjoy these sessions and value service user input.

There's a range of technology enhanced learning opportunities used in teaching and learning, for example kahoot, a game-based learning platform, and the virtual learning environment (VLE). The AEI has recently subscribed to safeMedicate, an online medicines management programme.

There's simulation-based assessment in the programme through a summative OSCE where students simulate medicines management. We found service users are involved in this assessment and provide feedback to students. We found plans for using technology enhanced and simulation-based learning are effective and proportionate to support learning and assessment in the curriculum.

There are processes in place to take account of students' individual needs and personal circumstances when allocating their practice learning

including making reasonable adjustments for disabilities. (R3.4)

Met

R3.4 is met. There are processes in place to take account of students' individual needs and personal circumstances. There's a process to refer students to the AEI hub support unit if they have individual needs and an individual learning plan is developed following an assessment. The AEI seeks consent from students to share this information with PLPs and to discuss with their practice supervisor and practice assessor.

Students can request a change of practice placement in relation to extenuating circumstances and reasonable adjustments. Extenuating circumstances are described as serious and immediate issues, such as a seriously ill relative. Personal circumstances such as ongoing carer responsibilities are considered when allocating practice placements. PLPs tell us making reasonable adjustments is a well-established part of their service. Students confirm reasonable adjustments are taken into account in theory and practice learning. Students tell us they feel supported by the AEI and PLPs.

Evidence that nursing associate students have protected learning time through one of the two options (A or B). There must be clarity of evidence to support the single option selected.

Processes are in place to ensure that protected learning time will be monitored in accordance with the selected option.

Evidence that students will be released for a minimum of 20 percent of the programme for academic study.

Evidence that students will be released for a minimum of 20 percent of the programme time, which is assured protected learning time in external practice placements, enabling them to develop the breadth of experience required for a generic role.

Evidence that information is provided to students and practice learning partners on protected learning time/supernumerary status and the selected single option. (R3.5)

Not Met

R3.5 is not met. The programme adopts a work-based learning approach for student learning. Documentary evidence details plans on how programme hours will be allocated to protect learning time for students and how the work-based learning model will be implemented. PLPs agree to release students one day each week for academic study. Academic study will be for a minimum of 20 percent of the programme time. During the programme students will undertake two external placements each year. These are 180 hours and 150 hours in length. They'll undertake practice professional development hours through a hub and spoke model equating to 200 hours per year. External placements exceed 20 percent requirement for programme hours. These will be recorded in their OAR and

NAPAD. Students will be supernumerary when they are in their block external practice learning placements. The remaining programme hours are protected learning time and are assured in practice learning placements by rostering students onto protected learning time shifts. Students complete timesheets via NAPAD and recording protected learning time hours is in the OAR and NAPAD.

When students are working as employees in their healthcare assistant role in their primary placement, and not on a protected learning time shift, they are still identifiable as trainees by their uniform or badge but will not have a named practice supervisor for these shifts.

Recording all practice learning hours will be completed through the OAR. Completing protected learning time hours will be monitored by the academic assessor. Practice assessors tell us they monitor protected learning time and if a student is not achieving or there's a deficit in practice learning hours an action plan can be created with the student by the practice assessor and academic assessor. Monitoring programme hours is through a range of mechanisms for example, submission of timesheets, verification of hours in NAPAD and recording protected learning time in the OAR.

Students tell us about inconsistencies in their experiences relating to protected learning time. Some students say when the clinical area is busy they're not able to have protected learning time. The AEI and PLPs say protected learning time is challenging and they're working towards achieving this. Students tell us there's inconsistency as to what protected learning time means, and they'd like information with examples so they can take it back to their primary placement areas. Protected learning time is not fully understood by practice learning staff or being consistently applied although students and the programme team report it is communicated in programme documentation. (Condition three)

Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to practice learning are met

No

Students tell us there's inconsistency as to what protected learning time means. Protected learning time is not fully understood by practice learning staff or being consistently applied. (Condition three)

Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to practice learning are met

Yes

Outcome

Is the standard met?

Not Met

Students tell us there's inconsistency as to what protected learning time means. Protected learning time is not fully understood by practice learning staff or being consistently applied.

Condition three: The AEI must include detailed information relating to protected learning time, including examples of potential experiences in the student facing documentation. (SFNME R2.9, R3.2, R3.7; SPRNAP R3.5)

Date: 12 November 2019

Post Event Review

Identify how the condition is met:

Condition three: The programme team have provided documentary evidence of updated information detailing protected learning time including examples of potential learning experiences in student facing documentation.

Evidence:

Trainee nursing associate reference 81 condition three protected learning time guidance for FdSc nursing associates (including placement hours), undated
Trainee nursing associate reference 82 condition three response protected learning time in practice, example one potential student experience, undated
Trainee nursing associate reference 83 condition three response protected learning time in practice, example three potential student experience, undated
Trainee nursing associate reference 84 condition three response protected learning time in practice, example three potential student experience, undated
Trainee nursing associate reference 89 course handbook updated, 2019/2020
Trainee nursing associate reference 89 updated university pages (protected learning time) England NAPAD, undated

Condition three is met.

Date condition(s) met: 20 December 2019

Revised outcome after condition(s) met:

Met

Condition three is met.

Standard 4 Supervision and assessment

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

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

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

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

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

R4.5 ensure throughout the programme that students meet the Standards of proficiency for nursing associates

R4.6 ensure that all programmes include a health numeracy assessment related to nursing associate proficiencies and calculation of medicines which must be passed with a score of 100 percent

R4.7 assess students to confirm proficiency in preparation for professional practice as a nursing associate

R4.8 ensure that there is equal weighting in the assessment of theory and practice, and

R4.9 ensure that all proficiencies are recorded in an ongoing record of achievement which must demonstrate the achievement of proficiencies and skills as set out in Standards of proficiency for nursing associates.

Standards framework for nursing and midwifery education specifically: specifically:

R2.11; R3.5, R3.6, R 3.8, R3.11, R3.13, R3.14, R3.17;

R4.1, R4.2, R4.3, R4.4, R4.5, R4.6, R4.8, R4.11; R5.9

Standards for student supervision and assessment specifically:

R4.1 – R4.11

Provide an evaluative summary from your documentary analysis and evidence

AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

There is evidence of how the programme will ensure how support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education. (R4.1)

Met

R4.1 is met. We found documentary evidence demonstrating how support, supervision, learning and assessment complies with the SFNME. University academic regulations, moderation and external examiner processes ensure fairness in academic assessment processes. Students tell us they know how to raise and escalate concerns. We found academic staff are experienced in delivering programmes in higher education settings and have relevant clinical backgrounds. Partnership agreements are in place for resources, accountability and commitment to support students to meet the SFNME. The educational audit process identifies the availability of suitably qualified practice supervisors and practice assessors in practice learning environments. PLPs keep a database of practice supervisors and practice assessors.

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

Not Met

R4.2 is not met. Documentary evidence demonstrates the AEI are working with PLPs to achieve consistency and equity for all learners by ensuring practice learning complies with the SSSA. PLPs are delivering practice supervisor and practice assessor preparation in collaboration with the AEI and HEE Wessex to practice learning staff who will undertake these roles. Current mentors and sign-off mentors will become practice supervisors and practice assessors.

NAPAD outlines practice supervisor, practice assessor and academic assessor roles and responsibilities for practice learning. The AEI and PLPs are developing supplementary resources to ensure practice supervisors and practice assessors are prepared for the role. Preparation training is being provided for practice staff to undertake the role of practice supervisor and for registered nurses as practice assessors; the training is delivered in partnership with the AEI and PLPs. Current mentors and sign-off mentors will become practice supervisors and practice assessors; half-day sessions are being delivered for current mentors. For registered allied health professionals who are new to the role of practice supervisor there's a full day preparation session. There are online materials available for staff who will undertake these roles to access. PLPs tell us they're responsive to queries relating to the SSSA from practice staff. PLPs and academic

staff have access to a range of resources to support the preparation and implementation of SSSA through the Wessex and Poole partnership group. PLPs will maintain a database of practice supervisors and practice assessors. Training will be recorded on this and they'll have annual updates. These roles will be part of practice staff appraisal process discussions.

The programme team tell us current link lecturers will transition into the role of academic assessor. Academic assessors are allocated from registered nurse AEI academic staff for nursing associate students. There's an in-house training package to prepare them for the role and they'll self-certify on completion of this. The programme team tell us they plan to develop a rota to ensure each student has a different academic assessor for each part of the programme but cannot assure us there's a different academic assessor for each part of the programme. (Condition four)

Evidence provides assurance that the following QA approval criteria are met

There are processes in place to ensure the NMC is informed of the name of the registered nurse or registered nursing associate responsible for directing the education programme. (R4.3)

Yes

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

There are processes in place to provide students with feedback throughout the programme to support their development. Formative and summative assessment strategy is detailed (R4.4)

Met

R4.4 is met. Throughout the programme students have opportunities to be formatively assessed which prepares them for summative assessments. Detailed information on assessments are included in module descriptors. Mapping to learning outcomes is explicit in module descriptors. Assessments are varied on the programme and include essays, presentations, online learning packages and OSCEs. Feedback is given in a variety of ways; verbal, online and written.

Practice supervisors, practice assessors, service users, peers and other professional groups can give feedback to students through NAPAD. Students, practice assessors and academic assessors will meet three times a year to review student progress and if needed, meetings can be more frequent. Confirming student progression will be part of tripartite meetings. Service users tell us they give feedback in theory and simulation-based learning sessions. Students tell us their feedback is timely and developmental.

There is appropriate mapping of the curriculum and practice learning placements to ensure throughout the programme that students meet the Standards of proficiency for nursing associates. (R4.5)

Met

R4.5 is met. Documentary evidence shows the Standards of proficiency for nursing associates are mapped against the programme and module learning outcomes. Student facing documents identify where and when proficiencies can be achieved. Documentary evidence and the approval process assure us practice learning placements, practice learning documents and programme content meet the Standards of proficiency for nursing associates.

Evidence provides assurance that the following QA approval criteria are met

There is evidence that all programmes include a health numeracy assessment related to nursing associate proficiencies and calculation of medicines which must be passed with a score of 100 percent (R4.6)

Yes

There is an appropriate assessment strategy and process detailed. (R4.7)

Yes

There is an assessment strategy with details of the weighting for all credit bearing assessments.

Theory and practice weighting is calculated and detailed in award criteria and programme handbooks. (R4.8)

Yes

There is evidence that all proficiencies are recorded in an ongoing record of achievement which must demonstrate the achievement of proficiencies and skills as set out in the Standards of proficiency for nursing associates. (R4.9)

Yes

Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to supervision and assessment are met

No

There is currently no process for ensuring each student has a different academic assessor for each part of the programme. (Condition four)

Assurance is provided that Gateway 2: Standards for student supervision and assessment are met

No

There is currently no process for ensuring each student has a different academic assessor for each part of the programme. (Condition four)

Outcome

Is the standard met?

Not Met

There is currently no process for ensuring each student has a different academic assessor for each part of the programme.

Condition four: The AEI must develop a mapping document that demonstrates allocation of a different nominated academic assessor for each part of the programme. (SFNME R3.8; SSSA R6.1; SPRNAP R4.2)

Date: 12 November 2019

Post Event Review

Identify how the condition is met:

Condition four: The programme team have provided a mapping document demonstrating allocation of a different nominated academic assessor for each part of the programme.

Evidence:

Trainee nursing associate reference 76 condition four response, academic assessor allocation, undated

Condition four is met.

Date condition(s) met: 20 December 2019

Revised outcome after condition(s) met:

Met

Condition four is met.

Standard 5 Qualification to be awarded

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

R5.1 ensure that the minimum award for a nursing associate programme is a Foundation Degree of the Regulated Qualifications Framework (England), which is typically two years in length, and

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

Evidence provides assurance that the following QA approval criteria are met

The minimum award for a nursing associate programme is a Foundation Degree of the Regulated Qualifications Framework (England) (R5.1)

Yes

Evidence that students are notified during the programme that they have five years in which to register their award with the NMC. In the event of a student failing to register their qualification within five years they will have to undertake additional education and training or gain such experience as is specified in our standards in order to register their award. (R5.2)

Yes

Fall Back Award

If there is a fall back exit award with registration as a nursing associate all NMC standards and proficiencies are met within the award. Standards framework for nursing and midwifery education specifically R2.11, R2.20

N/A

There is no fall back exit award conferring eligibility to register with the NMC as a nursing associate.

Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met

Yes

Outcome

Is the standard met?

Met

Date: 12 November 2019

Post Event Review

Identify how the condition is met:

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

N/A

Section four

Source of evidence

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

Key documentation	Yes/No
Programme document, including proposal, rationale and consultation	Yes
Programme documentation includes collaboration and communication arrangements with HE/FE partner if relevant	Yes
Programme specification	Yes
Module descriptors	Yes
Student facing documentation including: programme handbook	Yes
Student university handbook	Yes
Student facing documentation includes HE/FE college information for students, if relevant	Yes
Practice assessment documentation	Yes
Ongoing record of achievement (OAR)	Yes
Practice learning environment handbook	Yes
Practice learning handbook for practice supervisors and assessors specific to the programme	Yes
Academic assessor focused information specific to the programme	Yes
Placement allocation / structure of programme	Yes
PAD linked to competence outcomes, and mapped against standards of proficiency	Yes
Mapping document providing evidence of how the education institution has met the Standards framework for nursing and midwifery education (NMC, 2018)	Yes
Mapping document providing evidence of how the education institution has met the Standards for pre registration nursing associate programmes (NMC, 2018)	Yes
Mapping document providing evidence of how the Standards for student supervision and assessment (NMC, 2018) apply to the programme	Yes
Curricula vitae for relevant staff	Yes
CV of the registered nurse or nursing associate responsible for directing the education programme	Yes
Registrant academic staff details checked on NMC website	Yes
External examiner appointments and arrangements	Yes
Written confirmation by education institution and associated practice learning partners to support the programme intentions, including a signed supernumerary for protected learning	Yes
List additional documentation:	

Care Quality Commission (CQC) report Hampshire Hospitals Foundation Trust, 26 September 2018

Apprenticeship course handbook FdSc in health and social care nursing associate, October 2019

Portsmouth hospitals trust practice structure, undated

Breakdown of theory and practice hours across programme, undated

Programme entry criteria, undated

Copy of email requesting protected learning time is added to the partnership meeting agenda, 9 October 2019

Post event evidence to support conditions are met:

Trainee nursing associate reference 74 condition one response, service user and carer, undated

Trainee nursing associate reference 75 condition two response, RPL guidance, undated

Trainee nursing associate reference 85 condition two mapping document, Standards of proficiency to programme learning outcomes, undated

Trainee nursing associate reference 86 entry criteria Solent 2020 (with RPL), undated

Trainee nursing associate reference 81 condition three protected learning time guidance for FdSc nursing associates (including placement hours), undated

Trainee nursing associate reference 82 condition three response protected learning time in practice, example one potential student experience, undated

Trainee nursing associate reference 83 condition three response protected learning time in practice, example two potential student experience, undated

Trainee nursing associate reference 84 condition three response protected learning time in practice, example three potential student experience, undated

Trainee nursing associate reference 89 course handbook updated, 2019/2020

Trainee nursing associate reference 89 updated university pages (protected learning time) England NAPAD, undated

Trainee nursing associate reference 76 condition four response, academic assessor allocation, undated

Trainee nursing associate reference 78 inter professional learning strategy for nursing associates, undated

Trainee nursing associate reference 80 recommendation six response, student cost implications, undated

Trainee nursing associate reference 79 recommendation one response, implementation plan for transition of current students on to NMC SSSA, undated

Trainee nursing associate reference 88 amended supervision and assessment module descriptor, undated

Trainee nursing associate reference 87 condition five response, updated module descriptors, undated

Trainee nursing associate reference 90 Christchurch medical practice placement agreement, 15 February 2019

Trainee nursing associate reference 91 Christchurch medical practice, 4 April 2019

Trainee nursing associate reference 92 Forest care Oak lodge, 12 April 2019

<p>Trainee nursing associate reference 93 Sussex community, 28 October 2019 Trainee nursing associate reference 94 Forest care, Trainee nursing associate reference 95 Julia's house, 4 April 2019 Trainee nursing associate reference 96 Lovemead group practice, 15 April 2019 Trainee nursing associate reference 97 Lovemead group, 4 April 2019 Trainee nursing associate reference 98 Naomi house, 4 April 2019 Trainee nursing associate reference 99 Oldercare - St Magnus, 4 April 2019 Trainee nursing associate reference 100 Rowan's hospice, 24 April 2019 Trainee nursing associate reference 101 Rowan's hospice, 24 April 2019</p>
<p>If you stated no above, please provide the reason and mitigation</p>
<p>Additional comments:</p>

During the visit the visitor(s) met the following groups	Yes/No
Senior managers of the AEI/education institution with responsibility for resources for the programme	Yes
HE/FE college senior managers, if relevant	Yes
Senior managers from associated practice learning partners with responsibility for resources for the programme	Yes
Programme team/academic assessors	Yes
Practice leads/practice supervisors/ practice assessors	Yes
Students	Yes
<p>If yes, please identify cohort year/programme of study:</p> <p>Two x March 2019 pre-registration nursing associate HEE programme, year one Six x March 2018 pre-registration nursing associate HEE programme, year two</p>	
Service users and carers	Yes
<p>If you stated no above, please provide the reason and mitigation</p>	
<p>Additional comments:</p>	

The visitor(s) viewed the following areas/facilities during the visit:	Yes/No
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	No
Library facilities	No
Technology enhanced learning / virtual learning environment	No
Educational audit tools/documentation	No
Practice learning environments	No
<p>If yes, state where visited/findings:</p>	
System regulator reports reviewed for practice learning partners	Yes

System Regulator Reports List
CQC report Hampshire hospitals NHS Foundation Trust, 26 September 2019

If you stated no to any of the above, please provide the reason and mitigation

Not required, existing AEI.

Additional comments:

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Issue record

Final Report

Author	Rachel Game Denise Baker	Date	13 November 2019
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Submitted by	Amy Young	Date	6 January 2020
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