**Nursing & Midwifery Council**

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

**MOTT MACDONALD**

## Programme approval visit report

**Section one**

| | |
|---|---|
| **Programme provider name:** | University of Essex |
| **Programme reviewed:** | Pre-registration nursing associate ☐<br><br>Nursing associate apprenticeship ☒ |
| **Title of programme:** | <br>FdSc Nursing Associate (Apprenticeship) |
| **Academic levels:** | |
| Pre-registration nursing associate | England<br>☐ Level 5 |
| Nursing associate apprenticeship | England<br>☒ Level 5 |
| **Date of approval visit:** | 8-9 December 2021 |
| **Programme start date:**<br><br>    Pre-registration nursing associate<br>    Nursing associate apprenticeship | <br><br>N/A<br>5 October 2022 |
| **QA visitor(s):** | Registrant Visitor: Maureen Harrison<br>Lay Visitor: Sandra Stephenson |

| Summary of review and findings |
|---|

The University of Essex (UoE) is an approved education institution (AEI) offering a pre-registration nursing associate (NA) foundation degree programme at Colchester and Southend campuses. The school of health and social care at UoE present a two-year, apprenticeship programme for registered NAs for delivery at the same campuses. The first cohort commences in October 2022.

The UoE has robust collaborative arrangements in place for programme initiation, development and delivery with employer partners (EPs): Essex Partnership University NHS Foundation Trust, Mid and South Essex NHS Foundation Trust and Provide. Commitment statements, apprenticeship agreements and provider placement agreements are in place. The approval process confirms strong commitment of EPs to the NA apprenticeship route with all EPs increasing resources to support apprentices.

The approval visit was undertaken face-to-face with visits to practice learning environments.

The UoE works in close partnership with another AEI in the region and regional practice learning partners (PLPs) and EPs to ensure Standards for student supervision and assessment (SSSA) (NMC, 2018) are maintained. To adopt a consistent approach in practice learning environments, the EPs and AEIs share SSSA training resources and documentation, including the England NA practice assessment document (NAPAD) via the Midlands, Yorkshire and east practice learning group (MYEPLG).

The UoE works in partnership with EPs to address any concerns raised in external system regulator reports, including those from the Care Quality Commission (CQC). The development and implementation of action plans designed to prevent any compromise in safety or the students' learning experience are robust and shared with the other EPs and the AEI.

Documentary evidence and the approval process confirm evidence of effective partnership working between the programme team, EPs, PLPs, apprentices, students and service users and carers (SUCs). There's considerable support for the implementation of a NA apprenticeship programme.

Arrangements at programme level don't meet the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) or the SSSA.

The programme is recommended to the NMC for approval subject to two NMC conditions and one university condition. One NMC recommendation and one university recommendation are made.

Updated 27 January 2022:

Evidence is provided to confirm that the changes required to meet the two NMC conditions have been made. Communication from the AEI confirms the university condition is met. The three conditions are met.

The programme is recommended to the NMC for approval.

| Recommended outcome of the approval panel | |
|---|---|
| **Recommended outcome to the NMC:** | Programme is recommended to the NMC for approval ☐<br><br>Programme is recommended for approval subject to specific conditions being met ☒<br><br>Recommended to refuse approval of the programme ☐ |
| **Conditions:** | **Effective partnership working: collaboration, culture, communication and resources:**<br><br>None identified.<br><br>**Selection, admission and progression:**<br><br>None identified.<br><br>**Practice learning:**<br><br>None identified.<br><br>**Assessment, fitness for practice and award:**<br><br>Condition one: Provide evidence in programme and student facing documentation of a health numeracy assessment which must be passed at 100 percent. (SFNME R3.2; Standards for pre-registration nursing associates (SPNA) (NMC, 2018) R4.1, R4.6)<br><br>Condition two: Produce a schedule of communication between practice assessors and academic assessors in relation to student progression. (SSSA R7.9; SPNA R4.2)<br><br>**Education governance: management and quality assurance:** |

| | |
|---|---|
| | Condition three: Review documentation to ensure apprentice compliance rules are met. (University condition) |
| **Date condition(s) to be met:** | 1 February 2022 |
| **Recommendations to enhance the programme delivery:** | Recommendation one: Consider signposting the opportunity for practice assessors to access previous student practice assessment document (PAD) records. (SSSA R7.3; SPNA R4.2) |
| | Recommendation two: Proof-read documentation to ensure consistency. (University recommendation) |
| **Focused areas for future monitoring:** | Implementation of the SSSA for NA apprentices. |
| | Exposure to a diverse range of people, across the lifespan and in a variety of settings. |

| Programme is recommended for approval subject to specific conditions being met |
|---|
| **Commentary post review of evidence against conditions:**<br><br>The AEI has submitted revised documentation to meet the conditions set at the approval visit.<br><br>The year two module guide and the student handbook are updated, clearly identifying the requirement and timing of a health numeracy assessment and calculation of medicines which must be passed with a score of 100 percent. Condition one is now met.<br><br>A schedule of communication between the academic assessor and practice assessor that monitors students' progression at the start, mid-point and endpoint of each period of practice learning is provided. Clear processes are in place to ensure a record of a student's progress is shared between the academic assessor and practice assessor. Documentation, guidance and preparation for practice assessors and academic assessors is updated to clarify the required communication and collaboration between practice assessors and academic assessors. Condition two is now met.<br><br>The AEI has confirmed that the university condition has been met. |

| AEI Observations | Observations have been made by the education institution    YES ☐ NO ☒ |
|---|---|

| | |
|---|---|
| **Summary of observations made, if applicable** | |
| **Final recommendation made to NMC:** | Programme is recommended to the NMC for approval ☒<br><br>Recommended to refuse approval of the programme ☐ |
| **Date condition(s) met:** | 27 January 2022 |

**Section three**

| **NMC Programme standards** |
|---|
| Please refer to NMC standards reference points<br>*Standards for pre-registration nursing associate programmes* (NMC, 2018)<br>*Standards of proficiency for nursing associates* (NMC, 2018)<br>*Standards framework for nursing and midwifery education* (NMC, 2018)<br>*Standards for student supervision and assessment* (NMC, 2018)<br>*The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates* (NMC, 2015 updated 2018)<br>*Quality assurance framework for nursing, midwifery and nursing associate education* (NMC, 2020)<br>*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:**<br><br>*Standards framework for nursing and midwifery education* (NMC, 2018)<br><br>**Standard 1: The learning culture:**<br>R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders<br>R1.13 work with service providers to demonstrate and promote inter-professional learning and working<br><br>**Standard 2: Educational governance and quality:**<br>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<br>R2.4 comply with NMC *Standards for student supervision and assessment*<br>R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of |

communication and accountability for the development, delivery, quality assurance and evaluation of their programmes

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

**Standard 3: Student empowerment:**

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

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

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

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

**Standard 4: Educators and assessors:**

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

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

R4.10 share effective practice and learn from others

**Standard 5: Curricula and assessment:**

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

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

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

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

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

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

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

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

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

**Standard 3: Practice supervisors: role and responsibilities:**
R3.3 support and supervise students, providing feedback on their progress
    towards, and achievement of, proficiencies and skills

**Standard 4: Practice supervisors: contribution to assessment and progression:**
R4.3 have sufficient opportunities to engage with practice assessors and academic
    assessors to share relevant observations on the conduct, proficiency and
    achievement of the students they are supervising

**Standard 7: Practice assessors: responsibilities:**
R7.9 communication and collaboration between practice and academic assessors
    is scheduled for relevant points in programme structure and student
    progression

**Standard 9: Academic assessors: responsibilities:**
R9.6 communication and collaboration between academic and practice assessors
    is scheduled for relevant points in programme structure and student
    progression

| Findings against the standard and requirements |
| :---: |

**Provide an <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.**

Documentation and the approval visit confirm partnership working with EPs, Health Education England, UoE colleagues, AEIs, students and SUCs to design, develop, deliver and evaluate a pre-registration NA programme.

EPs talk of strong and positive relationships with UoE. They say they're listened to. We're assured that the workforce needs of EPs are strongly embedded in the curriculum design. EPs detail strategies in place to support NA apprentices. One organisation is employing 'legacy nurses' (registered nurses) to work with NA apprentices, and others are implementing peer support groups. All EPs are committed to providing external practice learning opportunities to the apprentices of other local organisations to give NA apprentices experiences of care in a variety of settings.

The UoE and EPs work collaboratively with another AEI, PLPs and private, voluntary and independent providers of practice learning in Essex through the strategic practice education group (PEG). An operational practice education committee (PEC) has a partnership approach to develop and quality enhance practice learning environments. Good practice and approaches to ensure sufficient capacity and capability of learning environments is shared. Protocols for the implementation of the NA role, which is relatively new in the region, are explored.

EPs tell us they welcome and need the NA role in their workforce. The apprenticeship pathway widens opportunities for local employees. The approval process provides many examples of the efficacy of the PEG and PEC in meeting challenges of supporting learners at a time when the work demands of healthcare organisations increased significantly. EPs and the programme team say these meetings have increased in frequency over the last two years. Pertinent issues such as CQC findings are shared, with action plans produced collaboratively.

Through the PEG meetings and stakeholder engagement events, partners develop the programme and agree approaches to recruitment, admissions, resources, curriculum content and monitoring. EPs tell us they work closely with prospective candidates to support them onto the apprenticeship programme. Entry requirements have been agreed with the UoE to ensure apprentices meet functional skills levels before entry. All partners agree that NA apprentices shouldn't have additional study to undertake while on the programme. Applicants are interviewed by a UoE representative and an EP representative, with SUCs contributing interview questions. SUCs tell us they're involved with recruitment and selection with several programmes and receive appropriate training, including equality and diversity and unconscious bias.

The UoE is a member of the MYEPLG, working collaboratively to develop and adopt the England NAPAD. Resources to support practice supervisors and practice assessors in their preparation to meet the requirements of the SSSA are jointly developed.

The programme team work with academic colleagues who run an assistant practitioner curriculum. Some of the modules on the NA programme are shared. There are opportunities for inter-professional working and learning from allied health professional academics and students (occupational therapy, speech and language therapy, social work and clinical psychology).

The approval process confirms that the views of existing students and apprentices have been sought to improve the apprenticeship experience, and they've contributed recommendations for programme content, structure and practice-based learning. Apprentices tell us they feedback on modules and each practice learning placement. An apprentice representative is invited to attend the student voice group and the programme committee to ensure the apprentice experience is considered. PLPs tell us that students, including apprentices, attend multidisciplinary forums and student conferences.

There's evidence of established and robust SUC partnerships at the UoE. SUCs confirm involvement in programme development, delivery and evaluation. They provide examples of contribution to module activities, simulation and assessment of learning. SUCs suggest practice learning experiences for future NA apprentices who haven't had the opportunity of these experiences in their own organisation.

Documentation and the approval process confirm that partnerships between the AEI, EPs, PLPs, students and SUCs is effective.

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

**MET** ☒  **NOT MET** ☐

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

**MET** ☒  **NOT MET** ☐

| Post Event Review |
| --- |
| **Identify how the condition(s) is met:** |
| N/A |
| **Date condition(s) met:** |
| N/A |
| **Revised outcome after condition(s) met:**  **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:

R1.1.1 demonstrate values in accordance with the Code

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

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

R1.1.4 can demonstrate proficiency in English language

R1.1.5 have capability in literacy to meet programme outcomes

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

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

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

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

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

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

*Standards framework for nursing and midwifery education* specifically*:* R2.6, R2.7, R2.8, R2.10

| **Findings against the standard and requirements** |
|---|

**Evidence provides assurance that the following QA approval criteria are met:**

- There is evidence of selection processes, including statements on digital literacy, literacy, numeracy, values-based selection criteria and capability to learn behaviour according to the Code, educational entry standard required and progression and assessment strategy, English language proficiency criteria is specified in recruitment processes. Service users and practitioners are involved in selection processes. (R1.1.1 – R1.1.6)
  **YES** ☒   **NO** ☐

- There is evidence of occupational health entry criteria, inoculation and immunisation plans, fitness for nursing assessments, Criminal record checks and fitness for practice processes are detailed. (R1.2)
  **YES** ☒   **NO** ☐

- Health and character processes are evidenced including information given to applicants and students including details of periodic health and character review timescales. Fitness for practice processes are evidenced and information given to applicants and students are detailed. (R1.3)
  **YES** ☒   **NO** ☐

**Nursing & Midwifery Council**

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

**MOTT MACDONALD**

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

**YES** ☒　　　**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 QA approval criteria below is met or not met.**

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

**MET** ☒　　　**NOT MET** ☐

R1.5 is met. The UoE's recognition of prior learning (RPL) policy permits a candidate to seek to import learning to a maximum value of two thirds of the volume of credit needed to be studied for a UoE award. The NA programme only allows up to 50 percent of the programme to go through these processes in line with NMC requirements.

The approval process confirms a partnership approach of support by the programme team and EPs before the commencement of the programme. Previous learning is mapped against the SPNA and programme outcomes. There's clear signposting to opportunity for RPL in student-facing documentation.

Under the apprenticeship standards, should a NMC registered nurse without restrictions on their practice wish to access apprenticeship levy funding for the NA apprenticeship programme, there would need to be evidence of 'new learning'. The programme team and EPs agree this would not be the case for an NMC registered nurse. Partners agree they would normally not be able accept NMC registered nurses onto the apprenticeship route.

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

**MET** ☒　　　**NOT MET** ☐

R1.6 is met. Student progression and competence in numeracy, literacy and digital and technological literacy is recorded in the NAPAD and ongoing achievement record (OAR). These are mapped against the SPNA. The programme team and

apprentices confirm that the UoE 'skills for success' strategy provides support for a range of study skills either online, individually or in small groups or workshops. Digital and technological literacy is included in the 'study and lifelong learning' module. EPs tell us they support all employees to develop their literacy and numeracy skills and offer pre-application support for apprentices.

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

**YES** ☒          **NO** ☐

| Outcome | | |
|---|---|---|
| **Is the standard met?** | **MET** ☒ | **NOT MET** ☐ |

**Date:** 9 December 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 education institutions, together with practice learning partners, must:**

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

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

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

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

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

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

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

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

Nursing & Midwifery Council

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

MOTT MACDONALD

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

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

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

*Standards framework for nursing and midwifery education* specifically*:*
*R1.9, R1.13; R2.2, R2.14, R2.15, R2.18, R2.19; R3.1, R3.2, R3.4, R3.7, R3.9, R3.10, R3.15, R 3.16; R5.1 - R5.16.*

*Standards for student supervision and assessment* specifically*:*
*R1.2, R1.3, R1.7, R1.10, R1.11*

## Findings against the standard and requirements

**Evidence provides assurance that the following QA approval criteria are met:**

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

    **YES** ☒     **NO** ☐

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

    **YES** ☒     **NO** ☐

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

    **YES** ☒     **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 QA approval criteria below is met or not met.**

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

    **MET** ☒     **NOT MET** ☐

R2.4 is met. Documentation, the programme team, EPs, students and SUCs confirm that the design and delivery of the programme supports students in both theory and practice to experience a non-field specific NA programme, across the life span and in a variety of settings. The programme team offers nursing expertise across adult, mental health, learning disabilities and health visiting.

SUCs with lived experiences of services support teaching and learning through workshops such as survivors of childhood trauma, people and carers living with learning disabilities and those who experience dementia and other mental health issues. Students tell us they value the experience of learning from SUCs and it supports their understanding of the reality of the patient experience. SUCs tell us they receive very positive feedback from students, for example students say they'll remember the SUC lived experience story for the rest of their lives.

Practice learning opportunities are based in three health and social care settings: hospital, home and close to home. We're assured of close monitoring from the programme team and EPs for each student to have practice learning experience across the life span and in a variety of settings.

All EPs speak of collaboration with each other and commitment to providing external practice learning opportunities to employees from other EP organisations. We are assured NA apprentices will experience care in a variety of settings.

---

**Evidence provides assurance that the following QA approval criteria are met:**

- There is evidence that mapping has been undertaken to show how the programme outcomes, module outcomes and content meets the *Standards of proficiency for nursing associates* and programme outcomes. (R2.5)
  **YES** ☒     **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 QA approval criteria below is met or not met.**

- There is evidence that:
  - the programme meets NMC requirements on programme hours and programme length;
  - programmed learning is sufficient to allow the students to be able to meet the *Standards of proficiency for nursing associates.* (R2.6)
    **MET** ☒     **NOT MET** ☐

R2.6 is met. Documentation and the approval visit confirm the programme meets NMC requirements on programme hours and length. The programme length is two years. Theory hours are 1,224 and practice hours are 1,237.5. Any theory or practice hours missed must be made up by additional weeks of attendance. The programme team and EPs confirm collaborative strategies are in place to monitor attendance and to allow apprentices to make up programme time.

There are a combination of theory and practice modules.

We're assured by the programme team, EPs, practice assessors and apprentices of robust processes in place to ensure programme learning enables NA apprentices to meet the SPNA.

- The programme structure demonstrates an equal balance of theory and practice learning. This is detailed in the designated hours in the module descriptors and practice learning allocations. A range of learning and teaching strategies are detailed in the programme specification, programme handbook and module descriptors with theory / practice balance detailed at each part of the programme and at the end point. There are appropriate module aims, descriptors and outcomes specified. There is a practice allocation model for the delivery of the programme that clearly demonstrates the achievement of designated hours for the programme detailed. (R2.7)

**MET** ☒     **NOT MET** ☐

R2.7 is met. NA apprentices attend the UoE or have independent study one day a week (eight hours per week). There are two theory-based and two theory-practice based modules in year one. In year two there are two theory and one theory-practice based modules. Module aims, descriptors and outcomes identify a developmental approach with learning from the sciences which support person centred care. There's a strong emphasis on learning across the age span with an inter-professional approach.

Documentation, the programme team and apprentices say learning and teaching strategies include lectures, seminars, practical skills sessions, enquiry-based learning, blended learning, reflection, independent study and the use of external health professionals and SUCs.

Each year there's a practice-based module which is delivered over the whole year. Practice learning equates to 50 percent of the programme.

The practice allocation model for delivery of practice learning is for each NA apprentice to have one day a week in their home-based employment organisation undertaking protected learning. Each apprentice will also have five, five-week learning placements (30 hours per week) in an external practice learning environment away from their home base. These placements will be allocated by the UoE's practice placement team in collaboration with EPs. How each EP manages the home-based practice learning differs. One EP will release their NA apprentice to learn in different departments within the organisation. This EP employs an individual to manage 'hub and spoke' within the organisation. There are agreements in place to ensure most external placements are within a reasonable geographical distance to the apprentice's home base. The programme team and EPs say no external placements away from the employment base are arranged between November and February owing to demands on services.

**Evidence provides assurance that the following QA approval criteria are met:**

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

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

**YES** ☒　　　**NO** ☐

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

**YES** ☒　　　**NO** ☐

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

**YES** ☒　　　**NO** ☐

| Outcome | | |
|---|---|---|
| **Is the standard met?** | **MET** ☒ | **NOT MET** ☐ |
| **Date:** 9 December 2021 | | |
| **Post event review** | | |
| **Identify how the condition(s) is met:** <br><br> N/A | | |
| **Date condition(s) met:** <br><br> N/A | | |
| **Revised outcome after condition(s) met:** <br><br> N/A | **MET** ☐ | **NOT MET** ☐ |

| Standard 3: Practice learning |
|---|

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

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

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

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

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

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

Nursing & Midwifery Council

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

MOTT MACDONALD

R3.5.1 Option A: nursing associate students are supernumerary when they are learning in practice

R3.5.2 Option B: nursing associate students who are on work-placed learning routes:

R3.5.2.1 are released for at least 20 percent of the programme for academic study

R3.5.2.2 are released for at least 20 percent of the programme time, which is assured protected learning time in external practice placements, enabling them to develop the breadth of experience required for a generic role, and

R3.5.2.3 protected learning time must be assured for the remainder of the required programme hours.

*Standards framework for nursing and midwifery education* specifically:
R1.1, R1.3, R1.5; R2.9, R2.14; R3.3, R3.5, R 3.7, R3.16; R5.1, R5.7, R5.10, R5.12

*Standards for student supervision and assessment,* specifically:
R1.1 – R1.11

| **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 QA approval criteria below is met or not met**.

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

MET ☒          NOT MET ☐

R3.1 is met. Programme documentation and discussion at the approval visit confirm that the England NAPAD, which is mapped to the SPNA, is adopted.

Practice allocation documentation, EPs, practice education facilitators (PEFs) and apprentices confirm they experience a range of hospital, home and close to home settings which allow them to meet the diverse care needs of people across the lifespan. The regional approach to practice learning environment audit ensures the practice learning environment meets the needs of the NA apprentice.

EPs, PEFs and apprentices say apprentices are supervised by a range of health professionals. Apprentices are encouraged to be proactive and reflect on achievement of the SPNA. PEFs, practice supervisors and apprentices describe how opportunities are facilitated to enable apprentices to deliver safe and effective care, to a diverse range of people, across the lifespan and in a variety of settings. There are strategies in place to facilitate the meeting of the SPNA and annexe A and B. PEFs, practice supervisors and students speak of having 'spoke' learning experiences to gain proficiencies, procedures and skills not available in their

Nursing & Midwifery Council

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

MOTT MACDONALD

placement. We're assured of a flexible and adaptable approach to maximise practice learning opportunities.

The approval process confirms that fitness to practise and escalation of concerns policies and processes are robust and understood by all stakeholders. EPs confirm their involvement in UoE fitness to practise procedures. Students and apprentices tell us they know how to raise and escalate a concern and they feel safe in practice learning environments.

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

  **MET** ☒     **NOT MET** ☐

R3.2 is met. Documentation and the approval visit confirm that most EPs operate a hub and spoke model to offer students learning opportunities in a range of services across the four fields. The hub and spoke approach is initiated through the PEG and is monitored through the PEC. Reciprocal placement arrangements between EPs allow a wide range of settings to be accessed.

If an apprentice can't achieve the required range of learning opportunities with the services provided by their EP organisation, EPs work with the UoE to find solutions. For example, an EP and the UoE arranged a second home placement for an apprentice in a sexual health setting to allow achievement of the required proficiencies. Practice allocation documents show examples of hospital placement in NHS and independent sectors in adult, mental health, learning disabilities and children and young people's nursing. Close to home placements could include the mental health community outreach team, health visiting and substance misuse service. Home placements might include nursing homes and charitable end of life services.

Learning is recorded and monitored through the NAPAD and OAR. EPs, PEFs, practice assessors and apprentices say the arrangements for tripartite interviews between line managers, the personal tutor and an apprentice are invaluable for assessing, monitoring and evaluating an apprentice's learning.

Documentation and the approval process identify robust partnership processes in place for assessing, monitoring and evaluating practice learning experiences for all learners. Apprentices say they're provided with opportunity to give feedback on every placement opportunity. PEFs say they receive learners' feedback within a fortnight.

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

  **MET** ☒     **NOT MET** ☐

R3.3 is met. The approval visit confirms the proportionate use of simulation and technology enhanced learning to develop students' skills and confidence. Apprentices say technology-enhanced learning is used to support face-to-face classroom-based teaching and to help facilitate self-directed and independent learning. Blended learning includes the use of Moodle for directed and e-learning. Information technology workshops from EPs and the UoE support apprentices to become fluent in the use of software and systems used in theory and practice. safeMedicate supports numeracy and medicines management, with the development of clinical skills supported through clinicalskills.net.

Documentation and apprentices identify that simulated practice is used primarily in the person-centred care and skills modules to effectively prepare and support students' practice as NAs. Skills-based sessions allow students to develop dexterity, apply theory and practise procedures in a safe environment. Apprentices are appreciative of simulation-based learning opportunities which support learning.

We're assured the UoE and EPs have structure and systems in place to support the learning and development of all technologies.

- There are processes in place to take account of students' individual needs and personal circumstances when allocating their practice learning including making reasonable adjustments for disabilities. (R3.4)

**MET** ☒        **NOT MET** ☐

R3.4 is met. Apprenticeship agreements identify a partnership commitment to review support. Disclosure of a disability and/or health condition isn't mandatory but is highly recommended by the UoE. The programme team say, in addition to each apprentice having occupational health and disclosure and barring service checks from their EP, the UoE also do these checks. This enables all apprentices to have maximum support from both EP and UoE services. EPs, PEFs, the programme team and apprentices all confirm support is available through the student wellbeing and inclusivity service, personal tutor and EPs.

- Evidence that nursing associate students have protected learning time through one of the two options (A or B). There must be clarity of evidence to support the single option selected.
  Processes are in place to ensure that protected learning time will be monitored in accordance with the selected option.
  Evidence that students will be released for a minimum of 20 percent of the programme for academic study.
  Evidence that students will be released for a minimum of 20 percent of the programme time, which is assured protected learning time in external practice placements, enabling them to develop the breadth of experience required for a generic role.

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

**MET** ☒     **NOT MET** ☐

R3.5 is met. EP commitment statements and apprenticeship agreements detail that students are released for 20 percent of the programme for academic study.

One day a week, students are in the employment setting undertaking protected practice learning hours. EPs have different models to organise protected learning time. We're assured by apprentices and operational practice staff who support students during protected learning time of time being protected for on-the-job learning. Apprentices and practice supervisors tell us they meet at the start of each protected learning time to negotiate and identify the day's learning. This is reflected upon jointly at the end of the day. Practice assessors tell us this approach ensures appropriate learning opportunities are identified to meet the required proficiencies.

EPs and apprentices understand the difference between employment contractual hours and protected learning hours. Apprentices and EPs say differentiating the learning hours by wearing a different uniform is helpful. They say wearing the UoE student uniform during protected learning time and supernumerary practice clearly identifies their role as a learner to both SUCs and the multidisciplinary team.

Students are released for 20 percent of programme time in external placements. This is managed by five blocks of 30-hour, five-week 'away' placements where students are supernumerary.

All learning hours are recorded and monitored by UoE and EPs.

| | |
|---|---|
| Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to practice learning are met | **YES** ☒     **NO** ☐ |
| Assurance is provided that Gateway 2: *Standards for student supervision and assessment* relevant to practice learning are met | **YES** ☒     **NO** ☐ |

| **Outcome** | |
|---|---|
| **Is the standard met?** | **MET** ☒     **NOT MET** ☐ |
| **Date:** 9 December 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 4: Supervision and assessment

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

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

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

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

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

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

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

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

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

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

*Standards framework for nursing and midwifery education* specifically*:*
R2.11; R3.5, R3.6, R 3.8, R3.11, R3.13, R3.14, R3.17;
R4.1, R4.2, R4.3, R4.4, R4.5, R4.6, R4.8, R4.11; R5.9

*Standards for student supervision and assessment*
R4.1 – R4.11

### 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 QA approval criteria below is met or not met**

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

**MET** ☐      **NOT MET** ☒

R4.1 is not met. Documentation and the approval process evidence that the UoE and EPs regularly monitor and review processes for learner support through teaching and learning quality enhancement committees. EPs and PLPs speak positively about co-operation with the UoE. It's evident that constructive relationships between partners are established. There's a culture which prioritises the safety of SUCs, staff, apprentices and educators. Rigorous processes are in place which demonstrate that education and training is valued. Senior AEI managers assure us resources are in place and regularly monitored to ensure comparable learning environments between Colchester and Southend.

At the PEG and PEC any issues pertinent to practice learning are explored and action plans are made, if needed, and resolved. We're provided with examples of how responsive these committees are to issues following CQC visits and to service demands. We're assured that partners review practice learning capacity with innovative ideas for increasing capacity shared.

Documentary analysis indicates the UoE induction, training, ongoing development and support for academic staff ensures compliance with the SFNME in relation to support, supervision, learning and assessment. The programme team are experienced in higher education and have relevant clinical experience. The programme leaders are NMC registrants.

We met PEFs who have experience of supporting NA apprentices. EPs and PLPs describe the requirement to manage the expectations of apprentices and service staff as NA apprentices are supported to learn and develop into their new role from healthcare assistants to NAs.

Apprentices say they're empowered to be proactive in meeting learning outcomes. Apprentices feel very supported in both theory and practice. There are opportunities for evaluation of learning experiences and they're positive about how feedback is supportive and allows development.

Programme documentation doesn't clearly indicate there's a compulsory medicines numeracy assessment with a pass mark of 100 percent in year two of the programme. Student-facing documentation is inadequate in providing the timing for the requirement. (Condition one)

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

R4.2 is not met. To consistently apply policies and procedures to meet the SSSA, EPs, PLPs and AEIs have regular MYEPLG meetings. Partnership agreements for this collaboration are in place.

EPs and the programme team assure us of a regional approach to manage the preparation and support of staff for the roles identified in SSSA. EPs and NA apprentices are aware of the roles of practice supervisor, practice assessor and academic assessor. PEFs, practice supervisors and practice assessors confirm they oversee practice learning experiences to ensure learning and assessment opportunities in line with the SPNA are optimised. PEFs tell us they monitor whether staff have had SSSA training. They keep records and allocate practice supervisors and practice assessors to learners. EPs confirm only a few NAs are employed in the region but there's the intention for registered NAs to be prepared to be practice supervisors and practice assessors.

Apprentices have a personal tutor, who is their academic assessor in year one of the programme. In year two the academic assessor is different. The personal tutor does the tripartite review with practice assessors or with the apprentice's line manager. Apprentices tell us the tripartite meetings are effective and offer excellent support and communication. The tripartite meetings are scheduled for three times a year.

The approval process identifies the tripartite process is separate from the formal need for practice and academic assessors to agree progression for each apprentice. Practice assessors tell us they're confident in determining whether a learner is fit to practise. Practice assessors don't talk about the need to work in partnership with academic assessors to recommend a student for progression. The approval process demonstrates that the process for the practice assessor to collaborate with the academic assessor needs strengthening. There is limited evidence of a schedule for both parties to communicate and collaborate regarding an individual apprentice's progression. (Condition two)

The region is moving from a paper PAD to an electronic version of the NAPAD. Practice assessors tell us it's not as easy to access previous student records on the electronic version of the PAD. Currently the UoE use a paper PAD. A recommendation is made to consider signposting the opportunity for practice assessors to access previous student PAD records, either paper based or electronic. (Recommendation one)

**Evidence provides assurance that the following QA approval criteria are met:**

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

**YES** ☒       **NO** ☐

23

**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 QA approval criteria below is met or not met**

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

    **MET** ☒     **NOT MET** ☐

R4.4 is met. Documentary evidence and the approval visit confirm that clear strategies and processes are in place to provide apprentices with feedback throughout the programme to support their development. There are several opportunities for formative feedback during each module. Students and apprentices say feedback provides opportunities for improving their performance in both theory and practice. Apprentices are assessed using a range of assessment activities including coursework, written and multiple-choice examinations, portfolio, oral or viva examinations, reflective logs and the NAPAD.

Apprentices and students say they give and receive peer feedback. They also receive formative assessment feedback from practice supervisors and the practice assessor in placement learning environments.

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

    **MET** ☒     **NOT MET** ☐

R4.5 is met. Documentary evidence and the approval process provides assurance the curriculum will enable students to meet the SPNA. The NAPAD is explicitly mapped to the SPNA. There's programme mapping which illustrates how the module outcomes meet the programme outcomes which are mapped to the SPNA, including annexe A and B.

**Evidence provides assurance that the following QA approval criteria are met:**

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

    **YES** ☐     **NO** ☒

R4.6 is not met. Detail of the requirement for calculation of medicines which must be passed with a score of 100 percent isn't explicit in student facing documentation. The requirement isn't clear in the programme assessment strategy and the safeMedicate assessment is not linked to a module. (Condition one)

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

**YES** ☒      **NO** ☐

There is an assessment strategy with details of the weighting for all credit bearing assessments. Theory and practice weighting is calculated and detailed in award criteria and programme handbooks. (R4.8)

**YES** ☒      **NO** ☐

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

**YES** ☒      **NO** ☐

---

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

**YES** ☐      **NO** ☒

Student facing programme documentation must provide accurate and clear information about the requirement and timing of a health numeracy assessment and calculation of medicines which must be passed with a score of 100 percent. (Condition one)

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

**YES** ☐      **NO** ☒

There's insufficient evidence of practice assessors and academic assessors communicating and collaborating to agree student progression. This process isn't included as part of the tripartite interview. (Condition two)

---

| **Outcome** |
| --- |

| **Is the standard met?** | **MET** ☐    **NOT MET** ☒ |
| --- | --- |

Student facing programme documentation must provide accurate and clear information about the requirement and timing of a health numeracy assessment related to NA proficiencies and calculation of medicines which must be passed with a score of 100 percent.

Condition one: Provide evidence in programme and student facing documentation of a health numeracy assessment which must be passed at 100 percent. (SFNME R3.2; SPNA R4.1, R4.6)

There's insufficient evidence of practice assessors and academic assessors communicating and collaborating to agree student progression. This process isn't included as part of the tripartite interview.

Condition two: Produce a schedule of communication between practice assessors and academic assessors in relation to student progression. (SSSA R7.9: SPNA R4.2)

**Date:** 9 December 2021

| Post event review |
| --- |
| **Identify how the condition(s) is met:**<br><br>Condition one: A year two module guide and the student handbook are updated clearly identifying the requirement and timing of a health numeracy assessment and calculation of medicines which must be passed with a score of 100 percent.<br><br>Condition one is now met.<br><br>Evidence:<br><br>UoE HS709 module guide 2022 2023, January 2022.<br>UoE NA apprenticeship handbook updated, undated<br>UoE Record of response to recommendations and/or conditions V2, undated<br><br>Condition two: A schedule of communication between the academic assessor and practice assessor that monitors students' progression at the start, mid-point and end-point of each period of practice learning is provided. Clear processes are in place to ensure a record of a student's progress is shared between the academic assessor and practice assessor. Documentation, guidance and preparation for practice assessors and academic assessors is updated to clarify the required communication and collaboration between practice and academic assessors.<br><br>Condition two is now met.<br><br>Evidence:<br>UoE NA academic assessor guide updated, undated<br>UoE practice assessor and academic assessor schedule of communication record of progress, undated<br>UoE placement guidelines updated, July 2021<br>UoE Record of response to recommendations and/or conditions V2, undated |

**Date condition(s) met:** 27 January 2022

**Revised outcome after condition(s) met:**   MET ☒   NOT MET ☐

| Standard 5: Qualification to be awarded |
| --- |
| **Approved education institutions, together with practice learning partners, must:**<br>R5.1 ensure that the minimum award for a nursing associate programme is a Foundation Degree of the Regulated Qualifications Framework (England), which is typically two years in length, and |

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

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

## Findings against the standards and requirements

**Evidence provides assurance that the following QA approval criteria are met:**

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

  **YES** ☒    **NO** ☐

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

  **YES** ☒    **NO** ☐

**Fall Back Award**

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

**YES** ☐  **NO** ☐    **N/A** ☒

There's no fall back award with eligibility for registration with the NMC as a NA.

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

**YES** ☒    **NO** ☐

| Outcome |
|---|
| **Is the standard met?**   MET ☒    NOT MET ☐ |

**Date:** 9 December 2021

| Post event review |
|---|

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

N/A

**Date condition(s) met:**

N/A

N/A

**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 documentation includes collaboration and communication arrangements with HE/FE partner if relevant | ☒ | ☐ |
| Programme specification | ☒ | ☐ |
| Module descriptors | ☒ | ☐ |
| Student facing documentation including: programme handbook | ☒ | ☐ |
| Student university handbook | ☒ | ☐ |
| Student facing documentation includes HE/FE college information for students, if relevant | ☒ | ☐ |
| 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 | ☒ | ☐ |
| Placement allocation / structure of programme | ☒ | ☐ |
| PAD linked to competence outcomes, and mapped against standards of proficiency | ☒ | ☐ |
| Mapping document providing evidence of how the education institution has met the *Standards framework for nursing and midwifery education* (NMC, 2018) (Gateway 1) | ☒ | ☐ |
| Mapping document providing evidence of how the *Standards for student supervision and assessment* (NMC, 2018) apply to the programme. (Gateway 2) | ☒ | ☐ |
| Mapping document providing evidence of how the education institution has met the *Standards for pre-registration nursing associate programmes* (NMC, 2018) (Gateway 3) | ☒ | ☐ |
| Curricula vitae (CV) for relevant staff | ☒ | ☐ |
| CV of the registered nurse or nursing associate responsible for directing the education programme | ☒ | ☐ |
| Registrant academic staff details checked on NMC website | ☒ | ☐ |

| | | |
|---|---|---|
| External examiner appointments and arrangements | ☒ | ☐ |
| Written placement agreements between the education institution and associated practice learning partners to support the programme intentions. | ☒ | ☐ |
| Written agreement(s) to support the programme intentions between the education institution and employer partners for apprenticeship routes (if applicable). | ☒ | ☐ |
| If you stated no above, please provide the reason and mitigation: | | |
| List additional documentation: | | |
| Additional comments:<br>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 | ☒ | ☐ |
| HE/FE college senior managers, if relevant | ☒ | ☐ |
| 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) | ☒ | ☐ |
| Programme team/academic assessors | ☒ | ☐ |
| Practice leads/practice supervisors/practice assessors | ☒ | ☐ |
| Students | ☒ | ☐ |
| If yes, please identify cohort year/programme of study:<br>One x BSc (adult) nursing and nurse degree apprentice, October 2020 cohort<br>One x BSc (adult) nursing and nurse degree apprentice, April 2021 cohort<br>Two x BSc (adult) nursing (direct entry), October 2020 cohort<br>One x BSc (adult) nursing (mental health) (direct entry), October 2019 cohort | | |
| Service users and carers | ☒ | ☐ |
| If you stated no to any of the above, please provide the reason and mitigation: | | |
| Additional comments:<br>None identified. | | |

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

Nursing & Midwifery Council

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

MOTT MACDONALD

| | YES | NO |
|---|---|---|
| Specialist teaching accommodation (e.g., clinical skills/simulation suites) | ☐ | ☒ |
| Library facilities | ☐ | ☒ |
| Technology enhanced learning / virtual learning environment | ☐ | ☒ |
| Educational audit tools/documentation | ☒ | ☐ |
| Practice learning environments | ☒ | ☐ |
| The following practice learning environments were visited:<br><br>Brockfield House, Kemble Way, Runwell, SS11 7FE – Essex Partnership University NHS Foundation Trust, forensic mental health<br><br>Roding Ward, Essex Cardiothoracic Centre, Basildon Hospital, SS16 5NL – Mid and South Essex NHS Foundation Trust, interventional cardiology<br><br>Chelmsford integrated care team, Kestral House, CM2 5PF – Provide, community integrated care team | | |
| System regulator reports reviewed for practice learning partners | ☒ | ☐ |
| System regulator reports list:<br><br>CQC Basildon and Thurrock University Hospitals NHS Foundation Trust,10 July 2019<br>CQC Essex Partnership University NHS Foundation Trust, 9 October 2019<br>CQC Mid and South Essex NHS Foundation Trust, 8 April 2021<br>CQC The Princess Alexandra Hospital, 27 April 2021<br>CQC Southend University Hospital NHS Foundation Trust, 6 March 2020 | | |
| If you stated no to any of the above, please provide the reason and mitigation: UoE is an established AEI. The approval process provides updates on staffing and facility resources. A visit to AEI physical resources isn't needed. | | |
| Additional comments:<br>None identified. | | |

| Issue record | | | |
|---|---|---|---|
| **Final Report** | | | |
| Author(s): | Maureen Harrison Sandra Stephenson | Date: | 13 December 2021 |
| Checked by: | Pamela Page | Date: | 14 December 2021 |
| Submitted by: | Amy Young | Date: | 10 February 2022 |
| Approved by: | Emiko Hughes | Date: | 11 February 2022 |