



Programme approval report

Section one

Programme provider name:	University of Sheffield			
In partnership with: (Associated practice learning partners and/or employer partners	Chesterfield Royal Hospital NHS Foundation Trust			
involved in the delivery of the programme)	Sheffield Teaching Hospitals NHS Foundation Trust			
	Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust			
	The Rotherham NHS Foundation Trust			
	Barnsley Hospital NHS Foundation Trust			
Programme reviewed:	Registered Midwife - 18M			
	Registered Midwife - 24M			
	Registered Midwife - 36M 🔀			
	Registered Midwife - degree apprentice			
Title of programme(s):	MSc Midwifery			
Academic levels:				
Registered Midwife - 18M	England, Wales, Northern Ireland			
	SCQF			
Registered Midwife - 24M	England, Wales, Northern Ireland			
	SCQF			





Registered Midwife - 36M	England, Wales, Northern Ireland Level 6 Level 7 SCQF Level 9 Level 10 Level 11	
Registered Midwife - degree apprentice	England, Wales, Northern Ireland Level 6 Level 7 SCQF Level 9 Level 10 Level 11	
Date of approval visit:	25-26 May 2021	
Programme start date:		
Registered Midwife – 18M Registered Midwife – 24 M Registered Midwife – 36 M Registered Midwife – degree apprentice	20 September 2021	
QA visitor(s):	Registrant Visitor: Janette Bowyer Lay Visitor: Sandra Stephenson	





Section two

Summary of review and findings

The University of Sheffield (UoS) is an approved education institution (AEI) which, among other health-related disciplines, provides pre-registration nursing programmes. The division of nursing and midwifery (DNM) is part of the health science school within the UoS faculty of medicine, dentistry and health. UoS present for approval a full-time three-year pre-registration master of science (MSc) midwifery programme to align with the Standards for student supervision and assessment (SSSA) (Nursing and Midwifery Council (NMC), 2018), Standards for pre-registration midwifery programmes (SPMP) (NMC, 2019) and Standards of proficiency for midwives (SPM) (NMC, 2019). The programme has a proposed annual intake of 20 students in September each year.

Documentation and the approval visit confirm practice learning partners (PLPs) are supportive of a pre-registration postgraduate programme of midwifery education and have worked closely with the school in its development. The stated aim is to develop skilled, accountable and autonomous midwives who are able to provide evidence-based, woman-centred care to childbearing women and their families in a range of settings. With the emphasis on leadership development in maternity services, the school aim to offer a programme which is unique in their region. The programme is adopting the NMC approved midwifery ongoing record of achievement (MORA) for the assessment of practice and using the practice assessment record and evaluation (PARE) system. Practice supervisors and assessors report some challenges related to the recent implementation of the electronic MORA (e-MORA).

There's evidence of effective partnerships between the AEI, students and PLPs at both operational and strategic levels. Senior practice managers agree to support practice learning opportunities which will enable achievement of the SPM. A continuity of carer (CoC) placement model is proposed throughout the three-year programme.

Documentation shows that the school and PLPs jointly undertake student selection events with service user and carer (SUC) support. Students and SUCs tell us they've reviewed and commented on questions and offered their own alternatives, which will be included in selection events. The school has been active in seeking out stakeholder input to the development and design of the new programme but recognises the need for greater SUC involvement.

The programme doesn't meet the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) as a condition applies.

The SSSA are met at programme level.





The programme is recommended for approval subject to one NMC condition. Three recommendations are made.

The visit is undertaken remotely during the COVID-19 pandemic.

Updated 5 July 2021:

Evidence is provided in response to the one NMC condition, which is now met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel			
Recommended outcome to the NMC:	Programme is recommended to the NMC for approval		
	Programme is recommended for approval subject to specific conditions being met		
	Recommended to refuse approval of the programme		
	Effective partnership working: collaboration, culture, communication and resources:		
	Condition one: The programme team must develop an implementation plan to widen recruitment and strengthen the preparation and involvement of women, partners, families and advocacy groups in the delivery, assessment and ongoing evaluation of the programme. (SFNME R1.12; SPMP R2.4)		
Conditions:	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:	23 June 2021
Recommendations to enhance the programme delivery:	Recommendation one: Consider monitoring and evaluating the CoC placement model from the perspective of practice supervisors and students, to ensure the appropriate breadth of practice learning experience. (SPMP R3.4) Recommendation two: Continue to work with PLPs and other AEIs to evaluate the implementation of the SSSA and enhance communication between practice supervisors, practice assessors and academic assessors. (SSSA R4.3, R7.5, R7.9) Recommendation three: Continue to strengthen the preparation of practice supervisors and practice assessors in the use of the e-MORA. (SSSA R4.1, R7.3)
Focused areas for future monitoring:	Involvement of women, partners, families and advocacy groups.
	CoC placement model. Implementation of the SSSA and use of the e-MORA.

Programme is recommended for approval subject to specific conditions being met

Commentary post review of evidence against conditions:

The UoS SUC strategy and implementation plan outlines how SUC involvement is to be developed over the next three years. This includes evidence of strategies to widen recruitment and implement an induction programme to prepare maternity SUCs for their involvement in the delivery, assessment and ongoing evaluation of the programme.

Condition one is now met.





AEI Observations	Observations have been made by the educationinstitutionYESNO
Summary of observations made, if applicable	
Final recommendation made to NMC:	Programme is recommended to the NMC for approval
	Recommended to refuse approval of the programme
Date condition(s) met:	5 July 2021

Section three

NMC Programme standards
Please refer to NMC standards reference points
Standards for pre-registration midwifery programmes (NMC, 2019)
The Future midwife: Standards of proficiency for registered midwives (NMC,
2019)
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)
<u>QA Handbook</u> (NMC, 2020)

Partnerships

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 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 gualified 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 <u>evaluative summary</u> about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders.

Documentary evidence and the approval visit confirm wide-ranging and effective stakeholder engagement in the co-production of the three-year pre-registration midwifery programme. The new curriculum design has been shared with a wide range of stakeholders including PLPs, regional groups, students, SUCs and advocacy groups, and their comments and feedback sought. PLPs, students and SUCs all tell us they've been invited to review the proposed programme and their feedback has been acted upon.





There's a commitment to inter-professional learning (IPL) throughout the programme, with an expectation for students to be active in seeking out opportunities to work with a range of healthcare professionals in practice learning placements. Opportunities for IPL for students within the practice learning setting is evidenced within the MORA documentation. There's IPL opportunities within the health sciences school for students to experience integrated learning. The school includes nursing and midwifery, orthoptics and human communication sciences. The programme includes some shared learning modules, such as the foundations of health module which is shared with adult nursing students. Students also learn alongside nursing and medical students in the clinical skills facilities.

The programme is reviewed quarterly through curriculum review meetings attended by academics, PLPs and student representatives. Monthly meetings are held between local AEIs and PLPs. PLPs tell us that there's an established network for effective partnership working with AEIs. Learning environment managers (LEMs) work collaboratively with link lecturers, placement departments and learning facilitators. Practice learning environments are audited by the school and PLPs, and recorded on the PARE platform.

Students have a range of opportunities to feedback. Elected student representatives attend a number of committees and provide input to the development, progress and evaluation of the programme. Students have formal and informal opportunities to feedback on the quality of theory and practice learning experiences. Students tell us their feedback is acted upon and give the example of long practice placements which reduce contact with UoS and their peers. As a result, the midwifery programme has regular opportunities planned to enable students to meet with academic staff and their student cohort while in practice.

UoS, through its membership of the Midlands, Yorkshire and east of England practice learning group (MYEPLG), works collaboratively to ensure the SSSA are met consistently across the region. They also meet regularly with local PLPs and AEIs. The MORA is the product of the midwifery practice assessment collaboration (MPAC) of midwifery education and practice providers across England and Northern Ireland. The MORA has been mapped against the SPM (domain six). The UoS MORA context document offers guidance as to how students should progress across the programme. There are MPAC resources that support practice assessors and practice supervisors with MORA documentation.

Practice supervisors and practice assessors are in place and receive ongoing training. They understand their roles and responsibilities, including how to raise or escalate concerns about a student in practice. Documentation and the approval visit confirm students have a named practice assessor for each placement and a named academic assessor for each year of the programme. Feedback from the visit highlights a variable understanding as to how practice supervisors, practice assessors and academic assessors work together to support students and inform





assessment decisions. Practice supervisors tell us there's limited continuity working with students, which can make it difficult to assess students' previous exposure to practice experiences and level of proficiency. Practice assessors do review feedback from practice supervisors when determining assessment outcomes. We find a lack of clarity and differentiation between the role of the academic assessor, personal tutor and link teacher in practice, particularly if these roles are undertaken by one member of academic staff. We recommend the programme team continue to work with PLPs and other AEIs to evaluate the implementation of the SSSA and enhance communication between practice supervisors, practice assessors and academic assessors. (Recommendation two)

The school is sharing placements and resources with other local AEIs, including a narrated presentation on how to use the e-MORA, which is used by students from entry onto the programme. Practice supervisors and practice assessors tell us of a need for ongoing support for their use of the e-MORA. Some practice supervisors haven't received the email enabling them to access the e-MORA and tell us that they rely on students to familiarise them with the e-MORA on PebblePad. The programme team should continue to strengthen the preparation of practice supervisors and practice assessors in the use of the e-MORA. (Recommendation three)

The programme is supported by two members of UoS midwifery academic staff and three secondments from PLPs. Senior resource managers tell us there's a three-year plan in place to ensure sufficient resources, including staff, for the programme. The two members of midwifery academic staff includes the lead midwife for education (LME). Both are prepared as academic assessors. We're assured there's sufficient resource to deliver the first year of the programme, and there's a sustainable plan to increase academic staff resources as the programme progresses. Documentation shows plans to invite specialist midwives, stakeholders and interest groups to co-deliver teaching in specialist areas.

The DNM recognise the important contribution that SUCs make to the delivery of healthcare education and are currently developing a SUC strategy. SUCs are members of the strategic partnership board and its operational development group, which oversee the curriculum development and its subsequent implementation. There's documentary evidence of SUC consultation in the development of the midwifery programme and SUCs tell us their feedback is acted upon. The programme team intend to widen recruitment of women, partners, families and advocacy groups to expand SUC representation. SUCs tell us they'd like to be involved in the future in all aspects of the programme.

Documentation and the approval visit confirm plans to involve SUCs at recruitment and selection events and in the curriculum. There's no evidence of preparation of SUCs for their role and involvement in recruitment and selection. The programme team must develop an implementation plan to widen recruitment and strengthen the preparation and involvement of women, partners, families and advocacy





groups in the delivery, assessment and ongoing evaluation of the programme. (Condition one)

The MORA evidences the involvement of SUCs and students in the feedback, supervision and assessment processes. Students tell us they've valued learning through hearing the experiences of patient educators.

A range of assessment methods including examinations, essays, task-based assignments, presentations and objective structured clinical examinations (OSCEs) are planned across each year of the programme. Students tell us they've reviewed the assessments and given feedback.

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**

The SUC strategy is under development. There's insufficient evidence of the representation and preparation of SUCs for their involvement in the new midwifery programme. A detailed implementation plan is required to evidence SUC involvement in the delivery, assessment and evaluation of the programme.

Condition one: The programme team must develop an implementation plan to widen recruitment and strengthen the preparation and involvement of women, partners, families and advocacy groups in the delivery, assessment and ongoing evaluation of the programme. (SFNME R1.12; SPMP R2.4)

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

MET 🖂

Post event review

Identify how the condition(s) is met:

Condition one: The UoS DNM SUC strategy and implementation plan details how SUC involvement is to be developed to ensure that the pre-registration midwifery programme is delivered, evaluated and co-produced in partnership with women, partners, families and advocacy groups. The recruitment and induction strategy includes an induction pack, an induction day, equality and diversity training and unconscious bias resources. The SUC implementation plan provides evidence of SUC involvement in the student selection process, in the curriculum design and in bi-annual programme development meetings.

Condition one is now met.

Evidence:





NOT MET

UoS DNM SUC strategy, June 2021 UoS DNM maternity SUC recruitment and induction strategy, undated UoS DNM maternity SUC induction pack, undated UoS DNM SUC implementation plan, 2021-2024

Date condition(s) met: 5 July 2021

Revised outcome after condition(s) met:

Student journey through the programme

Standard 1: Selection, admission and progression

AEIs must:

- R1.1 appoint a <u>lead midwife for education</u> 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 <u>NMC Guidance of heath and character</u>. This includes satisfactory occupational health assessments and criminal record checks





- R1.8 ensure students are fully informed of the requirement to declare immediately any cautions, charges, conditional discharges or convictions and any adverse determinations made by other regulators, professional bodies and education establishments and that any declarations are dealt with promptly, fairly and lawfully
- R1.9 ensure the lead midwife for education, or their designated midwife substitute is able to provide supporting declarations of health and character for students who have successfully completed an NMC approved pre-registration midwifery programme, and
- R1.10 ensure NMC registered nurses entering a shortened pre-registration midwifery programme are a Registered nurse: first level (adult) and the programme complies with Article 40(1)(b) of Directive 2005/36/EC outlined in Annexe 1 of this document.

Note: Education institutions and their practice learning partners may propose to transfer current students onto the new programme to meet the Standards for preregistration 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 requireme	nts	
Evidence provides assurance that the following requiremen	ts are met	
R1.1 appoint a <u>lead midwife for education</u> who is responsible for education in the AEI	⁻ midwifery YES 🖂	
R1.2 inform the NMC of the name of the lead midwife for educat	ion YES 🖂	NO 🗌
R1.3 ensure recognition of prior learning is not permitted for pre-	-registratio	n
midwifery programmes	YES 🖂	NO 🗌

Nursing & Midwifery Council	Better, safer care through quality assurance of nursing, midwifery and nursing associate education.	мот	
	ission and progression comply with for nursing and midwifery education		NO 🗌
R1.5 confirm on entry to the	e programme that students:		
Article 40(2) of Direct	stration midwifery programmes are c tive 2005/36/EC regarding general e as appropriate outlined in Annexe 1	ducation le	ngth or
R1.5.2 demonstrate an und midwife	erstanding of the role and scope of p	practice of t	he
		YES 🖂	NO 🗌
R1.5.3 demonstrate values	in accordance with the Code	YES 🖂	NO 🗌
R1.5.4 have capability to lea	arn behaviours in accordance with th	ne Code YES 🖂	NO 🗌
R1.5.5 have capability to de outcomes	evelop numeracy skills required to m	eet progran	nme
		YES 🛛	NO 🗌
R1.5.6 can demonstrate pro	ficiency in English language	YES 🖂	NO 🗌
R1.5.7 have capability in lite	eracy to meet programme outcomes	YES 🖂	NO 🗌
R1.5.8 have capability for d outcomes	igital and technological literacy to me	eet program	nme
		YES 🖂	NO 🗌
evidence AND discussion	<u>nmary</u> from your documentary and at the approval visit to demonstra nent below is met or not met		rance is
	ighout the programme in continuous literacy and digital and technological	•	•
	MET 🖂	NOT N	IET 🗌
literacy throughout the prog	nologist supports the development or ramme. An induction at the start of the all learning environment (VLE), cloud	he program	me





online tools and communities and mobile applications (apps). All assessments are submitted online. Students are supported to meet the range of assessments including production of online leaflets, podcasts and web pages. The e-MORA is hosted on PebblePad and elements are available through the PebblePocket app which allows students 'on the go' access.

Formative numeracy assessments throughout the programme lead to a mandatory pass (100 percent) summative numeracy assessment in the third year. SafeMedicate and preparing to prescribe e-learning tools support students in preparation for their numeracy assessments.

Students can contact the UoS support service, including library and academic advisors, to enhance the development of their academic skills. Students tell us the disability dyslexia support service (DDSS) is supportive. Learning mentors can support students with their academic studies, including the provision of a note taker for lectures. Students can also access online self-help resources through the university's website and VLE. Students are assigned a personal tutor who discusses progress and any pastoral issues that may arise.

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 <u>NMC Guidance of heath and character</u>. This includes satisfactory occupational health assessments and criminal record checks **YES NO**
- R1.8 ensure students are fully informed of the requirement to declare immediately any cautions, charges, conditional discharges or convictions and any adverse determinations made by other regulators, professional bodies and education establishments and that any declarations are dealt with promptly, fairly and lawfully
- 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 preregistration 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.

YES 🗌 NO 🗌 N/A 🖂

YES 🖂

NO





UoS doesn't offer a shortened pre-registration midwifery programme.

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. This is a new programme and there are no existing students to transfer. 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. There are no existing students to transfer to the SSSA. Assurance is provided that Gateway 1: Standards framework for nursing and *midwifery education* relevant to selection, admission and progression are met YES \square NO 🗌 Outcome MET 🖂 NOT MET 🗌 Is the standard met? Date: 26 May 2021 Post event review Identify how the condition(s) is met: N/A Date condition(s) met: N/A NOT MET Revised outcome after condition(s) met: MET

N/A

Standard 2: Curriculum

AEIs together with practice learning partners must:

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





- R2.2 comply with the NMC Standards for student supervision and assessment
- R2.3 ensure that programme learning outcomes reflect the NMC Standards of proficiency for midwives
- R2.4 involve women, partners, families and advocacy groups in the design, development, delivery and evaluation of programmes
- R2.5 ensure that programmes delivered in Wales comply with legislation which supports use of the Welsh language
- R2.6 design and deliver programmes that support students and provide relevant and ongoing exposure to midwifery practice
- R2.7 ensure technology-enhanced and simulated learning opportunities are used effectively and proportionately to support learning and assessment, including where clinical circumstances occur infrequently and a proficiency is required
- R2.8 design curricula that provide an equal balance of 50 percent theory and 50 percent practice learning, using a range of learning and teaching strategies, and
- R2.9 ensure NMC approved pre-registration midwifery education programmes are of sufficient length to enable students to meet the NMC Standards of proficiency for midwives and respective programme outcomes, and comply with Article 40 (1) and satisfy Article 41(1) of Directive 2005/36/EC (see Annexe 1) by meeting the following criteria:
- R2.9.1 full time education and training as a midwife is a minimum of three years and 4,600 hours, or
- R2.9.2 where a student is already registered with the NMC as a Registered nurse: first level (adult), full-time education and training as a midwife shall be a minimum of two years and 3,600 hours, or
- R2.9.3 where a student is already registered with the NMC as a Registered nurse: first level (adult), full-time education and training as a midwife shall be a minimum of 18 months and 3,000 hours, and in order for the qualification to be recognised in EU member states it must be followed by a year of professional midwifery practice.

Findings against the standard and requirements	5	
Evidence provides assurance that the following requirements	are met	
R2.1 ensure programmes comply with the NMC <u>Standards framew</u> and midwifery education	ork for n	<u>ursing</u>
	'ES 🖂	NO 🗌
R2.2 comply with the NMC <u>Standards for student supervision and a</u>	assessme ′ES ⊠	<u>ent</u> NO 🗌
R2.3 ensure that programme learning outcomes reflect relevant St	andards	of
proficiency for midwives	'ES 🖂	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.

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

MET 🗌 NOT MET 🖂

R2.4 is not met. Documentation and the approval visit confirm that a range of stakeholders reviewed the proposed programme plans and shared their perspectives and feedback. This includes local maternity voice partnerships, SUCs from local maternity groups, board members from Sheffield maternity partnership, the cultural liaison midwife and Sheffield City Council's United Nations Children's Emergency Fund (UNICEF) baby friendly project lead.

SUC consultation and the programme team's presentation at the approval visit evidences the plans to ensure SUC engagement includes marginalised groups, such as the travelling community, homeless and asylum seekers, through the health inclusion teams. The programme team tell us of a number of advocacy groups, including lesbian, gay, bisexual, transgender and queer (or questioning) and fathers' groups, who have shared their perspectives. SUCs tell us they've been invited to review the curriculum, including how it can avoid bias and a eurocentric lens. SUCs tell us they'd like to be involved in the future in all aspects of the programme.

The school are currently developing a SUC strategy and recognise the need for increased SUC representation and involvement in programme delivery. The school intend to invite SUCs to speak with students, to participate in clinical assessments and to share the SUC voice through the use of videos, patient stories and narratives. A collaboration between the school and English department is collating birthing and pregnancy stories from women from a mix of cultural backgrounds in Sheffield to further add to the SUC voice in the programme.

We find insufficient evidence of preparation of SUCs for their involvement in the programme. The programme team must develop an implementation plan to widen recruitment and strengthen the preparation and involvement of women, partners, families and advocacy groups in the delivery, assessment and ongoing evaluation of the programme. (Condition one)

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 <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.

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

R2.6 is met. The programme consists of 10 modules, split over the three years. The student is seen to be at the centre of learning and teaching. Programme documentation illustrates how students develop the ability to reflect critically on practice and respond proactively to change, whilst delivering quality person-centred care. There are six threads that run through the curriculum and support practice-based learning, including communication, public health, infant feeding, mental health and wellbeing, as well as leadership and research.

The programme level approach in year one is on developing knowledge, skills and behaviours to develop mastery in consultation, clinical assessment and core skills. Year two scaffolds new learning, enabling students to make decisions in partnership with women and families and to act in complex and unpredictable situations. Year three expands the students' knowledge, skills and behaviours to become a role model with a responsibility to disseminate knowledge, mentor and motivate as an innovative practitioner within their scope of midwifery practice.

There's a strong emphasis on application of theory to midwifery practice. In each year of the programme there's a professional midwifery practice module, which includes the MORA in the module summative assessment. In addition to practice supervisors and practice assessors, students are supported on practice placement by the professional midwifery advocate (PMA), practice placement co-ordinator, LEM and university link teacher.

Documentation and the approval visit confirm the school has developed the curriculum to be based upon a CoC placement model across all three years of the programme. PLPs tell us that students in a CoC team will follow the woman and experience a wide range of midwifery practice. Additional core skills are timetabled in year two and students are encouraged to seek out additional learning opportunities to allow them to meet proficiencies.

The programme team tell us there's flexibility in the system to change the placement allocation if required. The student learning experience is monitored to ensure relevant and ongoing exposure to all areas of 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 **MET MOT MET**



assurance of nursing, midwifery and



R2.7 is met. The programme includes technology-enhanced and simulation-based learning, including the use of low and high fidelity mannequins in the development of practice skills. New equipment has been purchased to support the teaching of midwifery specific skills such as abdominal palpation, vaginal examination, newborn life support and management of obstetric emergencies. The clinical skills simulation centre at the Northern General Hospital also includes mock clinical wards, resuscitation suites, simulated theatres and teaching rooms. Senior resource managers assure us there's spare capacity and investment in these facilities to accommodate the new midwifery programme.

The DNM have recently formed a working group to look at simulated learning opportunities. The school tell us simulation is used effectively to provide a link between theory and practice. Flipped classroom sessions introduce students to skills before practical sessions are undertaken and are followed by a debriefing. Students tell us simulated practice skills are taught by registrants with current experience, which they feel is positive. Nursing and midwifery students will share some clinical skills training, such as the assessment of vital signs, adult basic life support and moving and handling. The summative assessment strategy includes OSCEs on infant feeding and management of complex care and emergencies during pregnancy and childbirth.

The health and education co-operative 'readiness to prescribe' online resource is embedded in the 'professional midwifery practice - transition from student to qualified midwife' module. This resource is used with third year student nurses to support the development of their pharmacology knowledge and is positively evaluated. This learning platform will enable graduates, 12 months after registration as a midwife, to apply for a non-medical prescribing programme. PLPs tell us that there's support for midwives undertaking non-medical prescribing programmes to become independent prescribers in line with local maternity service needs.

Practice skills are taught and proficiencies achieved in the practice learning environment. Against each proficiency, students record how they demonstrate that they've achieved the required outcome in the MORA. This includes practice experience or achievement in other ways such as through discussion, demonstration, reflection or simulation. Simulation is specifically used to enable students to demonstrate the proficiencies that may be difficult to achieve, including for example physiological breech birth.

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 NOT MET

R2.8 is met. The programme meets the required 4600 hours and provides an equal balance of 50 percent theory and 50 percent practice learning.





Blended learning supports students through the integration of a range of teaching and learning strategies. Directed revision, staff or student-led seminars, critical enquiry and reflection, lectures and individual and group tutorials are combined with practice skills workshops, practice-based scenarios and simulated learning opportunities.

Documentation shows the focus for year one is on developing knowledge, skills and behaviours in consultation, clinical assessment and core skills. Year two builds on this foundation to support students to make decisions in partnership with women and their families, including in complex and unpredictable situations. The focus in year three is for students developing clinical mastery. Leadership, research, communication, public health, infant feeding and mental health and wellbeing are threaded throughout the units across the three years of the programme. Modules are designed to build on learning and achievement from previous years and become progressively more challenging. The formative and summative assessment types for each module are detailed in module documentation and illustrate a diverse assessment strategy. All modules are delivered and assessed at level seven.

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 🗌 N/A 🗌

NO 🗌

N/A 🖂

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 N/A

There's no shortened pre-registration midwifery programme.

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 🗌

There's no shortened pre-registration midwifery programme.





midwifery education relevant to curricula and assessment are met YES NO The SUC strategy is under development. There's insufficient evidence of the representation and preparation of SUCs for their involvement in the new midwifery programme. A detailed implementation plan is required to evidence SUC involvement in the delivery, assessment and evaluation of the programme. (Condition one) Assurance is provided that Gateway 2: Standards for student supervision and assessment 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 representation. We find insufficient evidence of preparation of SUCs for their involvement in the new midwifery programme. A detailed implementation plan is required to evidence SUC involvement in the delivery. The programme team need to widen recruitment of women, partners, families and advocacy groups to expand SUC representation. We find insufficient evidence of preparation of SUCs for their involvement in the new midwifery programme. A detailed implementation plan is required to evidence SUC involvement in the delivery, assessment and evaluation of the programme. Condition one: The programme team must develop an implementation plan to widen recruitment and strengthen the preparation and involvement of women, partners, families and advocacy groups in the delivery, assessment and ongoing evaluation of the programme. (SFNME R1.12; SPMP R2.4) Date: 26 May 2021 Post event review	Assurance is provided that Gateway 1: Standards framework	for nu	sina al	nd	
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provides examples of how women, partners, families and advocacy groups are involved in the curriculum delivery and assessment across all three years of the programme. This includes SUC input into taught sessions, sharing experiences of maternity care and engagement with support groups. Condition one is now met.	plan, there's a robust plan to engage SUCs in the design, dev and evaluation of the pre-registration midwifery programme. implementation plan details actions to be taken over the next provides examples of how women, partners, families and adv involved in the curriculum delivery and assessment across al programme. This includes SUC input into taught sessions, sh maternity care and engagement with support groups.	velopm The SU two ye vocacy	ent, de C ars, an groups years c	livery d are of the	,

Evidence:





UoS DNM SUC strategy, June 2021 UoS DNM maternity SUC recruitment and induction strategy, undated UoS DNM maternity SUC induction pack, undated UoS DNM SUC implementation plan, 2021-2024

Date condition(s): 5 July 2021

Revised outcome after condition(s) met:

MET 🛛 NOT MET 🗌

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 <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.

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

MET 🖂 NOT MET 🗌





R3.1 is met. The MORA provides a record of students' development and achievement of the SPM. The MORA was produced through collaboration of midwifery education and PLPs across England and Northern Ireland. It details the SPM and the UNICEF UK baby friendly initiative university standards (2019), including how these are achieved.

Students achieve the SPM by undertaking an appropriate range of practice learning experiences. The CoC model is used for midwifery placements across all three years of the programme, with additional specific placements offered in year two. For example, a neonatal unit placement supports the development of the SPM domain four, ensuring students have exposure to the additional care for newborn infants with complications.

A scoping exercise undertaken by PLPs highlights the placements and staff which can support practice learning experiences, offering students the opportunity to develop and meet the SPM. PLPs tell us the CoC model will enable students to meet the proficiencies and students are encouraged to seek out additional learning opportunities, if required.

The school placement team liaises with the placement allocation team, academic assessors, practice placement co-ordinators and placement leads from other AEIs. This collaboration ensures that practice learning placements are suitable, safe and provide students with a positive learning experience. Documentation states that placement allocation plans are designed each year to ensure students complete the required proficiencies, systematic physical examinations of the newborn (SPEN), breastfeeding assessments and gain the experience to meet the European Union (EU) requirements. The school is confident there's sufficient support and supervision for students for SPEN. Learning opportunities across PLPs have been reviewed to ensure parity of provision for students. PLPs vary in the numbers of registered midwives experienced in newborn and infant physical examinations or paediatricians, but all tell us they're able to support students to meet the requirements of SPEN.

The UoS is a member of the Health Education England (HEE) forum looking at placement capacity and alternative placements across the region. PLPs tell us they meet regularly with other AEIs, and the school are able to join with these groups to evaluate and review practice learning provision.

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 CoC placement model ensures that students experience the role and scope of the midwife, enabling them to provide holistic care to women, newborn infants, partners and families. Additionally, in year two of the programme, specific placements are offered including neonatal unit, advanced obstetric care and obstetric theatres and gynaecology. Students' practice learning experience





may also include working with specialist midwives or teams in safeguarding, perinatal mental health, younger persons' pregnancy services, bereavement support and specialist medical and obstetric clinics.

PLPs assure us that students working in a CoC team should get the exposure to the required range of midwifery provision. They're able to build a relationship with the women in their caseload and are able to follow them to a range of services, such as the smoking cessation or diabetes clinics. Students have additional support from PMAs to enable them to explore further the role and scope of the midwife in practice.

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

R3.3 is met. Students are encouraged to seek learning opportunities from a range of health and social care practitioners. This is discussed at preparation sessions for placement and is detailed in the placement handbook. IPL activities with other healthcare students are offered. Students are encouraged to take part in multidisciplinary team study days and obstetric emergency training scenarios within their local trust. Specific modules, such as public health and the midwife, support students to understand the public health role of midwives as part of the multidisciplinary team. PLPs tell us students will learn management skills within their CoC placements and can learn from a range of healthcare professionals. Interdisciplinary and multi-agency team working experiences are recorded in the MORA.

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. Documentation shows the school has sought evidence and feedback from other AEIs using a CoC placement model with students. The placement handbook includes an additional CoC student placement handbook in annexe five. PLPs are all supportive of this approach and have CoC teams where students are placed, and they're confident they've enough capacity for each cohort of students. Practice supervisors and practice assessors give us examples of a variable skill mix among CoC teams and cite some additional practice learning opportunities which may need to be facilitated to ensure parity for students. These include exposure to initial intrapartum assessment, care of women undergoing induction of labour and medicines management. As each PLP has a different approach to its provision of CoC, the programme team should consider monitoring and evaluating the CoC placement model from the perspective of practice supervisors and students, to ensure the appropriate breadth of practice learning experience. (Recommendation one)





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



R3.5 is met. Documentation and the approval visit confirm students have access to a wide range of learning opportunities to experience midwifery care for a diverse population across a range of settings. This is through the 'home locality' placement system, where students are allocated to one PLP for the duration of the programme.

Diversity and inclusivity are addressed throughout the programme. In year one, the 'introduction to concepts of public health in childbearing' module specifically analyses health inequalities and the disparity of maternal and neonatal outcomes determined by ethnicity. There are geographical areas across the locality that include residents whose first language isn't English, travelling communities, asylum seekers, women and families who require additional support.

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. In years two and three of the programme, students develop the required knowledge, skills and behaviours needed when caring for women and newborn infants when complication and additional care needs arise. Documentary evidence confirms that programme modules include content to ensure students learn about the additional care needs of both women and the newborn infant. Year two includes the 'management of complex care and emergencies during pregnancy and childbirth' module and the 'developing concepts of public health for women and infants with complex and additional needs' module.

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. UoS has robust policies and guidance on reasonable adjustments, including support for specific learning difficulties. The DDSS put in place individually tailored support based on student needs. Students tell us that reasonable adjustments are made to ensure that students with disabilities aren't disadvantaged.





Students are placed in one PLP throughout the programme and are asked for their choice of home locality at the start of the programme. Consideration is given to students' needs when allocating the PLP and for their choice of final placement.
Students with specific needs identified through occupational health or DDSS are encouraged to work with their placement lead to develop a placement support plan. PLPs provide access to prayer and breastfeeding facilities. PLPs tell us they encourage students to share any learning contract with them and make adjustments, as needed, such as limiting the number of night shifts for a student with chronic fatigue. Students tell us they're very well supported by DNM and on practice placement, and feel confident to ask for support and reasonable adjustments.
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: <u>Standards framework for nursing and</u> <u>midwifery education</u> relevant to practice learning are met
YES NO
Assurance is provided that Gateway 2: <u>Standards for student supervision and</u> assessment relevant to practice learning are met
Outcome
Is the standard met? MET NOT MET
Date: 26 May 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

AEIs together with practice learning partners must:

- R4.1 ensure that support, supervision, learning opportunities and assessment complies with the NMC <u>Standards framework for nursing and midwifery</u> <u>education</u>
- R4.2 ensure that support, supervision, learning opportunities and assessment complies with the NMC <u>Standards for student supervision and assessment</u>
- 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 <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

R4.1 ensure that support, supervision, learning opportunities and assessment complies with the NMC <u>Standards framework for nursing and midwifery</u> <u>education</u>

MET 🛛 NOT MET 🗌

R4.1 is met. Documentation and the approval visit confirm that PLPs and the school have confidence in their compliance with the SFNME. Practice learning environment audits and student placement evaluations support the monitoring of the quality of practice learning. A register of practice assessors and practice supervisors is maintained on the PARE.

UoS has a wide range of support services available including support for health and wellbeing, information technology support, enabling services and library services. Students have the support of personal tutors, who provide continuity of support and direct students to support services. During the theoretical component





of the programme, students are predominantly supported by the LME and one other member of academic staff, who are both NMC midwifery registrants, as evidenced by staff curricula vitae and a search of the NMC register.

The curricula and assessments are designed to ensure the programme learning outcomes and the SPM are met. The assessment strategy is varied and includes examinations, essays, presentations, OSCEs and a portfolio. Summative assessments enable students to demonstrate achievement of module and programme learning outcomes. Assessment is used throughout the programme to determine student progression at examination boards.

R4.2 ensure that support, supervision, learning opportunities and assessment complies with the NMC <u>Standards for student supervision and assessment</u> MET ONOT MET

R4.2 is met. Through the MYEPLG, UoS has worked collaboratively with other AEIs and PLPs to co-produce a framework for the preparation of practice assessors, practice supervisors and academic assessors to support the implementation of the SSSA. Training materials are produced jointly by MYEPLG, and podcasts are widely used across the region to ensure consistency. This is supplemented by MPAC resources that support practice assessors and practice supervisors with MORA documentation. Practice supervisor preparation has been embedded within year three of the programme in the management of professional midwifery practice module.

PLP representatives confirm there's sufficient and appropriate resources in practice learning environments to support the programme. This includes sufficient practice assessors and practice supervisors to support the proposed number of student midwives. The MORA sets out the roles and responsibilities of practice supervisors, practice assessors and academic assessors. They tell us they're familiar with the requirements of the SSSA and MORA. The MORA context document provides the detail regarding local implementation in relation to UoS regulations and programme structure.

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. The programme learning outcomes are derived from and are mapped to the SPM. All modules within the programme are core and must be achieved. Students are explicitly assessed against the SPM and must achieve all the skills and linked proficiencies at the required level by the final year of the programme. Student performance and achievement is recorded in the e-MORA. Practice assessors review student progress at specific points during the year and complete the final summative holistic assessment at the end of the placement. Academic assessors will collate and confirm student achievement of proficiencies and





programme outcomes and make recommendations for progression in partnership with practice assessors.

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

MET 🛛 NOT MET 🗌

R4.4 is met. The educational aim of the programme is to scaffold knowledge, skills and behaviour development across the three years. Formative assessment and feedback is used to support students in their summative assessments, with evaluation and reflection timetabled throughout the programme. Personal tutors hold feedback and discussion tutorials, which cover academic and practice learning progression, development of professional behaviours and values and pastoral issues. Students tell us their summative assessments are supported through a range of formative feedback and they're confident to ask for additional feedback from tutors.

Students are supported to develop their reflective writing skills. Students are required to complete self-assessments and reflections in the e-MORA, so they can demonstrate an insight into their own performance and learning needs. Peer review skills are developed through feedback from class presentations of reports, and students tell us peer feedback is encouraged. Students can practice techniques for written and practical examinations and receive feedback and feed forward.

In the practice learning environment, the e-MORA includes structured formative feedback by practice supervisors with summative feedback given by the practice assessor and confirmed by the academic assessor.

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	\square	NO	Γ
			ᄂ

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 A activities of a midwife specified in Article 42 of Directive 2 been met as outlined in Annexe 1 of this document				ie
	YE	ES 🖂	NO	
Assurance is provided that Gateway 1: <u>Standards framework for</u> <u>midwifery education</u> relevant to supervision and assessment an			<u>nd</u>	
	YES	\square	NO	
Assurance is provided that Gateway 2: <u>Standards for student sasessment</u> relevant to supervision and assessment are met	uperv	<u>ision a</u>	<u>nd</u>	
assessment are met	YES	\square	NO	
Outcome				
Is the standard met? ME	T 🖂	NOTI	МЕТ	
Date: 26 May 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: ME	T	NOT	MET	
N/A				

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 <u>five years</u> to apply to register with the NMC if they wish to rely on this qualification¹. In the event of a student failing to register their qualification within five years they will have to undertake additional education and training or gain such experience as specified in our standards.

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





Findings against the standards and requirements		
Evidence provides assurance that the following requirements are met:		
R5.1 ensure that the minimum award for a pre-registration midwifery programme is at bachelor's degree level		
YES 🛛 NO 🗌		
R5.2 notify students during and before completion of the programme that they have <u>five years</u> to apply to register with the NMC if they wish to rely on this qualification ² . 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.		
Fall Back Award		
If there is a fall back exit award with registration as a midwife all NMC standards		
and proficiencies are met within the award. YES NO N/A		
There are no fall back exit awards that lead to eligibility to apply for registration as a midwife.		
Assurance is provided that the <u>Standards framework for nursing and midwifery</u> <u>education</u> relevant to the qualification to be awarded are met YES X NO		
Outcome		
Is the standard met? MET MET MET		
Date: 26 May 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	\boxtimes	
Programme specification(s)	\square	
Module descriptors		
Student facing documentation including: programme		
handbook	\bowtie	
Student university handbook	\square	
Practice assessment documentation		
Ongoing record of achievement (ORA)		
Practice learning environment handbook		
Practice learning handbook for practice supervisors and assessors specific to the programme		
Academic assessor focused information specific to the programme	\boxtimes	
Placement allocation / structure of programme	\square	
PAD linked to competence outcomes, and mapped	$\overline{\boxtimes}$	
against Standards of proficiency for midwives		
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 <i>Standards for pre-</i> <i>registration midwifery programmes</i> (NMC, 2019) (Gateway 3)		
Curricula vitae (CV) for relevant staff	\square	
CV of the LME	\boxtimes	
Registrant academic staff details checked on NMC website		
External examiner appointments and arrangements	\boxtimes	
Written placement agreement(s) between the education institution and associated practice learning partners to support the programme intentions.		





Written agreement(s) to support the programme \boxtimes intentions between the education institution and employer partners for apprenticeship routes (if applicable). If you stated no above, please provide the reason and mitigation: We haven't seen written placement agreements as HEE are implementing the new NHS education contract across England. Signatories will be obtained by June 2021. No apprenticeship route is being considered for approval. List additional documentation: Draft SUC strategy, 2021 Revised handbook for midwife practice supervisors and practice assessors, 2021 Post visit documentation: UoS DNM SUC strategy, June 2021 UoS DNM maternity SUC recruitment and induction strategy, undated UoS DNM maternity SUC induction pack, undated UoS DNM SUC implementation plan, 2021-2024 Additional comments: None identified.

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

	YES	NO	
Senior managers of the AEI/education institution with responsibility for resources for the programme	\square		
Senior managers from associated practice learning partners with responsibility for resources for the programme			
Senior managers from associated employer partners with responsibility for resources for the programme (applicable for apprenticeship routes)		\boxtimes	
Programme team/academic assessors	\square		
Practice leads/practice supervisors/ practice assessors	\square		
Students	\square		
If yes, please identify cohort year/programme of study: Year two Master of medical sciences nursing x one Year two Bachelor of medical sciences (BMedSci) adult n Year two BMedSci health and human sciences x one	ursing x four		
Service users and carers	\square		
If you stated no above, please provide the reason and mitigation: No apprenticeship route is being considered for approval.			





Additional comments: None identified.

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

	YES	NO	
Specialist teaching accommodation (e.g. clinical		\square	
skills/simulation suites)			
Library facilities		\square	
Technology enhanced learning		\square	
Virtual learning environment			
Educational audit tools/documentation			
Practice learning environments	\bowtie		
If yes, state where visited/findings:			
Doncaster Royal Infirmary			
Bassetlaw Hospital Maternity Services			
Rotherham Hospital Maternity Services			
Barnsley Hospital Maternity Services			
Practice visits undertaken remotely during the COVID-19	bandemic.		
System regulator reports reviewed for practice learning	\boxtimes		
partners			
System regulator reports list:			
Care Quality Commission (CQC) inspection report, Sheffie	eld Teaching	g Hospitals	
NHS Foundation Trust, 14 November 2018			
CQC inspection report, The Rotherham NHS Foundation			
CQC quality report, Rotherham General Hospital, 22 Sept			
CQC inspection report, Doncaster and Bassetlaw NHS Fo February 2020	undation 1r	ust, 19	
CQC quality report, Barnsley Hospital NHS Foundation Tr	ust, 13 Janu	uary 2016	
CQC inspection report, Chesterfield Royal Hospital NHS F			
May 2020		·	
If you stated no above, please provide the reason and miti	•		
UoS is an established AEI for nursing and visits to UoS fac	cilities were	n't needed.	
Additional comments:			
None identified.			

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Issue record			
Final Report			
Author(s):	Jan Bowyer Sandra Stephenson	Date:	6 June 2021
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Submitted by:	Amy Young	Date:	15 July 2021
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