

## Programme approval visit report

### Section one

<b>Programme provider name:</b>	South Devon College
<b>In partnership with:</b> <i>(Associated practice learning partners and/or employer partners involved in the delivery of the programme)</i>	University Hospitals Plymouth NHS Trust  Torbay and South Devon NHS Foundation Trust  Private, voluntary and independent health care providers  Education and social care providers
<b>Programme reviewed:</b>	Pre-registration nursing associate <input checked="" type="checkbox"/>  Nursing associate apprenticeship <input checked="" type="checkbox"/>
<b>Title of programme:</b>	FdSc Nursing Associate  Higher Level Apprenticeship Nursing Associate
<b>Academic levels:</b>	
Pre-registration nursing associate	England <input checked="" type="checkbox"/> Level 5
Nursing associate apprenticeship	England <input checked="" type="checkbox"/> Level 5
<b>Date of approval visit:</b>	12-13 January 2021
<b>Programme start date:</b>	
Pre-registration nursing associate	11 October 2021
Nursing associate apprenticeship	12 April 2021
<b>QA visitor(s):</b>	Registrant Visitor: Professor Kudzai Mafuba  Lay Visitor: Jane Suppiah

**Section two**

**Summary of review and findings**

South Devon College (SDC) is seeking approved education institution (AEI) status. SDC have run the Health Education England (HEE) trainee nursing associate (TNA) programme since 2017 in collaboration with an approved AEI. SDC received foundation degree awarding powers on 18 March 2019. The university centre south Devon (the centre) has submitted documentation to support the approval of a two-year pre-registration nursing associate (NA) programme. The programme leads to the award of a foundation degree science (FdSc) with direct entry and apprenticeship routes. Students following either route will be eligible to register as a NA with the Nursing and Midwifery Council (NMC) on successful completion of the programme.

The approval visit is undertaken remotely due to the Covid-19 pandemic.

There are effective working relationships between SDC and their associated practice learning partners (PLPs) and employer partners (EPs). Documentation and discussions at the approval visit demonstrate a collaborative approach involving all stakeholders in all aspects of the programme.

There are formal partnerships and written agreements with EPs for the proposed NA apprenticeship route and with PLPs. SDC work with the following EPs: Livewell Southwest, University Hospitals Plymouth NHS Trust, Sentinel health and wellbeing and Rowcroft hospice. All EPs are represented at the approval visit and confirm their commitment to the programme. They confirm that they'll provide placements for students on both routes of the programme. The programme team and EPs tell us the proposed programme will provide additional resources for the local workforce to meet the health and social care needs of the local population. The Devon training hub was established to develop placement capacity with support from HEE.

SDC will use the England NA practice assessment document (PAD) and ongoing achievement record (OAR). The PAD is mapped to the Standards of proficiency for NA (SPNA) (NMC, 2018) and programme outcomes. SDC, their EPs and PLPs have detailed plans for implementing the Standards for student supervision and assessment (SSSA) (NMC, 2018).

Evidence from educational audits is used to determine suitability of practice learning environments. Any risks to students' practice learning are effectively managed and monitored. University Hospitals Plymouth NHS Trust have received a Care Quality Commission (CQC) report indicating a 'requires improvement' outcome. Assurance is provided that risks associated with this are being effectively managed to ensure student protection in practice learning settings and public protection.

The programme meets the SSSA (NMC, 2018) at programme level. The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) are also met at programme level.

The programme is recommended to the NMC for approval subject to one NMC condition and one college condition.

Updated 16 February 2021:

The programme team have provided evidence to demonstrate the NMC condition is met.

SDC have also confirmed the college condition is met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
<b>Recommended outcome to the NMC:</b>	<p>Programme is recommended to the NMC for approval <input type="checkbox"/></p> <p>Programme is recommended for approval subject to specific conditions being met <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
<b>Conditions:</b>	<p><b>Effective partnership working: collaboration, culture, communication and resources:</b> None identified.</p> <p><b>Selection, admission and progression:</b> None identified.</p> <p><b>Practice learning:</b> None identified.</p> <p><b>Assessment, fitness for practice and award:</b> None identified.</p> <p><b>Education governance: management and quality assurance:</b> Condition one: Appoint and provide the name and curriculum vitae of the registered nurse or registered NA responsible for directing the education programme. ( Standards for pre-registration nursing associate programmes (SPRNAP) R4.3)</p>

	Condition two: Review and update the marked-up documentation in line with the panel feedback and nominate an external examiner within three weeks. (College condition)
<b>Date condition(s) to be met:</b>	10 February 2021
<b>Recommendations to enhance the programme delivery:</b>	None identified.
<b>Focused areas for future monitoring:</b>	Implementation of simulated learning.  Allocation of placement allocations for apprentices.  Involvement of service users and carers (SUCs) in the student's journey.

<b>Programme is recommended for approval subject to specific conditions being met</b>	
<b>Commentary post review of evidence against conditions</b>	
We received confirmation of appointment, name and curriculum vitae of the programme lead for the NA programme. Condition one is met.	
Revised programme documentation provided. The vice principal curriculum, performance and quality confirms the college condition is met. Condition two is met.	
The programme is recommended to the NMC for approval.	
<b>AEI Observations</b>	<b>Observations have been made by the education institution</b> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<b>Summary of observations made, if applicable</b>	Confirmation that SDC were awarded foundation degree awarding powers on 18 March 2019 – amended in summary section.  Clarification that SDC are responsible for placement audits and Devon training hub establish placement links and therefore support the development of placements across the region – amended in partnerships section and R3.2.
<b>Final recommendation made to NMC:</b>	Programme is recommended to the NMC for approval <input checked="" type="checkbox"/>

	Recommended to refuse approval of the programme <input type="checkbox"/>
<b>Date condition(s) met:</b>	10 February 2021

### **Section three**

<b>NMC Programme standards</b>
<p>Please refer to NMC standards reference points</p> <p><a href="#"><u>Standards for pre-registration nursing associate programmes</u></a> (NMC, 2018)</p> <p><a href="#"><u>Standards of proficiency for nursing associates</u></a> (NMC, 2018)</p> <p><a href="#"><u>Standards framework for nursing and midwifery education</u></a> (NMC, 2018)</p> <p><a href="#"><u>Standards for student supervision and assessment</u></a> (NMC, 2018)</p> <p><a href="#"><u>The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates</u></a> (NMC, 2015 updated 2018)</p> <p><a href="#"><u>Quality assurance framework for nursing, midwifery and nursing associate education</u></a> (NMC, 2020)</p> <p><a href="#"><u>QA Handbook</u></a> (NMC, 2020)</p>

<b>Partnerships</b>
<p>The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.</p>
<p><b>Please refer to the following NMC standards reference points for this section:</b></p> <p><a href="#"><u>Standards framework for nursing and midwifery education</u></a> (NMC, 2018)</p> <p><b>Standard 1: The learning culture:</b></p> <p>R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders</p> <p>R1.13 work with service providers to demonstrate and promote inter-professional learning and working</p> <p><b>Standard 2: Educational governance and quality:</b></p> <p>R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders</p> <p>R2.4 comply with NMC <a href="#"><u>Standards for student supervision and assessment</u></a></p> <p>R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes</p>

R2.7 ensure that service users and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection

**Standard 3: Student empowerment:**

R3.3 have opportunities throughout their programme to work with and learn from a range of people in a variety of practice placements, preparing them to provide care to people with diverse needs

R3.16 have opportunities throughout their programme to collaborate and learn with and from other professionals, to learn with and from peers, and to develop supervision and leadership skills

R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning

R3.18 have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice.

**Standard 4: Educators and assessors:**

R4.7 liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment

R4.9 receive and act upon constructive feedback from students and the people they engage with to enhance the effectiveness of their teaching, supervision and assessment

R4.10 share effective practice and learn from others

**Standard 5: Curricula and assessment:**

R5.4 curricula are developed and evaluated by suitably experienced and qualified educators and practitioners who are accountable for ensuring that the curriculum incorporates relevant programme outcomes

R5.5 curricula are co-produced with stakeholders who have experience relevant to the programme

R5.14 a range of people including service users contribute to student assessment

[Standards for student supervision and assessment](#) (NMC, 2018)

**Standard 1: Organisation of practice learning:**

R1.7 students are empowered to be proactive and to take responsibility for their learning

R1.8 students have opportunities to learn from a range of relevant people in practice learning environments, including service users, registered and non-registered individuals, and other students as appropriate

**Standard 2: Expectations of practice supervisors:**

R2.2 there is support and oversight of practice supervision to ensure safe and effective learning

**Standard 3: Practice supervisors: role and responsibilities:**

R3.3 support and supervise students, providing feedback on their progress towards, and achievement of, proficiencies and skills

**Standard 4: Practice supervisors: contribution to assessment and progression:**

R4.3 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

**Standard 7: Practice assessors: responsibilities:**

R7.9 communication and collaboration between practice and academic assessors is scheduled for relevant points in programme structure and student progression

**Standard 9: Academic assessors: responsibilities:**

R9.6 communication and collaboration between academic and practice assessors is scheduled for relevant points in programme structure and student progression

**Findings against the standard and requirements**

We found documentary evidence of effective partnership working between SDC, EPs and PLPs. We're told that quarterly communities of practice meetings and practice learning committee meetings take place and involve staff from SDC, EPs, PLPs, service users and student representatives. We're told that placement capacity development is led by the Devon training hub in collaboration with SDC, PLPs and EPs. There are signed statements confirming EPs and PLPs commitment to both the apprenticeship and direct entry routes of the NA programme and further assurance is given at the approval visit. There are memoranda of understanding between EPs and PLPs to facilitate external placements for apprentices.

PLPs, EPs, students, SUCs tell us they take part in curriculum development groups. There's a patient, carer and service user strategy for SUC engagement with an identified academic staff co-ordinator. There are records of meetings between the programme team and SUCs recording service users' participation in programme design and co-production of the programme. There's a SUCs training programme. Documentation and discussions at the approval visit confirm that SUCs receive training to prepare them for their roles, including equality and diversity training.

Practice placement areas are audited using an audit tool shared by other AEIs in the region. Audit of placements in the region is led by SDC. The Devon training hub support the development of placements across the region. There's a practice learning committee attended by SDC, PLPs, EPs and student representatives to ensure development and management of capacity and learning environments is maintained. In addition, there's a student placement forum which provides feedback to the practice learning committee.

Senior SDC staff tell us that a new placements administrator has been appointed. They'll co-ordinate placement allocations between SDC, EPs and PLPs. The

placements administrator will ensure that students have occupational health clearance and disclosure and barring service (DBS) clearance before they attend practice placements. SDC has a DBS process and panel in place.

SUCs tell us SDC is recruiting more SUCs through advertisements in social media. SUCs are involved in curriculum delivery and student assessment. They play an active role in governance structures of the programme through the patient, carer and service user group. They take part in face-to-face teaching with students. They participate in simulation-based learning activities and their perspective of student performance is included in feedback students receive. The PAD facilitates SUCs involvement in providing feedback for students regarding practice learning. SUCs tell us they feel listened to and treated as equal partners for the programme. They tell us they receive training essential for their roles, including equality and diversity training. At the approval visit we're provided with assurance that SDC has a clear understanding of how SUCs will support recruitment and selection as well as delivery and assessment of the programme. This includes providing lived experience as part of academic learning, involvement in delivering and giving feedback in simulated scenarios as well as the assessment of student and apprentices research projects. Members of the patient, carer and service user group we met confirm their involvement and support to prepare them for their roles. SUCs tell us they feel valued and are aware of the range of opportunities for involvement going forward.

There's a joint approach to recruiting to the programme and management of its delivery involving all stakeholders. EPs, PLPs and SUCs tell us they're prepared for recruitment and selection processes. Alumni of the HEE TNA programme tell us they experienced a robust values-based recruitment and selection process. This joint, values-based recruitment process is used for the proposed programme. All stakeholders involved in selection and interviews undertake SDC equality and diversity compliance training.

We found documentation detailing roles and responsibilities of PLPs, EPs, academic assessors, practice assessors, practice supervisors, personal tutors, link lecturers and students. This includes the ways they'll work in partnership. Documentary evidence and confirmation at the approval visit demonstrates sufficient appropriately qualified practice assessors and practice supervisors to provide support for supervision and assessment of skills and proficiencies in practice settings for all SDC pre-registration NA students and apprentices. Academic assessors, practice assessors, practice supervisors and clinical education facilitators tell us they're prepared to undertake their new roles. The Devon training hub works in partnership with SDC, PLPs and EPs to prepare practice assessors and practice supervisors for their roles in supporting students. Those undertaking role preparation tell us they access online training materials and attend workshops to prepare them for these new roles and to meet the requirements of annexes A and B of the SPNA (NMC, 2018). The programme team, EPs and PLPs tell us there are practice link lecturers employed by SDC and clinical education facilitators employed by PLPs and EPs who engage with and



provide support to practice assessors, practice supervisors and students in practice learning environments.

Documentation and discussions at the approval visit provide details of the ways student evaluations and feedback inform programme design and development. At the approval visit we're told that feedback from alumni of the HEE TNA programme led to the development of a pre-programme module on research and study skills.

We find SDC facilitates inter-professional learning (IPL) opportunities with students from other healthcare programmes across SDC. PLPs, EPs and students confirm IPL opportunities in academic and practice learning settings are available to NA students and apprentices.

Fitness to practise and misconduct concerns about a student/apprentice are effectively managed in partnership between SDC, PLPs and EPs. Documentation and discussions at the approval visit confirm that the fitness to practise process involves the relevant EP.

Student progress is monitored by the programme leader in collaboration with academic assessors. In practice learning students receive feedback from their practice supervisors and practice assessors at specific stages as identified in the PAD. The assessment and feedback process indicate student's individual learning needs including specific practice placement learning opportunities, reasonable adjustments and support needs are identified.

Students are represented at the higher education academic board, health professions and nursing committee, annual programme monitoring meetings, community of practice meetings and practice learning committee meetings. Future cohorts of NA students will be represented on these boards and committees. Students tell us their feedback is listened to by SDC and has resulted in changes to their own programmes. There are details included in the student facing documentation of the ways NA students provide feedback on their experiences in academic and practice settings, during module review sessions and for practice learning through review meetings and the PAD.

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**  **NOT 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**  **NOT MET**

**Post Event Review**

**Identify how the condition(s) is met:**

N/A		
<b>Date condition(s) met:</b> N/A		
<b>Revised outcome after condition(s) met:</b> N/A	<b>MET</b> <input type="checkbox"/>	<b>NOT MET</b> <input type="checkbox"/>

**Student journey through the programme**

**Standard 1: Selection, admission and progression**

**Approved education institutions, together with practice learning partners, must:**

R1.1 Confirm on entry to the programme that students:

- R1.1.1 demonstrate values in accordance with the Code
- R1.1.2 have capability to learn behaviours in accordance with the Code
- R1.1.3 have capability to develop numeracy skills required to meet programme outcomes
- R1.1.4 can demonstrate proficiency in English language
- R1.1.5 have capability in literacy to meet programme outcomes
- R1.1.6 have capability for digital and technological literacy to meet programme outcomes

R1.2 ensure students' health and character allows for safe and effective practice on entering the programme, throughout the programme and when submitting the supporting declaration of health and good character in line with the NMC's health and character decision-making guidance. This includes satisfactory occupational health assessment and criminal record checks.

R1.3 ensure students are fully informed of the requirement to declare immediately any cautions or convictions, pending charges or adverse determinations made by other regulators, professional bodies and educational establishments and that any declarations are dealt with promptly, fairly and lawfully.

R1.4 ensure that the registered nurse or registered nursing associate responsible for directing the educational programme or their designated registered nurse substitute or designated registered nursing associate substitute, are able to provide supporting declarations of health and character for students who have completed a pre-registration nursing associate programme.

R1.5 permit recognition of prior learning that is capable of being mapped to the *Standards of proficiency for nursing associates* and programme outcomes, up to a maximum of 50 percent of the programme. This maximum limit of 50 percent does not apply to applicants to pre-registration nursing associate programmes who are currently a NMC registered nurse without restrictions on their practice, and

R1.6 provide support where required to students throughout the programme in continuously developing their abilities in numeracy, literacy, digital and literacy to meet programme outcomes.

[Standards framework for nursing and midwifery education](#) specifically: R2.6, R2.7, R2.8, R2.10

**Findings against the standard and requirements**

**Evidence provides assurance that the following QA approval criteria are met:**

- There is evidence of selection processes, including statements on digital literacy, literacy, numeracy, values-based selection criteria and capability to learn behaviour according to the Code, educational entry standard required, and progression and assessment strategy, English language proficiency criteria is specified in recruitment processes. Service users and practitioners are involved in selection processes. (R1.1.1 – R1.1.6)  
**YES**  **NO**
- There is evidence of occupational health entry criteria, inoculation and immunisation plans, fitness for nursing assessments, Criminal record checks and fitness for practice processes are detailed. (R1.2)  
**YES**  **NO**
- 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 are evidenced and information given to applicants and students are detailed. (R1.3)  
**YES**  **NO**
- Processes are in place for providing supporting declarations by a registered nurse or registered nursing associate responsible for directing the educational programme (R1.4)  
**YES**  **NO**

**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 recognition of prior learning processes that are capable of being mapped to the Standards of proficiency for nursing associates and programme outcomes, up to a maximum of 50 percent of the programme. This maximum limit of 50 percent does not apply to applicants to pre-registration nursing associate programmes who are currently a NMC registered nurse without restrictions on their practice. (R1.5)  
**MET**  **NOT MET**

R1.5 is met. The centre admission regulations, admissions policy and staff guide to recognition of prior learning (RPL) provide guidance and outline processes for awarding RPL. RPL is permitted for up to 50 percent of the programme and for NMC registered nurses without restrictions on their practice to be accredited up to 60 percent of the proposed programme.

The RPL mapping tool is mapped against programme outcomes and the SPNA (NMC, 2018).

RPL process details the roles and responsibilities of those involved in RPL decision making. Information on RPL is available for prospective students and students tell us they know about the RPL process and how to make RPL claims.

RPL decisions are recorded and clearly identified in all papers considered by subject assessment panels and award assessment boards. The programme team confirm RPL claims are scrutinised by a relevant external examiner and all RPL claims are considered at an assessment board before applicants start the programme.

- Numeracy, literacy, digital and technological literacy are 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)/PAD linked to competence outcomes in literacy, digital and technological literacy to meet programme outcomes. (R1.6)

**MET**  **NOT MET**

R1.6 is met. Numeracy, literacy, digital and technological literacy is mapped against the SPNA (NMC, 2018), programme learning outcomes and module descriptors. Admission criteria and the application and selection processes confirm applicants are required to successfully demonstrate literacy and numeracy skills to be able to meet programme outcomes. At interview, candidates are required to complete a digital numeracy test and a written literacy test.

The PAD and OAR include requirements for students to demonstrate skills development in numeracy, literacy, digital and technological literacy.

There's a clinical education preparatory skills module which supports students to develop their numeracy, literacy, digital and technological literacy, introducing skills prior to commencing their studies. There's a numeracy assessment that includes medication calculation which requires a pass mark of 100 percent at each progression point.

There's a student development policy which outlines the tutorial process and how support is provided to students by the professional services team. Students tell us they feel supported academically and in practice learning in relation to developing proficiency in numeracy, literacy, digital and technological literacy. SDC have a

student support hub providing extensive academic support services for students who require additional support with numeracy, literacy and digital technology.

Assurance is provided that Gateway 1: [Standards framework for nursing and midwifery education](#) relevant to selection, admission and progression are met

YES  NO

**Outcome**

Is the standard met?

MET  NOT MET

Date: 13 January 2021

**Post event review**

Identify how the condition(s) is met:

N/A

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

MET  NOT MET

N/A

**Standard 2: Curriculum**

Approved education institutions, together with practice learning partners, must:

R2.1 ensure that programmes comply with the *NMC Standards framework for nursing and midwifery education*

R2.2 comply with the *NMC Standards for student supervision and assessment*

R2.3 ensure that all programme learning outcomes reflect the *Standards of proficiency for nursing associates*.

R2.4 design and deliver a programme that supports students and provides an appropriate breadth of experience for a non-field specific nursing associate programme, across the lifespan and in a variety of settings

R2.5 set out the general and professional content necessary to meet the *Standards of proficiency for nursing associates* and programme outcomes

R2.6 ensure that the programme hours and programme length are:

2.6.1 sufficient to allow the students to be able to meet the *Standards of proficiency for nursing associates*,

2.6.2 no less than 50 percent of the minimum programme hours required of nursing degree programmes, currently set under Article 31(3) of Directive 2005/36/EC (4,600 hours)

2.6.3 consonant with the award of a foundation degree (typically 2 years)

R2.7 ensure the curriculum provides an equal balance of theory and practice learning using a range of learning and teaching strategies, and

R2.8 ensure nursing associate programmes which form part of an integrated programme meet the nursing associate requirements and nursing associate proficiencies.

*Standards framework for nursing and midwifery education* specifically:  
R1.9, R1.13; R2.2, R2.14, R2.15, R2.18, R2.19; R3.1, R3.2, R3.4, R3.7, R3.9, R3.10, R3.15, R 3.16; R5.1 - R5.16.

*Standards for student supervision and assessment* specifically:  
R1.2, R1.3, R1.7, R1.10, R1.11

### Findings against the standard and requirements

**Evidence provides assurance that the following QA approval criteria are met:**

- There is evidence that the programme complies with the NMC *Standards framework for nursing and midwifery education* (R2.1)  
YES  NO
- There is evidence that the programme complies with the NMC *Standards for student supervision and assessment* (R2.2)  
YES  NO
- Mapping has been undertaken to show how the curriculum and practice learning content meets the *Standards of proficiency for nursing associates* and programme outcomes. (R2.3)  
YES  NO

**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 a non-field specific nursing associate programme, across the lifespan and in a variety of settings. (R2.4)  
MET  NOT MET

R2.4 is met. Documentary evidence demonstrates the programme design and delivery is generic in content and is non-field specific. Module descriptors and learning outcomes support learning across the lifespan and are relevant to a variety of settings. The programme reflects a generic curriculum and there's content related to the four fields of nursing practice which ensures NA students have experiences related to these fields. Documentary evidence, the programme team, PLPs and EPs confirm NA students have a variety of practice experiences across the lifespan. Alumni of the HEE TNA programme confirm this.

A student learning journey exemplar demonstrates students have practice learning experiences in all fields of nursing. The student programme handbook and module descriptors also confirm that students are informed of the lifespan and non-field specific approach.

PLPs and EPs provide assurance that there are sufficient opportunities for direct entry students and apprentices to gain practice experience across the lifespan. PLPs and EPs give assurance that a wide range of placements together with opportunities for 'spoke' experiences are accessible to direct entry students and apprentices. Alumni of the HEE TNA programme confirm that their practice learning included experience of care of adults, children, people with mental health conditions and people with learning disabilities. PLPs and EPs tell us they collaborate to provide external placements for apprentices that complement opportunities available in their own organisations. There's evidence that placement allocation is planned well in advance. SDC, PLPs and EPs have effective contingency plans in place should placement reallocation be needed. These plans are facilitated by the Devon training hub.

**Evidence provides assurance that the following QA approval criteria are met:**

- There is evidence that mapping has been undertaken to show how the programme outcomes, module outcomes and content meets the *Standards of proficiency for nursing associates* and programme outcomes. (R2.5)

**YES**  **NO**

**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:
  - the programme meets NMC requirements on programme hours and programme length;
  - programmed learning is sufficient to allow the students to be able to meet the *Standards of proficiency for nursing associates*. (R2.6)

**MET**  **NOT MET**

R2.6 is met. Documentation and discussions at the approval visit confirm that the programme is a foundation degree and is designed to allow appropriate time for students to meet the programme outcomes and SPNA (NMC, 2018) within 2300 programme hours. Practice learning and hours are recorded in the PAD by students and verified by the practice supervisor and practice assessor. Attendance in theory settings is recorded on classroom registers. Unmet theory and/or practice learning hours are retrieved through an individual plan of action agreed with the programme leader and EPs for apprentices. The programme plans for the two routes clearly illustrate theory and practice learning blocks.

At the approval visit the programme team confirm how theory and practice learning hours are organised. For apprentices, the external practice learning placements model is three-week blocks organised jointly between SDC, PLPs and EPs. Practice learning hours are monitored by the SDC placement administrator.

Alumni of the HEE TNA programme tell us their learning in practice helped them to meet programme learning outcomes and proficiencies and prepared them to be registered NAs.

- 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 the 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. (R2.7)

**MET**  **NOT MET**

R2.7 is met. Documentary evidence and the approval process confirm the programme structure has an equal balance of theory and practice learning hours. A wide range of learning and teaching strategies are detailed in the programme specification, module descriptors and teaching learning and assessment strategy. Lectures, seminars, skills sessions, workbooks and online resources are used to support learning. Indicative content and learning outcomes for each part of the programme are in the student handbook and module descriptors.

All modules include appropriate academic level aims, learning outcomes and module content. Module descriptors include learning outcomes and module content. There's documentary evidence to show that student facing documentation tells them about the programme structure, timetables and module descriptors.

There's a mapping document that outlines how the SPNA (NMC, 2018) and skills are met in the PAD. The mapping document demonstrates that the SPNA (NMC, 2018) will be met on successful completion of the programme.

The programme team tell us students and apprentices will be taught separately. There will however also be opportunities for them to learn together to share their experiences and learn from each other.

SDC organise practice learning placements for direct entry students. PLPs, EPs and SDC collaborate in organising external placements for apprentices. The SDC placements administrator co-ordinates this and maintains electronic records of practice placement allocations. Protected learning time for apprentices is monitored by EPs in collaboration with practice assessors, academic assessors



and the placements administrator. Apprentices keep a written record of protected learning time.

**Evidence provides assurance that the following QA approval criteria are met:**

- There is evidence that programmes leading to nursing associate registration and registration in another profession, will be of suitable length and nursing associate proficiencies and outcomes will be achieved in a nursing associate context. (R2.8)

YES  NO

Assurance is provided that Gateway 1: [Standards framework for nursing and midwifery education](#) relevant to curricula and assessment are met

YES  NO

Assurance is provided that Gateway 2: [Standards for student supervision and assessment](#) relevant to curricula are met

YES  NO

**Outcome**

Is the standard met? MET  NOT MET

Date: 13 January 2021

**Post event review**

Identify how the condition(s) is met:

N/A

Date condition(s) met:

N/A

Revised outcome after condition(s) met: MET  NOT MET

N/A

**Standard 3: Practice learning**

Approved education institutions, together with practice learning partners, must:

R3.1 provide practice learning opportunities that allow students to develop and meet the *Standards of proficiency for nursing associates* to deliver safe and effective care, to a diverse range of people, across the lifespan and in a variety of settings

R3.2 ensure that students experience the variety of practice expected of nursing associates to meet the holistic needs of people of all ages

R3.3 ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment

R3.4 take account of students' individual needs and personal circumstances when allocating their practice learning including making reasonable adjustments for students with disabilities, and  
 R3.5 ensure that nursing associate students have protected learning time in line with one of these two options:  
 R3.5.1 Option A: nursing associate students are supernumerary when they are learning in practice  
 R3.5.2 Option B: nursing associate students who are on work-placed learning routes:  
 R3.5.2.1 are released for at least 20 percent of the programme for academic study  
 R3.5.2.2 are released for at least 20 percent of the programme time, which is assured protected learning time in external practice placements, enabling them to develop the breadth of experience required for a generic role, and  
 R3.5.2.3 protected learning time must be assured for the remainder of the required programme hours.

*Standards framework for nursing and midwifery education* specifically:  
 R1.1, R1.3, R1.5; R2.9, R2.14; R3.3, R3.5, R 3.7, R3.16; R5.1, R5.7, R5.10, R5.12

*Standards for student supervision and assessment*, specifically:  
 R1.1 – R1.11

**Findings against the standard and requirements**

**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 nursing associates* to deliver safe and effective care, to a diverse range of people, across the lifespan and in a variety of settings. (R3.1)

**MET**  **NOT MET**

R3.1 is met. The programme team tell us the ways practice supervisors, practice assessors, academic assessors and clinical education facilitators collaborate with each other to ensure practice learning opportunities allow students to engage with and learn from a diverse range of people across the life span. The PAD provides guidance to students/apprentices and their practice supervisors and practice assessors. It contains practice assessment information and records student and apprentice assessment and achievement. EPs and PLPs tell us they're familiar with the PAD and understand the programme outcomes and SPNA (NMC, 2018).

Documentary evidence and discussions during the approval visit confirm that there are sufficient practice learning opportunities to allow students and apprentices to develop and meet the SPNA (NMC, 2018) and deliver safe and effective care.

Practice assessors and academic assessors are required to make objective decisions about student and apprentice progression and assessment and work collaboratively.

There's a process and guide for students and apprentices to raise and escalate concerns in practice environments. Documentation and discussions at the approval visit confirm there are robust processes for apprentices to raise and escalate concerns when they're in their home placements. Alumni of the HEE TNA programme tell us they're aware of SDC and employer processes for reporting and escalating concerns and actions taken if they do escalate issues. Documentary evidence and discussions during the approval visit confirm fitness to practise concerns about apprentices are managed in partnership and these are jointly investigated by SDC and EPs.

The programme team tell us that academic learning is organised to support practice learning opportunities and ensure preparedness for practice placements.

- 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**  **NOT MET**

R3.2 is met. Programme documentation evidences effective partnership working between SDC, PLPs and EPs to ensure students experience variety in their practice learning to meet the holistic needs of people of all ages. PLPs and EPs who currently have students from other AEIs in the region confirm they discuss students' practice learning evaluations and take appropriate action if needed. There's a fitness to practise procedure in place evidencing a joint approach to investigating any fitness to practise concerns. Documentary evidence confirms regional documentation will be used to undertake joint educational audits on a two-yearly basis. There will be biannual practice-based learning meetings to oversee and report on any practice learning issues. The link lecturer is responsible for any action plans and the programme lead takes overall responsibility for ensuring the quality of placement learning environments. The Devon training hub provides support in establishing placement links across the region.

The programme team, PLPs and EPs confirm there's sufficient variety and numbers of practice learning placements to support student and apprentice learning to meet the holistic needs of people of all ages. The programme team, PLPs and EPs tell us there are sufficient appropriately qualified practice assessors, practice supervisors and academic assessors (following recruitment of three members of NMC registered academic staff) to provide assessment, monitor and evaluate student learning in practice. The OAR summarises overall student achievement, development and performance. Practice assessors record their decisions on student progress and proficiency in the OAR. The PAD includes sections for students to provide reflections on their progress and performance

along with a number of action plans which enable them to focus on their further development and ongoing learning needs. The PAD provides templates for students to record and reflect on any learning undertaken with members of the multidisciplinary team and for students to self-evaluate and reflect on their practice learning experiences.

Documentation and the approval visit provide assurance that a range of mechanisms ensure the quality of practice learning environments is monitored. This includes student evaluation and educational audit. A partnership structure is in place for quarterly monitoring and reporting of changes to placement capacity, student, practice supervisor and practice assessor feedback and concerns. The programme team give examples of immediate action taken in response to CQC inspection findings.

There's an identified placement administrator with responsibility for placement allocation and ensuring students receive a range of practice learning experiences with people of all ages and includes experiences in learning disabilities, mental health and child health settings. Alumni of the HEE TNA programme tell us they evaluate each practice learning experience and changes are made in response to their feedback. The programme team tell us that this process will continue in the proposed programme. Students tell us they knew how to raise and escalate concerns and details about this are included in student facing documentation.

Apprentice alumni of the HEE TNA programme describe how employers and SDC facilitate learning in different contexts. They tell us they receive their placement plan for the entire year at the start of each year of the programme. They describe how external placements provide contrast to their normal work environment and enable experience of delivering care across the lifespan. Documentation and discussions at the approval visit show that student experience of delivering care across the lifespan is discussed at the quarterly tripartite meetings involving SDC academic staff, practice supervisor/practice assessor and the apprentice.

- There is evidence of plans for effective and proportionate use of technology enhanced and simulation-based learning opportunities and to support learning and assessment in the curriculum. (R3.3)

**MET**

**NOT MET**

R3.3 is met. Programme documentation evidences effective and proportionate use of technology enhanced and simulation-based learning. Simulation-based learning is used to support theory learning to prepare students and apprentices for practice learning.

During the approval visit, we're shown pictures of simulation facilities (in lieu of a physical visit due to the Covid-19 lockdown). The SDC simulation suite is designed to be adaptable to meet the changing needs of students and employers. The suite houses four nursing Anne simulators which are scenario-based simulators, in addition to standard task trainers. SDC is a member of the simulation user

network, which is a platform for collaboration on simulated learning in healthcare. Some EPs have simulation facilities that are accessible to students and apprentices during practice learning placements.

Simulation-based learning is included in module teaching and learning strategies and is part of formative learning and summative assessment processes. The programme team and former HEE TNA students tell us there's a range of manikins used to support student learning through simulation. SUCs tell us they participate in simulated learning. Simulated learning is used for teaching observation skills for assessing deterioration. Case studies for use in simulated learning cover the four fields of nursing and are developed in collaboration with PLPs and EPs.

The virtual learning environment (VLE) provides students with educational resources, activities and assessments. Students and apprentices use an online numeracy and medications learning resource, safeMedicate. We're told by the programme team that students have access to online learning resources, including moodle, safeMedicate, elsevier clinical skills, elsevier clinical key, e-books and online journals. Alumni of the HEE TNA programme confirm this. Senior staff tell us that they've committed resources to developing SDCs technology infrastructure.

SDC has teaching rooms, lecture theatres, private study rooms, computer suites and a library with a subject librarian. We're told that there's resources to provide information technology (IT) technical support to academic staff and students. Students will have induction sessions to library resources and additional drop-in sessions will be provided. The SDC library is stocked with e-books, online journals and physical core textbooks. The library caters for students requiring reasonable adjustments and provides a click and collect service. During practice placement we're told students have access to PLP and EP libraries.

There's documentary evidence of mapping of numeracy, literacy, digital and technological literacy to the SPNA (NMC, 2018), programme learning outcomes and programme modules. The PAD and OAR include a record of student proficiency in numeracy, literacy, digital and technological literacy.

- 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. (R3.4)

**MET**  **NOT MET**

R3.4 is met. Documentary evidence shows that students' individual needs are identified on entry to the programme. The guidance for supporting students requiring reasonable adjustments, the occupational health disclosure and the quality assurance for practice and employer placements framework outline guidance and procedures for making reasonable adjustments.

The programme handbook signposts student support services to students. There are processes for supporting students with disabilities. Students can self-refer or

can be referred by their personal tutors, or programme leader. Students requiring reasonable adjustments will have a learning support plan for both theory and practice learning.

SDC has policies and processes in place that describe how individual needs and personal circumstances are taken into account in the organisation of practice learning opportunities. The programme team, PLPs and EPs tell us they respond to recommendations for reasonable adjustments from the disability team. Former HEE TNA students confirm this. The programme team tell us funding is in place to meet individual learning needs.

There's a student support hub incorporating the apprentice support team and student experience team for both theory and practice learning. There are processes for supporting students with disabilities. We're told the disability team is informed of all declarations at the point of application. Students requiring reasonable adjusts have a learning support plan for both theory and practice learning. SDC tell us there's a student bursary to facilitate reasonable adjustments and remote learning as well as adequate staffing resource to support students and apprentices in their academic and practice learning.

The guidance for supporting students requiring reasonable adjustments safeguards equality of placement provision for disabled students. Students are provided with opportunities to disclose disabilities during the application process, during selection, through the occupational health disclosure process, during induction and during the initial interview in practice. The quality assurance for practice and employer placements framework provides clarity to practice assessors and practice supervisors on how to escalate concerns regarding students who may have disabilities. Placement evaluations, concerns and risk are identified and discussed at the quarterly practice learning committee meetings to ensure the quality and suitability of placements for students.

PLPs and EPs tell us adjustments are actioned. Students and apprentices confirm that personal circumstances are considered in placement allocation. They're aware of how to access support from clinical education facilitators and apprenticeship teams within their own organisations or while on external placements.

- Evidence that nursing associate students have protected learning time through one of the two options (A or B). There must be clarity of evidence to support the single option selected.  
Processes are in place to ensure that protected learning time will be monitored in accordance with the selected option.  
Evidence that students will be released for a minimum of 20 percent of the programme for academic study.  
Evidence that students will be released for a minimum of 20 percent of the programme time, which is assured protected learning time in external

practice placements, enabling them to develop the breadth of experience required for a generic role.  
Evidence that information is provided to students and practice learning partners on protected learning time/supernumerary status and the selected single option. (R3.5)

**MET**  **NOT MET**

R3.5 is met. The programme plan shows that the model of practice learning for apprentices is work-based learning (option B). Academic study time is outlined in the programme plan and demonstrates students are released for a minimum of 20 percent of the programme for academic study. External practice placement hours in the planner meet the minimum requirement of 20 percent of the programme time for protected learning time in external practice placements. The service level agreement between SDC and EPs clearly sets out the commitment to protected learning time and how this can be achieved.

EPs at the approval visit confirm their commitment to facilitate protected learning time. Student facing and practice documentation for apprentices is explicit on the requirement for protected learning time.

Documentary evidence and the approval process indicate there's consistent information and practices to ensure apprentices have protected learning time during employer and external placements.

Direct entry students will follow option A during practice learning. Student facing and practice documentation for direct entry students is explicit on the requirement for students to be supernumerary during practice learning.

Assurance is provided that Gateway 1: [Standards framework for nursing and midwifery education](#) relevant to practice learning are met

**YES**  **NO**

Assurance is provided that Gateway 2: [Standards for student supervision and assessment](#) relevant to practice learning are met

**YES**  **NO**

**Outcome**

**Is the standard met?**

**MET**  **NOT MET**

**Date:** 13 January 2021

**Post event review**

**Identify how the condition(s) is met:**

N/A

**Date condition(s) met:**

N/A

Revised outcome after condition(s) met: N/A	MET <input type="checkbox"/>	NOT MET <input type="checkbox"/>
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**Standard 4: Supervision and assessment**

**Approved education institutions, together with practice learning partners, must:**

- R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC *Standards framework for nursing and midwifery education*
- R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC *Standards for student supervision and assessment*
- R4.3 ensure they inform the NMC of the name of the registered nurse or registered nursing associate responsible for directing the education programme
- R4.4 provide students with feedback throughout the programme to support their development
- R4.5 ensure throughout the programme that students meet the *Standards of proficiency for nursing associates*
- R4.6 ensure that all programmes include a health numeracy assessment related to nursing associate proficiencies and calculation of medicines which must be passed with a score of 100 percent
- R4.7 assess students to confirm proficiency in preparation for professional practice as a nursing associate
- R4.8 ensure that there is equal weighting in the assessment of theory and practice, and
- R4.9 ensure that all proficiencies are recorded in an ongoing record of achievement which must demonstrate the achievement of proficiencies and skills as set out in *Standards of proficiency for nursing associates*.

*Standards framework for nursing and midwifery education* specifically:

R2.11; R3.5, R3.6, R 3.8, R3.11, R3.13, R3.14, R3.17;  
R4.1, R4.2, R4.3, R4.4, R4.5, R4.6, R4.8, R4.11; R5.9

*Standards for student supervision and assessment*

R4.1 – R4.11

**Findings against the standards and requirements**

**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  NOT MET



R4.1 is met. Documentation and discussions at the approval visit confirm processes are in place to allow students to be supported, supervised, taught and assessed in all learning environments. SDC staff will carry out roles including academic assessor and link lecturer and the programme leader oversees these. The practice supervisor and practice assessor roles and responsibilities regarding student and apprentice support, supervision and assessment are outlined in the practice supervisor and assessor handbook.

SDC, PLPs and EPs confirm their staff are undergoing preparation for their roles of practice assessor and practice supervisor. They confirm arrangements to ensure adequate support, supervision, learning and assessment to comply with the SFNME (NMC, 2018). Documentation and discussions at the approval visit confirm that the preparation for academic assessor, practice supervisor and practice assessor roles will ensure their ability to respond to individual learning needs as well as provide supportive and objective supervision and assessment. Academic assessors, practice supervisors and practice assessors confirm that they're supported to undertake their roles, including how to deal with concerns and complaints about public protection and student/apprentice performance.

We're assured that students and apprentices will be allocated a different academic assessor for each part of the programme. Senior staff tell us that financial resources have been committed and work is in progress to recruit three additional NMC registered academic staff, including the programme leader. Arrangements are in place for the support and training needed to develop the academic assessor role. Current academic assessors confirm this.

Documentation and discussions at the approval visit show that students and apprentices will be allocated nominated practice supervisors, practice assessors and academic assessors. Alumni of the HEE TNA programme tell us they were supported by practice supervisors, practice assessors and academic assessors according to their learning needs and personal circumstances. Alumni of the HEE TNA programme also tell us that practice supervisors, practice assessors and academic assessors make reasonable adjustments where required.

Practice supervisors and practice assessors record regular feedback in the PAD and in supervision logs and learning contracts. Alumni of the HEE TNA programme also tell us that they were supported to reflect on their practice, including how their own mental health, physical health and wellbeing may affect their practice. Documentation and discussions at the approval visit show that in each placement, initial, midpoint and final interviews take place between the student or apprentice and the practice supervisor and/or practice assessor. These meetings allow for individual support needs and any additional learning needs to be discussed.

There's a student self-evaluation and feedback form which captures strengths and challenges considering feedback from practice supervisors and SUCs.

Documentation and discussions at the approval visit show that students and apprentices are provided with opportunities to give feedback to practice supervisors and practice assessors. Practice supervisors and practice assessors confirm that they use such feedback to enhance the effectiveness of their teaching, supervision and assessment.

The PAD evidences that the practice assessor will coordinate feedback from practice supervisors to confirm fitness for practice and eligibility for academic and professional award.

- 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 assessor along with how they will be prepared for their roles. (R4.2)

**MET**  **NOT MET**

R4.2 is met. Documentary evidence and discussion at the approval visit shows how preparation for the roles of practice supervisor, practice assessor and academic assessor is underway. Documentation and discussions during the approval visit show that the practice learning committee oversees implementation of the SSSA in practice.

The roles of practice supervisor, practice assessor, academic assessor and clinical education facilitator are defined in programme documentation. There's documentary evidence of how these roles will support student learning and development in theory and practice learning settings. Practice assessors and practice supervisors that have previously been sign-off mentors are invited to transition training. There are training resources for new practice assessors and practice supervisors.

Students will be supported in practice by a named practice supervisor in line with the SSSA and students will be assessed by a named practice assessor and academic assessor. SDC, PLPs and EPs tell us there's a rolling programme of practice supervisor, practice assessor and academic assessor updates to ensure that there will also be sufficient practice supervisors and practice assessors to meet future NA student numbers. Information about the structure and content of the NA programme is incorporated into joint preparation sessions for practice supervisors, practice assessors and academic assessors. External examiners will regularly visit placement areas as part of their external moderation responsibility.

Future practice supervisors and practice assessors are being prepared for their roles. This is led by the Devon training hub in collaboration with SDC, PLPs, EPs and other AEIs in the region. The PAD records student learning, assessment and progress throughout the programme. Introductory guidance details the role and responsibilities for practice supervisors and practice assessors.

The educational audit of practice placement areas is conducted biennially to monitor the quality of the practice learning environment, student support and the assessment of practice. SDC staff tell us that interim reviews of the educational suitability of a placement area may become necessary in response to triggers arising from hard and/or soft intelligence such as adverse CQC reports. The educational audit also identifies practice supervisors, practice assessors and the student capacity for each placement. This ensures that students are placed in clinical areas with adequate support. Academic assessors monitor and oversee the process for their designated practice areas. Interim reviews of the educational suitability of a placement area may become necessary in response to triggers arising from hard and/or soft intelligence. If the trigger is considered a safeguarding allegation, an immediate referral is made in accordance with local policy and procedures.

**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 or registered nursing associate responsible for directing the education programme. (R4.3)

YES  NO

R4.3 is not met. There's evidence that SDC has committed sufficient financial resource to support delivery of the programme. Recruitment and selection processes are in progress for the programme leader and two other whole time equivalent NMC registered academic staff. (Condition one)

**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  NOT MET

R4.4 is met. We find there's a learning and teaching strategy which includes details of formative and summative assessment methods. The range of formative and summative assessment strategies is detailed in the programme specification, module descriptors and student facing documents. Students tell us they receive timely feedback which supports their future learning and development in academic and practice settings. Documentation and discussions at the approval visit demonstrate that students achieving less than 50 percent in their first assessment at academic level four are actively followed up and provided with additional academic support.

Student feedback in the practice-learning environment is evident in the PAD, OAR (both formative and summative) and a skills log (formative). Academic staff and

students tell us formative feedback is provided within 48 hours and summative feedback within 20 working days following submission of academic work. There's a formative assessment feedback template and a summative assessment feedback template. This ensures consistency of the feedback provided to students between markers. Formative and summative assessments are outlined in the module descriptors and students confirm all their feedback is clear, timely and helpful in supporting their development. The programme team tell us formative assessments and VLE activities are used to prepare students for summative assessments. The programme team tell us the personal tutor meets with students weekly. We're also told records of meetings are made and filed on an SDC database. Students confirm this.

Service user feedback is provided through the PAD in each placement. All programme-learning outcomes are assessed in the summative assessments.

- There is appropriate mapping of the curriculum and practice learning placements to ensure throughout the programme that students meet the *Standards of proficiency for nursing associates*. (R4.5)

**MET**

**NOT MET**

R4.5 is met. There's appropriate mapping of curriculum and practice learning placements to ensure the SPNA (NMC, 2018) will be met. Documentary evidence confirms all modules in the proposed programme are mandatory. Compensation for summative assessments across theory and practice learning isn't permitted.

The PAD records student progress and learning in relation to the SPNA (NMC, 2018). The PAD includes sections for students to provide reflections on their progress and performance along with several action plans which enable them to focus on further development and ongoing learning needs. The PAD provides templates for the students to record and reflect on any learning undertaken in practice. The OAR summarises overall achievements and provides a comprehensive record of student development and overall performance. Practice supervisors record their decisions on progress and proficiency in this document.

Practice assessors and academic assessors make objective decisions about student progression and assessment in partnership with practice supervisors across the stages of the programme.

Documentation and discussion at the approval visit show that there are four tripartite meetings per year involving the academic assessor, with the practice supervisor and/or practice assessor and the student to review progress and identify objectives for progression in theory and practice. At the review the students are red-amber-green (RAG) rated. If progression isn't as expected a tripartite action plan is developed. On each placement, student progress will be discussed at initial, mid-point and final interview. For apprentices, progression is also discussed in tripartite meetings.

**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 associate proficiencies and calculation of medicines which must be passed with a score of 100 percent (R4.6)  
YES  NO

- There is an appropriate assessment strategy and process detailed. (R4.7)  
YES  NO

There is an assessment strategy with details of the weighting for all credit bearing assessments. Theory and practice weighting is calculated and detailed in award criteria and programme handbooks. (R4.8)  
YES  NO

- 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 nursing associates*. (R4.9)  
YES  NO

Assurance is provided that Gateway 1: [Standards framework for nursing and midwifery education](#) relevant to supervision and assessment are met  
YES  NO

Assurance is provided that Gateway 2: [Standards for student supervision and assessment](#) are met  
YES  NO

**Outcome**

**Is the standard met?** MET  NOT MET

Recruitment and selection processes are in progress for the programme leader.

Condition one: Appoint and provide the name and curriculum vitae of the registered nurse or registered nursing associate responsible for directing the education programme. (SPRNAP R4.3)

**Date:** 13 January 2021

**Post event review**

**Identify how the condition(s) is met:**

We received confirmation of appointment, name and curriculum vitae of the programme lead for the NA programme. The programme lead is a registered nurse with the NMC. Condition one is met.

Evidence:

Confirmation of appointment of NA programme lead and co-ordinator, 2 February 2021  
Curriculum vitae of the programme lead, undated  
Email confirmation that condition one and the college condition (condition two) are met, 10 February 2021

**Date condition(s) met:** 10 February 2021

**Revised outcome after condition(s) met:** MET  NOT MET

**Standard 5: Qualification to be awarded**

**Approved education institutions, together with practice learning partners, must:**

R5.1 ensure that the minimum award for a nursing associate programme is a Foundation Degree of the Regulated Qualifications Framework (England), which is typically two years in length, and

R5.2 notify students during the programme that they have five years in which to register their award with the NMC. In the event of a student failing to register their qualification within five years they will have to undertake additional education and training or gain such experience as is specified in our standards in order to register their award.

*Standards framework for nursing and midwifery education specifically R2.11, R2.20*

**Findings against the standards and requirements**

**Evidence provides assurance that the following QA approval criteria are met:**

- The minimum award for a nursing associate programme is a Foundation Degree of the Regulated Qualifications Framework (England) (R5.1)  
YES  NO
- Evidence that students are notified during the programme that they have five years in which to register their award with the NMC. In the event of a student failing to register their qualification within five years they will have to undertake additional education and training or gain such experience as is specified in our standards in order to register their award. (R5.2)  
YES  NO

**Fall Back Award**

If there is a fall-back exit award with registration as a nursing associate all NMC standards and proficiencies are met within the award

YES  NO  N/A

There's no fall-back award with NMC registration.

Assurance is provided that the [Standards framework for nursing and midwifery education](#) relevant to the qualification to be awarded are met

YES  NO

**Outcome**

Is the standard met?

MET  NOT MET

Date: 13 January 2021

**Post event review**

Identify how the condition(s) is met:

N/A

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

MET  NOT MET

N/A

**Section four**  
**Sources of evidence**

The following documentation provided by the AEI/education institution was reviewed by the visitor(s):

<b>Key documentation</b>	<b>YES</b>	<b>NO</b>
Programme document, including proposal, rationale and consultation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme documentation includes collaboration and communication arrangements with HE/FE partner if relevant	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme specification	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Module descriptors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student facing documentation including: programme handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student university handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student facing documentation includes HE/FE SDC information for students, if relevant	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice assessment documentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Ongoing record of achievement (ORA)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice learning environment handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice learning handbook for practice supervisors and assessors specific to the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Academic assessor focused information specific to the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Placement allocation / structure of programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PAD linked to competence outcomes, and mapped against standards of proficiency	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC, 2018) (Gateway 1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the <i>Standards for student supervision and assessment</i> (NMC, 2018) apply to the programme. (Gateway 2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education institution has met the <i>Standards for pre-registration nursing associate programmes</i> (NMC, 2018) (Gateway 3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Curricula vitae (CV) for relevant staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CV of the registered nurse or nursing associate responsible for directing the education programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Registrant academic staff details checked on NMC website	<input checked="" type="checkbox"/>	<input type="checkbox"/>



External examiner appointments and arrangements	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Written placement agreements between the education institution and associated practice learning partners to support the programme intentions, including a signed agreement for protected learning time.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Written agreement(s) to support the programme intentions between the education institution and employer partners for apprenticeship routes (if applicable).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation:		
List additional documentation: Documentation to evidence conditions met: Confirmation of appointment of NA programme lead and co-ordinator, 2 February 2021 Curriculum vitae of the programme lead, undated Email confirmation that condition one and the college condition (condition two) are met, 10 February 2021		
Additional comments: None identified.		

**During the event the visitor(s) met the following groups:**

	<b>YES</b>	<b>NO</b>
Senior managers of the AEI/education institution with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
HE/FE SDC senior managers, if relevant	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated practice learning partners with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated employer partners with responsibility for resources for the programme (applicable for apprenticeship routes)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme team/academic assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice leads/practice supervisors/practice assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, please identify cohort year/programme of study: HEE TNA alumni x two Apprentice hearing aid dispenser (level five) x four Apprentice hearing aid dispenser (level four) x one Direct entry trainee assistant practitioner (level four) x two Apprentice trainee assistant practitioner (level four) x one Apprentice trainee assistant practitioner (level five) x one		
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If you stated no to any of the above, please provide the reason and mitigation

Additional comments:  
None identified.

**The visitor(s) viewed the following areas/facilities during the event:**

	YES	NO
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Library facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Technology enhanced learning / virtual learning environment	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Educational audit tools/documentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice learning environments	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, state where visited/findings: Review of specialist teaching accommodation and library facilities at SDC undertaken remotely via photographs and videos. This included review of student support services and IT facilities. Review of practice learning environments at associated PLPs as listed in section one undertaken remotely via photographs and videos.		
System regulator reports reviewed for practice learning partners	<input checked="" type="checkbox"/>	<input type="checkbox"/>
System regulator reports list: University Hospitals Plymouth NHS Trust CQC inspection report, 18 December 2019 Livewell Southwest CQC inspection report, 3 January 2020 Torbay and South Devon NHS Foundation Trust CQC inspection report, 2 July 2020 Rowcroft Hospice CQC inspection report, 20 May 2016		
If you stated no to any of the above, please provide the reason and mitigation:		
Additional comments: None identified.		

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We accept no responsibility for the consequences of this document being relied

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**Issue record**

**Final Report**

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Checked by:	Ian Felstead-Watts	Date:	26 January 2021
Submitted by:	Lucy Percival	Date:	1 March 2021
Approved by:	Leeann Greer	Date:	3 March 2021