

**Programme approval report**

**Section one**

<b>Programme provider name:</b>	University of Central Lancashire (UCLan)
<b>In partnership with:</b> <i>(Associated practice learning partners and/or employer partners involved in the delivery of the programme)</i>	<p>Southport and Ormskirk NHS Foundation Trust</p> <p>Lancashire Teaching Hospitals NHS Foundation Trust</p> <p>East Lancashire Teaching Hospitals NHS Trust</p> <p>University Hospitals of Morecambe Bay NHS Foundation Trust</p> <p>Bolton NHS Foundation Trust</p> <p>Wigan, Wrightington and Leigh Teaching Hospitals NHS Foundation Trust</p> <p>Warrington and Halton Teaching Hospitals NHS Foundation Trust</p> <p>Blackpool Teaching Hospitals NHS Foundation Trust</p>
<b>Programme reviewed:</b>	<p>Registered Midwife - 18M <input checked="" type="checkbox"/></p> <p>Registered Midwife - 24M <input type="checkbox"/></p> <p>Registered Midwife - 36M <input checked="" type="checkbox"/></p> <p>Registered Midwife - degree apprentice <input type="checkbox"/></p>
<b>Title of programme(s):</b>	<p>BSc (Hons) Midwifery (Shortened)</p> <p>MSc Midwifery (Shortened) programme</p> <p>BSc (Hons) Midwifery</p>

<b>Academic levels:</b>									
Registered Midwife - 18M	<p>England, Wales, Northern Ireland  <input checked="" type="checkbox"/> Level 6 <input checked="" 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>	18/11/20								
<b>Programme start date:</b>	<table border="1"> <tr> <td>Registered Midwife – 18M</td> <td>13 September 2021</td> </tr> <tr> <td>Registered Midwife – 24 M</td> <td>N/A</td> </tr> <tr> <td>Registered Midwife – 36 M</td> <td>13 September 2021</td> </tr> <tr> <td>Registered Midwife – degree apprentice</td> <td>N/A</td> </tr> </table>	Registered Midwife – 18M	13 September 2021	Registered Midwife – 24 M	N/A	Registered Midwife – 36 M	13 September 2021	Registered Midwife – degree apprentice	N/A
Registered Midwife – 18M	13 September 2021								
Registered Midwife – 24 M	N/A								
Registered Midwife – 36 M	13 September 2021								
Registered Midwife – degree apprentice	N/A								
<b>QA visitor(s):</b>	<p>Registrant Visitor: Suzanne Crozier  Lay Visitor: Jonathan Fisher</p>								

## Section two

### Summary of review and findings

The University of Central Lancashire (UCLan), school of community health and midwifery sits within the faculty of health and care. The school is an established approved education institution (AEI). The AEI has submitted for approval a full-time undergraduate three-year BSc (Hons) pre-registration midwifery programme, a full-time BSc (Hons) pre-registration shortened, and a MSc pre-registration shortened route. All routes lead to professional registration as a midwife. There are named exit awards identified for students who do not complete the programme outcomes or the Nursing and Midwifery Council (NMC) Standards of proficiency for midwives (SPM) (NMC, 2019). It is clear in programme documentation for all programmes that the exit awards do not confer eligibility to register as a midwife with the NMC.

The approval visit is undertaken remotely due to COVID-19.

The AEI and practice learning partners (PLPs) provide a clear and enthusiastic vision for the development of the programme. There is evidence of wide engagement and a collaborative approach to the design and development of the programme led by the lead midwife for education (LME) involving PLPs, service users and carers (SUCs) and feedback from students. Stakeholders tell us they feel listened to and can see how the new programmes reflect their contributions. All stakeholders welcome the new 'gestational' curriculum placement plan as innovative and creating flexibility for placement learning opportunities. The educational philosophy is based on a salutogenic approach to health which is delivered as a mix of case-based learning (CBL), lectures and simulation. The programmes have a clear research focus and reflection is embedded within planned theory and practice activity. There is documentary evidence of mapping the transfer of students from the existing programme and module outcomes to those proposed. Students tell us they are aware of the proposed transfer and have been assured that they can choose how to complete their studies.

Programme documentation indicates curriculum content, modes of delivery and practice learning experiences are designed to enable students to meet the SPM (NMC, 2019). Students tell us they have been consulted over the proposed changes and welcome the enhancements that the new programme will bring. UCLan is committed to partnership working with stakeholders in the co-production, co-delivery, and evaluation of the programme at strategic and operational levels. Stakeholders from the partner hospital trusts are involved in the recruitment activities for the programmes however students and SUCs tell us that SUC engagement in recruitment and teaching and learning is not consistent.

The AEI and PLPs tell us any issues which arise from practice and external reviews are monitored through a systematic process and risks to students practice learning are collaboratively managed. Educational audits of practice areas used for student learning are undertaken in partnership between the AEI and PLPs. UCLan are leading a Health Education England (HEE) funded project, enabling effective learning environments (EELE), to enhance practice and placement learning within the region. PLPs tell us that EELE is supporting an expansion in student numbers and learning opportunities. Documentary evidence is not clear about proposed student numbers and students tell us that learning on placement is sometimes compromised by the number of students in each area. Strategies to demonstrate that placement capacity is effectively monitored; including actions taken when students report placement capacity are exceeded are required.

Senior managers from PLPs agree to support practice learning opportunities and the Standards for student supervision and assessment (SSSA). Students, practice assessors and practice supervisors tell us that the SSSA were implemented as part of the NMC emergency standards (NMC, 2020). Documentary evidence indicates that SSSA is understood by the programme team and that there are processes in place to manage the ongoing implementation. However, students tell us that there remains a lack of clarity for some practice supervisors and practice assessors.

The programmes are adopting the midwifery ongoing record of achievement (MORA) for recording practice assessment. The MORA is the product of a collaborative development based on the established pan-London model. This has used regional stakeholder engagement including all LMEs in England and Northern Ireland and is supported by HEE. PLPs confirm that they have been involved in the planning of the MORA approach for the proposed programmes.

Students representing long and short courses articulate positive feedback about the programme and the support available from academic staff. There is documentary evidence of policy and procedures for managing student concerns and fitness to practice.

The Standards framework for nursing and midwifery education (SFNME) is not met at programme level. The SSSA is not met at programme level. The programme is recommended to the NMC for approval subject to five NMC conditions and six university conditions. One NMC recommendation and three university recommendations are made.

Update 22 January 2021:

UCLan provided documentary evidence which confirms all five NMC conditions have been met and standards are assured. The confirmed minutes of the approval event have been signed by the Chair and evidence that all six university conditions have been met.

Recommended outcome of the approval panel	
<b>Recommended outcome to the NMC:</b>	<p>Programme is recommended to the NMC for approval <input type="checkbox"/></p> <p>Programme is recommended for approval subject to specific conditions being met <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
<b>Conditions:</b>	<p><b>Effective partnership working: collaboration, culture, communication and resources:</b> None identified.</p> <p><b>Selection, admission and progression:</b> Condition one: Provide an implementation plan to ensure sustainable SUC engagement in midwifery programmes including involvement in recruitment and selection (including suitable preparation for recruitment). (SFNME R1.12, R2.7; Standards for pre-registration midwifery programmes (SPMP) R1.4)</p> <p>Condition six: Programme specification [Section 16] to be updated to clarify wording around admissions policy in relation to the range of UCAS tariff points [BSc (Hons) Midwifery]. (University condition)</p> <p>Condition seven: Course handbooks to be updated to clarify that all modules are core and must be passed before students can progress to the next level of the programme. (University condition)</p> <p>Condition eight: Course handbooks to be updated to remove the statement 'You are required to attend 100 percent of all theory and placement hours as stipulated by the NMC.' (University condition)</p> <p><b>Practice learning:</b> Condition two: Provide strategies to demonstrate that placement capacity is effectively monitored; including actions taken when students report placement capacity is exceeded. (SSSA R1.4, R1.8; SPMP R3.1)</p> <p>Condition three: Improve communications to PLPs (practice assessors and practice supervisors) with</p>

	<p>respect to SSSA implementation. (SSSA R1.4, R5.1, R8.1; SPMP R4.2)</p> <p><b>Assessment, fitness for practice and award:</b> Condition five: UCLan to provide a transfer document that demonstrates the transfer of students from the course assessment document (CAD) to the MORA illustrating how proficiencies will be mapped. (SFNME R2.2)</p> <p>Condition nine: Module Descriptors for MW2506, MW4602, MW35092 and MW4605 to be reviewed and updated to differentiation between the levels of study. (University condition)</p> <p><b>Education governance: management and quality assurance:</b> Condition four: Review the feedback loop for students who raise concerns in practice, ensuring there is sustained support for the student until resolution is achieved. (SFNME R2.5, R3.12; SPM R4.1)</p> <p>Condition 10: Programme specifications [Section14] to be updated to clarify that the non-Honours degree is not accredited by the NMC [BSc (Hons) Midwifery/BSc (Hons) Midwifery (Shortened)]. (University condition)</p> <p>Condition 11: That the course team must comply with any NMC Conditions prior to formal approval/sign off by the university. (University condition)</p>
<p><b>Date condition(s) to be met:</b></p>	<p>30 January 2021</p>
<p><b>Recommendations to enhance the programme delivery:</b></p>	<p>Recommendation one: Consider enhancing communication to practice assessors and practice supervisors with respect to MORA implementation. (SPM R4.7)</p> <p>Recommendation two: Transfer arrangements, from the existing to the new curriculum, to be clarified to current students. (University recommendation)</p>

	<p>Recommendation three: Programme specification [Section 18] - review curriculum skills mapping in relation to MW2504 and MW4600. [BSc (Hons) Midwifery (shortened); MSc Midwifery (shortened)]. (University recommendation)</p> <p>Recommendation four: Course handbooks – Consider the inclusion of a course structure diagram for each of the programmes. (University recommendation)</p>
<p><b>Focused areas for future monitoring:</b></p>	<p>Placement capacity for midwifery students.</p>

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

**Commentary post review of evidence against conditions:**

UCLan provided additional documentation and a narrative which described how each of the conditions have been met.

There is a new service user sustainability strategy which articulates how service users will be involved in the creation of digital learning resources as well as new approaches to recruitment and preparation for their role. Additional evidence has been provided to illustrate service user recruitment and the narrative reports increased liaison with a newly appointed Comensus facilitator for the school.

Condition one is now met:

The management of midwifery placement capacity has been clearly presented in the capacity management process for pre-registration midwifery. Capacity will be managed through enhanced partner engagement which includes work-based learning huddles, work-based learning forums and the transforming our practice partnerships scheme. InPLace capacity management software will launch in March 2021 and facilitate effective management of placement capacity across all PLPs and other AEs in the region.

Condition two is now met.

UCLan provided further documentary evidence of the communication processes in place to support the implementation of SSSA. Notes from the task and finish group and student forums have been provided which illustrate that issues raised by students and practice assessors and practice supervisors are responded to. A

summary of the processes in place is also provided including a flow chart to manage SSSA implementation. Students have been included in clinical link meetings to enable them to cascade information directly from these forums to their respective cohorts.

Condition three is now met.

The management of feedback for students who raise concerns in practice has been addressed in a narrative response by UCLan. The narrative makes links to both the university and the NMC raising concerns processes and includes a clear flow chart which articulates the responsibility of the academic adviser to provide support to students. UCLan have confirmed they have met with students and PLPs to ensure a common understanding of the process.

Condition four is now met.

Documentary evidence has been provided which articulates a tripartite approach to managing the transfer of students from the CAD to the MORA when the new programme commences. This is supported by a comprehensive mapping document.

Condition five is now met.

<b>AEI Observations</b>	<b>Observations have been made by the education institution</b> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<b>Summary of observations made, if applicable</b>	
<b>Final recommendation made to NMC:</b>	Programme is recommended to the NMC for approval <input checked="" type="checkbox"/> Recommended to refuse approval of the programme <input type="checkbox"/>
<b>Date condition(s) met:</b>	29 January 2021

### Section three

NMC Programme standards
Please refer to NMC standards reference points <a href="#">Standards for pre-registration midwifery programmes</a> (NMC, 2019) <a href="#">The Future midwife: Standards of proficiency for registered midwives</a> (NMC, 2019) <a href="#">Standards framework for nursing and midwifery education</a> (NMC, 2018)



### NMC Programme standards

[Standards for student supervision and assessment](#) (NMC, 2018)  
[The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates](#) (NMC, 2015 updated 2018)  
[QA Framework for nursing, midwifery and nursing associate education](#) (NMC, 2018)  
[QA Handbook](#)

### Partnerships

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

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

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

**Standard 1: The learning culture:**

R1.12 ensure programmes are designed, developed, delivered, evaluated and 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 is documentary evidence of UCLan systems and processes to promote effective partnership working. PLPs report that there is effective collaboration with the AEI at strategic and operational levels. Practice education facilitators (PEFs), practice assessors and practice supervisors tell us they have positive experiences of working with the programme team. They report challenges with the initial implementation of the SSSA as part of the emergency standards (NMC, 2020). The challenges have been responded to in partnership with the AEI by increased staff development opportunities. Documentary evidence describes the roles and responsibilities of practice assessors and practice supervisors, and academic assessors as applied to the new programme. PLPs report that they work in partnership with the AEI to provide suitable and risk assessed learning environments. However, students tell us that communication between the AEI and the practice supervisors and assessors can be challenging. We are told that as a result practice supervisors and practice assessors do not always understand how to use the SSSA documentation. (Condition three)

The programme team tell us that they work closely with HEE, to respond to workforce demands in terms of student numbers and there is documentary evidence of a collaborative network of AEIs and PLPs in the North West region. There is a shared approach to the management and quality assurance of practice learning via the online practice assessment record and evaluation (PARE) system. Documentation, students, PLPs and the programme team confirm that procedures and policies are in place to ensure that the students' individual needs and circumstances are given consideration in all parts of the programme. This includes making reasonable adjustment for students with disabilities. Students, practice assessors, and PEFs indicate that the system for making reasonable adjustments is working well and during the COVID-19 pandemic had been extensively used to ensure the safe working in placement for all students.

UCLan demonstrate strong strategic support for service user involvement in the education of health and social care professionals. There is a university wide service user group, 'Comensus' that recruits and prepares service users for involvement in education activities. There is documentary evidence of focus

groups with service users as part of the development of the midwifery programmes and examples of service user involvement in some teaching activities. Service users tell us that they have positive experiences of support and engagement with student midwives in practice settings. Stakeholders from PLPs are involved in the recruitment activities for the programmes however students and SUCs tell us that SUC engagement in recruitment and teaching and learning is not consistent. (Condition one)

Documentary evidence indicates that 'gestational' model applied to practice learning will increase placement capacity and enhance student opportunities to meet the SPM (NMC, 2019). PLPs, PEFs and practice assessors confirm that there are initiatives in place to increase placement capacity. The collaborative learning in practice (CLiP) model of peer supervision has been successfully introduced for student midwives and student 'E rostering' has also ensured that the full 24-hour pattern of shifts are utilised.

The PLPs and AEI articulate a partnership approach to the quality assurance of learning environments. We are assured that when the Care Quality Commission (CQC) report an inadequate level of care that this is assessed for impact on the learning environment with any necessary action including escalation to HEE and the NMC completed.

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**

Stakeholders from PLPs are involved in the recruitment activities for the programmes however students and SUCs tell us that SUC engagement in recruitment and teaching and learning is not consistent.

Condition one: Provide an implementation plan to ensure sustainable SUC engagement in midwifery programmes including involvement in recruitment and selection (including suitable preparation for recruitment). (SFNME R1.12, R2.7; SPMP R1.4)

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**

Students tell us that communication between the AEI and the practice supervisors and assessors can be challenging. We are told that as a result practice supervisors and practice assessors do not always understand how to use the SSSA documentation.

Condition three: Improve communications to PLPs (practice assessors and practice supervisors) with respect to SSSA implementation. (SSSA R1.4, R5.1, R8.1; SPMP R4.2)

**Post event review**

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

Condition one: UCLan provided four documents and a narrative description of improvements to service user engagement. There is a new service user sustainability strategy which articulates how service users will be involved in the creation of digital learning resources as well as new approaches to recruitment and preparation for their role. Additional evidence has been provided to illustrate service user recruitment and the narrative reports increased liaison with a newly appointed Comensus facilitator for the school.

Evidence:

- Response to conditions, 22 January 2021
- Service user sustainability strategy, January 2021
- Evidence volunteer with Comensus. August 2019
- Evidence Comensus trifold flyer, undated

Condition three: UCLan provided further documentary evidence of the communication processes in place to support the implementation of SSSA. Notes from the task and finish group and student forums have been provided which illustrate that issues raised by students and practice assessors and practice supervisors are responded to. A summary of the processes in place is also provided including a flow chart to manage the SSSA implementation. Students have been included in clinical link meetings to enable them to cascade information directly from these forums to their respective cohorts.

Evidence:

- Evidence doc, undated
- Your guide to NMC SSSA, undated
- Task and finish meeting notes, 30 October 2020
- BSc midwifery clinical links team meeting minutes, 2 December 2021
- Student midwife forum minutes, 2 January 2021

**Date condition(s) met:** 29 January 2021

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

**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 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. SUC tell us that they had not been involved in student recruitment or consultation towards the development of the new programme. Students confirm that service users are only occasionally involved in interviews and that the service users within the teaching activities are university staff from other departments. (Condition one)

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. There is an LME in post and documentary evidence indicates a team of staff with the skills required to support students to progress and meet the SPM (NMC, 2019). UCLan documentary evidence makes explicit entry requirements for literacy and numeracy and the additional requirements for entry onto the shortened programmes. There is documentary evidence of a range of strategies to support students' continual development of numeracy, digital and technological literacy. There are learning support mechanisms for students including library services as well as academic advisors and module leads. PLPs tell us that there is support for



numeracy and digital technology in practice related systems and that students are well prepared for employment. Students confirm that numeracy is assessed throughout the programme and that support is available to develop literacy and digital skills.

**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 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

**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.**

Documentary evidence maps the current three-year programme modules and outcomes to the proposed new programme. Evidence is provided from programme plans of compliance with theory practice hours for transferring students. Consultation documentation indicates that the first-year students have been consulted and have been given a choice of transferring onto the new programme or remaining with the existing one. Second year students and those on the shortened programme will not be transferring. Students confirm that they

understand the rationale for the transfer and that they can choose how to complete their studies following programme approval. The programme team indicate that the planned transfer will move students from the CAD to the MORA and that a process is in place to confirm this. Documentary evidence is required to confirm the mapping from the CAD to the MORA. (Condition five)

PEFs, practice assessors and practice supervisors confirm they are aware of the MORA but are unsure of the arrangements for implementation and transfer. (Recommendation one)

**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.**

Documentation indicates that SSSA is currently in place and that those acting as practice and academic assessors are registered midwives. The programme team confirm that SSSA was introduced as part of the emergency standards (NMC, 2020). PLPs, PEFs, practice assessors and practice supervisors tell us that the new roles within SSSA are embedding and that UCLan provides support for students and practice staff. Students report that they have found the implementation challenging and that some practice staff are unfamiliar with the SSSA paperwork.

Condition three: UCLan to improve communications to PLPs (practice assessors and practice supervisors) with respect to SSSA implementation. (SSSA R1.4, R5.1, R8.1; SPMP R4.2)

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

**YES**  **NO**

The involvement of SUC in recruitment and selection to the programme, (including suitable preparation for recruitment) cannot be confirmed. (Condition one)

The programme team indicate that the planned transfer will move students from the CAD to the MORA and that a process is in place to confirm this. Documentary evidence is required to confirm the mapping from the CAD to the MORA. (Condition five)

**Outcome**

**Is the standard met?**

**MET**  **NOT MET**

The involvement of service users in recruitment to the programme does not reflect SFNME R1.12 and R2.7.

Condition one: UCLan to provide an implementation plan to ensure sustainable SUC engagement in midwifery programmes including involvement in recruitment and selection (including suitable preparation for recruitment). (SFNME R1.12, R2.7; SPMP R1.4)

Proposed transfer of current students to the programme under review is not met: Mapping of the CAD and MORA to ensure students meet SPMP is not explicit.

Condition five: UCLan to provide a transfer document that demonstrates the transfer of students from the CAD to the MORA illustrating how proficiencies will be mapped. (SFNME R2.2)

Practice assessors and practice supervisors tell us they are not clear about the implementation of SSSA.

Condition three: UCLan to improve communications to PLPs (practice assessors and practice supervisors) with respect to SSSA implementation. (SSSA R1.4, R5.1, R8.1; SPMP R4.2)

**Date:** 18 November 2020

### Post event review

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

Condition one is met: UCLan provided four documents and a narrative description of improvements to service user engagement. There is a new service user sustainability strategy which articulates how service users will be involved in the creation of digital learning resources as well as new approaches to recruitment and preparation for their role. Additional evidence has been provided to illustrate service user recruitment and the narrative reports increased liaison with a newly appointed Comensus facilitator for the school.

#### Evidence:

Response to conditions. 22 January 2021  
Service user sustainability strategy, January 2021  
Evidence volunteer with Comensus, August 2019  
Evidence Comensus trifold flyer, undated

Condition three is met. UCLan provided further documentary evidence of the communication processes in place to support the implementation of the SSSA. Notes from the task and finish group and student forums have been provided which illustrate that issues raised by students and practice assessors and practice supervisors are responded to. A summary of the processes in place is also provided including a flow chart to manage the SSSA implementation. Students have been included in clinical link meetings to enable them to cascade information directly from these forums to their respective cohorts.

Evidence:

Your guide to NMC SSSA, undated

Task and finish meeting notes, 30 October 2020

BSc midwifery clinical links team meeting minutes, 2 December 2021

Student midwife forum minutes, 21 January 2021

Condition five is met. Documentary evidence has been provided which articulates a tripartite approach involving student, practice assessor and academic assessor to managing the transfer of students from the CAD to the MORA. This is supported by a comprehensive mapping document and aligns with the model in use for the ongoing implementation of the SSSA.

Evidence:

Transfer document CAD to MORA, undated

**Date condition(s) met:** 29 January 2021

**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:

R2.5.1 full time education and training as a midwife is a minimum of three years and 4,600 hours, or

R2.5.2 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

R2.5.3 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 is documentary evidence of the involvement of SUC in the development of the programmes and the programme team tell us that the new programmes reflect SUC feedback. The 'Commenus' group at UCLan provides support for SUC to be involved in the delivery and evaluation of programmes. SUC report positive experiences with students in practice settings and students tell us they have opportunities to work with women from diverse backgrounds.

**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 MORA evidence that theory and practice learning are integrated and designed to support student progression. PLPs indicate that there are opportunities for students to work with specialists such as services for those with long term health conditions and multi-agency services for those with complex social needs. Students tell us that they have exposure to a diverse range of midwifery practice and that they receive support on placement to enable their learning.

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 provides a clear approach to the development of technology enhanced and digital approaches to learning. The programme team tell us that simulation is integrated into modules and supports the case-based approach to learning. We are assured by the programme team that skills such as perineal repair and breech birth which occur less frequently in clinical practice can be developed via the use of simulation, if required. Students confirm that teaching and learning methods support their skill development and prepare them for practice learning.

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. Programme documentation and planners evidence an equal balance of 50 percent theory and 50 percent practice on all programmes. Theoretical content is organised into six themes which reflect the domains within the SPM (NMC, 2019). The domains underpin all three programmes and link explicitly to the MORA. Documentary evidence describes a case-based approach to learning and

the programme team tell us this includes integrated lectures, journal clubs and simulation activities which reflect the academic level of study.

**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

Not applicable for this programme, as the post registration registered midwifery programme is the 18 month programme and not two years in length.

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

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: 18 November 2020

**Post event review**

<b>Identify how the condition(s) is met:</b> N/A	
<b>Date condition(s):</b> N/A	
<b>Revised outcome after condition(s) met:</b> N/A	<b>MET</b> <input type="checkbox"/> <b>NOT MET</b> <input type="checkbox"/>

**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 not met. The AEI provides documentary evidence of practice learning opportunities that enable students to develop and meet the SPM. We are told that



sufficient capacity and range of placements is available to students across the different health trusts. Placement coordinators in the hospital trusts have developed systems to ensure that students from different disciplines and programmes are accommodated using all available rotas (day and night). The MORA context document explains how student progress will be monitored and academic assessors and practice assessors confirm their role in confirming students meet the required proficiencies in line with SSSA. PLPs tell us that there are systems in place to manage and evaluate practice learning opportunities. However, students tell us that sometimes the numbers of students in an area limit or prevent opportunities to work with women or a practice supervisor. (Condition two)

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. The programme planner for all routes provides evidence of how placements are planned to enable continuity of care (CoC) across the scope of midwifery practice. The salutogenic philosophy of the curriculum demonstrates a holistic approach to the health of women, infants and their families. PLPs tell us there are sufficient practice learning experiences to enable students to experience the role and scope of midwifery practice. They confirm the introduction of the newborn infant physical examination (NIPE) within the MORA is welcome and that there are sufficient staff to support students with this proficiency. Service users spoke warmly of the holistic care they had received from student midwives. This demonstrated both the knowledge and emotional support that student midwives are able to provide.

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. Documentary evidence describes a range of inter-professional learning (IPL) opportunities for students. Students tell us that these experiences are valuable and add to their learning. PLPs describe a collaborative approach to planning placement learning with a dedicated IPL team as part of the ELEE project. PEFs and students tell us the collaborative approach to placement planning and opportunities for IPL are also enhanced by the implementation of the CLiP model of peer-to-peer support in practice.

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. Programme documentation reflects the concept of a gestational curriculum where student practice opportunities are matched to the progress of a pregnancy from early stages through to post birth care and support. The programme team tell us that this has been designed to enable students on each programme to experience CoC. Programme plans have been designed to maximise the opportunity for students to follow women through their care pathway. PLPs tell us that this approach is welcome and will mirror what is increasingly normal practice in line with national policy guidelines such as Better Births (Department of Health, 2016).

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 met. Students confirm an inclusive approach to teaching and learning and report engagement with women and families from diverse populations. Practice assessors and PEFs confirm the collaborative approach to managing placements using PARE ensures students experience care provision in a variety of settings. The programme team tell us the 'gestational' curriculum for practice learning will further support student learning as they follow women through 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 factors

**MET**  **NOT MET**

R3.6 is met. The use of CBL within the curriculum ensures students consider the holistic needs of women and families whilst building their midwifery knowledge and skills aligned with SPM. Individual cases are supported by core learning activities, including simulation and through appropriate practice-based learning. Documentary evidence indicates that CBL ensures students identify their own strengths and development needs supported by constructive peer and facilitator feedback. The programme team tell us the curriculum will reflect the evolving approaches to CoC and increase engagement in provision of CoC with women and families across the programme's duration. Additional care needs are addressed by CBL in years two and three where students discuss examples from practice and are supported to consider the holistic needs of women and new-born infants.

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. There is documentary evidence that PLPs and the AEI work in partnership to support students who may need to have adjustments made in order that they can fully participate in their academic and practical learning environments. We were told of several instances where adjustments had been made during the current pandemic to ensure students could get to their placements and practice safely.

**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

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

YES  NO

UCLan and PLPs confirm systems are in place to manage placement capacity but students tell us that there are sometimes too many students in each placement area and that this limits opportunities to learn. (Condition two)

**Outcome**

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

Documentary evidence describes the processes to ensure practice learning opportunities are available to meet the SPMP (NMC, 2019). Students report that this is not always effective and that learning opportunities are limited as a result.

Condition two: Provide strategies to demonstrate that placement capacity is effectively monitored; including actions taken when students report placement capacity is exceeded. (SSSA R1.4 and R1.8; SPMP R3.1)

**Date:** 18 November 2020

**Post event review**

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

Condition two is met. The management of midwifery placement capacity has been clearly presented in the capacity management process for pre-registration midwifery. Capacity will be managed through enhanced partner engagement which includes the following strategies: work-based learning huddles, work-based learning forums and the 'transforming our practice partnerships' scheme. InPlace capacity management software will launch in March 2021 and facilitate effective management of placement capacity across PLPs and other AEIs in the region. Evidence is also provided which illustrates the purpose of the EELE project which has been continued to support effective practice learning.

Evidence:

Capacity management process midwifery, undated  
Evidence, EELE project to support learners and learning environments, undated  
North west education and transformation group, terms of reference (TOR) with agenda, undated

**Date condition(s):** 29 January 2021

**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 not met. PLPs confirm that there are agreed quality assurance arrangements in place and that they attend the local midwifery board with UCLan. Any issues raised in relation to practice learning for student midwives are identified early and brought to the board for resolution. UCLan and PLPs tell us that they share the north west education quality audit tool with other AEIs, and this facilitates the implementation of the SSSA and the provision of suitable learning environments. There is documentary evidence of AEI policy and procedures for managing student concerns and fitness to practice. PLPs confirm understanding and report that concerns are dealt with early in partnership with the AEI. Students confirm they are aware of the processes but also gave examples of concerns raised about the practice learning environment which had been responded to initially but subsequently not followed up. (Condition four)

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. There is documentary evidence of planning and resources to support the implementation of the SSSA and to enable achievement of the SPM. PLPs tell us they work in partnership with the AEI to provide practice learning and have jointly implemented the SSSA as part of the NMC emergency standards. PEFs practice supervisors and practice assessors report that the AEI provides support and development for practice staff in relation to the SSSA. However, students tell us that communication between university and practice assessors and practice supervisors has been poor and that they and the practice supervisors and assessors have concerns about the paperwork and how it should be completed. (Condition three)

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. Student achievement of proficiencies is recorded in the MORA. A context document is provided which describes the student journey through each programme and how progress is monitored. Documentary evidence indicates that practice is graded and integrated into module assessment strategy. The academic team tell us that they have experience of this approach and are confident that it can be applied at post graduate level. PLPs confirm that they have been involved in the planning of the MORA approach for the programmes.

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

**MET**  **NOT MET**

R4.4 is met. There is documentary evidence of a range of assessments and an explicit assessment and feedback strategy. The programme team tell us that project assignments have been planned to be flexible and enable student choice and development. The use of CBL creates a clear focus on individual development and provides regular and frequent opportunities for feedback. Students confirm staff provide constructive and effective support for learning and that they also have opportunities to provide peer feedback. The MORA will enable both the practice supervisor and practice assessor to provide ongoing formative and summative on practice learning and achievement in relation to the SPM. The role of the academic assessor is clear in programme documentation. Additional support is provided by an academic advisor who monitors progress and provides pastoral support throughout the programme.

**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**  **NO**

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**  **NO**

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

YES  NO

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

YES  NO

The response to student concerns in practice does not meet SFNME R2.5 and R3.12. (Condition four)

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

YES  NO

Preparation of practice assessors and practice supervisors does not meet SSSA R1.4, R5.1, R8.1 and SPMP R4.2. (Condition three)

### Outcome

Is the standard met?

MET  NOT MET

Documentary evidence for raising concerns within the AEI is not always supported by students who report examples which have been responded to initially but subsequently had not been followed up.

Condition four: Review the feedback loop for students who raise concerns in practice, ensuring there is sustained support for the student until resolution is achieved. (SFNME R2.5, R3.12; SPM R4.1)

Preparation of practice assessors and practice supervisors does not reflect the SSSA R1.4, R5.1, R8.1 and SPMP R4.2. Students tell us that communication between university and practice has not always been effective and that they and the practice supervisors and practice assessors have concerns about the paperwork and how it should be completed.

Condition three: Improve communications to PLPs (practice assessors and practice supervisors) with respect to SSSA implementation. (SSSA R1.4, R5.1, R8.1; SPMP R4.2)

Date: 18 November 2020

### Post event review

Identify how the condition(s) is met:

Condition four is met. The management of feedback for students who raise concerns in practice has been addressed in a narrative response by UCLan. The narrative makes links to both the university and NMC raising concerns processes and includes a clear flow chart which articulates the responsibility of the academic adviser to provide support to students. UCLan have confirmed they have met with students and PLPs to ensure a common understanding of the process.

Evidence:

Condition four evidence, undated

Condition three is met. UCLan provided further documentary evidence of the communication processes in place to support the implementation of SSSA. Notes from the task and finish group and student forum have been provided which illustrate that issues raised by students and practice assessors and practice supervisors are responded to. A summary of the processes in place is also provided including a flow chart to manage SSSA implementation. Students have been included in clinical link meetings to enable them to cascade information directly from this forum to their respective cohorts.

Evidence:

Your guide to NMC SSSA, undated

Evidence, task and finish meeting notes, 30 October 2020

BSc midwifery clinical links team meeting minutes, 2 December 2021

Student midwife forum minutes, 21 January 2021

**Date condition(s) met:** 29 January 2021

**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	
<b>Evidence provides assurance that the following requirements are met:</b>	
R5.1 ensure that the minimum award for a pre-registration midwifery programme is at bachelor's degree level	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<i>Please provide narrative if 'no'</i>	
R5.2 notify students during and before completion of the programme that they have <a href="#">five years</a> 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 <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<b>Fall Back Award</b>	
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"/>
The programme specification for each route confirms that the fall-back awards do not lead to 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"/>
Outcome	
<b>Is the standard met?</b>	<b>MET</b> <input checked="" type="checkbox"/> <b>NOT MET</b> <input type="checkbox"/>
<b>Date:</b> 18 November 2020	
Post event review	
<b>Identify how the condition(s) is met:</b>	
N/A	
<b>Date condition(s) met:</b>	
N/A	
<b>Revised outcome after condition(s) met:</b>	<b>MET</b> <input type="checkbox"/> <b>NOT MET</b> <input type="checkbox"/>
N/A	



**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 (NMC, 2018) (Gateway 1)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the <i>Standards for student supervision and assessment (NMC, 2018) apply to the programme(s) (Gateway 2)</i>	<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 (NMC, 2019) (Gateway 3)</i>	<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:		

List additional documentation:  
 Assessment strategy BSc (Hons) Midwifery three year and shortened route, MSc Midwifery shortened, undated  
 DigiReady.Preparing learners for the modern workplace, UCLan, undated  
 BSc (Hons) Midwifery shortlisting vetting criteria, undated  
 Numeracy supporting evidence, undated  
 Case based learning student handbook, UCLan, 2021  
 MORA context document UCLan, 2020  
 Midwifery Practice Assessment Collaboration Ongoing Record of Achievement Assessment strategy, 2020  
 Simulation within the midwifery program curricula at UCLan, undated

Post condition documentary evidence to meet conditions:  
 Response to conditions, 22 January 2021  
 Service user sustainability strategy, January 2021  
 Evidence volunteer with Comensus. August 2019  
 Evidence Comensus trifold flyer, undated  
 Your guide to NMC standards of student supervision and assessment, undated  
 Task and finish meeting notes, 30 October 2020  
 BSc midwifery clinical links team meeting minutes, 2 December 2021  
 Student midwife forum minutes, 2 January 2021  
 Transfer document CAD to MORA, undated  
 Capacity management process midwifery, undated  
 Evidence, EELE project to support learners and learning environments, undated  
 North west education and transformation group, TOR with agenda, undated  
 Condition four evidence, undated

Additional comments:  
 None identified.

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

	<b>YES</b>	<b>NO</b>
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 one midwifery students (long programme) x two		
Year two midwifery students (long programme) x two		
Year three students (long programme) x two		
Year two (shortened programme) x two		
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation An apprenticeship route is not presented.		
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"/>
CQC reports: Blackpool Teaching Hospitals NHS Foundation Trust, 2019 Lancashire Teaching Hospitals NHS Foundation Trust - Royal Preston, 2019		
If you stated no above, please provide the reason and mitigation: UCLan is an established AEI. No resource check required.		
Additional comments: None identified.		

**Mott MacDonald Group Disclaimer**

This document is issued for the party which commissioned it and for specific purposes connected with the captioned project only. It should not be relied upon by any other party or used for any other purpose.

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):	Suzanne Crozier Jonathan Fisher	Date:	27 November 2020
Checked by:	Pamela Page	Date:	2 February 2021
Approved by:	Lucy Percival	Date:	12 February 2021
Submitted by:	Leeann Greer	Date:	16 February 2021