

**Programme Audit/Major Modification report**

<b>Programme provider:</b>	University of Leicester
<b>In partnership with:</b> (Associated practice placement providers involved in the delivery of the programme)	University Hospitals of Leicester Leicestershire Partnership NHS Trust
<b>Date of review:</b>	19 Aug 2019
<b>Type of Modification</b>	Desktop
<b>Provision reviewed:</b>	Registered Nurse - Adult Registered Nurse - Child Registered Nurse - Mental Health
<b>Title of current programme:</b>	MSci nursing with leadership dual registration mental health and adult nursing MSci nursing with leadership dual registration mental health and children's nursing
<b>Title of modified programme if changed:</b>	
<b>Academic level of current programme:</b>	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input checked="" 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>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>	Ms Elizabeth Gormley-Fleming

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>	23 Sep 2019

## Summary

### Summary of modification request

The University of Leicester (UoL), school of allied health has approved pre-registration nursing programmes: MSci nursing with leadership (dual registration) mental health and adult nursing and MSci nursing with leadership (dual registration) mental health and children's nursing against the Standards for pre-registration nursing education (NMC, 2010) since 12 June 2018.

The UoL presented documentation for a major modification to these pre-registration nursing programmes to transfer from the Standards to support learning and assessment in practice (NMC, 2008) to the Standards for student supervision and assessment (SSSA) (NMC, 2018). This request is made in collaboration with practice learning partners (PLPs). PLPs identified the need to have a consistent approach to supervising and assessing students in practice learning environments including those shared with other approved education institutions (AEIs).

The assessment of students' proficiency and competence, EU directives and essential skills clusters (ESCs) (NMC, 2010) are all recorded in the pan-London practice assessment document (PLPAD) which is approved for use by UoL for the pre-registration nursing programme. These aspects of the programme are not changing, as the programme is still mapped against the Standards for pre-registration nursing education (NMC, 2010). However, who is eligible to contribute to the assessment of practice has changed in line with the new roles of practice supervisor, practice assessor and academic assessor in the SSSA (NMC, 2018). The PLPAD is updated to reflect these changes.

UoL and PLPs are fully engaged in the implementation of the strategy to meet the requirements of the SSSA for September 2019. UoL has provided comprehensive documentary evidence which demonstrates how the SSSA will be implemented. This includes timelines, student communication, role descriptors, governance and management processes and a practice learning handbook. Students have been consulted and agree to the proposal to implement the SSSA from September 2019.

Documentary evidence and a teleconference with UoL provides assurance of effective partnership working to assure the quality of the practice learning environments and the proposed transfer to the SSSA.

The major modification is recommended to the NMC for approval.

### Feedback from key stakeholders

### **Presenting Team**

Teleconference with programme leader on 20 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**

None identified

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

None identified

### **Areas for future monitoring**

- Monitor and evaluate the implementation of SSSA with the PLPs.
- Monitor the effectiveness of the support given to students who are transferring to SSSA.

**Outcome recommendation**

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

<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> .

<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 on 12 June 2018.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Domain: Communication and interpersonal skills</b>
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<b>Generic standard for competence</b>	
<b>Field standard for competence</b>	
<b>Competencies 1-8</b>	
<b>What we found:</b>	
Unchanged since original approval on 12 June 2018.	
<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 original approval on 12 June 2018.	
<b>Outcome:</b>	Standard met
<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 on 12 June 2018.	
<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 original approval on 12 June 2018.	
<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 original approval on 12 June 2018.	

<b>Outcome:</b>	Standard met
<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.

<p>R3.9 Programme providers must have processes to manage interruptions to programmes.</p> <p>R3.10 AEs must make explicit any arrangements for student progression.</p> <p>R3.11 AEs must have processes in place to confirm achievement of all programme requirements.</p> <p>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.</p> <p>R3.13 AEs must ensure that students comply with NMC requirements for good health and good character at completion.</p>	
<b>What we found:</b>	
<p>R3.1-R3.8 Unchanged since original approval on 12 June 2018.</p> <p>R3.9 Students who interrupt their studies will transfer to the SSSA on their return to the programme.</p> <p>R3.10-R3.13 Unchanged since original approval on 12 June 2018.</p>	
<b>Outcome:</b>	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 Unchanged since the original approval on 12 June 2018.

R4.2 Documentary evidence and discussion via teleconference confirms the infrastructure is in place to support the implementation of the SSSA from 23 September 2019. UoL and PLPs have developed and agreed guidelines for implementing the role of practice supervisor, practice assessor and academic assessor. There is a shared partnership framework in place between UoL and PLPs which will guide the preparation of practice supervisors, practice assessors and academic assessors. The framework document reinforces the key principles in relation to supporting learning in practice.

UoL confirms arrangements for preparing practice supervisors, practice assessors and academic assessors. The pan-London approach to practice learning guidance which sets out the requirements and responsibilities of these roles is to be used. Locally produced training material is being used to prepare existing and new practice supervisors and practice assessors. Mapping documentation outlines how current mentors, sign-off mentors and registered nurses will be prepared and transferred to the roles of practice supervisors and practice assessors. This will be through updates and attendance at a one-day workshop.

New practice supervisors and practice assessors will be prepared through attendance at a one-day workshop. Records of training and future updates will be maintained on the practice supervisor and practice assessor database. Practice supervisors will have completed at least six months of preceptorship before commencing their preparation to become a practice supervisor. The PLP student link managers will allocate the practice supervisors and practice assessors. Practice education facilitators and UoL link lecturers will support the implementation of these new roles. Oversight of student learning in practice is part of the UoL governance process and is achieved through the Leicester, Leicestershire and Rutland (LLR) placement and education meeting group (LPEM).

Academic assessors will be identified from existing faculty staff members who are registered nurses. Preparation for the academic assessor role is provided by UoL. A different academic assessor is appointed for each part of the programme. UoL will maintain a database of academic assessors.

The UoL presents a clear understanding of the role requirements to meet the SSSA (NMC 2018). The role of the academic assessor in confirming student achievement progression is clearly articulated. Existing arrangements for student support in the practice learning environment, link lecturer and personal tutor support will continue.

All relevant programme documentation is updated to reflect the SSSA roles of practice supervisor, practice assessor and academic assessor.

R4.3 A self-declaration confirming completion of preparation and updating to meet the SSSA requirements must be signed by all practice supervisors, practice assessors and academic assessors before they can be entered onto locally managed databases.

R4.4-R4.7 Unchanged since the original approval on 12 June 2018.

<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>	
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 on 12 June 2018.	
<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 Guidance is provided in the PLPAD for practice supervisors about their role and responsibility in student supervision and assessment. This is transparent for students. The ongoing achievement record (OAR) and guidance for practice assessors is clear. The expectation of communication between the practice supervisor and practice assessor on student progress is identified in the PLPAD.

The ESCs will continue to be recorded in the modified PLPAD. The documentation demonstrates that EU directives will continue to be achieved. Mapping has been completed against the Standards of pre-registration nursing education competency framework (NMC, 2010).

R6.2 The pan-London guide is used as the foundation for implementing the SSSA. The implementation of the new roles will be evaluated jointly by the UoL and PLP. It is anticipated that this will become part of the appraisal process. The revised programme documentation explains the new roles to students. In addition to this there has also been student consultation to explain the SSSA.

The documentation provides assurance that due regard has been duly considered and will continue to be adhered to by the appropriate allocation of practice assessors.

Assessment of students by practice assessors is identified and the relationship between practice supervisor, practice assessor and academic assessor and the

stage of the programme is understood.

R6.3 Criteria for establishing suitable practice supervisors and practice assessors is identified. Arrangements for updating practice supervisors and practice assessors are provided in handbooks. Preparation will be through workshops and online learning and will be jointly facilitated by the AEI and the PLPs. There are arrangements for establishing a database of practice supervisors and practice assessors. Individual PLPs will manage the database for practice supervisors and assessors. The UoL will maintain their own database of academic assessors.

R6.4 Documentation and discussion with the programme lead confirms roles, responsibilities, preparation and support for practice supervisors and practice assessors is outlined in the LLR practice learning handbook. Governance and assurance processes are established and these provide strategic oversight of student supervision and assessment in practice. This is a shared responsibility between UoL and the PLPs. Meetings are held quarterly with senior UoL and PLP managers in attendance. The clinical placement profile and educational audit tool has been amended to reflect the implementation of SSSA.

R6.5 Unchanged since original approval on 12 June 2018.

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



<p>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.</p> <p>R7.2 AEs must make explicit requirements for the conferment of academic awards where applicable.</p>	
<p><b>What we found:</b></p>	
<p>R7.1-R7.2 Unchanged since original approval on 12 June 2018.</p>	
<p><b>Outcome:</b></p>	<p>Standard met</p>
<p> </p>	
<p><b>Date standards met:</b></p>	<p> </p>
<p><b>Revised outcome:</b></p>	<p> </p>
<p> </p>	

<p><b>Standard 8: Assessment – Programme outcomes must be tested using valid and reliable assessment methods</b></p>	
<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 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.</p>	
<p><b>What we found:</b></p>	
<p>R8.1 Unchanged since original approval on 12 June 2018.</p> <p>R8.2 The evidence provided confirms that the programme is mapped to the</p>	

Standards for pre-registration nursing education (NMC, 2010). The PADs have been modified to reflect the implementation of the new roles of practice supervisor, practice assessor and academic assessor.	
R8.3 Unchanged since original approval on 12 June 2018.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standard 9: Resources – The educational facilities in academic and practice settings must support delivery of the approved programme</b>	
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.	
<b>What we found:</b>	
R9.1-R9.4 Unchanged since original approval on 12 June 2018.	
<b>Outcome:</b>	Standard met
<b>Date standards</b>	

met:	
Revised outcome:	

<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 on 12 June 2018.	
<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>	
<p>Academic curricula vita confirm that the teaching team are appropriately qualified to deliver the programme and to implement this modification.</p> <p>Documentary evidence and discussion confirms the UoL and PLPs have identified the resources required to effectively implement the SSSA. Assurance is provided that resources are in place to support the implementation of the SSSA and the delivery of the pre-registration nursing programme.</p>	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Evidence and references list</b>
<p>Code of practice for annual and periodic review, undated</p> <p>LLR practice learning handbook supporting learners in practice, 2019</p> <p>LLR governance and management document, 2019</p> <p>University Hospital Leicester (UHL)/Leicester Partnership NHS Trust (LPT) practice supervisor/assessor data set, 2019</p> <p>LLR core mentor update for 2019, undated</p> <p>LLR framework for mapping document, 2018</p> <p>LLR implementation timeline, February 2019</p> <p>LLR SSSA group terms of reference, February 2019</p> <p>LLR SSSA governance management of NMC approved programmes pre and post registration, 2019</p> <p>LLR letter to UoL, 25 July 2019</p> <p>Student consultation, 17 June 2019</p>

Example newsletters, March 2019

Appraisal/re-validation process/policy, undated

Quarterly joint oversight board meetings minutes, 7 January 2019

SSSA student consultation, June 2019

Student evaluations of placement template (midwifery and nursing), undated

Student staff committee minutes, 8 May 2019

Accessibility tutors guide, undated

Reasonable adjustments policy, September 2018

Raising and escalating concerns policy, September 2018

Fitness to practise policy, August 2017

Senate regulation, 11 September 2018

Placement evaluation question set, undated

Role placement summary 2016, undated

PLPADs for MSci mental health-adult nursing with leadership and MSci child with mental health nursing with leadership parts 2 and 3, 16 May 2019

MSci nursing with leadership (dual registration) programme specification, September 2018

MSci nursing with leadership (dual registration) handbook, 2019

On-going achievement record, 2018

Agreement between UoL and AEI placement sharing, April 2019

Appraisal / Re-validation process/documentation, 2019

Practice learning lead job description and person specification band 7, 2018

Staff student committee minutes, 8 May 2019

Information sheet supporting learners in practice, August 2019

Clinical placement profile, September 2019

Midwifery and nursing curriculum development meetings, 15 January 2019, 19 February 2019, 30 October 2018

Application to register of academic assessors, July 2019

Application to register of practice supervisors, July 2019

Application to register of practice assessors, July 2019

Nursing open day presentation, March 2019

Regional practice leads minutes, 18 November 2018

A pan-London approach to the implementation of SSSA, February 2019

East midlands practice leads steering group terms of reference, September 2018  
LLR practice supervisor and practice assessor register example, July 2019  
SSSA implementation group, 26 October 2018, 23 November 2018, 5 November 2018, 1 February 2019  
Evaluation questions, September 2018  
Placement innovation nursing and midwifery group minutes, November 2018, February 2019  
Placement provider agreement, March 2019  
UoL academic leave policy and procedure, 8 March 2012

<b>Personnel supporting programme approval</b>	
<b>Members of Approval Panel</b>	
Not applicable, desktop review.	
<b>Programme Presenters</b>	
Teleconference with the programme leader, 20 August 2019	
<b>Were any service providers visited?</b>	
<i>Not applicable, desktop review.</i>	
<b>Meetings with others</b>	
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>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**

Process for allocation of academic assessors, 14 August 2019

Email from Leicestershire Partnership NHS Trust confirming meeting re CQC action plan and development of action plan, 14 August 2019

Staff student committee agenda, May 2018

Quarterly oversight board terms of reference, May 2018

Nursing programme management committee terms of reference, May 2018

Screenshots of action plans by email, 14 August 2019

**Mott MacDonald Group Disclaimer**

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**Issue record**

Author:	Elizabeth Gormley-Fleming	Date:	30 Aug 2019
Checked by:	Judith Porch	Date:	07 Sep 2019
Approved by:	Andrea Bacon	Date:	17 Sep 2019