Programme approval visit report

Section one

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<tr>
<th>Programme provider name:</th>
<th>Anglia Ruskin University</th>
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<td><strong>In partnership with:</strong></td>
<td><strong>Cambridgeshire And Peterborough NHS Foundation Trust</strong></td>
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<td>(Associated practice learning partners involved in the delivery of the programme)</td>
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<td><strong>The Queen Elizabeth Hospital Foundation Trust</strong></td>
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<td><strong>Private voluntary and independent health care providers</strong></td>
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<th>Programme reviewed:</th>
<th>Pre-registration nursing associate ✗</th>
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<td></td>
<td>Nursing associate apprenticeship ✗</td>
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| Title of programme: | Foundation degree nursing associate programme (full time, direct entry)  
|                  | Foundation degree nursing associate programme (part time work-based apprenticeship) |
| Date of approval visit: | 5 June 2019 |
| Programme start date: | Pre-registration nursing associate Nursing associate apprenticeship  
|                  | 16 September 2019  
|                  | 16 September 2019 |
| Academic level: | England  
|                  | ☒ Level 5  
|                  | ☐ Level 6 |
| QA visitor(s): | Registrant Visitor: Charmagne Barnes  
|                  | Lay Visitor: Nicholas Davies |
Anglia Ruskin University (ARU) is an established approved education institution (AEI). The school of nursing and midwifery (the school) within the faculty of health, education, medicine and social care at ARU presented a Foundation degree (Fd) nursing associate programme for approval against the Standards for pre-registration nursing associates (NMC, 2018) and Standards of proficiency for nursing associates (NMC, 2018). There are two routes: a two-year direct entry full time and a 27-month work-based part time apprenticeship route.

Documentary evidence and discussion at the approval visit confirms there is effective partnership working between ARU and key stakeholders at a strategic and operational level. This is evident in the development of the programme which includes Health Education England (HEE), lead managers in practice learning partner (PLP) organisations within Chelmsford, Cambridge, Peterborough and Essex; and current nursing associate students.

ARU has fully engaged with the national development group for the England nursing associate practice assessment document (NAPAD) ARU is also a member of the Midlands Yorkshire North East and East of England regional group for the development and regional implementation of the ongoing achievement record (OAR). Partnership working with this group supports the local implementation of the Standards for student supervision and assessment (NMC, 2018).

The Standards framework for nursing and midwifery education are not met at programme level as conditions apply.

The Standards for student supervision and assessment are met at programme level.

The programme is recommended to the NMC for approval subject to two conditions. There is one university condition. There is one NMC recommendation and two university recommendations.

Updated 28 June 2019

Evidence is provided that the changes required to meet the conditions have been made. The conditions are met.

The programme is recommended to the NMC for approval.

**Recommended outcome of the approval panel**

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

**Conditions:**

Please identify the standard and requirement the condition relates to under the relevant key risk theme. Please state if the condition is AEI/education institution in nature or specific to NMC standards.

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

**Condition one:** The AEI must provide a strategy and detailed implementation plan with timelines which demonstrate the further development, delivery, evaluation and co-production of the nursing associate programme with service users and carers. (Standards framework for nursing and midwifery education (SFNME) R1.12, Standards for pre-registration nursing associate programmes (SPNAP) R2.1)

**Condition two:** The AEI needs to provide assurance that service users and carers involved in selection and recruitment decision making do equality, diversity and inclusivity training. (SFNME R2.1)

### Selection, admission and progression:

None identified

### Practice learning:

None identified

### Assessment, fitness for practice and award:

None identified

### Education governance: management and quality assurance:

**Condition three:** The programme team are to comply with the technical report that has been issued by the Academic Registry. (university condition)

**Date condition(s) to be met:** 10 July 2019

### Recommendations to enhance the programme delivery:

**Recommendation one:** The programme team need to review the opportunities for nursing associate students to work with and learn from a range of health and social care professionals within theory modules. (SFNME R3.3; SPNAP R2.5)

**Recommendation two:** The programme team should consider the process and management of resit
opportunities in practice modules in each year of the programme. (university recommendation)

Recommendation three: The programme team reviews the structure of the placement modules in each year of the programme to think about an alternative that would lead to a fine graded award. (university recommendation)

| Focused areas for future monitoring: | Implementation of supernumerary status for full time students and protected learning time for part time students. |

| Programme is recommended for approval subject to specific conditions being met |

Commentary post review of evidence against conditions
ARU has submitted documentary evidence to meet the conditions.
The faculty service user engagement strategy has been updated and an associated action plan, with timelines provided, to enhance service user carer engagement. Condition one is now met.
Service users and carers are now required to complete the ARU equality and diversity e-learning course. The certificate awarded on completion will be downloaded as evidence and included in the faculty database for staff members who have completed their equality, diversity and inclusivity training. This will be monitored by the faculty academic quality manager. Condition two is now met.

| AEI Observations | Observations have been made by the education institution  YES ❌ NO ❌ |

Summary of observations made, if applicable
One observation was made. The report states the service user who met the panel had not been involved in the development of the proposed programme. The AEI advised this was inaccurate and referred to the service user attendance in consultation notes dated 23 November 2018 submitted to gateway three.
This has been corrected in the report.

| Final recommendation made to NMC: | Programme is recommended to the NMC for approval ❌ Recommended to refuse approval of the programme ❌ |

| Date condition(s) met: | 28 June 2018 |
### NMC Programme standards

Please refer to NMC standards reference points

- *Standards for pre-registration nursing associate programmes* (NMC, 2018)
- *Standards of proficiency for nursing associates* (NMC, 2018),
- *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*
- *QA framework for nursing, midwifery and nursing associate education* (NMC, 2018)
- *QA Handbook*

### 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

R2.7 ensure that service users and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection
Standard 3: Student empowerment:
R3.3 have opportunities throughout their programme to work with and learn from a range of people in a variety of practice placements, preparing them to provide care to people with diverse needs
R3.16 have opportunities throughout their programme to collaborate and learn with and from other professionals, to learn with and from peers, and to develop supervision and leadership skills
R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning
R3.18 have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice.

Standard 4: Educators and assessors:
R4.7 liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment
R4.9 receive and act upon constructive feedback from students and the people they engage with to enhance the effectiveness of their teaching, supervision and assessment
R4.10 share effective practice and learn from others

Standard 5: Curricula and assessment:
R5.4 curricula are developed and evaluated by suitably experienced and qualified educators and practitioners who are accountable for ensuring that the curriculum incorporates relevant programme outcomes
R5.5 curricula are co-produced with stakeholders who have experience relevant to the programme
R5.14 a range of people including service users contribute to student assessment

Standards for student supervision and assessment (NMC, 2018)

Standard 1: Organisation of practice learning:
R1.7 students are empowered to be proactive and to take responsibility for their learning
R1.8 students have opportunities to learn from a range of relevant people in practice learning environments, including service users, registered and non-registered individuals, and other students as appropriate

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

Standard 3: Practice supervisors: role and responsibilities:
R3.3 support and supervise students, providing feedback on their progress towards, and achievement of, proficiencies and skills
Standard 4: Practice supervisors: contribution to assessment and progression:

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

Standard 7: Practice assessors: responsibilities:

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

Standard 9: Academic assessors: responsibilities:

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

Findings against the standard and requirements

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

Documentary evidence and discussion at the approval visit with the programme team and senior PLP representatives demonstrate effective partnership working with PLP organisations over the geographical areas of Chelmsford, Essex, Cambridge and Peterborough. PLPs have been and will continue to be involved in the design and development of the pre-registration nursing associate programme.

The development of the England NAPAD is evidence of a national partnerships. The OAR has been co-produced in partnership with the Midlands, Yorkshire, north east and east of England regional group who support the local implementation of the NAPAD, OAR and the Standards for student support and supervision (SSSA).

The school has signed placement agreements with each PLP committing the university and PLPs to ensuring effective learning and assessment within a safe environment for nursing associate students. PLP senior representatives and employers present at the approval visit confirm this is the case. Employers present include: Royal Papworth Hospital NHS Foundation Trust; Southend University Hospital NHS Foundation Trust; Cambridge and Peterborough NHS Foundation Trust; North West Anglia NHS Foundation Trust; MSB group Mid-Essex, Southend, Basildon and Thurrock; and, North East London NHS Foundation Trust. They confirm they are fully aware of the requirements for supernumerary status for the full-time students and protected learning time for part-time students.

Documentary evidence and discussion at the approval event with PLP senior representatives and employers confirm there are preparation plans and processes in place to develop and support practice supervisors and practice assessors in their roles to meet the SSSA. Oversight of practice supervisors and practice assessors is a joint responsibility of the AEI and PLP leads.
The programme team and senior representatives from the AEI confirm that resources are in place to ensure sufficient numbers of academic assessors. The role is clearly defined and meets the SSSA. Meetings with the programme team and PLPs confirm the partnership working in relation to the implementation of the SSSA.

There is collaborative working through the bi-monthly practice education committee which includes practice leads and academic staff from the AEI responsible for the proposed programme. Documentary evidence and discussions at the approval visit confirm there are established and good lines of communication between the AEI and the PLPs, through the education champion for each trust, link tutors and practice coordinator and practice educators.

There is an overarching service user and carer (SUC) strategy for the school. The strategy identifies the involvement of SUCs at all levels of programme design, recruitment and selection of students, delivery, assessment and feedback to students in the PAD.

We were told by the programme team about a new SUC strategy for 2019 which is intended to be used for this programme. However, this was not presented to the panel and we found limited evidence of service user and carer involvement in the proposed programme, particularly their role in co-production. (Condition one) (SFNME R1.12, SPNAP R2.1)

We heard service users and carers work at specific campuses within ARU and we were told they have not had an opportunity to meet with each other.

There was a service user on the approval panel from the Chelmsford university site who told us she has been actively involved in the recruitment, delivery and assessment of the nursing associate legacy programme. We were told that the programme team intend to involve SUCs on the proposed programme.

There was only one SUC available to meet the approval panel. She has attended a consultation event about the proposed nursing associate programme. She is involved in recruitment and selection of students but hasn’t received training regarding equality, diversity and inclusivity. (Condition two) (SFNME R2.1)

Documentary evidence and a meeting with current students on the HEE programme confirm nursing associate students have been consulted on the proposed programme development.

Meeting with students and recently qualified nursing associates from the legacy programme confirm this engagement with ARU. Students are enthusiastic about their programme and feel well supported in both theory and practice learning. They confirm they have opportunities to meet their proficiencies and are given time to do so. The recently qualified nursing associates we met tell us they feel prepared for their new role.

Students confirm they have processes in place to give feedback on theory and practice learning. There is a bi-annual student-staff liaison committee which includes PLPs. Students feedback through module and practice learning
evaluations and receive feedback from the programme team through a ‘you said - we did’ format.

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 and,

**MET ☐ NOT MET ☒**

Please provide any narrative for any exceptions

There is an overarching SUC strategy for the school. The strategy identifies the involvement of SUCs at all levels of programme design, recruitment and selection of students, delivery, assessment and feedback to students in the PAD.

We were told by the programme team about a new SUC strategy for 2019 which is intended to be used for this programme. However, this was not presented to the panel and we found limited evidence of service user and carer involvement in the proposed programme, particularly their role in co-production. (Condition one) (SFNME R1.12; SPNAP R2.1)

There was only one SUC available to meet the approval panel. She had attended a consultation event about the proposed nursing associate programme. She is involved in recruitment and selection of students but hasn’t received training regarding equality, diversity and inclusivity. The panel concludes that equality, diversity and inclusivity training must be completed by SUCs who are involved in recruitment and selection decision making. (Condition two) (SFNME R2.1)

Gateway 2: Standards for student supervision and assessment

**MET ☒ NOT MET ☐**

Please provide any narrative for any exceptions

If not met, state reason and identify which standard(s) and requirement(s) are not met and the reason for the outcome

There is an overarching SUC strategy for the school. The strategy identifies the involvement of SUCs at all levels of programme design, recruitment and selection of students, delivery, assessment and feedback to students in the PAD.

We were told by the programme team about a new SUC strategy for 2019 which is intended to be used for this programme. However, this was not presented to the panel and we found limited evidence of service user and carer involvement in the proposed programme, particularly their role in co-production. (Condition one)

Condition one: The AEI must provide a strategy and detailed implementation plan with timelines which demonstrate the further development, delivery, evaluation and co-production of the nursing associate programme with service users and carers.
There was only one SUC available to meet the approval panel. She is involved in recruitment and selection of students but hasn’t received training regarding equality, diversity and inclusivity. (Condition two)

Condition two: The AEI needs to provide assurance that service users and carers involved in selection and recruitment decision making do equality, diversity and inclusivity training. (SFNME R2.1)

**Post Event Review**

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

Condition one: The faculty service user engagement strategy has been updated together with an associated action plan to enhance service user carer engagement. An academic lead for service user and carer participation has been appointed. This role involves managing the service user and carer contribution across the NMC approved programmes. The action plan includes the appointment of a minimum of 10 SUC participants from across the region, which includes Essex and Cambridgeshire.

SUCs will be involved in all programme activity, including recruitment, programme design and development, formative assessment and evaluation. They will meet bi-annually as a group to share best practice and challenges. The academic lead will provide support and guidance. Condition one is met.

Condition two: The faculty currently holds a database of all staff members who have completed their equality, diversity and inclusivity training, which is monitored by the faculty academic quality manager. This database now includes SUCs who are recruited to participate in recruitment activity for applicants for the nursing associate programme.

SUCs will be given access to and asked to complete the ARU equality and diversity e-learning course. The certificate awarded on completion can be downloaded as evidence for the database. The academic lead will support this process as necessary. For those SUCs who do not have adequate IT facilities to complete the IT training at home, they will be invited to go to the university campus and complete the training using IT facilities and support at the university. Condition two is met.

Evidence:
ARU response to conditions, 27 June 2019
ARU updated faculty service user engagement strategy, 2019
Service user strategy action plan with timelines version 3, June 2019

**Date condition(s) met:** 28 June 2019

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

Condition one and condition two are now met.
Student journey through the programme

### Standard 1: Selection, admission and progression

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

- R1.1 Confirm on entry to the programme that students:
  - R1.1.1 demonstrate values in accordance with the Code
  - R1.1.2 have capability to learn behaviours in accordance with the Code
  - R1.1.3 have capability to develop numeracy skills required to meet programme outcomes
  - R1.1.4 can demonstrate proficiency in English language
  - R1.1.5 have capability in literacy to meet programme outcomes
  - R1.1.6 have capability for digital and technological literacy to meet programme outcomes

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

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

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

- R1.5 permit recognition of prior learning that is capable of being mapped to the Standards of proficiency for nursing associates and programme outcomes, up to a maximum of 50 percent of the programme. This maximum limit of 50 percent does not apply to applicants to pre-registration nursing associate programmes who are currently a NMC registered nurse without restrictions on their practice, and...
R1.6 provide support where required to students throughout the programme in continuously developing their abilities in numeracy, literacy, digital and literacy to meet programme outcomes.

*Standards framework for nursing and midwifery education* specifically:

R2.6, R2.7, R2.8, R2.10

### Proposed transfer of current students to the programme under review

Demonstrate a robust process to transfer students studying Health Education England curriculum onto the proposed programme to ensure programme learning outcomes and proficiencies meet the *Standards for pre-registration nursing associate programmes* (NMC, 2018).

### Findings against the standard and requirements

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

- There is evidence of selection processes, including statements on digital literacy, literacy, numeracy, values-based selection criteria and capability to learn behaviour according to the Code, educational entry standard required, and progression and assessment strategy, English language proficiency criteria is specified in recruitment processes. Service users and practitioners are involved in selection processes. (R1.1.1 – R1.1.6)

  YES ☑  NO ☐

- There is evidence of occupational health entry criteria, inoculation and immunisation plans, fitness for nursing assessments, Criminal record checks and fitness for practice processes are detailed. (R1.2)

  YES ☑  NO ☐

- Health and character processes are evidenced including information given to applicants and students including details of periodic health and character review timescales. Fitness for practice processes are evidenced and information given to applicants and students are detailed. (R1.3)

  YES ☑  NO ☐

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

  YES ☑  NO ☐
Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met.

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

MET ☑ NOT MET ☐

R1.5 is met. ARU has an established recognition of prior learning (RPL) policy and process and this is detailed in the programme information and programme specification. Discussion at the approval event confirms that the academic regulations at ARU supports RPL for the proposed programme. An RPL claim can map the Fd nursing associate module outcomes, up to a maximum of 50 percent of the programme. There is the opportunity for students who have completed the NA PAD part one in another AEI, to submit a claim to demonstrate they meet the practice learning outcomes.

The academic regulations for ARU also allow for NMC registered nurses without restrictions on their practice, to submit an RPL and prior experiential learning claim for up to two thirds of the total academic credit for the programme, of which no more than half may be based on recognition of experiential learning.

An external examiner scrutinises the RPL claim. The RPL claim is scrutinised by a university panel and the claim formally ratified before the student commences the programme. The student receives a transcript of learning, which identifies the modules and credits awarded.

Discussion at the event provides assurance that RPL information is provided to students.

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

MET ☑ NOT MET ☐

R1.6 is met. Documentary evidence and discussion at the approval visit shows a clear strategy for the assessment and development of numeracy, literacy, digital and technological literacy. These skills are mapped within the proposed nursing associate programme to demonstrate how students will meet the skills within the proficiencies for nursing associates and the programme outcomes.
The application to the programme is online. Candidates need to have GCSE maths and English at Grade C/4 (or equivalent) and demonstrate proficiency in English language which is tested at interview.

The programme has an explicit theme of academic literacy and study skills in each year of the programme. This is evident in the module specifications. The programme team confirm that enrolled students can access the library team, personal tutor, course leader, and learning support advisors who provide students support to develop these skills. The students we met at the approval visit confirm this. They told us they have an induction to information technology at the start of the programme. They also told us about additional support that is provided for digital and technological literacy, if needed.

Formative and summative assessments support the development of literacy, numeracy, digital and technological literacy through the programme. Numeracy is developed through the use of an online programme ‘Safe medicate’ which is applied to practice learning in year one and two of the programme. Students must achieve 100 percent in numeracy in year two of the programme. The programme handbook and modules identify where proficiency outcomes in numeracy are delivered and assessed. The PAD part one and two assesses medicines management which is also recorded in the OAR.

ARU’s digital literacy framework is used to support digital literacy. Documentary evidence cites the mapping of digital badges into the programme. Students told us that they are taught these skills which they develop over the duration of the programme. Examples cited include the use of the digital platform for practice assessment; sustainable electronic assessment, creating presentations, e-portolio and Turnitin for submission of and feedback on assessments. E-learning is supported by e-modules which supplement taught learning, for example; for safeguarding, data security and conflict resolution.

The learning management system used is CANVAS which was demonstrated during the approval visit. Students confirm its effective use.

The NA PAD shows how numeracy, literacy, digital literacy and technology are developed in practice learning and meet programme outcomes. The programme team gave examples of how these skills are assessed; such as medicines management, written reflection, use of the online platform MyProgress for recording of practice assessment, and use of the digital platform for practice assessment.

There is clear mapping of the programme outcomes to the NMC Standards of proficiency for nursing associates, which identifies where indicative content and outcomes will be achieved. The PAD, skills record and the OAR provide written evidence that competence in literacy, digital and technological literacy and numeracy are mapped against the nursing standards of proficiency for nursing associates are met.

**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 nursing associate programmes and Standards of proficiency for nursing associate will be met through the transfer of existing students onto the proposed programme.

- There is evidence that students learning in theory and practice on the HEE curriculum is mapped to the programme standards and Standards for pre-registration nursing associate programmes and support systems are in place.

Existing students on the nursing associate programme won’t be transferred on to the theoretical modules of the proposed programme.

All students on the existing nursing associate courses will transfer onto the SSSA when the programme has been approved. This is anticipated as being September 2019. The roles to supervise and assess students will change but students will use the existing PAD and OAR for their practice assessment. Students at the event confirm this.

PLPs confirm that students will transfer onto the SSSA and practice staff are prepared for the new roles. Preparation of practice supervisors and assessors is ongoing through training and updates.

The practice education committee comprising academic staff and PLPs meet on a bi-monthly basis and will monitor the effectiveness of the implementation of the SSSA. PLPs will keep a record of all practice supervisors and practice assessors.

The school will assign academic assessors to each student for each year of the programme and the student will be told of their academic assessor at the start of each year.

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

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<th>Outcome</th>
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<td>Is the standard met?</td>
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Date: 5 June 2019

Standard 2: Curriculum

Approved education institutions, together with practice learning partners, must:
| R2.1 ensure that programmes comply with the NMC Standards framework for nursing and midwifery education |
| R2.2 comply with the NMC Standards for student supervision and assessment |
| R2.3 ensure that all programme learning outcomes reflect the Standards of proficiency for nursing associates. |
| R2.4 design and deliver a programme that supports students and provides an appropriate breadth of experience for a non-field specific nursing associate programme, across the lifespan and in a variety of settings |
| R2.5 set out the general and professional content necessary to meet the Standards of proficiency for nursing associates and programme outcomes |
| R2.6 ensure that the programme hours and programme length are: |
| 2.6.1 sufficient to allow the students to be able to meet the Standards of proficiency for nursing associates, |
| 2.6.2 no less than 50 percent of the minimum programme hours required of nursing degree programmes, currently set under Article 31(3) of Directive 2005/36/EC (4,600 hours) |
| 2.6.3 consonant with the award of a foundation degree (typically 2 years) |
| R2.7 ensure the curriculum provides an equal balance of theory and practice learning using a range of learning and teaching strategies, and |
| R2.8 ensure nursing associate programmes which form part of an integrated programme meet the nursing associate requirements and nursing associate proficiencies. |

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

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

| Findings against the standard and requirements |
| Evidence provides assurance that the following QA approval criteria are met: |
| - There is evidence that the programme complies with the NMC Standards framework for nursing and midwifery education (R2.1) | YES ☑ NO ❌ |

R2.1 is not met. There is an overarching SUC strategy for the school. The strategy identifies the involvement of SUCs at all levels of programme design, recruitment
and selection of students, delivery, assessment and feedback to students in the PAD.

We were told by the programme team about a new SUC strategy for 2019 which is intended to be used for this programme. However, this was not presented to the panel and we found limited evidence of SUC involvement in the proposed programme, particularly their role in co-production. (Condition one) (SFNME R1.12; SPNAP R2.1)

We heard service users and carers work at specific campuses within ARU and we were told they have not had an opportunity to meet with each other.

There was a service user on the approval panel from the Chelmsford university site who told us she has been actively involved in the recruitment, delivery and assessment of the nursing associate legacy programme. We were told that the programme team intend to involve SUCs on the proposed programme.

There was only one SUC available to meet the approval panel. She had attended a consultation event about the proposed programme. She is involved in recruitment and selection of students but hasn’t received training regarding equality, diversity and inclusivity. (Condition two) (SFNME R2.1)

- There is evidence that the programme complies with the NMC Standards for student supervision and assessment (R2.2)
  - YES ☑  NO □

- Mapping has been undertaken to show how the curriculum and practice learning content meets the Standards of proficiency for nursing associates and programme outcomes. (R2.3)
  - YES ☑  NO □

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

- There is evidence to show how the design and delivery of the programme will support students in both theory and practice to experience a non-field specific nursing associate programme, across the lifespan and in a variety of settings. (R2.4)
  - MET ☑  NOT MET □

R2.4 is met. The programme team and PLPs/employers confirm that placements are chosen to ensure that all students practise in a range of environments and have experiences across the life span.

Evidence provided in the placement planner for the two-year programme, shows how the nursing associate student will have a breadth of experiences across the
life span and in a variety of settings. The part time students will have a minimum of two external placements in the programme.

The module descriptors provide detail of content confirming theory and practice components across the lifespan are fully represented.

Students are supported during their practice learning by the ARU education champion, link tutor, practice supervisor and practice assessor. This was confirmed by students. They told us they feel adequately prepared to relate theory to practice learning and are able to gain knowledge and skills to achieve the proficiencies for nursing associates.

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

- There is evidence that mapping has been undertaken to show how the programme outcomes, module outcomes and content meets the *Standards of proficiency for nursing associates* and programme outcomes. (R2.5)
  - **YES ☑ NO □**

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

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

R2.6 is met. The proposed nursing associate programme offers two routes; a full-time direct entry route which is two years in length; and, a part-time work based learning, which is 27 months in length.

Documentary evidence confirms each route is no less than 2300 hours in total, with an equal split in theory and practice. There are of 60 academic credits for theoretical learning and 60 credits for practice learning in each year of the programme. Programmed learning demonstrated via the programme planner and the mapping document provided allows the student to be able to meet the *Standards of proficiency for nursing associates*.

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

R2.7 is met. The programme structure demonstrates an equal balance of theory and practice, which isn't less than 2300 hours. The module descriptors detail the learning in theory and how this is managed. Practice learning is 37.5 hours per week and is demonstrated in the programme planner and placement planner for the student.

The structure and design of the programme shows how many modules, academic credits and hours are to be completed at the progression point from year one to two and by the end of the programme.

The practice modules have been assigned a total of 60 credits per year of the programme. The practice modules are graded a pass/fail only. This has an implication for the fine grading of the Fd nursing associate programme which can only be classified as a pass for all students who have passed all modules as per the programme requirements.

Module guides show clear aims and learning outcomes that are mapped to the Standards of proficiency for nursing associates. The England NA PAD and OAR show mapping to the proficiencies to be achieved in practice learning.

Learning and teaching strategies and the assessment scheme are highlighted in the programme specification and module specifications. The programme specification and programme information document demonstrate how students will apply theory to practice in a focused and progressive manner. The programme is supportive of the learning needs of students. Students confirm they enjoy their learning and feel supported by academic staff and PLPs to learn.

The programme team presented a variety of interactive teaching strategies such as e-learning, skills and simulation, lectures, formative peer assessment, discussion groups.

The PAD provides opportunities for students to work with and learn from other health and care professionals in practice. The students confirm that they have not had the opportunity to do so in theory in the current programme. The panel recommended that the programme team review the opportunities for nursing associate students to work with and learn from a range of health and social care professionals within theory modules. (Recommendation one) (SFNME R3.3; SPNAP R2.5)

Documentary evidence and confirmation by the programme team confirms the Standards of proficiency for nursing associates and the skills and procedures in annexe A and B are incorporated in the modules enabling the student to achieve these by the end of the two-year programme.

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

- There is evidence that programmes leading to nursing associate registration and registration in another profession, will be of suitable length and nursing
associate proficiencies and outcomes will be achieved in a nursing associate context. (R2.8)

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

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There is an overarching SUC strategy for the school. The strategy identifies the involvement of SUCs at all levels of programme design, recruitment and selection of students, delivery, assessment and feedback to students in the PAD.

We were told by the programme team about a new SUC strategy for 2019 which is intended to be used for this programme. However, this wasn't presented to the panel and we found limited evidence of service user and carer involvement in the proposed programme, particularly their role in co-production. (Condition one) (SFNME R1.12; SPNAP R2.1)

There was only one SUC available to meet the approval panel. She had attended a consultation event about the proposed programme. She is involved in recruitment and selection of students but hasn’t received training regarding equality, diversity and inclusivity. (Condition two) (SFNME R2.1)

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

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### Outcome

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There is an overarching SUC strategy for the school. The strategy identifies the involvement of SUCs at all levels of programme design, recruitment and selection of students, delivery, assessment and feedback to students in the PAD.

We were told by the programme team about a new SUC strategy for 2019 which is intended to be used for this programme. However, this was not presented to the panel and we found limited evidence of service user and carer involvement in the proposed programme, particularly their role in co-production. (Condition one)

Condition one: The AEI must provide a strategy and detailed implementation plan with timelines which demonstrate the further development, delivery, evaluation and co-production of the nursing associate programme with service users and carers. (SFNME R1.12; SPNAP R2.1)

There was only one SUC available to meet the approval panel. She had attended a consultation event about the proposed programme. She is involved in recruitment and selection of students but hasn’t received training regarding equality, diversity and inclusivity. (Condition two)
Condition two: The AEI needs to provide assurance that service users and carers involved in selection and recruitment decision making do equality, diversity and inclusivity training. (SFNME R2.1)

The PAD provides opportunities for students to work with and learn from other health and care professionals in practice. The students confirm that they have not had the opportunity to do so in theory sessions in the current programme. The panel recommended that the programme team review the opportunities for nursing associate students to work with and learn from a range of health and social care professionals within theory modules. (Recommendation one)

Recommendation one: The programme team need to review the opportunities for nursing associate students to work with and learn from a range of health and social care professionals within theory modules. (SFNME R3.3; SPNAP R2.5)

Date: 5 June 2019

Post event review

Identify how the condition(s) is met:

Condition one: The faculty service user engagement strategy has been updated together with an associated action plan to enhance service user carer engagement. An academic lead for service user and carer participation has been appointed. This role involves managing the service user and carer contribution across the NMC approved programmes. The action plan includes the appointment of a minimum of 10 SUC participants from across the region, which includes Essex and Cambridgeshire.

SUCs will be involved in all programme activity, including recruitment, programme design and development, formative assessment and evaluation. They will meet bi-annually as a group to share best practice and challenges. The academic lead will provide support and guidance. Condition one is met.

Condition two: The faculty currently holds a database of all staff members who have completed their equality, diversity and inclusivity training, which is monitored by the faculty academic quality manager. This database now includes SUCs who are recruited to participate in recruitment activity for applicants for the nursing associate programme.

SUCs will be given access to and asked to complete the ARU equality and diversity e-learning course. The certificate awarded on completion can be downloaded as evidence for the database. The academic lead will support this process as necessary. For those SUCs who do not have adequate IT facilities to complete the IT training at home, they will be invited to go to the university campus and complete the training using IT facilities and support at the university. Condition two is met.

Evidence:

• ARU response to conditions, 27 June 2019
• ARU updated faculty service user engagement strategy, 2019
• Service user strategy action plan with timelines version 3, June 2019
Date condition(s) met: 28 June 2019

Revised outcome after condition(s) met:  
Condition one and condition two are now met.
Assurance is provided that the SFNME R1.12 and R2.1 are met.
Assurance is provided that the SPNAP R2.1 is met.

Standard 3: Practice learning

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

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

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

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

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

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

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

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

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

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

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

Standards framework for nursing and midwifery education specifically:

R1.1, R1.3, R1.5; R2.9, R2.11; R3.3, R3.5, R 3.7, R3.16; R5.1, R5.7, R5.10, R5.12

Standards for student supervision and assessment, specifically:

R1.1 – R1.11
Findings against the standard and requirements

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

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

| MET ☑ | NOT MET □ |
---|---|

R3.1 is met. The placement planner and discussion with the programme team confirms that students will be exposed to a range of practice learning experiences to enable safe and effective care to a range of people across the life span and in a variety of settings. The programme team confirmed this at the event.

PLPs confirm that they identify practice learning opportunities for students to achieve their proficiencies. They use hub and spoke placements as necessary, to deliver practice learning experiences to enable students to meet the Standards of proficiency for nursing associates. They confirm there is sufficient capacity to meet the practice learning requirements for students on this programme. Students confirm they are allocated a variety of practice learning experiences that are different from their primary placement.

Discussion with the PLPs provides assurance that they understand their role in evaluating the ability of the student to deliver safe and effective care and how this is communicated to students at specific points during practice learning and on a daily shift basis. This is captured in the practice learning log which the student completes and submits alongside the OAR.

The programme team and PLPs confirm that there are policies and processes in place for staff and students to raise concerns, assess a student’s fitness to practise and support students who may not be achieving. Documentary evidence supports this. Students confirm they know how to raise and escalate concerns in practice if they witness poor care.

Practice learning outcomes are presented in the module descriptors and the Standards of proficiency for nursing associates are clearly stated in the PAD. In the event that a proficiency cannot be experienced in the practice setting, it will be addressed and assessed in simulated practice.

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

| MET ☑ | NOT MET □ |
R3.2 is met. Documentary analysis confirms the placement model demonstrates that students will experience a variety of practice learning experiences in different settings enabling them to meet the holistic needs of people of all ages.

Students on both routes will have four placements over the two years of the programme.

The programme team confirm that students will be supported in practice learning by the education champion, link tutor, practice supervisor, practice assessor, academic assessor, personal tutor and course leader.

The programme team and the PLPs understand the roles of the practice supervisor, practice assessor and academic assessor in the assessment of practice learning. Guidance and preparation for their roles is confirmed. They can also access an online module developed for supervisors and assessors. The PLP/employer will keep a record of the numbers of appropriately trained practice supervisors and practice assessors and share this with the AEI during the biennial educational audit. The audit process will also assess the appropriateness of practice learning environments to support students learning.

The AEI will be responsible for ensuring the academic assessor is identified to the student and also the practice learning environment at the start of each year of the programme. This was confirmed by the programme team.

We found that practice learning is assessed appropriately. The learning outcomes are mapped to the Standards of proficiency for nursing associates. Assessment of practice learning is assessed as a tripartite arrangement which is outlined in the PAD and was confirmed by the PLPs and programme team.

Practice assessment is submitted electronically through MyProgress. Monitoring of the quality of practice learning assessment is done by the academic assessor using a rag rating scoring tool (RRST). The RRST identifies the quality of feedback and assessment evidence of each PAD by the practice assessor and practice supervisor. This helps identify practice supervisors and assessors who may need further support. It also recognises excellence of feedback to students from the assessors. This is acknowledged by ARU via a letter to the named assessor.

Students have the opportunity to self-evaluate and reflect on their practice learning. This is summatively assessed in the PAD and OAR. Submission of e-practice assessments allows for ongoing monitoring and evaluation of the student’s progress by the practice assessor and academic assessor. This was discussed at the approval event. Practice modules are presented at the assessment board attended by the external examiner for the programme, who reviews all modules.

- There is evidence of plans for effective and proportionate use of technology enhanced and simulation-based learning opportunities and to support learning and assessment in the curriculum (R3.3)
R3.3 is met. The programme team confirm the use of simulated practice to allow students the opportunity to develop and rehearse the skills needed to meet the Standards of proficiency for nursing associates. They confirm simulation is used to support mandatory training, for example basic life support.

In the event of a student not being able to complete a skill in practice, especially relating to annexe A and B in the Standards of proficiency for nursing associates, the opportunity would be made available through simulated practice.

The programme team told us of the availability of technology enhanced learning and assessment strategies including the online numeracy package, Safe medicate, which is used through years one and two of the programme, to help develop and support confidence with drug calculations and application to health numeracy.

Students told us they access the learning management system CANVAS with ease. Its functionality was demonstrated at the approval visit. The programme team and documentary evidence show students access Clinicalskills.net to develop their skills.

Practice assessment is via e-assessment and recorded on the MYProgress platform. Students use Turnitin, an online platform to submit assessments and receive feedback. They also develop an e-portfolio which is summatively assessed at the end of the programme.

We are assured there are effective technology enhancements and simulation-based learning opportunities available to support learning and assessment in the programme.

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

R3.4 is met. We found that ARU has appropriate and adequate policies, facilities and support services to take account of students' individual needs and personal circumstances when allocating their practice learning, including making reasonable adjustments for disabilities. The school makes students aware of these support services. They are sign posted to how to access these services at induction to the programme, in the programme handbook and through online information and web-based information.

Students confirm they can access support services and know who to go to according to their needs. Their personal tutor and programme leader also signpost them as needed. Practice supervisors and practice assessors are made aware of the student requiring reasonable adjustments in practice. This was confirmed by the programme team and the PLPs we met. The PLPs and practice educators confirmed they identify and support students' individual needs and personal circumstances when allocating their practice learning, including making reasonable adjustments for disabilities.
- Evidence that nursing associate students have protected learning time through one of the two options (A or B). There must be clarity of evidence to support the single option selected. 

Processes are in place to ensure that protected learning time will be monitored in accordance with the selected option.

Evidence that students will be released for a minimum of 20 percent of the programme for academic study.

Evidence that students will be released for a minimum of 20 percent of the programme time, which is assured protected learning time in external practice placements, enabling them to develop the breadth of experience required for a generic role.

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

**MET ☒  NOT MET ☐**

R3.5 is met. Documentary evidence and findings at the approval visit confirms the direct entry full time students will be supernumerary on all practice learning placements (option A) and will be supervised by the practice supervisor and practice assessor.

Students on the part time work-based learning apprenticeship route will have clearly identified protected learning time (option B). A collaboratively developed definition of the minimum threshold for protected learning time has been agreed by all stakeholders/employers in the nursing associate partnership groups across Cambridgeshire and Essex.

PLPs/employers confirmed their understanding and agreement about protected practice learning time and their support for students to achieve it.

**Note:** If issues of concern have been identified by system regulators regarding practice learning environments which are to be used for this programme include an overview of the partnership approach between the AEI/education institution and their practice learning partners to manage and mitigate any risks to student learning.

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**
Standard 4: Supervision and assessment

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

R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education
R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC Standards for student supervision and assessment
R4.3 ensure they inform the NMC of the name of the registered nurse or registered nursing associate responsible for directing the education programme
R4.4 provide students with feedback throughout the programme to support their development
R4.5 ensure throughout the programme that students meet the Standards of proficiency for nursing associates
R4.6 ensure that all programmes include a health numeracy assessment related to nursing associate proficiencies and calculation of medicines which must be passed with a score of 100 percent
R4.7 assess students to confirm proficiency in preparation for professional practice as a nursing associate
R4.8 ensure that there is equal weighting in the assessment of theory and practice, and
R4.9 ensure that all proficiencies are recorded in an ongoing record of achievement which must demonstrate the achievement of proficiencies and skills as set out in Standards of proficiency for nursing associates.

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

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

Findings against the standards and requirements

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met
There is evidence of how the programme will ensure how support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education. (R4.1)

R4.1 is met. Documentary evidence and discussion at the approval visit shows that the AEI works collaboratively with PLPs to develop and support the programme. Partnership working is effective through the practice education committee and the NA partnership group. The former meets bi-monthly and it is anticipated the latter will continue to meet on a quarterly basis. PLPs assured us of their active participation in these forums.

Senior employers and senior managers present at the approval visit assure us of their support for the operational governance of the pre-registration nursing associate programme. There is a regional educational audit tool for practice learning environments. The AEI has signed placement agreements with each PLP identifying responsibilities for educational audits and the governance of the practice learning environments.

There is a wide range of support for the nursing associate student in the AEI to support their progression and achievement. This was presented by the programme team and includes: academic, pastoral, financial and well-being support.

Senior managers in the AEI confirm they have the resources to support the ongoing development and requirements for academic assessors, practice supervisors and practice assessors. We are assured that practice supervisors and practice assessors are on a rolling programme of preparation and training and PLPs are confident that they are able to support, develop and assess the nursing associate students using the PAD and OAR. They also have access to a regional online module of preparation. Placement learning coordinators ensure the allocation of practice supervisors and practice assessors to the NA student. PLPs confirm there is close working with the university in preparation of staff to meet the SSSA. They emphasised the role of the education champion and link tutor through whom they channel communications to the AEI.

Evaluations and feedback are a well-established part of the quality assurance process for the school and AEI. Students and the programme team told us about the mechanisms for providing feedback through the practice module evaluations available on E-vision, course evaluations and the course committee structure. Students feel they are valued and listened to, and praise for the programme team in addressing any issues they raise.

PLPs tell us of their involvement in the assessment of practice and identified clear processes to ensure this is carried out effectively. There are identified touch points between the student, practice assessor and academic assessor. This is documented too. PLP’s are cognisant of processes in place and whom to contact if they have concerns relating to a student and/or their performance in practice. Tripartite action planning between the assessor, link tutor and the student is highlighted.
The AEI confirm they have overall responsibility for practice assessment which is presented at the assessment board and is subject to review by the external examiner appointed to the programme.

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

| MET ☒ | NOT MET □ |

R4.2 is met. The programme team confirm that all students will move to the SSSA once approval has been given for this programme and anticipate the move to the SSSA for September 2019. A regional approach to supervision and assessment is being adopted to ensure consistent oversight of practice supervision and assessment. This is supported by the England NAPAD and OAR.

The programme team presented and articulated how PLPs’ staff are being prepared for the roles of practice supervisor and practice assessor which was confirmed by PLPs. Practice learning coordinators oversee the allocation of practice supervisors and practice assessors to the NA students.

There is also ongoing preparation of the academic assessors. All the roles and responsibilities to meet the SSSA requirements are evident in the documentary evidence submitted. The AEI plan to continue this work through the practice education committee and will be involved in updating sessions of PLPs as the programme rolls out. The CANVAS site has a section dedicated to practice learning, support and supervision.

A record of practice supervisors and practice assessors will be maintained by the PLP and shared at educational audit and as necessary with the AEI. The AEI will do the same with the record of academic assessors. The programme team and the documentary evidence confirm this.

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

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

| YES ☒ | NO □ |

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

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

| MET ☒ | NOT MET □ |
R4.4 is met. Students have formative assessments to support the development and achievement of summative assessments. The diet of assessments is clear in the programme documentation. A range of assessment tasks are identified and detailed in the module descriptors. The learning outcomes are clearly mapped to the assessments in the module descriptors.

Students confirm they have both formative and summative assessments. They enjoy the formative peer assessment process which they find to be useful in supporting their own development and develops their confidence in engaging with their peers. Students are very positive about the support and feedback they receive and confirm they access module feedback via Turnitin.

The PAD provides detail of the practice learning assessment process. This includes both formative and summative assessment. PLPs demonstrate clear understanding of the practice assessment process and their role in providing feedback to students. They know when to include the AEI in this feedback process to the student.

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

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R4.5 is met. The PAD and mapping documents submitted identify the module learning outcomes mapped to the Standards of proficiency for nursing associates. Students are allocated to practice learning placements to enable them to achieve the programme outcomes and Standards of proficiency for nursing associates to be fit for practice by the end of the programme.

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

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

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

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

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

(R4.9)

| YES ☒ | NO ☐ |

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

| YES ☒ | NO ☐ |

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

| YES ☒ | NO ☐ |

**Outcome**

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

**Date:** 5 June 2019

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**Standard 5: Qualification to be awarded**

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

**R5.1** ensure that the minimum award for a nursing associate programme is a Foundation Degree of the Regulated Qualifications Framework (England), which is typically two years in length, and

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

**Findings against the standards and requirements**

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

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

| YES ☒ | NO ☐ |
- Evidence that students are notified during the programme that they have five years in which to register their award with the NMC. In the event of a student failing to register their qualification within five years they will have to undertake additional education and training or gain such experience as is specified in our standards in order to register their award. (R5.2)

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**Fall Back Award**

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

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

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There is no fall back award with registration as a nursing associate.

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

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<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

**Outcome**

<table>
<thead>
<tr>
<th>Is the standard met?</th>
<th>MET</th>
<th>NOT MET</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date: 5 June 2019</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Sources of evidence

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

<table>
<thead>
<tr>
<th>Key documentation</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme document, including proposal, rationale and consultation</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Programme documentation includes collaboration and communication arrangements with HE/FE partner if relevant</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Programme specification</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Module descriptors</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Student facing documentation including: programme handbook</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Student university handbook</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Student facing documentation includes HE/FE college information for students, if relevant</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Practice assessment documentation</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Ongoing record of achievement (ORA)</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Practice learning environment handbook</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Practice learning handbook for practice supervisors and assessors specific to the programme</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Academic assessor focused information specific to the programme</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Placement allocation / structure of programme</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>PAD linked to competence outcomes, and mapped against standards of proficiency</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Mapping document providing evidence of how the education institution has met the Standards framework for nursing and midwifery education (NMC, 2018)</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Mapping document providing evidence of how the education institution has met the Standards for pre-registration nursing associate programmes (NMC, 2018)</td>
<td>✓</td>
<td>□</td>
</tr>
<tr>
<td>Mapping document providing evidence of how the Standards for student supervision and assessment (NMC, 2018) apply to the programme.</td>
<td>✓</td>
<td>□</td>
</tr>
<tr>
<td>Curricula vitae for relevant staff</td>
<td>✓</td>
<td>□</td>
</tr>
<tr>
<td>CV of the registered nurse or nursing associate responsible for directing the education programme</td>
<td>✓</td>
<td>□</td>
</tr>
<tr>
<td>Registrant academic staff details checked on NMC website</td>
<td>✓</td>
<td>□</td>
</tr>
<tr>
<td>External examiner appointments and arrangements</td>
<td>✓</td>
<td>□</td>
</tr>
<tr>
<td>Written confirmation by education institution and associated practice learning partners to support the programme intentions, including a signed agreement for protected learning.</td>
<td>✓</td>
<td>□</td>
</tr>
</tbody>
</table>

List additional documentation:
- Nursing associate placement planner, undated
- C.V. of the registered nurse responsible for directing the programme
- C.V of the external examiner appointed to the programme
- NMC PIN reveal list
- Functionality of CANVAS at the event

Post event evidence to meet conditions:
- ARU response to conditions, 27 June 2019
- ARU updated faculty service user engagement strategy, 2019
- Service user strategy action plan with timelines version 3, June 2019

If you stated no above, please provide the reason and mitigation

Additional comments:

During the event the visitor(s) met the following groups:
Senior managers of the AEI/education institution with responsibility for resources for the programme | YES | NO |
---|---|---|
HE/FE college senior managers, if relevant | NO | YES |
Senior managers from associated practice learning partners with responsibility for resources for the programme | YES | NO |
Programme team/academic assessors | YES | NO |
Practice leads/practice supervisors/practice assessors | YES | NO |
Students | YES | NO |

If yes, please identify cohort year/programme of study:
Year one of NA programme x one January 2019 cohort
Year two of NA programme X one September 2018
Recently qualified NA from the legacy programme x one

Service users and carers | YES | NO |

If you stated no to any of the above, please provide the reason and mitigation

Additional comments:

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

| YES | NO |
---|---|
Specialist teaching accommodation (e.g. clinical skills/simulation suites) | NO | YES |
Library facilities | NO | YES |
Technology enhanced learning / virtual learning environment | YES | NO |
Educational audit tools/documentation | NO | YES |
Practice learning environments | NO | YES |
If yes, state where visited/findings:

System regulator reports reviewed for practice learning partners

System regulator reports list:
CQC report for Mid Essex Hospital NHS Trust, 30 January 2019

If you stated no to any of the above, please provide the reason and mitigation
This is an established AEI and visits to facilities were not required.

Additional comments:
None

Mott MacDonal 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

<table>
<thead>
<tr>
<th>Author</th>
<th>Charmagne Barnes</th>
<th>Date:</th>
<th>30 June 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Checked by</td>
<td>Judith Porch</td>
<td>Date:</td>
<td>23 July 2019</td>
</tr>
<tr>
<td>Approved by</td>
<td>Leeann Greer</td>
<td>Date:</td>
<td>7 August 2019</td>
</tr>
<tr>
<td>Submitted by</td>
<td>Lucy Percival</td>
<td>Date:</td>
<td>7 August 2019</td>
</tr>
</tbody>
</table>