

Specification for the Registered Nurse Degree Apprenticeship

This document applies to Academic Year 2024/25 onwards

The Specification for Degree Apprenticeships should be read as a companion document to the Programme Specification for the academic award linked to the apprenticeship.

1.	Apprenticeship title	Nursing Degree Apprenticeship
2.	Qualifications	BSc (Hons) Nursing (Adult) Degree Apprenticeship BSc (Hons) Nursing (Mental Health) Degree Apprenticeship
3.	Level	Level 6
4.	Professional registration	Successful completion of the apprenticeship provides eligibility to apply for registration with the Nursing and Midwifery Council (NMC)
5.	Duration	3 year full-time 4 years part-time
6.	Managing institution/Main Provider	University of Worcester
7.	Teaching institution(s)	University of Worcester Dudley College: BSc (Hons) Nursing (Adult) Degree Apprenticeship only
8.	Apprenticeship Standard and Number	Registered Nurse Degree (NMC 2018) ST0781
9.	Date of Apprenticeship Specification preparation/revision	Approved June 2023 August 2023, updated programme spec link added April 2024 updated for satellite site June 2024 CMAS changes

10. Distinguishing features of the apprenticeship

Degree Apprenticeships combine higher education study and work-based/work- integrated learning to enable apprentices to achieve a higher-level award (e.g., a bachelor's qualification) whilst in work. The provision of an academic award is integrated with experience, practice and learning in the workplace where the apprentice has paid employment status. Degree Apprenticeships are co-designed by training providers and employers to ensure that apprentices are equipped with the skills employers need and to develop their own careers.

The BSc (Hons) Nursing Degree Apprenticeship offers an alternative route for individuals working in health and care settings to access a career as a Registered Nurse. It allows healthcare organisations to use their apprenticeship levy to support the development of their workforce and reflects partnership working with employers, to support the local healthcare economy. It complements the standard BSc (Hons) Nursing route, where student nurses pay for their studies via the student loan system and widens access to a university education.

Offered as both a full-time three-year and part-time four-year degree apprenticeship, it allows appropriately qualified health care workers to earn while they are learning. At the heart of the

programme, is flexible, authentic work-based learning to develop safe, competent, confident and compassionate Adult or Mental Health Registered Nurses.

The apprenticeship is designed to meet the requirements of both Institute for Apprenticeships & Technical Education (IfATE) [Registered Nurse Degree \(NMC 2018\) Apprenticeship Standard](#) and the NMC (2018) [Standards of Proficiency for Registered Nurses](#).

The NMC (2018) [Standards of Proficiency for Registered Nurses](#), groups the proficiencies a newly registered nurses is expected to be capable of safely and proficiency completing at the start of their career under seven platforms (themes) and two skills annexes:

1. Being an accountable professional
2. Promoting health and preventing ill-health
3. Assessing needs and planning care
4. Providing and evaluating care
5. Leading and managing nursing care and working in teams
6. Improving safety and quality of care
7. Co-ordinating care

Annexe A: Communication and relationship management skills Annexe B: Nursing Procedures.

The [Registered Nurse Degree \(NMC 2018\) Apprenticeship Standard](#) outlines 10 occupational duties of the Registered Nurse and associated knowledge, skills and behaviours (KSB's);

- **Duty 1:** Be an accountable professional acting in the best interests of people, putting them first and providing nursing care that is person-centred, safe and compassionate.
- **Duty 2:** Communicate effectively, act as a role model for others and be accountable for their own actions
- **Duty 3:** Promote health and prevent ill-health to improve and maintain the mental, physical and behavioural health and well-being of people, families, communities and populations
- **Duty 4:** Assess individuals nursing care needs and plan care using information obtained during assessments to identify the priorities and requirements for person-centred and evidence-based nursing interventions and support
- **Duty 5:** Provide and evaluate nursing care to individuals and groups taking the lead in providing evidence based, compassionate and safe nursing interventions
- **Duty 6:** Improve safety of care by assessing risks to safety or experience and take appropriate action to manage those, putting the best interests, needs and preferences of people first
- **Duty 7:** Improve quality of care by making a key contribution to the continuous monitoring and quality improvement of care and treatment in order to enhance health outcomes and people's experience of nursing and related care
- **Duty 8:** Provide professional leadership in the coordination and management of complex nursing and integrated care needs of people at any stage of their lives, across a range of organisations and settings
- **Duty 9:** Lead nursing care, taking responsibility for managing nursing care and accountability for the appropriate delegation and supervision of care provided by others in the team including lay carers
- **Duty 10:** Work in teams, collaborating and communicating effectively with a range of colleagues

The BSc (Hons) Nursing Degree Apprenticeship is mapped to both the knowledge, skills and behaviours (KSB's) of the [Registered Nurse Degree \(NMC 2018\) Apprenticeship Standard](#) and the NMC (2018) [Standards of Proficiency for Registered Nurses](#). The occupational duties and associated KSB's fully aligned to the standards of proficiency and associated platforms.

Successful completion of all modules of the BSc (Hons) Nursing Degree Apprenticeship meets the education requirements for eligibility to Register with the NMC.

11. Occupational Profile

Registered Nurses work in the public, independent and voluntary sector. The broad purpose of the occupation is to play a vital role in providing, leading, coordinating and evaluating care that is compassionate, evidence based, and person centred. They are accountable for their own actions and those who they delegate to and must be able to work autonomously, or as an equal partner with a range of other professionals. They provide nursing care for people across the whole lifespan who could have complex and concurrent mental, physical, cognitive and behavioural care needs and for people at the end of their life.

Registered Nurses make an important contribution to the promotion of health, health protection and the prevention of ill health. They do this by empowering people, communities and populations to exercise choice, take control of their own health decisions and behaviours and by supporting people to manage their own care where possible. In their daily work, an employee in this occupation interacts with a variety of service users, families and carers, and with an extensive range of health and care professionals and other agencies including social services, police, probation, prisons, housing, education, language interpreters and third sector agencies. They will also work with, support and facilitate the learning of a range of learners from across health and care professions. They might be working in a hospital, someone's home, the community, social care or public health and may work various shift patterns which enable care to be provided 24 hours per day, seven days per week, 365 days of the year.

Registered Nurses are a key part of the multidisciplinary teams that meet the integrated health and care needs of patients and service users. An employee in this occupation will be responsible for providing leadership in the delivery of care for people of all ages and from different backgrounds, cultures and beliefs. They must be able to care for people in their own home, in the community or hospital or in any health care settings where their needs are supported and managed. All Registered Nurses work as part of a team but on a day-to-day basis may be working alone when seeing people in their own homes or in the community. They work in the context of continual change, challenging environments, different models of care delivery, an older and more diverse population, innovation and rapidly evolving technologies. Increasing integration of health and social care services will require registered nurses to negotiate boundaries and play a proactive role in multidisciplinary teams. The confidence and ability to think critically, apply knowledge and skills and provide expert, evidence based, direct nursing care therefore lies at the centre of all registered nursing practice. In order to respond to the impact and demands of professional nursing practice, they must be emotionally intelligent and resilient individuals, able to manage their own personal health and wellbeing, and know when and how to access support.

Registered Nurses may have responsibility for delegating work to other members of the nursing team and take accountability for the delegated activity.

12. Admission Requirements

Work-related entry requirements

Under UK Government requirements, Degree Level apprentices are normally employed for a minimum of 30 hours per week and must have the right to live and work in the UK and spend at least 50% of their working hours in England over the duration of the apprenticeship. A Degree Apprentice cannot be self-employed.

The apprenticeship is offered as both a full-time or part-time route, offering flexible study options. This will support those who work a minimum of 30 hours which will meet the UK Government and NMC requirements.

All candidates must be employed in a health or care setting by an NHS Trust or Independent Provider in a healthcare role and be sponsored by their employer. The support of the employer is articulated in an Apprenticeship Agreement.

All employer partners must also complete, in partnership with the University, an NMC apprenticeship modification form. This provides a declaration that the University and the employer will comply with the [NMC \(2018\) Standards framework for nursing and midwifery education](#), [NMC \(2018\) Standards for Student Supervision and Assessment](#) and [NMC \(2018\) Standards for Pre-registration Nursing Programmes](#). It also confirms the employer has worked in partnership with the University and will ensure apprentices have appropriate supernumerary status and that there are appropriate governance mechanisms, systems and process in place to ensure there is oversight and management of the apprentices learning experience.

Applications can only be made through the sponsoring employer. The University will consider all such applications and will have the final decision whether to accept individuals based on whether they meet the minimum entry requirements for the academic programme as stipulated below.

Academic entry requirements

The academic entry requirements are as stipulated in the approved Programme Specification for the BSc (Hons) Nursing.

To meet the requirements of the Education and Funding Skills Agency (ESFA) and be eligible to undertake the end point assessment Nursing apprentices must have GCSE grade C/4 or ESFA approved level 2 equivalent in Maths and English.

See [UW Admissions Policy](#) for other acceptable qualifications.

Applicants who are already Registered Nursing Associates or health care support workers/ assistant practitioners who have completed an appropriate Foundation Degree may be eligible to complete a shortened route, using Recognition of Prior Learning (RPL). RPL is up to a maximum of 50% of the BSc (Hons) Nursing programme.

For Registered Nurses, the NMC permit Recognition of Prior Learning that may be more than 50% of the programme if it can be mapped to the Standards of Proficiency for Registered Nurses and programme outcomes. RPL for the apprenticeship is subject to the minimum length of an apprenticeship programme must be one year (ESFA requirement).

Further information on Recognition of Prior Learning can be found at <http://www.worcester.ac.uk/registryservices/941.htm>

Admissions/recruitment procedures

Applicants usually apply for an apprentice position with an Organisation / Trust usually via NHS jobs. Prior to application, candidates should discuss their application with their line manager and to gain the support of their employing organisation.

The application will be reviewed by the employing organisation, and employers will short-list applicants and select for interview. All shortlisted applicants will be required to attend a joint employer/ university values-based selection event, held either at the University or the employers' organisation.

All shortlisted applicants are required to complete an initial needs assessment (INA) of the KSB's in partnership with their line manager to identify their starting point for monitoring progress across the programme, any RPL and if the apprenticeship is appropriate for the applicant. This is shared with the applicant electronically via their employer.

BSc (Hons) Nursing (Adult) Degree Apprenticeship only, employers may offer a choice of studying at University of Worcester or Dudley College.

Recruitment criteria

The selection event involves the course team and employers/ practitioners, supported by student ambassadors, and allows the apprentice applicant to demonstrate that they understand the requirements of the Nursing role and suitability for the programme. The values-based selection event will involve:

- An individual interview using service user/carer developed questions with an academic and practitioner (employer), with additional questions as required by the employing organisation, with a focus on the apprentice's initial assessment related to the KSB's.

Successful applicants will then be required to complete and submit an online application form to the University of Worcester.

Prior to enrolment, apprentices, the employer and the University are required to complete a University Training Plan which will be completed electronically.

The recruitment process provides evidence of capability for digital and technological literacy through the electronic completion of the INA, application form and training plan and attending virtual programme information sessions.

Disclosure and Barring Service (DBS) and Occupational Health requirements

Apprentices will be required to demonstrate good health and character sufficient to ensure safe and effective practice.

Nursing apprentices will be required to complete a Declaration of Offences form at the recruitment event.

This includes confirmation of a satisfactory enhanced DBS and occupational health clearance from the apprentice's employing organisation and recorded on the apprentices INA. These will be verified by the University.

Nursing apprentices will be required to travel to and from placement, this may be at their own expense. Apprentices will usually complete six practice learning experiences across the programme, which may include one placement where they are employed.

13. Structure of the apprenticeship

The BSc (Hons) Nursing Degree apprenticeship includes all requirements of the NMC approved BSc (Hons) Nursing (Adult) or BSc (Hons) Nursing (Mental Health) programme.

The apprenticeship is offered as:

- A full-time route over 3 years, with apprentices completing 37.5 hours per week on programme
- A part-time route over 4 years, with apprentices completing 28-29 hours per week on programme, facilitating the combination of programme hours, while allowing the apprentice to continue to work in their place of employment for a maximum of 9.5 hours per week

Both the full-time and part-time routes meet the NMC requirement of at least 4,600 hours of theoretical and clinical education and provides an equal balance of theory and practice learning. With apprentices required to complete a minimum of 2300 hours theory and 2300 hours of supernumerary practice learning. Simulated practice learning proportionality and effectively contribute to practice learning hours, to a maximum of 300 hours. Practice learning allows students to experience the full range of hours expected of Registered Nurses.

In line with NMC requirements, the programme is divided into three parts, with a progression point at the end of each part.

For the full-time route, each part equates to one year, for the part-time route, each part equates to 16 months

Table one: Apprenticeship weeks (full-time and part-time apprenticeships)

Part	Programme weeks		Pre-planned university holiday		Total	
	Full-time	Part-time	Full-time	Part-time	Fulltime	Parttime
Part one L4	42 + 3 reassessment weeks	56 + 3 reassessment weeks	7 weeks	9 weeks	52 weeks	68 weeks
Part two L5	42 + 3 reassessment weeks	56 + 3 reassessment weeks	7 weeks	9 weeks	52 weeks	68 weeks
Part three L6	42 + 3 reassessment weeks	56 + 3 reassessment weeks	7 weeks	10 weeks	52 weeks	69 weeks
Totals	72 weeks <i>(63 weeks theory, 63 weeks practice & 9 reassessment weeks)</i>	93 weeks <i>(84 weeks theory, 84 weeks practice & 9 reassessment weeks)</i>	21 weeks	28 weeks	158 weeks	205 weeks

Where apprentices' contracts do not include the full amount of university holiday, these weeks can be used for 'on the job' work in their place of employment.

Pre-planned re-assessment weeks allow for any reassessment of theory or practice and making up missing supernumerary practice hours – these weeks promote timely progression across the programme. Where apprentices are not required to complete any reassessments, these weeks can be used for 'on the job' learning in their place of employment.

Supernumerary Practice Learning Hours

The NMC requires Nursing apprentices in practice or work-based learning to be supernumerary, to be supported to learn without being counted as part of the staffing required for safe and effective care in that setting. This includes practice placements within the apprentice's placement of employment, where the placement hours contribute toward the NMC required practice learning hours.

When the apprentice is working in their substantive role the hours do not count towards the NMC required practice learning hours.

Placements should enable apprentices to learn to provide safe and effective care and not just observe, during supernumerary placements apprentices can add real value to care provision. As the apprentice develops confidence and competence to deliver a range of interventions, the requirement for direct supervision decreases, but all apprentices continue to benefit from ongoing support and guidance throughout their studies. The level of supervision required by an apprentice is based on the professional judgement of the practice supervisor or assessor.

Table two: Supernumerary practice learning hours across the apprenticeship

Part	Placement weeks	
	Full-time (37.5 hours/week)	Part-time (28-29 hours/week)
Part one L4	18 weeks (675 hours)	24 weeks (675 hours)
Part two L5	22 weeks (825 hours)	29 weeks (825 hours)
Part three L6	23 weeks (862.5 hours)	31 weeks (862.5 hours)
Totals	63 weeks (2362.5 hours) of supernumerary practice learning hours including up to 300 hours of simulated practice learning	84 weeks (2362.5 hours) of supernumerary practice learning hours including up to 300 hours of simulated practice learning

Apprentices on the part-time route only complete up to 9.5 hours per week, on the job hours, in their substantive role in their place of employment.

Apprentices are usually allocated two practice learning experiences per part, across the programme apprentices may complete a maximum of one supernumerary placement in the place of employment.

Table three: Off the job hours for theory learning across the apprenticeship

Part	Theory weeks		Breakdown of theory hours and related modules*
	Full-time (37.5 hours/week)	Part-time (28-29 hours/week)	
Part one L4	24 weeks	32 weeks	NURS1005 (150 hours) NURS1006 (150 hours) NURS1002 (150 hours) NURS1101 or NURS1301 (150 hours) NURS1003 (105 hours) Plus 195 hours independent study/introduction to higher education/assessment weeks

Part two L5	20 weeks	27 weeks	NURS2001 (150 hours) NURS2002 (150 hours) NURS2101 or NURS2301 (150 hours) NURS2101 or NURS2302 (150 hours) NURS2003 (105 hours) Plus 45 hours independent study/introduction to part 2/assessment weeks
Part three L6	19 weeks	25 weeks	NURS3001 (300 hours) NURS3002 (150 hours) NURS3101 or NURS3301 (150 hours) NURS3003 (105 hours) Plus 7.5 hours independent study
Totals	63 weeks (2362.5 hours)	84 weeks (2362.5 hours)	

*For module titles, please see annexe 3

Off the job learning for theory will be monitored in line with the UW [Student Attendance Policy](#) and within an electronic apprentice learning log.

Supernumerary practice learning hours will be monitored through recording of placement hours using electronic timesheets in ARC placement software and within the Ongoing Achievement Record (OAR) of the electronic Practice Assessment Document.

Off the job hours for theory and supernumerary practice learning hours are further monitored via the Individual Learner Progress review (ILPR).

Apprenticeship Requirements

Degree Apprenticeships involve both work-integrated learning in paid employment and academic study, this is contrasted with the NMC requirement for all programmes hours to be achieved 'off the job' including supernumerary practice placements, as demonstrated in the tables above. The requirements for the apprenticeship satisfy the Apprenticeship Funding Bodies, ESFA requirement of an equivalent of a minimum of 6 hours per week 'off the job' learning over the duration of the apprenticeship.

Apprentices follow the approved academic programme as articulated in the programme's award map in section 15 (page 12 -13) of the BSc (Hons) Nursing programme specification.

Where an apprentice requires a temporary withdrawal from their studies (referred to as a Break in Learning), of longer than four weeks, confirmation of the employer must be gained.

14. Knowledge, skills and behaviours

Degree Apprenticeships support apprentices in progressively developing the knowledge, skills and behaviours (KSBs) required to meet the [Registered Nurse Degree \(NMC 2018\) Apprenticeship Standard](#). They are mapped against the NMC (2018) [Standards of Proficiency for Registered Nurses](#). There is a total of 119 KSB's (K=58, S=58, B=3) and specific KSB's are aligned to individual occupational duties of the nursing role and are summatively assessed within the modules.

Please see Annexe 1 for mapping of NMC platforms, occupational duties and KSB's mapped to BSc (Hons) Nursing Degree Apprenticeship modules.

Mapping of module learning outcomes of the BSc (Hons) Nursing Degree Apprenticeship to IfATE Registered Nurse Degree (NMC 2018) Apprenticeship Standards KSB's is contained with the initial needs' assessment document.

15. Learning and teaching

The purpose of this Degree Apprenticeship is to develop the knowledge, skills and behaviours of apprentices in order to enable them to develop successful careers in the health and social care sector, as a Registered Nurse.

Nursing apprentices will study the same modules as the standard entry BSc (Hons) Nursing (Adult) or (Mental Health) (See Programme Specification page 12 & 13). Each module specifications detail the contact teaching hours, independent/directed study and preparation for assessment hours.

All Nursing apprentices will complete an individual learning plan (ILP) during the introduction to Higher Education (HE) weeks. This builds on their self-assessment of the KSBs completed within the INA. They will be supported to complete this by their personal academic tutor (PAT). The ILP provides opportunity for apprentices to identify their strength, weaknesses, opportunities and threats and to provide learning goals against the NMC platforms and occupational duties. The ILP helps to individualise the apprenticeship programme, to the apprentices own learning needs and is discussed at the tripartite individual learner progress reviews (ILPRs).

All Nursing apprentices complete baseline numeracy and literacy tests during the introduction to HE weeks. The results are recorded in the ILP and numeracy and literacy progress is monitored via the ILPR.

Personal Academic Tutoring and Individual Learner Progress Reviews (ILPR)

Personal Academic Tutoring is central to supporting the Nursing apprentices personally, professionally and academically. The programme team believe that the Personal Academic Tutor system is fundamental to Nursing apprentices' success.

Nursing apprentices will have a named [Personal Academic Tutor](#) for the whole of the programme.

PATs will act as the first point of contact for Nursing apprentices experiencing problems or concerns arising while at university, offering signposting to wider University support services. They promote the academic and professional development for their apprentices and provide the official University reference for their apprentices. Apprentices are advised to maintain regular contact with their PAT, with email being the communication tool of choice.

Opportunities will exist to meet PAT during the introduction to HE weeks, this early introduction is built on by regular meetings across the academic year. During this introductory week, the PAT will also provide one group tutorial to support the development of ILP.

All Personal Academic Tutor meetings are formally recorded, via SOLE.

ILPRs take place every 12 weeks and are a requirement of all Degree Apprenticeships. They are a tripartite meeting with the University, employer and apprentice. The ILPR monitors individual apprentices learning journey, ongoing progress and achievement. For this programme, the ILPR will be undertaken by the apprentices PAT or the Nursing apprenticeship facilitator, Nursing apprentice and the employer (who will normally be their line manager or practice supervisor/practice assessor). The dates for the ILPRs are mapped across the programme and included in annual programme planners and in the ILP. ILPRs are guided by a template, to facilitate a detailed discussion of the

apprentice's achievements and learning needs, integrates learning from theory and practice, sets goals, identifies opportunities for stretch and challenge and ensures the apprentice feels safe. It also provides a vehicle to monitor supernumerary placement hours and to provide action plans where needed.

ILPR forms are uploaded electronically to the individual apprentices' electronic folder.

All Nursing apprentices are supervised during supernumerary practice learning by a Practice Supervisor (PS) and assessed by a Practice Assessor (PA). Nursing apprentices are allocated a PA for each placement and are also allocated a university based Academic Assessor (AA) for each part of the programme. The PAT may act as the AA for one part of the programme.

The PAT and AA will be members of the academic staff who are also a Registered Nurse. The PS will be a registered healthcare professional who has undergone preparation for the role, working within the placement organisation. The PA will be a Registered Nurse, who has completed preparation for the role, who will usually work within the placement organisation.

Further support for Nursing apprentices while on placement, is provided by a University representative with a specific role to support apprentices practice learning.

Quarterly employer reviews between the employing organisation and the university take place, to further monitor apprentices progress and achievement, consider apprentices health and well-being, training and developments, funding compliance, employer or university updates and facilitate regular open communication.

16. Assessment

The BSc (Hons) Nursing Degree Apprenticeship is a fully integrated apprenticeship, using the existing assessment arrangements for the academic award.

The apprenticeship is fully integrated because:

1. Parliament has prescribed that the occupation (profession) must be regulated, and a statutory regulator has undisputed control of access to the occupation
2. A fully integrated end point assessment (EPA) meets the requirements of the profession

On-programme knowledge and skills: Nursing apprentices undertake the same assessment requirements as students studying the standard BSc (Hons) Nursing programme.

Nursing apprentices will complete the assessments as outlined in section 13 (page 10) of the BSc (Hons) Nursing programme specification.

The regulation of assessment detailed in section 19 (page 19-20) BSc (Hons) Nursing programme specification apply to the Degree Apprentice. When an apprentice is required to retake a module with attendance to progress, the right to retake the module is subject to the employer's consent. If the employer does not consent, the apprentice may have their registration with the University terminated.

Assessment of Practice Learning: There are usually two practice learning experiences in each part of the programme. Across the programme, apprentices may complete one placement in their place of employment. All practice learning hours are supernumerary, any hours completed as part of the apprentice's substantive role, will not be counted towards the NMC practice learning hours

requirements. Practice learning in the clinical setting is completed by up to 300 hours of simulated practice learning undertaken in the university-based skills and simulation suite.

All supernumerary hours must be recorded and signed for via ARC timesheets.

Please see table two for full details of placement hours across the programme.

Nursing apprentices are formatively and summatively assessed in the practice learning environment using the e-PAD. There is one e-PAD for each part of the programme and there is also an ongoing achievement record (OAR) and guidance document. The e-PADs are mapped to the [NMC \(2018\) Standards of Proficiency for Registered Nurses](#). Assessment of practice is pass/fail only and attached to Practice Learning for Nursing modules (NURS1004, NURS2004 & NURS3004) in each part of the programme.

All requirements of practice assessment must be achieved prior to completion of the programme and signed in the e-PAD and OAR by the apprentices' practice and academic assessor.

Gateway to end point assessment:

- Apprentice has met the knowledge, skills and behaviours
- Employer and NMC Approved Educational Institution (AEI) [the University] are satisfied the apprentice has consistently demonstrated they meet the KSBs of the occupational standard
- Achieved English and mathematics at Level 2
- Achieved all required modules, taking into account any recognition of prior learning (RPL) of the following approved qualification, but before the training providers examination board: Degree in Nursing
- PAD completed and signed-off by the practice and academic assessor

It is expected that the gateway will be reached on successful completion of all modules of the academic award and the gateway requirements are managed via a mandatory zero-credited module: NURS3005 End Point Assessment Gateway for Nurse Degree Apprentices.

The apprentice is not required to carry out any additional assessments.

End point assessment:

EPA starts with examination board and finishes when the University:

- Uploads the apprentice's course and personal details to the NMC database
- Sends the NMC a declaration of the apprentice's good health and character

The EPA period is expected to last a maximum of one month beginning when the apprentice has passed the EPA gateway.

The EPA will determine the overall apprenticeship standard and graded as:

- Fail
- Pass

To deliver the integrated EPA, UW who is a NMC approved AEI, must also be the end point assessment organisation (EPAO). The EPA period should only start, and the EPA be arranged, once the employer and university is satisfied that the apprentice is consistently working at or above the level set out in the occupational standard and all the pre-requisite gateway requirements for EPA have been met.

Please see annexe 5: Process for Managing the Registered Nurse Degree (NMC 2018) Apprenticeship Fully Integrated End Point Assessment (EPA)

Re-sits and re-takes

In-line with the EPAO's (the University's) procedures.

Reasonable adjustments

The EPAO [the University] must have in place clear and fair arrangements for making reasonable adjustments for this apprenticeship standard. This should include how an apprentice qualifies for reasonable adjustments and what reasonable adjustments will be made. The adjustments must maintain the validity, reliability and integrity of the assessment decisions outlined in this EPA plan.

Further details are found in the [End-point assessment plan for Registered nurse fully integrated degree apprenticeship standard \(IfATE 2022\)](#).

17. Reference points

The following reference points were used in designing the apprenticeship:

- The award is located at level 6 of the FHEQ
- [IfATE \(2021\) Registered Nurse Degree \(NMC 2018\) Apprenticeship Standard](#)
- [End-point assessment plan for Registered Nurse Degree \(NMC 2018\) fully integrated apprenticeship standard \(IfATE 2021\)](#)
- [NMC \(2018\) Part 1: Standards Framework for Nursing and Midwifery Education, NMC \(2018\) Part 2: Standards for Student Supervision and Assessment, NMC \(2018\) Part 3: Standards for Pre-registration Nursing Programmes, NMC \(2018\) Standards of Proficiency for Registered Nurses](#)
- [BSc \(Hons\) Nursing: Programme Specification](#)

Annexe 1: NMC platforms, occupational duties and KSB's mapped to BSc (Hons)**Nursing Degree Apprenticeship modules**

NMC platforms	Occupational duties	KSBs **	Modules*
Platform 1 Being an accountable professional	Duty 1: Be an accountable professional acting in the best interests of people, putting them first and providing nursing care that is person-centred, safe and compassionate. Duty 2: Communicate effectively, act as a role models for others and be accountable for their own actions	K1 K2 K3 K4 K5 K6 K7 K8 S1 S2 S3 S4 S5 S6 S7 S8 S9 S10 S11 S12 S13 B1 B2 B3	All
Platform 2 Promoting health and preventing ill health	Duty 3: Promote health and prevent ill-health to improve and maintain the mental, physical and behavioural health and well-being of people, families, communities and populations	K9 K10 K11 K12 K13 S14 S15 S16 S17 S18 S19 S20 S21 B1 B2 B3	NURS1006 NURS1002 NURS1003 NURS1004 NURS1101/1301 NURS2002 NURS2003 NURS2004 NURS2102/2302 NURS3003 NURS3004
Platform 3 Assessing needs and planning care	Duty 4: Assess individuals nursing care needs and plan care using information obtained during assessments to identify the priorities and requirements for person-centred and evidence-based nursing interventions and support	K14 K15 K16 K17 K18 K19 K20 K21 S22 S23 S24 S25 S26 S27 S28 S29 B1 B2 B3	NURS1002 NURS1003 NURS1004 NURS1101/1301 NURS2002 NURS2003 NURS2004 NURS2101/2301 NURS2102/2302 NURS3002 NURS3003 NURS3004 NURS3101/3301
Platform 4 Providing and evaluating care	Duty 5: Provide and evaluate nursing care to individuals and groups taking the lead in providing evidence based, compassionate and safe nursing interventions	K22 K23 K24 K25 K26 K27 K28 K29 K30 K31 K32 K33 K34 S30 S31 S32 S33 S34 S35 S36 S37 S38 S39 S40 B1 B2 B3	NURS1006 NURS1003 NURS1004 NURS1101/1301 NURS2001 NURS2002 NURS2003 NURS2004 NURS2101/2301 NURS2102/2302 NURS3002 NURS3003 NURS3004 NURS3101/3301

<p>Platform 5 Leading and managing nursing care and leading teams</p>	<p>Duty 9: Lead nursing care, taking responsibility for managing nursing care and accountability for the appropriate delegation and supervision of care provided by others in the team including lay carers.</p> <p>Duty 10: Work in teams, collaborating and communicating effectively with a range of colleagues</p>	<p>K54 K55 K56 K57 K58 S52 S53 S54 S55 S56 S57 S58 B1 B2 B3</p>	<p>NURS1005 NURS1003 NURS1004 NURS1101/1301 NURS2002 NURS2003 NURS2004 NURS2101/2301 NURS2102/2302 NURS3001 NURS3002 NURS3003 NURS3004 NURS3101/3301</p>
<p>Platform 6 Improving safety and quality of care</p>	<p>Duty 6: Improve safety of care by assessing risks to safety or experience and take appropriate action to manage those, putting the best interests, needs and preferences of people first.</p> <p>Duty 7: Improve quality of care by making a key contribution to the continuous monitoring and quality improvement of care and treatment in order to enhance health outcomes and people's experience of nursing and related care.</p>	<p>K35 K36 K37 K38 K39 K40 K41 K42 S41 S42 S43 S44 S45 S46 S47 S48 B1 B2 B3</p>	<p>NURS2001 NURS2002 NURS2003 NURS2004 NURS2101/2301 NURS2102/2302 NURS3001 NURS3002 NURS3003 NURS3004 NURS3101/3301</p>
<p>Platform 7 Co-ordinating care</p>	<p>Duty 8: Provide professional leadership in the coordination and management of complex nursing and integrated care needs of people at any stage of their lives, across a range of organisations and settings</p>	<p>K43 K44 K45 K46 K47 K48 K49 K50 K51 K52 K53 S49 S50 S51 B1 B2 B3</p>	<p>NURS2002 NURS2003 NURS2004 NURS2101/2301 NURS2102/2302 NURS3001 NURS3002 NURS3003 NURS3004 NURS3101/3301</p>

*For module titles, please see annexe 3

**See annexe 2 for list of KSBs

Annexe 2: KSBs of the Registered Nurse Degree (NMC 2018) Apprenticeship Standard**Knowledge**

K1: Understand the Code (2018): Professional standards of practice and behaviour for nurses and midwives and how to fulfil all registration requirements

K2: Understand the demands of professional practice and demonstrate how to recognise signs of vulnerability in themselves or their colleagues and the action required to minimise risks to health

K3: Understand the professional responsibility to adopt a healthy lifestyle to maintain the level of personal fitness and wellbeing required to meet people's needs for mental and physical care

K4: Understand research methods, ethics, and governance in order to critically analyse, safely use, share and apply research findings to promote and inform best nursing practice

K5: Understand the need to base all decisions regarding care and interventions on people's needs and preferences, recognising and addressing any personal and external factors that may unduly influence their decisions

K6: Understand and apply relevant legal, regulatory and governance requirements, policies, and ethical frameworks, including any mandatory reporting duties, to all areas of practice, differentiating where appropriate between the devolved legislatures of the United Kingdom

K7: Understand the principles of courage, transparency, and the professional duty of candour

K8: Understand how discriminatory behaviour is exhibited

K9: Understand the aims and principles of health promotion, protection and improvement and the prevention of ill health when engaging with people

K10: Understand epidemiology, demography, genomics and the wider determinants of health, illness and wellbeing and apply this to an understanding of global patterns of health and wellbeing outcomes

K11: Understand the factors that may lead to inequalities in health outcomes

K12: Understand the importance of early years and childhood experiences and the possible impact on life choices, mental, physical, and behavioural health, and wellbeing

K13: Understand the contribution of social influences, health literacy, individual circumstances, behaviours, and lifestyle choices to mental, physical, and behavioural health outcomes

K14: Apply knowledge of human development from conception to death when undertaking full and accurate person-centred nursing assessments and developing appropriate care plans

K15: Apply knowledge of body systems and homeostasis, human anatomy and physiology, biology, genomics, pharmacology, and social and behavioural sciences when undertaking full and accurate person-centred nursing assessments and developing appropriate care plans

K16: Apply knowledge of all commonly encountered mental, physical, behavioural, and cognitive health conditions, medication usage and treatments when undertaking full and accurate assessments of nursing care needs and when developing, prioritising, and reviewing person-centred care plan

K17: Understand and apply a person-centred approach to nursing care, demonstrating shared assessment, planning, decision making and goal setting when working with people, their families, communities, and populations of all ages

K18: Understand and apply the principles and processes for making reasonable adjustments

K19: Understand and apply the relevant laws about mental capacity for the country in which you are practising when making decisions in relation to people who do not have capacity

K20: Understand co-morbidities and the demands of meeting people's complex nursing and social care needs when prioritising care plans

K21: Know when and how to refer people safely to other professionals or services for clinical intervention or support

K22: Understand what is important to people and how to use this knowledge to ensure their needs for safety, dignity, privacy, comfort, and sleep can be met, acting as a role model for others in providing evidence based person-centred care

K23: Know and understand how to support people with commonly encountered mental health, behavioural, cognitive, and learning challenges, and act as a role model for others in providing high quality nursing interventions to meet people's needs

K24: Know and understand how to support people with commonly encountered physical health conditions, their medication usage and treatments, and act as a role model for others in providing high quality nursing interventions when meeting people's needs

K25: Know how to act as a role model for others in providing evidence-based nursing care to meet people's needs related to nutrition, hydration and bladder and bowel health

K26: Know how to act as a role model for others in providing evidence-based, person-centred nursing care to meet people's needs related to mobility, hygiene, oral care, wound care, and skin integrity

K27: Know how to identify and initiate appropriate interventions to support people with commonly encountered symptoms including anxiety, confusion, discomfort, and pain

K28: Understand what is important to people and their families when providing evidence-based person-centred nursing care at end of life including the care of people who are dying, families, the deceased and the bereaved

K29: Know the signs of deterioration or distress in mental, physical, cognitive, and behavioural health and use this knowledge to make sound clinical decisions

K30: Understand how to initiate and evaluate appropriate interventions to support people who show signs of self-harm and/or suicidal ideation

K31: Understand the principles of safe and effective administration and optimisation of medicines in accordance with local and national policies and demonstrate proficiency and accuracy when calculating dosages of prescribed medicines

K32: Understand the principles of pharmacology and recognise the effects of medicines, allergies, drug sensitivities, side effects, contraindications, incompatibilities, adverse reactions, prescribing errors, and the impact of polypharmacy and over the counter medication usage

K33: Know and understand how prescriptions can be generated, the role of generic, unlicensed, and off label prescribing and an understanding of the potential risks associated with these approaches to prescribing

K34: Apply knowledge of pharmacology to the care of people, demonstrating the ability to progress to a prescribing qualification following registration

K35: Understand the principles of health and safety legislation and regulations

K36: Understand the relationship between safe staffing levels, appropriate skill mix, safety, and quality of care

K37: Understand how to identify, report, and critically reflect on near misses, critical incidents, major incidents and serious adverse events in order to learn from them and influence their future practice

K38: Understand the differences between risk aversion and risk management and how to avoid compromising quality of care and health outcomes

K39: Understand and accept the need to accept and manage uncertainty, and demonstrate an understanding of strategies that develop resilience in self and others

K40: Understand the role of registered nurses and other health and care professionals at different levels of experience and seniority when managing and prioritising actions and care in the event of a major incident

K41: Understand the principles of quality improvement methodologies

K42: Understand how the quality and effectiveness of nursing care can be evaluated in practice, work with people, their families, carers, and colleagues to develop effective improvement strategies for quality and safety

K43: Understand the principles of partnership, collaboration, and interagency working across all relevant sectors

K44: Understand health legislation and current health and social care policies, and the mechanisms involved in influencing policy development and change, differentiating where appropriate between the devolved legislatures of the United Kingdom

K45: Understand the principles of health economics and their relevance to resource allocation in health and social care organisations and other agencies

K46: Understand how current health policy and future policy changes for nursing and other professions and understand the impact of policy changes on the delivery and coordination of care

K47: Understand and recognise the need to respond to the challenges of providing safe, effective, and person-centred nursing care for people who have co-morbidities and complex care needs

K48: Understand the complexities of providing mental, cognitive, behavioural, and physical care services across a wide range of integrated care settings

K49: Understand how to monitor and evaluate the quality of people's experience of complex care

K50: Understand the principles and processes involved in supporting people and families with a range of care needs to maintain optimal independence and avoid unnecessary interventions and disruptions to their lives

K51: Understand the principles and processes involved in planning and facilitating the safe discharge and transition of people between caseloads, settings, and services

K52: Understand the processes involved in developing a basic business case for additional care funding by applying knowledge of finance, resources, and safe staffing levels

K53: Understand the importance of exercising political awareness throughout their career, to maximise the influence and effect of registered nursing on quality of care, patient safety, and cost effectiveness

K54: Understand the principles of effective leadership, management, group and organisational dynamics and culture and apply these to team working and decision-making

K55: Understand the principles and application of processes for performance management and how these apply to the nursing team

K56: Understand the roles, responsibilities, and scope of practice of all members of the nursing and interdisciplinary team and how to make best use of the contributions of others involved in providing care

K57: Understand and apply the principles of human factors, environmental factors and strength-based approaches when working in teams

K58: Understand the mechanisms that can be used to influence organisational change and public policy, demonstrating the development of political awareness and skills

Skills

S1: Act in accordance with the Code (2015): Professional standards of practice and behaviour for nurses and midwives, and fulfil all registration requirements

S2: Think critically when applying evidence and drawing on experience to make evidence informed decisions in all situations

S3: Use resilience and emotional intelligence and is capable of explaining the rationale that influences judgments and decisions in routine, complex and challenging situations

Take responsibility for continuous self-reflection, seeking and responding to support and feedback to top their professional knowledge and skills

S5: Safely demonstrate evidence-based practice in all skills and procedures required for entry to the register

S6: Acts as an ambassador, upholding the reputation of their profession and promoting public confidence in nursing, health, and care services

S7: Communicate effectively using a range of skills and strategies with colleagues and people at all stages of life and with a range of mental, physical, cognitive, and behavioural health challenges

S8: Support people at all stages of life who are emotionally or physically vulnerable

S9: Develop, manage, and maintain appropriate relationships with people, their families, carers and colleagues

S10: Provide and promote non-discriminatory, person-centred, and sensitive care at all times, reflecting on people's values and beliefs, diverse backgrounds, cultural characteristics, language requirements, needs and preferences, taking account of any need for adjustments

S11: Report any situations, behaviours or errors that could result in poor care outcomes

S12: Identify and challenge discriminatory behaviour

S13: Contribute effectively and proactively in an interdisciplinary team

S14: Apply the principles of health promotion, protection and improvement and the prevention of ill health when engaging with people

S15: Use all appropriate opportunities, making reasonable adjustments when required, to discuss the impact of smoking, substance and alcohol use, sexual behaviours, diet and exercise on mental, physical, and behavioural health and wellbeing, in the context of people's individual circumstances

S16: Promote and improve mental, physical, behavioural, and other health related outcomes by understanding and explaining the principles, practice, and evidence-base for health screening programmes

S17: Use up to date approaches to behaviour change to enable people to use their strengths and expertise and make informed choices when managing their own health and making lifestyle adjustments

S18: Use appropriate communication skills and strength-based approaches to support and enable people to make informed choices about their care to manage health challenges in order to have satisfying and fulfilling lives within the limitations caused by reduced capability, ill health, and disability

S19: Provide information in accessible ways to help people understand and make decisions about their health, life choices, illness, and care

- S20:** Promote health and prevent ill health by understanding and explaining to people the principles of pathogenesis, immunology and the evidence-base for immunisation, vaccination, and herd immunity
- S21:** Protect health through understanding and applying the principles of infection prevention and control, including communicable disease surveillance and antimicrobial stewardship and resistance
- S22:** Accurately process all information gathered during the assessment process to identify needs for individualised nursing care and develop person-centred evidence-based plans for nursing interventions with agreed goals
- S23:** Effectively assess a person's capacity to make decisions about their own care and to give or withhold consent
- S24:** Recognise and assess people at risk of harm and the situations that may put them at risk, ensuring prompt action is taken to safeguard those who are vulnerable
- S25:** Demonstrate the skills and abilities required to recognise and assess people who show signs of self-harm and/or suicidal ideation
- S26:** Undertake routine investigations, interpreting and sharing findings as appropriate
- S27:** Interpret results from routine investigations, taking prompt action when required by implementing appropriate interventions, requesting additional investigations, or escalating to others
- S28:** Identify and assess the needs of people and families for care at the end of life, including requirements for palliative care and decision making related to their treatment and care preferences
- S29:** Work in partnership with people, families, and carers to continuously monitor, evaluate and reassess the effectiveness of all agreed nursing care plans and care, sharing decision making and readjusting agreed goals, documenting progress and decisions made
- S30:** Support people with commonly encountered mental health, behavioural, cognitive, and learning challenges, and act as a role model for others in providing high quality nursing interventions to meet people's needs
- S31:** Support people with commonly encountered physical health conditions, their medication usage and treatments, and act as a role model for others in providing high quality nursing interventions when meeting people's needs
- S32:** Act as a role model for others in providing evidence-based nursing care to meet people's needs related to nutrition, hydration and bladder and bowel health
- S33:** Act as a role model for others in providing evidence-based, person-centred nursing care to meet people's needs related to mobility, hygiene, oral care, wound care, and skin integrity
- S34:** Identify and initiate appropriate interventions to support people with commonly encountered symptoms including anxiety, confusion, discomfort, and pain
- S35:** Prioritise what is important to people and their families when providing evidence-based person-centred nursing care at end of life including the care of people who are dying, families, the deceased and the bereaved
- S36:** Respond proactively and promptly to signs of deterioration or distress in mental, physical, cognitive, and behavioural health and use this knowledge to make sound clinical decisions
- S37:** Manage commonly encountered devices and confidently carry out related nursing procedures to meet people's needs for evidence based, person-centred care
- S38:** Provide first aid procedures and basic life support
- S39:** Demonstrate numeracy, literacy, digital and technological skills to meet the needs of people receiving nursing care to ensure safe and effective nursing practice
- S40:** Co-ordinate and undertake the processes and procedures involved in routine planning and management of safe discharge home or transfer of people between care settings
- S41:** Maintain safe work and care environments
- S42:** Comply with local and national frameworks, legislation, and regulations for assessing, managing and reporting risks, ensuring the appropriate action is taken
- S43:** Recognise risks to public protection and quality of care, escalating concerns appropriately
- S44:** Accurately undertake risk assessments in a range of care settings, using a range of contemporary assessment and improvement tools
- S45:** Identify the need to make improvements and proactively respond to potential hazards that may affect the safety of people
- S46:** Participate in all stages of audit activity and identify appropriate quality improvement strategies
- S47:** Use service delivery evaluation and audit findings to bring about continuous improvement

S48: Share feedback and learning from positive outcomes and experiences, mistakes and adverse outcomes and experiences

S49: Facilitate equitable access to healthcare for people who are vulnerable or have a disability

S50: Advocate on behalf of people who are vulnerable or have a disability when required, and make necessary reasonable adjustments to the assessment, planning and delivery of their care

S51: Identify and manage risks and take proactive measures to improve the quality of care and services when needed

S52: Safely and effectively lead and manage the nursing care of a group of people, demonstrating appropriate prioritisation, delegation, and assignment of care responsibilities to others involved in providing care

S53: Guide, support and motivate individuals and interact confidently with other members of the care team

S54: Monitor and evaluate the quality of care delivered by others in the team and lay carers

S55: Support and supervise students in the delivery of nursing care, promoting reflection, and providing constructive feedback, and evaluating and documenting their performance

S56: Challenge and provide feedback about care delivered by others in the team, and support them to identify and agree individual learning needs

S57: Contributes to supervision and team reflection activities to promote improvements in practice and services

S58: Use a range of digital technologies to access, input, share and apply information and data within teams and between agencies

Behaviours

B1: Treat people with dignity, respecting individual's diversity, beliefs, culture, needs, values, privacy, and preferences

B2: Show respect and empathy for those you work with, have the courage to challenge areas of concern and work to evidence based best practice

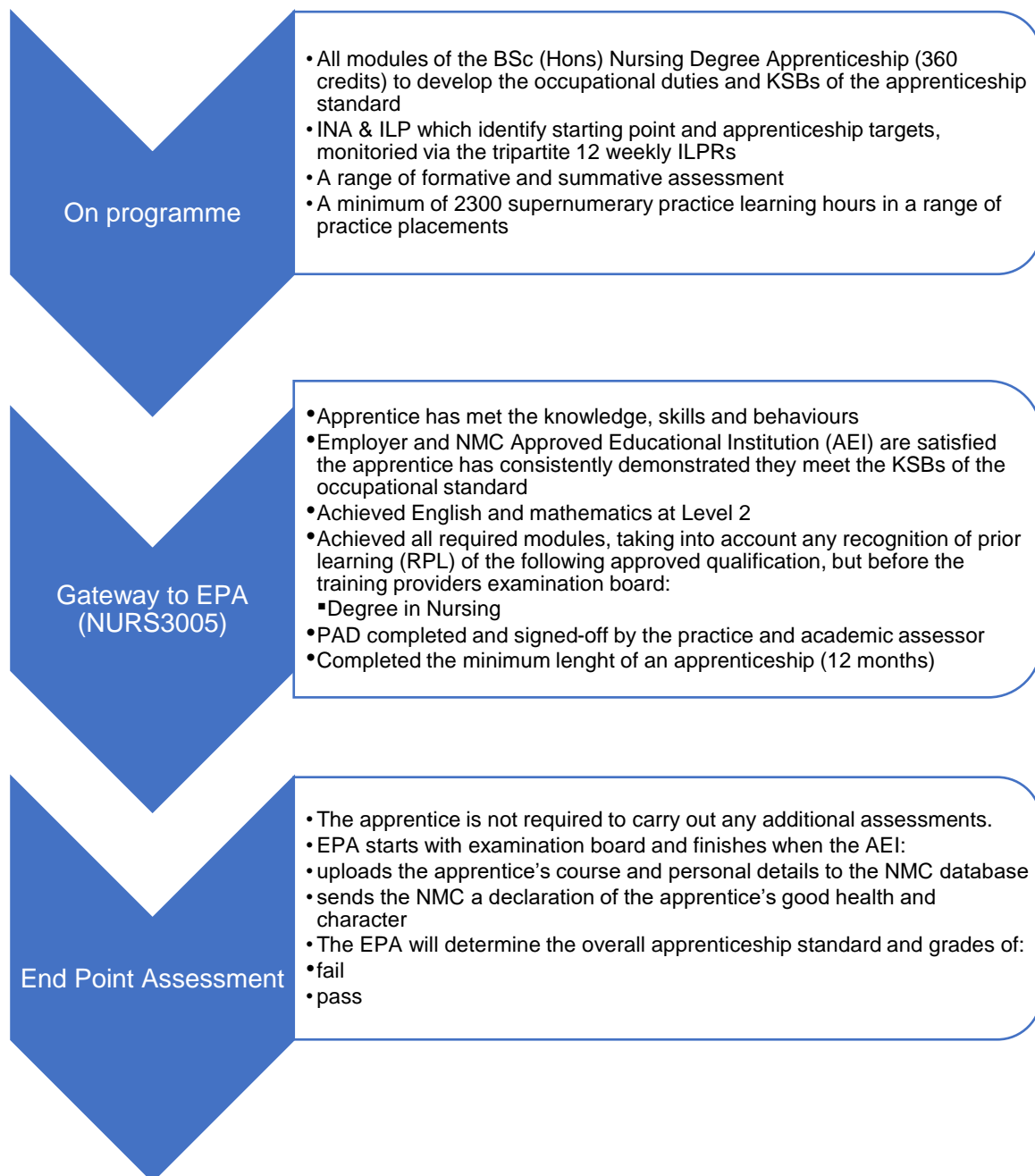
B3: Be adaptable, reliable and consistent, show discretion, resilience and self-awareness and demonstrate leadership

Annexe 3: Occupational Content/Components

Module code	Module title	Method	Module Hours	Included in OTJ
NURS1005	Communication and Professional Values (15 credits)	Taught content, assessments, clinical placement, group work activities, independent /directed study	150	150
NURS1006	Promoting Health and Well-being across the Lifespan (15 credits)	Taught content, assessments, clinical placement, group work activities, independent /directed study	150	150
NURS1002	Introduction to Anatomy and Physiology (15 credits)	Taught content, assessments, e-learning, clinical placement, independent /directed study	150	150
NURS1003	Essential Skills for Practice Learning in Nursing1 (30 credits)	Supernumerary practice learning experiences, simulated practice learning, independent/directed study, assessment	390	390
NURS1004	Practice Learning in Nursing 1 (30 credits)	Supernumerary practice learning experiences, simulated practice learning, independent/directed study, assessment	390	390
NURS1101	Principles of Adult Nursing (15 credits)	Taught content, assessments, e-learning, clinical placement, independent /directed study	150	150
OR				
NURS1301	Principles of Mental Health Nursing (15 credits)	Taught content, assessments, e-learning, clinical placement, independent /directed study	150	150
Additional theory hours in part one – independent study/assessment weeks			190	190
NURS2001	Evidence-Based Practice for Nursing (15 credits)	Taught content, assessment, clinical placement, independent /directed study	150	150
NURS2002	Fundamentals of medicines management and therapeutics (15 credits)	Taught content, assessment, clinical placement, independent /directed study	150	150
NURS2003	Essential Skills for Practice Learning in Nursing 2 (30 credits)	Supernumerary practice learning experiences, simulated practice learning, independent/directed study, assessment	442.5	442.5
NURS2004	Practice Learning in Nursing 2 (30 credits)	Supernumerary practice learning experiences, simulated practice learning, independent/directed study, assessment	487.5	487.5
NURS2101	Person-centred assessment in adult nursing (15 credits)	Taught content, assessments, e-learning, clinical placement, independent /directed study	150	150
NURS2102	Safe and effective care planning in adult nursing (15 credits)	Taught content, assessments, e-learning, clinical placement, independent /directed study	150	150

OR				
NURS2301	Person-centred assessment and care-planning in mental health (15 credits)	Taught content, assessments, e-learning, clinical placement, independent /directed study	150	150
NURS2302	Psycho-social Interventions in mental health nursing	Taught content, assessments, e-learning, clinical placement, independent /directed study	150	150
Additional theory hours in part two – independent study/assessment weeks			45	45
NURS3001	Dissertation: Critical engagement with practice (30 credits)	Taught content, assessments, e-learning, individual supervision, clinical placement, independent /directed study	300	300
NURS3002	Leading and managing nursing care (15 credits)	Taught content, assessments, e-learning, clinical placement, independent /directed study	150	150
NURS3003	Essential Skills for Practice Learning in Nursing 3 (30 credits)	Supernumerary practice learning experiences, simulated practice learning, independent/directed study, assessment	480	480
NURS3004	Practice Learning in Nursing 3 (30 credits)	Supernumerary practice learning experiences, simulated practice learning, independent/directed study, assessment	487.5	487.5
NURS3101	Challenges and complexity in adult nursing (15 credits)	Taught content, assessments, e-learning, clinical placement, independent /directed study	150	150
OR				
NURS3301	Challenges and complexity in mental health nursing (15 credits)	Taught content, assessments, e-learning, clinical placement, independent /directed study	150	150
NURS3005	End Point Assessment Gateway for Nurse Degree Apprentices	Confirmation of requirements to complete apprenticeship	0	0
Additional theory hours in part three – independent study /assessment weeks			7.5	7.5
TOTAL			4725 (2362.5 theory & 2362.5 practice)	4725 (2362.5 theory & 2362.5 practice)

Annexe 4: The relationship between the On-Programme activity, Gateway process and End Point Assessment



Annexe 5: Process for Managing the Registered Nurse Degree (NMC 2018) Apprenticeship Fully Integrated End Point Assessment (EPA)

At least one week prior to pre-board, apprentice completes, submits and successfully achieves all requirements for the BSc (Hons) Nursing programme

Pre-board (consisting of a chairperson, internal examiners and placement support team (PlaST)) reviews each apprentice individually to ensure the accurate presentation of apprentice grades and evidence for achievement of EPA Gateway requirements: completed all required modules (taking into account any Recognition of prior learning (RPL) of the BSc (Hons) Nursing and completed a minimum of 2300 hours of supernumerary placement hours.

Nursing Apprenticeships Administrator contacts employers and apprentices to request they complete and return a 'Readiness for Completion' Gateway Declaration form, confirming the apprentice has consistently demonstrated that they meet the Knowledge, Skills and Behaviours (KSBs) of the occupational standard.

Subject Module Exam Board (Gateway) (consisting of a chairperson, internal and external examiners, HoD for Apprenticeships and CPD, Director of Apprenticeships and Employer Engagement (or nominee), PlaST and Registry secretary) confirms that the apprentice meets all gateway requirements:

- The Subject Module Exam Board (Gateway) will formally review and record that each apprentice has achieved all gateway requirements as detailed in the gateway module (NURS3005):
 - Achievement of level 2 maths and English
 - Successful completion of all required modules, taking into account any RPL, of the BSc (Hons) Nursing programme
 - Confirmation of a minimum of 2300 supernumerary practice learning hours, which took place within the apprentices normal working hours
 - Completion of Practice Assessment Document, signed off by the practice and academic assessor
 - Employer and University confirmation that the apprentice has consistently demonstrated that they meet the KSBs of the occupational standard
 - Completed the minimum duration for an apprenticeship (one year)

Award Board (EPA) (consisting of a chairperson, internal and external examiners, HoD for Apprenticeships and CPD, Director of Apprenticeships and Employer Engagement (or nominee), PlaST and Registry secretary) confirms that the apprentice meets all Award requirements and has met the educational outcomes required to register with the NMC.

Pass list sent by Registry to PlaST confirming all apprentices who have completed the Award and EPA and are eligible to register with the NMC as Registered Nurse (Adult or Mental Health).

Identified member of PlaST ensures all eligible apprentices complete and submit their declaration of good health and good character and all other NMC requirements.
PlaST complete electronic upload of data file to the NMC confirming completion.
Course lead (official NMC signatory) provides the University's supporting declaration of the individual apprentices' good health and good character electronically.
Completed within one month of the EPA.

Registry claim ESFA apprenticeship certificates via the EPA hub

Apprentices required to undertake reassessments: Further subject Module Exam Board (Gateway) and Award Board (EPA) will take place as detailed above.

For apprentices unable to meet the gateway requirements for reassessment, the course lead and employer will work with the apprentice to identify an individual plan to meet the Gateway and EPA requirements.