Programme approval visit report

Section one

<table>
<thead>
<tr>
<th>Programme provider name:</th>
<th>University of York</th>
</tr>
</thead>
<tbody>
<tr>
<td>In partnership with:</td>
<td></td>
</tr>
<tr>
<td>(Associated practice learning partners involved in the delivery of the programme)</td>
<td>York Hospitals NHS Foundation Trust Tees, Esk and Wear Valleys NHS Foundation Trust Private, voluntary and independent health care providers</td>
</tr>
<tr>
<td>Programme reviewed:</td>
<td></td>
</tr>
<tr>
<td>Pre-registration nursing associate</td>
<td>☒</td>
</tr>
<tr>
<td>Nursing associate apprenticeship</td>
<td>☒</td>
</tr>
<tr>
<td>Title of programme:</td>
<td>Foundation Degree in Science in Health and Social Care [Nurse Associate]</td>
</tr>
<tr>
<td>Date of approval visit:</td>
<td>4 July 2019</td>
</tr>
<tr>
<td>Programme start date:</td>
<td></td>
</tr>
<tr>
<td>Pre-registration nursing associate</td>
<td>23 September 2019</td>
</tr>
<tr>
<td>Nursing associate apprenticeship</td>
<td>23 September 2019</td>
</tr>
<tr>
<td>Academic level:</td>
<td>England</td>
</tr>
<tr>
<td>☒ Level 5</td>
<td>☐ Level 6</td>
</tr>
<tr>
<td>QA visitor(s):</td>
<td>Registrant Visitor: David Robertshaw Lay Visitor: Jonathan Fisher</td>
</tr>
</tbody>
</table>
Section two

Summary of review and findings

The University of York (UoY) presented for approval a foundation degree science in health and social care: nursing associate. The programme is two years and full time. The programme has two routes, direct entry and apprenticeship.

There is an effective working relationship between the UoY and their practice learning partners (PLPs). A collaborative approach to the development of the programme is evident, and there are formal partnerships with York teaching hospital NHS Foundation Trust, Tees, Esk and Wear Valley mental health trust, and the Haxby group. Verbal and written evidence confirms collaboration with students and service users in the development of the programme. The programme is a development of a Health Education England (HEE) programme, and UoY has incorporated feedback from students, employers and service users in the development of this proposed programme.

Arrangements at programme level do not meet the Standards framework for nursing and midwifery education (SFNME). Arrangements at programme level meet the Standards for student supervision and assessment (SSSA).

The programme is recommended to the NMC for approval subject to two conditions. Visitors made one recommendation. The university made one recommendation.

Updated 02 September 2019.

Evidence is provided to meet the conditions. Both conditions are now met. The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel

<table>
<thead>
<tr>
<th>Recommended outcome to the NMC:</th>
<th>Programme is recommended to the NMC for approval</th>
<th>Programme is recommended for approval subject to specific conditions being met</th>
<th>Recommended to refuse approval of the programme</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Conditions:</th>
<th>Effective partnership working: collaboration, culture, communication and resources:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please identify the standard and requirement the condition relates to under the relevant key risk theme.</td>
<td>None identified</td>
</tr>
</tbody>
</table>

**Selection, admission and progression:**

Condition one: Demonstrate a robust process for recognition of prior learning (RPL) including oversight by appropriately qualified and experienced external examiners. (SFNME R2.20; SPRNAP R1.5)
| Please state if the condition is AEI/education institution in nature or specific to NMC standards. | Condition two: Review the admissions criteria to ensure that students starting the programme have a current DBS and that there is an annual process for students to demonstrate an annual declaration that they are fit for practice. (SFNME R2.1; SPRNAP R1.2, R1.3) |
| Practice learning: | None identified |
| Assessment, fitness for practice and award: | None identified |
| Education governance: management and quality assurance: | None identified |
| Date condition(s) to be met: | 1 August 2019 |
| Recommendations to enhance the programme delivery: | Recommendation one: Reflect on the university regulations for RPL with the current maximum of 33 percent of the programme, in relation to whether this could be increased through an exemption to regulations, to permit a higher percentage for NMC registered nurses without restrictions on their practice. (SPRNAP R1.5)  
Recommendation two: It is recommended the programme team consider revising the module learning outcomes for the two 60 credit practice modules to articulate with greater clarity the differing level of challenge between the level four module (practice one) and the level five module (practice two). (University recommendation) |
| Focused areas for future monitoring: | Service user and carer involvement in all aspects of the programme.  
Compliance with requirement to provide annual confirmation of health and good character by students during the programme.  
RPL and how this is overseen and operates within the programme and UoY regulations.  
Monitor the implementation of multiple mini interviews during the selection process. |
| Programme is recommended for approval subject to specific conditions being met |
**Commentary post review of evidence against conditions**

UoY has submitted evidence for the conditions. Documentation includes a RPL process, process to confirm health and good character, an updated programme handbook and a policy on credit transfer. These documents confirm conditions are now met.

<table>
<thead>
<tr>
<th>AEI Observations</th>
<th>Observations have been made by the education institution  YES ☒ NO ☒</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summary of observations made, if applicable</td>
<td></td>
</tr>
</tbody>
</table>
| Final recommendation made to NMC: | Programme is recommended to the NMC for approval ☒  
Recommended to refuse approval of the programme  
|
| Date condition(s) met: | 2 September 2019 |
Section three

NMC Programme standards

<table>
<thead>
<tr>
<th>Please refer to NMC standards reference points</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Standards for pre-registration nursing associate programmes</em> (NMC, 2018)</td>
</tr>
<tr>
<td><em>Standards of proficiency for nursing associates</em> (NMC, 2018),</td>
</tr>
<tr>
<td><em>Standards framework for nursing and midwifery education</em> (NMC, 2018)</td>
</tr>
<tr>
<td><em>Standards for student supervision and assessment</em> (NMC, 2018)</td>
</tr>
<tr>
<td><em>The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates</em></td>
</tr>
<tr>
<td><em>QA framework for nursing, midwifery and nursing associate education</em> (NMC, 2018)</td>
</tr>
<tr>
<td><em>QA Handbook</em></td>
</tr>
</tbody>
</table>

Partnerships

<table>
<thead>
<tr>
<th>The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Please refer to the following NMC standards reference points for this section:</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Standards framework for nursing and midwifery education</em> (NMC, 2018)</td>
</tr>
</tbody>
</table>

**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.**

Partnerships are effective between the UoY and its stakeholders.

Documentary evidence and the approval process demonstrate evidence of working in partnership with NHS organisations and the Haxby group (general practice employers). Practice representatives are passionate about their involvement with the UoY and are enthusiastic about the pre-registration nursing associate programme. They see this programme as a key part of strategic workforce planning. PLPs wish to continue working with UoY to develop the role of nursing associate in a diverse range of settings.

The service user and carer group perform simulated patient roles for student education with UoY through their theatre company. They feel they are able to contribute their life experiences and add different perspectives to student learning. There’s a plan for service users and carers to be involved in selection and recruitment of students, and assessment and simulation-based learning. Documentary and verbal evidence at the visit confirms service user involvement in the development of the pre-registration nursing associate programme at workshops and stakeholder meetings. UoY has appointed a lecturer to develop service users’ participation in all areas of the programme.

Students report positive learning experiences at UoY and are involved in steering groups which manage the programme. A recent graduate from the HEE pre-registration nursing associate programme has provided feedback on the proposed programme and suggested improvements. She feels her programme prepared her to work across the four fields of nursing, and this is replicated in the proposed pre-registration nursing associate programme. Students report good communication between the UoY and their employers. Students say those with additional learning needs are accommodated by UoY and their employers with good collaboration between the two.

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,
Please provide any narrative for any exceptions

Gateway 2: Standards for student supervision and assessment

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

### Student journey through the programme

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

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

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

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

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

- **R1.4** ensure that the registered nurse or registered nursing associate responsible for directing the educational programme or their designated registered nurse substitute or designated registered nursing associate substitute, are able to provide supporting declarations of health and character for students who have completed a pre-registration nursing associate programme.
R1.5 permit recognition of prior learning that is capable of being mapped to the *Standards of proficiency for nursing associates* and programme outcomes, up to a maximum of 50 percent of the programme. This maximum limit of 50 percent does not apply to applicants to pre-registration nursing associate programmes who are currently a NMC registered nurse without restrictions on their practice, and

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

*Standards framework for nursing and midwifery education* specifically:

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

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

Demonstrate a robust process to transfer students studying HEE 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 □**

R1.2 is not met. There’s documentary evidence of health entry criteria and occupational health criteria, and students are required to meet health and good character requirements upon entry to the programme.

The proposed pre-registration nursing associate programme entry requirements required a disclosure and barring service (DBS) check within three years prior to commencing the programme. Students do not confirm completing periodic health or character declarations. This is not adequate or robust to confirm good character upon entry and throughout the programme. (Condition two) (SFNME R2.1; SPRNAP R1.2, R1.3)

- 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)
R1.3 is not met. Health and character requirements are evidenced in the programme handbook, however students say they do not complete any periodic health or character review or declarations during their programme of study. (Condition two) (SFNME R2.1; SPRNAP R1.2, R1.3)

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

R1.5 is not met. UoY’s RPL procedure involves an assessment of prior certificated learning and experiential and professional learning. UoY publishes applicant guidance and a claim form on its website for both certificated and experiential claims. The website provides information regarding how claims are considered and where they should be submitted to. There’s a department RPL co-ordinator. RPL claims are considered as part of entry to the programme. Claims are considered against the programme learning outcomes, content and NMC standards. The RPL committee confirms mapping to Standards through this committee prior to entry to the programme. UoY regulations permit up to 33 percent RPL. The maximum 33 percent RPL applies to NMC registered nurses without restrictions on practice. (Recommendation one) (SPRNAP R1.5). RPL claims and requests are considered formally by a RPL panel, and minutes of this meeting are available to view by an external examiner. The external examiner may review the minutes of the meeting, but does not sample, review or report on claims for RPL to an assessment board prior to students commencing the programme. An external examiner must be appointed for this purpose. (Condition one) (SFNME R2.20; SPRNAP R1.5)

- 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)

R1.6 is met. Documentary evidence confirms the programme is mapped to the Standards of proficiency for nursing associates. There is mapping of programme
learning outcomes, module learning outcomes and curriculum content. The ongoing record of achievement and practice assessment document are mapped to the Standards of proficiency for nursing associates, and the programme will use the national nursing associate practice assessment document (NAPAD).

Numeracy, literacy, digital and technological literacy are developed in modules and learning outcomes specifically relate to these. Assessment of digital literacy is performed through the application form. There’s support for students who require additional help with digital literacy, numeracy, literacy and technological literacy.

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.

MET ☒ NOT MET ☐

There are no existing students to transfer to the new programme.

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

YES ☒ NO ☐

The external examiner may review the minutes of the meeting, but does not sample, review or report on claims for RPL to an assessment board prior to students commencing the programme. An external examiner must be appointed for this purpose. (Condition one) (SFNME R2.20; SPRNAP R1.5)

DBS checks within three years prior to commencing the programme are required. Students do not confirm completing periodic health or character declarations. This is not adequate or robust to confirm good character upon entry and throughout the programme. (Condition two) (SFNME R2.1; SPRNAP R1.2, R1.3)

Outcome

Is the standard met? MET ☐ NOT MET ☒

The external examiner may review the minutes of the meeting, but does not sample, review or report on claims for RPL to an assessment board prior to students commencing the programme. An external examiner must be appointed for this purpose.

Condition one: Demonstrate a robust process for RPL including oversight by appropriately qualified and experienced external examiners (SFNME R2.20; SPRNAP R1.5)

DBS checks within three years prior to commencing the programme are required. Students do not confirm completing periodic health or character declarations. This
is not adequate or robust to confirm good character upon entry and throughout the programme.

Condition two: Review the admissions criteria to ensure that students starting the programme have a current DBS and that there is an annual process for students to demonstrate an annual declaration that they are fit for practice. (SFNME R2.1 SPRNAP R1.2, R1.3)

Recommendation one: Reflect on the university regulations for RPL with the current maximum of 33 percent of the programme, in relation to whether this could be increased through an exemption to regulations, to permit a higher percentage for NMC registered nurses without restrictions on their practice (SPRNAP R1.5)

**Date:** 4 July 2019

**Post event review**

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

**Condition one:**

Evidence is submitted demonstrating a robust process for RPL, ensuring appropriately qualified and experienced people oversee RPL claims.

**Evidence:**

- RPL process, September 2019
- Policy on credit transfer, August 2019
- Programme handbook, 2019

Condition one is met.

**Condition two:**

Evidence is submitted demonstrating an updated process to ensure DBS checks are in place for new applicants. The programme handbook tells students they must complete an annual process to declare fitness for practice.

**Evidence:**

- Programme handbook, 2019
- DBS process, September 2019

Condition two is met.

**Date condition(s) met:** 2 September 2019

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

<table>
<thead>
<tr>
<th>MET</th>
<th>NOT MET</th>
</tr>
</thead>
<tbody>
<tr>
<td>✗</td>
<td>☐</td>
</tr>
</tbody>
</table>

The conditions are met.

**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, R3.16; R5.1 - R5.16.

*Standards for student supervision and assessment* specifically:

R1.2, R1.3, R1.7, R1.10, R1.11

**Findings against the standard and requirements**

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

- There is evidence that the programme complies with the NMC *Standards framework for nursing and midwifery education* (R2.1)
  
  | YES ☑ | NO ☐ |
  
  - There is evidence that the programme complies with the NMC *Standards for student supervision and assessment* (R2.2)
  
  | YES ☑ | NO ☐ |
• Mapping has been undertaken to show how the curriculum and practice learning content meets the *Standards of proficiency for nursing associates* and programme outcomes. (R2.3)

YES ☒  NO ☐

Provide an 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. Documentary evidence confirms the programme will support students to achieve 2400 programme hours (1200 theory, 1200 practice), demonstrating an equal balance of theory and practice. Students complete 360 external practice placement hours during year one, and 120 external practice placement hours in year two to total 480 hours of external practice placements.

The programme team tell us process for allocating practice learning placements and include an example practice placement journey and allocation. Practice placements are allocated on an individual basis jointly by UoY and PLP placement allocation group and in consideration of the student's prior learning experiences. This ensures students receive appropriate allocation of practice placements to meet requirements for across the lifespan and in a variety of settings. UoY’s partnership with PLPs promotes sharing PLPs for students across all organisations within the partnership. The group has representatives from all organisations. The group operates a process whereby issues raised or exceptions in practice placements can be reported to the group and dealt with in a timely manner.

Theory and practice learning are supported by a range of modules which are mapped to the Standards of proficiency for nursing associates. There’s diversity of assessments and learning experiences. Service users and carers and UoY say service users and carers will be involved in the delivery of theory and practice learning. Students confirm variety and diversity of learning and learning experiences across a range of settings and across the lifespan. There’s a programme outline which demonstrates categories of learning, both in practice and in the university.

**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 programme hours are sufficient to meet NMC requirements and allow students to meet the Standards of proficiency for nursing associates. The programme allocated 1200 hours for theory and 1200 hours for practice. Practice hours are recorded in the NAPAD. Practice learning is arranged through a hub and spoke model for each route of the programme. The programme team are able to monitor all programme hours and have arrangements for student to retrieve any unmet theory or practice hours. Students feel this programme’s design will adequately prepare students 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 learning outcomes specified. There is a practice allocation model for the delivery of the programme that clearly demonstrates the achievement of designated hours for the programme detailed. (R2.7)

**MET ✗ NOT MET ☐**

R2.7 is met. There is an equal balance of theory and practice learning. This is mapped and detailed in the module descriptors, practice learning allocation model and a programme flowchart. Module aims, descriptors and learning outcomes are specified in the programme documentation and these are mapped to the NMC Standards of proficiency for nursing associates.

Documentary evidence confirms a range of learning and teaching strategies are detailed in the programme specification, programme handbook and module descriptors with theory and practice balance detailed in each part of the programme and at the end point.

There is a practice allocation model for the delivery of practice learning hours demonstrating achievement of programme hours for the pre-registration nursing associate programme. This allocation is overseen by the UoY operational group, which reports to the strategic partnership group and UoY’s undergraduate teaching committee. Students work in their base placements and undertake a range of external practice placements and a range of spokes. Practice placements are allocated to ensure variety of experience across the lifespan.
Evidence provides assurance that the following QA approval criteria are met:

- There is evidence that programmes leading to nursing associate registration and registration in another profession, will be of suitable length and nursing associate proficiencies and outcomes will be achieved in a nursing associate context. (R2.8)  
  YES ☒  NO ☐

Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to curricula and assessment are met  
  YES ☒  NO ☐

Assurance is provided that Gateway 2: *Standards for student supervision and assessment* relevant to curricula are met  
  YES ☒  NO ☐

Outcome

Is the standard met?  
MET ☒  NOT MET ☐

Date: 4 July 2019

---

**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. We found documentary evidence confirming practice learning
opportunities are varied and allow students to develop and meet the Standards of
proficiency for nursing associates. Practice placement allocation is through a
strategic allocation group which monitors practice placements for each student
nursing associate to ensure they have appropriate and varied practice learning
experiences. This group monitors practice placements ensuring students complete
placements and reflect a diverse range of people across the lifespan and in a
variety of settings. There is a specific module on safe care and risk management.
This area of practice is assessed in practice using the NAPAD. There’s a
programme plan for the two years of the programme, including programme hours.
Employer PLPs confirm availability and capacity of practice learning placements to
support student nursing associates across both routes of the programme.

Documentary evidence confirms UoY operates a fitness to practice policy and
robust process. Employers operate their own fitness to practice and capability
procedures, however discussion with PLPs and UoY confirm arrangements for
information sharing where circumstances arise requiring additional support for
individual students who are employees. UoY provides written information to
students regarding process to raise concerns about issues in practice. There is an
‘escalating concerns’ flowchart which demonstrates the process. Students confirm
they understand these processes and know what to do to escalate any concerns
about patient safety and care.

- 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. A strategic practice placement allocation group allocates practice placements for students and ensures students receive appropriate learning experiences, taking into account their usual work area and prior experience.

UoY and PLPs are adopting the NAPAD and this document will be the main system of assessment, monitoring and evaluation of practice learning. UoY uses HEE’s practice placement quality assurance system to monitor and evaluate practice placements. Feedback information on practice placements is shared with UoY and its PLPs. Practice placements are audited to ensure they are fit for purpose, with reviews considering the environment, number and type of students in the environment. Information on audits are fed into UoY’s undergraduate teaching committee. This group maintains oversight of audits.

UoY and PLPs are working to ensure practice assessors and practice supervisors are trained and supported to undertake their role. UoY with its PLPs are already providing workshops and training sessions for existing mentors to become practice assessors and practice supervisors. PLPs reported there is good progress with these sessions. PLPs state their support for the proposed programme and give assurance there will be continued collaboration in the allocation, monitoring and evaluation of practice experiences.

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

**MET ☑ NOT MET ☐**

R3.3 is met. We found technology enhanced and simulation-based learning are part of the proposed programme. This is effective and proportionate. The programme will support students in their practice learning and clinical skills through the use of objective structured clinical examinations, and through collaboration with a theatre group who run simulation-based learning exercises in module delivery. The programme uses a range of technology including flipped learning, work-based learning, a virtual learning environment, simulation and digital quizzes. Service users and carers, health care practitioners and experts in teaching, learning and assessment will contribute to programme delivery.

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

**MET ☑ NOT MET ☐**

R3.4 is met. We found policies on reasonable adjustments, and support services available to students. Students and employer PLPs state there are effective communication processes whereby information about student needs and reasonable adjustments are shared with student consent. We found examples of additional support in the university and practice learning environments for students with recognised need.
Documentary evidence confirms a formal tripartite agreement between students on the apprenticeship route, their employer and UoY and information is shared about reasonable adjustments with the student's consent. This tripartite agreement monitors student progress, and if any additional support is required, information regarding additional needs and personal circumstances are taken into account during practice placement allocation.

- 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 the approval process confirms discussions and a shared understanding between UoY and employer PLPs of protected learning. The apprenticeship route meets option B requirements. How protected learning time is implemented locally is decided between UoY and PLPs. Employers PLPs confirm agreements to release students for 20 percent of programme hours for academic study and 20 percent of programme hours for external practice placement learning. Protected learning time will be recorded as part of the NAPAD and monitored by the programme team. Protected learning time recorded in the NAPAD is password protected in an e-portfolio system.

Employer PLPs confirm they'll promote and ensure protected learning time in their organisations, including giving examples of how they'll ensure students can meet the protected learning time requirements.

Direct entry students will be supernumerary for all their practice placements. UoY will ensure there’s parity of practice learning experience for students in both routes of the programme. The programme plan outlining programme structure and hours applies to both routes of the programme.

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

<table>
<thead>
<tr>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the standard met?</td>
</tr>
<tr>
<td>Date: 4 July 2019</td>
</tr>
</tbody>
</table>

**Standard 4: Supervision and assessment**

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

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

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

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

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

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

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

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

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

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

Standards framework for nursing and midwifery education specifically:

R2.11; R3.5, R3.6, R 3.8, R3.11, R3.13, R3.14, R3.17;

R4.1, R4.2, R4.3, R4.4, R4.5, R4.6, R4.8, R4.11; R5.9

Standards for student supervision and assessment

R4.1 – R4.11
<table>
<thead>
<tr>
<th>Findings against the standards and requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
</tr>
<tr>
<td>• There is evidence of how the programme will ensure how support, supervision, learning and assessment provided complies with the NMC <em>Standards framework for nursing and midwifery education.</em> (R4.1)</td>
</tr>
<tr>
<td><strong>MET ☑ NOT MET ☐</strong></td>
</tr>
<tr>
<td>R4.1 is met. We found UoY has robust partnerships with PLPs and report positive collaboration with shared outcomes. There’s a system of committees and oversight groups who monitor the programme and partnerships between UoY and its PLPs. UoY has robust governance ensuring programme monitoring and quality assurance. There is interlinking of external committees and groups with UoY’s undergraduate teaching committee, nursing programmes committee, fitness to practice committee, RPL committee, and undergraduate board of examiners. There are formal governance processes for the oversight of placements and practice learning experiences through UoY’s undergraduate teaching committee, UoY nursing associate operational group and the strategic partnership group. UoY has plans to implement the SSSA and will work collaboratively with PLPs to implement training for practice supervisors and practice assessors. PLPs confirm this process is underway and is making progress. The programme complies with the SFNME.</td>
</tr>
<tr>
<td>• There is evidence of how the <em>Standards for student supervision and assessment</em> 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)</td>
</tr>
<tr>
<td><strong>MET ☑ NOT MET ☐</strong></td>
</tr>
<tr>
<td>R4.2 is met. UoY is part of the midlands, Yorkshire, and east practice learning group and will adopt the approach outlined by this group including identification and training of practice supervisors, academic assessors and practice assessors. UoY has a robust plan to identify and prepare academic staff for the role of academic assessor. PLPs tell us they are developing their staff to be practice supervisors and registrant nurses to be practice supervisors and practice assessors. They are running roadshows and workshops with UoY about the SSSA. PLPs are developing their own arrangements to ensure there are sufficient practice placements, practice supervisors and practice assessors to meet current and future learning demand. Each PLP maintains a list of practice supervisors and practice assessors who have completed training and are ready to supervise or assess. UoY supports this through three practice learning link lecturers who offer support to students, practice supervisors and practice assessors in practice learning placements.</td>
</tr>
</tbody>
</table>
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. Documentary evidence confirms summative and formative feedback is provided to students throughout the programme in each module and practice learning experience. Module descriptors identify assessment information and assignment guidelines. Students are provided with an academic tutor who supports them throughout their time on the programme. Students receive support and feedback from practice supervisors, practice assessors and their academic assessor and this is recorded in the NAPAD.

Students say feedback is detailed, supportive and offers information on how to improve. They say feedback has improved during their time on the programme. Students place importance on feedback and feel it is relevant for their development. Service users and carers have a role in feedback during theory and practice learning experiences.

- There is appropriate mapping of the curriculum and practice learning placements to ensure throughout the programme that students meet the Standards of proficiency for nursing associates. (R4.5)  
  
  MET ☑  NOT MET ☐

R4.5 is met. Documentary evidence confirms mapping of the curriculum, module outcomes, programme outcomes and practice learning opportunities to the Standards of proficiency for nursing associates.

There’s a clear process for the allocation of practice learning experiences, where students have a base practice placement with external practice placements and spoke experiences. Theory and practice hours are planned and monitored by UoY and PLPs through the placement allocation group and operational group and ensure students meet the Standards of proficiency for nursing associates. A programme flowchart identifies theory and practice time. Students and PLPs confirm students attend a variety of practice learning experiences which ensure they meet the Standards of proficiency for nursing associates.

Evidence provides assurance that the following QA approval criteria are met:
• There is evidence that all programmes include a health numeracy assessment related to nursing associate proficiencies and calculation of medicines which must be passed with a score of 100 percent (R4.6)
  
  YES ☒  NO ☐

• There is an appropriate assessment strategy and process detailed. (R4.7)
  
  YES ☒  NO ☐

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

  YES ☒  NO ☐

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

  YES ☒  NO ☐

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

  YES ☒  NO ☐

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: 4 July 2019

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)

  YES ☒  NO ☐

Fall Back Award

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

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

  YES ☒  NO ☐ N/A ☒

There is no exit award conferring eligibility to register with the NMC 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

  YES ☒  NO ☐

Outcome

<table>
<thead>
<tr>
<th>Is the standard met?</th>
<th>MET ☒</th>
<th>NOT MET ☐</th>
</tr>
</thead>
</table>

Date: 4 July 2019
**Section four**

**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 <em>Standards framework for nursing and midwifery education</em> (NMC, 2018)</td>
<td>✗</td>
<td></td>
</tr>
<tr>
<td>Mapping document providing evidence of how the education institution has met the <em>Standards for pre-registration nursing associate programmes</em> (NMC, 2018)</td>
<td>✗</td>
<td></td>
</tr>
</tbody>
</table>
Mapping document providing evidence of how the *Standards for student supervision and assessment* (NMC, 2018) apply to the programme.

Curricula vitae for relevant staff

CV of the registered nurse or nursing associate responsible for directing the education programme

Registrant academic staff details checked on NMC website

External examiner appointments and arrangements

Written confirmation by education institution and associated practice learning partners to support the programme intentions, including a signed agreement for protected learning.

List additional documentation:
Post visit evidence:
RPL process, September 2019
Policy on credit transfer, August 2019
Programme handbook, 2019
DBS process, September 2019

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

Additional comments:

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

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior managers of the AEI/education institution with responsibility for resources for the programme</td>
<td>✕</td>
<td></td>
</tr>
<tr>
<td>HE/FE college senior managers, if relevant</td>
<td>✕</td>
<td></td>
</tr>
<tr>
<td>Senior managers from associated practice learning partners with responsibility for resources for the programme</td>
<td>✕</td>
<td></td>
</tr>
<tr>
<td>Programme team/academic assessors</td>
<td>✕</td>
<td></td>
</tr>
</tbody>
</table>
Practice leads/practice supervisors/practice assessors  ☒  ☐
Students  ☒  ☐
If yes, please identify cohort year/programme of study:
Two x stage four MSc pre-registration mental health nursing students
One x recent nursing associate graduate.
Service users and carers  ☒  ☐
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:

<table>
<thead>
<tr>
<th>Area/Facility</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialist teaching accommodation (e.g. clinical skills/simulation suites)</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Library facilities</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Technology enhanced learning / virtual learning environment</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Educational audit tools/documentation</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Practice learning environments</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>If yes, state where visited/findings:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>System regulator reports reviewed for practice learning partners</td>
<td>☒</td>
<td>☐</td>
</tr>
</tbody>
</table>

System regulator reports list:
CQC report Mid Yorkshire hospitals NHS Trust, December 2018
CQC report Stamford Bridge Beaumont, October 2018
CQC report York teaching hospital NHS Foundation Trust, February 2018
If you stated no to any of the above, please provide the reason and mitigation
Not required as UoY is an existing AEI.
Mott MacDonald Group Disclaimer

This document is issued for the party which commissioned it and for specific purposes connected with the captioned project only. It should not be relied upon by any other party or used for any other purpose.

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.

<table>
<thead>
<tr>
<th>Issue record</th>
<th>Final Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Author:</td>
<td>David Robertshaw</td>
</tr>
<tr>
<td>Checked by:</td>
<td>Monica Murphy</td>
</tr>
<tr>
<td>Approved by:</td>
<td>Leeann Greer</td>
</tr>
<tr>
<td>Submitted by:</td>
<td>Lucy Percival</td>
</tr>
</tbody>
</table>