

## Programme approval report

### Section one

<b>Programme provider name:</b>	University of Hertfordshire
<b>Programme reviewed:</b>	Registered Midwife - 18M <input checked="" type="checkbox"/> Registered Midwife - 24M <input type="checkbox"/> Registered Midwife - 36M <input checked="" type="checkbox"/> Registered Midwife - degree apprentice <input type="checkbox"/>
<b>Title of programme(s):</b>	BSc (Hons) Midwifery (shortened) BSc (Hons) Midwifery Master of Midwifery (shortened)
<b>Academic levels:</b>	
Registered Midwife - 18M	England, Wales, Northern Ireland <input checked="" type="checkbox"/> Level 6 <input checked="" type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Registered Midwife - 24M	England, Wales, Northern Ireland <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Registered Midwife - 36M	England, Wales, Northern Ireland <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Registered Midwife - degree apprentice	England, Wales, Northern Ireland <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
<b>Date of approval visit:</b>	29 September 2021

<p><b>Programme start date:</b></p> <p>Registered Midwife – 18M Registered Midwife – 24 M Registered Midwife – 36 M Registered Midwife – degree apprentice</p>	<table border="1"> <tr> <td data-bbox="740 367 1195 416">23 January 2022</td> </tr> <tr> <td data-bbox="740 416 1195 465">N/A</td> </tr> <tr> <td data-bbox="740 465 1195 515">26 September 2022</td> </tr> <tr> <td data-bbox="740 515 1195 564">N/A</td> </tr> </table>	23 January 2022	N/A	26 September 2022	N/A
23 January 2022					
N/A					
26 September 2022					
N/A					
<p><b>QA visitor(s):</b></p>	<p>Registrant Visitor: Nicola Clark Lay Visitor: Jonathan Fisher</p>				

**Section two**

**Summary of review and findings**

The University of Hertfordshire (UH) is an established and experienced approved education institution (AEI). The department of allied health professions, midwifery and social work is responsible for the planning and delivery of the midwifery provision, which sits in the school of health and social work.

The AEI proposes a pre-registration midwifery programme with three routes for approval against the Nursing and Midwifery Council (NMC) Standards framework for nursing and midwifery education (SFNME) (NMC, 2018), Standards for student supervision and assessment (SSSA) (NMC, 2018), Standards for pre-registration midwifery programmes (SPMP) (NMC, 2019) and Standards of proficiency for midwives (SPM) (NMC, 2019). The proposed programme includes a full-time undergraduate three-year BSc (Hons) midwifery programme route and a full-time midwifery shortened programme route, one at degree level and the other at master's level. All three routes leading to professional registration as a midwife.

The approval visit is undertaken via remote means.

All routes propose one intake per year; the three-year route starting in September 2022, and the shortened midwifery routes in January 2022. Student target numbers for the programme are increasing as a response to the Health Education England (HEE) midwifery expansion project.

The three routes are adopting the midwifery ongoing record of achievement (MORA) for the assessment of practice, and from September 2022 they will be using My Knowledge map as the on-line platform.

The MORA is the product of a collaborative development based on the established pan London model. The development of the MORA used regional stakeholder engagement including all lead midwives for education (LMEs) in England and Northern Ireland and is supported by HEE.

The documentation and approval visit indicate close partnerships between the AEI, students, practice learning partners (PLPs) and service users and carers (SUCs) at both operational and strategic levels. Senior managers from PLPs agree to support practice learning opportunities and the SSSA. The documentation evidences involvement between all stakeholders in the development of the proposed midwifery programme.

Documentation for the programme indicate curriculum content, modes of delivery and practice experiences are designed to meet the SSSA and the SPMP. Educational audits of practice areas are undertaken in collaboration with PLPs

every two years using the schools electronic document management system and are available to view on CANVAS, the virtual learning platform for students.

Recognition of prior learning (RPL) isn't available for pre-registration midwifery programmes.

The SFNME isn't met at programme level as conditions apply.

The SSSA are met at programme level.

The programme is recommended for approval subject to three NMC specific conditions, two joint NMC and university conditions and two specific university conditions. Two joint NMC and university recommendations and one specific university recommendation are made.

**Recommended outcome of the approval panel**

**Recommended outcome to the NMC:**

- Programme is recommended to the NMC for approval
- Programme is recommended for approval subject to specific conditions being met
- Recommended to refuse approval of the programme

**Conditions:**

**Effective partnership working: collaboration, culture, communication and resources:**

Condition five: To produce an action plan to demonstrate how the programme team will actively involve PLPs, students and diverse service users in future programme planning, recruitment, delivery, assessment, and evaluation (SFNME R1.12, SPMP R2.4) (Joint NMC and university condition).

**Selection, admission and progression:**

Condition three: To establish a robust process to ensure that equality and diversity training is undertaken and documented prior to involvement in student recruitment and selection (SFNME R4.3, SPMP R1.4)

**Practice learning:**

Condition four: To provide a detailed placement plan, including any elective arrangements, which evidences how practice hours are met and how students will experience midwifery care for a diverse population across a range of settings (SPMP R3.5).

**Assessment, fitness for practice and award:**

Condition one: To make explicit within the relevant definitive module descriptors the 100 percent pass mark for the numeracy calculation (SPMP R4.5) (Joint NMC and university condition).

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

Condition two:

To provide a mapping document which evidences how the NMC standards of proficiency for midwives are addressed (SPMP R2.2).

Condition six: That both the module and programme external examiner(s) currently appointed are replaced or amendments to contracts are made, as necessary (University condition).

Condition seven: Production of a programme specification and definitive module documents that have been approved by the associate dean of school (academic quality assurance) on behalf of the school academic committee or equivalent, paying particular attention to the written comments provided by the panel including the need to:

- i. Revise the level of modules for the shortened programme in line with the grading of the MORA;
- ii. Review the differentiation of programme and module learning outcomes for the Master of Midwifery programme;
- iii. Clarify and align module titles with the assessment landscape.

(University condition).

<p><b>Date condition(s) to be met:</b></p>	<p>1 November 2021</p>
<p><b>Recommendations to enhance the programme delivery:</b></p>	<p>Recommendation one: To consider evaluating the student perspective in relation to the effectiveness of the new interprofessional learning (IPL) opportunities embedded in the programme. (NMC SPMP R3.3) (Joint NMC and university recommendation).</p> <p>Recommendation two: To monitor action plan progress and evaluate the effectiveness of stakeholder engagement. (University recommendation).</p> <p>Recommendation three: To consider monitoring placement capacity in collaboration with PLPs in light of midwifery expansion plans. (SPMP R4.3) (Joint NMC and university recommendation).</p>
<p><b>Focused areas for future monitoring:</b></p>	<ul style="list-style-type: none"> <li>• Student support</li> <li>• IPL</li> <li>• Equality and diversity training for those involved in recruitment</li> <li>• Diversity and equity of practice placements</li> <li>• Placement capacity</li> <li>• Involvement of PLPs, SUCs and students in programme planning, delivery, assessment and evaluation</li> </ul>

<p align="center"><b>Programme is recommended for approval subject to specific conditions being met</b></p>
<p><b>Commentary post review of evidence against conditions:</b></p> <p>UH has evidenced through revised programme documentation how the NMC conditions are met.</p>

Relevant definitive module documents make explicit the 100 percent pass mark for the numeracy calculation. Condition one is now met.

A revised mapping document, with all definitive module guides, now accurately reflect the proficiencies to be achieved. Condition two is now met.

A process map demonstrates what service users and PLPs are required to undertake prior to becoming members of a student midwife selection panel. There is also a self-declaration form confirming that equality and diversity training has been undertaken and on what date. Condition three is now met.

Detailed programme plans for all routes evidence how practice hours are completed. The arrangements for elective placements are clearly detailed with information on how students access different models of midwifery care including diverse populations. Condition four is now met.

An action plan demonstrating how the programme team will involve PLPs, students and diverse service users in future programme planning, recruitment, delivery, assessment and evaluation is provided. Condition five is now met.

The university has confirmed that the two university conditions have been met. Condition six and seven are now met.

Assurance is provided that the SFNME and SPMP are now met.

<b>AEI Observations</b>	<b>Observations have been made by the education institution</b> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<b>Summary of observations made, if applicable</b>	N/A
<b>Final recommendation made to NMC:</b>	Programme is recommended to the NMC for approval <input checked="" type="checkbox"/> Recommended to refuse approval of the programme <input type="checkbox"/>
<b>Date condition(s) met:</b>	12 November 2021

### Section three

<b>NMC Programme standards</b>
Please refer to NMC standards reference points <a href="#">Standards for pre-registration midwifery programmes</a> (NMC, 2019)

### NMC Programme standards

[\*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)  
[\*QA Handbook\*](#) (NMC, 2020)

### Partnerships

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

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

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

**Standard 1: The learning culture:**

- R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders
- R1.13 work with service providers to demonstrate and promote inter-professional learning and working

**Standard 2: Educational governance and quality:**

- R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders
- R2.4 comply with NMC [\*Standards for student supervision and assessment\*](#)
- R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes
- R2.6 ensure that recruitment and selection of students is open, fair and transparent and includes measures to understand and address underrepresentation
- R2.7 ensure that service users and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection

**Standard 3: Student empowerment:**

- R3.3 have opportunities throughout their programme to work with and learn from a range of people in a variety of practice placements, preparing them to provide care to people with diverse needs
- R3.16 have opportunities throughout their programme to collaborate and learn with and from other professionals, to learn with and from peers, and to develop supervision and leadership skills



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

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

**Standard 4: Educators and assessors:**

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

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

R4.10 share effective practice and learn from others

**Standard 5: Curricula and assessment:**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**Findings against the standard and requirements**

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

Documentation confirms collaboration with stakeholders in the development, delivery and evaluation of the programmes at both strategic and operational levels. The stakeholders include PLPs, students and SUCs. The programme development occurred during the national and global emergency caused by the COVID-19 pandemic. Students, the service user and PLPs at the approval visit told us that this resulted in limited involvement with the development of the new programme. (Condition five). The programme team tell us that discussions were held in a variety of ways to facilitate involvement; through formal curriculum development committee meetings, individual meetings and off-site discussions with PLPs, service users and students.

PLPs tell us that they have a robust partnership working with UH, and there is an agreement with a new PLP for the proposed programmes. The programme team at the visit confirm collaboration with other AEIs who share placements with UH. There are meetings with the director of service and education from each PLP three times a year. These involve the LME, placement leads, admissions tutors and PLP education leads; as well as service and education meetings at each placement site, which also involve students.

A recent review of IPL created common learning outcomes within the proposed programmes at all academic levels. For example, IPL is embedded in the 'Infant Feeding and Relationship Building' module and is a focus for students in their personal development weeks. In year three, students undertake the 'Interprofessional Education for Midwives' module where students have the opportunity to undertake simulated learning activities, and work, for example, with paramedics and social workers. The school has a steering group with oversight for IPL and are to evaluate the effectiveness of this. (Recommendation one).

In relation to assessment, mechanisms are in place to provide students with both formative and summative assessments throughout the programme. Assessments are clearly detailed within the documentation. Assessments are varied and embrace new learning technologies. Students at the visit tell us their feedback is detailed and timely and that their feedback has informed the development of the assessment strategy for the new programmes.

Documentary evidence and the visit confirm that PLPs contribute to the recruitment and selection to the programmes. The involvement of students and SUCs is limited. (Condition five). A process for ascertaining up-to-date equality and diversity training for those involved in recruitment is not evident although PLPs tell us unconscious bias is part of training for the NHS Trusts. (Condition three).

The service user public involvement group (SUPI) was established at UH in 2015, with an identified midwifery lead. At the visit, the SUC told us that programme documentation is reviewed and involvement occurs with students' learning by providing input 'through the eyes of a SUC'. SUPI connects with a wide range of service users, and the students told us they would like more input from SUC experiences in the midwifery programmes. The senior team tell us that SUC involvement is included within the departmental budget with plans for increased involvement going forward, for example with objective structured clinical examination (OSCE) assessment to demonstrate soft skills and communication.

The SSSA is implemented for all students on midwifery programmes at UH following a successful major modification in 2019 and the adoption of the NMC emergency standards in March 2020. UH and PLPs tell us how practice supervisors and practice assessors are supported and undergo training for their roles. The LME meets regularly with the heads of midwifery, and attends the director of service and education, and local service and education meetings where implementation of the SSSA is monitored.

Documentation shows that students receive feedback from their practice assessor and practice supervisor at specific stages as identified within the MORA. The assessment and feedback process indicates that it will take into account student's individual learning needs including reasonable adjustments and support needs. The MORA evidences the involvement of SUCs and students in the feedback, supervision and assessment processes. Opportunities for IPL for students within the practice learning setting is evidenced within the MORA.

The UH commitment to inclusive practice includes the appointment of an inclusivity champion to meet the strategic drive of the faculty.

UH and the trusts arrange and coordinate student placements, with practice education facilitators (PEFs) organising short placements such as gynaecology or safeguarding teams. Placement opportunities for a diverse population across a

range of settings and equity of student experience are currently unclear. (Condition four).

The student voice is enabled through inclusion in programme committee meetings, module and placement evaluations, use of social media, student and course representation and the national student survey. The student representatives have scheduled meetings that enable discussion, feedback and overall review of the student learning experience.

There is a robust process in place to manage adverse Care Quality Commission (CQC) reporting. PLPs are required to inform the LME and the link lecturer of any CQC issues associated with placements as soon as possible. The LME, on receipt of this information, informs the programme leader. Link lecturers work collaboratively with the PEF / clinical placement facilitator to ensure that any actions are put in place to support student learning in the placement. The CQC action plan is reviewed and students/ link lecturers are updated on progress at local service and education meetings that are held every six to eight weeks on all the placement sites.

Adverse CQC issues are also reported via a generic school email so that a record can be maintained, including actions taken to ensure that students are supported as required. CQC issues remain a standing agenda item at the directors of service and education meetings held at least once per semester where the LME seeks assurance that the quality of student learning in all the placements remains of a high standard.

Depending on the nature of the CQC issue the LME in conjunction with the NMC official correspondent will submit an exceptional report to the NMC, outlining actions taken to ensure that the quality of the learning provided is not compromised and highlighting how students will be supported.

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**

The programme team tell us that equality and diversity training is expected for all those involved in recruitment and selection for these programmes. The PLPs and SUCs tell us that evidence of this being completed and remaining up to date isn't requested by UH.

Condition three: To establish a robust process to ensure that equality and diversity training is undertaken and documented prior to involvement in student recruitment and selection (SFNME R4.3, SPMP R1.4).

Placement opportunities for a diverse population across a range of settings and equity of student experience are currently unclear.

Condition four: To provide a detailed placement plan, including any elective arrangements, which evidences how practice hours are met and how students will experience midwifery care for a diverse population across a range of settings (NMC SPMP R3.5).

PLPs, SUCs and students tell us that their involvement in the development of these programmes is limited.

Condition five: To produce an action plan to demonstrate how the programme team will actively involve PLPs, students and diverse service users in future programme planning, recruitment, delivery, assessment, and evaluation (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: [Standards for student supervision and assessment](#)

**MET**  **NOT MET**

### Post event review

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

The process for ensuring equality and diversity training for PLPs and service users has been updated. A process map demonstrates what service users and PLPs are required to undertake prior to becoming members of a student midwife selection panel. There is also a self-declaration form confirming that equality and diversity training has been undertaken and on what date.

Condition three is now met.

Evidence:

Equality and diversity training for midwifery selection panellists PowerPoint slide (undated).

Selection panel equality and diversity self-declaration proforma (undated).

The programme team have provided detailed programme plans for all routes to evidence clearly how practice hours are completed. The arrangements for elective placements are clearly detailed with information on how students access different models of midwifery care including diverse populations.

Condition four is now met.

Evidence:

BSc (Hons) Midwifery (Pre-registration) 2022-2025 proposed programme structure programme code: HSMID, undated.

BSc (Hons) Midwifery (pre-registration shortened)/Master of midwifery (pre-registration shortened) programme codes/cohort: HHMBS and HHMBSM/January 2022, undated.

Document detailing diverse placement opportunities, undated.

The programme team have provided an action plan demonstrating how the programme team will involve PLPs, students and diverse service users in future programme planning, recruitment, delivery, assessment and evaluation is provided.

Condition five is now met.

Evidence:

NMC programme approval conditions action plan, undated.

**Date condition(s) met:** 12 November 2021

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

### Student journey through the programme

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

##### AEIs must:

- R1.1 appoint a lead midwife for education who is responsible for midwifery education in the AEI
- R1.2 inform the NMC of the name of the lead midwife for education
- R1.3 ensure recognition of prior learning is not permitted for pre-registration midwifery programmes

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

- R1.4 ensure selection, admission and progression comply with the NMC Standards framework for nursing and midwifery education
- R1.5 confirm on entry to the programme that students:
  - R1.5.1 enrolled on pre-registration midwifery programmes are compliant with Article 40(2) of Directive 2005/36/EC regarding general education length or nursing qualification as appropriate outlined in Annexe 1 of this document
  - R1.5.2 demonstrate an understanding of the role and scope of practice of the midwife
  - R1.5.3 demonstrate values in accordance with [the Code](#)
  - R1.5.4 have capability to learn behaviours in accordance with the Code
  - R1.5.5 have capability to develop numeracy skills required to meet programme outcomes
  - R1.5.6 can demonstrate proficiency in English language

- R1.5.7 have capability in literacy to meet programme outcomes
- R1.5.8 have capability for digital and technological literacy to meet programme outcomes
- R1.6 support students throughout the programme in continuously developing their abilities in numeracy, literacy and digital and technological literacy to meet programme outcomes
- R1.7 ensure students' health and character are sufficient to enable safe and effective practice on entering the programme, throughout the programme and when submitting the supporting declaration of health and character in line with the [NMC Guidance of health and character](#). This includes satisfactory occupational health assessments and criminal record checks
- R1.8 ensure students are fully informed of the requirement to declare immediately any cautions, charges, conditional discharges or convictions and any adverse determinations made by other regulators, professional bodies and education establishments and that any declarations are dealt with promptly, fairly and lawfully
- R1.9 ensure the lead midwife for education, or their designated midwife substitute is able to provide supporting declarations of health and character for students who have successfully completed an NMC approved pre-registration midwifery programme, and
- R1.10 ensure NMC registered nurses entering a shortened pre-registration midwifery programme are a Registered nurse: first level (adult) and the programme complies with Article 40(1)(b) of Directive 2005/36/EC outlined in Annexe 1 of this document.

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

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

**Proposed transfer of current students to the [Standards for student supervision and assessment](#)** (NMC, 2018).  
Demonstrate a robust process to transfer current students onto the [Standards for student supervision and assessment](#) (NMC, 2018).

**Findings against the standard and requirements**

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

- R1.1 appoint a lead midwife for education who is responsible for midwifery

education in the AEI

YES  NO

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

YES  NO

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

YES  NO

R1.4 ensure selection, admission and progression comply with the NMC  
Standards framework for nursing and midwifery education

YES  NO

The programme team tell us that equality and diversity training is expected for all those involved in recruitment and selection for these programmes. The PLPs and SUCs tell us that evidence of this being completed and remaining up to date isn't requested by UH. (Condition three).

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

R1.5.1 enrolled on pre-registration midwifery programmes are compliant with  
Article 40(2) of Directive 2005/36/EC regarding general education length or  
nursing qualification as appropriate outlined in Annexe 1 of this document

YES  NO

R1.5.2 demonstrate an understanding of the role and scope of practice of the  
midwife

YES  NO

R1.5.3 demonstrate values in accordance with the Code

YES  NO

R1.5.4 have capability to learn behaviours in accordance with the Code

YES  NO

R1.5.5 have capability to develop numeracy skills required to meet programme  
outcomes

YES  NO



R1.5.6 can demonstrate proficiency in English language

YES  NO

R1.5.7 have capability in literacy to meet programme outcomes

YES  NO

R1.5.8 have capability for digital and technological literacy to meet programme outcomes

YES  NO

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

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

MET  NOT MET

R1.6 is met. UH make explicit entry requirements for literacy and numeracy. The students undertake an online module prior to commencing the programme and a digital learner profile is developed. Students undertake a self-assessment in week one of the programme and are encouraged to access the digital literacy workshop. Academics facilitate and guide learning and are active in the virtual learning environment (VLE), CANVAS. The VLE is used to share information and curriculum content, engage students in online learning activity, formative and summative assessment submission and feedback. The immersive digital activities to support learning include short recorded lectures, video clips, workbooks, e-learning packages, recommended reading and discussion groups. Students will be able to access these flexibly. Other online activity includes online tools such as the Bournemouth University resource package (BURP) for infant feeding, clinicalskills.net, safe medicate for drug calculation, K2 for cardiocograph interpretation and the use of Twitter and Instagram.

Where possible, assessments are designed to be undertaken, submitted and marked digitally.

Numeracy assessment is part of the applied midwifery skills and the professional midwife modules. The programme team confirm that the numeracy assessment pass mark is 100 percent in both modules.

There is a simulation lead, an education technologist and a technician to support students with technological literacy. A bid to extend the simulation provision was

successful and has now been installed with manikins, which are designed to reflect the diverse population consistent with the local demography.

Students at the visit tell us that there can be connectivity issues when accessing online content. The programme team tell us there has been significant investment with access to online learning and that mandatory training is now online. The use of blended learning will continue to be adopted. The AEI will continue to provide online lectures as well as face-to-face but will ensure students are supported by providing study spaces at the university, the loan of laptops and technical support.

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

R1.7 ensure students' health and character are sufficient to enable safe and effective practice on entering the programme, throughout the programme and when submitting the supporting declaration of health and character in line with the [NMC Guidance of health and character](#). This includes satisfactory occupational health assessments and criminal record checks  
**YES**  **NO**

R1.8 ensure students are fully informed of the requirement to declare immediately any cautions, charges, conditional discharges or convictions and any adverse determinations made by other regulators, professional bodies and education establishments and that any declarations are dealt with promptly, fairly and lawfully  
**YES**  **NO**

R1.9 ensure the lead midwife for education, or their designated midwife substitute is able to provide supporting declarations of health and character for students who have successfully completed an NMC approved pre-registration midwifery programme, and  
**YES**  **NO**

R1.10 ensure NMC registered nurses entering a shortened pre-registration midwifery programme are a Registered nurse: first level (adult) and the programme complies with Article 40(1)(b) of Directive 2005/36/EC outlined in Annexe 1 of this document.  
**YES**  **NO**  **N/A**

**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.**

Current students will not be transferring to the programmes under review. Those students suspending their studies will have a bespoke plan of return.

**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.**

UH underwent a successful major modification in March 2019 to adopt the SSSA into their pre-registration midwifery programmes.

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

YES  NO

The programme team tell us that equality and diversity training is expected for all those involved in recruitment and selection for these programmes. The PLPs and SUCs tell us that evidence of this being completed and remaining up to date isn't requested by UH. (Condition three).

**Outcome**

**Is the standard met?**

MET  NOT MET

The programme team tell us that equality and diversity training is expected for all those involved in recruitment and selection for these programmes. The PLPs and SUCs tell us that evidence of this being completed and remaining up to date isn't requested by UH.

Condition three: To establish a robust process to ensure that equality and diversity training is undertaken and documented prior to involvement in student recruitment and selection (SFNME R4.3, SPMP R1.4)

**Date:** 29 September 2021

**Post event review**

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

The process for ensuring equality and diversity training for PLPs and service users has been updated. A process map demonstrates what service users and PLPs are required to undertake prior to becoming members of a student midwife selection

panel. There is also a self-declaration form confirming that equality and diversity training has been undertaken and on what date.

Condition three is now met.

Evidence:

Equality and diversity training for midwifery selection panellists PowerPoint slide, undated.

Selection panel equality and diversity self-declaration proforma, undated.

**Date condition(s) met:** 11 November 2021

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

**MET**  **NOT MET**

### Standard 2: Curriculum

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

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

be recognised in EU member states it must be followed by a year of professional midwifery practice.

**Findings against the standard and requirements**

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

R2.1 ensure programmes comply with the NMC [Standards framework for nursing and midwifery education](#)

YES  NO

R2.1 is not met. PLPs, SUCs and the students are not familiar with the programme documentation or the MORA as engagement has been problematic due to the pandemic. Condition five.

R2.2 comply with the NMC [Standards for student supervision and assessment](#)

YES  NO

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

YES  NO

R2.3 is not met. The mapping of NMC proficiencies appear to be evident at a superficial level. Within the modules it is unclear which proficiencies are being met. Additionally, the content detailed within the module descriptors does not reflect the proficiency to which it is assigned; for example, in the level four module 'the art and skills of midwifery' the mapping document in appendix seven for the BSc (three-year) programme stated that proficiency 1.26 'maintain the level of personal health, fitness and wellbeing' would be met but this is not reflected within the module. Similarly, in the 'woman's journey to motherhood' module alignment is to proficiency 1.5 regarding 'evidence-informed decision making', however there is no defined content on consent or research. (Condition two).

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

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

MET  NOT MET

R2.4 is not met. There is an established SUPI group in the school, identifying SUCs as experts by experience. SUPI members are involved in recruitment, developing 'stories' for assessment, review and feedback on documentation,

completing surveys and providing feedback in practice within the school. The programme team and the service user at the visit told us that service user engagement with the midwifery programme team is currently very limited. The SUC at the visit joined in March 2021 and plans are in place to further develop SUC input within teaching, assessment and evaluation. A service user coordinator identified from the midwifery team will co-ordinate this activity. (Condition five).

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

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

YES  NO  N/A

The programme is delivered in England.

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

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

MET  NOT MET

R2.6 is met. Programme documentation and the MORA state that theory and practice learning are designed and delivered within the programme. The programme team tell us that the curriculum content is spiralled to allow greater complexity of topics throughout the year. Topics from previous years are revisited to deepen students' knowledge.

The three year and the shortened routes are not co-taught due to the timing and coordination of placements for the respective routes. The use of the ARC, a web-based placement management system, with a designated administrator ensures the range of practice learning experiences cover antenatal, postnatal, labour ward and community settings, with placements for neonatal unit and gynaecology identified. Personal development visits are arranged by the students themselves (with link lecturer/ personal tutor support if needed) during the allocation to personal development weeks. A menu of potential learning opportunities is provided with relevant contact details, and students are encouraged to share their experiences with each other and recommend relevant learning opportunities that they can access. During professional development weeks (three weeks per year), students are expected to explore the wider health-based services such as sexual health clinics, smoking cessation clinic, fertility clinic, paramedics, haematologist etc. The experience will be recorded in the MORA and will be reviewed by the personal tutor throughout the year.

Students and PLPs tell us that the required proficiencies can be met in the placement areas.

When on practice learning placements, educational support is available from link lecturers, and practice education/clinical placement facilitators who manage student concerns in a consistent and timely manner.

All routes have a neonatal and infant physical examination module (NIPE), which has been included in the midwifery programmes for many years. These modules incorporate a NIPE workbook and students are required to undertake at least 13 initial newborn examinations, the final one being a summative assessment in practice. This is followed by a theoretical NIPE assessment.

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

**MET**  **NOT MET**

R2.7 is met. Simulated education is offered as part of the midwifery programmes. The aim is to provide students with authentic experiences to prepare them for clinical practice. Simulation provides a safe learning environment for students to apply theory to clinical scenarios. Simulation is offered prior to placements to give students the necessary skills in line with their level of practice.

Additional skills in technology-enhanced and simulated learning are developed and are built upon throughout the programme. Simulated and technology-enhanced learning is used to prepare students for practice with specific relevance for preparing for multiple complexities and obstetric emergencies. Achievement of midwifery proficiencies will be demonstrated in the practice setting, but if opportunities to demonstrate some proficiencies are limited they may be demonstrated in simulation such as perineal suturing or a vaginal breech birth.

Simulated education isn't used to replace practice learning hours in the midwifery programme.

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

**MET**  **NOT MET**

R2.8 is met. All programme routes evidence 50 percent theory and 50 percent practice hours, with the opportunity for an elective placement in the three year route where the placement hours are not counted. The three year route evidences a minimum of 4,600 hours, and the shortened route meets the required 3,000 hours.

The documentation states that learning will be facilitated via blended learning. Blended learning supports students to engage in deep learning and critical thinking and meets students' different learning styles. The elements of programme delivery are distance learning applying immersive digital engagement, regular face-to-face group tutorials / workshops and clinical practice under the supervision of a registered practitioner.

Formative and summative modes of assessment are detailed and include a variety of assessment types. The need for diversity in the assessment design and appropriate spacing of assessment across the academic year has been considered. Students receive formative assessment in theory and practice learning. They have the opportunity to practise skills needed for the range of assessment throughout the programme. Assessment types include coursework, portfolio, reflection, presentations, OSCE, examinations and practice.

**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

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

The route proposed is a minimum of 18 months.

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

YES  NO  N/A

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

YES  NO



PLPs, SUC and the students are not familiar with the programme documentation or the MORA as engagement had been problematic due to the pandemic. (Condition five).

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

YES  NO

**Outcome**

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

The mapping of NMC proficiencies is only evident at a superficial level and from review of the modules it is difficult to determine which proficiencies are being met.

Condition two: To provide a mapping document which evidences how the NMC standards of proficiency for midwives are addressed (SPMP R2.2).

PLPs, SUC and the students are not familiar with the programme documentation or the MORA as engagement had been problematic due to the pandemic.

Condition five: To produce an action plan to demonstrate how the programme team will actively involve PLPs, students and diverse service users in future programme planning, recruitment, delivery, assessment, and evaluation (SFNME R1.12, SPMP R2.4).

**Date:** 29 September 2021

**Post event review**

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

A revised mapping document, with all definitive module guides now accurately reflect the proficiencies to be achieved.

Condition two is now met.

Evidence:

Shortened programme mapping spreadsheet, undated.

Three-year midwifery mapping spreadsheet, undated.

Revised definitive module documents, undated.

An action plan is now provided which demonstrates how the programme team will involve PLPs, students and diverse service users in future programme planning, recruitment, delivery, assessment and evaluation.

Condition five is now met.

Evidence: NMC programme approval conditions action plan, undated.	
<b>Date condition(s) met:</b> 12 November 2021	
<b>Revised outcome after condition(s) met:</b>	<b>MET</b> <input checked="" type="checkbox"/> <b>NOT MET</b> <input type="checkbox"/>

**Standard 3: Practice learning**

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

**Findings against the standard and requirements**

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

- R3.1 provide practice learning opportunities that enable students to develop and meet the NMC Standards of proficiency for midwives  
**MET**  **NOT MET**

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

Documentation states that UH has worked closely with the HEE midwifery expansion project to increase midwifery placements.

There are several trusts across the east of England and one in London. These are supported by a wider team of staff from both the trust and the university. All midwifery academics actively engage in these teams through regular contact with clinical colleagues. Link lecturers support learners and practice supervisors and practice assessors, while also responding in a timely fashion to concerns raised by clinical staff in relation to individual students.

Students on the three-year route have the opportunity for an elective, observational and formative practice experience in year two, within the broader health and social care setting and this could include the voluntary sector, national and international placements. This placement doesn't contribute to the programme outcomes nor towards programme hours. An elective placement lead, who is a member of the midwifery team, supports students with this.

The students are usually placed in one trust for the duration of the programme unless in exceptional circumstances and/ or if a student requests a change. This is dependent on availability in the trust. The students tell us that the placements meet the full range of maternity care and they are able to meet the practice requirements. The students experience case loading in each year of the programme.

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 MORA is structured to include the SPM and to enable students to record their contribution to holistic care to women, newborn infants, partners and families.

The role and scope of the midwife is embedded throughout the BSc (Hons) and MSc midwifery routes. This is captured within the indicative curriculum content and theoretical learning and practice outcomes.

Practical summative assessments aligned with the NIPE are embedded within the MORA.

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

**MET**  **NOT MET**

R3.3 is met. The documentation provides evidence that specialist midwives and medical staff including general practitioners are invited to deliver sessions to student midwives, and there is a steering group for IPL within the school.

IPL occurs in the infant feeding and relationship building module in year one and the interprofessional education for midwives module in the final year of all routes. This is a change from previous programmes, where there were discrete IPL modules in every year of the programme, these modules did not evaluate well. (Recommendation one).

In the practice placement, a menu of learning opportunities incorporating a variety of different disciplines is provided and students organise these during their allocated placement development weeks. Students are asked to provide details of 'out of midwifery' practice experiences they have undertaken in the 'record of complementary placement experience' within the MORA.

The MORA will be online via My Knowledge Maps from September 2022.

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

**MET**  **NOT MET**

R3.4 is met. Students on the programme are provided with a case loading handbook, which details the process for case loading within both programmes, and is undertaken throughout each year of the programme. Case loading is a model of midwifery care in which a 'caseload' of clients is followed throughout pregnancy, labour and the early postnatal period. The programme team and the PLPs tell us that many of the local trusts are moving towards a case loading model in their community teams, in order to provide better continuity of care and carer to women and their families. Students are placed in these teams where possible.

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

**MET**  **NOT MET**

R3.5 is not met. The programme uses a number of placement areas across a large geographical area. The designated placement co-ordinator, in collaboration with the LME provide strategic direction for the management of practice based learning in the faculty for all midwifery students. This is done by providing and co-ordinating the systems and processes required for the identification of suitable placements for students, student allocation, practice supervisor/assessor preparation and student support. ARC supports the allocation of students to placements, as well as the electronic practice portfolio (MORA). Students access online information on their placement allocation normally six weeks prior to commencement and

placement areas are able to see information about the students allocated to their area.

Most of the trusts have midwifery teams supporting vulnerable and disadvantaged women and families which students may be allocated to. The programme plans do not identify where the additional menu of learning opportunities meeting the needs of a diverse population are to take place. Equity of student experience in achieving proficiencies in these areas cannot be assured. (Condition four).

Student evaluations of placements are via an anonymous online placement survey and students are encouraged to complete these after each placement. Findings are provided to PLPs at local service and education meetings attended by practice representatives, link lecturers and students. An action plan is generated where required and actions are fed back to students in a 'you said, we did' format'. Minutes of local service and education meetings are available on the placement sites in CANVAS. Actions are monitored at the local service and education meetings. At directors of service and education meetings an update on any placement issues is provided to the LME and the programme officers offering another forum for monitoring of student evaluations.

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

**MET**  **NOT MET**

R3.6 is met. The spiral curriculum introduces students to maternal and neonatal complications with additional care needs and how to support them. Complexity builds through the years of the programme which includes learning from and for practice, finding solutions and developing good decision-making capabilities. Students have opportunities to attend alternative placements and access a menu of learning opportunities during personal development weeks.

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. The AEI provides extensive support services to students. Students who have particular support needs including disability or care needs have the opportunity to discuss the need for any adjustments in the induction week. The midwifery team work with learning services to support students with specific learning needs and facilitate reasonable adjustment where required. Prior to their

first placement students complete a pre-placement allocation form to support placement choices.

Within the MORA, a section 'about me' is included to facilitate the sharing of information between the students and the placement area, to further assist with individual needs and 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: [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

It is unclear in the documentation how students would be given placement opportunities for a diverse population across a range of settings.

Condition four: To provide a detailed placement plan, including any elective arrangements, which evidences how practice hours are met and how students will experience midwifery care for a diverse population across a range of settings (SPMP R3.5).

**Date:** 29 September 2021

**Post event review**

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

Detailed programme plans for both routes now evidence how practice hours are completed. The arrangements for elective placements are clearly detailed with

information on how students access different models of midwifery care including diverse populations.

Condition four is now met.

Evidence:

BSc (Hons) Midwifery (Pre-registration) 2022-2025 proposed programme structure programme code: HSMID, undated.

BSc (Hons) Midwifery (pre-registration shortened)/Master of midwifery (pre-registration shortened) programme codes/cohort: HHMBS and HHMBSM/January 2022, undated.

Document detailing diverse placement opportunities, undated.

**Date condition(s) met:** 12 November 2021

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

**MET**  **NOT MET**

#### **Standard 4: Supervision and assessment**

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

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

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

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

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

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

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

R4.7 ensure all proficiencies are recorded in an ongoing record of achievement, which must demonstrate the achievement of proficiencies and skills set out in the NMC Standards of proficiency for midwives, and

R4.8 ensure the knowledge and skills for midwives set out in Article 40(3) and the activities of a midwife specified in Article 42 of Directive 2005/36/EC have been met as outlined in Annexe 1 of this document

#### **Findings against the standards and requirements**

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

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

**MET**  **NOT MET**

R4.1 is met. Programme documentation confirms that the AEI and PLPs have robust procedures and policies in place to show how support, supervision, learning opportunities and assessment comply with the SFNME.

Documentary evidence indicates that students are able to achieve the SPM through access to a variety of practice placements in partner organisations. There are practice learning experiences in each year of the programme which are designed to facilitate students meeting women and their families in a variety of practice and community settings.

Students and PLPs we met all confirm the process they'd follow to raise and escalate any concerns in practice learning environments. Any cause for concern about a student's conduct or performance including fitness to practise is understood by PLPs, SUCs and students.

Reporting of serious and untoward incidents is the responsibility of all members of both the academic and clinical teams. The midwifery clinical lead co-ordinates and monitors clinical issues and ensures standardisation of processes across all placement sites.

When on placement, students will complete the MORA and be assessed on a yearly basis to ensure they're achieving the required proficiencies for each year. In addition to the MORA, students are required to engage in continuity of carer via the case loading model.

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

**MET**  **NOT MET**

R4.2 is met. The MORA sets out the roles and responsibilities of the practice supervisor, practice assessor and academic assessor. All student midwives are allocated a practice supervisor, practice assessor and academic assessor to support their learning and assessment in practice and confirm their progression. Practice learning environments also have a nominated person to further support student midwives.

UH has identified suitably qualified staff within the midwifery teaching team to be academic assessors and have been preparing both staff and student midwives for



these roles. The academic assessor role has been implemented for students on the current pre-registration midwifery programme since the introduction of the SSSA in September 2019. The academic assessor and personal tutor roles are clearly defined. The academic assessor oversees student midwives' progression and assessment with the personal tutor providing a supportive, pastoral role.

UH is confident it has the resources to support the increase in student numbers. We were informed that a business case will be made to increase staffing if recruitment of students reaches the target of 50 for the next cohort.

The programme team tell us that PLPs have been consulted throughout regarding the increasing number of students; one of the placements is piloting collaborative learning in practice (CliP) to increase capacity. This may be rolled out to other trusts if successful. Experiences and feedback are provided to all trusts via the directors of service and education meeting. NIPE has been a well-established aspect of the midwifery curriculum at UH for a number of years so this is not an extra requirement as the new curriculum aligns to the future midwife standards. Many midwives working in the trusts graduated from UH therefore already have the NIPE qualification and are able to support student midwives with the required assessments.

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 SPM are mapped to the programme and the MORA. The partner trusts told us at the visit that placement capacity was becoming stretched, particularly in the light of the recent pandemic situation. There is a planned increase in student numbers on the shortened programme from 20-30 to 50 per year, with an additional four NHS trusts across the east of England offering clinical placements. The team reported they would be considering innovative ways of how placement capacity may be increased, for example, by use of the CLiP model. This will be trialled by West Hertfordshire NHS Trust in November 2021 involving a small group of students working together under the guidance of a practice supervisor. The PEFs tell us of some concerns over the expansion of student numbers in view of a decrease in staff numbers but are able to support student numbers with increasing simulation activities that normally take place in practice. (Recommendation three).

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

**MET**  **NOT MET**

R4.4 is met. Students receive feedback in both practice and theory from a range of stakeholders. Feedback from practice supervisors and interim formative assessments with their practice assessor will be recorded in the MORA. SUC

feedback is included in the MORA. Feedback on summative assessments aims to prepare students for their future assessments and includes commentary on areas of strength and areas for development.

Feedback on formative assessments aims to prepare student midwives for their summative assessments. Students tell us that the feedback is detailed and constructive on their individual outcomes in meeting the requirements of the programme. Feedback, both formative and summative, is digitalised and encourages reflection.

Students are encouraged to utilise Turnitin to allow students to enhance their knowledge and understanding of good academic practice in order to reference material correctly.

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

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

YES  NO

R4.5 is not met. The pass mark for modules that involved a medicines calculation test is not stated in the definitive module descriptors. (Condition one).

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

YES  NO

R4.7 ensure all proficiencies are recorded in an ongoing record of achievement, which must demonstrate the achievement of proficiencies and skills set out in the NMC Standards of proficiency for midwives, and

YES  NO

R4.8 ensure the knowledge and skills for midwives set out in Article 40(3) and the activities of a midwife specified in Article 42 of Directive 2005/36/EC have been met as outlined in Annexe 1 of this document

YES  NO

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

YES  NO

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

YES  NO

**Outcome**

**Is the standard met?**

MET  NOT MET

The pass mark for modules that involve a medicines calculation test is not stated in the definitive module descriptors.

Condition one: To make explicit within the relevant definitive module guides the 100 percent pass mark for the numeracy calculation (SPMP R4.5).

**Date:** 29 September 2021

**Post event review**

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

Relevant definitive module documents now make explicit the 100 percent pass mark for the numeracy calculation.

Condition one is now met.

Evidence:

Definitive module documents:

- The professional midwife 6HSK0127, undated.
- The professional midwife 7HSK0226, undated.
- Applied midwifery skills 5HSK2016, undated.

**Date condition(s) met:** 12 November 2021

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

MET  NOT MET

**Standard 5: Qualification to be awarded**

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

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

R5.2 notify students during and before completion of the programme that they have [five years](#) to apply to register with the NMC if they wish to rely on this qualification<sup>1</sup>. In the event of a student failing to register their qualification within five years they will have to undertake additional education and training or gain such experience as specified in our standards.

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

**Findings against the standards and requirements**

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

R5.1 ensure that the minimum award for a pre-registration midwifery programme is at bachelor's degree level  
 YES  NO

R5.2 notify students during and before completion of the programme that they have [five years](#) to apply to register with the NMC if they wish to rely on this qualification<sup>2</sup>. In the event of a student failing to register their qualification within five years they will have to undertake additional education and training or gain such experience as specified in our standards.  
 YES  NO

**Fall Back Award**

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

YES  NO  N/A

There is no fall back award with registration as a midwife.

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: 29 September 2021

**Post event review**

Identify how the condition(s) is met:

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

**Section four**

**Sources of evidence**

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

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

Written agreement(s) to support the programme intentions between the education institution and employer partners for apprenticeship routes (if applicable).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation:		
List additional documentation: Definitive module documents: The professional midwife 6HSK0127 (undated) The professional midwife 7HSK0226 (undated) Applied midwifery skills 5HSK2016 (undated) HHMBS M mapping spreadsheet 2021 (undated) Midwifery NMC mapping spreadsheet (undated) Equality and diversity training for midwifery selection panellists PowerPoint slide (undated) Selection panel equality and diversity self-declaration proforma (undated) BSc (Hons) midwifery (Pre-registration) 2022-2025 proposed programme structure programme code: HSMID (undated) BSc (Hons) midwifery (pre-registration shortened)/Master of midwifery (pre-registration shortened) programme codes/cohort: HHMBS and HHMBSM/January 2022 (undated) Document detailing diverse placement opportunities (undated) Nursing and Midwifery Council programme approval conditions action plan (undated).		
Additional comments: None identified		

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

	<b>YES</b>	<b>NO</b>
Senior managers of the AEI/education institution with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated practice learning partners with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated employer partners with responsibility for resources for the programme (applicable for apprenticeship routes)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Programme team/academic assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice leads/practice supervisors/ practice assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, please identify cohort year/programme of study: Year three (three-year programme) x two		

Year two (three-year programme) x two Year two (short programme) x four.		
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation: An apprenticeship route is not proposed.		
Additional comments: None identified		

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

	YES	NO
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Library facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Technology enhanced learning Virtual learning environment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Educational audit tools/documentation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Practice learning environments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If practice learning environments are visited, state where visited/findings:		
System regulator reports reviewed for practice learning partners	<input checked="" type="checkbox"/>	<input type="checkbox"/>
System regulator reports list: CQC Basildon University Hospital, 19 November 2020 CQC Bradford Teaching Hospitals NHS Foundation Trust, 9 April 2020 CQC Mid and South Essex NHS Foundation Trust, 8 April 2021 CQC Northwick Park Hospital, 25 June 2021 CQC The Princess Alexandra Hospital NHS Trust, 31 July 2019 CQC West Hertfordshire Hospitals NHS Trust, 17 June 2020 CQC Worcestershire Royal Hospital, 19 February 2021 CQC Cygnet Hospital Stevenage, 1 April 2020 CQC Edith Shaw Hospital, 27 April 2021 CQC Priory Hospital Arnold, 22 July 2021 CQC Queen's Hospital, 11 March 2020 CQC Rhodes Wood Hospital, 29 April 2020 CQC Vision MH-Cornerstone House, 28 June 2021		



If you stated no above, please provide the reason and mitigation:  
UH is an established AEI, a resource check is not required.

Additional comments:  
None identified.

**Mott MacDonald Group Disclaimer**

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

**Issue record**

**Final Report**

Author(s):	Nicola Clark	Date:	11 October 2021
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Submitted by:	Shahzaib Ghafoor	Date:	24 November 2021
Approved by:	Emiko Hughes	Date:	25 November 2021