



Programme approval report

Section one

| Programme provider name: | University of Greenwich | | |
|--|---|--|--|
| In partnership with: | Dartford and Gravesham NHS Trust | | |
| (Associated practice learning partners and/or employer partners involved in the delivery of the programme) | Guy's and St. Thomas' NHS Foundation Trust | | |
| delivery of the programme) | Lewisham and Greenwich NHS Trust | | |
| | Kent Community Health NHS Foundation Trust | | |
| | Kent and Medway NHS and Social Care Partnership Trust | | |
| | King's College Hospital NHS Foundation Trust | | |
| | Medway Community Healthcare | | |
| | Oxleas NHS Foundation Trust | | |
| | South London and Maudsley NHS Foundation Trust | | |
| | Maidstone and Tunbridge Wells NHS Trust | | |
| | Private, voluntary and independent health care providers | | |
| Programme reviewed: | Return to practice: | | |
| | Nursing: Adult Mental health Children's Learning disabilities Midwifery Nursing Associate | | |





| | SCPHN | |
|-----------------------------------|---|--|
| | Nursing/SCPHN | |
| | Midwifery/SCPHN | |
| Title of programme: | Return to Practice - Nursing and Midwifery | |
| | Return to Practice - Nursing Associate | |
| Academic levels: | | |
| | England, Wales, Northern Ireland Level 6 Level 7 | |
| RtP Nursing Adult | SCQF Level 9 Level 10 Level 11 | |
| | England, Wales, Northern Ireland Level 6 Level 7 | |
| RtP Nursing Mental Health | SCQF Level 9 Level 10 Level 11 | |
| | England, Wales, Northern Ireland Level 6 Level 7 | |
| RtP Nursing Children's | SCQF Level 9 Level 10 Level 11 | |
| | England, Wales, Northern Ireland Level 6 Level 7 | |
| RtP Nursing Learning Disabilities | SCQF Level 9 Level 10 Level 11 | |





| RtP Midwifery | England, Wales, Northern Ireland Level 6 Level 7 SCQF Level 9 Level 10 Level 11 | |
|--|---|--|
| RtP Nursing Associate | England only Level 5 Level 6 Level 7 | |
| RtP SCPHN | England, Wales, Northern Ireland Level 6 Level 7 SCQF Level 9 Level 10 Level 11 | |
| RtP Nursing/SCPHN | England, Wales, Northern Ireland Level 6 Level 7 SCQF Level 9 Level 10 Level 11 | |
| RtP Midwifery/SCPHN | England, Wales, Northern Ireland Level 6 Level 7 SCQF Level 9 Level 10 Level 11 | |
| Date of approval visit: | 31 March 2021 | |
| Programme start date: Return to practice: | | |
| Nursing: Adult Mental health Children's | 20 September 2021 20 September 2021 17 January 2022 | |





| Learning disabilities | 20 September 2021 |
|-----------------------|--|
| Midwifery | 17 January 2022 |
| Nursing Associate | 20 September 2021 |
| SCPHN | |
| Nursing/SCPHN | |
| Midwifery/SCPHN | |
| QA visitor(s): | Registrant Visitor: Tony Bottiglieri Registrant Visitor: Jan Bowyer |





Section two

Summary of review and findings

The University of Greenwich (UoG) school of health sciences (SHS) present for approval a part-time return to practice (RtP) programme with three routes; midwifery, nursing and nursing associate. UoG is an approved education institution (AEI) and established provider of pre-registration nursing in all four fields, midwifery and nursing associate programmes. The RtP programme is a 30credit module with academic level six learning outcomes for nurses and midwives and academic level five learning outcomes for nursing associates. The programme is delivered over a minimum of three months; it can extend to one year. The programme has one intake in January for the midwifery and child routes and two intakes in September and January for the adult, mental health, learning disabilities and nursing associate routes. The programme is mapped to the Standards for return to practice programmes (SRtPP) (Nursing and Midwifery Council (NMC), 2019), the Standards of proficiency for midwives (SPM) (NMC, 2019), the Standards of proficiency for nursing associates (SPNA) (NMC, 2018) and the Future nurse: Standards of proficiency for registered nurses (FN:SPRN) (NMC, 2018).

Programme documentation confirms that the content is delivered through a blended learning mode utilising face to face, virtual learning, simulation and practice placement-based learning. The programme is underpinned by a collaborative employment model, with students required to achieve a minimum of 150 practice hours and up to a maximum of 450 practice hours.

Theoretical content is delivered over two week-long teaching weeks of 10 study days, five in week one and five in week two. Study days incorporate an induction to the programme, generic and discipline specific content. The programme proposes the use of individual learning plans to identify how many hours are required to be completed in the practice learning environment and how this is to be distributed throughout the programme. Students tell us that they're supported in accessing and attending the timetabled study days.

Documentary evidence and discussions at the approval visit confirm there's effective partnership working with local stakeholders including practice learning partners (PLPs), service users (SUs) and students. There's evidence that the programme team have worked closely with PLPs and other AEIs in the production of the England RtP nursing practice assessment document (PAD) and the





England RtP nursing associate PAD. RtP midwifery students are assessed using the approved England and Northern Ireland midwifery ongoing record of achievement (MORA). The RtP nursing PAD, the RtP nursing associate PAD and the MORA provide students with the opportunity to receive feedback from SUs, practice assessors and practice supervisors.

UoG implemented the Standards for student supervision and assessment (SSSA) (NMC, 2018) across all NMC programmes in September 2019.

Documentary evidence and discussions with the programme and senior academic teams confirm that processes are in place to respond to concerns raised by systems regulators, including Care Quality Commission (CQC) reports, to ensure that student practice-based learning isn't compromised.

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

The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) and the SSSA are met at programme level.

The programme is recommended to the NMC for approval. Two university recommendations are made.

| Recomme | nded 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: None identified. Practice learning: None identified. Assessment, fitness for practice and award: None identified. Education governance: management and quality assurance: None identified. |
|--|---|
| Date condition(s) to be met: | N/A |
| Recommendations to enhance the programme delivery: | Recommendation one: That the programme team reviews its process of communication with students, for example staff responding to emails in adherence with the university's guidelines and to continue to respond to student needs in challenging and changing environments. (University recommendation) Recommendation two: That the programme team consider holding a mid-module evaluation to sense-check the delivery and overall student experience. An opportune time to do this would be during the block of teaching sessions. (University recommendation) |





| Focused areas for future monitoring: | None identified. |
|--------------------------------------|------------------|
|--------------------------------------|------------------|

| Programme is recomm | ended for approval subject to specific conditions being met |
|---|--|
| Commentary post review | of evidence against conditions: |
| N/A | |
| AEI Observations | Observations have been made by the education institution YES NO |
| Summary of observations made, if applicable | Confirmed that there's two intakes each year for adult, mental health, learning disabilities and nursing associate routes. |
| Final recommendation made to NMC: | Programme is recommended to the NMC for approval Recommended to refuse approval of the programme |
| Date condition(s) met: | N/A |

Section three

NMC Programme standards

Please refer to NMC standards reference points

Standards for return to practice programmes (NMC, 2019)

Return to practice standards (NMC, 2019)

Future nurse: Standards of proficiency for registered nurses (NMC, 2018)

Standards for competence for registered midwives (NMC, 2009)

The Future midwife: Standards of proficiency for registered midwives (NMC, 2010)

Standards of proficiency for nursing associates (NMC, 2018)

Standards of proficiency for specialist community public health nurses (NMC,

2004)





NMC Programme standards

Standards for specialist education and practice (NMC, 2001)

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

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)

Quality assurance framework for nursing, midwifery and nursing associate education (NMC, 2020)

QA Handbook (NMC, 2020)

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 coproduced 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 <u>Standards for student supervision and assessment</u>

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 nonregistered 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.

Programme documentation and discussion at the approval visit provides evidence of stakeholder engagement and collaborative partnership working with PLPs in the development of the RtP programme. UoG and PLPs describe examples of processes that provide assurance of shared governance arrangements. These include a practice learning panel, joint action planning in response to adverse CQC reports and collaborative exception reporting to the NMC as required. Practice placement agreements between UoG and associated PLPs are in place to support the programme intentions. Programme documentation, the programme team and PLPs confirm that there's been effective collaboration in developing practice assessor and practice supervisor roles, monitoring student placement capacity and in sustaining educational audits of practice learning environments.

Programme documentation and discussion at the approval visit confirms that there's stakeholder involvement in the co-production and design of the programme. Students describe examples of how their feedback has informed the programme development, including the practice and theory elements of the programme assessment. The SHS has a SU strategy and SU forum. The





development of the programme is informed by SU feedback during a stakeholder group meeting. At the approval visit, we met SU representatives who are involved in the recruitment and selection of students. They tell us that to prepare for recruitment they've undertaken equality and diversity training. SUs tell us that they feel they are a valued part of the programme team and describe examples of their involvement in teaching and simulation sessions. This includes opportunities to act as patients in simulation and attendance at lectures to provide students with insights on SU care concerns.

Programme documentation and discussion at the approval visit confirms that supporting PLPs are involved in the programme application and interview process. Students provide formal evaluation feedback at the end of the programme. Alumni and current students tell us that they are supported during the programme. Students tell us that they receive effective supervision and support in the practice learning environment. They confirm a supernumerary status when undertaking practice learning. Students tell us that that they are encouraged to proactively pursue inter-professional learning (IPL) opportunities. IPL is supported through a hub and spoke practice learning approach.

| bub and anaka practice learning (IPL) opportunities. IPL is supported through a |
|---|
| hub and spoke practice learning approach. 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: <u>Standards framework for nursing and midwifery education</u> |
| 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: <u>Standards for student supervision and assessment</u> |
| 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: MET NOT MET |
| N/A |





Student journey through the programme

Standard 1: Selection, admission and progression

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

- R1.1 confirm on entry to the programme that students are, or were, registered with the NMC
- R1.2 confirm on entry to the programme that students:
- R1.2.1 demonstrate values in accordance with *the Code*
- R1.2.2 have capability to behave in accordance with the Code
- R1.2.3 have capability to update numeracy skills required to meet programme outcomes
- R1.2.4 can demonstrate they meet NMC English language requirements
- R1.2.5 have capability in literacy to meet programme outcomes
- R1.2.6 have capability for digital and technological literacy to meet programme outcomes
- R1.3 ensure students' health and character is sufficient to enable safe and effective practice on entering the programme, throughout the programme and when submitting the supporting declaration of health and character in line with the NMC's health and character guidance. This includes facilitating satisfactory and timely occupational health assessment and criminal record checks.
- R1.4 ensure students are fully informed of the requirement to declare immediately any police charges, cautions, convictions or conditional discharges or determinations that their fitness to practise is impaired made by other regulators, professional bodies and educational establishments, and that any declarations are dealt with promptly, fairly and lawfully
- R1.5 ensure the person responsible for directing the educational programme or their designated substitute is able to provide supporting declarations of health and character for students who have completed a return to practice programme
- R1.6 consider students' prior learning and experience in relation to the standards of proficiency, programme outcomes, and the students intended scope of practice upon readmission, and
- R1.7 support students throughout the programme in updating their abilities in numeracy, literacy, digital and technological literacy to meet programme outcomes.

Note: Education institutions and their practice learning partners may propose to transfer current students onto the new programme to meet the Standards for return to practice programmes. If so, evidence must be provided to support this





| proposed transfer as part of the education institution's mapping Gateway 3. | process at | |
|--|--------------------------|----------|
| Proposed transfer of current students to the programme un Demonstrate a robust process to transfer current students onto the programme to ensure programme learning outcomes and proficions Standards for return to practice programmes (NMC, 2019). | the propose | ed |
| Proposed transfer of current students to the <u>Standards for students and assessment</u> (NMC, 2018). Demonstrate a robust process to transfer current students onto testudent supervision and assessment (NMC, 2018). | | |
| Findings against the standard and requireme | nts | |
| Evidence provides assurance that the following requiremen | ts are met | : |
| R1.1 confirm on entry to the programme that students are, or we the NMC | ere, registe | red with |
| | YES 🖂 | NO 🗌 |
| R1.2 confirm on entry to the programme that students: | | |
| R1.2.1 demonstrate values in accordance with <u>the Code</u> | YES 🖂 | NO 🗌 |
| R1.2.2 have capability to behave in accordance with the Code | YES 🖂 | NO 🗌 |
| R1.2.3 have capability to update numeracy skills required to medoutcomes | | |
| | YES 🖂 | NO |
| R1.2.4 can demonstrate they meet NMC <u>English language requ</u> | <u>irements</u> YES ⊠ | NO 🗌 |
| R1.2.5 have capability in literacy to meet programme outcomes | YES 🖂 | NO 🗌 |
| R1.2.6 have capability for digital and technological literacy to me | et program | ime |





| outcomes YES NO |
|--|
| R1.3 ensure students' health and character is sufficient to enable safe and effective practice on entering the programme, throughout the programme and when submitting the supporting declaration of health and character in line with the NMC's health and character guidance . This includes facilitating satisfactory and timely occupational health assessment and criminal record checks. YES NO |
| R1.4 ensure students are fully informed of the requirement to declare immediately any police charges, cautions, convictions or conditional discharges or determinations that their fitness to practise is impaired made by other regulators, professional bodies and educational establishments, and that any declarations are dealt with promptly, fairly and lawfully YES NO |
| R1.5 ensure the person responsible for directing the educational programme or their designated substitute is able to provide supporting declarations of health and character for students who have completed a return to practice programme YES NO |
| Provide an <u>evaluative summary</u> 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 consider students' prior learning and experience in relation to the standards of proficiency, programme outcomes, and the students intended scope of practice upon readmission, and |
| MET ⊠ NOT MET □ |
| R1.6 is met. Student prior learning and experience is reflected in the development of an individualised learning plan. The practice learning hours that students are required to complete are determined on an individual and specific needs basis. Students undertake a minimum of 150 practice hours; they can undertake up to a maximum of 450 hours. The number of practice hours are further determined by UoG and PLPs using a sliding scale-based approach that considers the length of time since an NMC registration has lapsed. The programme team tell us that students undertake 10 theory days; these are in general non-negotiable. Students do have some flexibility in determining access to additional discipline specific teaching sessions dependant on individual learning need. |





| R1.7 | support students throughout the programme in updating their abilities in |
|------|--|
| nu | meracy, literacy, digital and technological literacy to meet programme |
| ou | tcomes. |

MET ⊠ NOT MET □

R1.7 is met. Documentary evidence and the approval visit confirms that support strategies are available for students to develop their abilities in literacy, numeracy, digital and technological literacy. In the first theory week, timetabled sessions introduce students to the virtual learning environment (VLE) Moodle, Microsoft Teams and to the library. Online learning activities include Studiosity, an online service to support the development of academic writing skills. Clinicalskills.net and programme workbooks support clinical skills teaching. All programme routes ensure that students access resources to develop the numeracy skills required for safe medicines management and drug calculations. Students use safeMedicate and can access additional maths support through the UoG maths and statistics help support service.

The introduction of a learning analytics system indicates the digital footprint of students as they interact with a wide range of UoG systems, including learning management, student and library systems. Using a traffic light rating approach, the use of learning analytics enables UoG staff to identify individual student need and to ascertain areas that may require further support. Students tell us that they receive appropriate support to develop their abilities in numeracy, literacy, digital and technological literacy to meet the programme outcomes.

Proposed transfer of current students to the programme under review

From your documentary analysis and your meeting with students, provide an <u>evaluative summary</u> to confirm how the <u>Standards for return to practice programmes</u> will be met through the transfer of existing students onto the proposed programme.

The programme team confirm that current students won't transfer to the proposed programme. Students tell us that they are satisfied with the current programme and confirm that they are aware that they won't be transferring to the proposed programme.

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



proficiency

intended area of practice

Better, safer care through quality assurance of nursing, midwifery and nursing associate education.



| 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. |
|--|
| All UoG NMC programmes have transferred to the SSSA. |
| Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to selection, admission and progression are met YES NO |
| Outcome |
| Is the standard met? MET NOT MET |
| Date: 31 March 2021 |
| Post event review |
| Identify how the condition(s) is met |
| N/A |
| Date condition(s) met: |
| N/A |
| Revised outcome after condition(s) met: MET NOT MET |
| N/A |
| |
| Standard 2: Curriculum |
| Approved educations institutions, together with practice learning partners, must: |
| R2.1 ensure programmes comply with the NMC <u>Standards framework for</u> |

R2.2 comply with the NMC *Standards for student supervision and assessment* R2.3 ensure that programme learning outcomes reflect relevant standards of

R2.4 design and deliver a programme that supports students to return to their





- R2.5 ensure that programmes delivered in Wales comply with legislation which supports use of the Welsh language
- R2.6 state routes within the return to practice programme that allows:
- R2.6.1 nurses to be readmitted to, or remain on, the register in one or more of the specific fields of nursing practice: adult, children, learning disabilities and mental health nursing
- R2.6.2 midwives to be readmitted to, or remain on, the register as midwives
- R2.6.3 specialist community and public health nurses (SCPHNs) to be readmitted to, or remain on, the register as specialist community and public health nurses
- R2.6.4 nursing associates to be readmitted to, or remain on, the register as nursing associates
- R2.7 set out the content necessary to meet the programme outcomes for each field of nursing practice: adult, children, learning disabilities and mental health nursing
- R2.8 set out the general and professional content necessary to confirm the relevant standards of proficiency and programme outcomes for each part of the register
- R2.9 ensure that specific content such as: safeguarding, consent, pharmacology and medicines administration and optimisation is included for the student to be readmitted to, or remain on, the register
- R2.10 ensure the curriculum uses a range of learning and teaching strategies which may include flexible or distance learning, which must be used effectively and proportionately to support learning and assessment, and
- R2.11 ensure that all return to practice programmes are an appropriate length to support programme outcomes.

| Findings against the standard and requirements |
|---|
| Evidence provides assurance that the following requirements are met: |
| R2.1 ensure programmes comply with the NMC <u>Standards framework for</u> nursing and midwifery education |
| YES ⊠ NO □ |
| R2.2 comply with the NMC <u>Standards for student supervision and assessment</u> YES NO |
| R2.3 ensure that programme learning outcomes reflect relevant standards of proficiency |





| Nursing/ fields of nursing practice: adult, children, learning | ng disabili | ties and | mental |
|--|--|--|--------------------------|
| health nursing | YES 🖂 | NO 🗌 | N/A |
| Midwives to be readmitted to, or remain on, the register | as midwiv YES ⊠ | | N/A 🗌 |
| Specialist community and public health nurses (SCPHN | ls) YES 🗌 | NO 🗌 | N/A ⊠ |
| A SCPHN RtP route isn't proposed for approval. | | | |
| Nursing associates | YES 🖂 | NO 🗌 | N/A 🗌 |
| Provide an <u>evaluative summary</u> 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 design and deliver a programme that supports students to return to their | | | |
| intended area of practice | MET 🛭 | ◯ NOT | МЕТ 🗌 |
| R2.4 is met. The programme design and delivery supposite intended area of practice. The programme specification scheduled teaching hours delivered over 10 days. There week one and in week five. Timetables confirm that the relevant discipline and field specific content sessions. Suppogramme timetables are structured and that the context Programme documentation states that students will und hours with up to a maximum of 450 hours in their intendent environments. Students who require additional time to a outcomes can normally be granted a further 150 hours. practice assessors, practice supervisors and academic requirements of the SSSA. | identifies e are two fre's share Students te ent is conto dertake a r ded practic achieve the Students | a total of theory blood IPL and Ill us that emporary minimum the learning e prograr are alloca | the of 150 g mme ated to |
| Students tell us that practice assessors and practice su support them to achieve the programme practice profic process of allocation, induction and orientation to practi | iencies. Th | ney descr | |





meetings are helpful in identifying any proficiencies that may require additional learning opportunities, including exposure to practice learning in other clinical service areas.

The programme team and documentary evidence confirm that the programme accommodates students utilising an employment and non-employment model when recruiting to the programme. Practice assessors and practice supervisors confirm that they are registered nurses from the same field of practice as students' intended area of practice. The RtP nursing associate PAD confirms that nursing associate students will be assigned to a practice assessor who is either a registered nurse or registered nursing associate and who has appropriate experience to support students in their intended area of practice. Nursing associate academic assessors are identified as registered nurses or registered nursing associates. Nursing students are allocated to academic assessors with appropriate equivalent experience in the same intended field of practice as students.

Returning midwifery students undertake an additional five days taught content to support the full systematic examination of the newborn. The programme team confirm that individual learning plans and student facing programme documentation detail these additional learning requirements. The lead midwife for education (LME) tells us that this additional content can be studied alongside preregistration student midwives. Midwifery practice learning is undertaken in three main areas of maternity services, community, hospital ante/postnatal ward and labour ward or birth centre. Programme documentation confirms that practice assessors and academic assessors are registered midwives.

| 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 \(\tag{NO} \) N/A \(\times \) |
| The programme is delivered in England. |
| R2.6 state routes within the return to practice programme that allows: |
| R2.6.1 nurses to be readmitted to, or remain on, the register in one or more of the specific fields of nursing practice: adult, children, learning disabilities and mental health nursing |
| YES NO N/A |
| R2.6.2 midwives to be readmitted to, or remain on, the register as midwives |





| | YES 🔀 | NO N/A |
|---|---|---|
| R2.6.3 specialist community and public health to, or remain on, the register as special nurses | , | , |
| | YES [| NO □ N/A ⊠ |
| A SCPHN RtP route isn't proposed for approv | val. | |
| R2.6.4 nursing associates to be readmitted to | o, or remain on, the | e register as |
| nursing associates | YES 🖂 | NO NA |
| Provide an <u>evaluative summary</u> from your evidence AND discussion at the approval is provided that the requirement below is i | visit to demonstr | |
| R2.7 set out the content necessary to meet field of nursing practice: adult, children, leanursing | arning disabilities a | |
| R2.7 is met. Documentary evidence and the a programme content meets the programme out the content necessary to meet generic and fie Students and the programme team tell us that specific academic personal tutors who also as Programme documentation confirms that the the FN:SPRN. | approval visit confi itcomes. Timetable eld specific prograi it students are allo ct as academic as | rms that the es provide detail on mme outcomes. cated to field sessors. |
| R2.8 set out the general and professional correlevant standards of proficiency and progregister | _ | |
| Nursing/ fields of nursing practice: adult, chealth nursing | nildren, learning dis MET ⊠ NO⊓ | |
| R2.8 is met (Nursing). Programme documents confirms that the programme is designed to recontent necessary for nurses to return to, or reproficiencies for nursing are identified within puthe FN:SPRN and identified in the RtP nursing | eflect the general are remain on, the region orogramme conten | and professional ster. Field specific It and mapped to |





assessors, practice assessors and practice supervisors use the RtP nursing PAD to confirm achievement of the FN:SPRN. The RtP nursing PAD provides the scope to record feedback and identify development opportunities. Students utilise a learning plan which outlines the standards of proficiency for each part of the register and to plan how these can be achieved. Students tell us that they have the opportunity to learn and develop the skills and proficiencies in annexes a and b of the FN:SPRN.

| the FN:SPRN. |
|---|
| Midwives to be readmitted to, or remain on, the register as midwives MET ☑ NOT MET ☑ N/A ☑ |
| R2.8 is met (Midwifery). The programme is designed around the general and professional content necessary for midwives to return to the register. The programme specification and midwifery timetable confirm details about programme content and assures its delivery. In addition to the timetabled sessions, the LME confirms that the programme content includes the theory and evidence base for full systematic examination of the newborn. Students confirm that they're allocated a midwifery personal tutor, who also acts as the academic assessor. |
| Students, academic assessors, practice assessors and practice supervisors use the MORA to record feedback and the development towards achievement of the proficiencies that are attained in practice. The MORA is mapped to the SPM and the United Nations Children's Fund United Kingdom Baby Friendly Initiative university standards. |
| Specialist community and public health nurses (SCPHNs) MET NOT MET N/A |
| A RtP route for SCPHN is not offered on this programme. |
| Nursing associates MET NOT MET N/A |
| R2.8 is met (Nursing associates). Programme documentary evidence and the approval visit confirms that the programme is designed to reflect the general and professional content necessary for nursing associates to return to, or remain on, the nursing associate register. Field specific proficiencies for nursing associate students are identified in the programme content and the RtP nursing associate PAD are mapped to the SPNA. Students, academic assessors, practice assessors and practice supervisors use the RtP nursing associate PAD to confirm the |

feedback and identifies development opportunities for students. Students utilise a





learning plan which outlines the standards of proficiency for each part of the register and to plan how these can be achieved.

R2.9 ensure that specific content such as: safeguarding, consent, pharmacology and medicines administration and optimisation is included for the student to be readmitted to, or remain on, the register

R2.9 is met (Nursing). Programme documentation and the approval visit identifies where specific content such as safeguarding, consent, pharmacology and medicines administration and optimisation are addressed in the programme for students to be readmitted to, or remain on, the register. The RtP nursing PAD ensures that students are able to demonstrate and record the achievement of practice proficiencies. Programme documentation, including the timetable, identifies where specific taught theory and its application to practice is undertaken. PLPs and students provide assurance that the programme appropriately prepares RtP nursing students to be readmitted to, or remain on, the register as a nurse.

R2.9 is met (Nursing associates). Programme documentation and the approval visit identifies where specific content such as safeguarding, consent, pharmacology and medicines administration and optimisation are addressed in the programme for students to be readmitted to, or remain on, the register. The RtP nursing associate PAD ensures that students are able to demonstrate and record the achievement of practice proficiencies for nursing associate practice. Programme documents and the timetable identifies where specific taught theory and practice application is undertaken to update RtP nursing associate students.

PLPs and students provide assurance that the RtP programme appropriately prepares RtP nursing associate students to be readmitted to, or remain on, the register as a nursing associate.

R2.9 is met (Midwifery). The midwifery timetable demonstrates how specific content such as safeguarding, consent, pharmacology and medicines administration are addressed in a midwifery context. Students and PLPs confirm that the programme appropriately prepares students to be readmitted to, or remain on, the register as a midwife.

R2.10 ensure the curriculum uses a range of learning and teaching strategies which may include flexible or distance learning, which must be used effectively and proportionately to support learning and assessment, and





| | MET 🖂 | NOT MET |
|--|---|--|
| R2.10 is met. Learning is flexible, both face to face and online of teaching and learning strategies. These include whole grapecific seminars, group activities, case studies, problem-band online learning activities accessed on the VLE Moodle. appropriate scheduled teaching and self-directed learning. programme is delivered through a blended learning approachement to support learning and assessment in practice tell us that students are provided with sufficient time to attended to the commitments. | oup lectu ased lear Students Students ch. PLPs e. Studen | rres, discipline rning, role play s have tell us that the confirm a ats and PLPs |
| R2.11 ensure that all return to practice programmes are an support programme outcomes. | appropri | ate length to |
| r | MET 🖂 | NOT MET |
| R2.11 is met. Students can take up to one year to complete Programme documentation and discussion at the approval practice hours for all routes range from 150 hours to 450 hours achieved competence after 450 hours, they will normally be 150 hours to support achievement of competence. If studencompetent, they will be advised to apply for the three-year por midwifery programme, or the two-year pre-registration nu programme. | visit confi ours. If sto awarded ots aren't ore-regist | irms that udents haven't d an additional deemed tration nursing |
| Practice learning hours are determined in collaboration with for RtP students, who may have other work commitments. tell us that students are advised to undertake a minimum of episodes each week; most PLPs stipulate a minimum of 16 interview. | The progr two prac | ramme team ctice learning |
| Assurance is provided that Gateway 1: <u>Standards framewo</u> <u>midwifery education</u> relevant to curricula and assessment a | | rsing and |
| Assurance is provided that Gateway 2: <u>Standards for stude</u> <u>assessment</u> relevant to assessment are met | nt superv | vision and ☑ NO □ |
| Outcome | | |
| Is the standard met? | MET 🖂 | NOT MET |





| Date: 31 March 2021 | |
|---|-------------|
| 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

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

R3.1 provide practice learning opportunities that confirm students can deliver safe and effective care in their intended area of practice to a diverse range of people R3.2 provide practice learning opportunities that confirm students meet the communication and relationship management skills and procedures in their intended area of practice, as set out in the relevant standards of proficiency R3.3 ensure that students experience a range of settings for their intended area of practice, demonstrating an ability to meet the holistic needs of people R3.4 ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment R3.5 take account of students' individual needs, personal circumstances and intended area of practice when allocating their practice learning including making reasonable adjustments for students with disabilities, and R3.6 ensure that 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 confirm students can deliver safe and effective care in their intended area of practice to a diverse range of people MET NOT MET |
| R3.1 is met. The UoG and PLP governance framework confirms that practice learning environment educational audits are jointly undertaken by the UoG and PLPs every two years. Further audits will be undertaken if there's any concerns identified through placement evaluation. There are processes in place that support students to raise and escalate concerns in practice and at the UoG. Students are allocated to educationally audited practice learning environments. PLPs and students confirm that practice learning environments enable students to deliver safe and effective care in their intended area of practice to a diverse range of people. |
| The programme team and PLPs tell us that placement allocations are coordinated by PLPs to ensure sufficient capacity is maintained for all programme routes. PLPs tell us that allocation is undertaken in partnership between UoG and PLPs and reflects employer workforce requirements. Documentary evidence and discussion with the programme team and students confirm that the application of individual learning plans help to guide student learning need. Practice proficiencies are identified within the respective RtP nursing and RtP nursing associate PADs. Midwifery students undertake practice learning in three areas of maternity services, community, hospital antenatal, postnatal wards and labour wards or birth centres. Individual placement plans are agreed with students and documented in the learning plan. The range of practice experience is evidenced through the proficiencies in the MORA. |
| R3.2 provide practice learning opportunities that confirm students meet the communication and relationship management skills and procedures in their intended area of practice, as set out in the relevant standards of proficiency MET NOT MET |
| R3.2 is met. Communication and relationship management skills are mapped and recorded in the MORA and the RtP nursing and RtP nursing associate PADs. Academic assessors, practice assessors and practice supervisors work with |

students to plan how their practice learning experience will meet the communication and relationship management skills, procedures and proficiencies in the respective PADs and the MORA.





| R3.3 ensure that students experience a range of settings for their intended area of practice, demonstrating an ability to meet the holistic needs of people |
|--|
| MET ⊠ NOT MET □ |
| R3.3 is met. Programme documentation and the approval visit demonstrate how practice assessors and practice supervisors support nursing and nursing associate students to develop the abilities to meet the holistic needs of people. Students and PLPs tell us that nursing and nursing associate students have access to a wide range of practice learning experiences in their intended area of practice to facilitate appropriate learning. Programme documentation and the approval visit confirm that practice placements are planned with PLPs and that nursing and nursing associate students utilise individual learning plans to support learning experiences. |
| Students returning to midwifery gain experience in both hospital and community settings, demonstrating an ability to meet the holistic needs of women and their families. Students tell us that they experience an appropriate range of maternity care settings. Senior PLP managers tell us that consideration is given to the number of pre-registration midwifery students when providing practice learning environments for RtP midwifery students to ensure adequate resources are available. |
| R3.4 ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment ${\rm MET} \boxtimes {\rm NOT} \; {\rm MET} \; \Box$ |
| R3.4 is met. The programme uses a variety of teaching and learning methods including simulation-based and technology enhanced learning. Students tell us that they have access to a range of digital environments and resources that have been developed to support a high-quality student experience. Examples include the academic support hub, Studiosity, iProgress and safeMedicate. The capabilities associated with digital and technological literacy are embedded within the RtP programme, through the use of the VLE Moodle. |
| Students have access to a new simulation suite on the UoG Avery Hill campus. Programme documentation and the programme team confirm that a planned approach supports all RtP students to have the opportunity to gain experience of simulation on at least one of the timetabled study days. In addition, PLPs tell us that RtP students have the opportunity to join other programme and/or field specific sessions in practice learning environments. |





| R3.5 take account of students' individual needs, personal circumstance intended area of practice when allocating their practice learning include | |
|--|---|
| reasonable adjustments for students with disabilities, and | 0 0 |
| | NOT MET |
| R3.5 is met. UoG offers a wide range of support for students with a valindividual needs and disabilities. Students can access disability advise dyslexia support tutors in the student wellbeing centre. All RtP student discipline specific personal tutors. | ers and |
| The practice experience required by individual students is determined experience, length of time since they lapsed from the NMC register an placement area that they are returning to. Individual learning plans are between the student, UoG and PLPs. The learning plans take into accreasonable adjustments. One student gave an example of how the shi and duration had been changed to accommodate their individual health | d the agreed ount any ft pattern |
| Students tell us that they are aware of how to access the UoG's disabilistics and of the opportunity to self-disclose a disability during the reand selection process. Students tell us that guidance is provided in students reasonable adjustments are required to the programme documentation and reaffirmed during induction to the programme that UoG advise them if reasonable adjustments are required to the programme documentation and reaffirmed during induction to the programme documentation and reasonable adjustments are required to the programme documentation and reaffirmed during induction to the programmed during induction during the programmed during induction during the programmed during the programmed during induction during the programmed during the pr | ecruitment udent facing gramme. |
| Evidence provides assurance that the following requirements are | met: |
| R3.6 ensure that students are supernumerary. YES | ⊠ NO □ |
| Assurance is provided that Gateway 1: <u>Standards framework for nursing midwifery education</u> relevant to practice learning are met YES | <u></u> |
| Assurance is provided that Gateway 2: <u>Standards for student superviseassessment</u> relevant to practice learning are met YES | sion and |
| Outcome | |
| Is the standard met? MET N | NOT MET |
| Date: 31 March 2021 | |
| 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 4: Supervision and assessment

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

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

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

R4.3 ensure they inform the NMC of the name of the person responsible for directing the education programme

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

R4.5 ensure throughout the programme that students meet the required standard of proficiency and programme outcomes to be readmitted to, or remain on, the

R4.6 ensure that students meet communication and relationship management skills and procedures

R4.7 assess students to confirm proficiency in preparation for being readmitted to, or remaining on, the register

R4.8 ensure that relevant proficiencies are recorded in a record of achievement which confirms these proficiencies and skills have been met, and

R4.9 confirm students' safe and effective practice and suitability to be readmitted to, or remain on, the register.

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 and assessment provided complies with the NMC <u>Standards framework for nursing and midwifery education</u> MET NOT MET |
|---|
| R4.1 is met. Documentary analysis and the approval visit confirms that UoG induction, education, ongoing development and support for academic staff ensures compliance with the SFNME. Staff curricula vitae confirm that UoG has sufficient suitably qualified and experienced midwifery and nursing lecturers to deliver the programme and provide academic support and feedback. Students returning to nursing, midwifery and nursing associate practice have personal tutors, who act as academic assessors. |
| The SHS senior management team, PLPs and practice assessors provide assurance that there are effective partnerships, policies and procedures in place to ensure the requirements of the SFNME and the SSSA are met and support the management of students in practice learning environments. Senior PLP managers confirm that there are adequate staff resources to support supervision, learning and assessment in practice learning environments. Students tell us that they are supervised in practice learning environments and that learning and assessment are supported. |
| Programme documentation confirms the application of a robust process in appointment of field specific external examiners who are NMC registrants. |
| R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC Standards for student supervision and assessment MET NOT MET |
| R4.2 is met. Documentation and discussion at the approval visit confirms evidence of compliance with the SSSA. The SSSA was implemented by UoG and PLPs in September 2019. All nursing, nursing associate and midwifery students are allocated to field and profession specific practice assessors and practice supervisors. Field and profession specific academic assessors are assigned to students for the duration of the programme. |
| The programme team and programme documentation confirm the adoption of the national RtP PADs for nursing and nursing associate students and the RtP MORA for midwifery students. Students and PLPs tell us that practice assessors and |

practice supervisors meet with students regularly to monitor, review and confirm student progress. This is undertaken at initial, mid-point and final summative assessment meetings. The programme team and PLPs tell us that practice

proficiencies are confirmed by practice assessors and moderated and agreed by





academic assessors. Progression and achievement of the FN:SPRN, the SPNA, the SPM and the SRtPP are recorded in the RtP nursing and RtP nursing associate PADs and the midwifery RtP MORA.

Communication between practice assessors and students at the initial and midpoint review meetings and the final holistic summative assessment is recorded in the respective PADs and the MORA. Meetings held with practice assessors. practice supervisors, academic assessors and academic link staff are recorded in the respective PADs and the MORA.

PLPs confirm that there's a preparation programme for practice assessors and practice supervisors that includes specific RtP preparation. Practice assessors tell us that they have appropriate preparation and have an understanding of their roles. Academic assessors tell us they undertake a preparation programme provided by SHS to ensure they are suitably prepared for the role.

Students confirm that they are well supported by practice assessors and practice supervisors in practice learning environments. There's a nominated person in each practice learning environment to provide support for students if they have any

concerns. **Evidence provides assurance that the following requirement is met:** R4.3 ensure they inform the NMC of the name of the person responsible for directing the education programme 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 R4.4 provide students with feedback throughout the programme to support their development MET |NOT MET

R4.4 is met. The UoG assessment and feedback policy define the fundamental principles and requirements for assessments. The feedback policy indicates that feedback can take a variety of forms and that it should be constructive and help students to improve future work. Feedback is provided for both the theoretical and practice components of the programme. Students are required to submit a formative reflection by week five of the programme and they receive discipline specific feedback. Programme documentation and the approval visit demonstrates how practice assessors and practice supervisors support students to develop the





ability to meet the holistic needs of people. Students and PLPs tell us that students have access to a wide range of practice learning environments that facilitate learning within their intended area of practice. Programme documentation and the approval visit confirm that practice learning placements are planned with PLPs and that students utilise their individual learning plan.

Programme documentation and discussion at the approval visit confirms that the use of timely and constructive feedback is provided in formative formats from a variety people to support student development. Students tell us that feedback provided by academic field specific tutors, practice assessors and practice supervisors is constructive and responsive. The RtP nursing and RtP nursing associate PADs and the MORA facilitate continuous feedback from practice assessors and practice supervisors regarding student clinical progress and competence. This is supplemented by SU feedback recorded in the respective PADs and MORA. There's an initial meeting with practice assessors and at least two progress reviews before the summative holistic assessment in practice. Practice assessors confirm that academic assessors and link lecturers are accessible should there be any concerns regarding student progression. They tell us that the guidance on raising concerns is detailed in the RtP nursing and RtP nursing associate PADs and the MORA.

R4.5 ensure throughout the programme that students meet the required standard of proficiency and programme outcomes to be readmitted to, or remain on, the register

R4.5 is met. There's appropriate mapping of the curriculum and practice assessment documentation to ensure throughout the programme students meet the FN:SPRN, the SPNA, the SPM and the programme outcomes.

Programme documentation confirms that programme outcomes are assessed through formative and summative assessments in theory and in practice learning environments. Students are required to pass both summative components of the programme, a portfolio of evidence that includes five reflections and the assessment of practice. The programme team and PLPs confirm that student progress and the completion of the required practice hours are monitored and recorded. Student practice learning is facilitated by practice assessors and practice supervisors who record student progress towards achievement of the SPM in the MORA. Achievement of the FN:SPRN and the SPNA is recorded in the respective RtP nursing and RtP nursing associate PADs. The programme team tell us that this is reviewed and confirmed by academic assessors. Students and PLPs confirm that they are confident that the programme effectively prepares students for readmission to, or remaining on, the NMC register.





| The programme team and programme documentation confirm the process for reassessment in the event of a student not achieving the requirements of the programme. | | | |
|---|--|--|--|
| R4.6 ensure that students meet communication and relationship management skills and procedures | | | |
| MET NOT MET | | | |
| R4.6 is met. The programme learning outcomes and assessment strategy evidences the development of communication and relationship management skills throughout the programme. Timetables and online activities provide evidence of theoretical learning to support the development of communication and relationship management skills and procedures in practice learning environments. Midwifery, nursing and nursing associate RtP students must demonstrate communication and relationship management skills and procedures. These skills are explicitly assessed in practice and evidenced in the respective RtP PADs and the MORA. | | | |
| R4.7 assess students to confirm proficiency in preparation for being readmitted to, or remaining on, the register MET NOT MET | | | |
| R4.7 is met. Academic assessors meet with students and practice assessors at a final meeting to confirm achievement of the proficiencies in practice. Programme documentation and discussion at the approval visit confirm that all midwifery, nursing and nursing associate proficiencies must be achieved to enable students to be readmitted to, or to remain on, the register. | | | |
| PLPs and students tell us that the programme prepares them with the necessary skills and knowledge for readmission to, or in remaining on, the register. | | | |
| Evidence provides assurance that the following requirement is met: | | | |
| R4.8 ensure that relevant proficiencies are recorded in a record of achievement which confirms these proficiencies and skills have been met, and YES NO | | | |
| Provide an <u>evaluative summary</u> 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 | | | |
| R4.9 confirm students' safe and effective practice and suitability to be readmitted to, or remain on, the register. | | | |
| MET $oxed{\boxtimes}$ NOT MET $oxed{\square}$ | | | |





R4.9 is met. Documentary evidence and the approval visit provide assurance that, upon successful completion of the programme, students have the ability to deliver safe and effective care suitable for readmission to, or remaining on, the register.

UoG has an established fitness to practise policy for managing student fitness to practise concerns. Students complete a good health and good character declaration on completion of the programme. This informs the programme lead and the LME decision to sign the supporting declarations for completing students.

Programme documentary evidence and discussion at the approval visit confirms that students require a disclosure and barring service check and occupational health clearance as part of admission to the programme. The programme team and PLPs confirm that practice learning environments must have a suitable educational audit in place to ensure the suitability of practice learning. Practice learning environments ensure that students have the opportunity to achieve the relevant Standards of proficiency.

| reference et an action et al. premeiere, t | |
|---|---|
| Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to supervision and assessment are met | |
| YES NO | |
| Assurance is provided that Gateway 2: <u>Standards for student supervision and assessment</u> relevant to supervision and assessment are met | |
| YES NO |] |
| Outcome | |
| Is the standard met? MET NOT MET |] |
| Date: 31 March 2021 | |
| Post event review | |
| Identify how the condition(s) is met: | |
| N/A | |
| Date condition(s) met: | |
| N/A | |
| Revised outcome after condition(s) met: MET NOT MET | J |
| N/A | |





| Standard 5: Qualification or credits to be awarded and info registration | | | |
|--|---------------------|--|--|
| Approved education institutions, together with practice leamust: | rning partners, | | |
| R5.1 ensure that the minimum credits/award for a return to practice programme for nurses and midwives is at bachelor's degree level R5.2 ensure that the minimum credits/award for a return to practice programme for nursing associates is at foundation degree level, and R5.3 notify students during and before completion of the programme how they apply to re-join the NMC register. | | | |
| Findings against the standards and requirem | ents | | |
| Evidence provides assurance that the following requireme | nts are met: | | |
| R5.1 ensure that the minimum credits/award for a return to practice programurses and midwives is at bachelor's degree level | | | |
| | NO N/A | | |
| R5.2 ensure that the minimum credits/award for a return to prac nursing associates is at foundation degree level, and | tice programme for | | |
| | ◯ NO □ N/A □ | | |
| R5.3 notify students during and before completion of the programme how they apply to re-join the NMC register. | | | |
| | YES ⊠ NO □ | | |
| Assurance is provided that the Standards framework for nursing | g and midwifery | | |
| <u>education</u> relevant to the qualification to be awarded are met | YES 🛛 NO 🗌 | | |
| Outcome | | | |
| Is the standard met? | NOT MET | | |
| Date: 31 March 2021 | | | |





| Post event review | |
|---|-------------|
| Identify how the condition(s) is met: | |
| N/A | |
| Date condition(s) met: | |
| N/A | |
| Revised outcome after condition(s) met: | MET NOT MET |
| N/A | |





Section four

Sources of evidence

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

| Key documentation | YES | NO |
|--|-------------|-------------|
| Programme document, including proposal, rationale and consultation | | |
| Programme specification(s) | \boxtimes | |
| Module descriptors | | |
| Please specify route: | \boxtimes | |
| Nursing / field of nursing | | |
| Midwifery | | |
| SCPHN | | |
| Nursing associate | | |
| Student facing documentation including programme | | |
| handbook | | |
| Please specify route: Nursing / field of nursing | \bowtie | |
| Nursing / neid or nursing | | |
| Midwifery | \boxtimes | |
| SCPHN | | \boxtimes |
| Nursing associate | | |
| Practice assessment documentation (PAD) | | |
| Please indicate which Standards of | | |
| proficiency/competencies the PAD relates to: | | |
| Nursing / field of nursing | \boxtimes | |
| | | |
| Midwifery | | |
| SCPHN | | \boxtimes |
| Nursing associate | | |
| | | |





| Practice placement handbook: Please specify route: | | |
|---|------------|--|
| Nursing / field of nursing | | |
| Midwifery | | |
| SCPHN | | |
| Nursing associate | | |
| PAD linked to competence outcomes, and mapped against <u>Standards for return to practice programmes</u> (NMC, 2019) for each route: | 5 7 | |
| Nursing / field of nursing | | |
| Midwifery | | |
| SCPHN | | |
| Nursing associate | | |
| 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) | | |
| Mapping document providing evidence of how the Standards for student supervision and assessment (NMC, 2018) apply to the programme(s) (Gateway 2) | | |
| Mapping document providing evidence of how the education institution has met the Standards for return to practice programmes (NMC, 2019) (Gateway 3) | | |
| Curricula vitae (CV) for relevant staff | | |
| Programme lead: Nursing | | |
| Midwifery | | |
| SCPHN | | |
| Nursing associate | | |
| | | |





| Written placement agreements between the education institution and associated practice learning partners to support the programme intentions. | | | |
|---|-----------|-------------|--|
| If you stated no above, please provide the reason and min A RtP route for SCPHN is not offered on this programme. | | | |
| List additional documentation: | | | |
| Additional comments: None identified. | | | |
| During the event the visitor(s) met the following group | os: | | |
| | YES | NO | |
| Senior managers of the AEI/education institution with responsibility for resources for the programme | | | |
| Senior managers from associated practice learning partners with responsibility for resources for the programme | | | |
| Programme team/academic assessors | | | |
| Practice leads/practice supervisors/ practice assessors | | | |
| Students | | | |
| If yes, please identify cohort year/programme of study: RtP adult, September 2020 x three RtP mental health, September 2020 x one Alumni, adult x one Alumni, midwife x one | | | |
| Service users and carers | | | |
| If you stated no above, please provide the reason and mi | tigation: | <u> </u> | |
| Additional comments: None identified. | | | |
| The visitor(s) viewed the following areas/facilities during the event: | | | |
| | YES | NO | |
| Specialist teaching accommodation (e.g. clinical skills/simulation suites) | | | |
| Library facilities | | | |
| Technology enhanced learning | | \boxtimes | |





| Virtual learning environment | | |
|---|----------|-------------|
| Educational audit tools/documentation | | |
| Practice learning environments | | \boxtimes |
| If yes, state where visited/findings: | | |
| - | | |
| If you stated no above, please provide the reason and mit | igation: | |
| UoG is an established AEI who provide NMC approved programmes; visits | | |
| weren't necessary. | | |
| Additional comments: | | |
| None identified. | | |
| | | |
| Mott MooDonald Crown Disalsimor | | |

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.

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| Issue record | | | |
|---------------|-------------------|-------|---------------|
| Final Report | | | |
| Author(s): | Tony Bottiglieri | Date: | 9 April 2021 |
| | Jan Bowyer | | |
| Checked by: | Bernadette Martin | Date: | 23 April 2021 |
| Submitted by: | Amy Young | Date: | 10 June 2021 |
| Approved by: | Leeann Greer | Date: | 11 June 2021 |