

Emergency standards for nursing and midwifery education

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Introduction

In response to the current ongoing Covid-19 situation, we have developed a number of emergency programme standards.

These standards aim to provide approved education institutions (AEIs) and practice learning partners with the flexibility to enable students within their final six months of their pre-registration nursing and midwifery programmes to complete their training within clinical placements, while ensuring all learning outcomes are met. This will enable these students to help support the workforce, and make use of the knowledge and skills that they have developed. Through these standards we are also allowing for flexibility in the way in which students are supervised, ensuring that they have the appropriate support, supervision, teaching and assessment during this period to enable them to provide safe and effective care.

We have also developed a small number of emergency programme standards for all other student nursing and midwifery groups to continue with their nursing and midwifery programme of study and where possible support the workforce.

These emergency standards are intended to be facilitative and not directive and these standards do not require AEIs or individual students to change their current programmes.

These standards are temporary and will no longer apply after the emergency period.

The following applies to students in the final six months of their pre-registration undergraduate and post-graduate nursing and midwifery programmes.

Emergency standard

E1. Students in the final six months of their pre-registration undergraduate or postgraduate nursing or midwifery programmes may complete their programmes in clinical placements, while ensuring all learning outcomes are met.

Superseded standard/s

Standards for pre-registration nursing education (2010):

Approaches to learning (pg. 9)

Overall the programme requires 50 percent theory (2,300 hours) and 50 percent practice (2,300 hours), with some flexibility in each part of the programme. AElS determine the nature of theoretical learning, which may include independent study. As outlined above, learning in theory and practice for students intending to enter the adult field must comply with EU directives.

R5.2.3 AElS must ensure there are at least 2,300 hours of practice learning.

Overall the programme requires 50 percent theory (2,300 hours) and 50 percent practice (2,300 hours), with some flexibility in each part of the programme. AElS determine the nature of theoretical learning, which may include independent study.

R5.3.4 Programme providers must ensure that there is a period of practice learning of at least 12 weeks towards the end of the programme.

R5.3.5 Programme providers must ensure that the 12-week period of practice learning enables safe judgements to be made regarding the achievement of the required standards of competence for safe and effective practice for entry to the NMC register.

R5.3.6 Programme providers must ensure an equal balance between theory and practice learning is achieved by the end of the programme.

Standards for pre-registration midwifery education (2009, p19):

Standard 12 – Balance between clinical practice and theory

Since September 2008, the practice to theory ratio of each programme is required to be no less than 50 percent practice and no less than 40 percent theory. The clinical practice experience must be sufficient to enable students to achieve the standards required by the NMC.

Standards for pre-registration nursing programmes (2018):

2. Curriculum

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

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

Rationale

To enable students within their final six months to complete their studies in practice we are removing the requirement that the programmes have a fifty percent split between practice and theory for these students.

By completing their studies in practice for six months this may result in some programmes having a greater than fifty percent weighting towards practice. We would still require all of the learning outcomes to be met.

Emergency standard

E1.1 Students must not have spent more than two thirds of the 4,600 programme hours on practice placement.

Superseded standard/s

N/A

Rationale

While we have removed the 50 percent weighting which is defined in our standards, all courses must still comply with the minimum training requirements under EU legislation. This standard therefore reinforces the need to comply with the 4,600 programme hours, and two thirds weighting outlined within the EU directive which we have no legal power to change or waive.

Emergency standard

E1.2 Students finishing their programme in placements under standard E1 will be provided with protected learning time.¹

Superseded standard/s

Standards for pre-registration nursing education (2010):

R4.6.1 Programme providers must ensure that students are supernumerary during all practice learning. Supernumerary means that the student will not, as part of their programme of preparation, be contracted by any person or body to provide nursing care.

Standards for pre-registration nursing programmes (2018):

3. Practice learning

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

3.7 ensure that students are supernumerary.

Rationale

It is acknowledged that during the state of emergency and the pressures on the health and care workforce that supernumerary status of students may not be possible. We are therefore removing that requirement. However, to ensure students still get the support and supervision they need to learn, protected learning time must be provided.

¹ The level of supervision a student needs is based on the professional judgement of their supervisors, taking into account any associated risks and the students' knowledge, proficiency and confidence.

The following applies to second year students, third and/or final year students on their first six months of study and first year postgraduate students of nursing and midwifery programmes.

Emergency standard

E2. Second year students, third and/or final year students on their first six months of study and first year postgraduate students may spend no more than 80 percent of their hours in clinical placements and 20 percent of their hours in theoretical learning.

Superseded standard/s

N/A

Rationale

To enable second year students, third and/or final year students on their first six months of study and first year postgraduate students to continue their studies we are supporting AEl's to be able to adapt their programmes in a way that supports students and student learning and offers flexibility for the workforce.

By continuing to have 20 percent of theory, learning programmes and providers can continue to provide theoretical learning to students and supported reflective learning opportunities.

This will provide students with the means of receiving ongoing learning and support in their academic studies and support from their lecturers.

Continuing their studies in practice for 80 percent of the time during the period of emergency may result in some programmes having a greater than 50 percent weighting towards practice.

We would still require all of the learning outcomes to be met and hours to be adjusted following the end of the state of emergency in line with the requirements of E1.1 and the subsequent return to our published standards. All courses must still comply with the minimum training requirements under EU legislation. This standard therefore reinforces the need to comply with the 4,600 programme hours, and two thirds weighting outlined within the EU directive which is not within our gift to change.

Emergency standard

E.2.1 Students continuing their programme in placements under standard E2 will be provided with protected learning time.

Superseded standard/s

N/A

Rationale

It is acknowledged that during the state of emergency and the pressures on the health and care workforce, supernumerary status of students may not be possible. We are therefore removing that requirement. However, to ensure students still get the support and supervision they need to learn, protected learning time must be provided.

These students will continue to have theoretical learning for 20 percent of their programme.

The following applies to first year students in their pre-registration undergraduate nursing and midwifery programmes.

Emergency standard

E3. Students in the first year of pre-registration undergraduate programmes who continue with their nursing and midwifery programme may spend 100 percent of their programme in theory/academic learning.

Superseded standard/s

N/A

Rationale

It is acknowledged that during the state of emergency and the pressures on the health and care workforce, supervision and support for first year students may not be possible.

First year nursing and midwifery students' clinical placements can be paused for the duration of the state of emergency. We want to encourage students to continue with their studies and in doing this students can focus on the theoretical aspect of their learning.

We would still require all of the learning outcomes to be met and hours to be adjusted following the end of the state of emergency in line with the requirements of E1.1 and the subsequent return to our published standards. All courses must still comply with the minimum training requirements under EU legislation. This standard therefore reinforces the need to comply with the 4,600 programme hours, and two thirds weighting outlined within the EU directive which is not within our gift to change.

We acknowledge that nursing and midwifery students may volunteer or undertake paid work in their spare time, while they maintain their academic/theoretical study.

Volunteering or paid work will not be counted towards the practice hours and experience required to complete their pre-registration course.

The following applies to all programmes

Emergency standard

E4. Ensure placement allocations take account of current, relevant public health guidelines with due regard to the health and well-being of individual students.

Superseded standard/s

N/A

Rationale

Institutions and their practice learning partners will need to work with their students to find appropriate placements, and ensure that students with underlying health conditions, for example, are not negatively impacted by these changes. This is also underpinned by our other standards which require that institutions should be actively supporting their students' health and well-being at all times.

Emergency standard

E5. All students will receive support, supervision and assessments in line with the *Standards for Student Supervision and Assessment* (SSSA, 2018).

Superseded standard/s

Standards to support learning and assessment in practice (SLAiP, 2008):

All standards

Rationale

We are suspending our *Standards for support, learning and assessment in practice*. All of those programmes which have not yet moved to the *Standards for Student Supervision and Assessment* (SSSA) will need to immediately adopt these standards.

The SSSA standards allow for greater flexibility, by allowing any registered health or social care professional to supervise students. In a period where it is expected the workforce will be under extreme pressure this will help ensure students have the appropriate supervision and support.

Emergency standard

E5.1 Exceptionally, the same person may fulfil the role of practice supervisor and practice assessor during this emergency period. The assessment is to be conducted by a registered nurse, midwife or nursing associate with suitable equivalent qualifications for the programme the student is undertaking, and who is not on a temporary register.

Superseded standard/s

Standards for student supervision and assessment (SSSA, 2018):

Assessment of students and confirmation of proficiency

7.10 practice assessors are not simultaneously the practice supervisor and academic assessor for the same student.

Rationale

In line with our new prescribing standards we are exceptionally allowing a practice supervisor to also fulfil the role of practice assessor. This flexibility should help remove additional burden on the workforce at this time while still ensuring appropriate support and assessment for students.

Emergency standard

E6. Theoretical instruction can be replaced with distance learning, where appropriate to support student learning, which meets the required theoretical hours and learning outcomes.

Superseded standard/s

N/A

Rationale

This standard reinforces that institutions may undertake theoretical instruction through distance learning where appropriate.

Emergency standard

E7. Where students currently have 12 weeks to meet any outstanding outcomes, under these exceptional circumstances there will be an unlimited period for these to be met.

Superseded standard/s

Standards for pre-registration nursing programmes (2010):

Standard 3: Selection, admission, progression and completion

R3.10.2 AEs must ensure that, where exceptional circumstances prevent all outcomes being achieved within the assessed period for that part of the programme, any outstanding outcomes are met and confirmed within 12 weeks of the student entering the next part of the programme. The 12-week period includes holidays and any absences. Reasonable adjustments may be applied for students with a disability.

R3.10.3 AEs must ensure that students who fail to achieve the outstanding outcomes within the 12-week period must, depending on local assessment policy, either return to the previous part of the programme to meet the shortfall or be discontinued.

Standards for pre-registration midwifery education (2009):

Standard 15 – Assessment strategy

Clinical practice must be graded and be counted as part of the academic award. All outcomes within a progression point period (for example an academic year) have to be achieved and confirmed within 12 weeks of entering the next academic level. All assessments must be completed and have been passed prior to successful completion of the programme. This is designed to confirm that the student has the theoretical knowledge, practical skills and attitude to achieve the standards required for entry to the midwives' part of the register.

Rationale

In line with our new standards we are removing the 12 week requirement for students to meet outcomes for a previous part of the course before progressing. This is being removed as under the current emergency circumstances this requirement may unfairly affect some students.

The role of the Nursing and Midwifery Council

What we do

We're the independent regulator for nurses, midwives and nursing associates. We hold the register of more than 700,000 nurses, midwives and nursing associates who can practise in the UK.

Better and safer care for people is at the heart of what we do, supporting the healthcare professionals on our register to deliver the highest standards of care.

We make sure nurses, midwives and nursing associates have the skills they need to care for people safely, with integrity, expertise, respect and compassion, from the moment they step into their first job.

Learning does not stop the day nurses, midwives and nursing associates qualify. To promote safety and public trust, we require professionals to demonstrate throughout their career that they are committed to learning and developing to keep their skills up to date and improve as practitioners.

We want to encourage openness and learning among healthcare professions to improve care and keep the public safe. On the occasions when something goes wrong and people are at risk, we can step in to investigate and take action, giving patients and families a voice as we do so.

These standards were approved by Council at their meeting on 25 March 2020.