

**Programme approval report**

**Section one**

<b>Programme provider name:</b>	Bournemouth University
<b>In partnership with:</b> <i>(Associated practice learning partners and/or employer partners involved in the delivery of the programme)</i>	Yeovil District Hospital NHS Foundation Trust Hampshire Hospitals NHS Foundation Trust Dorset County Hospital NHS Foundation Trust Isle of Wight NHS Foundation Trust Somerset NHS Foundation Trust Poole Hospital NHS Foundation Trust Portsmouth Hospitals University NHS Trust University Hospitals Dorset NHS Foundation Trust Salisbury NHS Foundation Trust University Hospital Southampton NHS Foundation Trust Southern Health NHS Foundation Trust Private, voluntary and independent health care providers
<b>Programme reviewed:</b>	Registered Midwife - 18M <input type="checkbox"/> Registered Midwife - 24M <input type="checkbox"/> Registered Midwife - 36M <input checked="" type="checkbox"/> Registered Midwife - degree apprentice <input type="checkbox"/>
<b>Title of programme(s):</b>	BSc (Hons) Midwifery
<b>Academic levels:</b>	

Registered Midwife - 18M	<p>England, Wales, Northern Ireland  <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7</p> <p>SCQF  <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11</p>								
Registered Midwife - 24M	<p>England, Wales, Northern Ireland  <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7</p> <p>SCQF  <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11</p>								
Registered Midwife - 36M	<p>England, Wales, Northern Ireland  <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7</p> <p>SCQF  <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11</p>								
Registered Midwife - degree apprentice	<p>England, Wales, Northern Ireland  <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7</p> <p>SCQF  <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11</p>								
<b>Date of approval visit:</b>	4 November 2020								
<b>Programme start date:</b>	<table border="1" style="width: 100%;"> <tr> <td>Registered Midwife – 18M</td> <td></td> </tr> <tr> <td>Registered Midwife – 24 M</td> <td></td> </tr> <tr> <td>Registered Midwife – 36 M</td> <td>13 September 2021</td> </tr> <tr> <td>Registered Midwife – degree apprentice</td> <td></td> </tr> </table>	Registered Midwife – 18M		Registered Midwife – 24 M		Registered Midwife – 36 M	13 September 2021	Registered Midwife – degree apprentice	
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Registered Midwife – degree apprentice									
<b>QA visitor(s):</b>	<p>Registrant Visitor: Nicola Clark</p> <p>Lay Visitor: Caroline Thomas</p>								

**Section two**

**Summary of review and findings**

Bournemouth University (BU), faculty of health and social sciences (the faculty) present for approval the full-time undergraduate pre-registration BSc (Hons) midwifery programme, with professional registration as a midwife. The proposed programme has been developed to meet the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018), the Standards for student supervision and assessment (SSSA) (NMC, 2018) and the Standards of proficiency for midwives (SPM) (NMC, 2019). The programme is delivered across the Bournemouth and Portsmouth campuses.

The programme at academic level six is a three-year programme with a proposed intake once every September. The programme is adopting the midwifery ongoing record of achievement (MORA) for the assessment of practice throughout the programme. The MORA document is the product of a collaborative development based on the established pan London model. This utilised regional stakeholder engagement including all lead midwives for education (LMEs) in England and Northern Ireland and is supported by Health Education England. The MORA includes opportunities for service user and carers (SUCs) to feedback on student achievement in the practice learning environment.

Programme documentation and the approval visit confirms the curriculum content, modes of delivery and practice learning experiences are designed to meet the SFNME (NMC, 2018), the SSSA (NMC, 2018) and the Standards for pre-registration midwifery programmes (SPMP) (NMC, 2019). Domains one to five of the SPM are clearly mapped within the programme documentation, with the skills detailed in domain six being clearly visible and evidenced within the MORA, demonstrating what must be met at the point of registration as a midwife.

Documentary evidence confirms effective partnership working between BU and key stakeholders. Strategic and operational meeting structures ensure practice learning partners (PLPs) are collaboratively engaged in the design, development and ongoing delivery of the programme. There's evidence of SUC and student involvement in the development of the programme. There's an LME in post, who is registered with the NMC.

Arrangements at programme level don't meet the SFNME (NMC, 2018). Arrangements at programme level don't meet the SSSA (NMC, 2018).

The programme is recommended for approval subject to three NMC conditions; two conditions are joint NMC and university conditions. Three NMC recommendations and two university recommendations are made.

The visit is undertaken remotely due to the COVID-19 pandemic.

Updated 25 November 2020:

BU has provided documentation to meet conditions one and three. Further evidence is required to meet condition two.

Updated 14 December 2020:

BU has provided additional documentation to meet condition two.

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 to the NMC for approval

Programme is recommended for approval subject to specific conditions being met

Recommended to refuse approval of the programme

**Conditions:**

**Effective partnership working: collaboration, culture, communication and resources:**  
None identified.

**Selection, admission and progression:**  
Condition two: Provide clear evidence of a robust process to evidence equality and diversity training of those involved in the decision making for recruitment to the programme. (SFNME R4.3; SPMP R1.4) (NMC and university condition)

**Practice learning:**  
Condition three: Provide amended role descriptors within the online practice assessment for learning (OPAL) to accurately reflect the roles and responsibilities for SSSA. (SSSA R4.1, R7.1, R9.1; SPMP R4.2)

**Assessment, fitness for practice and award:**  
None identified.

**Education governance: management and quality assurance:**

	Condition one: Provide updated and accurate student facing programme documentation including the student handbook in accordance with BU presentation requirements that details the inclusive practices and diverse learning opportunities that are available to midwifery students. (SFNME R3.3; SPMP R3.5) (NMC and university condition)
<b>Date condition(s) to be met:</b>	27 November 2020
<b>Recommendations to enhance the programme delivery:</b>	<p>Recommendation one: The programme team are advised to further strengthen SUC involvement in design, delivery and review of the programme. (SFNME R1.12)</p> <p>Recommendation two: The programme team are advised to consider the equality of student experience with programme delivery across both campus sites. (SFNME R3.1)</p> <p>Recommendation three: The programme team are advised to further develop the feedback mechanisms to students regarding units of learning and placement evaluations, and to detail improvements made in the practice learning environment and curriculum delivery. (SFNME R3.18)</p> <p>Recommendation four: Consolidate the information provided to students to ensure that this is easy to navigate. (University recommendation)</p> <p>Recommendation five: Improve the visibility of the mental health pathway to students. (University recommendation)</p>
<b>Focused areas for future monitoring:</b>	<p>SUC involvement in design, delivery and review of the programme.</p> <p>Equality of the student experience with programme delivery across both campus sites.</p> <p>Feedback mechanisms for student evaluation.</p>

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

Commentary post review of evidence against conditions:	
<p>Additional and revised copies of the programme documentation provide evidence the conditions are met.</p> <p>Revised programme documentation has been amended to evidence that there's inclusive practice and diverse learning opportunities for students. Condition one is met.</p> <p>An Implementation plan included in the revised admissions policy details how stakeholders involved in the recruitment process will demonstrate successful completion of equality and diversity training. Condition two is met.</p> <p>The OPAL online document has been amended to reflect accurate roles and responsibilities for the SSSA. Condition three is met.</p>	
<b>AEI Observations</b>	<p><b>Observations have been made by the education institution</b></p> <p style="text-align: right;">YES <input type="checkbox"/>                      NO <input checked="" type="checkbox"/></p>
<b>Summary of observations made, if applicable</b>	
<b>Final recommendation made to NMC:</b>	<p>Programme is recommended to the NMC for approval <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
<b>Date condition(s) met:</b>	14 December 2020

**Section three**

NMC Programme standards
<p>Please refer to NMC standards reference points</p> <p><a href="#">Standards for pre-registration midwifery programmes</a> (NMC, 2019)</p> <p><a href="#">The Future midwife: Standards of proficiency for registered midwives</a> (NMC, 2019)</p> <p><a href="#">Standards framework for nursing and midwifery education</a> (NMC, 2018)</p> <p><a href="#">Standards for student supervision and assessment</a> (NMC, 2018)</p> <p><a href="#">The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates</a> (NMC, 2015 updated 2018)</p> <p><a href="#">Quality assurance framework for nursing, midwifery and nursing associate education</a> (NMC, 2020)</p> <p><a href="#">QA Handbook</a> (NMC, 2020)</p>

### 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

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

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

**Standard 3: Student empowerment:**

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

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

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

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

**Standard 4: Educators and assessors:**

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

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

R4.10 share effective practice and learn from others

**Standard 5: Curricula and assessment:**

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

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

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

**Standards for student supervision and assessment** (NMC, 2018)

**Standard 1: Organisation of practice learning:**

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

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

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

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

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

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

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

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

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

**Standard 7: Practice assessors: responsibilities:**

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

**Standard 9: Academic assessors: responsibilities:**

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



### Findings against the standard and requirements

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

There's evidence that BU is committed to robust partnership working with stakeholders in the development, delivery and evaluation of the programme at both strategic and operational levels. Key stakeholders include PLPs, students and SUCs. Documentary evidence and the approval process demonstrates a commitment to involve stakeholders in the development of the proposed programme.

Programme documentation and the approval visit confirm effective strategic and operational partnership working between BU and PLPs. A twice-yearly midwifery forum is an opportunity for PLP leads, heads of midwifery, the BU director of employer engagement, the LME and link lecturers to share good practice and resources. There's evidence of a collaborative partnership approach to ensure governance structures are in place for student learning. BU and PLPs work in partnership to ensure practice learning environments provide a quality and safe learning experience. PLPs tell us that they work with BU to mitigate risks to student learning and public protection. They work in partnership to address any adverse Care Quality Commission (CQC) reports and respond to and address issues raised. Documentary evidence, the programme team and PLPs confirm there are processes in place to raise and escalate student and practice learning concerns. Collaborative reporting mechanisms are in place to manage and investigate serious untoward incidents which may have implications for student learning.

PLPs tell us that there's regular reporting and effective communication with link lecturers, who visit students in practice learning environments. Robust systems are in place to enable quality supervision and assessment of student midwives. Effective communication systems exist between link lecturers and PLPs. There's evidence of a partnership approach to the operationalisation of the SSSA. The roles and responsibilities of practice assessors, practice supervisors and academic assessors are clearly detailed in the MORA. Practice assessors and practice supervisors confirm they're prepared for the supervision and assessment of students. The academic assessor role is supported by the faculty. Senior academic staff confirm that there's sufficient resources to deliver the programme.

There's evidence of SUC involvement in the programme. SUCs tell us that they attend programme team meetings and contribute as parents to the case loading unit of learning. SUCs assist with the development of simulation scenarios and provide sessions including bereavement which receives positive feedback from the students. The MORA includes opportunities for SUCs to feedback on student achievement in the practice learning environment. Programme documentation

confirms the involvement of women, partners and advocacy groups who contribute to the programme. Students confirm SUC involvement in the programme; they tell us that they'd welcome further SUC engagement in programme delivery as this is at times inconsistent. To date SUCs don't contribute to academic assessments and objective structure simulated examination (OSSE) assessments. The programme team tell us that they intend to involve SUCs in the OSSE assessments in the proposed programme. The programme team are advised to further strengthen the SUC involvement in the design, delivery and review of the programme. (Recommendation one)

There's evidence of sound inter-professional learning (IPL) in theory and the practice learning environment. Students study an IPL unit of learning in each year of the programme. IPL experiences in the practice learning environment are evidenced in the MORA.

The programme is delivered across two campuses. Some students tell us about their experiences across the sites. Students from the Portsmouth campus tell us that they feel there's inequality as they perceive the newer teaching accommodation at the Bournemouth campus is superior to that of Portsmouth and impacts on the learning experience. The programme team provide assurance that students receive equitable learning from the same programme team and students have access to equitable learning resources. Online learning is shared across both campuses. The programme team are advised to further consider the equality of student experience across both sites. (Recommendation two)

Documentary evidence confirms a process to communicate the outcomes of student evaluations of practice learning experiences to practice staff in a timely manner. The head of practice education undertakes a monthly analysis of placement evaluations and acts upon any issues or concerns raised. This enables the sharing of good practice and effective support for students who raise concerns. Students, the programme team and PLPs confirm mechanisms are in place to collate student feedback on programme units of learning and practice learning environments. Students tell us that they're not always clear about how feedback and programme evaluation is actioned to enhance the programme. Some students perceive that their placement evaluations are insufficiently valued by the programme team. The programme team are advised to further develop the feedback mechanisms for students regarding units of learning and placement evaluations, and to detail improvements made in practice and curriculum delivery as a result. (Recommendation three) Student representatives report playing a central role in providing regular feedback from the cohort to the programme team during staff student liaison meetings.

Documentary evidence confirms BU have robust procedures in place for escalating concerns about safe and effective care in practice learning environments. Students, PLPs, practice assessors, practice supervisors and the

programme team confirm they understand how to raise concerns in both the faculty and in practice learning environments. Students report being well supported in practice learning environments, and where concerns arise in practice, they tell us that they can be reallocated promptly if required. Should investigations arise, students confirm being well supported through such processes and being given relevant feedback on the outcomes. Students perceive that they're well supported in practice learning environments and feel well supported in reporting any issues or concerns relating to practice learning. There's awareness of the provision for protected time and students confirm that they're supernumerary in practice. Procedures are in place to identify any issues of concern relating to practice learning environments to manage and mitigate any risks to student learning. Students tell us that they meet with academic assessors throughout the year to review feedback received on placements. Action plans are in place to support students in their progression, following any concerns raised in practice.

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

**MET**  **NOT MET**

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

**MET**  **NOT MET**

**Post event review**

**Identify how the condition(s) is met:**

N/A

**Date condition(s) met:**

N/A

**Revised outcome after condition(s) met:**

N/A

**MET**  **NOT MET**

**Student journey through the programme**

**Standard 1: Selection, admission and progression**

**AEIs must:**

R1.1 appoint a lead midwife for education who is responsible for midwifery education in the AEI

R1.2 inform the NMC of the name of the lead midwife for education

R1.3 ensure recognition of prior learning is not permitted for pre-registration midwifery programmes

**AEIs together with practice learning partners must:**

- R1.4 ensure selection, admission and progression comply with the NMC Standards framework for nursing and midwifery education
- R1.5 confirm on entry to the programme that students:
- R1.5.1 enrolled on pre-registration midwifery programmes are compliant with Article 40(2) of Directive 2005/36/EC regarding general education length or nursing qualification as appropriate outlined in Annexe 1 of this document
- R1.5.2 demonstrate an understanding of the role and scope of practice of the midwife
- R1.5.3 demonstrate values in accordance with [the Code](#)
- R1.5.4 have capability to learn behaviours in accordance with the Code
- R1.5.5 have capability to develop numeracy skills required to meet programme outcomes
- R1.5.6 can demonstrate proficiency in English language
- R1.5.7 have capability in literacy to meet programme outcomes
- R1.5.8 have capability for digital and technological literacy to meet programme outcomes
- R1.6 support students throughout the programme in continuously developing their abilities in numeracy, literacy and digital and technological literacy to meet programme outcomes
- R1.7 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 Guidance of health and character](#). This includes satisfactory occupational health assessments and criminal record checks
- R1.8 ensure students are fully informed of the requirement to declare immediately any cautions, charges, conditional discharges or convictions and any adverse determinations made by other regulators, professional bodies and education establishments and that any declarations are dealt with promptly, fairly and lawfully
- R1.9 ensure the lead midwife for education, or their designated midwife substitute is able to provide supporting declarations of health and character for students who have successfully completed an NMC approved pre-registration midwifery programme, and
- R1.10 ensure NMC registered nurses entering a shortened pre-registration midwifery programme are a Registered nurse: first level (adult) and the programme complies with Article 40(1)(b) of Directive 2005/36/EC outlined in Annexe 1 of this document.

**Note:** Education institutions and their practice learning partners may propose to transfer current students onto the new programme to meet the [Standards for pre-registration midwifery programmes](#). If so, evidence must be provided to support this proposed transfer as part of the education institution's mapping process at Gateway 3.

**Proposed transfer of current students to the programme under review**

Demonstrate a robust process to transfer current students onto the proposed programme to ensure programme learning outcomes and proficiencies meet the *Standards for pre-registration midwifery programmes* (NMC, 2019).

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

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

### Findings against the standard and requirements

**Evidence provides assurance that the following requirements are met:**

R1.1 appoint a lead midwife for education who is responsible for midwifery education in the AEI  
 YES  NO

R1.2 inform the NMC of the name of the lead midwife for education  
 YES  NO

R1.3 ensure recognition of prior learning is not permitted for pre-registration midwifery programmes  
 YES  NO

R1.4 ensure selection, admission and progression comply with the NMC Standards framework for nursing and midwifery education  
 YES  NO

R1.4 is not met. Documentary evidence and the approval visit confirm PLPs contribute to the recruitment and selection process. PLPs tell us that they participate with the programme team in the student selection panel. Student ambassadors tell us that they attend selection events, to ensure applicants are welcomed and to provide insights into the student experience. Following a consultation exercise, a specific SUC based question developed by SUCs is presented to applicants at recruitment interviews. The origin of the question is explained to applicants in order for them to understand its context.

Documentary evidence and the approval visit confirm SUC participation in the recruitment and selection process is inconsistent. SUCs couldn't confirm that they're offered or have received equality and diversity training by BU. PLPs weren't able to confirm that BU ask for evidence of the mandatory equality and diversity training they receive as part of their employment. (Condition two)

R1.5 confirm on entry to the programme that students:

R1.5.1 enrolled on pre-registration midwifery programmes are compliant with Article 40(2) of Directive 2005/36/EC regarding general education length or nursing qualification as appropriate outlined in [Annexe 1](#) of this document  
**YES**  **NO**

R1.5.2 demonstrate an understanding of the role and scope of practice of the midwife  
**YES**  **NO**

R1.5.3 demonstrate values in accordance with the Code  
**YES**  **NO**

R1.5.4 have capability to learn behaviours in accordance with the Code  
**YES**  **NO**

R1.5.5 have capability to develop numeracy skills required to meet programme outcomes  
**YES**  **NO**

R1.5.6 can demonstrate proficiency in English language  
**YES**  **NO**

R1.5.7 have capability in literacy to meet programme outcomes  
**YES**  **NO**

R1.5.8 have capability for digital and technological literacy to meet programme outcomes  
**YES**  **NO**

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

R1.6 support students throughout the programme in continuously developing their abilities in numeracy, literacy and digital and technological literacy to meet programme outcomes  
**MET**  **NOT MET**

R1.6 is met. Programme documentation explicitly details the entry requirements for literacy and numeracy. Applicant technological literacy is assessed as part of the interview process. Literacy is supported in the programme by academic work, and there's an active faculty learning support team with an identified resource, the ten percent club enables the development of literacy in small student groups. Students undertake numeracy workshops and skills-based learning throughout the programme. These skills are integrated in curriculum units of learning and assessments to ensure students meet programme outcomes. Mapping documentation, module outcomes and assessments detail how students gain the required numeracy, literacy and digital technology skills. The programme team confirm, and students tell us that they access the online safeMedicate package to support numeracy skills development and the preparation for drug calculations.

Further virtual learning environment (VLE) resources on the platform, Brightspace, include for example clinicalskills.net to support skills development and production of neonatal weight-based calculations.

**Evidence provides assurance that the following requirements are met**

R1.7 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 Guidance of health and character](#). This includes satisfactory occupational health assessments and criminal record checks

YES  NO

R1.8 ensure students are fully informed of the requirement to declare immediately any cautions, charges, conditional discharges or convictions and any adverse determinations made by other regulators, professional bodies and education establishments and that any declarations are dealt with promptly, fairly and lawfully

YES  NO

R1.9 ensure the lead midwife for education, or their [designated midwife substitute](#) is able to provide supporting declarations of health and character for students who have successfully completed an NMC approved pre-registration midwifery programme, and

YES  NO

R1.10 ensure NMC registered nurses entering a shortened pre-registration midwifery programme are a Registered nurse: first level (adult) and the programme complies with Article 40(1)(b) of Directive 2005/36/EC outlined in [Annexe 1](#) of this document.

YES  NO

There's no shortened pre-registration midwifery programme proposed.

**Proposed transfer of current students to the programme under review**

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

Existing students won't transfer to the proposed programme. The programme team tell us that students returning from an interruption will be individually supported by the faculty tracking lead. They negotiate an individualised plan for any returning students. Students confirm they've been advised about the process.

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

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

Current students transferred to SSSA in March 2020. Students confirm they've transferred to the SSSA and are assigned practice supervisors and practice assessors who are prepared to support them in the practice learning environment.

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

YES  NO

SUCs couldn't confirm that they're offered or have received equality and diversity training by BU. PLPs weren't able to confirm that BU ask for evidence of the mandatory equality and diversity training they receive as part of their employment. (Condition two)

**Outcome**

**Is the standard met?** MET  NOT MET

SUCs involved in the recruitment process couldn't confirm that they're offered or have received equality and diversity training by BU. PLPs weren't able to confirm that BU ask for evidence of the mandatory equality and diversity training they receive as part of their employment.

Condition two: Provide clear evidence of a robust process to evidence equality and diversity training of all those involved in the decision making for recruitment to the programme. (SFNME R4.3; SPMP R1.4) (NMC and university condition)

**Date:** 4 November 2020



**Post event review**

**Identify how the condition(s) is met:**

Condition two: An Implementation plan is included in the revised admissions policy that details how stakeholders involved in the recruitment process will demonstrate successful completion of equality and diversity training. The plan includes a checklist of required training and how this is recorded. The BU admissions team will monitor the process.

Evidence:

Revised, admissions policy, undated.

Condition two is met.

**Date condition(s) met:**

14 December 2020

**Revised outcome after condition(s) met:**

**MET**  **NOT MET**

**Standard 2: Curriculum**

**AEIs together with practice learning partners must:**

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

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

R2.3 ensure that programme learning outcomes reflect the *NMC Standards of proficiency for midwives*

R2.4 involve women, partners, families and advocacy groups in the design, development, delivery and evaluation of programmes

R2.5 ensure that programmes delivered in Wales comply with legislation which supports use of the Welsh language

R2.6 design and deliver programmes that support students and provide relevant and ongoing exposure to midwifery practice

R2.7 ensure technology-enhanced and simulated learning opportunities are used effectively and proportionately to support learning and assessment, including where clinical circumstances occur infrequently and a proficiency is required

R2.8 design curricula that provide an equal balance of 50 percent theory and 50 percent practice learning, using a range of learning and teaching strategies, and

R2.9 ensure NMC approved pre-registration midwifery education programmes are of sufficient length to enable students to meet the NMC Standards of proficiency for midwives and respective programme outcomes, and comply with Article 40 (1) and satisfy Article 41(1) of Directive 2005/36/EC (see Annexe 1) by meeting the following criteria:

R2.9.1 full time education and training as a midwife is a minimum of three years and 4,600 hours, or

R2.9.2 where a student is already registered with the NMC as a Registered nurse: first level (adult), full-time education and training as a midwife shall be a minimum of two years and 3,600 hours, or  
 R2.9.3 where a student is already registered with the NMC as a Registered nurse: first level (adult), full-time education and training as a midwife shall be a minimum of 18 months and 3,000 hours, and in order for the qualification to be recognised in EU member states it must be followed by a year of professional midwifery practice.

**Findings against the standard and requirements**

**Evidence provides assurance that the following requirements are met**

R2.1 ensure programmes comply with the NMC [Standards framework for nursing and midwifery education](#)  
 YES  NO

R2.2 comply with the NMC [Standards for student supervision and assessment](#)  
 YES  NO

R2.3 ensure that programme learning outcomes reflect relevant *Standards of proficiency for midwives*  
 YES  NO

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

R2.4 involve women, partners, families and advocacy groups in the design, development, delivery and evaluation of programmes  
 MET  NOT MET

R2.4 is met. There's evidence of consultation; the faculty involve women, partners and advocacy groups in the design, development, delivery and evaluation of the programme. The midwifery programme management team undertake programme development and review, receiving reports from SUCs, students and PLPs three times a year.

Documentary evidence and the approval visit confirm a commitment to engage with SUCs. The BU public involvement in education and research (PIER) SUC co-ordinator describes how they've contributed to the development of the programme. They confirm ongoing work is continuing to identify further women and families willing to engage across the curriculum. The PIER representative tells us how the

chair of the local maternity voices partnership has contributed to programme development. They describe the development of an art and science of midwifery unit of learning, which explores how maternity services influence SUC perspectives and experiences. SUC representatives describe examples of how they share their experiences with students. The impact of bereavement is explored with students in each year to enable them to comprehend the impact of this on SUCs. A SUC describes how they undertake a leading role in consulting with SUC colleagues about their experiences to inform the development of SUC questions in the recruitment and selection process.

Students confirm SUCs attend the annual student conference, sharing their views on maternity services. They tell us about examples of this including the views of fathers and their involvement with maternity services. There's evidence of a commitment to a sound research culture within the faculty. A dedicated centre for midwifery, maternity and perinatal health with discreet research focused areas includes infant feeding, improving care for mothers and babies in low to middle income countries and changing the narrative and care in early labour. The programme team tell us that this research is inclusive of women and their families and informs programme delivery, providing students with a research focus.

**Evidence provides assurance that the following requirements are met**

R2.5 ensure that programmes delivered in Wales comply with legislation which supports use of the Welsh language

YES  NO  N/A

The programme is delivered in England.

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

R2.6 design and deliver programmes that support students and provide relevant and ongoing exposure to midwifery practice

MET  NOT MET

R2.6 is met. Programme documentation and the approval visit confirm BU design and deliver a programme that supports students to gain relevant and ongoing exposure to midwifery practice. The curriculum is organised in five broad recurring themes; midwifery practice, the art and science of midwifery, care continuum, women families and society, and IPL. These key aspects of midwifery practice are themes reflected across the duration of the three-year programme. The programme team tell us that the themes are further developed within the context of infant feeding, mental health, evidence-based practice and self-care and personal wellbeing. In year two, students demonstrate their understanding of the safe practice principles required for providing continuity of care to a small caseload of women.

Documentary evidence and discussion at the approval visit confirm students have varied practice learning environment experiences in each year including

community, antenatal practice, clinics, intrapartum and postnatal care. A long placement in year three supports the opportunity to undertake an elective placement in an alternative NHS trust. Students can spend three weeks in a non-BU practice learning environment or undertake a learning opportunity in another country. All alternative practice learning environments are subject to a risk assessment process. The programme team tell us that this practice learning experience counts towards the required attendance in terms of hours spent in practice. They tell us that students are not assessed against relevant skills and competences within these practice learning environments.

R2.7 ensure technology-enhanced and simulated learning opportunities are used effectively and proportionately to support learning and assessment, including where clinical circumstances occur infrequently and a proficiency is required

**MET**  **NOT MET**

R2.7 is met. Documentary evidence and the approval visit confirm technology-enhanced and simulated learning opportunities are used effectively and proportionately to support learning and assessment where clinical circumstances occur infrequently, and a proficiency is required. Technology-enhanced and simulated learning approaches are evident across the programme. In year one students are introduced to skills to support their use of information technology, the library, research, and self-assessment and reflection strategies. Students access flipped classrooms with a range of learning materials linked to the VLE Brightspace. Students use online learning packages including the BU training package for infant feeding (BURP). BURP provides a range of supportive workshops and videos related to SUC's experiences of issues related to breastfeeding. Students access a virtual home environment that enables them to consider appropriate decision-making in respect of safeguarding issues.

There are a range of assessments that include simulation and use of technology. The documentation details a real time team response to maternal haemorrhage and also a breastfeeding scenario that is used as an OSSE.

The MORA is accessed online via the BU OPAL learning platform.

R2.8 design curricula that provide an equal balance of 50 percent theory and 50 percent practice learning, using a range of learning and teaching strategies

**MET**  **NOT MET**

R2.8 is met. There's an equal balance of theory and practice learning across the three-year programme; 2,400 hours theory and 2,400 hours practice. Unit of learning specifications and programme documentation evidence a range of teaching strategies, including research-informed learning and independent study. Programme documentation demonstrates 50 percent in theory and 50 percent practice. Unit of learning outlines specify study hours and a summary document indicates how each contributes towards achievement of the 2,400 hours theory learning and 2,400 hours practice learning.

**Evidence provides assurance that the following requirements are met**

R2.9 ensure NMC approved pre-registration midwifery education programmes are of sufficient length to enable students to meet the NMC Standards of proficiency for midwives and respective programme outcomes, and comply with Article 40 (1) and satisfy Article 41(1) of Directive 2005/36/EC (see Annexe 1) by meeting the following criteria:

R2.9.1 full time education and training as a midwife is a minimum of three years and 4,600 hours,

YES  NO

R2.9.2 where a student is already registered with the NMC as a Registered nurse: first level (adult), full-time education and training as a midwife shall be a minimum of two years and 3,600 hours, or

YES  NO

There's no shortened pre-registration midwifery programme proposed.

R2.9.3 where a student is already registered with the NMC as a Registered nurse: first level (adult), full-time education and training as a midwife shall be a minimum of 18 months and 3,000 hours, and in order for the qualification to be recognised in EU member states it must be followed by a year of professional midwifery practice.

YES  NO

There's no shortened pre-registration midwifery programme proposed.

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

YES  NO

Assurance is provided that Gateway 2: [Standards for student supervision and assessment](#) relevant to assessment are met

YES  NO

**Outcome**

**Is the standard met?**

MET  NOT MET

**Date:** 4 November 2020

**Post event review**

**Identify how the condition(s) is met:**

N/A

**Date condition(s):**

N/A

**Revised outcome after condition(s) met:**

MET  NOT MET

N/A

**Standard 3: Practice learning**

**AEIs together with practice learning partners must:**

- R3.1 provide practice learning opportunities that enable students to develop and meet the NMC Standards of proficiency for midwives
- R3.2 ensure students experience the role and scope of the midwife enabling them to provide holistic care to women, newborn infants, partners and families
- R3.3 provide students with learning opportunities to enable them to achieve the proficiencies related to interdisciplinary and multi-agency team working
- R3.4 provide students with learning opportunities to enable them to achieve the proficiencies related to continuity of midwifery carer across the whole continuum of care for all women and newborn infants
- R3.5 provide students with learning opportunities to experience midwifery care for a diverse population across a range of settings, including midwifery led services
- R3.6 provide learning opportunities that enable students to develop the required knowledge, skills and behaviours needed when caring for women and newborn infants when complication and additional care needs arise, including as they relate to physical, psychological, social, cultural and spiritual
- R3.7 take account of students' individual needs and personal circumstances when allocating their practice learning opportunities, including making reasonable adjustments for students with disabilities
- R3.8 ensure students experience the range of hours expected of practising midwives, and
- R3.9 ensure students are [supernumerary](#)

**Findings against the standard and requirements**

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

R3.1 provide practice learning opportunities that enable students to develop and meet the NMC Standards of proficiency for midwives

**MET**  **NOT MET**

R3.1 is met. BU ensures practice learning opportunities enable students to develop and meet the SPM. Student achievement of the proficiencies is documented in the MORA. Documentary evidence confirms practice learning environments expose students to learning experiences across all areas of maternity care. These include complex care, special care baby units and neonatal intensive care units, specialist clinics, women's health and gynaecology and health

and wellbeing visits. Students work to the continuity of carer protocol in trust organisations.

All practice learning environments are subject to educational audit. Midwifery link tutors and practice educators work in partnership to undertake educational audits. The audit process ensures practice learning quality and safety and that they are appropriate to support midwifery students. The identification of learning opportunities and assurance of capacity and appropriate practice assessors and practice supervisors must be evidenced as part of the audit process. PLPs and the programme team tell us that some practice learning environments are shared with other AELs and that all must meet the requirements of the educational audit. PLPs tell us that there's capacity within practice learning environments for any increase in student numbers. They confirm that they work in partnership with the faculty to manage this effectively. The midwifery programme management team meet regularly with PLPs to monitor student allocation and time in each practice learning environment. There's evidence that students evaluate all practice learning environments on completion of the placement. Students tell us that they're well supported in appropriate practice learning environments. They confirm they evaluate each practice learning experience using an online evaluation tool.

The process for raising concerns is clearly detailed in the programme documentation. Students, PLPs, practice assessors and practice supervisors and the programme team confirm that they understand how to raise concerns in both the faculty and in practice learning environments.

R3.2 ensure students experience the role and scope of the midwife enabling them to provide holistic care to women, newborn infants, partners and families

**MET**  **NOT MET**

R3.2 is met. There's evidence that students experience the role and scope of the midwife enabling them to provide holistic care to women, newborn infants, partners and families. Students tell us that they're supported in the practice learning environment to gain the experiences required for them to meet programme outcomes. Programme documentation, the programme team and PLPs confirm that there are sufficient numbers of practice learning experiences to ensure students gain experience in the holistic needs of those who access maternity services.

R3.3 provide students with learning opportunities to enable them to achieve the proficiencies related to interdisciplinary and multi-agency team working

**MET**  **NOT MET**

R3.3 is met. Programme documentation confirms there's three units of learning which ensures IPL across all years. Students and PLPs tell us that there's opportunities in practice learning environments for students to work with a range of health and social care professionals. Students with the support of practice

assessors and practice supervisors are required to demonstrate active responsibility for ensuring they engage in interdisciplinary and practice learning visits to gain exposure to a broad range of multi-agency teamworking experiences.

R3.4 provide students with learning opportunities to enable them to achieve the proficiencies related to continuity of midwifery carer across the whole continuum of care for all women and newborn infants

**MET**  **NOT MET**

R3.4 is met. Students and PLPs tell us that there are learning opportunities that enable the achievement of the proficiencies related to continuity of midwifery carer across the whole continuum of care for all women and newborn infants. The MORA sets out the progression points and expectations for learning. The MORA is used to monitor student attendance and practice hours. Students work to a continuity of carer protocol in all PLP organisations. They undertake caseloads of the care provided for a small group of women in the final 18 months of the programme.

R3.5 provide students with learning opportunities to experience midwifery care for a diverse population across a range of settings, including midwifery led services

**MET**  **NOT MET**

R3.5 is not met. The programme team and PLPs describe the opportunities students experience of midwifery care for a diverse population across a range of settings, including midwifery led services. Students provide assurance that their midwifery practice learning needs are met and are of a sound quality. PLPs offer students the opportunity to work with military families, travellers and families across the socio-economic spectrum of society in rural and urban locations.

The MORA requires students to document care experiences and evidence how they respect and demonstrate a professional understanding when providing care. The theoretical elements of the programme address the impact of diversity on health outcomes. Student facing documentation including the programme handbook doesn't accurately present, detail and reflect the inclusive practices and diversity of learning opportunities available to students. (Condition one)

R3.6 provide learning opportunities that enable students to develop the required knowledge, skills and behaviours needed when caring for women and newborn infants when complication and additional care needs arise, including as they relate to physical, psychological, social, cultural and spiritual factors

**MET**  **NOT MET**

R3.6 is met. BU provides learning opportunities that enable students to develop the required knowledge, skills and behaviours needed when caring for women and



newborn infants when complications and additional care needs arise. These include physical, psychological, social, cultural and spiritual factors.

The curriculum and its use of curriculum themes is further developed in subsequent years, identifying increasing complexity and the leadership skills required to support service improvement.

R3.7 Take account of students' individual needs and personal circumstances when allocating their practice learning opportunities, including making reasonable adjustments for students with disabilities

**MET**  **NOT MET**

R3.7 is met. Programme documentation confirms that effective processes are established to ensure that student individual need and personal circumstance are given consideration in the allocation of placements. This includes making reasonable adjustments for students with learning and physical needs. Reasonable adjustment information is detailed in faculty and programme documentation.

Students tell us that they're able to provide preferences for a choice of three placements at application to the programme. The programme team tell us that this supports students to meet the requirements of the programme whilst managing their own commitments. The programme team tell us that particular concerns or requirements are discussed sensitively with applicants either during or after interview. Occupational health reviews enable staff to work with new students to accommodate reasonable adjustments and practice learning environments are audited on the ability to make reasonable adjustments.

A learning support team support student requirements for reasonable adjustments associated with assessments and any additional support required in the practice learning environment. Students tell us that their individual needs are considered in the practice learning environment and that reasonable adjustments are in place. Students confirm they understand the process for accessing additional support if required.

**Evidence provides assurance that the following requirements are met**

R3.8 ensure students experience the range of hours expected of practising midwives

**YES**  **NO**

R3.9 ensure students are [supernumerary](#)

**YES**  **NO**

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

YES  NO

Student facing documentation including the programme handbook doesn't accurately present, detail and reflect the inclusive practices and diversity of learning opportunities available to students. (Condition one)

Assurance is provided that Gateway 2: [Standards for student supervision and assessment](#) relevant to practice learning are met

YES  NO

### Outcome

**Is the standard met?**

MET  NOT MET

Student facing documentation including the programme handbook doesn't accurately present, detail and reflect the inclusive practices and diversity of learning opportunities available to students.

Condition one: Provide updated and accurate student facing programme documentation including the student handbook in accordance with BU presentation requirements that details the inclusive practices and diverse learning opportunities that are available to midwifery students. (SFNME R3.3; SPMP R3.5)

**Date:** 4 November 2020

### Post event review

#### Identify how the condition(s) is met

Condition one: Revised and updated student facing programme documentation including the programme handbook has been amended to evidence that there's inclusive practice and diverse learning opportunities for students.

Evidence:

Revised, programme handbook, 17 November 2020

Revised, unit specification document, undated

Revised programme specification, undated

Condition one is met.

**Date condition(s):**

14 December 2020

**Revised outcome after condition(s) met:**

MET  NOT MET

### Standard 4: Supervision and assessment

**AEIs together with practice learning partners must:**

- R4.1 ensure that support, supervision, learning opportunities and assessment complies with the NMC [Standards framework for nursing and midwifery education](#)
- R4.2 ensure that support, supervision, learning opportunities and assessment complies with the NMC [Standards for student supervision and assessment](#)
- R4.3 ensure throughout the programme that students meet the NMC Standards of proficiency for midwives and programme outcomes
- R4.4 provide students with feedback throughout the programme to support their development
- R4.5 ensure all programmes include a specific focus on numeracy assessment related to the midwifery proficiencies and the calculation of medicines, which must be passed with a score of 100 percent
- R4.6 assess students to confirm proficiency in preparation for professional practice as a midwife
- R4.7 ensure all proficiencies are recorded in an ongoing record of achievement, which must demonstrate the achievement of proficiencies and skills set out in the NMC Standards of proficiency for midwives, and
- R4.8 ensure the knowledge and skills for midwives set out in Article 40(3) and the activities of a midwife specified in Article 42 of Directive 2005/36/EC have been met as outlined in [Annexe 1](#) of this document

### Findings against the standards and requirements

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

- R4.1 ensure that support, supervision, learning opportunities and assessment complies with the NMC [Standards framework for nursing and midwifery education](#)

**MET**  **NOT MET**

R4.1 is met. Documentary evidence and the approval process demonstrates BU and PLPs have robust procedures and policies in place to evidence how support, supervision, learning opportunities and assessment comply with SFNME.

Students have access to academic assessors for academic support and a range of BU student support services available online. Examples include numeracy and library support. Students are supported by link lecturers, practice assessors and practice supervisors in the practice learning environment. Academic assessors work in partnership with practice assessors and students. They meet with students and practice assessors at the end of each placement to review progress towards achievement and support further development.

Academic staff are suitably qualified to deliver the proposed programme. PLPs and the programme team confirm there are sufficient appropriately prepared

practice assessors, practice supervisors and academic assessors to support delivery of learning in practice learning environments.

Students tell us that they're well supported academically and in the practice learning environment. They confirm that they can access student services who provide support with academic writing and study skills development. Students are well informed about how to access academic support in the faculty and in practice learning environments. Students tell us that formative and summative feedback on assignments effectively supports and enables their academic progress. The range of assessments detailed in the programme specification and unit of learning outlines indicate students should develop a wide range of skills relevant to midwifery practice. Group assessments are designed to ensure students learn to work collaboratively as a team.

Documentary evidence and the approval process confirm students are able to achieve the requirements of the SPM through accessing a variety of practice placements. There are practice learning experiences in each year of the programme that are designed to facilitate students meeting a diverse range of people in a variety of settings. All practice learning environments are subject to educational audit.

R4.2 ensure that support, supervision, learning opportunities and assessment complies with the NMC [Standards for student supervision and assessment](#)

**MET**  **NOT MET**

R4.2 is not met. Student achievement and progression in practice are recorded in the OPAL. Ongoing achievement is recorded in the MORA. The roles and responsibilities of practice assessors, practice supervisors and academic assessors are clearly specified in the programme handbook and in the MORA. The programme team present a visual overview of the proposed OPAL. This doesn't include the correct SSSA terminology for the roles and responsibilities of practice assessors, practice supervisors and academic assessors. (Condition three)

The preparation of practice assessors, practice supervisors and academic assessors is explicit within the faculty SSSA implementation strategy. The approval visit provides assurance that SSSA preparation is implemented across PLP organisations. Using the OPAL forms part of the preparation, access to the OPAL by role for the completion of relevant sections is restricted to practice assessors, practice supervisors and academic assessors as appropriate. Practice supervisors provide day to day feedback to students. Practice assessors and academic assessors review the OPAL at the end of each semester. Academic assessors track student attendance and review any action plans developed to support students.

Senior PLP representatives confirm that arrangements are in place to ensure all placement learning opportunities meet NMC standards. Link lecturers visit practice learning environments and provide support to practice assessors and practice

supervisors ensuring any concerns about student performance are effectively and promptly addressed.

R4.3 ensure throughout the programme that students meet the NMC Standards of proficiency for midwives and programme outcomes

**MET**  **NOT MET**

R4.3 is met. Programme documentation and discussion at the approval visit confirm students meet the SPM and the programme outcomes. Programme documentation clearly demonstrates that theory and practice is mapped against the SPM and programme outcomes.

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

**MET**  **NOT MET**

R4.4 is met. Documentary evidence and the approval visit confirm there are processes in place to provide students with both formative and summative feedback throughout the programme, supporting their development and progression. In response to student feedback, the programme team tell us that they've improved opportunities for formative feedback. Programme documentation indicates formative feedback on assessment preparation is offered for each unit of learning. Students report that formative assessment feedback is useful in supporting achievement.

PLPs and other health and social care professionals in the faculty contribute to the breastfeeding and haemorrhage OSSE assessments. Students prepare for OSSE assessments by practicing clinical skills using the visual learning package BURP.

Practice assessments are recorded in the OPAL. Students receive mid-placement and final placement feedback. Women and their families provide feedback as part of the MORA. Practice supervisors gain the consent of women and their families completing the feedback forms. Students are required to reflect on the feedback; they tell us that they value this feedback. The MORA records meetings and feedback given to students by practice assessors, practice supervisors and academic assessors.

**Evidence provides assurance that the following requirements are met**

R4.5 ensure all programmes include a specific focus on numeracy assessment related to the midwifery proficiencies and the calculation of medicines, which must be passed with a score of 100 percent

**YES**  **NO**

R4.6 assess students to confirm proficiency in preparation for professional practice as a midwife

	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
R4.7 ensure all proficiencies are recorded in an ongoing record of achievement, which must demonstrate the achievement of proficiencies and skills set out in the NMC Standards of proficiency for midwives, and	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
R4.8 ensure the knowledge and skills for midwives set out in Article 40(3) and the activities of a midwife specified in Article 42 of Directive 2005/36/EC have been met as outlined in <a href="#">Annexe 1</a> of this document	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Assurance is provided that Gateway 1: <a href="#">Standards framework for nursing and midwifery education</a> relevant to supervision and assessment are met	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Assurance is provided that Gateway 2: <a href="#">Standards for student supervision and assessment</a> relevant to supervision and assessment are met	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Accurate SSSA role and responsibility descriptors aren't reflected in the OPAL. (Condition three)	
<b>Outcome</b>	
<b>Is the standard met?</b>	<b>MET</b> <input type="checkbox"/> <b>NOT MET</b> <input checked="" type="checkbox"/>
Accurate SSSA role and responsibility descriptors aren't reflected in the OPAL. Condition three: Provide amended role descriptors within the OPAL to accurately reflect the roles and responsibilities for SSSA. (SSSA R4.1, R7.1, R9.1; SPMP R4.2)	
<b>Date:</b> 4 November 2020	
<b>Post event review</b>	
<b>Identify how the condition(s) is met:</b> Condition three: A screen shot of the OPAL online document has been amended to include accurate roles and responsibilities for the SSSA.	
Evidence: Revised, OPAL screen shot and SSSA description, undated	
Condition three is met.	
<b>Date condition(s) met:</b>	

14 December 2020

**Revised outcome after condition(s) met:**

**MET**  **NOT MET**

**Standard 5: Qualification to be awarded**

**AEIs together with practice learning partners must:**

R5.1 ensure that the minimum award for a pre-registration midwifery programme is at bachelor's degree level

R5.2 notify students during and before completion of the programme that they have [five years](#) to apply to register with the NMC if they wish to rely on this qualification<sup>1</sup>. 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.

*Standards framework for nursing and midwifery education specifically R2.11, R2.20*

**Findings against the standards and requirements**

**Evidence provides assurance that the following requirements are met:**

R5.1 ensure that the minimum award for a pre-registration midwifery programme is at bachelor's degree level

**YES**  **NO**

R5.2 notify students during and before completion of the programme that they have [five years](#) to apply to register with the NMC if they wish to rely on this qualification<sup>2</sup>. 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.

**YES**  **NO**

**Fall Back Award**

If there is a fall back exit award with registration as a midwife all NMC standards and proficiencies are met within the award.

YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	
There are no fall-back exit awards that confer NMC registration as a midwife.	
Assurance is provided that the <a href="#">Standards framework for nursing and midwifery education</a> relevant to the qualification to be awarded are met	
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
<b>Outcome</b>	
Is the standard met?	MET <input checked="" type="checkbox"/> NOT MET <input type="checkbox"/>
Date: 4 November 2020	
<b>Post event review</b>	
Identify how the condition(s) is met: N/A	
Date condition(s) met: N/A	
Revised outcome after condition(s) met: N/A	MET <input type="checkbox"/> NOT MET <input type="checkbox"/>



**Section four**

**Sources of evidence**

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

<b>Key documentation</b>	<b>YES</b>	<b>NO</b>
Programme document, including proposal, rationale and consultation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme specification(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Module descriptors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student facing documentation including: programme handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student university handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice assessment documentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Ongoing record of achievement (ORA)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice learning environment handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice learning handbook for practice supervisors and assessors specific to the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Academic assessor focused information specific to the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Placement allocation / structure of programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PAD linked to competence outcomes, and mapped against <i>Standards of proficiency for midwives</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC, 2018) (Gateway 1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the <i>Standards for student supervision and assessment</i> (NMC, 2018) apply to the programme(s) (Gateway 2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education institution has met the <i>Standards for pre-registration midwifery programmes</i> (NMC, 2019) (Gateway 3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Curricula vitae (CV) for relevant staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CV of the LME	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Registrant academic staff details checked on NMC website	<input checked="" type="checkbox"/>	<input type="checkbox"/>
External examiner appointments and arrangements	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Written placement agreements between the education institution and associated practice learning partners to support the programme intentions, including a signed supernumerary agreement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation:		

<p>List additional documentation:          Post visit documentation:          Revised, programme handbook, 17 November 2020          Revised, OPAL screen shot and SSSA description, undated          Revised, admissions policy, undated          Revised, unit specification document, undated          Revised programme specification, undated          Recommendations plan, undated          Corrections document, undated          Yearly introduction and final day timetable, undated</p>
<p>Additional comments:          None identified.</p>

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

	YES	NO
Senior managers of the AEI/education institution with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated practice learning partners with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated employer partners with responsibility for resources for the programme (applicable for apprenticeship routes)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Programme team/academic assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice leads/practice supervisors/ practice assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, please identify cohort year/programme of study: Year three midwifery students x four Year two midwifery students x three Year one midwifery student x one		
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation No apprenticeship route is being considered for approval.		
Additional comments: None identified.		

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

	<b>YES</b>	<b>NO</b>
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Library facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Technology enhanced learning Virtual learning environment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Educational audit tools/documentation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Practice learning environments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, state where visited/findings:		
System regulator reports reviewed for practice learning partners	<input checked="" type="checkbox"/>	<input type="checkbox"/>
System Regulator Reports List: CQC quality report, Hampshire Hospitals NHS Foundation Trust, 26 September 2018 CQC quality report, Poole Hospital NHS Foundation Trust, 31 January 2020		
If you stated no above, please provide the reason and mitigation: This is an established AEI and visits to facilities weren't needed.		
Additional comments: None identified.		

**Mott MacDonald Group Disclaimer**

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We accept no responsibility for the consequences of this document being relied upon by any other party, or being used for any other purpose, or containing any error or omission which is due to an error or omission in data supplied to us by other parties.

**Issue record**

**Final Report**

Author(s):	Nicola Clark	Date:	13 November 2020
Checked by:	Bernadette Martin	Date:	19 November 2020
Submitted by:	Lucy Percival	Date:	18 January 2021
Approved by:	Emiko Hughes	Date:	19 January 2021