

**Programme Audit/Major Modification report**

<b>Programme provider:</b>	Edge Hill University
<b>In partnership with:</b> (Associated practice placement providers involved in the delivery of the programme)	<p>Aintree University Hospital NHS Foundation Trust  Alder Hey Children's NHS Foundation Trust  Astley GP Practice  Bolton NHS Foundation Trust  Bridgewater Community Healthcare NHS Foundation Trust  Brownlow Health  Central Lancashire PCT  Cheshire and Wirral NHS Foundation Trust  Cheshire &amp; Wirral Partnership NHS Foundation Trust  Countess of Chester Hospital NHS Foundation Trust  East Lancashire Hospitals NHS Trust  Glovers Lane Surgery  Guardian Medical Centre  Halton CCG  Lancashire Care NHS Foundation Trust  Lancashire Teaching Hospitals NHS Foundation Trust  Liverpool Heart &amp; Chest Hospital NHS Foundation Trust  Liverpool Community Health NHS Trust  Liverpool Women's NHS Foundation Trust  Mersey Care NHS Trust  Lancashire Teaching Hospital NHS Foundation Trust  Royal Liverpool &amp; Broadgreen University Hospitals NHS Trust</p>

	<p>St Helens &amp; Knowsley Teaching Hospitals NHS Trust</p> <p>Southport &amp; Ormskirk NHS Trust</p> <p>SSP Health</p> <p>St Marks Medical centre</p> <p>Marine Lake Medical Practice</p> <p>Village Medical Centre</p> <p>Walton Medical Centre NHS Foundation Trust</p> <p>Warrington &amp; Halton Hospitals NHS Foundation Trust</p> <p>Wirral Community NHS Foundation Trust</p> <p>NW Ambulance Services NHS Trust</p> <p>NHS South Sefton, Formby &amp; Southport CCG</p> <p>NHS Blood &amp; Transplant Services</p> <p>NHS Western Cheshire</p> <p>NHS Warrington CCG</p> <p>North West Boroughs Healthcare NHS Foundation Trust</p> <p>Rainford Health Centre</p> <p>West Lancashire CCG</p> <p>Westmoreland GP Centre</p> <p>Wigan CCG</p> <p>Wrightington, Wigan &amp; Leigh NHS Foundation Trust</p> <p>Local Authorities</p> <p>PVIs</p> <p>CCGs</p>
<b>Date of review:</b>	01 Aug 2019
<b>Type of Modification</b>	Desktop
<b>Provision reviewed:</b>	Registered Nurse – Adult

	<p>Registered Nurse - Child</p> <p>Registered Nurse – Learning Disabilities</p> <p>Registered Nurse – Mental Health</p> <p>Registered Nurse – Adult (nurse degree apprentice)</p> <p>Registered Nurse - Child (nurse degree apprentice)</p> <p>Registered Nurse – Learning Disabilities (nurse degree apprentice)</p> <p>Registered Nurse – Mental Health (nurse degree apprentice)</p> <p>Registered Nurse – Adult/Social Work</p> <p>Registered Nurse - Child/Social Work</p> <p>Registered Nurse – Learning Disabilities/Social Work</p> <p>Registered Nurse – Mental Health/Social Work</p>
<p><b>Title of current programme:</b></p>	<p>BSc (Hons) Nursing (Adult) BSc (Hons) Nursing (Mental Health) BSc (Hons) Nursing (Child) BSc (Hons) Nursing (Learning Disabilities) MSc Nursing (pre-registration adult) MSc Nursing (pre-registration mental health) MSc Nursing (pre-registration learning disabilities) MSc Nursing (pre-registration child) MNSW Adult Nursing and Social Work MNSW Children’s Nursing and Social Work MNSW Mental Health Nursing and Social Work MNSW Learning Disabilities Nursing and Social Work</p>
<p><b>Title of modified programme if changed:</b></p>	
<p><b>Academic level of current programme:</b></p>	<p>England, Wales, Northern Ireland</p> <p><input type="checkbox"/> Level 5    <input checked="" type="checkbox"/> Level 6    <input checked="" type="checkbox"/> Level 7</p> <p>SCQF</p> <p><input type="checkbox"/> Level 8    <input type="checkbox"/> Level 9    <input type="checkbox"/> Level 10</p> <p><input type="checkbox"/> Level 11</p>

<b>Academic level of modified programme if changed:</b>	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
<b>Reviewer:</b>	Isobel Ryder

Outcome of Approval Panel Meeting	
<b>Outcome:</b>	Recommended for approval
<b>Conditions and NMC standard(s)/requirement(s) they relate to:</b>	<p><b>Resources</b> None identified</p> <p><b>Admission and progression</b> None identified</p> <p><b>Practice learning</b> None identified</p> <p><b>Fitness for practice</b> None identified</p> <p><b>Quality assurance</b> None identified</p>
<b>Date conditions to be met:</b>	
<b>Recommendations and NMC standard(s)/requirement(s) they relate to:</b>  <b>Note: recommendations will be assessed through the AEI annual self-assessment report</b>	None identified
<b>Date conditions met:</b>	
<b>Programme start date:</b>	16 Sep 2019

## Summary

### Summary of modification request

Edge Hill University (EHU), an established approved education institution (AEI), is approved by the Nursing and Midwifery Council (NMC) to provide a BSc (Hons) and MSc pre-registration nursing programme in the fields of adult, child, mental health and learning disabilities nursing. In addition, there are approved Masters in nursing (MN) in: adult nursing and social work; children's nursing and social work; mental health nursing and social work; and, learning disabilities nursing and social work. The programmes are approved against the Standards for pre-registration nursing education (NMC, 2010). EHU had a major modification in October 2017 to approve a nurse degree apprenticeship route (NDA) within the approved BSc (Hons) nursing programme for adult, mental health, learning disabilities and child fields.

EHU presented a major modification request to transfer students from the Standards to support learning and assessment in practice (SLAiP) (NMC, 2008) to the Standards for student supervision and assessment (SSSA) (NMC, 2018). This will align practice supervision and assessment with other AEIs in the region to ensure consistency in approach for all students accessing shared practice learning environments.

There is documentary evidence that EHU has consulted with practice learning partners (PLPs), students and other stakeholders in the north west to agree the implementation of the SSSA. EHU is part of the north west practice education group (NWPEG). This partnership group includes representatives from AEIs and PLPs in the north west region. Their work involves a range of activities to support and enhance student learning environments and agree the standardisation of policies and procedures across AEIs and PLPs. Resources to support implementation of the SSSA have been created through this partnership working. A staged approach to transferring students to the SSSA is proposed to ensure that the transfer is conducted in a timely and managed way. There is clear evidence of partnership working to agree the details within this submission.

Detailed information was provided about the cohorts transferring to the SSSA (NMC, 2018). There has been full consultation and agreement by students who are transferring to the SSSA. They are aware that this decision is made in line with EHU academic regulations.

Assurance is provided that the SSSA (NMC, 2018) are met at programme level.

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

### **Feedback from key stakeholders**

#### **Presenting Team**

Not applicable, this is a desktop review.

Telephone discussion took place with key members of the programme team on 1 August to clarify aspects of the proposed modification.

### **Mentors, sign-off mentors, practice teachers and employers**

Not applicable, this is a desktop review.

#### **Students**

Not applicable, this is a desktop review.

### **Service users and carers**

Not applicable, this is a desktop review.

### **Examples of notable and innovative practice and standards they relate to**

Not applicable, this is a desktop review.

### **Potential risks to compliance of education standards and standards they relate to**

None identified

### **Potential risks to the student learning environment and standards they relate to**

None identified

### **Any other risks to public protection**

None identified

### Areas for future monitoring

- Implementation of the SSSA

### Outcome recommendation

The modification is recommended to the NMC for approval.



**NMC Standards**

Please refer to the [Standards for pre-registration nursing education](#) (NMC, 2010), [Advice and supporting information for implementing NMC standards for pre-registration nursing education](#).

**Competencies for entry to the register**

**Domain: Professional values**

**Generic standard for competence**

**Field standard for competence**

**Competencies 1-9**

**What we found:**

Unchanged since the original approval in 2012.

<b>Outcome:</b>	Standard met
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<b>Date standards met:</b>	
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<b>Revised outcome:</b>	
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**Domain: Communication and interpersonal skills**

<b>Generic standard for competence</b>	
<b>Field standard for competence</b>	
<b>Competencies 1-8</b>	
<b>What we found:</b>	
Unchanged since the original approval in 2012.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Domain: Nursing practice and decision making</b>	
<b>Generic standard for competence</b>	
<b>Field standard for competence</b>	
<b>Competencies 1-10</b>	
<b>What we found:</b>	
Unchanged since the original approval in 2012.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	

Revised outcome:	

<b>Domain: Leadership, management and team working</b>	
<b>Generic standard for competence</b>	
<b>Field standard for competence</b>	
<b>Competencies 1-7</b>	
<b>What we found:</b>	
Unchanged since the original approval in 2012.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standards for education</b>
<b>Standard 1: Safeguarding the public – Nursing and midwifery education must be consistent with <a href="#">The Code: Professional standards of practice and behaviour for nurses and midwives (NMC, 2015)</a></b>

R1.1 Approved Education Institutions (AEIs) must be accountable for the programme.	
R1.2 Programme providers must make the needs of service users their first priority.	
R1.3 Programme providers must have clear processes in place to deal with any concerns about the safety of service users.	
R1.4 Programme providers must have effective policies and procedures on fitness to practise.	
<b>What we found:</b>	
R1.1-R1.4 Unchanged since the original approval in 2012 and major modification in 2017.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standard 2: Equality and diversity – Nursing and midwifery education must address key aspects of equality and diversity and comply with current legislation</b>
R2.1 Programme providers must ensure that information about programmes is clear and easily obtainable, and gives sufficient information to allow an applicant to make an informed choice.
R2.2 Programme providers must ensure that programmes comply with current equality and diversity legislation, including making reasonable adjustments without compromising safety.

R2.3 Programme providers must have clear policies, guidance and action plans that recognise and respond to the benefits of diversity, promote equality and address discrimination and harassment.	
<b>What we found:</b>	
R2.1-R2.3 Unchanged since the original approval in 2012 and major modification in 2017.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standard 3: Selection, admission, progression and completion – Processes for selection, admission, progression and completion must be open and fair</b>
<p>R3.1 AElS must ensure that selection and admission criteria include evidence of a good command of written and spoken English, including reading and comprehension. For programmes delivered in Wales, selection and admission criteria must include evidence of a good command of written and spoken English or Welsh, including reading and comprehension.</p> <p>R3.2 AElS must ensure that selection and admission criteria include evidence of capacity to develop numeracy skills sufficient to meet the competencies required by the programme.</p> <p>R3.3 AElS must specify appropriate academic and professional entry requirements.</p>

R3.4 AEs must ensure that students meet NMC requirements for good health and good character.

R3.5 Programme providers must ensure that programmes include opportunities for accreditation of prior learning (APL).

R3.6 AEs must ensure that the selection process provides an opportunity for face-to-face engagement between applicants and selectors.

R3.7 AEs must ensure that the selection process includes representatives from practice learning providers.

R3.8 Programme providers must ensure that selection is conducted by people who have been trained in the principles of selection, anti-discriminatory behaviour and equal opportunities.

R3.9 Programme providers must have processes to manage interruptions to programmes.

R3.10 AEs must make explicit any arrangements for student progression.

R3.11 AEs must have processes in place to confirm achievement of all programme requirements.

R3.12 AEs must inform students when they complete a programme that they have five years in which to register or record a qualification leading to a mark on the NMC register.

R3.13 AEs must ensure that students comply with NMC requirements for good health and good character at completion.

**What we found:**

R3.1–R3.8 Unchanged since original approval in 2012 and major modification in 2017.

R3.9 Individual decisions will be made about when to transfer students who are currently on interruption from the programme to the SSSA.

R3.10-R3.13 Unchanged since original approval in 2012. and major modification in 2017.

**Outcome:**

Standard met

<b>Date standards met:</b>	
<b>Revised outcome:</b>	

**Standard 4: Support of students and educators – Programme providers must support students to achieve the programme outcomes, and support educators to meet their own professional development needs**

R4.1 Programme providers must ensure that programmes include an induction period during which the requirements of the curriculum are explained.

R4.2 Programme providers must ensure that students are allocated to an identified mentor, practice teacher or supervisor during practice learning.

R4.3 Programme providers must ensure that those who supervise students in practice are properly prepared and supported in that role.

R4.4 AEs must ensure that support facilities, including learning support, are available to all enrolled students.

R4.5 Programme providers must give students access to pastoral support, occupational health facilities and disability specialists.

R4.6 Programme providers must ensure that learning time is protected as specified.

R4.7 Programme providers must provide nurse and midwife teachers with time for professional development to enable them to remain up to date in their field of practice.

**What we found:**

R4.1 Documentary evidence confirms bespoke induction programmes will be provided for each cohort of students who will transfer to the SSSA. Related student-facing information has been updated to reflect these changes.

R4.2 Processes are in place to ensure students are allocated to an identified practice supervisor, practice assessor and academic assessor during practice learning experiences. The EHU use a placement support unit and placement management system (In Place) to allocate students to appropriate practice supervisors and practice assessors within PLPs. Operational aspects of the preparation of practice supervisors and practice assessors is overseen via the NWPEG.

A number of resources are developed to ensure practice assessors, practice supervisors and practice learning environments are prepared for the new SSSA roles. Those supporting, supervising and assessing students are required to complete a self-declaration document confirming they meet the NMC relevant role requirements. The manager or nominated person within each placement learning environment identifies and verifies this and only suitably prepared staff will be allocated to these roles. Practice assessment documents include the requirement to identify practice and academic assessors and practice supervisors.

Documentary evidence confirms that the EHU have a process for the development of, and allocation of, academic assessors, such that there will be a different academic assessor for each part of the programme. Guidance for students, practice supervisors, practice assessors and academic assessors is clear and consistent.

R4.3 Documentary evidence provides assurance that EHU has collaborated with PLPs and other AEs through the NWPEG to ensure suitable individuals are identified and supported to become practice supervisors and practice assessors. There is an implementation plan which identifies preparation requirements for each role across the north west and the requirements for academic assessor preparation within EHU. Resources for the specific preparation and development of both practice supervisor and practice assessor roles have been developed and agreed by the NWPEG and are comprehensive. They include face to face and online learning material, workshops, flyers, and self-assessment. Details of the roles are included in the practice supervisor handbook and the practice assessor handbook.



R4.4-R4.7 Unchanged since the original approval in 2012 and major modification in 2017.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standard 5: Structure, design and delivery of programme – The programme must be structured, designed and delivered to meet NMC standards and requirements</b>	
<p>R5.1 AElS must ensure that programme development and delivery involves key stakeholders.</p> <p>R5.2 AElS must specify the required hours, days or weeks of learning.</p> <p>R5.3 Programme providers must clearly set out the structure of the programme.</p> <p>R5.4 Programme providers must state what teaching and learning methods will be used to support achievement of outcomes.</p> <p>R5.5 Programme providers must ensure that learning opportunities are offered at an appropriate academic level using evidence-based sources.</p> <p>R5.6 Programme providers must specify essential content of the programme.</p> <p>R5.7 Programme providers must ensure that students have the opportunity to learn with, and from, other health and social care professionals.</p>	
<b>What we found:</b>	
R5.1-R5.7 Unchanged since the original approval in 2012 and major modification in 2017.	

<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

**Standard 6: Practice learning opportunities must be safe, effective, integral to the programme and appropriate to programme outcomes**

R6.1 AEs must provide students and those supporting practice learning with information that includes dates, outcomes to be achieved, and assessment documents for each period of practice learning.

R6.2 Programme providers must ensure that mentors and practice teachers meet the relevant requirements within the [Standards to support learning and assessment in practice](#) (NMC 2008).

R6.3 Programme providers must ensure that local registers of mentors and practice teachers are maintained according to [Standards to support learning and assessment in practice](#) (NMC 2008), including sign-off status of mentors, record of updates and date for triennial review.

R6.4 Programme providers must use objective criteria and processes for approving new practice learning environments, and audit them at least every two years.

R6.5 Programme providers must ensure that students have access to a range of practice learning opportunities sufficient to meet programme outcomes.

**What we found:**

R6.1 Documentary evidence confirms there is no change to the assessment of the practice competencies or assessment schedule for the pre-registration nursing programme which is still mapped against the Standards for pre-registration nursing education (NMC, 2010). However, for those cohorts of students who will transfer to the SSSA, EHU has amended the practice assessment record (PAR) and ongoing record of achievement to align with the SSSA. Handbooks for practice supervisors and practice assessors detail the differentiation between the roles and explain how the roles interlink in terms of student supervision, decision-making and assessment of progress, including the involvement and role of the academic assessor.

R6.2 EHU has provided comprehensive documentary evidence, supported by discussions during this review, to confirm that the identification, preparation and allocation of practice supervisors and practice assessors have been agreed in collaboration with AElS and PLPs across the north west region. This ensures a consistent approach will be used in the region and monitored by the NWPEG.

A variety of resources for the preparation and development of practice supervisors and practice assessors is available via the online practice assessment record and evaluation (PARE) platform.

R6.3 Documentary evidence and discussion confirms that a record of suitably prepared practice supervisors and practice assessors will be maintained and reported by PLPs. EHU will have access to information within the database, as required.

R6.4 EHU continues to monitor the effectiveness of the practice learning environment in partnership with PLPs. The practice learning environment educational audit tool has been updated and complies with the SSSA. The educational audit identifies the number of practice assessors and supervisors in each practice learning area and compliance with the SSSA.

R6.5 Unchanged since original approval in 2012 and major modification in 2017.

<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	

<b>Revised outcome:</b>	

<b>Standard 7: Outcomes – The programme outcomes must ensure that NMC standards for competence are met and that students are fit for practice and fit for award on completion</b>	
R7.1 Programme providers must ensure that the programme outcomes enable students to achieve the NMC standards for competence and that they are fit for practice and fit for award on completion.	
R7.2 AElS must make explicit requirements for the conferment of academic awards where applicable.	
<b>What we found:</b>	
R7.1-R7.2 Unchanged since the original approval in 2012.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standard 8: Assessment – Programme outcomes must be tested using valid and reliable assessment methods</b>
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R8.1 Programme providers must ensure that a variety of assessments are used to test the acquisition of approved outcomes, with reasonable adjustments for students with a disability.

R8.2 Programme providers must ensure that assessment processes enable students to demonstrate fitness for practice and fitness for award.

R8.3 AEs must appoint external examiner(s) who can demonstrate currency in education and practice with due regard and engage with assessment of both theory and practice.

**What we found:**

R8.1-R8.3 are unchanged since original approval in 2012. However, eligibility to contribute to supervision and assessment has changed in line with the SSSA (NMC, 2018) and the roles of practice supervisor, practice assessor and academic assessor. The documentary evidence including the PAR and programme handbooks demonstrate that decisions in relation to the student's achievement at the first and second progression points of the programme will be made by the practice assessor in collaboration with the academic assessor. Documentary evidence clearly confirms that decisions in relation to student achievement in practice for entry to the register will be made collaboratively by practice assessors and academic assessors who are registered nurses with appropriate equivalent experience for the students' field of practice.

<b>Outcome:</b>	Standard met
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<b>Date standards met:</b>	
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<b>Revised outcome:</b>	
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**Standard 9: Resources – The educational facilities in academic and practice settings must support delivery of the approved programme**

R9.1 AEs must ensure that the programme leader is a nurse or midwife with a teacher qualification recorded on the NMC register.

R9.2 AEs must ensure that teachers have appropriate qualifications and experience for their roles.

R9.3 Programme providers must ensure that sufficient staff are allocated to deliver the programme effectively.

R9.4 Students must have access to appropriate learning approaches in a variety of formats on all sites.

**What we found:**

R9.1-R9.4 Unchanged since the original approval in 2012.

<b>Outcome:</b>	Standard met
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<b>Date standards met:</b>	
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<b>Revised outcome:</b>	
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**Standard 10: Quality assurance – Programme providers must use effective quality assurance processes in which findings lead to quality enhancement**

R10.1 Programme providers' quality assurance processes must be aligned with the programme specification, programme evaluation and enhancement.

R10.2 AEs must demonstrate that they use effective quality assurance processes including conjoint programme approval, approval of minor or major modifications, endorsement and annual monitoring.

R10.3 Programme providers must allow the NMC and its agents access to monitor programmes.

<b>What we found:</b>	
R10.1-R10.3 Unchanged since the original approval in 2012 and major modification in 2017.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b><a href="#">NMC Circular 03/2011</a> - Resources to support programme intentions</b>	
Programme providers must provide evidence at programme approval that resources are currently available to support programme intentions.	
<b>What we found:</b>	
Evidence that resources are currently available to support programme intentions is provided. The documentation submitted includes strong evidence of collegiate working specifically between EHU and PLPs in the region. Partnership agreements are in place and supported by effective partnership working across the north west region.	
EHU will continue to work in partnership with PLPs to undertake educational audits to monitor the effectiveness of the practice learning environments and compliance with the SSSA.	
<b>Outcome:</b>	Standard met

<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Evidence and references list</b>
<p>EHU rationale for programme modification, undated</p> <p>EHU PLP list, undated</p> <p>Signed partnership agreements, 30 May 2019</p> <p>Terms of reference curriculum and validation group, 26 October 2018</p> <p>Cheshire and Mersey joint HEI group minutes, 26 October 2018</p> <p>Curriculum advisory group membership and minutes, 15 February 2018</p> <p>Agenda PLPs meeting, 4 March 2019</p> <p>Minutes PLPs meeting, 4 March 2019</p> <p>Agenda and minutes nurse education programme board, 28 May 2019</p> <p>Student NMC SSSA presentation, 10 April 2019</p> <p>Student feedback, 3 June 2019</p> <p>Student engagement event, 10 April 2019</p> <p>SSSA programme transfer arrangements, undated</p> <p>BSc (Hons) nursing September 2019 transition week, undated</p> <p>Revised PARs, 20 May 2019</p> <p>Practice assessor role, undated</p> <p>Key changes in practice fact sheet from PARE, undated</p> <p>NMC SSSA practice roles, June 2018</p> <p>Practice assessor and supervisor frequently asked questions (FAQs), April 2019</p> <p>Academic assessor – FAQs, May 2019</p> <p>Link lecturer forum notes- academic assessor preparation, 21 March 2019</p> <p>PLPs SSSA diagram, 14 May 2019</p>



Implementation of SSSA, April 2019  
 NWPEG Terms of reference, May 2019  
 North west practice meeting minutes, 21 May 2019  
 Practice learning from EHU Website, undated  
 Practice supervisor self-declaration form, undated  
 Academic assessor self-declaration form, undated  
 Academic assessor - role preparation and requirements position paper amended, March 2019  
 Initial preparation academic assessor workshop, May 2019  
 Academic assessor role and responsibilities, May 2019  
 Practice assessor self-declaration form, undated  
 Screenshot online PARE, undated  
 Academic assessor position paper, March 2019  
 Self-appraisal tool for practice, undated  
 Practice learning QA overview, 2019  
 Terms of reference curriculum and validation group, 26 October 2018  
 NWPEG NMC key changes  
 NWPEG NMC Student and learner support, undated

<b>Personnel supporting programme approval</b>
<p><b>Members of Approval Panel</b></p> <p>Not applicable, this is a desktop review.</p>
<p><b>Programme Presenters</b></p> <p>QA visitor had a telephone discussion with key members of the programme team on 1 August 2019.</p>
<p><b>Were any service providers visited?</b></p> <p><i>Not applicable, this is a desktop review.</i></p>
<p><b>Meetings with others</b></p>

Mentors / sign-off mentors	
Practice teachers	
Service users / Carers	
Practice Education Facilitator	
Director / manager nursing	
Director / manager midwifery	
Education commissioners or equivalent	
Designated Medical Practitioners	
Other (please specify)	

If there were no representatives present during the approval event please state why:

Not applicable, this is a desktop review.

**Meetings with students**

<b>Nursing</b>					
<b>Adult</b>		<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Year 4</b>
<b>Mental Health</b>		<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Year 4</b>
<b>Children's</b>		<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Year 4</b>
		<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Year 4</b>

<b>Learning Disabilities</b>						
<b>Midwifery (3 year)</b>		<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>		
<b>Midwifery (18 month)</b>		<b>Year 1</b>	<b>Year 2</b>			
<b>SCPHN</b>		<b>HV</b>	<b>SN</b>	<b>OH</b>	<b>FHN</b>	<b>RPHN</b>
<b>Learning and Assessment in Practice</b>		<b>Mentor</b>		<b>Practice Teacher</b>		<b>Teacher</b>
<b>Nurse Prescribing</b>		<b>V100</b>		<b>V150</b>		<b>V300</b>
<b>Specialist Practice</b>		<b>Adult</b>		<b>Mental Health</b>		<b>Children's</b>
		<b>Learning Disability</b>		<b>General Practice Nursing</b>		<b>Community Mental Health Nursing</b>
		<b>Community Learning Disabilities Nursing</b>		<b>Community Children's Nursing</b>		<b>District Nursing</b>
<b>Additional evidence viewed</b>						
Information submitted to gateway two in the new QA hub in relation to SSSA, undated						
Gateway two mapping template, March 2019						

**Mott MacDonald Group Disclaimer**

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**Issue record**

Author:	Isobel Ryder	Date:	13 Aug 2019
Checked by:	Judith Porch	Date:	25 Aug 2019
Approved by:	Andrea Bacon	Date:	27 Aug 2019