

## Programme Major Modification report

### Section one

<b>Programme provider name:</b>	University of Gloucestershire	
<b>Programme reviewed:</b> <i>This is the NMC programme title(s)</i>	Pre-registration nursing associate	<input checked="" type="checkbox"/>
	Nursing associate apprenticeship	<input checked="" type="checkbox"/>
<b>AEI programme title(s):</b>		
<b>Current AEI programme title(s):</b> <i>Please include all currently approved programme titles</i>	Foundation Degree Nursing Associate Higher Apprenticeship Nursing Associate	
<b>Modified AEI programme title(s) if applicable:</b> <i>Please include new title(s) if current AEI programme title(s) are being modified as a result of this modification or add N/A</i>	N/A	
<b>Additional AEI programme title(s) if applicable:</b> <i>Please include any additional AEI programme title(s) for approval as a result of this modification (for example new routes being added that have a different title to those already approved) or add N/A</i>	N/A	
<b>Academic level of current programme:</b>		
Pre-registration nursing associate	England <input checked="" type="checkbox"/> Level 5 <input type="checkbox"/> N/A	
Nursing associate apprenticeship	England <input checked="" type="checkbox"/> Level 5 <input type="checkbox"/> N/A	
<b>Academic levels of modified/additional programme(s)/route(s):</b>		

Pre-registration nursing associate	England <input checked="" type="checkbox"/> Level 5  <input type="checkbox"/> N/A
Nursing associate apprenticeship	England <input checked="" type="checkbox"/> Level 5  <input type="checkbox"/> N/A
<b>Programme approval dates:</b>	
<b>Date of NMC approval of the programme being modified:</b> <i>This is the approval date under the most recent NMC standards.</i>	21 August 2019
<b>Date(s) of NMC approval of any modifications since last approval:</b>	N/A
<b>Programme start dates:</b>	
<b>Current modification programme start date:</b>	
Pre-registration nursing associate	18 September 2023
Nursing associate apprenticeship	18 September 2023
<b>Date of modification:</b>	21 March 2023
<b>Type of modification:</b>	Visit
<b>QA visitor(s):</b>	Registrant Visitor: Louise Winfield

## Section two

### **Summary of review and findings**

The University of Gloucestershire (UoG) is an approved education institution (AEI). The school of health and social care (the school) presents programme documentation seeking modification of their approved foundation degree (FD) nursing associate (NA) programme.

The NA programme includes a two-year full-time direct entry route and a two-year full-time apprenticeship route both approved by the Nursing and Midwifery Council (NMC) on 21 August 2019. The school is proposing to deliver both these routes through a blended learning mode with all partners that express an interest. Students are distinguished between the different modes of delivery by module codes and can only transfer between the face to face and blended learning route at the end of year one. Practice learning partners (PLPs) and employer partners (EPs) comment on how the blended learning route will potentially increase interest in the programme from students living at a distance to campus. Module level learning outcomes across all routes have also been rewritten to reflect contemporary resources and feedback from students and PLPs/EPs.

Documentary evidence and discussion at the modification visit confirms there's effective partnership working between the UoG and key stakeholders at a strategic and operational level. This includes evidence of effective partnerships between the UoG and PLPs/EPs.

The EPs supporting the development and delivery of the programme are Oxford Health NHS Foundation Trust (OHFT), Gloucestershire Clinical Commissioning Group, Gloucestershire Hospitals NHS Foundation Trust and Gloucestershire Health and Care NHS Foundation Trust.

Learning and teaching on the programme is inclusive of diversity and enables students to actively engage in learning through small group facilitation. The programme team tell us that equality and diversity data is monitored at programme level through annual programme monitoring and reported through to the teaching and learning committee where attainment data is scrutinised. Evidence of this activity and any action plans for addressing identified attainment gaps isn't provided and a condition is applied.

Representatives from the people who use services and carer (PUSC) group confirm their involvement in the development, recruitment, delivery and evaluation of the programme.

The visit is undertaken by remote means.

The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) isn't met at programme level as conditions apply.

The Standards for student supervision and assessment (SSSA) (NMC, 2018) are met at programme level.

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

Updated 24 April 2023:

The UoG has provided documentation to meet the NMC conditions. The UoG confirm the university conditions are met.

The major modification to the programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
<b>Recommended outcome to the NMC:</b>	<p>Programme is recommended to the NMC for approval <input type="checkbox"/></p> <p>Programme is recommended for approval subject to specific conditions being met <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
<b>Conditions:</b>	<p><b>Effective partnership working: collaboration, culture, communication and resources:</b></p> <p>None identified.</p> <p><b>Selection, admission and progression:</b></p> <p>Condition one: Remove the care certificate entry requirement from student facing documentation. (University condition)</p> <p><b>Practice learning:</b></p> <p>None identified.</p> <p><b>Assessment, fitness for practice and award:</b></p>

	<p>None identified.</p> <p><b>Education governance: management and quality assurance:</b></p> <p>Condition two: The programme team together with their PLPs/EPs must provide assurance that blended learning route students receiving teaching of skills within the clinical setting have an equitable experience compared to those students undertaking the face to face mode of delivery. (SFNME R5.1; Standards for pre-registration NA programmes (SPNAP) (NMC, 2018) R2.1)</p> <p>Condition three: The programme team must provide student population and diversity data and an action plan for addressing any attainment gaps. (SFNME R2.1; SPNAP R2.1)</p> <p>Condition four: The programme team must correct theory and practice hours in the programme specification. (SFNME R3.2; SPNAP R2.6)</p> <p>Condition five: The programme team must update the programme specification to clearly detail the different modes of delivery including when a student can transfer between the face to face and blended learning route. (University condition)</p>
<p><b>Date condition(s) to be met:</b></p>	<p>21 April 2023</p>
<p><b>Recommendations to enhance the programme delivery:</b></p>	<p>Recommendation one: The programme team to consider an optional elective placement in the retrieval window at the end of year two. (University recommendation)</p> <p>Recommendation two: Improvement on links between modules, assessments and learning outcomes should be taken forward into assessment briefs and information displayed to students. (University recommendation)</p>
<p><b>Focused areas for future monitoring:</b></p>	<p>None identified.</p>

Programme is recommended for approval subject to specific conditions being met	
<b>Commentary post review of evidence against conditions</b>	
<p>The UoG confirm that the two university conditions (conditions one and five) are met.</p> <p>The UoG provide evidence to confirm that blended learning route students receive equitable experience of skills within the clinical setting compared to those students undertaking the face to face mode of delivery. A skills delivery audit, sub-contractor agreement, quality assurance (QA) visit report template and performance management review template complete the documentation process and evidence monitoring of a partner delivering skills education. Condition two is met.</p> <p>The programme team provide student population and diversity data and an action plan for addressing any attainment gaps. Condition three is met.</p> <p>The programme team have corrected theory and practice hours in the programme specification. Condition four is met.</p>	
<b>AEI Observations</b>	<b>Observations have been made by the education institution</b> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<b>Summary of observations made, if applicable</b>	
<b>Final recommendation made to NMC:</b>	Programme is recommended to the NMC for approval <input checked="" type="checkbox"/>  Recommended to refuse approval of the programme <input type="checkbox"/>
<b>Date condition(s) met:</b>	21 April 2023

### Section three

NMC Programme standards
Please refer to NMC standards reference points <a href="#">Standards for pre-registration nursing associate programmes</a> (NMC, 2018) <a href="#">Standards of proficiency for nursing associates</a> (NMC, 2018) <a href="#">Standards framework for nursing and midwifery education</a> (NMC, 2018) <a href="#">Standards for student supervision and assessment</a> (NMC, 2018)

### NMC Programme standards

[The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates](#) (NMC, 2015 updated 2018)  
[Quality assurance framework for nursing, midwifery and nursing associate education](#) (NMC, 2020)  
[QA Handbook](#) (NMC, 2022)

### Partnerships

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

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

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

#### **Standard 1: The learning culture:**

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

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

- R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders
- R2.4 comply with NMC [Standards for student supervision and assessment](#)
- R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes
- R2.7 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.**

The programme documentation and modification process evidences effective partnership working at strategic level between the school and PLPs/EPs for the current NA programme. Practice learning governance is managed through the monthly nursing education and practice group and PLPs/EPs describe the UoG as a good partner. They comment on excellent communication processes in place with the UoG which enable quick resolution of any issues raised by PLPs/EPs. The UoG is responsive to their ideas and PLPs/EPs and students are complimentary of the new structure and framework of assessments. The timing of assessments no longer overlap with each other and students tell us they feel the new structure is more manageable.

Students, PUSC and PLPs/EPs confirm they've been consulted on the revised modules and addition of the blended learning route. All stakeholder groups confirm their support.

The programme team and senior managers confirm sufficient resources to support the delivery of the blended learning route from AEI and practice learning perspectives. The UoG has a staff student ratio of 1:20 and has invested in clinical skills teaching and introduced new technologies to support learning. However, OHFT aren't present to triangulate the resources available to teach the clinical skills element of the programme within their environment. (Condition two)

The programme team confirm a number of staff development events have been held to support their learning to deliver via blended methodologies and support if they need help digitalising resources.

Programme documentation and the modification process show there's effective partnership arrangements for maintaining the learning environment and supporting students, practice supervisors and practice assessors. There's evidence of shared responsibility for theory and practice learning, supervision and assessment.

Representatives from the PUSC group confirm their involvement in the development, delivery and evaluation of the programme. They tell us they feel students value their perspectives on care and feel well-supported by the programme team. They've been interviewing and teaching both face to face and on Microsoft (MS) Teams and confirm this will continue for the proposed blended learning route.

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

MET  NOT MET

OHFT aren't present to triangulate the resources available to teach the clinical skills element of the programme within their environment. The programme team inform us the PLP teach all the clinical skills on the current pre-registration nursing blended learning programme and that the skills resources are equal to those within the AEI.

Condition two: The programme team together with their PLPs/EPs must provide assurance that blended learning route students receiving teaching of skills within the clinical setting have an equitable experience compared to those students undertaking the face to face mode of delivery. (SFNME R5.1; SPNAP R2.1)

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

MET  NOT MET

### Post Event Review

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

Condition two: The UoG provide evidence to confirm that blended learning route students receive equitable experience of skills within the clinical setting compared to those students undertaking the face to face mode of delivery.

All lesson plans are shared with PLPs/EPs to ensure commonality of content delivery and experience for students. A review of the learning environment takes place through an audit prior to commencement of any skills delivery. During the delivery period, QA processes include sub-contractor QA visit reports. Sub-contractor performance management reviews are held. These processes ensure the quality of the learning opportunities for students on blended learning routes.

Condition two is met.

Evidence:  
FD NA conditions response, undated

UoG skills delivery audit, undated  
Sub-contractor QA visit report template, undated  
Sub-contractor performance management review template, undated

**Date condition(s) met:** 21 April 2023

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

### 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

- 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. (R1.2)

YES  NO

- 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. 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. Unchanged through this modification.

- 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 demonstrates appropriate certificated entry level requirements in maths and English for the programme. Students undertake a digital assessment on commencement of the programme and dependent on the results, advice and support is given to address any knowledge gaps.

Numeracy, literacy and digital and technological literacy is embedded throughout the learning and within a range of assessments. There's evidence that numeracy and digital technology are embedded in theory content across a number of modules. Students are assessed in numeracy skills in practice through the NA practice assessment document (NAPAD) and OAR.

A dedicated digital learning support advisor works for the school, and students report a timely and effective response to any digital issues raised. Students tell us they receive a quick response from digital support when they're off campus.

All theoretical content for the blended learning route is taught by UoG staff utilising the same resources and support networks as the face to face route.

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

YES  NO

### Outcome

Is the standard met?

MET  NOT MET

Date: 21 March 2023

Post event review

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

N/A

**Date condition(s) met:**

N/A

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

**MET**

**NOT MET**

N/A

### 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. OHFT aren't present to triangulate the resources available to teach the clinical skills element of the programme within their environment. Therefore, the panel aren't assured that the programme ensures students achieve the proficiencies and outcomes while undertaking this element of the programme within the PLP. (Condition two)

The programme team tell us equality and diversity data is monitored at programme level through annual programme monitoring and reported through to the teaching and learning committee where attainment data is scrutinised. The programme team haven't provided student population and diversity data or an action plan for addressing any attainment gaps. Evidence of monitoring activity and any action plans for addressing identified attainment gaps needs to be provided. (Condition three)

- 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 programme learning outcomes meet the *Standards of proficiency for nursing associates*. (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. Unchanged through this modification.

**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 not met. There's documentary evidence confirming the length of the programme which meets the requirements for programme length and programme hours. Theoretical and practice learning for each route of the programme is sufficient to allow students to meet the Standards of proficiency for NAs (SPNA) (NMC, 2018). Practice learning hours are recorded in the electronic NAPAD, allowing password protected access to monitor student hours. This is monitored by the practice assessor, practice supervisor and academic assessor. There's an arrangement in place for how students retrieve unmet practice hours. Students confirm they're able to practice and learn skills to meet the SPNA.

There are four theory modules of 15 credits and two practice learning modules of 30 credits delivered in each year of the programme. There are some inconsistencies in how hours are represented in the programme specification. The programme team must correct theory and practice hours in the programme specification. (Condition four)

- 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. theory/practice balance detailed at each part of the programme and at the end point. There are appropriate module aims, descriptors and outcomes specified. There is a practice allocation model for the delivery of the programme that clearly demonstrates the achievement of designated hours for the programme detailed. (R2.7)

MET  NOT MET

R2.7 is met. Programme documentation and the modification process confirm an equal balance of theory and practice within the proposed blended learning route. All hours and learning outcomes must be achieved by the end of the programme. The programme handbook, specification and module descriptors detail theory and



practice content and expected learning outcomes. The proposed programme structure confirms the practice allocation model which demonstrates achievement of programme hours.

There's evidence of a range of teaching and learning strategies used within the proposed blended learning route. This includes simulation, lectures, clinical skills teaching, work-based learning approaches and digital technologies used in programme delivery. These strategies are designed to offer students a variety of learning opportunities that align with their module learning outcomes and enable appropriate preparation and support as they progress through the programme. A variety of formative and summative assessments are used to test the acquisition of outcomes.

Learning and teaching on the programme is inclusive of diversity and enables students to actively engage in learning through small group facilitation. Assessments are designed to meet a range of learning needs with reasonable adjustments for students with disabilities through inclusive design and individual reasonable adjustments. The blended learning route is taught by UoG staff utilising MS Teams and the digital learning platform, Moodle.

**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

Clinical skills resources can't be assured within OHFT to ensure that students on the blended learning route achieve the proficiencies and outcomes for the NA programme. (Condition two)

The governance framework for equality and diversity data and any action plans for addressing identified attainment gaps need to be provided to ensure compliance with regulatory and professional requirements. (Condition three)

There are some inconsistencies in how hours are represented in the programme specification and therefore students aren't provided with accurate information about the curriculum. (Condition four)

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

YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Outcome</b>	
<b>Is the standard met?</b>	MET <input type="checkbox"/> NOT MET <input checked="" type="checkbox"/>
<p>OHFT aren't present to triangulate the resources available to teach the clinical skills element of the programme within their environment.</p> <p>Condition two: The programme team together with their PLPs/EPs must provide assurance that blended learning route students receiving teaching of skills within the clinical setting have an equitable experience compared to those students undertaking the face to face mode of delivery. (SFNME R5.1; SPNAP R2.1)</p> <p>The programme team tell us equality and diversity data is monitored at programme level through annual programme monitoring and reported through to the teaching and learning committee where attainment data is scrutinised. Evidence of this activity and any action plans for addressing identified attainment gaps needs to be provided.</p> <p>Condition three: The programme team must provide student population and diversity data and an action plan for addressing any attainment gaps. (SFNME R2.1; SPNAP R2.1)</p> <p>There are some inconsistencies in how hours are represented in the programme specification.</p> <p>Condition four: The programme team must correct theory and practice hours in the programme specification. (SFNME R3.2; SPNAP R2.6)</p> <p><b>Date:</b> 21 March 2023</p>	
<b>Post event review</b>	
<b>Identify how the condition(s) is met:</b>	
<p>Condition two: The UoG provide evidence to confirm that blended learning route students receive equitable experience of skills within the clinical setting compared to those students undertaking the face to face mode of delivery.</p> <p>All lesson plans are shared with PLPs/EPs to ensure commonality of content delivery and experience for students. A review of the learning environment takes place through an audit prior to commencement of any skills delivery. During the delivery period, QA processes include sub-contractor QA visit reports. Sub-contractor performance management reviews are held. These processes ensure the quality of the learning opportunities for students on blended learning routes.</p> <p>Condition two is met.</p>	

Evidence:

FD NA conditions response, undated  
UoG skills delivery audit, undated  
Sub-contractor QA visit report template, undated  
Sub-contractor performance management review template, undated

Condition three: The programme team provide student population and diversity data and an action plan identifying attainment gaps.

Condition three is met.

Evidence:

FD NA conditions response, undated  
UoG student achievement and outcome data, March 2023  
UoG awarding and attainment gap action plan FD NA, 2022-2023

Condition four: The programme team have corrected theory and practice hours in the programme specification.

Condition four is met.

Evidence:

FD NA conditions response, undated  
FD NA programme specification 2023, undated

**Date condition(s) met:** 21 April 2023

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

**MET**

**NOT MET**

**Standard 3: Practice learning**

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

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

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

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

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

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

R3.5.1 Option A: nursing associate students are supernumerary when they are learning in practice  
R3.5.2 Option B: nursing associate students who are on work-placed learning routes:  
R3.5.2.1 are released for at least 20 percent of the programme for academic study  
R3.5.2.2 are released for at least 20 percent of the programme time, which is assured protected learning time in external practice placements, enabling them to develop the breadth of experience required for a generic role, and  
R3.5.2.3 protected learning time must be assured for the remainder of the required programme hours.

*Standards framework for nursing and midwifery education* specifically:

R1.1, R1.3, R1.5; R2.9, R2.14; R3.3, R3.5, R 3.7, R3.16; R5.1, R5.7, R5.10, R5.12

*Standards for student supervision and assessment*, specifically:

R1.1 – R1.11

### Findings against the standard and requirements

**Provide an 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. Unchanged through this modification.

- 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. Unchanged through this modification.

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

**MET**  **NOT MET**

R3.3 is met. Programme documentation and the modification visit confirms technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment.

Technology enhanced learning is largely supported through the use of Moodle. This is used to support and strengthen learning and teaching. The programme team confirm simulation-based learning supports learning and assessment of both theory and practice. This is used primarily to prepare students for practice.

The programme team say they use clinical skills teaching and technology to support assessment of theory and practice which includes safeMedicate. Students speak of sessions delivered by blended methods and like the way they can go back and revisit in their own time to clarify learning and revise. PUSC teach using MS Teams and find the system works well and students engage appropriately. The programme team discuss their recent experience of learning to use blended methodologies quickly and that they now have the time to learn about the tools they can use to enhance the learning experience.

- 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. Unchanged through this modification.

- 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. Unchanged through this modification.

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

**YES**  **NO**

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

YES  NO

**Outcome**

Is the standard met? MET  NOT MET

Date: 21 March 2023

**Post event review**

Identify how the condition(s) is met:

N/A

Date condition(s) met:

N/A

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

N/A

**Standard 4: Supervision and assessment**

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

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

*Standards framework for nursing and midwifery education* specifically:

R2.11; R3.5, R3.6, R 3.8, R3.11, R3.13, R3.14, R3.17;  
R4.1, R4.2, R4.3, R4.4, R4.5, R4.6, R4.8, R4.11; R5.9

*Standards for student supervision and assessment*

R4.1 – R4.11

### Findings against the standards and requirements

**Provide an 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)

MET  NOT MET

R4.1 is met. Unchanged through this modification.

- 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. Preparation for the proposed blended learning route is incorporated into the existing schedule for practice assessor and practice supervisor training. This includes an online module for new PLP/EP staff undertaking these roles and bi-monthly updates for existing staff. No other aspects of the SSSA are changed by the delivery of the blended learning route.

**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. Unchanged through this modification.

- 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. Unchanged through this modification.

**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

- Evidence of processes to assess students to confirm proficiency in preparation for professional practice as a registered nursing associate. (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



<b>Outcome</b>		
Is the standard met?	MET <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>
Date: 21 March 2023		
<b>Post event review</b>		
Identify how the condition(s) is met:		
N/A		
Date condition(s) met:		
N/A		
Revised outcome after condition(s) met:	MET <input type="checkbox"/>	NOT MET <input type="checkbox"/>
N/A		

<b>Standard 5: Qualification to be awarded</b>
<p><b>Approved education institutions, together with practice learning partners, must:</b></p> <p>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</p> <p>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.</p> <p><i>Standards framework for nursing and midwifery education specifically R2.11, R2.20</i></p>
<b>Findings against the standards and requirements</b>
<p><b>Evidence provides assurance that the following QA approval criteria are met:</b></p> <ul style="list-style-type: none"> <li>The minimum award for a nursing associate programme is a Foundation Degree of the Regulated Qualifications Framework (England) (R5.1) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></li> <li>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)</li> </ul>

	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Fall Back Award</b>		
If there is a fall back exit award with registration as a nursing associate all NMC standards and proficiencies are met within the award		
	YES <input type="checkbox"/>	NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
A level four exit award is permitted and is detailed in the programme specification, in accordance with the UoG academic regulations for taught provision, but this doesn't permit eligibility to apply for registration with the NMC as a NA.		
Assurance is provided that the <a href="#">Standards framework for nursing and midwifery education</a> relevant to the qualification to be awarded are met		
	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Outcome</b>		
Is the standard met?	MET <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>
Date: 21 March 2023		
<b>Post event review</b>		
Identify how the condition(s) is met:		
N/A		
Date condition(s) met:		
N/A		
Revised outcome after condition(s) met:	MET <input type="checkbox"/>	NOT MET <input type="checkbox"/>
N/A		

**Section four**

**Sources of evidence**

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

<b>Key documentation</b>	<b>YES</b>	<b>NO</b>
Programme document, including proposal, rationale and consultation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme documentation includes collaboration and communication arrangements with HE/FE partner if relevant	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme specification	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Module descriptors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student facing documentation including: programme handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student university handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student facing documentation includes HE/FE college information for students, if relevant	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice assessment documentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Ongoing record of achievement (ORA)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice learning environment handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice learning handbook for practice supervisors and assessors specific to the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Academic assessor focused information specific to the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Placement allocation / structure of programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PAD linked to competence outcomes, and mapped against standards of proficiency	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC, 2018) (Gateway 1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the <i>Standards for student supervision and assessment</i> (NMC, 2018) apply to the programme. (Gateway 2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education institution has met the <i>Standards for pre-registration nursing associate programmes</i> (NMC, 2018) (Gateway 3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Curricula vitae (CV) for relevant staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CV of the registered nurse or nursing associate responsible for directing the education programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Registrant academic staff details checked on NMC website	<input checked="" type="checkbox"/>	<input type="checkbox"/>

External examiner appointments and arrangements	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Written placement agreements between the education institution and associated practice learning partners to support the programme intentions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Written agreement(s) to support the programme intentions between the education institution and employer partners for apprenticeship routes (if applicable).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation:		
List additional documentation: Documentation to evidence conditions: FD NA conditions response, undated UoG skills delivery audit, undated Sub-contractor QA visit report template, undated Sub-contractor performance management review template, undated UoG student achievement and outcome data, March 2023 UoG awarding and attainment gap action plan FD NA, 2022-2023 FD NA programme specification 2023, undated		
Additional comments: None identified.		

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

	YES	NO
Senior managers of the AEI/education institution with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
HE/FE college senior managers, if relevant	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated practice learning partners with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated employer partners with responsibility for resources for the programme (applicable for apprenticeship routes)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme team/academic assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice leads/practice supervisors/practice assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, please identify cohort year/programme of study: Two x April 2021 NA apprentices Four x September 2021 NA apprentices		
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no to any of the above, please provide the reason and mitigation		
Additional comments: None identified.		

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

	<b>YES</b>	<b>NO</b>
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Library facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Technology enhanced learning / virtual learning environment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Educational audit tools/documentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice learning environments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If practice learning environments are visited, state where visited/findings:		
System regulator reports reviewed for practice learning partners	<input checked="" type="checkbox"/>	<input type="checkbox"/>
System regulator reports list: Salisbury District Hospital, Care Quality Commission inspection report, 8 December 2021		
If you stated no to any of the above, please provide the reason and mitigation: UoG is an existing provider of NMC approved programmes, therefore it isn't necessary to visit facilities.		
Additional comments: None identified.		

**Mott MacDonald Group Disclaimer**

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

**Issue record**

**Final Report**

Author(s):	Louise Winfield	Date:	27 March 2023
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Submitted by:	Mubaraq Sanusi	Date:	11 May 2023
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