Nursing and Midwifery Council Quality Assurance - Extraordinary Review Assessment

Guidance for Approved Education Institutions

June 2026



This document is available in both English and Welsh

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Action	Date	Responsibilities
Guidance approved	June 2026	Assessment and Reviews Group

Overview

1. This document is produced for Approved Education Institutions (AEIs). It sets out details of the method used by QAA when the NMC has requested an Extraordinary Review Assessment (ERA) is undertaken.
2. It is intended to give AEIs the information needed to understand how the process is conducted, how to prepare for an ERA and the activities that take place throughout. As such, it forms the terms of reference for what is expected of the AEI and from QAA during an ERA.
3. In this document, 'you' refers to the institution and 'we' or 'our' refers collectively to QAA, including the managers, officers, visitors and professional support services involved in delivery of the activities.
4. The Nursing and Midwifery Council's (NMC's) Quality assurance framework for nursing, midwifery and nursing associate education (NMC, 2019 updated 2024) outlines the process for responding to concerns in nursing, midwifery and nursing associate education. There are multiple routes in which the NMC may receive a concern about an education programme including an incident, a notification, whistleblowing and/or a complaint. The NMC's aim in responding to concerns is to ensure the protection of the public and student learning through the quality assurance of education. The NMC will assess the risks associated with concerns raised, with particular attention paid to risks to public protection and continued compliance with the NMC Standards for nursing and midwifery education. In response to this, the NMC will decide on the appropriate course of action.
5. ERAs are intended to be a rapid response process for the NMC, to investigate significant/high potential impact concerns that have been identified. The NMC's QA Board commission QAA to undertake an ERA.
6. An ERA may be deemed necessary by the NMC to confirm it is aware of the full range, scope and impact of the concerns identified about a programme/AEI, and ensure the NMC is able to take timely, proportionate and evidence-based decisions about the next steps, to protect the public and the integrity of the NMC register.
7. ERAs may be requested to monitor one or more of an AEI's approved programmes.
8. The NMC will inform the AEI in writing that QAA has been instructed to undertake an ERA and will outline the focus and scope of this bespoke monitoring review. In this letter, the NMC will write the ERA key lines of enquiry (KLOEs) - statements that are data and intelligence led - based upon known issues or suspected risks. The QAA visitors will focus their monitoring during the ERA on the KLOEs.

9. The purpose of this guidance is to provide information about QAA's approach to undertaking ERAs following a request from the NMC. Separate QAA Handbooks outline the processes for the quality assurance activities that QAA performs as the quality assurance service provider (QASP) for the NMC.

   These are as follows:

   - Handbook for institutions seeking Institutional Approval, Programme Approval and Programme Endorsement
   - Handbook for Major Modifications
   - Handbook for Monitoring
   - Handbook for Extraordinary Review Assessments (this handbook).

10. The NMC makes regulatory decisions and is responsible for determining whether to take regulatory action regarding a programme as per the Nursing and Midwifery Order 2001 ('the Order'). Where decisions or actions are undertaken by the NMC, this is outlined in this Handbook. This document should be read in conjunction with the NMC Code, the NMC quality assurance framework and other linked documents.

Introduction

11. The ERA will comprise an initial desk-based analysis, followed by an onsite visit by a visitor team. This document sets out the approach to undertaking an ERA and should be read in conjunction with the KLOEs, the ERA specification and associated information which will be agreed with the NMC and provided to the AEI. The ERA specification will set out the detail of how the ERA will be conducted for the specific AEI and is the definitive document agreed by the NMC and QAA at the start of the process. Each specification for an ERA is bespoke and targeted, and produced based upon the intelligence gathered by the NMC and identified risks. On this basis, it is unlikely that any two ERA processes will be the same.
12. Requests from the NMC to QAA will involve:
    - a briefing from the NMC relating to the findings and evidence collected to date
    - access to relevant data about the AEI from the NMC, and the identification of any specific requirement for QAA to process personal data (see Annexe 1 regarding data protection)
    - dialogue between QAA and the NMC on the scope and expectations of the ERA, which is essential for ensuring effective delivery of the process - for example, whether practice learning partner visits are required by the NMC as part of the ERA.
13. Following a request, QAA will receive an ERA review plan from the NMC, which will outline the KLOEs of the ERA and the NMC standards required to be in scope of the ERA. The standards in scope can include the Part 1: Standards framework for nursing and midwifery education, the Part 2: Standards for student supervision and assessment and the relevant Part 3 Programme standards:
    - Standards for pre-registration nursing programmes
    - Standards for pre-registration midwifery programmes
    - Standards for pre-registration nursing associate programmes
    - Standards for prescribing programmes
    - Standards for return to practice programmes
    - Standards for post-registration programmes.
14. The scope of the ERA is **non-exclusive**. Therefore, if the visitors, when conducting the ERA, identify areas of concern or additional lines of enquiry, these will be followed in order to ensure the resultant report to the NMC is fully comprehensive and is an accurate assessment of the AEI. If additional standards are brought into scope by QA visitors during the ERA, a new KLOE will be developed to reflect this and the details shared with the AEI at the earliest possible time, up to and including the final day of the ERA.
15. The overarching objectives of an ERA are:
    a. to provide findings to the NMC regarding the compliance of the programmes with the NMC Standards for education and training to inform NMC decision making
    b. to identify any outcomes that may need to be managed on an ongoing basis through an action plan and monitoring, as determined by the independent visitors, or by the AEI.

16. Upon request from the NMC, QAA will set up a meeting with the AEI to discuss and ensure consistent understanding of the timeline and ERA specification. QAA will share the timeline for the ERA with you which will include all key deadlines and the visit dates.
17. QAA will appoint a team of visitors, including registrant visitors and lay visitor(s), to conduct an ERA. The size and membership of the visitor team will depend on the programme/programmes in scope as appropriate. AEIs will be advised of the size and composition of the visitor team and will be asked to confirm that there are no conflicts of interest with proposed team members before the visitor team is confirmed.
18. QAA will agree the requirements for the agenda for the visit with the NMC and the visitor team and this will be shared with you at the AEI briefing. Depending on the nature of the KLOE(s), AEIs can expect that the visitor team will want to meet with key stakeholders including students, members of staff, practice learning partner representatives (PLPs), and employer partners (EPs). The visitor team may also wish to access records and resources in situ, for example practice assessment documents that cannot be made available in advance of an ERA. ERAs may on occasion require practice learning visits, and the arrangements for these should be facilitated by the AEI upon request from the NMC.
19. A QAA Officer will be assigned to the ERA. The role of the Officer is to support the visitor team during the process, ensuring that findings from the ERA are recorded, and to oversee the production of the final report reflecting the conclusions reached by the visitor team. QAA's Lead Nurse or Lead Midwife will also be assigned to have strategic oversight of the process from a QAA perspective. The Lead Nurse/Midwife is not part of the ERA, but an observer; however, in the event that the QAA Officer was not available this role could 'step in' to provide continuity of support from QAA.
20. The AEI will be asked to appoint a Principal Event Lead who will liaise with the assigned QAA Officer and support the logistics of the ERA. The responsibilities of the key roles involved in the process are set out in Annexe 2.
21. Other QAA staff may also observe visits as part of the process subject to acceptance from the AEI and the NMC. An ERA will normally be observed by a representative from the NMC. Only the visitors will form judgements in relation to the ERA outcomes. Observers will not normally contribute to any discussions or influence the review findings and outcome.

    There are two key exceptions to this:

    1. when an immediate public safety risk is identified. In this instance, an NMC employee's position as a representative of the Regulator may mean it is necessary to step in and promote public safety, and
    2. when support is needed to ensure consistency in the interpretation of education standards. In this instance, the observer should make their comments to QAA, not the visitor team.

Extraordinary Review Assessments

22. AEIs will be given a minimum period of 10 working days to upload the **requested documentary evidence** into defined evidence folders. AEIs should not upload evidence that has not been requested by QAA into these folders.
23. AEIs will be expected to complete and maintain a mapping document **prior to and during the ERA** to clearly signpost QAA visitors to their evidence submission and demonstrate how their evidence submission confirms (or not) the risks and issues identified within the KLOE(s).
24. The visitor team will undertake an initial desk-based analysis of the evidence base, which the AEI will have been asked to upload to a secure site provided by the NMC. The initial desk-based analysis may raise questions (or formal additional key lines of enquiry) that need to be pursued through requests for additional information. Requests for additional information will relate to the focus of the ERA request, or a new KLOE. Given the limited time available within the schedule to submit additional information, QAA works with the visitor team to ensure these requests are proportionate and minimise additional burden on the AEI. AEIs will also be provided with a supplementary evidence folder to provide additional evidence. This folder will be open throughout the full duration of the ERA.
25. The schedule for an ERA visit will be bespoke and developed with the AEI, in response to the request from the NMC. The ERA will include meetings at the AEI, the purpose of which is to triangulate any questions that remain from the desk-based analysis or the evidence. The onsite visit is an essential opportunity for the visitor team to gain a thorough understanding of the AEI's awareness of the concerns being investigated and any action that may have been taken to date.
26. All ERAs will take place at the AEI (and if applicable, the partnership delivery location, or satellite site). ERAs will not be undertaken remotely (meaning online) in entirety; however, key aspects of the process may be undertaken remotely - such as to engage with students based at a different campus or, in rare cases, to accommodate the business model of the AEI.
27. The length of each ERA will be determined by factors such as the number of campus locations; however, the ERA must always be concluded on a Thursday (or sooner) to ensure the AEI can provide debriefing and wellbeing support to staff, students and/or stakeholders connected to the ERA during the working week. If necessary, an ERA may be split over two or more weeks, with no activity taking place on any Friday during the assessment period.

28. The stakeholders to be met during the onsite visit will depend on the nature and scope of the request. Hybrid meetings with stakeholders are permitted by the method but will be negotiated between the Principal Event Lead and the QAA Officer in the preparatory period. Hybrid meetings can only be agreed if the AEI is able to put in place appropriate arrangements for this, including the AEI being unable to access the 'chat' function for any of the meetings. This is important to protect the anonymity of the participants and the confidentiality of the process. The AEI must be able to set up the QAA officer as a facilitator of the meeting on the online platform, so they can manage the online access and facilitation during the meeting. The AEI must ensure there is appropriate technology to facilitate hybrid meetings and ensure there is appropriate support at the visit to trouble-shoot with any IT equipment used to facilitate hybrid meetings.
29. The NMC will communicate with students directly about the ERA and ask students if they would like to participate in focus groups during the ERA. QAA will manage the scheduling of student meetings and will make contact with all those students who wish to engage. QAA will set up any hybrid meetings with students, but the AEI will be expected to ensure there is appropriate support at the visit to trouble-shoot with any IT equipment used to facilitate hybrid meetings. The AEI will be expected to pass on key messages from the NMC and QAA to students in a timely manner.
30. The schedule will include private visitor team meetings to reflect upon their findings, discuss and agree the outcomes for the report, based on the documentary evidence and the meetings held. There will also be time allocated for the feedback to the AEI of the provisional outcomes at the end of the ERA visit.

Outcomes and findings

31. At the end of each day, the ERA visitor team will provide some general feedback to the AEI in relation to the team's provisional findings.
32. Prior to the close of an ERA, the visitor team will formulate a set of outcomes which include determining whether the relevant standards are being met or not met. Verbal feedback will be provided to the AEI at the close of the visit.
33. The initial findings against the KLOEs will be shared with the AEI within five working days of the close of the visit. This provisional feedback is shared to enable the AEI to commence any action planning that may be required.
34. If the AEI feels it would be able to provide additional evidence to the visitor team, the AEI will be given five working days to do so. The visitor team will consider this evidence, prior to reaching a final decision regarding each KLOE:
    1. All KLOEs will have a binary outcome 'the visitors are assured that X is safe and effective', or 'the visitors are not assured…'
    2. The written feedback will detail which (if any) NMC standards are considered not met to enable the AEI to commence action planning.
    3. At a standards/requirements level, the visitors will determine the following:

       Expected standard - this is a positive outcome indicating that the requirements of the standard are met at the expected level.

       Requires attention - this is a negative outcome meaning that the individual requirements of the standard fall just below the expected level, or the impact of the requirements not met is limited, or the standard is believed to be 'at risk' due to weaknesses identified, but those risks are not yet impacting on the provision.

       Urgent improvement is required - this is a negative outcome meaning public and/or student safety cannot be assured, or there is substantial evidence that the standard is not met and the AEI must take immediate action to mitigate the identified risk or concerns, or an identified or imminent failure of the AEI to protect the integrity of the NMC register.

Reporting

35. After an ERA, the visitors will prepare their independent report for the NMC.
36. The report will set out the visitor team's conclusions with regard to the KLOEs, detailing the AEI's compliance with the standards in scope of the ERA. The report will set out outcomes to inform any actions that should be made by the AEI should there be any standard(s) that the visitor team has concluded the AEI is not compliant with. The actions may necessitate further minor or major modifications to be prepared by the AEI.
37. The report will be produced within 15 working days of the conclusion of the visit. The AEI, on receipt of the report, will have five working days within which to make any comments related to the factual accuracy of the report. Following receipt of any factual accuracy comments from the AEI, QAA will make a final version of the report available to the NMC, with a copy to the AEI.
38. The provision of this version of the report by QAA to the NMC commences a formal period of one calendar month where the AEI may make observations on the report. The observations period is a set period of time required by the Nursing and Midwifery Order 2001. This period begins at the point QAA sends the final copy of the report to the NMC and to the AEI and ends one calendar month from the date on which a copy of the report is sent to the AEI.
39. ERAs will result in a formal report of the outcomes, which must be published in accordance with The Nursing and Midwifery Order (2001). The AEI can choose to have its statement of observations published alongside the QAA visitors' ERA report on the NMC website.
40. AEIs will be required to take immediate action as set out below on any standards where the QAA visitors indicate that **urgent improvement** is required. This is because 'urgent improvement' relates to a public or student safety concern and actions related to safety cannot be delayed by process.
    - The NMC will commence immediate support and action planning where 'urgent improvement' is necessary - in accordance with the escalating concerns process.
    - The QA Board will receive the final report and determine the appropriate pathway for the responsive management of the concern level associated with the QAA visitors' findings (which may include no further action, direct support, placing the programme on enhanced scrutiny, critical concerns monitoring, or making a 'minded to withdraw the programme's approval' decision).
    - The NMC is responsible for the consideration and oversight of AEI action plans in accordance with their concerns management standard operating procedure.
41. Periodically, or when an AEI is able to demonstrate it has restored full compliance, **a progress update report** will be published alongside the ERA report and any statement of observations the AEI requested to be published.
42. The NMC will be responsible for the management of ERA action plans and tracking, under the oversight and governance of the QA Board.

Action plan (where deficits are identified)

43. Unless the ERA concludes that all standards are met, the AEI is expected to produce an action plan based on the outcomes of the ERA. The action plan will need to include timely and proportionate actions to ensure compliance with the Standards for education and training. The action plan should address the outcomes identified by the visitor team, as well as any additional actions the AEI may wish to include.

44. The AEI may begin working on its action plan immediately following the visit and the communication of outcomes in the final session. The final version of the action plan should be submitted to QAA no more than five working days after receipt of the final version of the report. The visitor team will consider the action plan and confirm if, in its opinion, it is sufficient to address any issues identified through the ERA process.

45. If the action plan is considered to be sufficient by the independent QAA visitors, QAA will share the action plan with the NMC. The action plan is subject to approval and acceptance at the NMC's QA Board.

46. If the action plan is considered insufficient, the visitor team will suggest amendments to the action plan, and the AEI will be asked to resubmit the action plan within five working days of receipt of the visitor team's comments. Should there be any further concern with the action plan, the visitor team will communicate this to the NMC at this point, and it is for the NMC to determine what further activity may be required.

47. Once the action plan has been ratified by the QA Board, the NMC will provide ongoing support and monitoring of the action plan in line with its processes; this concludes QAA's involvement in the ERA and the AEI must liaise directly with the NMC beyond this point.

48. The AEI must not contact the QAA visitors about the ERA or seek clarification on any actions required. Any request for clarification must be directly with the NMC and the AEI must not contact QAA visitors directly, after the closure of the ERA visit.

Annexe 1: Data protection

An effective review requires access to a considerable amount of information, some of which may be commercially sensitive or confidential. You can be confident that the information you disclose during a review will not be publicly released or used in an inappropriate manner.

QAA complies with UK data protection legislation, and processes personal data solely for the purpose of conducting its review activities. Access to such data is strictly limited to individuals who require it to fulfil the requirements of NMC quality assurance reviews.

The NMC QA Link - which is central for all quality assurance (QA) processes, electronic documents, gateways and report - offers password-protected support to institutions. It provides access to relevant QA activities and the function to upload documentation to support the review processes. The QA Link is made available to QAA visitors to complete their work only by arranged permissions set up by NMC QA officers, ensuring information security.

We are committed to safeguarding the security and confidentiality of personal and/or special category data, and all members of our staff are responsible for handling data in accordance with QAA's Data Protection Policy and Information Security Policy ensuring that personal and special category information is processed lawfully and appropriately. All our staff and visitors undergo data protection and information security training on an annual basis. Details of how QAA collects and processes personal information, the rights of individuals, and QAA's legal obligations are set out in our Privacy Notice. There is a Data Incident Reporting Policy and Procedure
to ensure that any data incidents are reported, assessed and managed effectively.

Our review policies and procedures provide the following assurances:

- Information provided by you is used only for the purpose of review.
- Information marked by you as 'confidential' is not disclosed to any other party though it may be used to inform review findings.
- Staff, students or other people who are invited to provide information may elect to do so in confidence, in which case the information is treated in the same way as confidential information provided by your institution.
- Review meetings are confidential - the team does not reveal what has been said by any individual, nor are individuals identified in the review report. You are encouraged to require the same degree of confidentiality from people whom the team meet during the review.
- QAA stores confidential information securely.
- Visitor teams are required to delete or destroy material relating to a review, and any notes or annotations they have made, in accordance with QAA's Information Records Management and Retention Policy.
- Visitor teams make no media or other public comment on reviews in which they participate. Any publicity relating to a review is subject to our policies and procedures and will be managed by our public affairs team.

All review supporting materials are deleted in accordance with our information retention policy. Documents are stored on the QA Link in respect of programme approval and held by the NMC.

Annexe 2: Participants in the review process

Lead Nurse/Midwife

This is the person at QAA responsible for overseeing the delivery of the ERA process and is the QAA Officer's and visitor team's first point of contact for queries relating to the process.

Key responsibilities of the role include:

- liaising with the NMC to agree each request referred to QAA
- creating the review timeline and agenda
- working with QAA colleagues to select visitors with appropriate experience (including due regard for the profession) for the request
- manage all student contact and contact with observers
- providing support to the QAA Officer as required
- evaluating and enhancing the method for ERAs.

QAA Officer

We will appoint an officer to coordinate and manage the review from start to finish. All QAA Officers are members of QAA staff and are trained in the review method. They are responsible for establishing constructive working relationships with the institution.

The QAA Officer's overarching role is:

- to ensure the integrity of the review in its implementation, and the conduct of the review process according to the published method, including ensuring that the conclusions of the team are evidence-based and robust.

In addition, the role is to:

- liaise with the institution on the method, information required and logistical arrangements
- facilitate communication between the institution, the Principal Event Lead and the visitor team
- maintain a record of the team's decisions
- ensure the team's judgements are aligned to the judgement criteria for the method and informed by the standards
- oversee the production of the ERA report.

Visitors

Quality assurance activities are carried out by teams of visitors, who are NMC registrants with experience in the relevant field of practice or profession; professionals with senior-level expertise in the provision, management and delivery of higher education in educational and/or practice settings; patients; and people who use services and/or carers.

Registrant visitors are individuals on the NMC register as a nurse, midwife or nursing associate who are currently, or have been in the last three years working in practice or higher education. Registrant visitors must not have any restrictions on their practice. They will be assigned to undertake activities for parts of the register in which they hold current registration and, when appropriate, have a recorded qualification - for example, V300.

In addition to registrant visitors, visitor teams will also include a lay visitor.

The lay visitor will provide analysis through the lens of a non-registrant (in that they are not, and have never been, on the NMC register), and as a person who has/may use health and/or care services.

We appoint visitors using a role profile and person specification published as part of the recruitment process. We train all visitors, which consists of generic induction and training, and training on the specifics of the review method prior to engagement in a review.

The visitors' overarching role is:

- to gather and analyse information in order to reach robust, evidence-based conclusions that represent the collective view of the whole team and are consistent with the published method.

In addition, the role is to:

- identify and assess risks to the NMC standards and the quality of student experience
- apply expert knowledge (including of specific NMC standards)
- assimilate, analyse and evaluate a wide range of evidence, including quantitative and qualitative data
- provide input to visitor meetings
- work closely with QAA Officers to draft review reports
- adhere to a set of agreed procedures to ensure consistency of the delivery of review, to specific timescales and deadlines.

For an ERA, we will appoint a minimum team of three visitors - comprising two registrant visitors and one lay visitor. The team composition will ensure there is appropriate due regard specific to your modification.

The Principal Event Lead

We invite you to nominate a named 'Principal Event Lead' to liaise closely with the QAA Officer to ensure the organisation and smooth running of the review process. The Principal Event Lead should be a member of your staff that can fill the role described below.

The Principal Event Lead's overarching role is to:

- act as the single and primary contact between the QAA Officer and the institution in order to improve the flow of information to the visitor team.

In addition, the role is to:

- support the preparations for the review, including logistical arrangements
- provide advice and guidance to the team on the institution's submission, structures, policies, priorities and procedures
- meet the QAA Officer, and other members of the visitor team if specified, to provide or seek further clarification about particular questions or issues
- help direct the team to additional relevant information or locate the information it is seeking
- seek to clarify items and correct factual inaccuracy
- assist the institution in understanding matters raised by the team.

The Principal Event Lead can ask to observe any of the visitor team's meetings during the visit (including practice learning environment visits) with the exception of some meetings with students or stakeholders and the private visitor team meetings. In all cases this must be agreed with the QAA Officer prior to the visit taking place. When observing, the Principal Event Lead should not participate in the discussion unless invited to do so by the visitor team. The visitor team has the right to ask the Principal Event Lead to disengage from the process at any time, if it considers that there are conflicts of interest, or that the Principal Event Lead's presence in meetings will inhibit discussions.

The Principal Event Lead will have regular contact with the QAA Officer so that the Principal Event Lead and the visitor team can seek clarification and/or gain a better understanding of the institution's approach and the team's lines of enquiry. The development of an effective working relationship between the QAA Officer and your Principal Event Lead helps to avoid misunderstandings of what is expected of you and ensure clarity on the nature and scope of your provision.

The Principal Event Lead is required to observe the same conventions of confidentiality as members of the visitor team. In particular, the confidentiality of written material produced by team members must be respected, and no information gained may be used in a manner that allows individuals to be identified. However, providing that appropriate confidentiality is observed, the Principal Event Lead may make notes during meetings and report back to other staff, in order to ensure that you have a good understanding of the matters being raised. This can contribute to the effectiveness of the review, and to the subsequent enhancement of quality and standards.

It is helpful if the person you nominate as Principal Event Lead has:

- a good working knowledge of your systems and procedures, and an appreciation of quality and standards matters
- knowledge of the relevant programmes
- the ability to communicate clearly, build relationships and maintain confidentiality
- the ability to provide objective guidance and advice to the visitor team.

It is for the visitor team to decide how best to use any information provided by the Principal Event Lead.

People who use services and carer representatives

Effective partnership between the institution and key stakeholders is a key principle underpinning the NMC quality assurance framework which seeks to ensure a people-centred approach in the quality assurance of education. People who use services and their carers are individuals or groups who receive services from nurses, midwives or nursing associates. This includes healthy and sick people, parents, children, families, carers, representatives and advocates. Through the process, this partnership is fulfilled through the use of lay visitors.

Students

Students are among the main beneficiaries of external review and therefore have opportunities to inform and contribute to the process throughout.

We encourage you to involve your students in the preparations for review and on an ongoing basis, including working with students to co-create your self-reports.

We will normally expect to meet your students and their representatives where possible during the visit. At least one meeting with students will be held without any of your staff present. Wherever possible, we would encourage you to work with your representative student body in inviting students to participate in the approval process. We would expect the students we meet to represent the diversity of your student population.

NMC

Visitors are not permitted to be employees of the NMC. The NMC reserves the right to attend visits as observers. During visits the observer role will be maintained unless there are issues arising from the visit that relate to risks to public protection, in which case the NMC role as representative of the regulator will override their status as an observer.

Conflicts of interest

We work to maintain the highest possible standard of integrity in the conduct of our work and are actively vigilant against any perception of conflict or bias. We seek to ensure that there are no conflicts of interest in the conduct of reviews and have a Conflicts of Interest Policy that recognises the range of potential conflicts to be considered, including direct and indirect, actual and perceived. Our staff and visitors are responsible for declaring conflicts of interest as soon as they are aware of them.

Before visitor teams are finalised, proposed names will be checked with you to ensure that you are not aware of any potential conflict with the individuals selected. Individual visitors will not always be aware of potential institutional-level conflicts - for example, discussions with a collaborative partner - and so it is your responsibility to raise any known connections. The involvement of a visitor in a previous 'negative outcome' for an institution is not automatically considered a conflict of interest; however, in certain circumstances, such as where a formal complaint has been submitted against a QAA visitor, this may be considered as a potential conflict of interest.

If there is a dispute between the QAA visitor and the institution regarding a potential conflict of interest, the NMC will be considered the final arbitrator and decision-maker.

Annexe 3: Glossary

Term	Definition
Approved Education Institutions (AEIs)	The status awarded to an institution, part of an institution, or a combination of institutions that work in partnership with practice learning institutions after the NMC has approved a programme. AEIs will have assured the NMC that they are accountable and capable of delivering approved education programmes.
Desk-based analysis	An analysis of documentary evidence by the visitor team submitted by the institution that enables the team to identify and develop its review findings.
Employer partner	Practice learning partners with additional responsibilities for the employment of the student while they are on an NMC-approved programme. This might be on an apprenticeship programme in England, or other form of employment or work-based learning model. Institutions are responsible for working with employer partners to manage the quality of their educational programmes. Overall responsibility for the day-to-day management of the quality of any educational programme lies with an institution in collaboration with employer partners, who provide opportunities for practice learning experiences (such as placements) to nursing, midwifery, and nursing associate students. A representative from all employer partners must be present at approval of apprenticeship routes.
Extraordinary Review Assessments	ERAs are conducted to identify if the AEI and practice placements continue to meet the NMC standards if concerns or intelligence suggest that an AEI or a programme is no longer meeting the NMC standards and requirements.
Judgement	The formal recommendation(s) made by a visitor team to the NMC on whether the institution meets the threshold NMC standards.
Key lines of enquiry	These are data and intelligence-led statements identified by the NMC that are based upon known issues/suspected risks.
Lay visitor	A member of the public who is not registered with the NMC, has not been registered with the NMC in the past, or has a qualification enabling registration with the NMC.

Term	Definition
Lines of enquiry	Areas that the visitor team intends to explore further during the process through requests for additional information and/or through obtaining oral testimony during the visit.
People who use services and carers	Individuals or groups who receive services from nurses, midwives or nursing associates. This includes healthy and sick people, parents, children, families, carers, representatives and advocates.
Practice learning partners	These are organisations that provide practice learning experiences for students - for example, NHS Trusts or Health Boards, GP surgeries and care homes. Institutions are responsible for working with practice learning partners to manage the quality of their educational programmes. Overall responsibility for the day-to-day management of the quality of any educational programme lies with an institution in collaboration with practice learning partners who provide opportunities for practice learning experiences (such as placements) to nursing and midwifery students.
Principal Event Lead	The member of staff identified by the institution to act as the principal point of contact for the QAA Officer who will be available throughout the review to assist with any planning, questions or requests for additional information.
QAA Manager	This is the person at QAA responsible for working directly with the NMC and overseeing the ERA. The QAA Manager is the QAA Officer's and visitor team's first point of contact for queries relating to the process.
QAA Officer	A member of QAA staff who is responsible for managing all stages of the review, including liaison with the visitor team and the Principal Event Lead.
Registrant visitor	An individual who has current registration on one or more parts of the NMC register and works in or has recently worked in nursing and/or midwifery and/or nursing associate education and/or practice. Registrant visitors assigned to review activity will have due regard for the programme they are assessing.

Term	Definition
Visit	A series of meetings held by the panel which include meetings with institution staff, students and other stakeholders to gather oral testimony and private meetings of the team to review documentation and discuss findings.
Visitor team	Team comprising registrant and lay members who make the recommendations to NMC in relation to quality assurance reviews.

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