

**Programme Audit/Major Modification report**

<b>Programme provider:</b>	Cumbria (Lancaster Campus), University of
<b>In partnership with:</b> (Associated practice placement providers involved in the delivery of the programme)	University Hospitals Morecambe Bay NHS Trust North Cumbria University Hospitals NHS Trust
<b>Date of review:</b>	07 Aug 2019
<b>Type of Modification</b>	Desktop
<b>Provision reviewed:</b>	Registered Midwife - 36M
<b>Title of current programme:</b>	BSc (Hons) Midwifery
<b>Title of modified programme if changed:</b>	
<b>Academic level of current programme:</b>	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
<b>Academic level of modified programme if changed:</b>	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
<b>Reviewer:</b>	Hilary Lumsden

Outcome of Approval Panel Meeting	
<b>Outcome:</b>	Recommended for approval
<b>Conditions and NMC standard(s)/requirement(s) they relate to:</b>	<p><b>Resources</b> None identified</p> <p><b>Admission and progression</b> None identified</p> <p><b>Practice learning</b> None identified</p> <p><b>Fitness for practice</b> None identified</p> <p><b>Quality assurance</b> None identified</p>
<b>Date conditions to be met:</b>	
<b>Recommendations and NMC standard(s)/requirement(s) they relate to:</b>  <b>Note: recommendations will be assessed through the AEI annual self-assessment report</b>	The major modification is recommended to the NMC for approval.
<b>Date conditions met:</b>	
<b>Programme start date:</b>	09 Sep 2019

## Summary

### Summary of modification request

The University of Cumbria (UoC) department of health and professional practice is approved to deliver a three-year BSc (Hons) midwifery pre-registration programme since 12 April 2013. There was a minor modification to the programme on 25 September 2015. The university presented documentation for a modification to the approved BSc (Hons) midwifery 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 partner (PLPs) in agreeing and developing the proposed change to the programme. The proposed changes have also been made in collaboration with students and service users. Students have agreed to the transfer to the SSSA. All current pre-registration midwifery student cohorts will transfer to the SSSA from 30 September 2019.

There's robust evidence of effective support mechanisms for students in university and practice learning environments, including preparation for the SSSA. 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 telephone conference was held with the QA visitor, LME, a senior midwifery lecturer and midwifery lecturer on 7 August 2019.

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

Not applicable. Desktop review.

### **Students**

Not applicable. Desktop review.

### **Service users and carers**

Not applicable. Desktop review.

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

None identified

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

None identified

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

None identified

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

None identified

### **Areas for future monitoring**

- The implementation of the SSSA
- Midwifery academic staff numbers are adequate to support increased numbers of students

**Outcome recommendation**

The modification is recommended to the NMC for approval.

**NMC Standards**

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

**Standards for the lead midwife for education**

**Standard 1: Appointment of the lead midwife for education**

The NMC requires an 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 appointment 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:**

The current LME has been in post since 1 March 2016. Her appointment as an LME is confirmed with the NMC. She fulfils a strategic liaison role and leads the proposal for the implementation of the SSSA working in effective collaboration with PLPs.

<b>Outcome:</b>	Standard met
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<b>Date standards met:</b>	
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<b>Revised outcome:</b>	
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<b>Standard 2: Development, delivery and management of midwifery education programmes</b>	
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.	
<b>What we found:</b>	
<p>Documentary evidence and discussion confirms the LME works in partnership with heads of midwifery and members of practice education teams. The changes to the programme have been made in collaboration with practitioners and in consultation with students.</p> <p>Documentary evidence and discussion demonstrates that students have been consulted via an online blog and they have participated in stakeholder meetings about the changes to their programme. Students have been fully informed of the proposed implementation of the SSSA and agree to the changes.</p> <p>Service users worked in partnership with the LME and midwifery programme team in the initial design and development of the programme. There is a maternity voice partnership in the region who have had strong involvement in the SSSA changes to the programme.</p>	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standard 3: Signing the supporting declaration of good health and good character</b>
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In accordance with rule 6(1)(a)(ii) of the registration rules, the LME shall be responsible, at her discretion, for signing the supporting declarations of good health and good character for all midwifery applications to the register.	
<b>What we found:</b>	
Unchanged since original approval on 12 April 2013 and minor modification on 25 September 2015.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standards for admission to, and continued participation in, pre-registration midwifery programmes</b>
<p><b>Age of entry</b></p> <p><b>St. 4</b></p> <p><b>General requirements</b></p> <p>The following requirements for selection should be read and operated alongside programme providers' existing policies and procedures:</p> <p><b>4.1 Selection</b></p> <p>Wherever practicable, the selection process should include a face-to-face meeting.</p> <p>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.</p> <p>All individuals in the selection process should receive appropriate training,</p>



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 on 12 April 2013 and minor modification on 25 September 2015.

#### **Outcome:**

Standard met

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

<b>Standard 5: Interruptions to pre-registration midwifery education programmes</b>	
<p>Programme providers must ensure that they have in place processes to manage interruptions to the study of programmes for whatever reason.</p> <p>When a student returns to a programme it is recommended they have a period of orientation appropriate to the length of interruption. Programme providers must ensure that the student's acquired knowledge and skills remain valid, enabling them to achieve the necessary standards required on completion of the course.</p>	
<b>What we found:</b>	
Unchanged since original approval on 12 April 2013 and minor modification on 25 September 2015.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standard 6: Admission with advanced standing</b>	
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.	
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.	
<b>What we found:</b>	
Unchanged since original approval on 12 April 2013 and minor modification on 25 September 2015.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standard 7: Transfer between approved educational institutions</b>	
It is the responsibility of AElS to decide whether or not to accept an application for transfer.	
<b>What we found:</b>	
Unchanged since original approval on 12 April 2013 and minor modification on 25 September 2015.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standard 8: Stepping off and stepping on to pre-registration midwifery education programmes</b>	
Students can 'step off' a pre-registration midwifery programme of education.	
<b>What we found:</b>	
Unchanged since original approval on 12 April 2013 and minor modification on 25 September 2015.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standards for the structure and nature of pre-registration midwifery programmes</b>	
<b>Standard 9: Academic standard of programme</b>	
<p>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).</p> <p>Scotland – 360 academic credits, 60 of which must be at level nine.</p> <p>England, Wales and Northern Ireland – 300 academic credits, 60 of which must be at level H.</p>	
<b>What we found:</b>	

Unchanged since original approval on 12 April 2013 and minor modification on 25 September 2015.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standard 10: Length of programme</b>	
<p>Article 31(6-7) of EU Directive 2005/36/EC now describes the length of midwifery programmes in years, months and hours.</p> <p>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.</p> <p>Three year direct entry programme – 4,600 hours (minimum requirement)</p> <p>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).</p> <p>Eighteen month midwifery programme (following qualification as an adult nurse) – 3,000 hours (minimum requirement).</p>	
<b>What we found:</b>	
Unchanged since original approval on 12 April 2013 and minor modification on 25 September 2015.	
<b>Outcome:</b>	Standard met

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

<b>Standard 11: Student support</b>
Midwife teachers and midwife mentors must meet the NMC's standards to support learning and assessment in practice.
<b>What we found:</b>
<p>There's a clear partnership strategy and associated timeline to prepare practice supervisors and assessors for their new roles to meet the SSSA. In addition, a plan is in progress to prepare and support students for the transfer to the SSSA.</p> <p>Student facing documents and discussion provides assurance that students are supervised in practice learning environments by a team of practice and academic staff. Link teachers are allocated to a PLP practice learning area and act as a link between the university and practice learning staff. There is another tier of support from NHS trust employed practice education facilitators (PEFs) who contribute to supporting students in practice.</p> <p>The practice supervisors are responsible for supervising and managing the student's practice learning experience and these responsibilities are clearly included in mandatory updates facilitated by midwifery link teachers and detailed in the midwifery placement handbook.</p> <p>Student midwives are allocated a practice supervisor by a named midwife with responsibility for students in each PLP maternity unit. The practice supervisors will use a coaching model to facilitate the student's learning, encouraging the student to be proactive and to take increasing responsibility for their own learning, appropriate to their stage in the programme. The practice supervisor will contribute to the assessment process by liaising with practice assessors, link teachers and academic assessors.</p> <p>The partnership strategy evidences that practice supervisors with no previous mentor training are required to complete a two day workshop delivered by the PEF</p>

as preparation to undertake the role. Once the training has been completed the practice supervisor signs a self-declaration confirming they have completed preparation to support students in practice. This information is entered onto the PLP local register of practice supervisors. Thereafter, practice supervisors will be updated by PEFs on an annual basis as part of their mandatory training.

Midwifery link lecturers began preparation of practice assessors with a SLAiP role in March 2019. Practice assessors sign a self-declaration stating they are suitably prepared to support and assess students. Thereafter, practice assessors are updated annually by a mandatory workshop delivered by PEFs.

Documentation and preparation material clearly identify the practice assessor must be a registered midwife. The programme team confirmed that arrangements are in place to ensure that the practice assessor allocated to the student is not also the practice supervisor. The process of allocating the practice assessor to a student is done by a named midwife with responsibility for student practice learning allocations. There is also clear evidence and understanding that the practice assessor will not be allocated to a student in consecutive years of the programme. Practice assessors will work with their allocated student midwife periodically to inform their decisions on the summative assessments and progression of the student.

Practice supervisors and assessors are supported in their role by their clinical manager, PEFs and link teachers who all work closely together. Ongoing support and development for practice supervisor and practice assessors will be provided by the midwifery teaching team on an annual basis and during links visits to practice learning environments.

Academic assessors will have a postgraduate certificate in teaching and learning or equivalent. Academic assessors are prepared for their role in a one-day workshop delivered in the university. There's a small team of university academic assessors who cover a large geographical area. Therefore, a coordinated approach to the allocation of students will be overseen by the LME to ensure that students do not have the same academic assessor for concurrent parts of the programme.

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

If a practice supervisor or practice assessor has concerns about a student's performance or fitness to practise they will escalate their concerns by contacting the link teacher in the first instance. A meeting with the student will be scheduled with

the academic assessor, practice supervisor, practice assessor and may involve the PEF. An action plan will be developed and documented in the practice assessment document (PAD). The LME will be made aware of any concerns raised.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standard 12: Balance between clinical practice and theory</b>	
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.	
<b>What we found:</b>	
Unchanged since original approval on 12 April 2013 and minor modification on 25 September 2015.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standard 13: Scope of practice experience</b>
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<p>Where the opportunity is available, students should be involved in supporting women birthing in a variety of settings.</p> <p>Student midwives must be involved in the care of a small group of women throughout their childbirth experience, including antenatal, intrapartum and postnatal care.</p>	
<b>What we found:</b>	
<p>Practice learning experiences are not affected by this modification. Students are placed within a variety of practice learning settings during the three year programme.</p> <p>Students are expected to demonstrate working with a small caseload of between three and four women from year two of the programme. The caseload holding document gives students the information required for them to engage with a caseload of women. Practice supervisors and practice assessors contribute to the documentation of the student's caseload in the year three PAD and documentation has been amended to reflect this.</p>	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<b>Standard 14: Supernumerary status during clinical placement</b>
<p>Students undertaking pre-registration midwifery education programmes cannot be employed to provide midwifery care during their training – all clinical experience should be education-led with students having supernumerary status for the duration.</p>
<b>What we found:</b>
<p>Unchanged since original approval on 12 April 2013 and minor modification on 25 September 2015.</p>

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

<b>Standard 15: Assessment strategy</b>
<p>Clinical practice must be graded and be counted as part of the academic award.</p> <p>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.</p> <p>A student midwife shall achieve these standards under the supervision of a sign-off mentor.</p>
<b>What we found:</b>
<p>The presenting team and programme documentation clarified the assessment strategy and the ongoing support students receive in practice learning environments. We are assured from the evidence that the programme complies with the SSSA in relation to the assessment and progression of students</p> <p>Documentary evidence and discussion during the teleconference confirms the assessment of student's proficiency and competence, EU directives and essential skills clusters (ESCs) are all recorded in the PAD and progress of the students in the ongoing record of achievement (ORA). These aspects of the programme 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 PAD and ORA are updated to reflect these changes.</p> <p>The structure of the programme has not been affected by the implementation of the</p>

SSSA, therefore the progression points are unchanged. The process of grading of midwifery practice in the modified PAD also remains unchanged.

Practice supervisors are involved with formative feedback of the student and document this in the PAD. If necessary, practice supervisors will raise and escalate concerns about students conduct, proficiency and achievement through a robust system of communication and support.

The programme team confirmed that students are allocated to a named practice assessor in each practice learning area by a named midwife with responsibility for student midwives and allocation. Students are allocated to a different academic assessor who is a registered midwife for each part of the programme.

Practice assessors have responsibility for assessing the student's achievement of proficiencies and programme outcomes in practice learning. They are responsible for overseeing student progression in communication with the practice supervisor. There's collaboration between practice assessor and academic assessor at scheduled points in the year to evaluate and recommend the student for progression to the next part of the programme.

The ORA and PAD show that practice assessors liaise with practice supervisors at mutually agreed points in the student's placement. Assessment decisions by practice assessors are informed greatly by feedback from practice supervisors. The practice assessor conducts assessments to confirm achievement of proficiency and will draw on both written and verbal feedback from the student's practice supervisor to make objective, evidence-based assessments of students.

The practice assessor and academic assessor will establish contact at the beginning of the student's placement allocation. This is to ensure a collaborative approach to student support and assessment can commence. The practice assessor and practice supervisor provide feedback in appropriate sections of the student's ORA/PAD. The practice assessor will grade the student's practice based on the evidence gathered. The academic assessor takes responsibility for reviewing the student's practice and academic progress on the programme at the consolidation and progression points in each part of the programme. The academic assessor will confirm the student's achievement and proficiency at a tripartite interview with the student and academic assessor.

Students have been involved with discussions regarding the SSSA standards in an online blog and have been informed by letter of the changes to supervision and assessment that will be taking place. There will be presentations to all student midwives informing them of the SSSA in September 2019.

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

<b>Standard 16: Ongoing record of achievement</b>	
An ongoing record of achievement, including comments from mentors, must be passed from one placement to the next to enable judgements to be made on the student's progress.	
<b>What we found:</b>	
<p>The ORA is incorporated into the PAD for each year. Documentary evidence confirms the PAD and ORA have been modified to align with the SSSA.</p> <p>Student progress and achievement is recorded in the ORA by the practice supervisor and assessor including any concerns and associated action plans about the students conduct.</p> <p>The midwifery practice assessor makes and records objective assessments on proficiency and achievements, through student records and direct observation of the student in practice and records them in the ORA. The academic assessor records objective decisions based on students' conduct, proficiency and achievement and recommendations from the practice assessor and records these decisions in the ORA. Service user feedback is documented in student's ORA.</p>	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	

<b>Revised outcome:</b>	

<b>Achieving the NMC standards</b>	
<b>Standard 17: Competencies required to achieve the NMC standards</b>	
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.	
<b>What we found:</b>	
Unchanged since original approval on 12 April 2013 and minor modification on 25 September 2015.	
<b>Outcome:</b>	Standard met
<b>Date standards met:</b>	
<b>Revised outcome:</b>	

<a href="#"><u>NMC Circular 03/2011</u></a>
<b>Resources to support programme intentions</b>
Programme providers must provide evidence at programme approval that resources are currently available to support programme intentions.
<b>What we found:</b>

The programme team and documentation provide evidence that students gain practice learning experiences from two PLPs; University Hospital Morecambe Bay NHS Trust (UHMBNT) and North Cumbria University Hospitals Trust (NCUHT). Documentary evidence and discussion provides assurance that there are partnership agreements in place with the PLP organisations. These arrangements confirm there are sufficient resources in practice learning environments to support the implementation of the SSSA for the pre-registration midwifery programme.

Monitoring of the effectiveness of the practice learning environments and compliance with the SSSA continue to be undertaken by the UoC in partnership with PLPs.

Assurance is given by UoC regarding students placed at UHMBNT. We were told the PLP offers excellent practice learning experiences for students and their welfare is very important. UoC works closely with the maternity services at UHMBNT. Changes within the trust ensure that students gain a wide range of experiences and they are well supported by the PLP and university staff.

There's agreement between the PLPs and the university that an additional six students will be recruited each year from September 2019. There's assurance that there are sufficient practice supervisors and practice assessors to support the additional students.

The university provided confirmation that there are resources in the university setting to support the implementation of the SSSA. The university teaching team is small (four whole time equivalent staff members). Assurances from the university senior management team have been given that additional staff will be recruited to reflect the increase in student numbers.

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

<b>Evidence and references list</b>
<p>Programme specification revised to reflect the changes to the SSSA, undated</p> <p>UoC caseload holding document, undated</p> <p>Module descriptor forms level for, five and six, undated</p> <p>Lesson plan for workshop for preparation of practice supervisors/assessors, undated</p> <p>Lesson plan for workshop two for preparation of practice supervisors/assessors, undated</p> <p>Letter to students informing them of the proposed implementation of the SSSA, 13 June 2019</p> <p>UoC midwifery placement handbook, September 2019</p> <p>UoC Minor modification form for approval, 9 May 2019</p> <p>Educational audit for North Cumbria Carlisle community, 4 July 2019</p> <p>Educational audit for North Cumbria hospital placement Labour, delivery, recovery and postnatal (LDRP), undated</p> <p>UoC partnership agreement for UHMBNT, undated</p> <p>UoC partnership agreement for NCUHT, undated</p> <p>Minutes of the professional practice group, 29 January 2019</p> <p>PPT presentation for mentor updates informing mentors of the proposed, undated</p> <p>Screenshot of student discussion forum, undated</p> <p>UoC midwifery programme handbook, undated</p> <p>PowerPoint presentation used in workshops to prepare midwives for new roles as practice supervisors/assessors, undated</p> <p>BSc (Hons) midwifery PADs year one, two and three updated 2019, undated</p>

<b>Personnel supporting programme approval</b>
<p><b>Members of Approval Panel</b></p> <p>Not applicable - desktop review.</p>
<p><b>Programme Presenters</b></p>

QA visitor held a teleconference on 7 August 2019 with:  
UoC LME  
UoC senior midwifery lecturer  
UoC midwifery lecturer

**Were any service providers visited?**

*Not required as a desktop review*

**Meetings with others**

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

If there were no representatives present during the approval event please state why:  
*Not required as a desktop review*

**Meetings with students**

<b>Nursing</b>					
<b>Adult</b>		<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Year 4</b>



<b>Mental Health</b>	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Year 4</b>	
<b>Children's</b>	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Year 4</b>	
<b>Learning Disabilities</b>	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Year 4</b>	
<b>Midwifery (3 year)</b>	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>		
<b>Midwifery (18 month)</b>	<b>Year 1</b>	<b>Year 2</b>			
<b>SCPHN</b>	<b>HV</b>	<b>SN</b>	<b>OH</b>	<b>FHN</b>	<b>RPHN</b>
<b>Learning and Assessment in Practice</b>	<b>Mentor</b>		<b>Practice Teacher</b>	<b>Teacher</b>	
<b>Nurse Prescribing</b>	<b>V100</b>		<b>V150</b>	<b>V300</b>	
<b>Specialist Practice</b>	<b>Adult</b>		<b>Mental Health</b>	<b>Children's</b>	
	<b>Learning Disability</b>		<b>General Practice Nursing</b>	<b>Community Mental Health Nursing</b>	
	<b>Community Learning Disabilities Nursing</b>		<b>Community Children's Nursing</b>	<b>District Nursing</b>	

**Additional evidence viewed**

Care Quality Commission (CQC) UHMBNT, 16 May 2019  
 CQC NCUHT, 22 November 2018

**Mott MacDonald Group Disclaimer**

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**Issue record**

Author:	Hilary Lumsden	Date:	09 Aug 2019
Checked by:	Judith Porch	Date:	25 Aug 2019
Approved by:	Andrea Bacon	Date:	27 Aug 2019