



Programme Audit/Major Modification report

Programme provider:	Manchester, University of
In partnership with: (Associated practice placement providers involved in the delivery of the programme)	Manchester University NHS Foundation Trust (Saint Mary's Hospital Managed Clinical Service) Pennine Acute Hospitals NHS Trust (Part of Northern Care Alliance NHS Group) Stockport NHS Foundation Trust Tameside and Glossop Integrated Care NHS Foundation Trust
Date of review:	15 Jul 2019
Type of Modification	Desktop
Provision reviewed:	Registered Midwife - 36M
Title of current programme:	Bachelor of Midwifery (Hons)
Title of modified programme if changed:	
Academic level of current programme:	England, Wales, Northern Ireland Level 5 Level 6 Level 7 SCQF Level 8 Level 9 Level 10 Level 11
Academic level of modified programme if changed:	England, Wales, Northern Ireland Level 5 Level 6 Level 7 SCQF Level 8 Level 9 Level 10 Level 11





Reviewer:	Toni Martin





Outcome of Approval Panel Meeting	
Outcome:	Recommended for approval
Conditions and NMC	Resources
standard(s)/requirement(s) they relate to:	None identified
	Admission and progression
	None identified
	Practice learning
	None identified
	Fitness for practice
	None identified
	Quality assurance
	None identified
Date conditions to be met:	
Recommendations and NMC standard(s)/requirement(s) they relate to:	None identified
Note: recommendations will be assessed through the AEI annual self-assessment report	
Date conditions met:	
Programme start date:	13 Sep 2020





Summary

Summary of modification request

The University of Manchester (UoM), division of nursing, midwifery and social work is approved to deliver a three-year Bachelor of Midwifery (Hons) pre-registration programme since April 2013. The university presented documentation for a modification to the approved programme to change from the Standards to support learning and assessment in practice (SLAiP) (NMC, 2008) to the Standards for student supervision and assessment (SSSA) (NMC, 2018). The SSSA have been clearly mapped into the existing programme.

A review of the documentation and discussion with the programme team via a teleconference call provides evidence of strong and effective partnerships with the practice learning partners (PLPs) in agreeing and developing the proposed change to the programme. The university has worked closely with the pan-Manchester practice education group (PMPEG), a collaborative group of professionals from approved education institutions (AEIs) and PLPs across Greater Manchester (GM), to agree the preparation for the implementation of the SSSA for nursing and midwifery students.

The lead midwife for education (LME) has agreed with the heads of midwifery services through the GM midwifery education group and the directors of nursing through the GM delivery group that all cohorts of student midwives will move to the SSSA from September 2020.

September 2020 students will be the first cohort to commence with the SSSA. Students from the September 2019 cohort moving into year two of the programme and September 2018 cohort moving into year three of the programme will also transfer to the SSSA in September 2020. There is a planned programme of preparation of students to introduce them to the SSSA and understand their role in supervision and assessment.

Documentary evidence confirms there are clear and comprehensive arrangements in place to prepare practice supervisors, practice assessors and academic assessors for their new roles to meet the SSSA.

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

Feedback from key stakeholders

Presenting Team





Not applicable - Desktop review

A teleconference was held with the QA visitor and the programme director, deputy head of student operations, teaching and learning enhancement and the official correspondent on 15 July 2019.

A detailed, comprehensive explanation on the proposal was provided, together with a robust rationale and supporting evidence for the changes.

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

The implementation of the SSSA.

Outcome recommendation

The modification is recommended to the NMC for approval.





NMC Standards

Please refer to the <u>Standards for Pre-Registration Midwifery Education (NMC, 2009)</u>, current programme specific circulars accessed via the <u>NMC Website</u>, EU Directive 2005/36/EC Article 41 (1) and Article 31 (6-7), and Section one of the Mott MacDonald <u>QA Handbook</u>.

Standards for the lead midwife for education		
Standard 1: Appointn	nent of the lead midwife for education	
The NMC requires an a	approved educational institution (AEI) to do the following:	
Appoint a lead midwife for education (LME) who is a practising midwife and has a recorded midwifery teaching qualification on the NMC register.		
Confirm the appointme	ent of an LME with the NMC	
Use the LME for strategic liaison with external agencies such as purchasers of education provision for all matters affecting midwifery education.		
What we found:		
Unchanged since original approval in April 2013.		
Outcome:	Standard met	
Date standards		
met:		
Revised outcome:		





Standard 2: Development, delivery and management of midwifery education programmes

The LME shall lead the development, delivery and management of the midwifery education programmes provided by the AEI, ensuring that they comply with the standards established by the NMC.

What we found:

Documentary evidence and discussion confirms the LME works in partnership with heads of midwifery services, associated PLPs and a neighbouring AEI who shares some practice learning areas. The proposed changes to the programme have also been made in consultation with the external examiner and students.

The GM midwifery education group is established to develop a shared communication and development strategy between midwifery practice and education and works together to support strategies in preparing midwives for the SSSA. The LME has agreed with the heads of midwifery services through the GM midwifery education group and the directors of nursing through the GM delivery group that all cohorts of student midwives will move to the SSSA in September 2020.

There is a planned programme of preparation of students to introduce them to the SSSA and understand their role in supervision and assessment.

There is an ongoing detailed preparation plan to ensure practice assessors and practice supervisors and academic assessors are prepared for their roles to meet the SSSA and relevant documentation reflects the SSSA.

Outcome:	Standard met
Date standards	
met:	
Revised outcome:	

Standard 3: Signing the supporting declaration of good health and good





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responsible, at her dis	e 6(1)(a)(ii) of the registration rules, the LME shall be cretion, for signing the supporting declarations of good health r all midwifery applications to the register.	
What we found:		
Unchanged since original approval in April 2013.		
Outcome:	Standard met	
Date standards		
met:		
Revised outcome:		

Standards for admission to, and continued participation in, pre-registration midwifery programmes

Age of entry

St. 4

General requirements

The following requirements for selection should be read and operated alongside programme providers' existing policies and procedures:

4.1 Selection

Wherever practicable, the selection process should include a face-to-face meeting.

Programme providers (AEIs and their service partners) are encourage, wherever possible, to involve lay people and midwifery students in the selection process. Depending on local circumstances they may be involved directly or indirectly in selection.





All individuals in the selection process should receive appropriate training, preparation and updating which includes equality and diversity.

Representatives of partner service provider organisations should be directly involved in the selection process.

The views of the individuals directly involved in selecting applicants should be taken into account when making final decisions on whether to accept or reject an applicant.

4.2 Literacy and numeracy

AEIs are required to ensure that applicants for pre-registration midwifery education programmes have provided evidence of literacy and numeracy that includes prior achievement of basic skills sufficient to undertake a pre-registration midwifery programme of education to a satisfactory level of attainment.

4.3 Good health and good character

Applicants must demonstrate that they have good health and good character sufficient for safe and effective practice as a midwife, on entry to, and for continued participation in, programmes leading to registration with the NMC.

Applicants from overseas must meet the good health and good character as defined for UK applicants and additionally those requirements set out by the UK government for healthcare workers from overseas

4.4 Entry to the register

The NMC requires a self-declaration of good health and good character from all those entering the register for the first time. On completion of the midwifery programme the student will submit this self declaration. The declaration is either supported by the LME, whose name has been notified to the Council and who is responsible for midwifery education in the relevant AEI, or by her designated registered midwife substitute. AEIs must be able to provide evidence of having fulfilled this requirement.

What we found:	
Unchanged since original approval in April 2013.	
Outcome:	Standard met





Date standards	
met:	
Revised outcome:	
Standard 5: Interrupt	ions to pre-registration midwifery education programmes
Standard 5. Interrupt	ions to pre-registration initialities
•	must ensure that they have in place processes to manage
interruptions to the stu	dy of programmes for whatever reason.
When a student return	s to a programme it is recommended they have a period of
orientation appropriate	to the length of interruption. Programme providers must
	t's acquired knowledge and skills remain valid, enabling them
to achieve the necessa	ary standards required on completion of the course.
What we found:	
Unchanged since origi	nal approval in April 2013. Students returning from interruption
	eptember 2020 will transfer to the SSSA.
Outcome:	Standard met
Date standards	
met:	
Revised outcome:	
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Standard 6: Admission with advanced standing

All applicants, other than those registered as a nurse level one (adult), must complete a minimum three years full-time pre-registration midwifery programme of





education.	education.	
Where a student is already registered with the NMC as a nurse level one (adult), the length of the pre-registration midwifery education programme shall be no less than 18 months full time.		
What we found:		
Unchanged since origi	nal approval in April 2013.	
Outcome:	Standard met	
Date standards met:		
Revised outcome:		
Standard 7: Transfer	between approved educational institutions	
It is the responsibility of AEIs to decide whether or not to accept an application for transfer.		
What we found:		
Unchanged since original approval in April 2013.		
Outcome:	Standard met	
Date standards met:		
Revised outcome:		





Standard 8: Stepping off and stepping on to pre-registration midwifery		
education programmes		
Students can 'step off' a pre-registration midwifery programme of education.		
What we found:		
Unchanged since origin	Unchanged since original approval in April 2013.	
Outcome:	Standard met	
Data atau danda	Г	
Date standards met:		
Revised outcome:		
Standards for the structure and nature of pre-registration midwifery programmes		
Standard 9: Academi	c standard of programme	
Since September 2008 the minimum academic level for entry to the midwives' part of the register for those entering pre-registration midwifery programmes is degree level (NMC Circular 14/2007).		
Scotland – 360 academic credits, 60 of which must be at level nine.		
England, Wales and Northern Ireland – 300 academic credits, 60 of which must be at level H.		
What we found:		
Unchanged since original approval in April 2013.		





Outcome:	Standard met	
Date standards met:		
Revised outcome:		
Standard 10: Length	of programme	
Article 31(6-7) of EU D programmes in years,	rirective 2005/36/EC now describes the length of midwifery months and hours.	
The length of a pre-registration midwifery programme of education should be no less than three years (equivalent to 156 weeks full time) and each year shall contain 45 programmed weeks.		
Three year direct entry	programme – 4,600 hours (minimum requirement)	
Where the student is already registered with the NMC as a nurse level one (adult), the length of the pre-registration midwifery programme of education shall not be less than 18 months (equivalent to 78 weeks full time).		
Eighteen month midwifery programme (following qualification as an adult nurse) – 3,000 hours (minimum requirement).		
What we found:		
Unchanged since original approval in April 2013.		
Outcome:	Standard met	
Date standards met:		
Revised outcome:		





Standard 11: Student support

Midwife teachers and midwife mentors must meet the NMC's standards to support learning and assessment in practice.

What we found:

There is a clear strategic implementation plan which details ongoing preparation to ensure practice assessors and practice supervisors and academic assessors are prepared for their roles to support, supervise and assess students to meet the SSSA.

Relevant documentation to support students, practice assessors, practice supervisors and academic assessors reflects the SSSA.

The UoM academic lead for midwifery practice, with support from the academic lead for practice governance, maintains strategic oversight of practice learning environments to ensure practice supervision and assessment remains fit for purpose. This process is overseen by the LME and midwifery programme director.

Practice education facilitators (PEFs) also ensure practice supervision is in place. The PEF team will take the role of 'nominated person' within the PLP organisations.

There is a robust system for self-assessment of current mentors against the SSSA. Mentors are required to complete a self-assessment proforma to provide evidence of previous training and map this to criteria to meet the SSSA to become a practice assessor or practice supervisor.

There is evidence through educational audits to demonstrate sufficient staff resources for practice supervisor and practice assessor roles in practice learning environments. The GM midwifery education group monitors the current numbers of mentors and will monitor practice assessor and practice supervisor numbers in the future. Support for the new roles has been agreed by heads of midwifery within the associated PLPs.

The ongoing preparation to ensure practice assessors and practice supervisors are prepared for their roles is supported by the student link midwife and the PEF team. Preparation materials developed across GM for nursing are used in addition to midwifery-specific content for practice supervisors and assessors which is developed





by midwifery education teams. There are a variety of training approaches and resources to prepare practice and academic staff for the new SSSA roles.

Training materials will be used in year three of the pre-registration midwifery programme to prepare students for the practice supervisor role when they register as midwives.

Documentation and preparation material clearly identify the practice assessor must be a registered midwife. The practice assessor allocated to the student will not also be the practice supervisor.

The role of the academic assessor is clearly outlined. The academic assessor will have due regard and will not be allocated to a student in consecutive years of the programme.

Each year staff will self-declare regarding their currency and ongoing development in the SSSA role. This will be evidenced within the e-portfolio which is hosted online through the practice assessment record and evaluation system (PARE). The requirements for maintaining competency in the role are detailed within the supervisor and practice assessor handbook.

Documentary evidence and findings from the discussion with representatives from the UoM academic team provide assurance that practice supervisors, practice assessors and academic assessors will be appropriately prepared to fulfil their role and responsibilities in supervising and assessing students practice learning.

Outcome:	Standard met
Date standards met:	
Revised outcome:	

Standard 12: Balance between clinical practice and theory	
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Since September 2008, the practice to theory ratio of each programme is required to be no less than 50 percent practice and no less than 40 percent theory.									
What we found:									
Unchanged since origin	nal approval in April 2013.								
Outcome:	Standard met								
Date standards met:									
Revised outcome:									
Standard 13: Scope o	of practice experience								
Where the opportunity is available, students should be involved in supporting women birthing in a variety of settings.									
Student midwives must be involved in the care of a small group of women throughout their childbirth experience, including antenatal, intrapartum and postnatal care.									
What we found:									
Unchanged since origin	Unchanged since original approval in April 2013.								
Outcome: Standard met									
Date standards met:									
Revised outcome:									





Standard 14: Supernumerary status during clinical placement					
employed to provide m	ore-registration midwifery education programmes cannot be idwifery care during their training – all clinical experience d with students having supernumerary status for the duration.				
What we found:					
Unchanged since origin	nal approval in April 2013.				
Outcome:	Standard met				
Date standards met:					
Revised outcome:					

Standard 15: Assessment strategy

Clinical practice must be graded and be counted as part of the academic award.

All outcomes within a progression point period (for example an academic year) have to be achieved and confirmed within 12 weeks of entering the next academic level. All assessments must be completed and have been passed prior to successful completion of the programme.

A student midwife shall achieve these standards under the supervision of a sign-off mentor.

What we found:

Documentary evidence clarified the assessment strategy and the ongoing support students receive in practice learning environments which complies with the SSSA in





relation to the assessment and progression of students.

Documentary evidence and discussion during the teleconference confirms the assessment of students' proficiency and competence, EU directives and essential skills clusters (ESCs) are not changing, as the programme is still mapped against the Standards for pre-registration midwifery education (NMC, 2009). However, who is able to contribute to the assessment of practice has changed in line with the new SSSA roles of practice supervisor, practice assessor and academic assessor. The practice assessment document (PAD) and ongoing achievement record (OAR) are updated to reflect these changes.

The structure of the programme has not been affected by the implementation of the SSSA, therefore the progression points are unchanged. The process of grading of midwifery practice in the modified PAD also remains unchanged.

Practice supervisors will contribute to the student's record of achievement by recording their observations in the student's PAD and within the placement interview documents. The PAD and placement interview documents are hosted online via the PARE system which has functionality built in for practice supervisors, practice assessors and academic assessors to record notes and comments regarding the student's progress and achievement.

Students are allocated a named practice supervisor within the placement area. The PAD and the placement interview report demonstrate many opportunities for the practice supervisor to provide structured feedback to students including providing feedback that a student is achieving a skill. This formative element is then reviewed by the practice assessor. A flowchart clearly outlines the process to be followed. The practice supervisor will alert the practice assessor to any concerns and instigate a learning agreement which is completed by the practice assessor with the student.

The role of the practice assessor is clearly outlined within documentation. The practice assessor reviews all feedback from the practice supervisor including evidence towards skill proficiency and provides the confirmation that the student has passed all proficiencies. The practice assessor has the responsibility for creating and overseeing a learning agreement which is a structured learning plan to address any practice learning issues a student may have.

The academic assessor can access the PAD at any time throughout the year. The role and responsibilities of the academic assessor are outlined within documentation. The academic assessor is responsible for reviewing practice assessment documentation and recording academic and practice achievements at key points in the year. In collaboration with the practice assessor, the academic assessor is



Outcome:

Date standards

Protecting the public through quality assurance of nursing and midwifery education



responsible for two progression points throughout the year. The first is formative, the second summative. The academic assessor contributes to any learning agreements.

The academic assessor will provide comments on student progress and achievements through the PAD and report to the end of year board of examiners, confirming student progression.

There is evidence of a timely approach to informing students about the SSSA requirements in preparation for September 2020.

Standard met

met:	
Revised outcome:	
Standard 16: Ongoing	g record of achievement
	achievement, including comments from mentors, must be ement to the next to enable judgements to be made on the
What we found:	
	or and practice assessor contribute to the OAR via the PARE ects the SSSA from September 2020.
Outcome:	Standard met
Date standards met:	
Revised outcome:	





Achieving the NMC s	tandards					
Standard 17: Compet	tencies required to achieve the NMC standards					
practise safely and effe	Students need to be proficient in all standards by the end of their training in order to practise safely and effectively as a midwife without the need for direct supervision. A student must demonstrate competence in these standards to enter the register as a midwife.					
What we found:						
Unchanged since origi	nal approval in April 2013.					
Outcome:	Standard met					
Date standards met:						
Revised outcome:						

NMC Circular 03/2011

Resources to support programme intentions

Programme providers must provide evidence at programme approval that resources are currently available to support programme intentions.

What we found:

There is robust evidence of sufficient resources to support the modification to the SSSA. Documentary evidence and discussion provides assurance that there are partnership agreements in place with associated PLPs. These arrangements confirm





there are sufficient resources in practice learning environments to support the implementation of the SSSA for the pre-registration midwifery programme. The university provided confirmation that there are resources in the university setting to support the implementation of the SSSA.

Monitoring of the effectiveness of the practice learning environments and compliance with the SSSA will be undertaken by the UoM in partnership with PLPs.

Outcome:	Standard met
Date standards	
met:	
Revised outcome:	

Evidence and references list

UoM BMidwifery programme handbook for 2020 (draft) assessment and learning in practice sections modified for SSSA, undated

UoM BMidwifery programme move to SSSA - action plan summary, undated

GM midwifery education group, terms of reference, March 2019

GM midwifery education group minutes, 12 March 2019 and 9 April 2019

SSA update for students, summer 2019, undated

Pan-Manchester midwifery SSSA information for mentor updates 2019-2020, undated

North west learning environment audit document and guide to completing the audit, undated

University link lecturer role, undated

Academic lead for practice governance role description, undated

Academic advisor roles and responsibilities, undated

PEF role description 2018, undated





BMidwifery year one PAD - SSSA modifications, undated

GMPEG AEI practice assessor and practice supervisor handbook, April 2019

GM practice assessor self-assessment form, undated

GM practice supervisor self-declaration form, undated

GM preparation and QA of supervisors and assessors, undated

UoM proposal and plan for implementation of the SSSA, undated

Practice supervisor/assessor preparation leaflet, February 2019

BMidwifery OAR revised June 2019

BMidwifery learning agreement (draft) for September 2020

Midwifery SSSA option appraisal paper for the GM midwifery education group February 2019

Midwifery SSSA student communication plan, April 2019

Strategy for preparation of midwifery practice supervisors and practice assessors, June 2019

Role specification for midwifery practice lead, June 2019

UoM confirmation of support statement - Northern Care Alliance NHS Group, Oldham, undated

UoM confirmation of support statement - Stockport NHS Foundation Trust, undated

UoM confirmation of support statement - Manchester University NHS Foundation Trust, undated

UoM academic assessor role description, undated

PARE SSSA materials - web page, accessed July 2019

Timeline for practice supervisors and assessor process, undated

Email communication for external examiner outlining agreement with SSSA, undated

Email communication between programme director and student body, undated

Personnel supporting programme approval

Members of Approval Panel

Not applicable - Desktop review

Programme Presenters

A teleconference was held with the QA visitor and the programme director, deputy head of student operations, teaching and learning enhancement and the official





correspondent on 15 J	uly 201	9.				
Were any service pro	viders	visited?				
Not applicable - Deskto	op revi	ew				
Meetings with others						
Mentors / sign-off me	ntors					
Practice teachers						
Service users / Carers	S					
Practice Education Fa	acilitato	or				
Director / manager nu	ırsing					
Director / manager mi	dwifer	/				
Education commission	ners or	equivalent				
Designated Medical F	ractitic	oners				
Other (please specify))					
If there were no repres	ontativ	os prosont du	ring the appro	val avant plaa	so stato why:	
·		·	ilig tile appro	vai event piea	ise state wity.	
Not applicable - Deskto	op revi	€W				
Meetings with studen	ıte					
Nursing						
Adult		Year 1	Year 2	Year 3	Year 4	
Mental Health		Year 1	Year 2	Year 3	Year 4	
Children's		Year 1	Year 2	Year 3	Year 4	





Learning Disabilities	Year 1 Year 2			Year	3		Ye	ar 4		
Midwifery (3 year)	Year 1	ear 1 Year 2		Year	3					
Midwifery (18 month)	Year 1		Yea	r 2						
SCPHN	HV	SN OH			FHN			RPHN		
Learning and Assessment in Practice				Practice Teacher			Teacher			
Nurse Prescribing	V100		V150			V300				
Specialist Practice	Adult Learning Disability Community Learning Disabilities Nursing		Mental Health				Children's			
				General Practice Nursing Community Children's Nursing			ce	Community Mental Health Nursing District Nursing		

Additional evidence viewed

No additional evidence was viewed.





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Issue record			
Author:	Toni Martin	Date:	16 Jul 2019
Checked by:	Judith Porch	Date:	29 Oct 2019
Approved by:	Leeann Greer	Date:	30 Oct 2019
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