

Programme approval report

Section one

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| Programme provider name: | University of Southampton |
| In partnership with: <i>(Associated practice learning partners and/or employer partners involved in the delivery of the programme)</i> | University Hospital Southampton NHS Foundation Trust Portsmouth Hospitals University NHS Trust Salisbury NHS Foundation Trust Sussex Community NHS Foundation Trust |
| Programme reviewed: | Registered Midwife - 18M <input type="checkbox"/> Registered Midwife - 24M <input type="checkbox"/> Registered Midwife - 36M <input checked="" type="checkbox"/> Registered Midwife - degree apprentice <input type="checkbox"/> |
| Title of programme(s): | BSc (Hons) Midwifery |
| Academic levels: | |
| Registered Midwife - 18M | England, Wales, Northern Ireland <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11 |
| Registered Midwife - 24M | England, Wales, Northern Ireland <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11 |
| Registered Midwife - 36M | England, Wales, Northern Ireland <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11 |

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| Registered Midwife - degree apprentice | England, Wales, Northern Ireland <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11 | | | | |
| Date of approval visit: | 19 January 2021 | | | | |
| Programme start date: Registered Midwife – 18M Registered Midwife – 24 M Registered Midwife – 36 M Registered Midwife – degree apprentice | <table border="1" style="width: 100%; height: 100%;"> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;">6 September 2021</td></tr> <tr><td style="height: 20px;"> </td></tr> </table> | | | 6 September 2021 | |
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| 6 September 2021 | | | | | |
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| QA visitor(s): | Registrant Visitor: Jan Bowyer Lay Visitor: Sifelani Chikunya | | | | |

Section two

Summary of review and findings

The University of Southampton (UoS) school of health sciences (SHS) is an established and experienced approved education institution (AEI). The AEI present for approval a full-time undergraduate three-year pre-registration Bachelor of Science (BSc) (Hons) midwifery programme leading to professional registration as a midwife. The programme has a proposed annual intake of 35 students in September each year. There are named exit awards detailed for students who fail to complete the programme; these exit awards don't confer eligibility to apply for registration as a midwife with the Nursing and Midwifery Council (NMC). The comprehensive programme documentation supports the student journey in accordance with the Standards for pre-registration midwifery programmes (SPMP) (NMC, 2019).

There's evidence of effective partnerships between the AEI, students, and practice learning partners (PLPs) at both operational and strategic levels. Senior practice managers agree to support practice learning opportunities which will enable achievement of the Standards of proficiency for midwives (SPM) (NMC, 2019). Educational audits of practice areas used for student learning are undertaken by the AEI in order to determine suitability. PLPs tell us that any issues which arise from practice and risks to student practice learning are collaboratively managed.

The Standards for student supervision and assessment (SSSA) (NMC, 2018) have been in place since 2019 and are embedded in practice. There's evidence of good communication between academic assessors, practice assessors and practice supervisors in the assessment of student achievement.

The programme is adopting the NMC approved midwifery ongoing record of achievement (MORA) for recording practice assessment of the SPM. The MORA is the product of the midwifery practice assessment collaboration (MPAC) of midwifery education and practice providers across England and Northern Ireland. The lead midwife for education (LME) is involved in MPAC through the LME network. There are MPAC resources that support practice assessors and practice supervisors with MORA documentation.

The SHS has an expert by experience group (EbE) and the local NHS trust has a newly formed maternity voices partnership (MVP) group. Members of the EbE group are involved in the selection and admission processes and, in some of the scenarios, used in the teaching on modules. During the development of the programme, the team sought feedback from maternity service users (SUs) however the SUs we met aren't directly involved in the teaching and assessment on the programme.

The visit is undertaken remotely during the COVID-19 pandemic.

Arrangements at programme level don't meet the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018). Arrangements at programme level don't meet the SSSA.

The programme is recommended to the NMC for approval subject to two NMC conditions and two university conditions. One university recommendation is made.

Updated 15 February 2021:

UoS has provided documentation to meet condition two. Further evidence is required to meet condition one. UoS confirm the university conditions are met.

Updated 22 February 2021:

UoS has provided additional documentation to meet condition one.

The conditions are met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel

Recommended outcome to the NMC:

Programme is recommended to the NMC for approval

Programme is recommended for approval subject to specific conditions being met

Recommended to refuse approval of the programme

Conditions:

Effective partnership working: collaboration, culture, communication and resources:

Condition one: To produce an implementation plan, that ensures sustainable involvement of women, partners, families and advocacy groups in the delivery, assessment and evaluation of the midwifery programme. This must include evidence of suitable preparation (including equality and diversity training) for engagement with student recruitment and assessment. (SFNME R1.12, R2.7, R5.5, R5.14; SPMP R2.4)

Selection, admission and progression:

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| | <p>None identified.</p> <p>Practice learning:</p> <p>Condition two: In collaboration with PLPs, produce a plan for the preparation of academic assessors, practice assessors, practice supervisors and students for the use of the MORA. (SSSA R5.2, R8.4, R10.5; SPMP R4.2)</p> <p>Assessment, fitness for practice and award:</p> <p>None identified.</p> <p>Education governance: management and quality assurance:</p> <p>Condition three: Ensure programme documentation and regulations accurately reflects that the BSc (Hons) midwifery degree cannot be awarded without successfully completing the NMC practice requirements. (University condition)</p> <p>Condition four: Module profiles:</p> <ul style="list-style-type: none"> • Update module profiles to ensure consistency across the modules and remove references to internal repeat. • Year-long module, check that requirements have not been assessed in other modules. • Module NPMS3FFF evidence-based practice, the aim is listed as to carry out a project such as a literature review but learning outcome (LO) one and LO two require data collection and analysis. The aim needs to be revised so the LOs reflect this, or the LOs need adaptation to align with assessment method as unclear how these could be met solely through a literature review. (University condition) |
| <p>Date condition(s) to be met:</p> | <p>19 February 2021</p> |
| <p>Recommendations to enhance the programme delivery:</p> | <p>Recommendation one: In line with current best practice with regards to an inclusive autism curriculum, to update the profile pictures of the team</p> |

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| | to better assist with recognition of team members. (University recommendation) |
| Focused areas for future monitoring: | Maternity SU involvement. Practice supervision and assessment, including use of the MORA. |

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| Programme is recommended for approval subject to specific conditions being met | |
| Commentary post review of evidence against conditions: Additional and revised programme documentation provide evidence that the conditions are met. The SHS EbE strategic plan and revised midwifery SU implementation plan outline a timeline for how SU involvement will be sustained and strengthened. This includes evidence of suitable preparation including equality, diversity and inclusivity training for SU engagement with student recruitment and assessment. Condition one is met. A MORA implementation plan details the preparation of academic assessors, practice assessors, practice supervisors and midwifery students for the transition to the MORA from September 2021. Condition two is met. UoS confirm the university conditions are met. | |
| AEI Observations | Observations have been made by the education institution YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| Summary of observations made, if applicable | The AEI confirm the accuracy of the programme approval report. |
| Final recommendation made to NMC: | Programme is recommended to the NMC for approval <input checked="" type="checkbox"/> Recommended to refuse approval of the programme <input type="checkbox"/> |
| Date condition(s) met: | 22 February 2021 |

Section three

| NMC Programme standards |
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| <p>Please refer to NMC standards reference points Standards for pre-registration midwifery programmes (NMC, 2019) The Future midwife: Standards of proficiency for registered midwives (NMC, 2019) Standards framework for nursing and midwifery education (NMC, 2018) Standards for student supervision and assessment (NMC, 2018) The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates (NMC, 2015 updated 2018) Quality assurance framework for nursing, midwifery and nursing associate education (NMC, 2020) QA Handbook (NMC, 2020)</p> |
| Partnerships |
| <p>The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.</p> |
| <p>Please refer to the following NMC standards reference points for this section:</p> <p>Standards framework for nursing and midwifery education (NMC, 2018)</p> <p>Standard 1: The learning culture: R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders R1.13 work with service providers to demonstrate and promote inter-professional learning and working</p> <p>Standard 2: Educational governance and quality: 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 R2.4 comply with NMC Standards for student supervision and assessment 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 R2.6 ensure that recruitment and selection of students is open, fair and transparent and includes measures to understand and address underrepresentation R2.7 ensure that service users and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection</p> <p>Standard 3: Student empowerment:</p> |

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:

R1.4 there are suitable systems, processes, resources and individuals in place to ensure safe and effective coordination of learning within practice learning environments

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

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

There's evidence of effective stakeholder engagement with PLPs in the co-production of the three-year pre-registration midwifery programme. Documentary evidence demonstrates how the programme team have responded to feedback from PLPs. The committee meeting structures which exist provide frequent opportunities to share and develop good practice both with local PLPs and across the local region. These include governance meetings, such as the practice learning committee and non-governance meetings, including the learning environment leads network and placement partnership group across local AEIs. In addition, the deputy head of school and the director of learning in practice meet quarterly with senior PLP representatives. Senior practice managers tell us that they support practice learning opportunities which enable achievement of the SPM.

Documentary evidence and the approval visit confirms that during programme development the programme team sought feedback from maternity SUs. The team weren't able to provide the exact numbers of SUs who are directly and actively involved in programme development and delivery or their diversity representativeness. They tell us that they work closely with organisations who represent vulnerable and difficult to access groups of SUs. They tell us that members of the EbE group are involved in the selection and admission processes and in some of the scenarios used in teaching. The programme team describe how SU feedback is collected in practice assessments and in caseload learning activities. The programme team tell us it's their intention to have more maternity SU involvement in the programme assessments. Students describe how maternity SUs are involved in the programme, for example in selection interviews, in some lecture scenarios and at curriculum development meetings. SUs tell us that they

are given briefings on expectations during initial meetings prior to recruitment events. They tell us that UoS doesn't offer mandatory training, including equality and diversity training. SUs confirm they're not actively involved in programme delivery or assessment. The MVP chairperson confirms involvement in recent meetings with the programme team to discuss how SUs can work in partnership with them to expand the inclusion of SUs involvement in the programme. There's insufficient evidence of sustainable involvement of women, partners, families and advocacy groups and how they're prepared to be involved in the recruitment, delivery, assessment and evaluation of the programme. (Condition one)

Students, including student representatives, tell us about the programme development consultations and their involvement in curriculum development meetings during the design and development phases of the programme. Students describe examples of how their feedback has shaped the programme. They are complimentary about the programme and the high level of support and feedback they receive from the programme team. Students commend how reasonable adjustments are implemented in both theory and practice learning environments. They provide examples including dyslexia and autism support, and tell us about the role of autism ambassadors, wellbeing meetings with tutors and further support provided through weekly midwifery society meetings. Students provide examples of learning from and working with women and families from diverse backgrounds.

A biennial learning environment audit process ensures that practice learning environments are formally reviewed to ensure that they provide a quality learning experience and have sufficient staff to support students and facilitate their learning. Documentary evidence of completed educational audits and action plans confirm sound practice learning. UoS and practice staff are involved in the audit process and are responsible for ensuring that programme requirements are being met. Action plans arising from audits are reviewed on a six-monthly basis. PLPs tell us that any issues identified in practice learning environments and risks to student learning are collaboratively managed in partnership with UoS.

Student evaluation data is reviewed as part of the audit process and students are invited to participate in the audit meeting. Ongoing monitoring of student feedback and evaluation data allow both UoS and PLPs to identify areas of good practice and manage any areas of concern in a timely manner. There's a flowchart that clearly illustrates the SHS process for the management of reported incidents in practice. Students, practice assessors and practice supervisors tell us that they know how to raise concerns and receive sound support from UoS and PLPs when issues arise.

Regionally the SSSA was implemented from September 2019 and is well established. Regional AElS, PLPs and Health Education England (HEE) have worked collaboratively to co-produce a framework for the preparation of practice assessors, practice supervisors and academic assessors. Academic assessors, practice assessors, practice supervisors and students tell us that there's effective communication between them in the assessment of student achievement. PLPs

tell us that there's effective partnership working with the midwifery programme team through the LME and link lecturer role. The joint appointment of a midwifery teaching fellow is the result of collaborative working between the AEI and a local PLP organisation.

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**

There's no clear evidence of SU involvement in programme delivery and assessment or how they're prepared for their role. There's no evidence of formal SU equality and diversity training to support their involvement in the recruitment and assessment of students.

Condition one: To produce an implementation plan, that ensures sustainable involvement of women, partners, families and advocacy groups in the delivery, assessment and evaluation of the midwifery programme. This must include evidence of suitable preparation (including equality and diversity training) for engagement with student recruitment and assessment. (SFNME R1.12, R2.7, R5.5, R5.14; SPMP R2.4)

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:

Condition one: The SHS EbE strategic plan and revised midwifery SU implementation plan outline a timeline for how SU involvement will be sustained and strengthened. This includes evidence of suitable preparation including equality, diversity and inclusivity training. Within the implementation plan a SU engagement diagram illustrates SU involvement in programme recruitment, delivery, assessment and evaluation. There's evidence of how SUs are prepared and supported in their role. A training and development workshop for SUs will be held annually; this includes equality, diversity and inclusivity training. The programme team plan to expand the current number and representation of SUs through the establishment of a midwifery SU group. An EbE programme partner will be appointed and have representation at the SHS programme committee.

Condition one is met.

Evidence:

Response to the conditions, undated

Revised, response to condition one, undated

SHS EbE strategic plan, 2020-2022, undated

Revised, midwifery, SU implementation plan, 19 February 2021
SU engagement across the programme document, 7 September 2020
Admissions process for midwifery programme, October 2020

Date condition(s) met: 22 February 2021

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

Student journey through the programme

Standard 1: Selection, admission and progression

AEIs must:

- R1.1 appoint a lead midwife for education who is responsible for midwifery education in the AEI
- R1.2 inform the NMC of the name of the lead midwife for education
- R1.3 ensure recognition of prior learning is not permitted for pre-registration midwifery programmes

AEIs together with practice learning partners must:

- R1.4 ensure selection, admission and progression comply with the NMC Standards framework for nursing and midwifery education
- R1.5 confirm on entry to the programme that students:
 - R1.5.1 enrolled on pre-registration midwifery programmes are compliant with Article 40(2) of Directive 2005/36/EC regarding general education length or nursing qualification as appropriate outlined in Annexe 1 of this document
 - R1.5.2 demonstrate an understanding of the role and scope of practice of the midwife
 - R1.5.3 demonstrate values in accordance with [the Code](#)
 - R1.5.4 have capability to learn behaviours in accordance with the Code
 - R1.5.5 have capability to develop numeracy skills required to meet programme outcomes
 - R1.5.6 can demonstrate proficiency in English language
 - R1.5.7 have capability in literacy to meet programme outcomes
 - R1.5.8 have capability for digital and technological literacy to meet programme outcomes
- R1.6 support students throughout the programme in continuously developing their abilities in numeracy, literacy and digital and technological literacy to meet programme outcomes
- R1.7 ensure students' health and character are sufficient to enable safe and effective practice on entering the programme, throughout the programme and when submitting the supporting declaration of health and character in line with the [NMC Guidance of health and character](#). This includes satisfactory occupational health assessments and criminal record checks

- R1.8 ensure students are fully informed of the requirement to declare immediately any cautions, charges, conditional discharges or convictions and any adverse determinations made by other regulators, professional bodies and education establishments and that any declarations are dealt with promptly, fairly and lawfully
- R1.9 ensure the lead midwife for education, or their designated midwife substitute is able to provide supporting declarations of health and character for students who have successfully completed an NMC approved pre-registration midwifery programme, and
- R1.10 ensure NMC registered nurses entering a shortened pre-registration midwifery programme are a Registered nurse: first level (adult) and the programme complies with Article 40(1)(b) of Directive 2005/36/EC outlined in Annexe 1 of this document.

Note: Education institutions and their practice learning partners may propose to transfer current students onto the new programme to meet the [Standards for pre-registration midwifery programmes](#). If so, evidence must be provided to support this proposed transfer as part of the education institution’s mapping process at Gateway 3.

Proposed transfer of current students to the programme under review
Demonstrate a robust process to transfer current students onto the proposed programme to ensure programme learning outcomes and proficiencies meet the [Standards for pre-registration midwifery programmes](#) (NMC, 2019).

Proposed transfer of current students to the [Standards for student supervision and assessment](#) (NMC, 2018).
Demonstrate a robust process to transfer current students onto the [Standards for student supervision and assessment](#) (NMC, 2018).

Findings against the standard and requirements

Evidence provides assurance that the following requirements are met:

- R1.1 appoint a lead midwife for education who is responsible for midwifery education in the AEI
YES NO
- R1.2 inform the NMC of the name of the lead midwife for education
YES NO
- R1.3 ensure recognition of prior learning is not permitted for pre-registration midwifery programmes
YES NO

R1.4 ensure selection, admission and progression comply with the NMC Standards framework for nursing and midwifery education

YES NO

R1.5 confirm on entry to the programme that [students](#):

R1.5.1 enrolled on pre-registration midwifery programmes are compliant with Article 40(2) of Directive 2005/36/EC regarding general education length or nursing qualification as appropriate outlined in [Annexe 1](#) of this document

YES NO

R1.5.2 demonstrate an understanding of the role and scope of practice of the midwife

YES NO

R1.5.3 demonstrate values in accordance with the Code

YES NO

R1.5.4 have capability to learn behaviours in accordance with the Code

YES NO

R1.5.5 have capability to develop numeracy skills required to meet programme outcomes

YES NO

R1.5.6 can demonstrate proficiency in English language

YES NO

R1.5.7 have capability in literacy to meet programme outcomes

YES NO

R1.5.8 have capability for digital and technological literacy to meet programme outcomes

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 requirement below is met or not met

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

MET NOT MET

R1.6 is met. Digital and technological literacy are reflected in programme and module learning outcomes and assessment. Students demonstrate digital and technological literacy in all aspects of their learning; they are required to use the

virtual learning environment (VLE) Blackboard and utilise online resources and computer assisted assessments. The programme learning and teaching strategy includes synchronous and asynchronous activities, web-based learning and digital resources. Students confirm the extensive use of digital technology to support their learning and academic skills development. Literacy is developed and assessed through written assignments including essays, case studies and critical appraisal of literature. Students have access to safeMedicate and numeracy is summatively assessed in a drug calculation examination in each year of the programme. Digital literacy skills are developed and assessed in midwifery practice; these include the use of digital information and data recorded in the MORA. The final year module 'autonomous midwifery practice with continuity of carer experience' includes telehealth literacy development. Graduate attributes include the development of technological changes and using digital literacy to innovate improving health outcomes.

Evidence provides assurance that the following requirements are met

R1.7 ensure students' [health and character](#) are sufficient to enable safe and effective practice on entering the programme, throughout the programme and when submitting the supporting declaration of health and character in line with the [NMC Guidance of health and character](#). This includes satisfactory occupational health assessments and criminal record checks

YES NO

R1.8 ensure students are fully informed of the requirement to declare immediately any cautions, charges, conditional discharges or convictions and any adverse determinations made by other regulators, professional bodies and education establishments and that any declarations are dealt with promptly, fairly and lawfully

YES NO

R1.9 ensure the lead midwife for education, or their [designated midwife substitute](#) is able to provide supporting declarations of health and character for students who have successfully completed an NMC approved pre-registration midwifery programme, and

YES NO

R1.10 ensure NMC registered nurses entering a shortened pre-registration midwifery programme are a Registered nurse: first level (adult) and the programme complies with Article 40(1)(b) of Directive 2005/36/EC outlined in [Annexe 1](#) of this document.

YES NO

There's no shortened midwifery programme.

Proposed transfer of current students to the programme under review

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

Current student midwives, in the September 2020 and 2019 cohorts, are transferring into the second and third year respectively of the proposed programme. Students confirm that they've engaged in consultation and that they've agreed to the transfer.

Proposed transfer of current students to the *Standards for student supervision and assessment (SSSA) (NMC, 2018)*.

From your documentary analysis and your meetings at the approval visit confirm if students will be transferring to the SSSA, and if so that they have informed choice and are fully prepared for supervision and assessment.

The SSSA was implemented from September 2019 for all students undertaking the pre-registration midwifery programmes and is well established.

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: 19 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

AEIs together with practice learning partners must:

R2.1 ensure 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 programme learning outcomes reflect the *NMC Standards of proficiency for midwives*

R2.4 involve women, partners, families and advocacy groups in the design, development, delivery and evaluation of programmes

R2.5 ensure that programmes delivered in Wales comply with legislation which supports use of the Welsh language

R2.6 design and deliver programmes that support students and provide relevant and ongoing exposure to midwifery practice

R2.7 ensure technology-enhanced and simulated learning opportunities are used effectively and proportionately to support learning and assessment, including where clinical circumstances occur infrequently and a proficiency is required

R2.8 design curricula that provide an equal balance of 50 percent theory and 50 percent practice learning, using a range of learning and teaching strategies, and

R2.9 ensure NMC approved pre-registration midwifery education programmes are of sufficient length to enable students to meet the NMC Standards of proficiency for midwives and respective programme outcomes, and comply with Article 40 (1) and satisfy Article 41(1) of Directive 2005/36/EC (see Annexe 1) by meeting the following criteria:

R2.9.1 full time education and training as a midwife is a minimum of three years and 4,600 hours, or

R2.9.2 where a student is already registered with the NMC as a Registered nurse: first level (adult), full-time education and training as a midwife shall be a minimum of two years and 3,600 hours, or

R2.9.3 where a student is already registered with the NMC as a Registered nurse: first level (adult), full-time education and training as a midwife shall be a minimum of 18 months and 3,000 hours, and in order for the qualification to be recognised in EU member states it must be followed by a year of professional midwifery practice.

Findings against the standard and requirements

Evidence provides assurance that the following requirements are met

R2.1 ensure programmes comply with the NMC [Standards framework for nursing and midwifery education](#)

YES NO

R2.2 comply with the NMC [Standards for student supervision and assessment](#)

YES NO

R2.3 ensure that programme learning outcomes reflect relevant *Standards of proficiency for midwives*

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 requirement below is met or not met.

R2.4 involve women, partners, families and advocacy groups in the design, development, delivery and evaluation of programmes

MET **NOT MET**

R2.4 is not met. Documentary evidence and the programme team confirm that feedback from women, partners and the MVP group has informed programme development. The programme team tell us that members of the EbE group are involved in the selection and admission processes and in teaching scenarios on some modules. The programme team provide examples of SU involvement in the delivery of the programme including the human library, 'sisters' and 'stop the traffik' organisations. In the first year of the programme, the humanising safe and compassionate care module includes working with vulnerable groups, including people seeking asylum and refugees. Students tell us they receive SU feedback in practice assessments and in caseload learning activities.

One SU representative confirms involvement in curriculum development meetings, other SUs tell us that they're involved in student recruitment and selection panels. They tell us that UoS don't offer formal training and preparation to support them in this role. SUs tell us that they're not involved in the delivery and assessment of the programme. The MVP chairperson confirms involvement in recent meetings with the programme team to discuss how SUs can work in partnership with the UoS to expand the involvement of SUs in the programme. There's insufficient evidence of sustainable involvement of women, partners, families and advocacy groups and how they're prepared to be involved in the recruitment and assessment of students. (Condition one)

Evidence provides assurance that the following requirements are met

R2.5 ensure that programmes delivered in Wales comply with legislation which supports use of the Welsh language

YES **NO** **N/A**

The programme is delivered in England.

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

R2.6 design and deliver programmes that support students and provide relevant and ongoing exposure to midwifery practice

MET **NOT MET**

R2.6 is met. The SHS has a placement management system in place to ensure that all students have a range of placement experiences across a diverse range of midwifery practice. Students achieve the SPM in line with contemporary midwifery practice experiences. Partnership working with PLPs has ensured the SHS have a robust strategy in place to ensure that all students gain exposure to a range of experiences in practice learning environments. Midwifery students undertake six placement blocks, two each year. Students confirm that they have an appropriate range of practice learning experiences. They undertake most of their practice learning experience in local maternity services. Senior PLPs tell us they're committed to supporting practice learning opportunities which enable achievement of the SPM. Documentary evidence demonstrates ongoing plans to expand midwifery placement provision through further collaborative working with PLPs and local AEs.

Programme documentation identifies eight themes which are embedded in the design of the programme across all three years. The programme team and students tell us that these themes support practice-based learning. For example, the values-based enquiry journey includes seminars in each year of the programme, which integrate theory and practice, promote reflective practice and challenge students and others to achieve best practice.

R2.7 ensure technology-enhanced and simulated learning opportunities are used effectively and proportionately to support learning and assessment, including where clinical circumstances occur infrequently and a proficiency is required

MET **NOT MET**

R2.7 is met. Technology-enhanced and simulated learning opportunities are used effectively and proportionately to support learning and assessment. In year two the 'obstetric and neonatal emergencies' module requires students to develop the knowledge and skills to be an active team member during an obstetric and/or neonatal emergency through simulated practice. The summative assessment for this module includes an objective structured clinical examination (OSCE). In the 'enhanced postnatal and neonatal care' module, students are required to undertake a baby friendly initiative practical skills and simulation exercise. Simulation is used to support the development of newborn physical examination screening skills.

Practice skills are taught, and proficiencies achieved, in the practice learning environment. Against each proficiency, students record how they demonstrate that they've achieved the required outcomes in the MORA. This includes practice experience or achievement in other ways such as through discussion, demonstration, reflection or simulation. Simulation is specifically used to enable students to demonstrate the proficiencies that may be difficult to achieve, including for example physiological breech birth or manual removal of the placenta. Technology-enhanced and simulated learning opportunities are used to support preparation for practice, medicines management and drug administration.

R2.8 design curricula that provide an equal balance of 50 percent theory and 50 percent practice learning, using a range of learning and teaching strategies

MET **NOT MET**

R2.8 is met. The programme maintains 45 weeks of programmed activity for each year of the three-year full-time programme. It's been designed to ensure that there's an equal balance of theory and practice as evidenced in the programme planner. The practice hours requirement is a minimum of 2300 hours and comprises 50 percent of the total programme hours. Practice hours are recorded in the MORA and are verified and signed by practice supervisors.

A wide range of learning and teaching strategies support programme learning outcomes. Programme documentation outlines an experiential, problem solving learning approach through the use of student- and tutor-led tutorials and seminars, case-based learning, inter-professional and transdisciplinary learning and group work. A register of attendance in theory is maintained and students are required to make up the deficit in knowledge from missed sessions. A learning contract developed between personal academic tutors (PATs) and students is required if attendance is recorded as below 80 percent in a theory block or module. To support the monitoring of attendance, students must complete and submit an online weekly self-declaration.

Evidence provides assurance that the following requirements are met

R2.9 ensure NMC approved pre-registration midwifery education programmes are of sufficient length to enable students to meet the NMC Standards of proficiency for midwives and respective programme outcomes, and comply with Article 40 (1) and satisfy Article 41(1) of Directive 2005/36/EC (see Annexe 1) by meeting the following criteria:

R2.9.1 full time education and training as a midwife is a minimum of three years and 4,600 hours,

YES **NO**

R2.9.2 where a student is already registered with the NMC as a Registered nurse: first level (adult), full-time education and training as a midwife shall be a minimum of two years and 3,600 hours, or

YES **NO**

There's no shortened pre-registration midwifery programme.

R2.9.3 where a student is already registered with the NMC as a Registered nurse: first level (adult), full-time education and training as a midwife shall be a minimum of 18 months and 3,000 hours, and in order for the qualification to be recognised in EU member states it must be followed by a year of professional midwifery practice.

YES **NO**

There's no shortened pre-registration midwifery programme.

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

YES NO

There's no clear evidence of the involvement of women, partners, families and advocacy groups in programme delivery and assessment or how they're prepared for their role. There's no evidence of formal SU equality and diversity training to support their involvement in the recruitment and assessment of students.
(Condition one)

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

YES NO

Outcome

Is the standard met?

MET NOT MET

There's no clear evidence of the involvement of women, partners, families and advocacy groups in programme delivery and assessment or how they're prepared for their role. There's no evidence of formal SU equality and diversity training to support their involvement in the recruitment and assessment of students.

Condition one: To produce an implementation plan, that ensures sustainable involvement of women, partners, families and advocacy groups in the delivery, assessment and evaluation of the midwifery programme. This must include evidence of suitable preparation (including equality and diversity training) for engagement with student recruitment and assessment. (SFNME R1.12, R2.7, R5.5, R5.14; SPMP R2.4)

Date: 19 January 2021

Post event review

Identify how the condition(s) is met:

Condition one: The SHS EbE strategic plan and revised midwifery SU implementation plan outline a timeline for how SU involvement will be sustained and strengthened. This includes evidence of suitable preparation including equality, diversity and inclusivity training. Within the implementation plan a SU engagement diagram illustrates SU involvement in programme recruitment, delivery, assessment and evaluation. There's evidence of how SUs are prepared and supported in their role. A training and development workshop for SUs will be held annually; this includes equality, diversity and inclusivity training. The programme team plan to expand the current number and representation of SUs through the establishment of a midwifery SU group. An EbE programme partner will be appointed and have representation at the SHS programme committee.

Condition one is met.

Evidence:

Response to the conditions, undated

Revised, response to condition one, undated

SHS EbE strategic plan, 2020-2022, undated

Revised, midwifery, SU implementation plan, 19 February 2021

SU engagement across the programme document, 7 September 2020

Admissions process for midwifery programme, October 2020

Date condition(s) met: 22 February 2021

Revised outcome after condition(s) met:

MET **NOT MET**

Standard 3: Practice learning

AEIs together with practice learning partners must:

R3.1 provide practice learning opportunities that enable students to develop and meet the NMC Standards of proficiency for midwives

R3.2 ensure students experience the role and scope of the midwife enabling them to provide holistic care to women, newborn infants, partners and families

R3.3 provide students with learning opportunities to enable them to achieve the proficiencies related to interdisciplinary and multi-agency team working

R3.4 provide students with learning opportunities to enable them to achieve the proficiencies related to continuity of midwifery carer across the whole continuum of care for all women and newborn infants

R3.5 provide students with learning opportunities to experience midwifery care for a diverse population across a range of settings, including midwifery led services

R3.6 provide learning opportunities that enable students to develop the required knowledge, skills and behaviours needed when caring for women and newborn infants when complication and additional care needs arise, including as they relate to physical, psychological, social, cultural and spiritual

R3.7 take account of students' individual needs and personal circumstances when allocating their practice learning opportunities, including making reasonable adjustments for students with disabilities

R3.8 ensure students experience the range of hours expected of practising midwives, and

R3.9 ensure students are [supernumerary](#)

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 requirement below is met or not met.

R3.1 provide practice learning opportunities that enable students to develop and meet the NMC Standards of proficiency for midwives

MET **NOT MET**

R3.1 is met. Students achieve the SPM by undertaking an appropriate range of practice learning experiences. The SHS placement management system supports the allocation of placements to meet the requirements of the programme. The electronic system ensures that changes to service delivery can be updated in a timely manner. Practice learning opportunities include experiences of community and hospital-based midwifery care and midwifery-led birth centres. Students tell us that the neonatal unit experience and access to specialist midwives and health visitors supports their professional development. Undertaking a placement in a neonatal unit supports the development of the SPM domain four ensuring that students have exposure to additional care for newborn infants with complications. The MORA provides a record of student development and achievement of the SPM.

Senior PLPs tell us that they support practice learning opportunities that facilitate achievement of the SPM. PLPs confirm that they work in partnership with UoS to ensure practice learning environments are safe and appropriate for students. Students confirm that they gain practice experiences in local maternity services and tell us that they have an appropriate range of practice experiences to meet the SPM.

R3.2 ensure students experience the role and scope of the midwife enabling them to provide holistic care to women, newborn infants, partners and families

MET **NOT MET**

R3.2 is met. Documentary evidence and the approval visit demonstrates that students experience the role and scope of the midwife in a variety of practice learning environments that enable them to provide holistic care to women, newborn infants, partners and families. Students confirm this and tell us that they are well supported to provide holistic midwifery care. Students have additional support from professional midwifery advocates to enable them to explore further the role and scope of the midwife in practice.

R3.3 provide students with learning opportunities to enable them to achieve the proficiencies related to interdisciplinary and multi-agency team working

MET **NOT MET**

R3.3 is met. There are SHS-wide theoretical modules in each part of the midwifery programme that provide students with learning opportunities to enable them to achieve the proficiencies related to interdisciplinary and multi-agency team working. The modules are taught across all pre-registration nursing, midwifery and allied health programmes with seminars, group work and assessments undertaken in small mixed profession groups or together for shared teaching.

All students are encouraged to work with a multitude of healthcare practitioners in both community and hospital settings, as evidenced in the audits of practice learning environments. The community needing extra support continuity of carer teams (NEST) offer students the opportunity to work and experience multi-agency approaches to care provision. This includes a range of health and social care professionals including social workers, the police, probation and prison officers, general practitioners, specialist community public health nurses, family nurse partnership teams and obstetricians. Students confirm that they value the inter-professional learning opportunities available through working with NEST. Students attend practical obstetric multi-professional training in trust organisations. This involves obstetric emergency training scenarios in clinical practice, with practitioners working together to enhance real-life practice outcomes through rehearsal. Students are encouraged to attend trust multi-professional audits and clinical review sessions held each month either virtually or within a teaching space. Interdisciplinary and multi-agency team working experiences are recorded in the MORA.

R3.4 provide students with learning opportunities to enable them to achieve the proficiencies related to continuity of midwifery carer across the whole continuum of care for all women and newborn infants

MET **NOT MET**

R3.4 is met. Continuity of midwifery carer is embedded in all modules as a key midwifery philosophy. Students undertake a minimum of five caseloads within the programme. There's comprehensive student midwife caseload holding documentation to support these learning opportunities, including client consent and risk assessment. The continuity of midwifery carer extends across the whole continuum of care for all women and newborn infants. This is particularly evident in the third year in the 'autonomous midwifery practice with continuity of carer experience' module and within the physical examination of the newborn practice document, where students perform a holistic approach to care for their caseload. The MORA reflects a continuity of carer approach.

In 2019, as part of the HEE agenda, members of the teaching team delivered a two-day nationwide continuity of carer training event. The training is provided to student midwives in the final year of the programme.

R3.5 provide students with learning opportunities to experience midwifery care for a diverse population across a range of settings, including midwifery led services

MET **NOT MET**

R3.5 is met. Throughout the programme students are exposed to learning opportunities to experience midwifery care for diverse populations across a range of settings, including midwifery led services. Diversity is introduced in the 'humanising safe and compassionate midwifery care' module in year one. Throughout the three-year values-based enquiry journey, students are encouraged

to reflect on their own values and beliefs in order to consider enhanced care provision. Students confirm that they are able to gain most of their practice experience in local maternity services. Students have exposure to a diverse local population whose first language isn't English. There are geographical areas across the locality that include travelling communities, asylum seekers, women and families who require additional health and social care support.

R3.6 provide learning opportunities that enable students to develop the required knowledge, skills and behaviours needed when caring for women and newborn infants when complication and additional care needs arise, including as they relate to physical, psychological, social, cultural and spiritual factors

MET **NOT MET**

R3.6 is met. In years two and three of the programme, students develop the required knowledge, skills and behaviours needed when caring for women and newborn infants when complication and additional care needs arise. Documentary evidence confirms that modules include content to ensure students learn about the additional care needs of both women and the newborn infant. These include additional care needs antenatal and intrapartum, obstetric and neonatal emergencies, enhanced postnatal and neonatal care, autonomous midwifery practice with continuity of carer experience and practice modules. The programme team and students confirm that they develop the required knowledge, skills and behaviours needed to care for women and newborn infants when complications and additional care needs arise. They describe how students are provided with these learning opportunities through NEST, neonatal unit experience, access to specialist midwives and fetal medicine.

R3.7 Take account of students' individual needs and personal circumstances when allocating their practice learning opportunities, including making reasonable adjustments for students with disabilities

MET **NOT MET**

R3.7 is met. The UoS has robust policies and guidance on reasonable adjustments, including support for specific learning needs. The programme team has two autism ambassadors and the curriculum reflects an inclusive approach. All students are required to complete a practice placement student information form annually. If there's any exceptional circumstances that affect students' practice learning experience, they have the opportunity to request a review of their allocated placement. This enables consideration of personal circumstances when planning placement allocations. Practice assessors are directed to UoS resources associated with reasonable adjustments for students with disabilities. The MORA includes information about reasonable adjustments.

Documentary evidence, students, PLPs and the programme team, confirm that the practice learning environment allocation for midwifery students considers individual student needs. Students tell us about the importance of regular consultation meetings with PATs in relation to the operation of reasonable adjustments required

in the programme. They describe examples of occasions where individual student needs are taken into consideration, including making reasonable adjustments for disabilities and carer responsibilities. Student tell us how adjustments are made in placement shift patterns to take account of pregnancy and how childcare issues are supported through placement adjustments. Students tell us how UoS have supported them through challenges, ensuring they could continue on the programme. The operation of a reasonable adjustments process also applies to theory learning elements of the programme. Students tell us that where they had disclosed personal academic learning needs, they were well supported. They describe examples of the dyslexia support, the provision of extra-time in assessments and the signposting to additional help. Students commend the level of feedback provided for assignments, including annotation of feedback on scripts and the ability to be able to meet to discuss their individual feedback.

Evidence provides assurance that the following requirements are met

R3.8 ensure students experience the range of hours expected of practising midwives YES NO

R3.9 ensure students are [supernumerary](#) YES NO

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: 19 January 2021

Post event review

Identify how the condition(s) is met

N/A

Date condition(s):

N/A

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

N/A

Standard 4: Supervision and assessment

AEIs together with practice learning partners must:

- R4.1 ensure that support, supervision, learning opportunities and assessment complies with the NMC [Standards framework for nursing and midwifery education](#)
- R4.2 ensure that support, supervision, learning opportunities and assessment complies with the NMC [Standards for student supervision and assessment](#)
- R4.3 ensure throughout the programme that students meet the NMC Standards of proficiency for midwives and programme outcomes
- R4.4 provide students with feedback throughout the programme to support their development
- R4.5 ensure all programmes include a specific focus on numeracy assessment related to the midwifery proficiencies and the calculation of medicines, which must be passed with a score of 100 percent
- R4.6 assess students to confirm proficiency in preparation for professional practice as a midwife
- R4.7 ensure all proficiencies are recorded in an ongoing record of achievement, which must demonstrate the achievement of proficiencies and skills set out in the NMC Standards of proficiency for midwives, and
- R4.8 ensure the knowledge and skills for midwives set out in Article 40(3) and the activities of a midwife specified in Article 42 of Directive 2005/36/EC have been met as outlined in [Annexe 1](#) of this document

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 requirement below is met or not met

- R4.1 ensure that support, supervision, learning opportunities and assessment complies with the NMC [Standards framework for nursing and midwifery education](#)

MET **NOT MET**

R4.1 is met. The UoS has a wide range of support services available including support for health and wellbeing, information technology, enabling services and library services. Students have the support of PATs who provide continuity of support and direct students to support services. Students have access to a PAT essential guide that clearly details the PAT role and how support services can be accessed. During the theoretical component of the programme, students are supported by academic staff who are predominantly NMC midwifery registrants, as evidenced by staff curricula vitae. Academic assessors are embedded in

programme delivery and are well placed to support students. There's a culture of safe, effective learning with attention to individual student need.

The curricula and assessments are designed to ensure that the programme learning outcomes and the SPM are met. The assessment strategy is varied and includes written coursework, presentations, OSCEs and critical literature reviews. Summative assessments enable students to demonstrate achievement of module and programme learning outcomes. Student self-reflections contribute to, and are evidenced in, assessments including reflective essays and case studies. Students are required to reflect on practice learning and achievement in the MORA. Assessment is used throughout the programme to determine student progression at examination boards.

Students are supported in practice by PLPs in accordance with practice placement agreements. Documentary evidence shows that educational audits of placement areas are completed biennially, demonstrating quality assurance of maternity placement areas. PLP representatives tell us that there's effective liaison with the UoS and there's a collaborative approach to the support, supervision, learning opportunities and assessment of students.

R4.2 ensure that support, supervision, learning opportunities and assessment complies with the NMC [Standards for student supervision and assessment](#)

MET **NOT MET**

R4.2 is not met. Led by HEE appointed practice learning fellows, UoS has worked collaboratively with other AElS and PLPs to co-produce a framework for the preparation of practice assessors, practice supervisors and academic assessors to support the implementation of SSSA. Practice assessors, practice supervisors and academic assessors tell us that this approach works effectively and enhances the support, supervision and assessment of student midwives. The LME describes how joint decision-making informs the outcome for students who are failing to achieve in practice. Practice assessors tell us that the development of a learning agreement between failing students, practice assessors and academic assessors supports them. They tell us that they value the support of the academic assessor in this decision-making process.

PLP representatives confirm that there are sufficient and appropriate resources in practice learning environments to support the programme. Senior PLPs provide assurance that there are sufficient practice assessors and practice supervisors to support the proposed number of student midwives. SHS staff and PLPs tell us about how the assessment and supervision model is being adopted. The appointment of a clinical teaching fellow who will spend up to 30 percent of their role working with students, practice assessors and practice supervisors in the practice learning environment ensures that the SSSA is robustly operationalised.

The MORA sets out the roles and responsibilities of practice assessors, practice supervisors and academic assessors. A framework has been developed to support

supervision and assessment, which is shared across local AEIs. This is supplemented by MPAC resources that support practice assessors and practice supervisors with MORA documentation. Practice assessors, practice supervisors and students tell us that they've not accessed this documentation or been prepared to use the MORA. The programme team confirm that MORA preparation in practice learning environments hasn't been implemented. The programme team must produce a plan that details how academic assessors, practice assessors, practice supervisors and students will be prepared for using the MORA. (Condition two)

R4.3 ensure throughout the programme that students meet the NMC Standards of proficiency for midwives and programme outcomes

MET **NOT MET**

R4.3 is met. The programme learning outcomes are derived from and are mapped to the SPM. In order to ensure that students achieve the programme learning outcomes, these are further mapped against the module assessments. All modules within the programme are core and must be achieved.

In addition to the mapping documents, students are explicitly assessed against the SPM and must achieve all of the skills and linked proficiencies at the required level in the final year of the programme. Student performance and achievement is recorded in the MORA. Practice assessors review student progress at specific points during the year and complete a final summative holistic assessment at the end of the placement. Academic assessors collate and confirm student achievement of proficiencies and programme outcomes and make recommendations for progression in partnership with practice assessors.

R4.4 provide students with feedback throughout the programme to support their development

MET **NOT MET**

R4.4 is met. The UoS has an education strategy that's reflected in the SHS approach to learning and teaching, as set out throughout the midwifery curriculum. In designing the assessment and feedback strategy, the programme team have drawn on engagement with the UoS wide community of practice and the recommendations through the UoS centre for higher education practice. Assessment is sequential and the strategy is designed to ensure that students build, and gain feedback on, key skills throughout the programme, whilst experiencing an appropriate range of assessment strategies.

The midwifery programme team have completed postgraduate awards in education in order to prepare them for their role as academic assessors, in conducting assessment and providing constructive feedback. All theoretical modules have formative and summative feedback opportunities stated within the module profiles and summarised in the assessment mapping document. Students confirm that they receive appropriate feedback to support their development.

In the practice learning environment, students have formative and summative assessment outcomes recorded in the MORA. The review process ensures that students receive regular feedback on their progress prior to the summative assessment. There's a minimum of nine review points over the three years, in addition to initial meeting reviews.

Evidence provides assurance that the following requirements are met

R4.5 ensure all programmes include a specific focus on numeracy assessment related to the midwifery proficiencies and the calculation of medicines, which must be passed with a score of 100 percent

YES NO

R4.6 assess students to confirm proficiency in preparation for professional practice as a midwife

YES NO

R4.7 ensure all proficiencies are recorded in an ongoing record of achievement, which must demonstrate the achievement of proficiencies and skills set out in the NMC Standards of proficiency for midwives, and

YES NO

R4.8 ensure the knowledge and skills for midwives set out in Article 40(3) and the activities of a midwife specified in Article 42 of Directive 2005/36/EC have been met as outlined in [Annexe 1](#) of this document

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](#) relevant to supervision and assessment are met

YES NO

It's not clear how academic assessors, practice assessors, practice supervisors and students will be prepared for the implementation and use of the MORA. (Condition two)

Outcome

Is the standard met?

MET NOT MET

There are MPAC resources that support academic assessors, practice assessors and practice supervisors with MORA documentation. However, practice assessors,

practice supervisors and students tell us that they've not been prepared for the implementation and use of the MORA.

Condition two: In collaboration with PLPs, produce a plan for the preparation of academic assessors, practice assessors, practice supervisors and students for the use of the MORA. (SSSA R5.2, R8.4, R10.5; SPMP R4.2)

Date: 19 January 2021

Post event review

Identify how the condition(s) is met:

Condition two: An implementation plan provides a detailed timeline for preparation for the transition to the MORA. This includes the preparation of academic assessors through midwifery programme team meetings. The plan details how practice assessors and practice supervisors will engage in learning resources, including a series of online training videos and social media posts. Practice assessors and practice supervisors will be supported through site visits and weekly drop-in clinics. A training session and online video will be made available to students and practice staff to support the implementation of MORA. Specific teaching sessions for students on the use of the MORA documentation will be undertaken two months before they undertake their first practice learning placement. A forum on the VLE Blackboard will host frequently asked questions and students can access the weekly drop-in clinics in the practice learning environment.

Condition two is met.

Evidence:
MORA implementation plan, 27 January 2021

Date condition(s) met: 22 February 2021

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

Standard 5: Qualification to be awarded

AEIs together with practice learning partners must:

- R5.1 ensure that the minimum award for a pre-registration midwifery programme is at bachelor's degree level
- R5.2 notify students during and before completion of the programme that they have [five years](#) to apply to register with the NMC if they wish to rely on this qualification¹. 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 specified in our standards.

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

Findings against the standards and requirements

Evidence provides assurance that the following requirements are met:

R5.1 ensure that the minimum award for a pre-registration midwifery programme is at bachelor's degree level

YES NO

R5.2 notify students during and before completion of the programme that they have [five years](#) to apply to register with the NMC if they wish to rely on this qualification². 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 specified in our standards.

YES NO

Fall Back Award

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

YES NO N/A

There are no fall back exit awards that lead to eligibility to apply for registration as a midwife.

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: 19 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):

| Key documentation | YES | NO |
|---|-------------------------------------|--------------------------|
| Programme document, including proposal, rationale and consultation | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Programme specification(s) | <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"/> |
| 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 <i>Standards of proficiency for midwives</i> | <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 (NMC, 2018) (Gateway 1)</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Mapping document providing evidence of how the <i>Standards for student supervision and assessment (NMC, 2018) apply to the programme(s) (Gateway 2)</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Mapping document providing evidence of how the education institution has met the <i>Standards for pre-registration midwifery programmes (NMC, 2019) (Gateway 3)</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Curricula vitae (CV) for relevant staff | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| CV of the LME | <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 supernumerary agreement. | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If you stated no above, please provide the reason and mitigation: | | |

List additional documentation:
 Post visit documentation:
 UoS, programme approval report, undated
 Response to the conditions, undated
 Revised, response to condition one, undated
 SHS EbE strategic plan, 2020-2022, undated
 Revised, midwifery, SU implementation plan, 19 February 2021
 SU engagement across the programme document, 7 September 2020
 Admissions process for midwifery programme, October 2020
 MORA implementation plan, 27 January 2021
 Revised, module profile, an introduction to professional practice (BSc), 11 February 2021
 Revised, module profile, obstetric and neonatal emergencies, 11 February 2021
 Revised, module profile, practice experience one, 11 February 2021
 Revised, module profile, practice experience two, 11 February 2021
 Revised, module profile, practice experience three, 11 February 2021
 Revised, module profile, practice experience four, 11 February 2021
 Revised, module profile, practice experience five, 11 February 2021
 Revised, module profile, research methods, 11 February 2021
 Revised, module profile, year requirement module one, 11 February 2021
 Revised, module profile, year requirement module two, 11 February 2021
 Revised, module profile, influencing innovation and change (level six), 11 February 2021
 Revised, module profile, midwifery professional development, 11 February 2021
 Revised, module profile, health sciences for midwifery practice, 11 February 2021
 Revised module profile, humanising safe and compassionate care, 11 February 2021
 Revised, module profile, respectful universal midwifery care, 11 February 2021
 Revised, module profile, additional care needs - antenatal and intrapartum, 11 February 2021
 Revised, module profile, enhanced postnatal and neonatal care, 11 February 2021
 Revised, module profile, evidence-based midwifery practice, 29, January 2021
 Revised, programme specification, undated
 Learning placement charter, undated

Additional comments:

None identified.

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

| | YES | NO |
|--|-------------------------------------|--------------------------|
| Senior managers of the AEI/education institution with responsibility for resources for the programme | <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 type="checkbox"/> | <input checked="" 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: Year one, midwifery x two Year two, midwifery x two Year three, midwifery x four | | |
| Service users and carers | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If you stated no above, please provide the reason and mitigation No apprenticeship route is being considered for approval. | | |
| 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 type="checkbox"/> | <input checked="" type="checkbox"/> |
| Library facilities | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Technology enhanced learning Virtual learning environment | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Educational audit tools/documentation | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Practice learning environments | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes, state where visited/findings: | | |
| System regulator reports reviewed for practice learning partners | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| System Regulator Reports List: Care Quality Commission, quality report, Hampshire Hospitals NHS Foundation Trust, 7 April 2020 | | |
| If you stated no above, please provide the reason and mitigation: This is an established AEI and visits to facilities weren't needed. | | |
| Additional comments: None identified. | | |

Mott MacDonald Group Disclaimer

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We accept no responsibility for the consequences of this document being relied upon by any other party, or being used for any other purpose, or containing any error or omission which is due to an error or omission in data supplied to us by other parties.

Issue record

Final Report

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|---------------|-------------------|-------|-----------------|
| Author(s): | Janette Bowyer | Date: | 28 January 2021 |
| Checked by: | Bernadette Martin | Date: | 5 February 2021 |
| Submitted by: | Amy Young | Date: | 10 March 2021 |
| Approved by: | Leeann Greer | Date: | 11 March 2021 |