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Programme approval report

Section one

Programme provider name:	University of East London
Programme reviewed:	Registered Midwife - 18M ☐ Registered Midwife - 24M ☐ Registered Midwife - 36M ☒ Registered Midwife - degree apprentice ☒
Title of programme(s):	BSc (Hons) Midwifery BSc (Hons) Midwifery Apprenticeship
Academic levels:	
Registered Midwife - 18M	England, Wales, Northern Ireland ☐ Level 6 ☐ Level 7 SCQF ☐ Level 9 ☐ Level 10 ☐ Level 11
Registered Midwife - 24M	England, Wales, Northern Ireland ☐ Level 6 ☐ Level 7 SCQF ☐ Level 9 ☐ Level 10 ☐ Level 11
Registered Midwife - 36M	England, Wales, Northern Ireland ☒ Level 6 ☐ Level 7 SCQF ☐ Level 9 ☐ Level 10 ☐ Level 11
Registered Midwife - degree apprentice	England, Wales, Northern Ireland ☒ Level 6 ☐ Level 7 SCQF ☐ Level 9 ☐ Level 10 ☐ Level 11
Date of approval visit:	6-7 February 2023

Programme start date:		
Registered Midwife – 18M		
Registered Midwife – 24 M		
Registered Midwife – 36 M	25 September 2023	
Registered Midwife – degree apprentice	25 September 2023	
QA visitor(s):	Registrant Visitor: Racheal Spencer	
	Lay Visitor: Doug Carr	

Section two

Summary of review and findings
University of East London (UEL) is an NMC approved education institution (AEI). The school of health, sport and bioscience at UEL has submitted for approval a full-time direct entry three-year pre-registration Bachelor of Science (BSc) (Hons) Midwifery programme and an apprenticeship route pre-registration BSc (Hons) Midwifery. Both routes lead to professional registration as a midwife with the Nursing and Midwifery Council (NMC). The programme is seeking approval against the Standards for pre-registration midwifery programmes (SPMP) (NMC, 2019) and the Standards of proficiency for midwives (SPM) (NMC, 2019), scheduled to commence in September 2023.

The approval visit is undertaken face-to-face.

Both direct entry and apprenticeship routes have exit awards at academic levels four, five and six. The exit awards don't confer eligibility to register as a midwife with the NMC.

The programme documents detail the development of a curriculum philosophy and structure, considering national and regional evidence and reports. The programme design is 50 percent theory and 50 percent practice delivered in modules. Modules are structured to support student learning, with a variety of learning strategies, formative and summative assessments and support mechanisms across theory and practice. The two routes will be taught together.

The programme has adopted the midwifery ongoing record of achievement (MORA) for the assessment of practice throughout the programme. Assessment of practice will not be graded. The MORA will be accessed as an electronic document, using the My Knowledge Map (MKM) platform. The MORA document is the product of a collaborative development based on the established pan-London model. This utilised regional stakeholder engagement including all lead midwives for education (LMEs) in England and Northern Ireland and is supported by Health Education England (HEE).

One employer partner (EP) (Barking, Havering and Redbridge University Hospitals NHS Trust (BHRUT)) confirms support for the apprenticeship route at the approval visit.

Curriculum content and practice learning experiences are mapped against, and are designed to meet, the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018), the Standards for student supervision and assessment (SSSA) (NMC, 2018), the SPMP and the SPM. Educational audits of practice areas used for student learning are undertaken by the AEI in order to

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

Procedures are in place to deal with any issues of concern relating to practice learning environments to manage and mitigate student learning risks. Any issues of concern identified by system regulators are collaboratively addressed by the university in partnership with practice learning partners (PLPs). This is confirmed by senior staff in the AEI and PLP leads who describe the mechanisms that are in place for the early identification and escalation of concerns. This collaboration ensures that action plans are implemented which aim to prevent any compromise to safety in practice learning environments or to the quality of student learning experiences.

The SFNME isn't met at programme level. The SSSA is met at programme level.

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

Updated 3 April 2023:
Evidence has been provided that the NMC and joint NMC and university conditions set at the approval visit have been met. The AEI has confirmed that the university conditions have been met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel

Recommended outcome to the NMC:	Programme is recommended to the NMC for approval ☐
	Programme is recommended for approval subject to specific conditions being met ☒
	Recommended to refuse approval of the programme ☐

Conditions:	**Effective partnership working: collaboration, culture, communication and resources:** Condition one: Signed written commitment statements must be in place between the AEI and the proposed EPs. (SFNME R2.1; SPMP R2.1) Condition three: Provide a resource statement that confirms that appropriately qualified and experienced people are in place for pre-registration midwifery programme delivery. (SFNME R2.18; SPMP R2.1) (Joint university and NMC condition) **Selection, admission and progression:** Condition two: Provide evidence that the LME role is situated at a senior level within the AEI and is included in the fitness to practise (FtP) policy. (SFNME R2.1; SPMP R1.1) (Joint university and NMC condition) **Practice learning:** None identified. **Assessment, fitness for practice and award:** Condition four: Clarify the numbers of witnessed systematic examination of the newborn (EONB) and assessed systematic EONB required, and where the assessment is situated in the programme within student facing and programme documentation. (SPMP R3.1) Condition five: The programme team must work with PLPs and EPs to develop the proposed strategy via an implementation plan for students to successfully complete systemic EONB. (SSSA R1.2; SPMP R3.1, R4.2) **Education governance: management and quality assurance:** Condition six: The programme team must provide a separate course specification for the midwifery

	degree apprenticeship (MDA) route. (University condition) Condition seven: Complete the internal quality assurance process of peer review. (University condition)
Date condition(s) to be met:	31 March 2023
Recommendations to enhance the programme delivery:	Recommendation one: Consider regular review of the implementation strategy for service user and carer (SUC) involvement to ensure the strategy is fully actioned to support future programme delivery. (SFNME R1.12, R5.14; SPMP R2.1, R2.4) (Joint university and NMC recommendation) Recommendation two: The programme team should consider a formalised approach in the allocation of academic assessors to midwifery students. (SSSA R6.1; SPMP R4.2) (Joint university and NMC recommendation)
Focused areas for future monitoring:	Implementation of interprofessional learning (IPL) strategy. Preparation of assessors for systematic EONB (via clinical academics). Implementation of the eMORA and associated information technology (IT) platform. Human resource of the midwifery programme team as student numbers grow.

Programme is recommended for approval subject to specific conditions being met
Commentary post review of evidence against conditions: The university has met the conditions set out by the panel at the approval visit.

The AEI provided one signed EP agreement for the apprenticeship route. Condition one is now met.

Documentary evidence has been provided that evidences that the LME role is situated at a senior level within the AEI and is included in the FtP policy. Condition two is now met.

The programme team have provided a resource statement that confirms that appropriately qualified and experienced people are in place for pre-registration midwifery programme delivery. Condition three is now met.

Documentary evidence clarifies the numbers of witnessed systematic EONB and assessed systematic EONB required, and where the assessment is situated in the programme within student facing and programme documentation. Condition four is now met.

The programme team have provided a comprehensive implementation plan to ensure that students successfully complete systemic EONB. Condition five is now met.

The AEI has confirmed that the university conditions have been met.

The programme is recommended for approval.

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 ☒ Recommended to refuse approval of the programme ☐
Date condition(s) met:	3 April 2023

Section three

NMC Programme standards
Please refer to NMC standards reference points *Standards for pre-registration midwifery programmes* (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, 2022)

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

Documentary analysis provides limited evidence of partnership working in the co-production, co-delivery and evaluation of the programme. Stakeholder involvement is evidenced in notes from curriculum development stakeholder workshops. PLPs, students, SUCs and EPs tell us that they've been involved in the co-production of the programme. The university recognises the contribution made by SUCs and there's evidence of SUCs interacting with the programme team in the development of the midwifery programme. A school-wide strategy for involvement of SUCs in programmes is in place which seeks to utilise the knowledge, skills and expertise they can bring to students' learning. There has been a service users voice in stakeholder meetings in the development of the programme. The midwifery programme team plan to invite SUCs, EPs and PLPs to monthly midwifery programme team meetings to review and evaluate the programme. The MORA evidences the involvement of SUCs and students in feedback, supervision and assessment processes. One EP, BHRUT confirms support for the apprenticeship route at the visit. However, there are no formal partnerships or written agreements in place for any EP for the proposed MDA. (Condition one)

Entry requirements for the routes are clear in programme documentation. Documentary analysis evidences a commitment to interviewing and selection processes to include SUCs, PLPs and students. PLPs undertake equality, diversity and inclusion training as part of mandatory training, and there's a commitment to provide SUCs with training to prepare them for their contribution to interviewing and selection processes.

The design of the midwifery programme reflects national and professional workforce strategies and seeks to provide opportunities for IPL in both practice and theory learning settings. Programme documentation highlights both the importance and the key ways in which midwifery students will undertake IPL. A range of IPL opportunities are in place which not only provide opportunities for students to apply them to midwifery practice but also raise general awareness on how different disciplines might approach common healthcare topics. The programme team describe how midwifery students and students studying social work and paramedic science will have the opportunity to engage in multi-professional low and high fidelity simulated learning scenarios. Opportunities for IPL within the practice learning setting are evidenced within MORA documentation.

Programme documentation evidences the distinct roles of academic assessor, practice supervisor and practice assessor. In practice learning environments students will receive feedback from their practice supervisors and practice assessors at specific stages as identified within the MORA and the context document. Assessment and feedback processes indicate students' individual learning needs, including reasonable adjustments and support needs, are accommodated. The link lecturer role is separate and is undertaken by members of the programme teaching team who link with identified practice placement areas providing support to students and midwives. Link lecturers also undertake programme updates and education audits. Link lecturers provide an essential chain of communication between the university and practice environment. This role is in addition to those required of the SSSA. The programme team tell us that the assessment within the MORA is ungraded and will be housed on the online platform, MKM.

UEL senior staff and PLPs tell us that if any issues or concerns are identified including any Care Quality Commission quality reviews these are monitored through a systematic partnership process. Risks that impact on student practice learning are collaboratively managed. This collaboration demonstrates how action plans are implemented and provides assurance that quality of student learning is managed. Processes are in place for students, practice supervisors and practice assessors to raise and escalate any concerns in practice learning environments. Senior AEI staff, the programme team and senior PLPs and EPs describe the collaborative reporting and management processes they use to investigate serious untoward incidents, including how they support student concerns.

There's a placement plan for the full duration of the programme/routes.

Student numbers are agreed in collaboration with PLPs and EPs.

There's documentary evidence that the university has mechanisms to gather student feedback on modules and placements for review at committees concerned with quality review. Students we met tell us they provide feedback through a variety of internal and external surveys with feedback on surveys being acted upon

to improve the student experience provided by a "you said it we did it" mechanism. Elected student representatives exist at programme and school level and there is student representation on key university wide governance structures.

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** ☒

There are no formal partnerships or written agreements in place for any EPs for the proposed MDA. Signed evidence is to be provided and a condition has been applied.

Condition one: Signed written commitment statements must be in place between the AEI and the proposed EPs. (SFNME R2.1; SPMP R2.1)

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: Condition one: The AEI have provided signed evidence of an employer partnership agreement for one NHS trust. Condition one is now met. Evidence: Statement of commitment Barking, Havering and Redbridge University Hospitals NHS Trust, 22 February 2023
Date condition(s) met: 3 April 2023
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 <u>lead midwife for education</u> who is responsible for midwifery education in the AEI

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

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

AEIs together with practice learning partners must:

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

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

R1.5.1   enrolled on pre-registration midwifery programmes are compliant with Article 40(2) of Directive 2005/36/EC regarding general education length or nursing qualification as appropriate (included in annexe one of programme standards 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 heath 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.

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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** ☒

R1.1 is not met. Senior school staff tell us they plan for the LME to be part of the school senior management team. There is no reference in the FtP professional programmes regulations of the role of the LME nor is the midwifery programme identified in this policy. Documentary evidence and the approval visit do not provide assurance that the LME role is situated at a senior level within the AEI. (Condition two)

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

YES ☒ **NO** ☐

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

YES ☒ **NO** ☐

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

YES ☒ **NO** ☐

R1.5 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

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 <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the requirement below is met or not met

R1.6 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. UEL documentary evidence makes explicit entry requirements for literacy and numeracy. Arrangements for student support and students' preparation for developing these entry requirements such as numeracy skills, literacy skills, digital and technological literacy are well established.

Numeracy is embedded throughout the midwifery programme in both theory and practice learning with increasing complexity. Formative assessments support the increasing complexity of the summative assessments in each year.

Literacy, digital and technological literacy are embedded in module delivery and linked to module assessment.

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 heath 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.

YES ☐ **NO** ☐ **N/A** ☒

A shortened pre-registration midwifery programme isn't proposed.

Proposed transfer of current students to the programme under review
From your documentary analysis and your meeting with students, provide an <u>evaluative summary</u> to confirm how the *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. There are no current midwifery students as UEL are a new programme provider for pre-registration midwifery.

Proposed transfer of current students to the *Standards for student supervision and assessment (SSSA)* (NMC, 2018).
From your documentary analysis and your meetings at the approval visit confirm if students will be transferring to the SSSA, and if so that they have informed choice and are fully prepared for supervision and assessment. There are no current midwifery students as UEL are a new programme provider for pre-registration midwifery.
Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to selection, admission and progression are met **YES** ☐ **NO** ☒ Documentary evidence and the approval visit do not provide assurance that the LME role is situated at a senior level within the AEI. There is no reference in the FtP policy for students on the role of the LME nor is the midwifery programme identified in this policy. (Condition two)
Outcome
Is the standard met? **MET** ☐ **NOT MET** ☒ Documentary evidence and the approval visit do not provide assurance that the LME role is situated at a senior level within the AEI. There is no reference in the FtP policy for students on the role of the LME nor is the midwifery programme identified in this policy. Condition two: Provide evidence that the LME role is situated at a senior level within the AEI and is included in the FtP policy. (SFNME R2.1; SPMP R1.1) **Date:** 7 February 2023
Post event review
Identify how the condition(s) is met: Condition two: Documentary evidence has been provided that evidences that the LME role is situated at a senior level within the AEI. The revised FtP policy applies to all courses leading directly or indirectly to a professional qualification. Condition two is now met. Evidence: FtP policy and procedure, 15 August 2022 School of health sport and bioscience organogram, undated
Date condition(s) met: 3 April 2023

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/ 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 ☒**

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R2.1 is not met. Senior school staff tell us there are currently one full-time midwifery member of academic staff and one part-time midwifery member of academic staff (currently on maternity leave), employed to deliver the programme. The school proposes to utilise existing dual-qualified (midwifery and nursing) academic staff to support the programme, and midwifery clinicians on a secondment agreement. There is currently a risk to the academic resourcing of the programme and student support. This is supported by the documentation reviewed. (Condition three)

One EP, BHRUT confirmed verbal support for the midwifery apprenticeship route at the approval visit. However, there are no formal partnerships or written agreements in place for any EPs for the proposed MDA. Signed evidence is to be provided and a condition has been applied. (Condition one)

The programme team are recommended to regularly review SUC involvement to ensure the implementation strategy is fully actioned to support future programme delivery. (Recommendation one)

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

YES ☒   **NO** ☐

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

YES ☒   **NO** ☐

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

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

MET ☒   **NOT MET** ☐

R2.4 is met. Documentary review and our approval visit evidences that SUCs have been involved in all aspects of the development of the programme. There is an opportunity for service users to provide feedback to students about the care they have provided through the MORA. The midwifery programme team plan to invite SUCs to monthly midwifery programme team meetings to review and evaluate the programme and involve them in recruitment, teaching and feedback. Service user representatives are able to describe examples of how they will be involved in the future. The programme team are recommended to regularly review SUC involvement to ensure the implementation strategy is fully actioned to support future programme delivery. (Recommendation one)

Evidence provides assurance that the following requirements are met

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

YES ☐   **NO** ☐   **N/A** ☒

The programme isn't delivered in Wales.

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

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

MET ☒   **NOT MET** ☐

R2.6 is met. Programme documentation and the MORA evidence that theory and practice learning are designed and delivered within the programme. Year one students work under direct supervision of a registered midwife with increasing indirect supervision as they progress through the programme. The programme plan for both routes details how student allocation to practice placements is managed. The plan includes antenatal, postnatal, labour and birth and community, with placements for non-maternity, gynaecology and neonatal units. All learning experiences are recorded in the MORA. Students are supported in practice by link lecturers and clinical practice facilitators (CPFs).

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 utilised to support student learning in each year of study of the direct entry and the MDA route. Simulation is used to prepare students for practice with specific relevance to preparing for multiple complexities and obstetric emergencies. There are online packages for clinical skills development, specifically Oxford Medical Simulation.

Achievement of most midwifery proficiencies should be demonstrated in a practice setting, but if opportunities to demonstrate some proficiencies are limited, then by exception some procedures may be demonstrated in simulation. This includes for example perineal suturing and vaginal breech births.

Clinical skills development is delivered face-to-face using high- and low-fidelity simulation activities. Simulated education will not be used to replace practice 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. The programme team present documentation for the structure of the full-time and the MDA routes identifying the hours of the programme. Both routes are three years in duration and structured to provide 50 percent theory and 50 percent practice, divided into theory and practice modules. There is no compensation across modules.

Both routes detail 22 weeks of theory and practice in each year. The programme training plan clearly states that a week in theory and practice equates to 37.5 hours. The MDA programme training plan details that annual leave is taken at a time negotiated with the student's employer.

Programme documentation demonstrates that a range of teaching and learning strategies are used including lectures, group work, case studies, seminars, clinical skills and simulation and practice learning. Simulation is used as a learning strategy for skills rehearsal for 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 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** ☒

A shortened pre-registration midwifery programme isn't proposed.

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** ☒

A shortened pre-registration midwifery programme isn't proposed.

Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to curricula and assessment are met   **YES** ☐   **NO** ☒ There are no formal partnerships or written agreements in place for any EPs for the proposed MDA. Signed evidence is to be provided and a condition has been applied. (Condition one) There is currently a risk to the academic resourcing of the programme and student support. This is supported by the documentation reviewed. (Condition three)   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** ☒ There are no formal partnerships or written agreements in place for any EPs for the proposed MDA. Signed evidence is to be provided and a condition has been applied. Condition one: Signed written commitment statements must be in place between the AEI and the proposed EPs. (SFNME R2.1; SPMP R2.1) There is currently a risk to the academic resourcing of the programme and student support. This is supported by the documentation reviewed. Condition three: Provide a resource statement that confirms that appropriately qualified and experienced people are in place for pre-registration midwifery programme delivery. (SFNME R2.18; SPMP R2.1) **Date:** 7 February 2023
Post event review
Identify how the condition(s) is met: Condition one: The AEI have provided signed evidence of an employer partnership agreement for one NHS trust. Condition one is now met. Evidence:

Statement of commitment Barking, Havering and Redbridge University Hospitals NHS Trust, 22 February 2023
Condition three: The programme team have provided a resource statement that confirms that appropriately qualified and experienced people are in place for pre-registration midwifery programme delivery.
Condition three is now met.
Evidence: Staffing resource statement, 3 April 2023

Date condition(s) met: 3 April 2023
Revised outcome after condition(s) met: MET ☒ NOT MET ☐

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

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

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

MET ☐ **NOT MET** ☒

R3.1 is not met. Student achievement of proficiencies is documented in the MORA. A context document that covers the programme details the arrangement of proficiencies in each part of the programme and monitoring and management of student progression through the programme. The context document makes explicit that practice learning will not be graded. Both routes have modules that incorporate the theory behind the systematic physical EONB. However, the assessment of conducting systematic EONB under direct supervision is not detailed in programme documentation and has not been planned by the programme team. (Condition four)

Discussion at the approval visit with PLPs and EPs across settings also indicates variable resources in practice to support and assess students with systematic EONB skills. (Condition five)

Documentary evidence and the approval visit confirm that practice learning environments expose students to learning experiences across all areas of maternity care. The allocation of varied practice placements provides extensive student learning experiences that are mapped across the duration of the programme. Practice learning environments include midwife led units, delivery suites, antenatal and postnatal wards, EONB clinics, gynaecology placements and neonatal intensive care.

Domains one to five of the SPM are mapped within programme documentation. The skills detailed in domain six are visible and evidenced within the MORA, demonstrating what must be met at the point of registration as a midwife.

Practice placement audits are undertaken jointly between PLPs, EPs and the AEI. PLPs, EPs and the programme team tell us that practice learning environments are shared with other AEIs, and all must meet the requirements of the education audit. PLPs and EPs tell us that they will work in partnership with the programme management team to monitor student allocation and time in each practice learning environment. Students tell us that they're well supported in appropriate practice learning environments and that they evaluate all placement learning environments. This is undertaken through the completion of an online evaluation survey in the practice education portal.

Students are supernumerary on all practice learning experiences. This is confirmed by PLPs, EPs, the programme team and students we met at the approval visit.

UEL has procedures in place for escalating concerns about safe and effective care. These are communicated clearly in student-facing documentation. Students, PLPs, EPs, practice assessors, practice supervisors and the programme team confirm that they understand how to raise concerns in both the school and in practice learning environments

R3.2 ensure students experience the role and scope of the midwife enabling them to provide holistic care to women, newborn infants, partners and families

MET ☒   NOT MET ☐

R3.2 is met. The programme specification identifies holistic midwifery care as a required learning outcome. The MORA repeatedly refers to the student demonstrating holistic care of the woman and neonate, across the childbearing continuum. Programme documentation, the programme team, EPs and PLPs confirm that there's a sufficient number of practice learning experiences to ensure students gain experience in the holistic needs of those who access maternity services.

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 MORA provides templates for students to record and reflect on any IPL undertaken with members of the multidisciplinary team and for students to self-evaluate and reflect on their practice learning experiences. Students, EPs and PLPs tell us that there are opportunities in practice learning environments for students to work with a range of health and social care professionals. PLPs, EPs and the programme team tell us that students gain exposure to a broad range of multi-agency teamworking experiences. Students confirm that practice learning environments, particularly obstetric led units, support interdisciplinary and multi-agency team working.

UEL based IPL is planned to ensure students have the opportunity to learn alongside nursing, paramedic and social work students. There will be IPL simulation sessions including out of hospital births with paramedic students.

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. In keeping with national policy guidelines, continuity of midwifery carer is embedded throughout the programme through theory and practice modules. Students, EPs and PLPs tell us that there are learning opportunities enabling the achievement of the proficiencies related to continuity of midwifery carer across the whole continuum of care for 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

MET ☒   **NOT MET** ☐

R3.5 is met. The programmes utilise a number of practice placement areas across a large geographical area that encompasses a diverse population and client group. The programme team, PLPs and EPs describe the opportunities that students experience of caring for a diverse population across a range of settings. PLPs and EPs offer students the opportunity to work with specialist midwives including perinatal mental health services.

The MORA requires students to record and reflect on practice experiences, to demonstrate their adherence to the values and criteria of the Code (NMC, 2018). The theoretical elements of each programme route address the impact of diversity on health outcomes.

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. UEL provides 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. The programme curriculum is designed to build upon topics that increase in complexity and reinforce previous learning. The curriculum provides a fundamental knowledge base of midwifery practice in year one which is built upon in subsequent years, identifying increasing complexity in caring for women and newborn infants coupled with clinical decision making and autonomous practice.

The MORA is designed to document students' developing knowledge and understanding when caring for women and newborn infants with additional needs. The MORA interim reviews and holistic assessment require students to be assessed against the professional behaviours required of a registered midwife as documented in the Code.

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. Programme documentation indicates that effective processes have been established to ensure that the students' individual needs and personal circumstances are given consideration in the allocation of placements. This includes making reasonable adjustments for students with learning and physical needs. The section in the MORA 'about me' enables students to record any reasonable adjustments and alert practice supervisors and practice assessors to them. Students are encouraged to disclose any needs as soon as possible to ensure that appropriate support can be facilitated.

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** ☒

PLPs and EPs across settings indicate variable resources in practice to support and assess students with systematic EONB skills. (Condition five)

Outcome

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

The assessment of conducting systematic EONB under direct supervision is not detailed in programme documentation and has not been planned by the programme team.

Condition four: Clarify the numbers of witnessed systematic EONB and assessed systematic EONB required and where the assessment is situated in the programme within student facing and programme documentation. (SPMP R3.1)

PLPs and EPs across settings indicate variable resources in practice to support and assess students with systematic EONB skills.

Condition five: The programme team must work with PLPs and EPs to develop the proposed strategy via an implementation plan for students to successfully complete systemic EONB. (SPMP R3.1; R4.2)

Date: 7 February 2023

Post event review

Identify how the condition(s) is met

Condition four: Documentary evidence clarifies the numbers of witnessed systematic EONB and assessed systematic EONB required, and where the assessment is situated in the programme within student facing and programme documentation.

Condition four is now met.

Evidence:
Revised MORA context document, March 2022.
Systematic EONB clinical record book, April 2022.

Condition five: The programme team have provided a comprehensive implementation plan to ensure that students successfully complete systemic EONB.

Condition five is now met.

Evidence:
Systematic EONB strategy and implementation plan, undated

Date condition(s) met:
3 April 2023

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

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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

Findings against the standards and requirements

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

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

MET ☒ **NOT MET** ☐

R4.1 is met. Documentary evidence and the approval process demonstrate that UEL, EPs and PLPs have robust procedures and policies in place to show how support, supervision, learning opportunities and assessment comply with the SFNME. There's documentary evidence of UEL FtP regulations.

The programme specification indicates that students have access to a range of wider university student support services.

There's a clear partnership infrastructure and associated processes that ensure support, supervision, learning opportunities and assessment in theory and practice settings.

Documentary evidence shows that students will be able to achieve the SPM through access to a variety of practice learning experiences in PLP organisations. There are practice learning experiences in each year of the programme which are designed to facilitate students meeting a diverse range of people in a variety of practice and community settings. UEL is to use the MORA.

Placement educational audits document any adverse issues or concerns raised through student feedback or professional, regulatory and statutory bodies which may affect student practice learning.

Students are supported by link lecturers, CPFs, practice assessors and practice supervisors in the practice learning environment. Students have the opportunity to register any concerns in clinical practice with clinical staff.

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

MET ☐   **NOT MET** ☒

R4.2 is not met. Documentary evidence indicates that practice support, supervision, learning opportunities and assessment are available to students throughout the programme. Student achievement and progression in practice is recorded in the MORA. The roles and responsibilities of academic assessors, practice assessors and practice supervisors are clearly specified in programme handbooks and the MORA. There's a nominated person in each trust organisation responsible for coordinating student placement experiences and ensuring access to appropriately prepared practice assessors and practice supervisors. Practice supervisors provide day to day feedback and support to students. Practice assessors and academic assessors review student progression towards achievement and record this in the MORA at the end of each practice learning placement. Academic assessors review any action plans in place to support students. Communication and engagement between SSSA roles is evident in the programme documentation and there are robust processes in place to ensure joint agreement on the competence of students for each part of the programme. The nominated person in each practice setting is identified in the MORA. The MORA is used to guide and assess students' practice learning and proficiencies and records student achievement and progression.

Senior PLP and EP representatives confirm that arrangements are in place in the practice learning environment to ensure all practice learning opportunities meet NMC standards.

There's evidence of the implementation of the SSSA preparation across PLP and EP organisations as part of a pan-London approach with local AEIs. Practice assessors and practice supervisors confirm they're prepared for their roles.

PLPs and EPs across settings indicate variable resources in practice to support and assess students with systematic EONB skills. (Condition five)

Academic assessor and academic advisor roles are clearly defined in programme documentation. Academic assessors oversee student progression and assessment; academic advisors provide an additional supportive, pastoral role.

The programme team are recommended to consider a formalised approach in the allocation of academic assessors to midwifery students. (Recommendation two)

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. Programme documentation is mapped to the SPM in both theory and practice.

External examiners review the assessments for quality purposes.

The MORA details and records achievement of the proficiencies in the practice learning environment and progression through each part of the programme. The MORA requires students to receive and record regular feedback from practice supervisors and to complete interim reviews with practice assessors. If at any time there is a cause for concern, practice assessors and academic assessors are involved in the decision-making process. There's clear signposting throughout the MORA to prompt this action. Domains one to five are mapped and the skills detailed in domain six are clearly visible and evidenced within the MORA, demonstrating what must be met at the point of registration as a midwife.

Placement experiences are monitored by the academic link lecturer to ensure students are provided with the appropriate experiences to meet the SPM.

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

MET ☒   **NOT MET** ☐

R4.4 is met. Programme documentation shows that there are processes in place to provide students with feedback throughout the programme in both theory and practice components. There is a commitment to ensuring that standard university feedback mechanisms are achieved in a timely manner. Feedback on summative assessments aims to prepare students for their future assessments and includes commentary on areas of strength and areas for development. The academic assessor is identified as being responsible for providing feedback on assessment and progression in practice learning in collaboration with the practice assessor. The MORA will enable both the practice supervisor and practice assessor to provide ongoing formative and summative feedback to the student in the practice setting.

Women and their families can provide feedback as part of the MORA. Practice supervisors gain the consent of women and their families completing the forms for their feedback to be included in the practice assessment document. The MORA records student proficiency achievement. The MORA records meetings between the student, practice supervisors, practice assessor and academic assessor.

Reflective sessions are built into the clinical area to offer the student a chance to discuss and reflect on situations, these are facilitated by the CPF.

Evidence provides assurance that the following requirements are met

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

YES ☒ **NO** ☐

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

YES ☒ **NO** ☐

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

YES ☒ **NO** ☐

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

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** ☒

PLPs and EPs across settings indicate variable resources in practice to support and assess students with systematic EONB skills. (Condition five)

Outcome
Is the standard met? MET ☐ NOT MET ☒

PLPs and EPs across settings indicate variable resources in practice to support and assess students with systematic EONB skills.

Condition five: The programme team must work with PLPs and EPs to develop the proposed strategy via an implementation plan for students to successful complete systemic EONB. (SSSA R1.2; SPMP R3.1; R4.2)

Date: 7 February 2023
Post event review
Identify how the condition(s) is met: Condition five: The programme team have provided a comprehensive implementation plan to ensure that students successfully complete systemic EONB.   Condition five is now met.   Evidence: Systematic EONB strategy and implementation plan, undated
Date condition(s) met: 3 April 2023
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[1]. 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[2]. In the event of a student failing to register their qualification within five years they will have to undertake additional education and training or gain such experience as specified in our standards.

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 are no fall back exit awards that lead to NMC 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: 7 February 2023	
Post event review	
Identify how the condition(s) is met: N/A	
Date condition(s) met: N/A	
Revised outcome after condition(s) met: MET ☐ NOT MET ☐ N/A	

Section four

Sources of evidence

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

Key documentation	YES	NO
Programme document, including proposal, rationale and consultation	☒	☐
Programme specification(s)	☒	☐
Module descriptors	☒	☐
Student facing documentation including: programme handbook	☒	☐
Student university handbook	☒	☐
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 for midwives*	☒	☐
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(s) (Gateway 2)	☒	☐
Mapping document providing evidence of how the education institution has met the *Standards for pre-registration midwifery programmes* (NMC, 2019) (Gateway 3)	☒	☐
Curricula vitae (CV) for relevant staff	☒	☐
CV of the LME	☒	☐
Registrant academic staff details checked on NMC website	☒	☐
External examiner appointments and arrangements	☒	☐
Written placement agreement(s) between the education institution and associated practice learning partners to support the programme intentions.	☒	☐

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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:
There are no formal partnerships or written agreements in place for any employer partners (EPs) for the proposed MDA. Condition applied.

List additional documentation:
FtP policy and procedure, 15 August 2022
Revised MORA context document, March 2022
Staffing resource statement, 3 April 2023
Statement of commitment Barking, Havering and Redbridge University Hospitals NHS Trust, 22 February 2023
School of health sport and bioscience organogram, undated
Systematic EONB clinical record book, April 2022
Systematic EONB strategy and implementation plan, undated
University panel chair's approval of condition confirmation statement, undated

Additional comments:
None identified.

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

	YES	NO
Senior managers of the AEI/education institution with responsibility for resources for the programme	☒	☐
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:
Day one (midwifery students from other AEIs (direct entry and shortened programme routes)):
Year one x four
Year two x one
Year three x four
Day two (pre-registration nursing students from UEL):
Year one x one (adult)
Year two x three (Nursing associate student, adult nursing and nursing degree apprentice (Adult))

Year three x one (adult)		
Service users and carers	☒	☐
If you stated no above, please provide the reason and mitigation:		
Additional comments: None identified.		

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

	YES	NO
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	☒	☐
Library facilities	☐	☒
Technology enhanced learning Virtual learning environment	☐	☒
Educational audit tools/documentation	☒	☐
Practice learning environments	☒	☐
If practice learning environments are visited, state where visited/findings: Review of maternity service practice learning environments and educational facilities and meetings with practice assessors, practice supervisors, midwifery students on placement from other AEIs, senior PLP staff and EPs at: Newham University Hospital, Barts Health NHS Trust Homerton University Hospital, Homerton Healthcare NHS Foundation Trust		
System regulator reports reviewed for practice learning partners	☒	☐
System regulator reports list: Barking, Havering and Redbridge University Hospitals NHS Trust inspection report, January 2020 Barts Health NHS Trust inspection report, February 2019 Maudsley Hospital inspection report, March 2022 Queen's Hospital inspection report, March 2022 South London and Maudsley NHS Foundation Trust inspection report, August 2021 The Barkantine Centre inspection report, January 2023 The Royal London Hospital inspection report, November 2022 Whipps Cross University Hospital inspection report, November 2022		
If you stated no above, please provide the reason and mitigation: UEL is an established AEI; a general resource check is not required.		

Additional comments:
None identified.

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