

**Programme Audit/Major Modification report**

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| <b>Programme provider:</b>   | Liverpool John Moores University  |
| <b>In partnership with:</b><br>(Associated practice placement providers involved in the delivery of the programme) | <p>Aintree University Hospital NHS Foundation Trust</p> <p>Brain Injury Rehabilitation Trust</p> <p>Bridgewater Community Healthcare NHS Foundation Trust</p> <p>Cheshire and Wirral partnership NHS Foundation Trust</p> <p>Countess of Chester Hospital NHS Foundation Trust</p> <p>East Cheshire NHS Trust</p> <p>Liverpool Heart and Chest Hospital Mersey Care NHS Trust</p> <p>Liverpool Women's NHS Foundation Trust</p> <p>Mersey Care NHS Trust</p> <p>Mid Cheshire Hospitals NHS Foundation Trust</p> <p>NHS Blood and Transplant Services</p> <p>NHS Western Cheshire</p> <p>North West Ambulance Service NHS Trust</p> <p>North West Boroughs Healthcare NHS Foundation Trust</p> <p>North West Community Services</p> <p>Royal Liverpool and Broadgreen University Hospitals NHS Trust</p> <p>Southport and Ormskirk Hospital NHS Trust</p> <p>St Helens and Knowsley Teaching Hospitals NHS Trust</p> <p>The Clatterbridge Cancer Centre NHS Foundation Trust</p> <p>The Walton Centre NHS Foundation Trust</p> <p>Warrington and Halton Hospitals NHS Foundation Trust</p> <p>Wirral Community NHS Foundation Trust</p> <p>Wirral University Teaching Hospital NHS</p> |

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|   | Foundation Trust<br>Private, voluntary and independent sector   |
| <b>Date of review:</b>                                  | 09 Aug 2019   |
| <b>Type of Modification</b>                             | Desktop   |
| <b>Provision reviewed:</b>                              | Registered Nurse – Adult<br>Registered Nurse – Child<br>Registered Nurse – Mental Health  |
| <b>Title of current programme:</b>                      | BSc (Hons) nursing (adult)<br>BSc (Hons) nursing (child)<br>BSc (Hons) nursing (mental health)<br>BSc (Hons) nursing (mental health apprenticeship)   |
| <b>Title of modified programme if changed:</b>          |   |
| <b>Academic level of current programme:</b>             | England, Wales, Northern Ireland<br><input type="checkbox"/> Level 5 <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7<br>SCQF<br><input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10<br><input type="checkbox"/> Level 11 |
| <b>Academic level of modified programme if changed:</b> | England, Wales, Northern Ireland<br><input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7<br>SCQF<br><input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10<br><input type="checkbox"/> Level 11            |
| <b>Reviewer:</b>  | Jill Foley  |

| Outcome of Approval Panel Meeting  |  |
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| <b>Outcome:</b>  | Recommended for approval with conditions and recommendations   |
| <b>Conditions and NMC standard(s)/requirement(s) they relate to:</b>   | <p><b>Resources</b></p> <p>None identified</p> <p><b>Admission and progression</b></p> <p>None identified</p> <p><b>Practice learning</b></p> <p>Condition one: Review the programme documentation to remove errors and references to the Standards to support learning and assessment in practice (SLAiP) (NMC, 2008), mentor and sign-off mentor roles, and ensure consistency with regard to roles and responsibilities of practice supervisors, academic assessors and practice assessors. (Standards for student supervision and assessment (SSSA) R3.3, R6.3 and R7.3; Standards for pre-registration nursing education R4.2)</p> <p><b>Fitness for practice</b></p> <p>None identified</p> <p><b>Quality assurance</b></p> <p>None identified</p> |
| <b>Date conditions to be met:</b>  | 30 Aug 2019  |
| <b>Recommendations and NMC standard(s)/requirement(s) they relate to:</b><br><br><b>Note: recommendations will be assessed through</b> | <p>Recommendation one: Develop opportunities to introduce and use registered health and social care professionals as practice supervisors for students. (SSSA R2.7; Standards for pre-registration nursing education R6.2)</p>   |

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| <b>the AEI annual self-assessment report</b> |             |
| <b>Date conditions met:</b>                  | 19 Aug 2019 |
| <b>Programme start date:</b>                 | 16 Sep 2019 |

## Summary

### Summary of modification request

Liverpool John Moores University (LJMU), an established approved education institution (AEI) has a pre-registration BSc (Hons) nursing (adult, mental health and child fields of practice) which was approved in 2011. Changes were made to the modular framework of the programme in accordance with university requirements in 2016. These were approved through a major modification. The BSc (Hons) nursing (mental health apprenticeship route) was approved through a major modification in 2018.

LJMU presented a major modification to the approved pre-registration nursing programme (adult, mental health and child fields of practice) and the mental health apprenticeship route to transfer from the SLAiP (NMC 2008) to the SSSA (NMC, 2018).

LJMU works closely with other local AEIs and practice placement providers (PLPs) across the Cheshire and Merseyside region. Local AEIs are seeking approval for their pre-registration nursing programmes against the new Standards for pre-registration nursing programmes (NMC, 2018) at different times. However, there is agreement across partnership organisations to introduce the new model of supervision and assessment in September 2019. This is to promote continuity and a consistent approach for supporting students in practice from different AEIs. Practice placement start dates for each cohort have been considered as part of the planning process.

The intention is to transfer September student cohorts to the SSSA in September 2019. Students in March cohorts and the degree apprenticeship students will transfer to the SSSA at their next progression point. Students in the September 2016 and March 2017 cohorts, and final year students returning to the programme from interruption of their studies will remain on the SLAiP NMC (2008).

Documentary evidence and discussion with representatives from the programme team confirms effective partnership working to support the proposed modification. LJMU is part of the north west practice education group (NWPEG) and the Cheshire and Merseyside consortium curriculum development and validation group. These partnership groups include representatives from AEIs and PLPs in the 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. These include a strategic implementation plan to standardise the approach used across the partnership, educational resources for identifying and preparing staff for the practice supervisor and practice assessor roles, and resources to prepare practice learning environments. Student practice

assessment documentation is the same across the partnership sites regardless of their university base. This partnership approach facilitates continuity for those supporting supervision and assessment of students across the practice placement circuit.

There is evidence through documentary review and discussion that the SSSA are met at programme level.

The modification is recommended for approval subject to one condition. One recommendation is made.

## **Feedback from key stakeholders**

### **Presenting Team**

Not applicable - Desktop review. Video conference between QA visitor and members of the programme team held on 9 August 2019.

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

Not applicable - Desktop review

### **Students**

Not applicable - Desktop review

### **Service users and carers**

Not applicable - Desktop review

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

None identified

### **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**

There are references to the SLAiP (NMC, 2008) and mentorship roles in the programme documentation. (Condition one)

Condition one: Review the programme documentation to remove errors and references to the SLAiP (NMC, 2008), mentor and sign-off mentor roles, and ensure consistency with regard to roles and responsibilities of practice supervisors, academic assessors and practice assessors. SSSA R3.3, R6.3 and R7.3; Standards for pre-registration nursing education R4.2)

The programme team report that initially students will be allocated NMC registered nurse supervisors only. They are working with their PLPs to introduce the use of registered health and social care professionals as supervisors for students in the future. (Recommendation one)

Recommendation one: Develop opportunities to introduce and use registered health and social care professionals as practice supervisors for students. (SSSA R2.7; Standards for pre-registration nursing education R6.2)

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

None identified

### **Areas for future monitoring**

- The implementation of the SSSA.

### **Outcome recommendation**

Recommended for approval to the NMC subject to one condition. One recommendation is made.

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| <b>NMC Standards</b>  |
| Please refer to the <a href="#">Standards for pre-registration nursing education</a> (NMC, 2010), <a href="#">Advice and supporting information for implementing NMC standards for pre-registration nursing education</a> . |

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| <b>Competencies for entry to the register</b>   |              |
| <b>Domain: Professional values</b>              |              |
| <b>Generic standard for competence</b>          |              |
| <b>Field standard for competence</b>            |              |
| <b>Competencies 1-9</b>                         |              |
| <b>What we found:</b>                           |              |
| Unchanged since original approval in July 2011. |              |
| <b>Outcome:</b>                                 | Standard met |
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| <b>Date standards met:</b>                      |              |
| <b>Revised outcome:</b>                         |              |
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| <b>Domain: Communication and interpersonal skills</b> |  |
| <b>Generic standard for competence</b>                |  |
| <b>Field standard for competence</b>                  |  |
| <b>Competencies 1-8</b>                               |  |



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| <b>What we found:</b>                           |              |
| Unchanged since original approval in July 2011. |              |
| <b>Outcome:</b>                                 | Standard met |
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| <b>Date standards met:</b>                      |              |
| <b>Revised outcome:</b>                         |              |
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| <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 original approval in July 2011.     |              |
| <b>Outcome:</b>                                     | Standard met |
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| <b>Date standards met:</b>                          |              |
| <b>Revised outcome:</b>                             |              |
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| <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 original approval in July 2011.        |              |
| <b>Outcome:</b>  | Standard met |
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| <b>Date standards met:</b>                             |              |
| <b>Revised outcome:</b>                                |              |
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| <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>   |

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| R1.1-R1.4 Unchanged since original approval in July 2011. |              |
| <b>Outcome:</b>   | Standard met |
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| <b>Date standards met:</b>                                |              |
| <b>Revised outcome:</b>                                   |              |
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| <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 original approval in July 2011.   |              |
| <b>Outcome:</b>   | Standard met |
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| <b>Date standards met:</b>  |              |
| <b>Revised outcome:</b>   |              |

**Standard 3: Selection, admission, progression and completion – Processes for selection, admission, progression and completion must be open and fair**

R3.1 AEs 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.

R3.2 AEs must ensure that selection and admission criteria include evidence of capacity to develop numeracy skills sufficient to meet the competencies required by the programme.

R3.3 AEs must specify appropriate academic and professional entry requirements.

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

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| <p>five years in which to register or record a qualification leading to a mark on the NMC register.</p> <p>R3.13 AEs must ensure that students comply with NMC requirements for good health and good character at completion.</p>   |                     |
| <p><b>What we found:</b></p>  |                     |
| <p>R3.1-R3.8 Unchanged since original approval in July 2011.</p> <p>R3.9 Students who are currently on interruption from the programme will transfer to the SSSA when they return at their next progression point unless they are in their final year. Final year students will remain on the SLAiP (NMC, 2008).</p> <p>R3.10-R3.13 Unchanged since original approval in July 2011.</p> |                     |
| <p><b>Outcome:</b></p>  | <p>Standard met</p> |
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| <p><b>Date standards met:</b></p>   | <p> </p>            |
| <p><b>Revised outcome:</b></p>  | <p> </p>            |
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| <p><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</b></p>   |
| <p>R4.1 Programme providers must ensure that programmes include an induction period during which the requirements of the curriculum are explained.</p> <p>R4.2 Programme providers must ensure that students are allocated to an identified mentor, practice teacher or supervisor during practice learning.</p> <p>R4.3 Programme providers must ensure that those who supervise students in practice are properly prepared and supported in that role.</p> <p>R4.4 AEs must ensure that support facilities, including learning support, are</p> |

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 Unchanged since original approval in July 2011.

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 programme team report the academic assessor will be a member of the practice module team and allocated by the university. Practice assessors and practice supervisors will be allocated by the nominated person in the student's practice learning environment. This process is overseen by PLPs and practice educators. For the independent sector and areas which do not have a practice educator, a member of the programme team will provide oversight through their link lecturer role. The programme team report plans are in place to link the allocation of practice assessors and practice supervisors to the electronic rostering system in some areas.

Documentary analysis indicates the practice assessor role and responsibilities are clear in student facing documentation, practice assessor preparation and support documents. However, there are references to practice mentors in some of the documentation provided and inconsistencies regarding roles and responsibilities of practice supervisors, practice assessors and academic assessors. These must be addressed. (Condition one)

R4.3 Documentary evidence and discussion with the programme team confirms practice assessors, academic assessors, and practice supervisors will be prepared for and supported in their role. NWPEG has an implementation plan which identifies preparation requirements for each role across associated AEs and PLPs, and the requirements for academic assessor preparation within LJMU. Resources identified to support role preparation are comprehensive. They include online learning material, workshops, flyers, and self-assessment. The programme team are providing face-to-face workshops for PLPs including the independent sector. A

further six workshops are scheduled prior to the first cohort's allocated practice placements in October 2019. PLPs determine how they deliver the preparatory material within their organisation. This may be online or face-to-face.

The programme team confirm workshops run by PLP practice educators are ongoing in partnership organisations. Regular meetings are held with identified education leads from each practice placement setting. LJMU link tutors join these meetings to facilitate support and partnership working. Resources to support supervisors and assessors are being included in an online practice assessment record and evaluation (PARE) website which has open access. This website is under development and resources added as they become available. The programme team report role preparation includes sessions focusing on making reasonable adjustments for individual student learning needs and action planning. They confirm academic assessors are prepared for their role.

Practice assessors will initially be NMC nurse registrants who have previously been practice mentors or sign-off mentors. Plans are in place to prepare future practice assessors.

Consultation with students has been undertaken through student representative meetings and their views sought through current programme development work at LJMU. Information about the changes to student supervision and assessment has been embedded in the amended student facing documentation.

Preparation of supervisors will be built into the final year leadership module of the pre-registration nursing programme and the preceptorship period within the PLP organisations.

Documentary evidence and discussion with the programme team demonstrates transfer arrangements to the SSSA. Systems are in place to identify, prepare and support appropriate practice assessors and academic assessors. This includes allocating a different nominated academic assessor for each part of the programme. The programme team confirm these arrangements. Practice assessors and academic assessors will be registered nurses with due regard and appropriate equivalent experience for the student's field of practice.

R4.4-R4.7 are unchanged since original approval in July 2011.

**Outcome:**

Standard not met

There are references to the SLAiP (NMC, 2008) mentorship roles in programme documentation and inconsistencies regarding role responsibilities for the practice

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| <p>supervisor, practice assessor and academic assessor. (Condition one)</p> <p>Condition one: Review the programme documentation to remove errors and references to the SLAiP (NMC, 2008), mentor and sign-off mentor roles, and ensure consistency with regard to roles and responsibilities of practice supervisors, academic assessors and practice assessors. (SSSA R3.3, R6.3 and R7.3; Standards for pre-registration nursing education R4.2)</p>  |                     |
| <p><b>Date standards met:</b></p>  | <p>19 Aug 2019</p>  |
| <p><b>Revised outcome:</b></p>   | <p>Standard met</p> |
| <p>Condition one: LJMU provided evidence to confirm the programme documentation and practice assessment records have been reviewed and all errors and references to the SLAiP (NMC, 2008) have been removed. There is now consistency throughout documentation with regard to roles and responsibilities of practice supervisors, academic assessors and practice assessors.</p> <p>Condition one is now met.</p> <p>Evidence:</p> <p>SSSA revised BSc (Hons) nursing (adult) PAR year two and year three, uploaded 19 August 2019</p> <p>SSSA revised BSc (Hons) nursing (adult) year two and year three practice skills inventory, uploaded 19 August 2019</p> <p>SSSA revised BSc (Hons) nursing (mental health) PAR year one, year two and year three, uploaded 19 August 2019</p> <p>SSSA revised BSc (Hons) nursing (child) PAR year two and year three, uploaded 19 August 2019</p> <p>SSSA revised BSc (Hons) nursing (child) year two and year three practice skills inventory, uploaded 19 August 2019</p> <p>LJMU BSc (Hons) nursing guide for practice 2019/2020, updated March 2018, uploaded 19 August 2019.</p> |                     |



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| <b>Standard 5: Structure, design and delivery of programme – The programme must be structured, designed and delivered to meet NMC standards and requirements</b> |              |
| R5.1 AEs must ensure that programme development and delivery involves key stakeholders.  |              |
| R5.2 AEs must specify the required hours, days or weeks of learning.   |              |
| R5.3 Programme providers must clearly set out the structure of the programme.  |              |
| R5.4 Programme providers must state what teaching and learning methods will be used to support achievement of outcomes.  |              |
| R5.5 Programme providers must ensure that learning opportunities are offered at an appropriate academic level using evidence-based sources.                      |              |
| R5.6 Programme providers must specify essential content of the programme.  |              |
| R5.7 Programme providers must ensure that students have the opportunity to learn with, and from, other health and social care professionals.                     |              |
| <b>What we found:</b>  |              |
| R5.1-R5.7 Unchanged since original approval in July 2011.  |              |
| <b>Outcome:</b>  | Standard met |
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| <b>Date standards met:</b>   |              |
| <b>Revised outcome:</b>  |              |
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**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, LJMU has amended the practice assessment record (PAR) and ongoing record of achievement to align with the SSSA. The students' PAR and practice skills inventory include sections which enable practice supervisors to periodically record relevant observations on students' conduct, proficiency and achievement. The programme team confirm practice supervisors, practice assessors and academic assessors can review these records online and have opportunities to engage with each other via face-to-face meetings when required to discuss student progress.

R6.2 The programme team report students will be allocated to different practice supervisors in each of their hub and spoke placement experiences. Students will be allocated to a nominated practice assessor in each of their long hub placements. They explain the hub and spoke allocation model means students will not be allocated to the same practice assessor in consecutive practice placements. The only time there is potential for this to occur is if a practice assessor relocated practice areas. However, this would be closely monitored and there are processes to ensure students will be reallocated to a different practice assessor for successive parts of the programme. This includes the use of the checklist for practice areas and the requirement to record the name of the practice assessor, academic assessor and

practice supervisor in the PAR. The processes for raising concerns and action planning are clear in the documentation provided.

The skills inventory includes a section requiring a registered practitioner signature. This is for suitably qualified healthcare practitioners to contribute to student feedback during short placement visits. The programme team confirm these practitioners are not classed as practice supervisors. Initially practice supervisors will only be NMC nurse registrants. LJMU are working towards other health and social care registered professionals becoming supervisors. Issues such as capacity to take on this role in addition to supporting their own discipline students are being explored.  
(Recommendation one)

R6.3 Systems are in place to identify, prepare and support appropriate practice supervisors and assessors. The programme team reported that the infrastructure is in place to ensure appropriate student supervision and assessment is in practice. They are confident there are sufficient practice supervisors, academic assessors and practice supervisors to support students.

Those supporting, supervising and assessing students are required to complete a self-declaration document confirming they meet the NMC relevant role requirements. Documentary evidence and discussion confirms that a record of suitably prepared practice supervisors and practice assessors will be maintained and reported by PLPs. Each practice learning environment has a self-appraisal tool and checklist for resources. Returned checklists from practice learning areas confirm numbers of suitably prepared practice supervisors and assessors. 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.

R6.4 The documentary review and discussion with programme team representatives confirms that monitoring the effectiveness of practice learning environments is a joint responsibility between LJMU and associated PLPs. The practice learning environment educational audit tool has been updated and complies with the SSSA.

R6.5 Unchanged since original approval in July 2011.

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| <b>Outcome:</b>       | Standard met |
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| Revised outcome: |  |
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| <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 AEs must make explicit requirements for the conferment of academic awards where applicable.   |              |
| <b>What we found:</b>  |              |
| R7.1-R7.2 Unchanged since original approval in July 2011.  |              |
| <b>Outcome:</b>  | Standard met |
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| <b>Date standards met:</b>   |              |
| <b>Revised outcome:</b>  |              |
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| <b>Standard 8: Assessment – Programme outcomes must be tested using valid and reliable assessment methods</b> |
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| <p>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.</p> <p>R8.2 Programme providers must ensure that assessment processes enable students to demonstrate fitness for practice and fitness for award.</p> <p>R8.3 AElS 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.</p> |              |
| <b>What we found:</b>   |              |
| R8.1-R8.3 Unchanged since original approval in July 2011. However, eligibility to contribute to supervision and assessment has changed in line with the SSSA and the roles of practice supervisor, practice assessor and academic assessor.   |              |
| <b>Outcome:</b>   | Standard met |
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| <b>Date standards met:</b>  |              |
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| <b>Standard 9: Resources – The educational facilities in academic and practice settings must support delivery of the approved programme</b>  |
| <p>R9.1 AElS must ensure that the programme leader is a nurse or midwife with a teacher qualification recorded on the NMC register.</p> <p>R9.2 AElS must ensure that teachers have appropriate qualifications and experience for their roles.</p> <p>R9.3 Programme providers must ensure that sufficient staff are allocated to deliver the programme effectively.</p> <p>R9.4 Students must have access to appropriate learning approaches in a variety</p> |

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| of formats on all sites.                                  |              |
| <b>What we found:</b>                                     |              |
| R9.1-R9.4 Unchanged since original approval in July 2011. |              |
| <b>Outcome:</b>   | Standard met |
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| <b>Date standards met:</b>                                |              |
| <b>Revised outcome:</b>                                   |              |
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| <b>Standard 10: Quality assurance – Programme providers must use effective quality assurance processes in which findings lead to quality enhancement</b>  |              |
| R10.1 Programme providers' quality assurance processes must be aligned with the programme specification, programme evaluation and enhancement.  |              |
| R10.2 AElS 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 original approval in July 2011.   |              |
| <b>Outcome:</b>   | Standard met |
|   |              |

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

|   |              |
|---|--------------|
| <b><u><a href="#">NMC Circular 03/2011</a></u> - 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 Cheshire and Merseyside university consortium partnership agreement provides assurance of resources to support the programme.  |              |
| Processes are in place across PLPs and LJMU to ensure students are allocated to an identified practice supervisor, practice assessor and academic assessor during practice learning experiences.  |              |
| The programme team report they have strong partnerships with PLPs and practice educators through the link lecturer role. These partnerships enable support for practice areas and to facilitate the introduction of the SSSA. The programme team are confident there are sufficient practice assessors, academic assessors and practice supervisors to support students. Documentary evidence from practice learning areas confirms this. |              |
| <b>Outcome:</b>   | Standard met |
|   |              |
| <b>Date standards met:</b>  |              |
| <b>Revised outcome:</b>   |              |
|   |              |

### Evidence and references list

- LJMU pre-registration nursing programme mapping document for the SSSA (RN specific), undated
- LJMU pre-registration BSc (Hons) nursing (adult, child and mental health fields) approval reports, 30 June 2011, confirmation of approval letter 2 September 2011, and extension letter 1 February 2016
- LJMU pre-registration BSc (Hons) nursing (adult, child and mental health fields) major modification reports, 1 June 2016, and confirmation of approval letter, 9 August 2016
- LJMU pre-registration major modification report BSc (Hons) nursing (mental health (NDA) 11 June 2018, and confirmation of approval letter, 3 September 2018
- LJMU copy of PLP organisations in use, July 2019
- Cheshire and Merseyside University consortium signed partnership agreement, 30 May 2019
- Cheshire and Mersey supervisors and assessors group, supervisor preparation and guidance version two, undated
- LJMU BSc (Hons) nursing (adult, child, mental health) (draft), programme guide 2019/2020, undated
- LJMU BSc (Hons) nursing (adult, child and mental health), major modification to programme, implementation of the SSSA (NMC, 2018), July 2019
- Cheshire and Mersey supervisors and assessors group, practice assessor preparation and guidance, undated
- NWPEG, Practice assessor self-declaration form, undated
- NWPEG, Practice supervisor self-declaration form, undated
- Cheshire and Mersey supervisors and assessors group, academic assessor preparation and guidance, undated
- NWPEG, academic assessor self-declaration form, 6 June 2019
- LJMU BSc (Hons) nursing guide for practice 2019/2020, updated March 2018
- NWPEG supervision and assessment in practice placement declaration form, undated
- NWPEG SSSA checklist version two, 28 February 2019
- Checklist/self-appraisal tool for practice learning environments, version two, 28 February 2019
- NWPEG, timeline for rolling out SSSA across placement areas FdSc apprenticeship (nursing associate) and BSc (Hons) nursing, undated



Greater Manchester practice education facilitators forum, flyer key changes to the Standards for pre-registration nurse education (NMC, 2010), undated

Student representatives meeting minutes, 5 June 2019

Feedback from September 2016 students SLAiP feedback message, undated

BSc (Hons) nursing (adult) PAR year one, two and three, 8 August 2016

SSSA BSc (Hons) nursing (adult) revised PAR year one, two and three, undated

SSSA revised BSc (Hons) nursing (adult) year one, two and three practice skills inventory, undated

BSc (Hons) nursing (child) PAR year one, two and three, 8 August 2016

SSSA BSc (Hons) nursing (child) revised PAR year one, two and three undated

SSSA revised BSc (Hons) nursing (child) year one, two and three practice skills inventory, undated

BSc (Hons) nursing (mental health) PAR year one, two and three, 8 August 2016

SSSA BSc (Hons) nursing (mental health) revised PAR year one, two and three undated

SSSA revised BSc (Hons) nursing (mental health) year one, two and three practice skills inventory, undated

SSSA revised BSc (Hons) nursing (adult) PAR) year two and year three, uploaded 19 August 2019

SSSA revised BSc (Hons) nursing (adult) year two and year three practice skills inventory, uploaded 19 August 2019

SSSA revised BSc (Hons) nursing (mental health) PAR year one, year two and year three, uploaded 19 August 2019

SSSA revised BSc (Hons) nursing (child) PAR) year two and year three, uploaded 19 August 2019

SSSA revised BSc (Hons) nursing (child) year two and year three practice skills inventory, uploaded 19 August 2019

LJMU BSc (Hons) nursing guide for practice 2019/2020, updated March 2018, uploaded 19 August 2019

### Personnel supporting programme approval

#### Members of Approval Panel

Not applicable - Desktop review

#### Programme Presenters

QA visitor had a video-conference with programme team held on 9 August 2019.

Attendees included:

Subject head of nursing and RTP representative

Programme manager pre-registration nursing

School disability coordinator representing the field leader for mental health nursing

Field leader, child nursing

Apprenticeship lead

Subject head of allied health and representative of the director of the school

Field lead adult nursing and academic assessor, March 2020 cohort

Lead for practice learning

Quality enhancement officer

**Were any service providers visited?**

*Not applicable - Desktop review*

**Meetings with others**

|                                       |  |
|---------------------------------------|--|
| 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 - 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>Learning Disabilities</b>               |  | <b>Year 1</b>              | <b>Year 2</b>                   | <b>Year 3</b>                          | <b>Year 4</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> |
|  |  |  |                                     |                         |

**Additional evidence viewed**

LJMU NMC self-assessment report, 2018-19

LJMU NMC monitoring report, 2016-2017, 10 April 2017

CQC Inspection report Aintree University Hospital NHS Foundation Trust, 16 March 2018

CQC Inspection report Arrowe Park Hospital, 22 May 2019

CQC Inspection report North West Boroughs Healthcare NHS Foundation Trust, 10 October 2018

CQC Inspection report St Helens and Knowsley Teaching Hospital NHS Trust, 20 March 2019

CQC Inspection report Warrington and Halton Hospitals NHS Foundation Trust report, 27 November 2017

CQC Inspection report Wirral University Teaching Hospitals NHS Foundation Trust, 13 July 2018

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**Issue record**

|              |              |       |             |
|--------------|--------------|-------|-------------|
| Author:      | Jill Foley   | Date: | 20 Aug 2019 |
| Checked by:  | Judith Porch | Date: | 02 Sep 2019 |
| Approved by: | Andrea Bacon | Date: | 05 Sep 2019 |