ULSTER UNIVERSITY

REPORT OF A MEETING OF THE CONJOINT UNIVERSITY OF ULSTER (REVALIDATION) AND NURSING AND MIDWIFERY COUNCIL (NMC) (RE-APPROVAL) PANEL: UNIT 22A1 NURSING (PRE-REG)

30 March 2020

PRESENT: Professor H Farley, Associate Dean (Education), Ulster University Business School (Chair)
                    Mrs C Reid, Ulster University Business School Partnership Manager
                    Ms C Cassidy, Vice-President Magee campus, Ulster University Students' Union
                    Mr J Freeman, Principal Lecturer/Faculty Co-ordinator in Mental Health Nursing, Faculty of Health and Wellbeing, Sheffield Hallam University
                    Ms N Welyczko, Associate Professor in Nursing and Midwifery and Associate Head of School, The Leicester School of Nursing and Midwifery, De Montfort University

NMC REPRESENTATIVES:

                    Dr E Mason, Registrant Visitor
                    Mr P Stephenson, Lay Visitor

IN ATTENDANCE: Mr B McArthur, Academic Policy and Standards Officer, Academic Office, Ulster University

1   BACKGROUND/INTRODUCTION

The Panel met to consider the following provision.

- BSc Hons Nursing (Adult) (with CertHE and AB Healthcare exit awards) (FT) (ME)

- BSc Hons Nursing (Mental Health) (with CertHE and AB Healthcare exit awards) (FT) (ME)

Pre-registration BSc Honours programmes in Adult and Mental Health nursing are delivered in full-time mode on the University's Magee campus. Places are commissioned by the Department of Health (DoH). In 2019 the DoH commissioned 258 places for the Adult programme and 64 places for the Mental Health programme. Commissioned numbers were reviewed annually and have shown an increase over the last five years.

The programmes are accredited by the Nursing and Midwifery Council (NMC) and are underpinned by the NMC published standards, *Future nurse: Standards of proficiency for registered nurses (2018)* (NMC Standards). The 3-year programmes lead to professional registration with the NMC. All modules in each programme are compulsory and each comprises 40 credit points of practice learning each year which is assessed on a pass/fail

basis and does not contribute to final award classification. A total of 2,325 hours (approximately 50%) of each programme is delivered in practice settings.

Projected demand for the provision is detailed in the below table. During the meeting, senior management indicated that it was anticipated that 900 places would be commissioned across the three providers in the region: Ulster, Queen's University Belfast and the Open University. For Ulster, this would equate to approximately an additional 70 Adult students and 30 Mental Health students (see Section 4, para 2 below).

Year	2020/2021 Projected	2021/2022 Projected	2022/2023 Projected	2023/2024 Projected	2024/2025 Projected
BSc (Hons) Mental Health Nursing	64	64	64	64	64
BSc (Hons) Adult Nursing	258	258	258	258	258

2   DOCUMENTATION

The Panel received the following documentation:

- Agenda and programme of the meeting
- Guidelines for evaluation and revalidation panels
- NMC Quality Assurance Handbook (2019)
- External Examiner reports for the last two years
- Preliminary comments from Panel members
- Preliminary comments from the NMC Registrant Visitor
- Revalidation documentation

The event took place via Skype. At the outset, the Revalidation Unit Co-ordinator, Ms S Dunleavy, gave a presentation to the panel which included an overview of the following:

- Background and structure of the University and the School of Nursing
- Provision offered by the School including the provision under review
- Demand for the provision and typical student profile
- Person-centred nursing framework
- Ulster's *Integrated Curriculum Design Process*
- Curricula including content and input of internal and external stakeholders in their development
- Key changes to the curricula
- Assessment strategies
- Learning and teaching approaches
- Practice learning
- Pre-entry and initial induction processes
- Accreditation of prior learning and attendance policies

The Panel met initially with the Subject Team followed by the Faculty senior management comprising Professor A McKillop, Associate Dean (Education), Professor S McIlfatrick, Head of School of Nursing, and the Revalidation Unit Co-ordinator, Ms S Dunleavy. During the

afternoon session, the NMC representatives chaired meetings with practice learning professionals and employers, service users and carers, and current students. A report of the NMC meetings prepared by Dr Mason, NMC Registrant Visitor, is appended to this report.

The following report provides a summary of issues raised during the event and responses to Panel questions provided by each of the groups that met with the Panel during the meeting.

3   MEETING WITH COURSE TEAM

Student consultation in programme development

Students in all years of the current provision had been consulted during development of the revalidation programmes. They had been spoken to in groups during which they had been briefed on the new NMC standards and their implications. They had also been provided with information leaflets. The Subject Team had worked closely with student representatives, meeting with them on several occasions. Feedback from the students was taken into account during programme development. Each student who it was proposed would transition into the new programmes (current year 1 and 2 students) was required to sign a consent form.

Programme Level Learning Outcomes

The programme level learning outcomes presented in the programme specifications for the two courses were very similar. They had been deliberately written in this way to ensure that each aligned with the 2018 NMC Standards document. Differentiation in the knowledge, skills and behaviours that nurses needed to learn relative to their own field of practice would be captured within the modules of each programme. The importance of field of practice/cohort identity was recognised. This would be forged within each programme where, apart from two shared modules, each cohort would be taught separately achieving module learning outcomes specific to their own field of practice.

Practice Learning

Practice learning – Fields of Practice

Each programme would include 2,325 hours of practice learning which would take place across each year of the 3-year programme. Practice learning would take place in both community, independent and hospital settings. There was a long list of settings available within the independent sector. During each part of the programme students would provide evidence of meeting the requisite proficiencies and learning outcomes required to progress to the next part of the programme. Evidence of attainment would be recorded in the Northern Ireland Practice Assessment Document (NIPAD). These proficiencies and outcomes were based on the NMC seven platforms and Annexes A and B of the NMC Standards document.

To ensure a good quality practice experience for all students, the University, together with Queen's University Belfast and the Open University (the three regional providers for this sector), work closely with the Practice Education Teams across the region. This

engagement ensures the availability of adequate settings covering the required fields and that sufficient capacity exists. This process includes a 'zoning' agreement for each university; the Ulster zone being located in the north and west of the region. All settings were approved through an educational audit involving all institutions.

During practice learning students would be exposed to a broad range of experiences across the fields of practice of Adult, Mental Health, Learning Disability and Children's nursing. While the structure of the NIPAD was the same across fields, it contained field-specific applications. To ensure that students would gain 'real' experiences, very clear learning outcomes and competencies in each area of practice would be required to be addressed and achieved. Practice supervisors and practice assessors would be clear about the requirements within each field of practice. Regardless of the practice setting, students would be required to engage with people and many of the skills and experiences learned would be transferable to other fields of practice. In addition, in each year of the programme, the work on placement would align with the theory modules being taught on-campus. Many of the modules would include exposure to fields of practice other than that of the programme. Overall therefore, the joined-up teaching and learning approaches to the theoretical and practical elements of the programmes would ensure a cohesive experience exposing students to all fields of practice in appropriate clinical settings enabling the achievement of real-world experiences, knowledge, skills and attributes.

Practice assessment

The NIPAD would be used to support and guide students towards the successful achievement of the proficiencies set out in the NMC Standards document. It would be used to document evidence of achievement of the requisite proficiencies within each part of the practice element of the programme. The NIPAD would direct and structure the learning in practice whilst also facilitating student collation of evidence mapped to the NMC proficiencies enabling assessment and transparency. Each competency within practice learning must be achieved for students to be eligible to apply and be entered onto the NMC register of practitioners. Worksheets within the NIPAD would be assessed on a pass/fail basis although this was described in the University's module template as a 100% pass. By this means students would be given academic credit for their practice learning. The results for practice learning do not however contribute to the final award for the programme.

Practice attendance

Normally, students would undertake 37½ hours of practice per week. Should a student for whatever reason be unable to attend, agreement would be reached between the University and the practice clinicians as to when the missed period could be made up.

Cohort sizes

In 2019 the DoH commissioned 258 places for Adult nursing and 64 places for Mental Health nursing. Despite the high numbers, the delivery of provision was well managed. For the theory part of the programme, students would be allocated to groups which would remain together throughout the programme for tutorials, workshops and so forth. Students would quickly get to know others within their group. On occasion, there would be shared lectures forto larger groups to aid timetabling.

Within the Adult cohort, the groups would normally contain 50 to 55 students. For simulations, these groups would be further sub-divided into groups of 6 to 8 which would ensure that each student would have the opportunity of achieving good clinical skills. Recently, a great deal of equipment had been upgraded freeing up additional space which aided management of groups through a rotation process. A video-recording facility would also be available as would recorded lectures and demonstrations. By these means, large student cohorts could be more easily managed.

For practice learning, at the outset of the Adult programme, students would be allocated to one of six 'streams'. Each stream would be rotated through a series of practice learning settings. Students would remain in the same stream throughout each year of the programme. The School's Academic Lead would remain in contact with practice partners to ensure continued capacity during the programme. The allocation of students to groups would be based on postcode to minimise travel difficulties. If it better suited, a transfer mechanism was available for a student to be able to transfer between groups. Students would know in advance of their allocation so would be able to forward plan. Where necessary, accommodation could be arranged. There was also support available through a student bursary scheme to assist with travel and accommodation expenses.

Practice settings were classified for different fields of practice thus ensuring that during the three years of a programme students would be exposed to the a diverse range of required areas of nursing practice. This process of classification and rotation was agreed regionally between the University, Health Trusts and independent sector to ensure continued capacity.

Student support

Although student cohorts would be relatively large, each student would be provided with a personal Studies Adviser who would remain with them throughout the programme. The Studies Adviser would provide support regarding not only academic performance and progress, but also for pastoral care. Studies Advisers would meet formally with students once per semester but informally as often as required. Each Studies Adviser would have an allocation of some 20 to 25 students.

An additional level of support would be provided by a 'link lecturer' who was a member of academic staff with established links within the practice learning area and strong working relationships with practice staff. The link lecturer would double as the academic assessor for practice learning, would have an allocation of some 20 students, and would visit those students on placement. They would also be available to students by telephone and email.

A range of support would also be provided by other individuals and services such as practice supervisors, practice assessors and nominated persons in the practice settings, class representatives, student wellbeing services and the Students' Union. An additional measure would involve students at the outset being given preparatory work so each could be assessed as to their level of learning and remedial measures put in place if required. National Student Survey results have consistently indicated high levels of satisfaction with the level of support students receive on this provision. All staff were cognisant of the importance of student health and wellbeing.

Reasonable adjustment

The School has a process for the identification and management of reasonable adjustment during practice learning for students. This process has been developed with Student Wellbeing services and was agreed with practice partners. Where the requirement for a reasonable adjustment has been identified to the Course Director, an agreed plan of support would be put in place to meet the student's specific needs prior to the commencement of placement. A process for applying for consideration of mitigating circumstances was in place to take account of students' individual needs and personal circumstances when allocating their practice learning. There was no minimum age entry requirement for the programmes. In exceptional circumstances where a student was under 18 years, a risk assessment would be carried out before they were permitted to enter a practice learning environment. This would occur only infrequently, the last occasion being 2006.

Numeracy

In year 2 of each programme, students would undertake an online health numeracy assessment and calculation of medicines in two modules, NUR424 (Mental Health) and NUR448 (Adult), which must be passed through the achievement of a mark of 100%. This would be in addition to numeracy work that students would undertake during practice learning.

Assessment Strategy

Potential over assessment in theory modules2

In designing the provision curricula, Ulster's *Integrated Curriculum Design Framework* was followed. Inter alia, the Framework provided guidance on assessment. A new approach in the proposed provision was the allocation of academic credit to practice learning hours. Previously this element had not been given academic credit. The curricula were now designed to award academic credit to the achievement of the proficiencies and outcomes during practice learning as assessed in the NIPAD. Most modules included only two items of assessment in line with University guidelines. Where there were more, these tended to be smaller assessments than the norm whereby one would feed into another. Often, the third assessment related to assessment by group work where each student's contribution to the group activity was assessed. This was a University requirement where a group assessment contributed to the overall classification of an award. In this circumstance, at least 25% of the mark for each group member had to be based on their individual contribution to the group activity.

The Subject Team acknowledged that there were inconsistencies in the level of assessment across modules. This was the result of the award of marks for preparatory work before a final assessment. Previously such work would only have been regarded as formative assessment. This approach was designed to avoid a "high risk final assessment". Moreover, student feedback indicated that students preferred achieving formal recognition for their work throughout the module. An added value was that students would be encouraged to study throughout the semester rather than cramming for a single final assessment. It was suggested that this would help students in the longer term.

The assessment strategy in each programme included two formal examinations, one each at levels 5 and 6. The results of these examinations would contribute to the classification of the award. Examinations had been included to ensure diversity of assessment which aligned with the *Integrated Curriculum Design Framework*. Moreover, NMC Standards required a health numeracy assessment and calculations of medicines which must be passed with a score of 100%. Students would be well supported in preparing for the formal examinations. Experience indicated that, perhaps counter intuitively, it was more often the case that the more mature students were the least afraid of formal examinations.

Absence – missed work / assessments

Where a student was absent for a period, work would be set reflecting the missed learning. Regarding assignments, a deadline for completion would be set taking account of the student's personal circumstances and the avoidance of bunching. Care would be taken not to overburden a student and create undue stress.

4   MEETING WITH SENIOR MANAGEMENT TEAM

Resources

The Associate Dean provided an overview of the provision and where it sat within the Faculty. The Faculty offered a large portfolio of programmes within the healthcare sector. Nursing provision was recognised at both University and Faculty level as an extremely important component of that provision and consequently were prepared to invest in staff and infrastructure to ensure the continued development and quality of the provision. This was recognised through the recent recruitment of 10 additional staff and the process has begun to recruit a further 5. This commitment was also evident through the recent multimillion-pound investment in the Magee campus resulting in expanded teaching spaces.

Regarding maximum viable student numbers, 258 students had been recruited to the Adult programme and 64 to the Mental Health programme for the current academic year. The Northern Ireland government had committed to 900 places over the next three years across the three providers, Ulster, QUB and the Open University. This would equate to approximately an additional 70 Adult students and 30 Mental Health students at Ulster. Given the recent staff increases and infrastructure developments described above, there would be adequate resources to cope with the increase. Resources would however be reviewed year on year.

Role of Studies Advisers

Studies Advisers would also perform in the role of link lecturers for students on placement. They would be appointed on a geographical basis covering the region where Ulster placement settings were located. The Studies Advisers/link lecturers have well established contacts within the practice learning settings and have experience of working collaboratively with colleagues in those locations.

Interprofessional working

The focus on interprofessional working would occur during practice learning when students would work, for example, with pharmacy students. The NIPAD required evidence of working with other professions. There was a very strong focus overall on interprofessional working throughout the provision. In addition, there was an annual community resilience exercise carried out which involved final year students working with other professionals such as police and ambulance personnel. Moreover, at Faculty level, an interprofessional working group comprising pharmacy, nursing and allied health professions share good practice which was documented and shared across the School.

The following meetings were chaired by the NMC representatives

5   MEETING WITH PRACTICE LEARNING PROFESSIONAL AND CARERS (Chaired by Dr Mason, NMC Registrant Visitor)

The following is a summary of responses to issues raised.

- Group fully involved in consultation on the development of the curricula - details of the consultation processes provided.
- Training, both online and face-to-face, was available for those transitioning into or new to the practice learning roles of practice supervisor and practice assessor.
- While practice supervisors and practice assessors had clearly defined responsibilities, they worked collaboratively at summative assessment points. Each would have an action plan based on their respective responsibilities for overseeing student work and directing them on the achievement of the required proficiencies and practice learning outcomes.
- A clear flow chart would be available to students on how concerns relating to any aspect of the care environment could be raised within the practice setting through an 'escalation of concerns process'. This would involve the nominated person in the practice setting and fed into the University link lecturer and academic assessor.
- All practice learning partners go through an educational audit based on Annex A and B of the NMC Standards document. This details, inter alia, the focus of the training at each location ensuring that all four fields of practice were covered.
- Practice setting audits include the issue of adequacy of capacity. There was inbuilt flexibility to ensure capacity using a shift (rotation) pattern. Capacity was determined through a tripartite arrangement involving the Trusts, Practice Learning Partners and the University. This was reviewed biennially and where required, more often.
- The respective roles of the link lecturer and practice assessor worked well together – no issues have arisen in this respect.
- Students were regarded in the practice learning sites as supernumerary and were not counted in ward numbers.

6   MEETING WITH SERVICE USERS AND CARERS (Chaired by Mr P Stephenson, NMC Lay Visitor)

The following is a summary of responses to issues raised.

- Encouraged to develop their own peer group.
- Welcomed the opportunity to become involved in development of the programmes.

- Opportunities will arise in the future for more involvement, including the opportunity to speak to students.
- Currently looking at ways to become involved in modules.
- Not currently involved in recruitment and selection but encouraged to develop ideas that might be useful in ensuring the right questions are being asked of applicants.
- Not currently involved in teaching delivery.
- Training in their role to be made available – all keen to undertake training and become more involved where possible.

7   MEETING WITH STUDENTS (Chaired by Mr P Stephenson, NMC Lay Visitor)

- Views sought on the development of the new provision – changes explained to students, and feedback provided.
- Those transitioning to the new programme fully briefed on the mapping of the new to the existing programme. Satisfied that any 'gaps' would be addressed, and students not disadvantaged. Overriding feeling was that the new provision was an improvement with summative assessment of preparatory work in the new programme particularly welcomed.
- Staff support for students "very good". Examples provided of how staff had responded positively to difficult personal circumstances.
- Fully aware of how to raise and escalate concerns while on placement.
- Multiple assessments in a module allowed work not previously accredited to be summatively assessed - welcomed. Provided reassurance around the level of learning achieved.
- Students on placement were treated as supernumerary. If an issue arose, there was confidence in how to raise a concern and that support from the University would be forthcoming.
- Service users had been brought in to speak to students which was welcomed. Hearing real life stories had a powerful impact. Also, the University facilitated a mental health conference every year when students were encouraged to speak to service users and carers. The same opportunity was available on placement.
- Regardless of the programme, experience was gained in different fields of practice.
- While cohort sizes were large, normally tutorials comprised 50 students which was manageable. Students self-conscious about speaking in large groups could turn to peers or class representative for help. Additionally, they can ask questions at the end of the session or through the Blackboard Learn VLE. In skills sessions, the groups were further sub-divided into groups of 25 and then smaller groups of 4 to 5 ensuring that everyone was able to develop their skills. Lectures can involve up to 250 students.
- Studies Advisers meet with students at least once per semester.
- Students were allocated practice sites as close to home as possible. Generally satisfied with the allocation process. Furthest in terms of time quoted, 1 hour 45 minutes. Accommodation was available for those farther from home who did not wish to travel.

8   CONCLUSIONS

The panel commended the Subject Team on the following.

- Strong and meaningful communication with a wide range of stakeholders generating a real sense of partnership, particularly in relation to the practice element of the provision.

- Evidence of a highly committed and supportive subject team and their effective engagement with large cohorts of students each year.

- Pre-entry student self-assessment of their digital capability.

- Positive student feedback on the range of mechanisms in place to facilitate their voice being heard outside the classroom.

Dr Mason, the NMC Registrant Visitor, reported that the programmes would be recommended to the NMC for approval subject to the following recommendations:

i)   The University should consider providing a flowchart to demonstrate the opportunities students have for engagement in governance throughout their programme and to give feedback on the quality of all aspects of their support and supervision in both theory and practice. (SFNME, 3.18)

ii)   The University should develop a strategic plan to demonstrate how services users can become more engaged in student selection and the delivery, assessment and evaluation of the programme. (SFNME R1.12, R2.7 and SPRNP R2.1)

iii)   The University should consider how newly appointed academic staff will be supported to develop the skills and knowledge needed for the academic assessor role to meet increased requirements as student numbers increase. (SFNME R3.8 and SPRNP R4.2)

iv)   The AEI should consider how the current resource base supporting the provision and future needs as the student numbers continue to grow. (University recommendation)

The Panel agreed to recommend to the Academic Standards and Quality Enhancement Committee that the programmes be approved for a period of five years (intakes 2020/21 to 2024/25 inclusive) subject to the conditions and recommendations of the Panel being addressed and a satisfactory response and a revised submission being forwarded to the Academic Office **by 8 May 2020** for approval by the Chair of the Panel.

Ulster Panel

Conditions

i)   That all issues identified by the Academic Office detailed in the appendix to the panel report be addressed.

ii)   That the programme level learning outcome descriptors in the respective programme specifications be revised to demonstrate differentiation between the programmes.

iii)   That further clarification be provided regarding the overall assessment strategy for awarding of credit to, and summative assessment of, preparatory work undertaken

by students prior to the final summative assessment (particularly in terms of how this supports the students).

<u>Recommendation</u>

i) That, as the student numbers continue to grow, the current resource base supporting the provision and any further needs, including for example, the number and availability of academic assessors that may be required be kept under review.

8   APPRECIATION

The Chair thanked the Panel members and, in particular, the external panel members and the NMC representatives for their valuable contribution to the revalidation process.

BMcA/panel report/21.4.20

Nursing and Midwifery Council - Pre-registration Nursing Final Approval Report

Registrant Visitor: Dr. Liz Mason   Lay Visitor: Mr Phil Stephenson

Summary of review and findings

The University of Ulster (UU) at Jordanstown is an established approved education institution (AEI). The school of Nursing and Midwifery (the School) at the Magee campus delivers adult and mental health pre-registration nursing programmes and a range of post-graduate specialist programmes in nursing and allied health. The Faculty presented programme documentation for approval of routes in the adult and mental health nursing fields. The following awards for pre-registration nursing, BSc (Hons) Nursing (Adult) and BSc (Hons) Nursing (Mental Health) were presented for approval.

The programme is proposed for delivery from September 2020.

The approval visit was undertaken at a distance.

The programme documentation and discussion during the approval visit demonstrate collaborative working to support a partnership approach between the AEI and their PLPs to manage practice learning and mitigate any risks to student learning whilst in the practice environment.

Documentation and evidence from the approval visit confirms partnership working is strong at operational and strategic levels for the delivery of health care programmes. There is evidence of co-production with the School for curriculum development; service users are involved in the development, delivery and assessment of the programme. Students told us they were consulted on the development of the new programmes and the processes of transfer to the new curriculum and the Standards for student supervision and assessment (SSSA) (NMC 2018).

The Northern Ireland practice assessment document (NIPAD) has been co-produced in collaboration with the two other AEIs, PLPs, service users and current students. This collaborative group has co-produced a framework for practice learning, student supervision and assessment for all three AEIs in Northern Ireland. There's evidence of a shared approach to the preparation of practice supervisors, practice assessors and academic assessors across the partnership with PLPs.

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

The Standards framework for nursing and midwifery education (SFNME) is met at programme level.

The programme is recommended to the NMC for approval subject to three University conditions. The NMC made three recommendations. The University made one recommendation.

Recommended outcome of the approval panel

Programme is recommended for approval subject to specific conditions.

Education governance: management and quality assurance

Condition one: All issues identified by the Academic Office detailed in the appendix to the panel report to be addressed.

Condition two: Amend the descriptors in learning outcomes in the respective programme specifications to demonstrate differentiation between the programme levels. (University condition)

Condition three: Provide clarification of the assessment strategy for awarding of credit to, and summative assessment of, preparatory work undertaken by students prior to the final summative assessment. (University condition)

Date Conditions to be met: 08/05/2020

Recommendations to enhance the programme delivery:

Recommendation one: The University should develop a strategic plan to demonstrate how services users can become more engaged in student selection and the delivery, assessment and evaluation of the programme. (SFNME R1.12, R2.7 and SPRNP R2.1)

Recommendation two: The University should consider providing a flowchart to demonstrate the opportunities students have for engagement in governance throughout their programme and to give feedback on the quality of all aspects of their support and supervision in both theory and practice. (SFNME, 3.18)

Recommendation three: The University should consider how newly appointed academic staff will be supported to develop the skills and knowledge needed for the academic assessor role to meet increased requirements as student numbers increase. (SFNME R3.8 and SPRNP R4.2)

Recommendation four: The AEI should consider how the current resource base supports provision and future needs as the student numbers continue to grow. (university recommendation)

Focused areas for future monitoring:

The development of service user engagement in student selection, and the development, delivery, assessment and evaluation of the programme.

Partnerships

Provide an evaluative summary about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders

The senior and programme team tell us there's been a strategic regional approach to co-produce the programme presented for approval. The documents provided and discussion during the approval visit provide assurance of this. UU is a member of the Northern Ireland (NI) practice learning collaborative with two other AEIs. This collaborative arrangement has an agreed regional approach to ensure standards and quality in both academic and practice components of nursing programmes in NI are maintained. A regional project officer manages the future nurse and future midwife development to ensure consistency in collaboration between PLPs, the university and other stakeholders. During the approval visit, the senior team tell us how local steering and workflow groups were involved in designing the curriculum, the practice placement flows and implementation of the SSSA. The PLPs say there's shared responsibility for quality assurance of practice learning. The senior team and PLPs tell us of the regular strategic and operational meetings with directors of nursing and the university, and related sub-groups for workforce planning and the annual monitoring group to ensure the quality of practice learning.

The regional and local steering and workgroups provide evidence of robust partnership working with key stakeholders. Implementation of the SSSA is well organised and PLPs confirm practice supervisors and practice assessors are prepared in collaboration with academic staff from the universities in NI. PLPs confirm they attend stakeholder events and working groups relating to the proposed programme. The working groups form part of the co-production. PLPs tell us they are able to contribute to developing the programme and the SSSA through workshops and co-production meetings. They tell us they can ask questions, present ideas and feel fully involved in the processes of developing and implementing the programmes.

Regional practice assessment documents have been developed through the NI practice learning collaborative and steering groups. This includes the NIPAD and NIPAD practice learning handbook along with other guidance documents to support the implementation of the SSSA (NMC, 2018). The regional transition process for implementing the SSSA has been effective, newsletters and seminars have been provided for PLPs for regular updates. The university has provided education and training for new and existing mentors for the practice supervisor and practice assessor roles. The university also has e-learning packages to support PLPs in preparation for the SSSA. The practice educator facilitator and link lecturer role will stay in place to support practice learning and to support partnership working with PLPs. The programme team tell us academic staff are being provided with support to develop their skills for the academic assessor role. The academic assessor will be linked to geographical areas and in placement areas related to their clinical interest.

Partnership working is robust and effective at strategic and operational levels for delivery of the programme. Documentary analysis and discussion at the approval visit provide evidence of shared responsibility for theory and practice learning, student recruitment and supervision and assessment with PLPs. Clear lines of communication and accountability for the quality assurance, development, delivery and evaluation of the nursing programme is assured. This includes using clinical experts to deliver specialist teaching to students and participate in the assessment of students during objective structured clinical examinations (OSCEs). Partnership meetings and practice education facilitator meetings are held regularly throughout the year to review and provide feedback on student practice learning experiences. The NI model for reporting students' concerns about practice

learning is used to review their experiences and there's a shared flow chart to enable students to raise concerns and seek support.

Service users contribute to partnership working through the 'people engagement in education and research' (PEER) group. Service users, as part of PEER, meet three times a year and have opportunities to attend training on equality and diversity, the NMC standards, and changes to practice learning assessment. The service users tell us of their contributions and experiences of being involved in programme development and how they felt part of co-constructing the programme.

The service users tell us their contribution to the programme is valued and they feel well supported in the various activities they undertake. The PEER group are involved in student selection as they review interview questions and personal statements scoring criteria. They provide feedback on applications from potential students, but service users are not actively engaged in the selection interviews. They also tell us how much they welcome being part of the teaching and learning activities. Service users feedback on programme delivery and are excited at the prospect of being more involved in the teaching and assessment of students as well as other aspects of the programme (recommendation one). The students from both fields tell us how learning with a service user through patient stories about compassion and caring has left a lasting impression.

Partnership working with service users, PLPs and students is also evidenced by what students tell us about the annual student mental health conference. Students tell us about their learning with and from others, as they can hear about patient experiences from services users and carers.

Students tell us they've played an active role in developing the new programme and feel their feedback is valued and used by the university. There have been several formal and informal meetings arranged to facilitate this. Students tell us of the sessions on the development of the curriculum, how it will change ways of working, and the engagement of the university in exploring how they feel about the changes. They tell us the feedback they provide is implemented into the new programme, including changes to the assessment structure, use of workshops and role play.

Students tell us they feel well supported by the university and during practice learning by clinical link tutors and practice education facilitators. They tell us they have regular meetings with personal tutors, receive verbal feedback from lecturers and written feedback for summative assessments. The university has student support teams and students tell us they receive support for reasonable adjustment for individual needs to complete practice learning and support for additional learning needs such as dyslexia. While students tell us they feel listened to and receive feedback in different forms, some students are unsure how they can become involved in formal meetings and staff student meetings. The university has a system for student representation and engagement in governance; the students tell us they aren't familiar with this opportunity to provide feedback. It is recommended the university provide a flow chart to demonstrate opportunities for students to engagement in the governance of their programme and give feedback on the quality of their support and supervision in theory and practice learning (recommendation two).

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 1: *__Standards framework for nursing and midwifery education__*
Met

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 2: *__Standards for student supervision and assessment__*
Met

Standard 1. Selection, admission and progression

Evidence provides assurance that the following QA approval criteria are met
Evidence that selection processes ensure entrants onto the programme are suitable for the intended field of nursing practice and demonstrate values and have capability to learn behaviours in accordance with the Code. Evidence of service users and practitioners involvement in selection processes. (R1.1.1, R1.1.2, R1.1.3)
Yes
Evidence of selection processes, including statements on digital literacy, literacy, numeracy, values based selection criteria, educational entry standard required, and progression and assessment strategy, English language proficiency criteria specified in recruitment processes (R1.1.4 – R1.1.7)
Yes
There is evidence of occupational health entry criteria, inoculation and immunisation plans, fitness for nursing assessments, Criminal record checks and fitness for practice processes detailed (R1.2
Yes
Health and character processes are evidenced including information given to applicants and students, including details of periodic health and character review timescales. Fitness for practice processes evidenced and information given to applicants and students are detailed (R1.3)
Yes
Processes are in place for providing supporting declarations by a registered nurse responsible for directing the educational programme (R1.4)
Yes

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met
Evidence of recognition of prior learning processes, mapped against programme outcomes at all levels and against academic levels of the programme up to a maximum of 50 percent of the programme and comply with Article 31(3) of Directive 2005/36/EC (R1.5)
Met

R1.5 is met: Current university policies allow recognition of prior learning (RPL) which may exempt candidates for modules up to a maximum of 33 percent of the programme. Submissions for RPL are reviewed by two members of academic staff within the school and then considered at the RPL board. An external examiner is appointed to oversee the RPL process. The RPL mapping documents indicate a robust process for reviewing prior learning

and are mapped to the module and programme outcomes and Standards of proficiency for registered nurses (NMC 2018).

Evidence that for NMC registered nurses recognition of prior learning is capable of being mapped to the *Standards of proficiency for registered nurses* and programme outcomes (R1.6)
Met

R1.6 is met. RPL mapping against the programme outcomes and the NMC (2018) Standards of proficiency for registered nurses (SPRN) is evidenced. NMC registered nurses who apply for entry to the programme for a different field of nursing will have their prior learning mapped to the SPRN and programme outcomes that may be more than 50 percent. The mapping tools developed for this process provide assurance. The university regulations permit RPL for up to 66 percent of the programme for NMC registered nurses.

Numeracy, literacy, digital and technological literacy mapped against proficiency standards and programme outcomes. Provide evidence that the programme meets NMC requirements, mapping how the indicative content meets the proficiencies and programme outcomes.

Ongoing achievement record (OAR) and practice assessment document (PAD) are linked to competence outcomes in numeracy, literacy, digital and technological literacy to meet programme outcomes Detail support strategies for students throughout the programme in continuously developing their abilities in numeracy, literacy, digital and technological literacy to meet programme outcomes (R1.7)
Met

R1.7 is met: The evidence and discussion with the programme team and students during the approval visit demonstrates support structures are in place for students within the university and the school for numeracy, literacy, digital and technological literacy. Students told us they feel well supported by the university and able to access any support needed to develop their skills. An induction programme includes study advice and techniques, academic writing and plagiarism, introduction to blackboard learn (BBL), information technology and a library induction. Students on entry to the programme assess their information and communications technology (ICT) capability using the on-line joint information systems committee (JISC) discovery tool. This helps inform the support required to enable students to develop their digital skills. Students are provided with an introduction to BBL the virtual learning environment (VLE) used by the school to support learning, and the use of digital technology to support learning. BBL has a bespoke induction programme that guides students through its use.

The university recognises some students require additional input and support to develop competence, confidence and proficiency in the use of ICT. The library provides services to support students and facilitate access to journals, books and e-resources. Students access a range of digital technologies in addition to BBL that includes studiosity, turnitin, nearpod and blackboard collaborate. Studiosity is an online service where students receive feedback on their academic writing style, referencing and grammar. Student induction continues throughout the academic year. Students can access additional support for numeracy, literacy, digital and technological literacy from a range of sources such as the library, information services department (ISD), student support and their adviser of

studies. The adviser of studies offers support and guidance such as academic writing, referencing and programme regulations.

Evidence provides assurance that the following QA approval criteria are met:
Evidence of processes to ensure that all those enrolled on pre-registration nursing programmes are compliant with Directive 2005/36/EC regarding general education length (R1.8)
Yes

Proposed transfer of current students to the programme under review
From your documentary analysis and your meeting with students, provide an evaluative summary to confirm how the *Standards for pre-registration nursing programmes* and *Standards of proficiency for registered nurses* will be met through the transfer of existing students onto the proposed programme

There is evidence that current students learning in theory and practice is mapped to the programme standards and *Standards of proficiency for registered nurses* and support systems are in place
Met

PLP partnership meetings demonstrates the development of a regional agreement in NI for each AEI to transfer students to their new programme. Students tell us they attended sessions explaining the changes to the curriculum, participated in curriculum development activities as well as engaging in polls and surveys. Evidence of consultation indicates a consent form was sent to all students in this cohort explaining the transfer plan to the new programme. The students told us about their participation in the consultation processes and their ability to provide feedback and ask questions about transfer processes for theory and to the SSSA. Students tell us they understand the new roles and the support for assessment of learning provided by practice supervisors and practice assessors.

Year one students on the existing programme will transfer into year two of the new programme in Sept 2020. The programme team tell us of the mapping undertaken to support the transfer of existing students to the new programme. This is assured by the mapping tool for transfer to year two of the proposed programme. This assures the Standards for pre-registration nursing programmes and Standards of proficiency for registered nurses will be met.

Evidence that for NMC registered nurses recognition of prior learning is capable of being mapped to the *Standards of proficiency for registered nurses* and programme outcomes
Met

RPL mapping against the programme outcomes and the NMC (2018) Standards of proficiency for registered nurses (SPRN) is evidenced. NMC registered nurses who apply for entry to the programme for a different field of nursing will have their prior learning mapped to the SPRN and programme outcomes that may be more than 50 percent. The mapping tools developed for this process provide assurance. The university regulations permit RPL for up to 66 percent of the programme for NMC registered nurses.

Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to selection, admission and progression are met

Yes

Outcome
Is the Standard met?
Met

Standard 2. Curriculum

Evidence provides assurance that the following QA approval criteria are met

There is evidence that the programme complies with the NMC *Standards for nursing and midwifery education* (R2.1)
Yes

There is evidence that the programme complies with the NMC *Standards for student supervision and assessment* (R2.2)
Yes

Mapping to show how the curriculum and practice learning content reflect the *Standards of proficiency for registered nurses* and each of the four fields of nursing practice: adult, mental health, learning disabilities and children's nursing (R2.3)
Yes

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

There is evidence to show how the design and delivery of the programme will support students in both theory and practice to experience across all four fields of nursing practice: adult, mental health, learning disabilities and children's nursing (R2.4)
Met

R2.4 is met: Documentary evidence and the approval visit show how the design and delivery of the programme supports students to gain experience in all four fields of nursing. The programme mapping document and the NIPAD demonstrate how theory and practice learning experiences map to proficiencies and module content. Mapping of each field of nursing practice against the proficiencies confirms there will be experience and exposure to all four fields of nursing in theory and practice. The programme team and documents provide examples of a student journey through the routes in mental health and adult nursing. Students will participate in shared and field modules and will develop their field identify during field specific modules. The programme team tell us in theory modules clinical experts in child and adolescent mental health services (CAHMS), learning disabilities and the child field provide taught sessions and workshop events. The students tell us they value the input from clinical experts and service users.

The programme handbook and planners indicate practice learning experiences planned across the three years cover all four fields of nursing. The NIPAD provides learning opportunities for the students across the four fields of practice. The documentary evidence demonstrates students complete learning experiences in child-centred care and supporting people with a learning disability. This is evidenced within relevant worksheets completed by students to support learning for the four fields of nursing. Adult field students undertake practice experiences in mental health and learning disabilities, and gain experience with children and young people. Mental health field students undertake practice experiences in

learning disability and adult and gain experience with children and young people. Evidence of learning is included within the student's NIPAD. Students share practice learning placements across both mental health and adult nursing fields. A hub and spoke model of practice learning is used. A diverse range of practice learning environments are used, and students document their experiences of spoke practice placements in the NIPAD. When allocating students for practice learning, the university streams students according to their postcode. There are six placement learning streams, and each has a specific learning circuit the student will follow for three years. All students share the same experiences although not in the same order.

Evidence that programme structure/design/delivery will illustrate specific fields of practice that allows students to enter the register in one or more specific fields of nursing practice. Evidence of field specific learning outcomes and content in the module descriptors (R2.5)
Met

R2.5 is met: The documentation demonstrates that successful completion of the programme enables students to be awarded a BSc (Hons) nursing, in either adult or mental health. Successful completion of the programme confers eligibility to apply for registration with the NMC as a registered nurse in their field of practice.

Evidence provides assurance that the following QA approval criteria are met
There is evidence that mapping has been undertaken to show that the programme meets NMC requirements of the *Standards of proficiency for registered nurses* (R2.6)
Yes
There is evidence that mapping has been undertaken to set out the content necessary to meet the programme outcomes for each field of nursing practice: adult, mental health, learning disabilities and children's nursing (R2.7)
Yes

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met
There is evidence that mapping has been undertaken to ensure that field specific content in relation to the law, safeguarding, consent, pharmacology and medicines administration and optimisation is included for entry to the register in one or more fields of nursing practice (R2.8)
Met

R2.8 is met: The programme specification and module descriptors demonstrate field specific content in relation to the law, safeguarding, consent, pharmacology and medicines administration and optimisation is included within the programme.

The programme structure demonstrates an equal balance of theory and practice learning. This is detailed in the designated hours in the module descriptors and practice learning allocations. A range of learning and teaching strategies are detailed in the programme specification, programme handbook and module descriptors with theory / practice balance detailed at each part of the programme and at end point. There are appropriate module aims, descriptors and outcomes specified. There is a practice allocation model for the delivery of the programme that clearly demonstrates the achievement of designated hours for the programme detailed. (R2.9)

Met

R2.9 is met: Programme structure demonstrates an equal balance of theory and practice learning. Module specifications outline the range of teaching and learning strategies used, with appropriate aims and outcomes stated. Both routes of the programme contain the required number of theory and practice learning hours. There's a variety of assessments used including poster presentations, oral examination, written examinations, written work, OSCE's and observed practice. Students are provided with a programme planner that demonstrates the structure of theory and practice learning. Practice learning hours are documented in the NIPAD and monitored by the PLPs and the university. Simulated learning is central to the programme but not included in practice learning hours. The university has a sickness and absence reporting policy for students to follow. The expectation for student attendance for theory and practice learning is assured in programme documents. Any deficit in practice hours are achieved as make up time by the student in agreement with the university and PLPs. Students must submit evidence to their year head or programme director to demonstrate achievement of learning outcomes for any theory time they have missed during the academic year.

Evidence provides assurance that the following QA approval criteria are met
Evidence to ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language (R2.10)
N/A

The programme is not delivered in Wales.

Evidence that the programme outcomes are mapped to the content for nurses responsible for general care and will ensure successful students met the registration requirement for entry to the register in the adult field of practice (R2.11)
Yes
Evidence that the pre-registration nursing programme will meet the equivalent of minimum programme length for nurses responsible for general care in Article 31(3) of Directive 2005/36/EC (R2.12)
Yes
Evidence that programmes leading to registration in two fields of nursing practice are of suitable length to ensure proficiency in both fields of nursing (R2.13)
Yes
Evidence to ensure that programmes leading to nursing registration and registration in another profession, will be of suitable length and nursing proficiencies and outcomes will be achieved in a nursing context (R2.14)
Yes

Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to curricula and assessment are met
Yes

Assurance is provided that Gateway 2: *Standards for student supervision and assessment* relevant to curricula and assessment are met
Yes
Outcome
Is the Standard met?
Met

Standard 3. Practice learning

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

Evidence that the practice learning opportunities allow students to develop and meet the *Standards of proficiency for registered nurses* to deliver safe and effective care, to a diverse range of people, across the four fields of nursing practice: adult, mental health, learning disabilities and children's nursing (R3.1)
Met

R3.1 is met: There's evidence in programme documentation and the NIPAD to give assurance that students will develop both practical and theoretical skills to deliver safe and effective care and meet the diverse needs of people. Students told us about their placement experiences and how these contribute to their understanding of providing care to people across the four fields of nursing. Regionally agreed practice learning profiles have been established to support the range of practice learning experiences required for each field of nursing practice. This is managed through the in-place programme, which is an electronic system used to manage and record the allocation of practice learning placements for individual students. There's a well-developed approach to ensuring students have meaningful learning experiences of the four fields of nursing. There are additional learning outcomes, competencies and proficiencies for field specific learning in the NIPAD for the spoke placements students undertake in the other nursing fields. The streaming of student groups for practice learning ensures learning journeys cover all four fields of nursing practice. Student journeys and a mapping document confirm that adult nursing students will meet the EU directive 2005/36/EU, annexe V2 clinical instruction element for general nursing in practice learning experiences.

There is evidence of how the programme will ensure students experience the variety of practice learning experiences to meet the holistic needs of people in all ages. There are appropriate processes for assessing, monitoring and evaluating these practice experiences (R3.2)
Met

R3.2 is met: The documents provided evidence that students have the opportunity to gain practice learning experiences with people across the lifespan in public health, community and hospital addressing mental, physical and social health needs. The programme documents for adult and mental health detail the range of practice experiences provided for students. Student allocations are mapped on in-place to the programme requirements. This ensures students experience a range of practice learning to gain understanding of providing holistic care for people of all ages. A regional approach provides an agreed process of assessing, monitoring and evaluating practice learning experiences using the practice placement audit tool and student placement learning evaluations which have been co-produced for use by the three AEIs in NI. The NI regional audit tool evidences the capacity, facilities and resources available in each practice learning environment to deliver safe and effective learning opportunities and practical experience for students to meet their learning outcomes.
In practice learning, students work a 37.5-hour week with shift pattern determined by the practice area. This allows students to experience the 24/7 hours of the care cycle.

Reasonable adjustment is permitted in certain circumstances for shift patterns; the requirement for 2,330 hours practice learning stands and is not subject to reasonable adjustments. Students record all practice learning hours in the NIPAD.

Evidence that the practice learning opportunities allow students to meet the communication and relationship management skills and nursing procedures, as set out in the *Standards of proficiency for registered nurses*, within their selected fields of nursing practice: adult, mental health, learning disabilities and children's nursing (R3.3)
Met

R3.3 is met: The programme documents indicate practice learning opportunities are identified. The range of experiences will support students' development of skills to work with people across the lifespan and different levels of abilities and needs. The practice learning opportunities also support students to gain skills in inter-professional and inter-agency team working. The programme team tell us students will work with a range of health professionals during practice learning. Students are required to evidence learning in relation to communication and relationship management skills and nursing procedures specific to each part and across all parts of the programme.

PLPs confirm organisation policies are changed to permit students to undertake procedures set out in the Standards of proficiency for registered nurses. The PLPs tell us they are ready to support students through the SSSA to gain learning opportunities and proficiency with the extended procedures in annexe B. Programme mapping documents provide evidence to support the provision of practice learning opportunities allowing students to develop and meet communication and relationship management skills and nursing procedures within their selected field of practice. The NIPAD is mapped to the Standards of proficiency for registered nurses and annexe A which focuses on communication and interpersonal relationship skills. The nursing procedures in annex B are included and modules are mapped to the NIPAD. Clinical skills teaching is provided to meet the increasing level of skills required during the programme.

Evidence to ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment and pre-registration nursing programmes leading to registration in the adult field of practice comply with Article 31(5) of Directive 2005/36/EC (R3.4)
Met

3.4 is met. The programme uses a wide variety of teaching and learning methods including simulation-based and technology enhanced learning. The university has invested financially in developing its provision of simulation resources for teaching clinical skills across all health programme. The programme team tell us low and high-fidelity simulation is used for teaching clinical skills to prepare students for practice learning and the extended nursing procedures. Simulation activities are adaptive and range in complexity from practicing communication and essential skills to more complex decision making and management simulations. Technology enhanced and simulation-based learning opportunities are effective and proportionate.

For the adult field, learning opportunities comply with Article 31 (5) of Directive 2005/36/EC. Service users take part in simulation-based learning and assessment and tell us they're prepared for this through the PEER group training. The students tell us they

find the clinical skills teaching to be very useful in developing their skills and confidence prior to practice placement learning. The programme team and students tell us high fidelity simulation with technical equipment or low fidelity simulation using care scenarios with service users provides additional ways to support the development of clinical, communication skills as well as the opportunity to apply theoretical knowledge to practice.

Students tell us they're involved in a major simulated leadership exercise at their appropriate level. Year one and two students participate as casualty actors and year three students are involved in leadership roles in this exercise. This allows students to learn with and from each other in a safe environment and the students tell us they value the learning from this simulated experience. The programme team tell us this ensures students can apply nursing values to leadership in rapidly changing situations, for example major incident reporting and organisational planning for major incidents. This exercise is provided in response to a major event or series of events involving a range of inter-professional and inter-agency voluntary and statutory services where scenarios are modelled on real life events. Medical equipment, devices and radio-communications are used by students during the exercise.

There are processes in place to take account of students' individual needs and personal circumstances when allocating their practice learning including making reasonable adjustments for disabilities (R3.5)
Met

R3.5 is met: The documentary evidence indicates the university has a process for the identification and management of reasonable adjustment in practice learning where this is necessary. This process was developed with student support and disability services within the university and is agreed with PLPs.

Where reasonable adjustments are required, the consent of the student is gained to share information and an agreed plan of support is put in place to meet the student's specific requirements prior to the start of practice learning opportunities. Information on applying reasonable adjustment is provided within the NIPAD practice learning handbook and programme handbooks.

The programme documents evidence a process for making an application for consideration of mitigating circumstances is in place to take account of students' individual needs and personal circumstances when allocating their practice learning.

There are well-established support structures in place for students at the university. Academic and pastoral support includes access to a personal advisor of studies, a programme director and year tutor. In addition, each student is allocated a link lecturer (an academic member of staff) when on practice learning experiences. Students with individual needs and personal circumstances in the practice learning environment can access support through the link lecturer. The student handbook signposts students to a range of services for issues around health and well-being, finance, disabilities, medical conditions and counselling.

Evidence provides assurance that the following QA approval criteria are met

Evidence of how programme is planned to allow for students to experience the range of hours expected of registered nurses (e.g. 24 hour care, seven days night shifts planned examples) (R3.6)
Yes
Processes are in place to ensure that students are supernumerary (R3.7)
Yes

Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to practice learning are met
Yes

Assurance is provided that Gateway 2: *Standards for student supervision and assessment* relevant to practice learning are met
Yes
Outcome
Is the Standard met?
Met

Standard 4. Supervision and assessment

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met
There is evidence of how the programme will ensure how support, supervision, learning and assessment provided complies with the *NMC Standards framework for nursing and midwifery education*. (R4.1)
Met

R4.1 is met: Programme documentation and the approval process confirm compliance with the NMC Standards framework for nursing and midwifery education. The NI regional placement agreements outline a partnership approach between the university and PLPs with shared responsibility for theory and practice supervision, learning and assessment. PLPs tell us they participated in the development of the NIPAD and the SSSA implementation strategy. They attend meetings for student supervision and assessment to ensure consistency across different practice learning environments. The PLPs demonstrate collaborative working with the university for the development, delivery, quality assurance and evaluation of the programme. We found PLPs recognise the opportunities the new NMC standards offer and view the SSSA as an opportunity to enhance practice learning experiences for students. There's documentary evidence of how practice supervisors will have sufficient opportunities to engage with practice assessors and academic assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising.

Students told us they're aware of the complaints procedures and know how to access practice and academic staff to escalate any concerns. The programme handbooks identify that students learning within the practice learning environment is protected and as such they are supernumerary. Students we met confirmed their supernumerary status and protected learning time during their practice learning experiences and tell us they feel able to speak with a person from the PLP or academic team if they feel their supernumerary status is not being respected. Senior nurses, practice education staff and practice

assessors and supervisors tell us all students undertaking the pre-registration nursing programme have protected supernumerary practice learning time.

There is evidence of how the *Standards for student supervision and assessment* are applied to the programme. There are processes in place to identify the supervisors and assessors along with how they will be prepared for their roles. (R4.2)
Met

R4.2 is met: The NI regional agreement includes a coordinated approach for the implementation of the SSSA. The transition plan outlines processes to transfer to the SSSA including communication plans with PLPs and students. Factsheets and newsletters provide information about the changes to student supervision and assessment. A practice supervisor and practice assessor handbook are presented with the programme documents and this outlines the roles and responsibilities of practice supervisors, practice assessors and academic assessors. The programme team tell us PLPs identify staff who have the appropriate skills to become practice supervisors and practice assessors. Practice supervisor, practice assessor and academic assessor preparation is monitored through partnership meetings and evaluated through feedback via link lecturers and students. Ongoing support is provided to practice supervisors and practice assessors via a practice support website and e-learning packages. PLPs keep a database of practice supervisors and assessors who are allocated to students. Senior nurses, practice education staff and the programme team tell us there's sufficient training and education and on-going support in place to ensure practice supervisors and practice assessors are fully prepared to undertake their roles. PLPs tell us they understand these roles and the requirements to meet the new NMC Standards. PLPs confirm they're reviewing processes to ensure all standards and requirements are met.

The role of the academic assessor is clearly explained in programme documentation. All academic assessors are registered nurses who have met the required professional development and revalidation requirements for their role. These requirements are monitored and recorded via the university's annual professional development appraisal system. With the recruitment of new academic staff and increase in student numbers, it is recommended the university plan how newly appointed academics will be supported to develop the skills and knowledge needed for the academic assessor role (recommendation three).

Communication and collaboration between practice and academic assessors is scheduled for relevant points in the programme. Communication will occur in person, by phone or electronically. The in-place placement allocation system will ensure a student has a different academic assessor for each part of the programme.

Evidence provides assurance that the following QA approval criteria are met
There are processes in place to ensure the NMC is informed of the name of the registered nurse responsible for directing the education programme (R4.3)
Yes

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

There are processes in place to provide students with feedback throughout the programme to support their development. Formative and summative assessment strategy is detailed (R4.4)
Met

R4.4 is met: The documentary evidence demonstrates a robust process to the provision of feedback. The universities learning and teaching strategy clearly identifies feedback to students as a key component to successful progression and achievement. Documentary analysis identifies students receive feedback from a range of professionals, including PLPs, personal tutors and academic staff. This demonstrates students receive feedback during practice learning at specific points to include a progress review and final discussion. Students are provided with opportunities for formative and summative assessment and the provision of feedback. The tripartite formative assessment involves the link lecturer, the student and practice assessor, it is completed midway through the practice learning experience and recorded in the NIPAD. This provides feedback to students on practice performance to that point to enable them to progress. The practice supervisor and practice assessor record feedback on the student within the relevant NIPAD. There's a support mechanism for action planning in the NIPAD. Students who've not achieved the required level of proficiency during a practice learning period are provided with an action plan which is developed by the practice supervisor and the practice assessor in partnership with the student to guide future learning needs. Students receive written feedback recorded in the NIPAD from a range of people including service users (including families and carers), practice supervisors, practice assessors, link lecturers, academic assessors and other health care professions whom they meet in practice. This enables students to demonstrate the way in which they communicate and work with patients, families and other health professionals to provide care.

Programme documentation evidences students are expected to reflect on feedback and link to their wider learning objectives. There's an expectation for students to actively engage in reflective dialogue with those who are supervising and assessing them in practice. The weekly learning log in the NIPAD requires students to record their learning, analyse challenges and determine their focus for future practice learning opportunities.

Formative and peer feedback are embedded throughout the programme and in each of the modules to enable students to self-reflect on their development and identify areas that need further development and recognise their strengths. Other opportunities for students to receive feedback includes the student's reflection on their development. An area of good practice is the consolidation period at the end of each part of the programme that offers students time to reflect with peers and academic staff on their development across the year.

There is appropriate mapping of the curriculum and practice learning placements to ensure throughout the programme that students meet the *Standards of proficiency for registered nurses* and programme outcomes for their fields of nursing practice: adult, mental health, learning disabilities and children's nursing (R4.5)
Met

R4.5 is met. Mapping documents for the adult and mental health routes provide assurance the content of the programme and practice learning experiences enable students to meet the Standards of proficiency for registered nurses. The evidence presented indicates that

for each part of the programme students are assessed against criteria within the NIPAD to evidence their achievement of the proficiencies for their field of nursing practice.

The assessment strategy detailed within the NIPAD handbook and programme document is provided to ensure students are assessed appropriately to determine if they have met the required proficiencies for their field of practice. The programme regulations require students to pass theoretical modules with a pass mark of at least 40 percent and practice learning modules with a pass (evidencing achievement of proficiencies within the NIPAD) before they can progress to the next part of the programme.

Evidence provides assurance that the following QA approval criteria are met
There is evidence that all programmes include a health numeracy assessment related to nursing proficiencies and calculation of medicines which must be passed with a score of 100 percent (R4.6)
Yes
Processes are in place to ensure that students meet all communication and relationship management skills and nursing procedures within their fields of nursing practice: adult, mental health, learning disabilities and children's nursing (R4.7)
Yes
Evidence of processes to assess students to confirm proficiency in preparation for professional practice as a registered nurse (R4.8)
Yes
There is an assessment strategy with details and weighting expressed for all credit bearing assessments. Theory and practice weighting is calculated and detailed in award criteria and programme handbooks (R4.9)

Yes

There is evidence that all proficiencies are recorded in an ongoing record of achievement which must demonstrate the achievement of proficiencies and skills as set out in the *Standards of proficiency for registered nurses* (R4.10)
Yes
Evidence to ensure the knowledge and skills for nurses responsible for general care set out in article 31(6) and the competencies for nurses responsible for general care set out in article 31(7) of Directive 2005/36/EC for pre-registration nursing programmes leading to registration in the adult field of practice have been met (R4.11)
Yes

Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to supervision and assessment are met

Yes

Assurance is provided that Gateway 2: *Standards for student supervision and assessment* are met

Yes
Outcome
Is the Standard met?
Met

Standard 5. Qualification to be awarded

Evidence provides assurance that the following QA approval criteria are met
The pre-registration nursing programme award to be approved is clearly identified in all programme documentation and is a minimum of a bachelor's degree (R5.1)
Yes
Documentary evidence that the registered nurse responsible for directing the educational programme or their designated registered nurse substitute have advised students during and before completion of the requirement to register their qualification within five years of the award. (R5.2)
Yes

Fall Back Award
If there is a fall back exit award with registration as a nurse all NMC standards and proficiencies are met within the award. *Standards framework for nursing and midwifery education* specifically R2.11, R2.20
N/A
A fallback award is not applicable to these programmes.

Assurance is provided that the *Standards framework for nursing and midwifery education* relevant to the qualification to be awarded are met

Yes

Outcome

Is the Standard met?
Met