



### Programme approval report

### **Section one**

Programme provider name:	City, University of London
Programmes reviewed:	Specialist community public health nursing:
	Health visiting ⊠
	Health visiting with integrated independent and supplementary prescribing (V300) □
	School nurse ⊠
	School nurse with integrated independent and supplementary prescribing (V300)
	Occupational health nurse
	Occupational health nurse with integrated independent and supplementary prescribing (V300)
	Public health nurse 🗌
	Public health nurse with integrated independent and supplementary prescribing (V300)
	Specialist community public health nursing (NMC 2022) apprenticeship:
	Health visiting apprenticeship
	Health visiting with integrated independent and supplementary prescribing (V300) apprenticeship
	School nurse apprenticeship





	School nurse with integrated independent and supplementary prescribing (V300) apprenticeship
	Occupational health nurse apprenticeship
	Occupational health nurse with integrated independent and supplementary prescribing (V300) apprenticeship
	Public health nurse apprenticeship
	Public health nurse with integrated independent and supplementary prescribing (V300) apprenticeship
Title of programme(s):	PG Dip Public Health and Specialist Community Nursing (Specialist Community Public Health Nurse: School Nursing)
	PG Dip Public Health and Specialist Community Nursing (Specialist Community Public Health Nurse: Health Visiting)
Academic levels:	
	England, Wales, Northern Ireland  Level 7
SCPHN health visiting	SCQF ☐ Level 11
SCPHN health visiting with integrated independent and supplementary prescribing (V300)	England, Wales, Northern Ireland  Level 7
	SCQF ☐ Level 11
SCPHN school nurse	England, Wales, Northern Ireland





	⊠ Level 7
	SCQF  Level 11
SCPHN school nurse with integrated independent and supplementary prescribing (V300)	England, Wales, Northern Ireland  Level 7
	SCQF  Level 11
	England, Wales, Northern Ireland  Level 7
SCPHN occupational health nurse	SCQF ☐ Level 11
SCPHN occupational health nurse with	England, Wales, Northern Ireland  Level 7
integrated independent and supplementary prescribing (V300)	SCQF  Level 11
	England, Wales, Northern Ireland  Level 7
SCPHN public health nurse	SCQF  Level 11
SCPHN public health nurse with	England, Wales, Northern Ireland  Level 7
integrated independent and supplementary prescribing (V300)	SCQF  Level 11
SCPHN health visiting apprenticeship	England, Wales, Northern Ireland  Level 7
	SCQF ☐ Level 11
SCPHN health visiting with integrated independent and supplementary prescribing (V300) apprenticeship	England, Wales, Northern Ireland  Level 7
prosonomy (1000) appromisesmp	SCQF  Level 11





SCPHN school nurse apprenticeship	England, Wales, Northern Ireland  Level 7
	SCQF  Level 11
SCPHN school nurse with integrated independent and supplementary prescribing (V300) apprenticeship	England, Wales, Northern Ireland  Level 7
prescribing (v 300) apprenticeship	SCQF  Level 11
SCPHN occupational health nurse apprenticeship	England, Wales, Northern Ireland  Level 7
	SCQF  Level 11
SCPHN occupational health nurse with integrated independent and supplementary prescribing (V300)	England, Wales, Northern Ireland  Level 7
apprenticeship	SCQF  Level 11
SCPHN public health nurse apprenticeship	England, Wales, Northern Ireland  Level 7
	SCQF ☐ Level 11
SCPHN public health nurse with integrated independent and	England, Wales, Northern Ireland  Level 7
supplementary prescribing (V300) apprenticeship	SCQF  Level 11
Date of approval visit:	15 March 2024
Programme start date:	
SCPHN health visiting	9 September 2024
SCPHN health visiting with integrated	
independent and supplementary	
prescribing (V300)	
SCPHN school nurse	9 September 2024





SCPHN school nurse with integrated	
independent and supplementary	
prescribing (V300)	
SCPHN occupational health nurse	
SCPHN occupational health nurse with	
integrated independent and	
supplementary prescribing (V300)	
SCPHN public health nurse	
SCPHN public health nurse with	
integrated independent and	
supplementary prescribing (V300)	
SCPHN health visiting apprenticeship	
SCPHN health visiting with integrated	
independent and supplementary	
prescribing (V300) apprenticeship	
SCPHN school nurse apprenticeship	
SCPHN school nurse with integrated	
independent and supplementary	
prescribing (V300) apprenticeship	
SCPHN occupational health nurse	
apprenticeship	
SCPHN occupational health nurse with	
integrated independent and	
supplementary prescribing (V300)	
apprenticeship	
SCPHN public health nurse	
apprenticeship	
SCPHN public health nurse with	
integrated independent and	
supplementary prescribing (V300)	
apprenticeship	Degistront Visitory Vereniaus Oldfield
QA visitor(s):	Registrant Visitor: Veronique Oldfield Lay Visitor: Caroline Thomas





#### **Section two**

#### **Summary of review and findings**

City University of London (CUoL) is an approved education institution (AEI) and an established provider of post registration specialist community public health nursing (SCPHN). CUoL present for approval two SCPHN fields with a postgraduate diploma (PGDip) award in the fields of health visiting (HV) and school nursing (SN). Approval is sought for both full-time and part-time routes. The PGDip award is a one-year taught programme for full-time students or a two-year taught programme for part-time students. The maximum period of registration for full-time students is two years or for part-time students is three years. Students successfully completing the PGDip award can apply for acceptance onto an MSc programme, which isn't part of this approval process. The programme is delivered at CUoL campus in Northampton Square.

The programme is mapped against the Standards framework for nursing and midwifery education (SFNME) (Nursing and Midwifery Council (NMC), 2018), the Standards for student supervision and assessment (SSSA) (NMC 2018, updated 2023), the Standards for post-registration programmes (SPRP) (NMC 2022, updated 2023) and the Standards of proficiency for SCPHN (SPSCPHN) (NMC, 2022).

The programme director is a registered SCPHN HV and is supported by an academic team which includes further registered SCPHN HVs and one SCPHN SN. Academics who are registered SCPHN HVs and SNs are suitably prepared to undertake the role of academic assessor.

Governance arrangements exist to manage any concerns regarding practice and quality of practice environments. Procedures for escalating concerns appear in programme documentation. At the visit, practice learning partners (PLPs) including practice assessors and practice supervisors and members of the programme team confirm effective partnership working to manage the escalation of concerns. If adverse Care Quality Commission (CQC) inspection outcomes are received by any PLP, these are escalated to the AEI. The programme team regularly liaise and meet with staff in practice environments at operational and strategic levels. CUoL and PLPs carry out joint biennial educational audits of practice environments to ensure their suitability for student experience and have mechanisms in place to report any actions to the NMC via the annual self-assessment report and exceptional reporting procedures.

Documentary evidence suggests that there are clear processes in place concerning post registration preparation for practice assessors and practice supervisors. At the visit, practice assessors and practice supervisors tell us that they're well-prepared and receive ongoing support from CUoL for their roles in relation to SCPHN student supervision and assessment.





CUoL has adopted the approved pan-London SCPHN practice assessment document (PAD) for practice placement assessment.

Documentation and discussion at the approval visit with the programme team, PLPs and students on the existing programme confirm that the programme is developed and delivered to encourage equality, diversity, inclusion (EDI) and the achievement of all students. CUoL provide assurance that they collate relevant EDI data and makes use of this to support students on the programme. The programme team, PLPs and existing students confirm that they take individual student needs and experiences into account. Students perceive that their wellbeing is considered and that they can organise their studies to achieve and meet the programme proficiencies. Students confirm that they're signposted to, and access academic and study support available when they need it.

The approval is undertaken face-to-face.

The SFNME isn't met at programme level as conditions apply.

The SSSA are met at programme level.

The programme is recommended to the NMC for approval subject to five NMC and university joint conditions. There are two NMC recommendations (one joint with the university) and one university recommendation.

Updated 30 April 2024:

Evidence is provided to meet the five conditions. CUoL confirm that the conditions are met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	Programme is recommended to the NMC for approval
	Programme is recommended for approval subject to specific conditions being met
	Recommended to refuse approval of the programme





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

Condition one: Provide an accurate list of the PLPs working in partnership with the proposed SCPHN programme with a sample of placement agreements. (SFNME R2.13; SPRP R2.1) (NMC and university condition)

#### Selection, admission and progression:

Condition two: Detail how people who use services and carers (PUSCs) are suitably prepared and involved in the recruitment of SCPHN applicants. (SFNME R2.6, R2.7) (NMC and university condition)

#### **Practice learning:**

Condition three: Provide student facing documentation for the proposed SCPHN programme for example a practice specific handbook and programme handbook. (SFNME R3.2; SPRP R2.1) (NMC and university condition)

### Assessment, fitness for practice and award:

Condition four: Ensure that programme documentation and student facing documentation accurately details that the award of PGDip confers NMC registration to part three of the register. (SFNME R3.10; SPRP R2.1) (NMC and university condition)

### Education governance: management and quality assurance:

Condition five: In partnership with PLPs, provide a clear process and related programme documentation that demonstrates the opportunities, arrangements and governance structure in place to support self-employed or self-funded applicants. (SPRP R1.3, R1.5) (NMC and university condition)

# Date condition(s) to be met:

**Conditions:** 

26 April 2024

#### 8





Recommendations to
enhance the programme
delivery:

Recommendation one: Consider expanding the sustainable recruitment of PUSCs to ensure the SCPHN programme is designed, developed, delivered, evaluated and co-produced. (SFNME R1.12)

Recommendation two: Consider strengthening the governance processes to ensure that all practice supervisors have undertaken a period of preceptorship or can evidence prior learning prior to acting in the role of practice supervisor to SCPHN students. (SPRP R4.4.1, R4.4.2) (NMC and university recommendation)

Recommendation three: Ensure that all partnership working around programme development and review is supported by clear governance frameworks and appropriately documented. For example, there are clear membership lists, terms of reference, meeting calendars, agendas and minutes of all partnership groups to ensure that partnership working is appropriately documented and can be clearly evidenced if required. (University recommendation)

# Focused areas for future monitoring:

EDI preparation and training of PUSCs and involvement in recruitment.

# Programme is recommended for approval subject to specific conditions being met

#### Commentary post review of evidence against conditions:

There is documentary evidence which supports the five conditions.

CUoL provide the placement agreement documents for all practice learning providers and a list of the PLPs. Condition one is met.

CUoL provide documentary evidence of PUSC involvement in the programme and the stages of preparation PUSC will undergo prior to taking part in recruitment, teaching and assessment activities. This includes the admissions flowchart (onboarding) which evidences PUSC involvement in this process and a detailed action plan for PUSC involvement in the programme is also provided. CUoL also provide evidence of the EDI training PUSCs will receive prior to engaging in recruitment activity and there is a terms of reference document for the CUoL PUSCs form the 'lived and living experience community of practice (LLECP) group'





and will be selected to engage in recruitment and further programme activities such as teaching and assessment. Condition two is met.

CUoL provide student facing documents including the template for the SCPHN pathway 2024/25 programme handbook which includes an updated programme specification. A student practice handbook is also provided. Condition three is met.

CUoL provide evidence of updated student facing programme documentation, which clearly states that the award of PGDip confers NMC registration to part three of the register. This includes an updated programme specification. Condition four is met.

CUoL provide updated documentation which clearly outlines the process, opportunities and governance structure in place for self-funded and self-employed applicants. There is evidence of an updated flowchart for self-employed and self-funded applicants which outlines the support and opportunities available. There is also additional evidence provided to outline the occupational health (OH) and disclosure and barring service (DBS) processes for self-employed and self-funded applicants. The supplementary application form is also updated to refer to self-funded and self-employed applicants. Condition five is met.

CUoL confirm that the conditions are met.

AEI Observations	Observations have been made by the education institution YES $\boxtimes$ NO $\square$
Summary of observations made, if applicable	Programme title amendments. Student transfer arrangements amended. Acronym corrected. Wording of AEI recommendation confirmed.
Final recommendation made to NMC:	Programme is recommended to the NMC for approval ⊠
	Recommended to refuse approval of the programme
Date condition(s) met:	24 April 2024

#### **Section three**

NMC Programme standards
Please refer to NMC standards reference points:
Standards for post-registration education programmes (NMC 2022, updated 2023)





#### **NMC Programme standards**

<u>Standards of proficiency for specialist community public health nurses</u> (NMC, 2022)

<u>Standards framework for nursing and midwifery education</u> (NMC 2018, updated 2023)

<u>Standards for student supervision and assessment (NMC 2018, updated 2023)</u>
<u>The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates (NMC, 2015 updated 2018)</u>

Quality assurance framework for nursing, midwifery and nursing associate education (NMC, 2020)

QA Handbook (NMC, 2022)

#### **Partnerships**

The AEI works in partnership with their practice learning partners, people who use services, students and all other stakeholders.

Please refer to the following NMC standards reference points for this section:

<u>Standards framework for nursing and midwifery education</u> (NMC 2018, updated 2023)

#### Standard 1: The learning culture:

- R1.12 ensure programmes are designed, developed, delivered, evaluated and coproduced with people who use services and other stakeholders
- R1.13 work with service providers to demonstrate and promote inter-professional learning and working

#### Standard 2: Educational governance and quality:

- S2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, people who use services, students and all other stakeholders
- R2.4 comply with NMC Standards for student supervision and assessment
- R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes
- R2.6 ensure that recruitment and selection of students is open, fair and transparent and includes measures to understand and address underrepresentation
- R2.7 ensure that people who use services and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection





#### **Standard 3: Student empowerment:**

- R3.3 have opportunities throughout their programme to work with and learn from a range of people in a variety of practice placements, preparing them to provide care to people with diverse needs
- R3.16 have opportunities throughout their programme to collaborate and learn with and from other professionals, to learn with and from peers, and to develop supervision and leadership skills
- R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning
- R3.18 have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice.

#### Standard 4: Educators and assessors:

- R4.7 liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment
- R4.9 receive and act upon constructive feedback from students and the people they engage with to enhance the effectiveness of their teaching, supervision and assessment
- R4.10 share effective practice and learn from others

#### Standard 5: Curricula and assessment:

- R5.4 curricula are developed and evaluated by suitably experienced and qualified educators and practitioners who are accountable for ensuring that the curriculum incorporates relevant programme outcomes
- R5.5 curricula are co-produced with stakeholders who have experience relevant to the programme
- R5.14 a range of people including people who use services contribute to student assessment

Standards for student supervision and assessment (NMC 2018, updated 2023)

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

- R1.4 there are suitable systems, processes, resources and individuals in place to ensure safe and effective coordination of learning within practice learning environments
- R1.7 students are empowered to be proactive and to take responsibility for their learning
- R1.8 students have opportunities to learn from a range of relevant people in practice learning environments, including users of service, registered and non-registered individuals, and other students as appropriate

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

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





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

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

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

R4.3 have sufficient opportunities to engage with practice assessors and academic assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising

### Standard 7: Practice assessors: responsibilities:

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

### Standard 9: Academic assessors: responsibilities:

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

#### Findings against the standard and requirements

Provide an <u>evaluative summary</u> about the effectiveness of the partnerships between the AEI and their practice learning partners, people who use services, students and any other stakeholders.

Documentary evidence and discussion at the approval visit indicate well-established partnerships between the AEI, PLPs and students. Students and PLPs are involved in programme development and review. This includes practice supervisors and practice assessors.

Recruitment and selection processes are undertaken jointly by PLPs and CUoL. PLPs tell us that recruitment data is guided by the availability of suitably prepared practice assessors and practice supervisors within the practice areas. The programme team, PLPs, students and PUSCs tell us there's limited involvement of PUSCs in recruitment and selection of students. There's no documentary evidence of how PUSCs are recruited, prepared and supported in their roles. We meet two PUSCs, who aren't involved in student recruitment and programme delivery. They were consulted in the co-production of the programme as users of the services. They've not received any preparation to play a role in the programme delivery or assessment. Their training is part of their jobs outside of CUoL. PUSCs tell us that they'd welcome the opportunity to work with CUoL on student recruitment to the programme in the future. The limited documentary evidence which doesn't provide assurance of the programme team's intent to involve PUSCs in student recruitment and delivery across the programme's academic modules.





The programme team tell us that the AEI intends to promote PUSC contribution in all modules of the new programme and in student assessments such as objective structured clinical examinations (OSCEs). PUSCs ambition is that the lived experiences of PUSCs inform programme delivery and they wish to see students uphold the values of the nursing profession. The programme team seeks to embrace these views in the new programme. A joint university and NMC condition is applied to detail how PUSCs are suitably prepared and involved in the recruitment of SCPHN applicants (Condition two). A joint recommendation is applied to consider expanding the sustainable recruitment of PUSCs to ensure their continued engagement in SCPHN programme co-production, delivery, review and student recruitment process. (Recommendation one)

Students confirm that they've been consulted about programme development and their voices shape its design. They give examples of changes made to the new programme based on their engagement. One example is change of assessments. Existing students feel well supervised and supported in practice learning areas to learn the proficiencies required for them to successfully complete the programme.

The programme team inform us that existing students on the programme receive PUSC input in the current programme, for example breast feeding experiences and that a PUSC is also now a member of the programme advisory board.

There's evidence of PLP involvement in recruitment. The programme team and PLPs tell us that interviews take place within the PLP practice areas and a member of the programme team attends the interviews. The number of students recruited is determined by the PLPs based on the number of practice assessors and practice supervisors available in each team. There's evidence of good engagement with PLPs in the development of the programme. This includes minutes from Microsoft Teams meetings for programme consultation meetings with PLPs. PLPs tell us that they work with CUoL to assess workforce requirements. In terms of programme development, a module has been developed focused on child and adolescent mental health services (CAMHS) in response to the rise in child and adolescent mental health issues in the local community. The programme team and students tell us that this module is also developed based on student feedback from their experiences in practice and the need for further knowledge on child and adolescent mental health. At a strategic and operational level, there are robust governance arrangements in place to address any academic and practice risks that may adversely influence student learning. PLPs meet regularly with CUoL to review practice and the programme team meet regularly with practice assessors and practice supervisors to monitor and review student learning.

Practice assessors, practice supervisors and students are aware of the processes for escalating any concerns and confirm how they work effectively with CUoL link lecturers and programme leads to support any students causing concern and, in the production and monitoring of individual student action plans. Documentary evidence and discussions with students, practice assessors and practice supervisors indicate effective use of tripartite reviews between students, practice





assessors and academic assessors. Practice assessors and practice supervisors confirm there are sufficient numbers of them to manage the proposed student numbers for the new programme and that with students having a study day per week they can meet with students to promote reflection on learning and plan future learning needs.

Documentary evidence and meetings with PLPs and students at the approval visit provide assurance that effective evaluation processes are in place to gain student feedback on academic modules and practice. Students, practice assessors and practice supervisors tell us that they receive the outcomes and confirm how feedback is used to inform programme development and improve student experiences. Students tell us that their concerns are acknowledged and responded to in a timely manner. Students confirm that any issues and concerns are dealt with sensitively and are addressed in a timely manner. For example, the programme team in response to existing student feedback moved a viva before the Christmas break to enhance student management of their assessments. Students inform us that they gain additional support for managing mental health issues they face in the community. They report being supported by lecturers and being signposted to helpful resources to support their learning. In response to student feedback, students report that on the current programme 10 alternative practice days in other areas are reduced to five to make the experience more manageable. Students feel well supervised in practice learning areas and achieve the SPSCPHN required for them to successfully complete the programme. They're aware of the processes for escalating concerns and feel comfortable to raise concerns. One student confirms being supported well when this was necessary by the programme team and that the situation was addressed quickly.

Documentation indicates that PUSCs provide feedback for students in the PAD. Existing students indicate that they're supported by their practice assessors and practice supervisors in gaining feedback from children and adolescents and that the feedback format can be varied to meet the needs of the PUSCs.

Assurance is provided that the AEI works in partnership with their practice learning partners, people who use services, students and all other stakeholders as identified in Gateway 1: <u>Standards framework for nursing and midwifery education</u>
MET $\square$ NOT MET $\boxtimes$
PUSCS aren't suitably prepared or involved in the recruitment of SCPHN applicants.
Condition two: Detail how PUSCs are suitably prepared and involved in the recruitment of SCPHN applicants. (SFNME R2.6, R2.7) (NMC and university condition)





partners, people who use services, students and all other stakeholders as
identified in Gateway 2: <u>Standards for student supervision and assessment</u> MET ☑ NOT MET ☐
Post Event Review
Identify how the condition is met:
Condition two: A PGDip Public Health and Specialist Community Nursing (SCPHN/specialist practice qualification (SPQ)) programme PUSC involvement action plan is provided, which details the processes employed to ensure PUSCs are suitably prepared and involved in the recruitment of students. This includes EDI training and further evidence of proposed PUSC involvement in the programme and which specific modules this will sit within. The admissions flowchart includes details of the requirements of PUSCs within the recruitment process. A CUoL LLECP group will contribute to recruitment activities, particularly interviews.
Condition two is met. Evidence: City, UoL LLECP group terms of reference, 15 December 2023 City, UoL LLECP onboarding process, undated EDI training- undated CUoL EDI strategy 2020-2026, undated PGDip/MSc public health and specialist community nursing (SCPHN/SPQ) recruitment and onboarding process flowchart for NHS, private and third sector employed sponsored students, undated
Date condition(s) met: 24 April 2024
Revised outcome after condition(s) met: MET 🖂 NOT MET 🗌
Independent/Supplementary Prescriber (V300)
Please indicate whether the V300 is a compulsory or optional element of the Specialist community public health nursing programme.  Optional  Compulsory  N/A
The SCPHN HV and SN routes aren't available with the option of completing the V300 qualification.
Please indicate whether the V300 is to be approved at this event against the Standards for prescribing programmes and Standards of proficiency for nurse





and midwife prescriber (adoption of the Royal Pharmaceutical Sociocompetency framework for all prescribers) (NMC, 2021)	_	
YE	ES 🗌	NO 🖂
OR		
If V300 is approved against <u>Standards for prescribing programmes</u> <u>Standards of proficiency for nurse and midwife prescriber</u> provide that approved:		it was
11 September 2020		

### Student journey through the programme

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

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

- R1.1 ensure that the applicant is an:
- R1.1.1 NMC registered nurse (level 1) or NMC registered midwife capable of safe and effective practice at the level of proficiency appropriate to the NMC approved Specialist Community Public Health Nurse (SCPHN) programme before being considered as eligible to apply for entry
- R1.1.2 NMC registered nurse (level 1) with relevant professional registration, capable of safe and effective practice at the level of proficiency appropriate to the NMC approved Community Nursing Specialist Practice Qualification (SPQ) programme before being considered as eligible to apply for entry
- R1.2 confirm on entry that each applicant selected to undertake a SCPHN or community nursing SPQ programme has the academic capability to study at the level required for that programme
- R1.3 provide opportunities that enable eligible NMC registered nurses and/or NMC registered midwives, including NHS, non-NHS, self-employed or self-funded applicants to apply for entry onto an NMC approved SCPHN programme
- R1.4 provide opportunities that enable eligible NMC registered nurses, including NHS, non-NHS, self-employed or self-funded applicants to apply for entry onto an NMC approved community nursing SPQ programme
- R1.5 confirm that the necessary arrangements and governance structures are in place to support practice learning, including employer support and protected learning time, to enable students to undertake and be appropriately supported throughout the programme
- R1.6 consider recognition of prior learning that is capable of being mapped to the:
- R1.6.1 programme learning outcomes and standards of proficiency for the applicant's intended field of SCPHN practice or SCPHN public health nurse practice





R1.6.2	2 programme learning outcomes and standards of proficiency for the
	applicant's intended field of community nursing SPQ practice or in other
	specified field(s) for the community nursing SPQ in health and social care
	practice

- R1.7 where programmes intend to offer SCPHN and/or SPQ students admission to an NMC approved independent/supplementary (V300) prescribing programme consider recognition of prior learning that is capable of being mapped to the *Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers for applicants*, and
- R1.8 where programmes intend to offer admission to an NMC approved independent/supplementary (V300) prescribing qualification to SCPHN and/or SPQ students, ensure that the applicant is a registered nurse (level 1) and/or a registered midwife before being considered as eligible to apply for entry.

<u>Standards framework for nursing and midwifery education</u>, specifically R2.6, R2.7, R2.8, R2.9, R2.11

Proposed transfer of current students to the programme under review

Demonstrate a robust process to transfer current students onto the proposed programme to ensure programme learning outcomes and proficiencies meet the 
<u>Standards for post-registration education programmes</u> (NMC 2022, updated 2023).

Proposed transfer of current students to the <u>Standards for student</u> <u>supervision and assessment</u> (NMC 2018, updated 2023).

Demonstrate a robust process to transfer current students onto the <u>Standards for</u> <u>student supervision and assessment</u> (NMC 2018, updated 2023).

#### Findings against the standard and requirements

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

	YES 🖾 NO 🗆 N/A 🗀
	being considered as eligible to apply for entry (R1.1.1)
	Specialist Community Public Health Nurse (SCPHN) programme before
	practice at the level of proficiency appropriate to the NMC approved
	nurse (level 1) or NMC registered midwife capable of safe and effective
•	Evidence of processes to ensure that the applicant is a NMC registered

 Evidence of processes to ensure that the applicant is a NMC registered nurse (level 1) with relevant professional registration, capable of safe and effective practice at the level of proficiency appropriate to the NMC approved Community Nursing Specialist Practice Qualification (SPQ) programme before being considered as eligible to apply for entry (R1.1.2)





N/A 🗵	3
An SPQ programme isn't proposed.	
<ul> <li>Processes are in place to confirm on entry that each applicant selected to undertake a SCPHN or community nursing SPQ programme has the academic capability to study at the level required for that programme (R1.</li> <li>YES NO</li> </ul>	.2)
<ul> <li>Evidence of selection process that demonstrates opportunities that enable eligible NMC registered nurses and/or NMC registered midwives, including NHS, non-NHS, self-employed or self-funded applicants to apply for entronto an NMC approved SCPHN programme (R1.3)</li> <li>YES \( \subseteq \) NO \( \subseteq \) N/A \( \subseteq \)</li> </ul>	ng Ty
R1.3 is not met. The supplementary application form (SAF) requires applicants confirm they're a NMC registered nurse or midwife and provide their NMC PIN number. The SAF also requires applicants to confirm that they've a current DBS check. There's documentary evidence of the academic entry requirements within the entry requirements document. Documentary evidence and discussion at the approval visit indicate that there's an option in place for self-employed and self-funded applicants to apply for the programme. However, the governance arrangements around application of self-employed and self-funded students need further assurance. (Condition five)	S in e
<ul> <li>Evidence of selection process that demonstrates opportunities that enable eligible NMC registered nurses, including NHS, non-NHS, self-employed self-funded applicants to apply for entry onto an NMC approved community nursing SPQ programme (R1.4)</li> </ul> N/A \( \Selection \)	d or nity
An SPQ programme isn't proposed.	
Provide an <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance provided that the QA approval criteria below is met or not met	is
<ul> <li>Evidence that the necessary arrangements and governance structures are in place to support practice learning, including employer support and protected learning time, to enable students to undertake and be appropriately supported throughout the programme (R1.5)</li> <li>MET \( \subseteq \) NOT MET \( \subseteq \)</li> </ul>	





R1.5 is not met. Documentation and discussion at the approval visit indicates that PLPs receive training prior to students starting the programme and attend regular updates and support sessions with the programme team. There's a practice assessor and practice supervisor register to evidence attendance at training sessions. Practice assessors also attend the induction to practice learning alongside the students, which includes an introduction to the pan-London PAD.

Documentary evidence confirms that protected learning time (PLT) is in place for students. Students tell us that they're supernumerary and receive one study day per week. Following student recruitment, PLPs allocate practice assessors and practice supervisors. Practice evaluation documents indicate how PLT is monitored.

Discussions at the approval visit provide assurance that there are adequate numbers of practice supervisors and practice assessors to support the proposed student numbers.

Practice supervisors, practice assessors and students are aware of the processes for escalating concerns and affirm that these are responded to and resolved in a timely manner. These processes for escalating concerns are in the programme specification. PLPs and students provide examples of when they've previously raised concerns and how these were managed by the programme team.

Documentary evidence indicates that applicants must hold level one registration with the NMC as a nurse or registration as a midwife. This is stated in the programme specification. Students entering the programme must have a lower second class or above honours degree in a relevant subject or satisfactory evidence of continuing professional development (CPD) (academic level six or seven) study undertaken within the last five years and/or equivalent professional experience. Processes are in place to check that applicants provide documentary evidence of previous academic and professional qualifications as part of the university application process. Applicants can be self-funded or self-employed. The programme team and PLPs tell us that recruitment and shortlisting is done jointly between CUoL and PLPs.

Documentary evidence and discussion at the approval visit confirm that there's an option in place for self-employed and self-funded applicants to apply for the programme. However, the governance arrangements around application of self-employed and self-funded students needs further assurance. (Condition five)

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

 Processes are in place to consider recognition of prior learning that is capable of being mapped to programme learning outcomes and standards of proficiency for the applicant's intended field of SCPHN practice or SCPHN public health nurse practice (R1.6.1)





YES⊠ NO□ N/A□
TES MULINAL
Processes are in place to consider recognition of prior learning that is
capable of being mapped to programme learning outcomes and standards of proficiency for the applicant's intended field of community nursing SPQ practice or in other specified field(s) for the community nursing SPQ in health and social care practice (R1.6.2)
N/A
An SPQ programme isn't proposed.
<ul> <li>Where programmes intend to offer SCPHN and/or SPQ students admission to an NMC approved independent/supplementary (V300) prescribing programme processes are in place to consider recognition of prior learning that is capable of being mapped to the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers for applicants (R1.7)</li> <li>YES \( \subseteq \) NO \( \subseteq \) N/A \( \subseteq \)</li> </ul>
V300 isn't proposed for SCPHN routes.
Where programmes intend to offer admission to an NMC approved independent/supplementary (V300) prescribing qualification to SCPHN and/or SPQ students, there is evidence of processes to ensure that the applicant is a registered nurse (level 1) and/or a registered midwife before being considered as eligible to apply for entry (R1.8)  YES □ NO □ N/A ⋈   Output   N/A ⋈   N/A ⋈  ■ N/A ⋈
V300 isn't proposed for SCPHN routes.
Proposed transfer of current students to the programme under review
From your documentary analysis and your meeting with students, provide an evaluative summary to confirm how the Standards for post-registration education programmes and Standards of proficiency for specialist community public health nurses (NMC, 2022) will be met through the transfer of existing students onto the proposed programme.
Documentary evidence indicates that current students who've deferred module attempts will complete the module they're registered on. At the visit the programme team confirm that all current students will complete the existing programme and won't transfer onto the new programme.
Proposed transfer of current students to the <u>Standards for student</u> supervision and assessment (SSSA) (NMC 2018, updated 2023).





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

CUoL already have the SSSA in place for all students, therefore transfer isn't required. Students are aware of the arrangements for SSSA.

Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to selection, admission and progression are met **YES** NO

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			۱.			

Is the standard met?

MET 🗌

NOT MET

Documentary evidence and discussion at the approval visit confirm that there's an option in place for self-employed and self-funded applicants to apply for the programme. However, the governance arrangements around application of self-employed and self-funded students needs further assurance.

Condition five: In partnership with PLPs, provide a clear process and related programme documentation that demonstrates the opportunities, arrangements and governance structure in place to support self-employed or self-funded applicants. (SPRP R1.3, R1.5) (NMC and university condition)

**Date:** 15 March 2024

#### Post event review

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

Condition five: The application process flowchart is updated and confirms what opportunities and governance structures are in place for self-funded and self-employed applicants. This is also supported by evidence of CUoL OH and DBS processes which reference self-funded and self-employed students. The supplementary application form is updated and provides specific reference to self-funded and self-employed students. The SCPHN practice handbook and programme handbook template for 2024-25 refer to self-funded and self-employed students and the processes for allocating a suitable practice placement provider.

Condition five is met.

#### Evidence:

School of health and psychological sciences (SHPS) DBS Guidance, 8 June 2023 SHPS OH Guidance, June 2023

Updated SCPHN SPQ supplementary application form, undated





recruitment and onboarding process flowchart for employed sponsored students, undated	, ,	,
Date condition(s) met: 24 April 2024		
Revised outcome after condition(s) met:	MET ⊠	NOT MET

#### Standard 2: Curriculum

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

- R2.1 confirm programmes comply with the NMC *Standards framework for nursing* and midwifery education including the confirmation of appropriately qualified and experienced people for programme delivery for:
- R2.1.1 all selected fields of SCPHN practice and/or SCPHN PHN practice and/or for
- R2.1.2 all selected fields of community nursing SPQ practice and/or in other specified fields of community nursing SPQ in health and social care practice
- R2.2 confirm SCPHN and/or SPQ programmes comply with the NMC *Standards* for student supervision and assessment
- R2.3 confirm SCPHN and/or community nursing SPQ programmes that include admission to NMC approved prescribing qualification comply with the NMC *Standards for prescribing programmes*
- R2.4 state routes within the programme for:
- R2.4.1 students to enter the SCPHN register in a specific field of SCPHN practice: health visitor, school nurse, occupational health nurse
- R2.4.2 students to enter the SCPHN register for the public health nurse qualification
- R2.4.3 students to annotate their registration in a specific field of community nursing SPQ practice: community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing
- R2.4.4 students to annotate their registration in community nursing SPQ practice in health and social care
- R2.5 ensure programme learning outcomes reflect the:
- R2.5.1 core and field specific standards of proficiency for SCPHN and for the intended field(s) of SCPHN practice: health visiting, school nursing, occupational health nursing
- R2.5.2 core standards of proficiency for SCPHN that are tailored to public health nursing
- R2.5.3 standards of proficiency for community nursing SPQ that are tailored to the intended field and related context of community nursing practice. These may be within community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice





nursing or in specified field(s) for community nursing SPQ in health and social care practice

- R2.6 set out the general and professional content necessary to meet the:
- R2.6.1 core and field specific standards of proficiency for each intended field of SCPHN practice: health visiting, school nursing, occupational health nursing,
- R2.6.2 core standards of proficiency for SCPHN public health nurse qualification
- R2.6.3 standards of proficiency for the community nursing SPQ that is tailored to the intended field of community nursing practice. These may be within community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing, or in other specified field(s) of community nursing in health and social care
- R2.7 set out the content necessary to meet the programme outcomes for each intended field of:
- R2.7.1 SCPHN practice: health visiting, school nursing, occupational health nursing and/or SCPHN public health nursing,
- R2.7.2 community nursing SPQ practice: community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing and/or in other specified field(s) of community nursing in health and social care
- R2.8 ensure that the curriculum provides a balance of theory and practice learning opportunities, using a range of learning and teaching strategies
- R2.9 ensure technology-enhanced and simulated learning opportunities are used effectively and proportionately across the curriculum to support learning and assessment
- R2.10 ensure programmes delivered in Wales comply with legislation which supports use of the Welsh language, and
- R2.11 ensure programmes are:
- R2.11.1 of suitable length to support student achievement of all proficiencies and programme outcomes for their intended SCPHN or community nursing SPQ award
- R2.11.2 no less than 45 programmed weeks of theory and practice learning for full-time programmes/pro rata for part time programmes.

Standards framework for nursing and midwifery education, specifically R1.9, R1.13; R2.2, R2.15, R2.17, R2.19, R2.20, R3.1, R3.2, R3.4, R3.9, R3.10, R3.15, R3.16; R5.1 - R5.16.

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

#### Findings against the standard and requirements

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





R2.1 There is evidence that the programme complies with the NMC <i>Standards</i> framework for nursing and midwifery education including the confirmation of appropriately qualified and experienced people for programme delivery for:
all selected fields of SCPHN practice and/or SCPHN PHN practice (R2.1.1)     YES □ NO ☒ N/A □
R2.1 is not met. Documentary evidence doesn't accurately detail in programme or student facing documentation that the award of PGDip confers NMC registration on part three of the register. (Condition four)
The proposed practice specific handbook and programme handbook aren't provided. There's a lack of student facing documentation to be assured that students are provided with timely and accurate programme information. (Condition three)
At the approval visit we are presented with PLPs that aren't listed by CUoL at gateway one or gateway three. The AEI must provide an updated lists of PLPs along with a sample of signed placement agreements. (Condition one)
all selected fields of community nursing SPQ practice and/or in other specified fields of community nursing SPQ in health and social care practice (R2.1.2)      N/A   ✓
An SPQ programme isn't proposed.
There is evidence that the programme complies with the NMC Standards for student supervision and assessment (R2.2)
YES ⊠ NO □
<ul> <li>Where programmes intend to offer admission to an NMC approved independent/supplementary prescribing qualification to SCPHN and/or SPQ students, there is evidence that the prescribing qualification complies with the NMC Standards for prescribing programmes (R2.3)</li></ul>
R2.4 There is evidence that routes are stated within the programme for:
<ul> <li>students to enter the SCPHN register in a specific field of SCPHN practice: health visitor, school nurse, occupational health nurse (R2.4.1)</li> <li>YES NO NA NA</li> </ul>





_	students to enter the SCPHN register for the pu	hlic health	nursa		
•	qualification (R2.4.2)			<b>N1/A</b>	
A pub	olic health nurse route isn't proposed.	YES 🗌	NO 🗆	N/A	
•	<ul> <li>students to annotate their registration in a specific field of community nursing SPQ practice: community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing (R2.4.3)</li> </ul>			ıg	
	general practice nationing (112.4.5)		I	N/A 🏻	$\boxtimes$
An Si	PQ programme isn't proposed.				
•	students to annotate their registration in commu health and social care (R2.4.4)	nity nursin	g SPQ pr	actice	e in
			I	N/A 🛭	
An SI	PQ programme isn't proposed.				
R2.5	There is evidence to ensure programme learning	outcomes	reflect th	e:	
•	core and field specific standards of proficiency intended field(s) of SCPHN practice: health visi				
	occupational health nursing (R2.5.1)	YES⊠	NO □	N/A	
•	core standards of proficiency for SCPHN that a	re tailored t	to public	nealt	h
	nursing (R2.5.2)	YES 🗌	NO □	N/A	
A pub	olic health nurse route isn't proposed.				
•	standards of proficiency for community nursing intended field and related context of community may be within community children's nursing, connursing, community mental health nursing, distribution or in specified field(s) for community nu social care practice (R2.5.3)	nursing p mmunity leadict nursing	ractice. T arning dis , general ) in healtl	hese sabili prac	ties tice
An Si	PQ programme isn't proposed.				





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

R2.6 There is evidence that sets out the general and professional content necessary to meet the:

•	<ul> <li>core and field specific standards of proficiency for each intended</li> </ul>	ed fiel	d of
	SCPHN practice: health visiting, school nursing, occupational he	ealth r	nursing
	(R2.6.1)		

$MET oxed{oxed}$	NOT MET	□ N/A □
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R2.6.1 is met. There's documentary evidence of the specific routes of entry to the NMC register for SCPHN practice for HV and SN within the programme specification.

Documentary evidence and discussion at the approval visit confirms that general and professional content meets the core and specific SPSCPHN for HV and SN. The programme consists of seven modules. The module mapping document maps all module outcomes to the SPSCPHN including core and field specific proficiencies. There's a module related to safeguarding. There's documentary evidence of shared learning with SPQ students. The programme team and students clarify how field specificity is maintained in core shared modules, which includes field specific scenarios and discussions.

The programme team also tell us how module content is developed in conjunction with PLPs, students and PUSCs. The programme team tell us that there's scope within the modules for further content to be built in to reflect the changes in practice and sustain the longevity of the programme.

There's documentary evidence of student feedback relating to current module content as part of the stakeholder engagement. Students tells us their feedback is used to make changes to current module delivery and assessment, which is exemplified by moving the position of an OSCE assessment within the programme, to spread the assessment workload for students. A CAMHS module is developed for the new programme which students tell us is an area they've highlighted as being required in the programme based on their practice experience.

The programme team confirm that simulation is included in modules and PLPs are invited to take part in this. This is illustrated by the production of a mock child protection case conference that students participate in. PLPs confirm they've been invited to join current module sessions but time constraints in practice have made this difficult to do. PUSCs tell us that they've not been invited to attend teaching sessions or assessments currently. PUSCs confirm that they've been consulted on module content and are aware that they may be invited to join simulated learning and assessments.





Staff curriculum vitae are provided as evidence that the programme team are appropriately qualified. There's also documentary evidence that the current external examiner is suitably qualified and there's evidence of external examiner recruitment processes for future requirements.

recruitment processes for future requirements. The programme team and students confirm how EDI is embedded in the programme and what support is available for students during the programme. One example is pastoral support provided by personal academic tutors and signposting to wider university services for assessment of specific learning differences. core standards of proficiency for SCPHN public health nurse qualification (R2.6.2) NOT MET  $\square$  N/A  $\boxtimes$ MET 🗌 A public health nurse route isn't proposed. standards of proficiency for the community nursing SPQ that is tailored to the intended field of community nursing practice. These may be within community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing, or in other specified field(s) of community nursing in health and social care (R2.6.3)  $N/A \square$ An SPQ programme isn't proposed. R2.7 There is evidence that sets out the content necessary to meet the programme outcomes for each intended field of: SCPHN practice: health visiting, school nursing, occupational health nursing and/or SCPHN public health nursing (R2.7.1)  $MET \square$ NOT MET community nursing SPQ practice: community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing and/or in other specified field(s) of community nursing in health and social care (R2.7.2)  $N/A \boxtimes$ 

An SPQ programme isn't proposed.

 Evidence to ensure that the curriculum provides a balance of theory and practice learning opportunities, using a range of learning and teaching strategies (R2.8)





NOT MET

 $MET \boxtimes$ 

R2.8 is met. Documentary evidence identifies the length of the programme. The PGDip award is a one-year taught programme for full-time students which is 52 weeks or a two-year taught programme for part-time students pro-rata. The maximum period of registration for full-time students is two years or for part-time students is three years.
Documentary evidence and evidence gained at the approval visit confirms that the curriculum provides a balance of theory and practice learning opportunities, using a range of teaching, learning and assessment strategies. This is evidenced through the programme teaching timetable and the module specifications. There's also documentary evidence to demonstrate stakeholder engagement with curriculum development. Students tell us that field specific scenarios are used within core modules to support learning and that they've one study day per week to consolidate learning and prepare for assessments. Students also confirm that they've allocated alternative practice days within the programme timetable and utilise these to experience interprofessional learning across different practice areas. Practice assessors and practice supervisors confirm they've access to student timetables prior to students starting the programme and can plan regular meetings with students when they're in practice to plan learning opportunities and reflect on current learning. Practice assessors also tell us that they've had training provided by CUoL for both SSSA and the new Standards of proficiency for specialist community public health nurses (SPSCPHN), 2022)).
<ul> <li>Evidence to ensure that technology-enhanced and simulated learning opportunities are used effectively and proportionately across the curriculum to support learning and assessment (R2.9)</li> <li>MET   NOT MET   </li> </ul>
R2.9 is met. Documentary evidence and discussions during the approval visit indicate that technology-enhanced and simulated learning opportunities are used effectively and proportionately across the SCPHN programme to support and enhance student supervision, learning and assessment. There's evidence within the module specifications of how many hours of simulated learning are proposed for each module and this is attributed to theory hours, totalling nine hours across

There's documentary evidence of the university's virtual learning environment (VLE) and the use of blended learning approaches. Students report that they use the VLE and resources available to support their learning (academic and practice learning skills development). For example, tutors have signposted them to relevant

the programme. The programme team confirm examples of simulated learning include a mock child protection case conference and PLPs are invited to support this learning activity. The programme team have plans in the future to engage PUSCs in simulated learning and OSCEs. In current programmes, PUSCs have

contributed to a masterclass on breast feeding.





resources to support the mental health of people they encounter in their placements and all students have access to United Nations Children's Fund (UNICEF) status baby friendly initiative training as CUoL is a UNICEF accredited institution. The students value access to face-to-face learning and online resources.

The programme team tells us they use a hybrid approach to learning, offering

students the option to attend taught sessions virtually. They tell us that this approach provides flexibility for students with caring responsibilities. There's documentary evidence that demonstrates an induction to the CUoL online library and virtual learning environment to support students' confidence of participating in hybrid learning.						
Evidence provides assurance that the following QA approval criteria are met:						
<ul> <li>Evidence to ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language (R2.10)</li> <li>YES □ NO □ N/A ⋈</li> </ul>						
The programme isn't delivered in Wales.						
<ul> <li>Evidence to ensure programmes are of suitable length to support student achievement of all proficiencies and programme outcomes for their intende SCPHN or community nursing SPQ award (R2.11.1)</li> </ul>						
YES NO						
Evidence to ensure programmes are no less than 45 programmed weeks theory and practice learning for full-time programmes/pro rata for part time.  (D2.14.2)						
programmes (R2.11.2)  YES ⊠ NO □						
Assurance is provided that Gateway 1: <u>Standards framework for nursing and</u> midwifery education relevant to curricula are met						
YES $\square$ NO $\boxtimes$						
Programme and student facing documentation doesn't accurately detail that the award of PGDip confers NMC registration to part three of the register. (Condition four)						
Student facing documentation for the new programme, such as the student programme handbook and practice handbook, aren't provided. There's a lack of student facing documentation to be assured that students are provided with timely and accurate programme information. (Condition three)						





At the approval visit we're presented with PLPs that aren't listed by CUoL at gateway one or gateway three. (Condition one)						
Assurance is provided that Gateway 2: Standards for student supervision and						
assessment relevant to curricula are met						
YES $oxtimes$ NO $oxtimes$						
Outroms						
Outcome Is the standard met?  NOT MET						
Is the standard met? MET $\square$ NOT MET $\boxtimes$						
Programme and student facing documentation doesn't accurately detail that the award of PGDip confers NMC registration to part three of the register.						
Condition four: Ensure that programme documentation and student facing documentation accurately details that the award of PGDip confers NMC registration at part three of the register. (SFNME R3.10; SPRP R2.1) (NMC and university condition).						
Student facing documentation for the new programme, such as student programme handbook and practice handbook, isn't provided. There's a lack of student facing documentation to be assured that students are provided with timely and accurate programme information.						
Condition three: Provide student facing documentation for the proposed SCPHN programme for example practice specific handbook and programme handbook. (SFNME R3.2; SPRP R2.1) (NMC and university condition)						
At the approval visit we're presented with PLPs that aren't listed by CUoL at gateway one or gateway three.						
Condition one: Provide an accurate list of the PLPs working in partnership with the proposed SCPHN programme with a sample of placement agreements. (SFNME R2.13; SPRP R2.1) (NMC and university condition)						
<b>Date:</b> 15 March 2024						
Post event review						
Identify how the condition(s) is met:						
Condition four: The student programme handbook and practice handbook are both provided and clearly detail that the award of PGDip confers NMC registration to part three of the register.						
Condition four is met.						





Revised outcome after condition(s) met: MET MET MOT MET						
Date condition(s) met: 24 April 2024						
Evidence: PLP list, undated Placement agreements for PLP:  • Tower Hamlets GP Care Group, 22 April 2024  • Whittington Health NHS Trust, 18 April 2024  • London Borough of Newham, 5 April 2024  • Homerton Healthcare NHS Foundation Trust, 22 September 2022  • Croydon Health Services NHS Trust, 23 April 2024						
Condition one is met.						
Condition one: A list of PLPs working in partnership with the proposed SCPHN programme is provided. There's also a placement agreement provided for each PLP.						
Evidence: Template for 2024-25 programme handbook, undated SCPHN specialist practice placement handbook 2024-25, April 2024						
Condition three is met.						
Condition three: Student facing documentation is provided, including the SCPHN programme specification, programme handbook template for 2024-25 and the SCPHN practice handbook.						
Evidence: Updated programme specification, April 2024						

### **Standard 3: Practice learning**

### **Approved education institutions must:**

R3.1 ensure that suitable and effective arrangements and governance for practice learning are in place for all students, including arrangements specifically tailored to those applicants who are self-employed and/or self-funded

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

R3.2 ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC *Standards for student supervision and assessment* 





- R3.3 provide practice learning opportunities that allow students to develop, progress and meet all the standards of proficiency for their:
- R3.3.1 intended field of SCPHN practice: health visitor, school nurse and occupational health nurse or,
- R3.3.2 SCPHN public health nurse
- R3.3.3 intended community nursing SPQ: these may be within the fields of community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing or.
- R3.3.4 in other specified field(s) of community nursing in health and social care nursing
- R3.4 ensure that practice learning complies with the NMC Standards for student supervision and assessment
- R3.5 take account of students' individual learning needs and personal circumstances when allocating their practice learning, including making reasonable adjustments for students with disabilities, and
- R3.6 ensure learning experiences are tailored to the student's stage of learning, proficiencies and programme outcomes culminating in a period of practice learning. This is dependent on the individual learning needs of the student to demonstrate overall proficiency and achieve the programme learning outcomes for their:
- R3.6.1 intended field of SCPHN practice, SCPHN PHN practice or
- R3.6.2 their intended field of community nursing SPQ practice or community nursing SPQ in health and social care practice.

Standards framework for nursing and midwifery education, specifically R1.1, R1.3, R1.5; R2.10, R2.15; R3.3, R3.5, R 3.7, R3.16; R5.1, R5.7, R5.10, R5.12

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

#### Findings against the standard and requirements

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

 Evidence to ensure that suitable and effective arrangements and governance for practice learning are in place for all students, including arrangements specifically tailored to those applicants who are selfemployed and/or self-funded (R3.1)

MET ⊠ N	OT MET $\Box$
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R3.1 is met. Documentary evidence and discussions at the approval visit confirm that all students, whether self-funded or employed have named practice assessors, practice supervisors and academic assessors. Tripartite meetings are





held to review student achievement and progress. PLPs tells us that they complete DBS and OH screening as part of the recruitment process. Processes are in place for students who may not have OH clearance for placement, which include interruption of studies and deferrals. Students can also access university OH services if required.

There's documentary evidence that students are assessed using the approved pan-London PAD. There's a separate document which contextualises the part-time route within the PAD. Documentary evidence also indicates that SCPHN practice learning environments complete educational placement audits to ensure the suitability for the students utilising the pan-London learning environment audit form. These are shared with the CUoL. Each placement area is required to sign a placement agreement, detailing the range of experiences and support available to students. The education audit form specifies the maximum student capacity in the placement and confirms that SCPHN practice supervisors and practice assessors are prepared, supported and have experience for the student's field of practice.

PLPs tell us that recruitment processes are completed with the programme team and allocation of students to practice areas is based on the amount of suitably qualified and prepared practice assessors and practice supervisors in each practice area. Practice assessors tell us that they plan learning experiences for students with the team they work in, to provide students with varied learning opportunities. Practice assessors and practice supervisors tell us that they're suitably prepared for both roles, which provides flexibility if a student requires a new practice assessor or practice supervisor due to staff sickness.

The programme director, pathway lead and/or academic assessor work closely with the PLPs. The programme team tells us that PLPs attend the practice advisory boards (PABs) to support with the monitoring and progression of students. A PUSC also sits on the PAB, which reviews student feedback on placement areas.

There's documentary evidence which suggests that the practice assessor networking and development meetings enable practice assessors and practice supervisors to reflect on student support and share best practice. Practice assessors and practice supervisors tell us that they meet regularly to share learning experiences. They also tell us that they attend a conjoint teaching session with students during induction week that details the PAD and practice assessment requirements.

Employers sign the SAF SCPHN/SPQ 2024 for all SCPHN applicants. This confirms that the employing organisation supports the application and has made arrangements to provide PLT in a suitable placement with a qualified practice assessor and practice supervisor. There's documentary evidence in the programme specification about raising concerns and safe practice. PLPs tell us the processes they follow when raising a concern about a student and processes for reporting CQC visit outcomes and concerns. The programme team confirm that





they remove students from placement areas which are highlighted as areas of st

concern by CQC and work with PLPs to ensure there's minimal disruption to student learning during this process.
<ul> <li>Processes are in place to ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC Standards for student supervision and assessment (R3.2)</li> <li>MET</li></ul>
R3.2 is met. Documentary evidence and discussions at the approval visit indicate partnership working is strong between PLPs, CUoL and students. There are preplanned regular consultation meetings in relation to programme development and review. There's documented evidence of regular staff-student liaison committees and students also attend a programme director forum during the programme. The SAF indicates that students and PLPs work in partnership during the application process. Documentary evidence indicates that tripartite meetings take place to ensure that the SSSA is met.
At the visit, students confirm clarity of the SSSA requirements and are aware of the relevant communication channels for raising and escalating concerns. They liaise regularly with the programme team and PLPs and formally evaluate their practice learning experiences. Students tell us that their feedback and any concerns raised are responded to in a timely manner. Students and practice assessors both provide examples of areas of concerns they've raised and how the programme team responds and supports with this process. Practice assessors and practice supervisors confirm the process they'd follow in the exceptional circumstance that the same person is required to be practice assessor and practice supervisor. They also tell us that they're all suitably prepared practice assessors and practice supervisors and can mitigate against this happening.
R3.3 There is evidence that practice learning opportunities are provided that allow students to develop, progress and meet all the standards of proficiency for their:
<ul> <li>intended field of SCPHN practice: health visitor, school nurse and occupational health nurse or (R3.3.1)</li> <li>MET ⋈ NOT MET □ N/A □</li> </ul>
R3.3.1 is met. There's documentary evidence that indicates students undertake alternative practice days to gain a wide range of experiences. This is evidenced within the draft teaching timetable and the PAD. At the visit,

R uı students tell us that they've good opportunities for interprofessional learning. They meet a range of professionals, which supports them in gaining a range of skills. Students on the current programme tell us that the number of alternative





practice days in different areas is reduced to make their alternative practice experience more manageable. This is in response to student feedback. These experiences are reflected upon and documented by students in the PAD. The students report that they're well supervised and supported in learning skills and knowledge required for their field in their practice learning environments. Tripartite

assessors experience opportunit students to	are supportive and ensure the and practice supervisors tell ues for students when they're inties and experience of working ell us that they work in diverse reas as part of the alternative preserved.	is that they con practice, to with all men practice area	reate a timetable ensure varied lean nbers of the team as and can work	of learning arning . The		
• SC	PHN public health nurse (R3.3	3.2) <b>MET</b>	NOT MET $\square$	N/A ⊠		
A public h	ealth route isn't proposed.					
con con	<ul> <li>intended community nursing SPQ: these may be within the fields of community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing or (R3.3.3)</li> </ul>					
01 (	No.5.5)			N/A ⊠		
An SPQ p	rogramme isn't proposed.					
	in other specified field(s) of community nursing in health and social care  (D2.0.4)					
IIUI	rsing (R3.3.4)			N/A ⊠		
An SPQ p	rogramme isn't proposed.					
Evidence	provides assurance that the	following Q	A approval crite	ria are met:		
	There is evidence that the programme complies with the NMC Standards for student supervision and assessment (R3.4)					
101	student supervision and asses	SIII <del>G</del> III (183.4 <sub>)</sub>	YES 🖾	NO 🗆		
evidence	n <u>evaluative summary</u> from y AND discussion at the appro that the QA approval criteria	oval visit to	demonstrate if a			
of s	ere is evidence to demonstrate students' individual learning no ocating their practice learning,	eeds and per	sonal circumstar	nces when		

for students with disabilities, and (R3.5)



team.



MET ⊠ NOT MET □
R3.5 is met. There's documentary evidence of a university policy for student support and a range of support services available for students to access.
Discussions at the approval visit confirm that these services take account of student's individual needs and circumstances and students confirm that they make use of these services. Students, practice assessors and practice supervisors tell us that reasonable adjustments are made in practice when they've been made aware of individual student needs. The programme team and senior management team confirm that the wider student support services are available to support students and an introduction to these services takes place during induction. The programme team, students, practice assessors and practice supervisors confirm additional support, which includes inclusion plans, reasonable adjustment plans and regular personal academic tutor meetings.
R3.6 There is evidence to ensure learning experiences are tailored to the student' stage of learning, proficiencies and programme outcomes culminating in a period of practice learning. This is dependent on the individual learning need of the student to demonstrate overall proficiency and achieve the programm learning outcomes for their:
<ul> <li>intended field of SCPHN practice, SCPHN PHN practice or (R3.6.1)</li> <li>MET ☑ NOT MET ☐ N/A ☐</li> </ul>
R3.6.1 is met. There's documentary evidence within the draft teaching timetable and the programme specification which indicates that students have regular practice learning throughout the programme and a consolidated period of practice learning at the end of the programme. Students are supported by suitably prepared practice assessors and practice supervisors and receive support from an academic assessor. At the visit, the programme team, practice assessors and practice supervisors tell us about the processes in place to support students who aren't achieving the SPSCPHN and there's evidence of tripartite meetings as par of this process. Each placement area also has a link lecturer who can be contacted if the academic assessor isn't available to support immediately. Students are also allocated a personal academic tutor (PAT) for the programme and students tell us that they engage with their PAT at regular points throughout the programme for additional support.
Students who aren't achieving have individual action plans, agreed between the student, PLPs and CUoL. Practice assessors and practice supervisors tell us that this process works effectively and they feel well supported by CUoL programme



assessment



<ul> <li>their intended field of community nursing SPQ practice or commun nursing SPQ in health and social care practice (R3.6.2)</li> </ul>	ity
Training of & in froutin and social date practice (ito.o.z)	N/A $\boxtimes$
An SPQ programme isn't proposed.	
Assurance is provided that Gateway 1: Standards framework for nursing a	<u>nd</u>
midwifery education relevant to practice learning are met  YES ⊠	NO 🗆
Assurance is provided that Gateway 2: Standards for student supervision	<u>and</u>
assessment relevant to practice learning are met	NO $\square$
YES 🗵	NO $\square$
Outcome	
Is the standard met?	MET 🗌
<b>Date:</b> 15 March 2024	
Post event review	
Identify how the condition(s) is met:	
N/A	
Date condition(s) met:	
N/A	
Revised outcome after condition(s) met: MET NOT I	MET 🗌
N/A	
Standard 4: Supervision and assessment	
Approved education institutions, together with practice learning partimust:	ners,
R4.1 ensure student support, supervision, learning and assessment comp	olies with
the NMC Standards framework for nursing and midwifery education	
R4.2 liaise, collaborate and agree the necessary approach to the preparat	
education, training, ongoing learning, support and expertise necessar	
practice supervisors, practice and academic assessors that support SC	JPHN
and community nursing SPQ student learning and assessment R4.3 ensure practice supervision, the assessment of practice and academ	nic
assessment complies with the NMC Standards for student supervision	





- R4.4 ensure practice supervisors:
- R4.4.1 have undertaken a period of preceptorship in line with the NMC principles for preceptorship as SCPHN or community nursing SPQ qualified professionals or
- R4.4.2 can evidence prior learning and relevant practice supervisor experience that enables them to facilitate effective evidence-based learning opportunities for post-registration SCPHN or community nursing SPQ students
- R4.5 ensure practice and academic assessors:
- R4.5.1 have undertaken a period of preceptorship in line with the NMC principles for preceptorship as SCPHNs or community nurses with a SPQ or
- R4.5.2 can evidence prior learning and relevant practice assessor experience that enables them to engage in fair, reliable and valid assessment processes in the context of SCPHN and/or community nursing SPQ
- R4.6 ensure the student is assigned to a practice assessor who is an experienced registered SCPHN or community SPQ nurse for the programme the student is undertaking
- R4.6.1 in exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor for a part of the programme where the SCPHN/community nursing SPQ student is undergoing education and training in a practice learning setting. In such instances, the student, practice supervisor/assessor and the AEI will need to evidence why it was necessary for the practice supervisor and practice assessor roles to be carried out by the same person
- R4.7 provide constructive feedback to students throughout the programme to support their learning and development for meeting the standards of proficiency and programme learning outcomes for:
- R4.7.1 their intended field of SCPHN practice: health visitor, school nurse, occupational health nurse,
- R4.7.2 SCPHN public health nurse,
- R4.7.3 their intended community nursing SPQ in the field of: community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing, or
- R4.7.4 other specified field(s) of community nursing SPQ in health and social care R4.8 ensure all SCPHN proficiencies and/or community nursing SPQ proficiencies
- R4.8 ensure all SCPHN proficiencies and/or community nursing SPQ proficiencies are recorded in an ongoing record of achievement which confirms SCPHN and/or community nursing SPQ proficiencies have been met
- R4.9 assess the student's suitability for award and confirm overall proficiency based on the successful completion of all practice learning relevant to:
- R4.9.1 their intended field of SCPHN practice: health visitor, school nurse, occupational health nurse,
- R4.9.2 SCPHN public health nurse practice,
- R4.9.3 their intended SPQ in the field of: community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing, and/or
- R4.9.4 other specified field(s) of community nursing SPQ in health and social care practice.





Standards framework for nursing and midwifery education, specifically: R2.12; R3.5, R3.6, R 3.8, R3.11, R3.13, R3.14, R3.17; R4.2, R4.3, R4.4, R4.5, R4.6, R4.8, R4.11; R5.9

Standards for student supervision and assessment

### Findings against the standards and requirements

Provide an <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

 There is evidence that ensures student support, supervision, learning and assessment complies with the NMC Standards framework for nursing and midwifery education (R4.1)

MET  $\boxtimes$  NOT MET  $\square$ 

R4.1 is met. There's documentary evidence within the programme specification, SAF, PAB terms of reference and practice education committee which identify the processes in place to support student supervision, learning and assessment compliance with the SFNME. Information on practice assessors and practice supervisors is provided within the PAD for students.

Students tell us that they're supported in their learning through regular feedback, which can be face-to-face or online. Students tell us that they've opportunities to gain feedback from PUSCs in practice and can use formats appropriate to the age and development of PUSCs. This feedback is documented in their PAD. They gain the support of practice assessors and practice supervisors in gaining PUSC feedback on their care and use of communication skills. Students feel that practice supervisors and practice assessors are accessible and that their feedback is well-received and constructive. Students tell us the process they'd follow if they needed to escalate a concern relating to practice and confirm that they receive support from the programme team and their practice assessors and practice supervisors when additional support is required.

Students, practice assessors and practice supervisors indicate that they attend conjoint training for the PAD during induction week and practice assessors and practice supervisors have regular networking meetings with the programme team.

 There is evidence to confirm that the education institution and their practice learning partners liaise, collaborate and agree the necessary approach to the preparation, education, training, ongoing learning, support and expertise necessary for practice supervisors, practice and academic assessors that





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support SCPHN and community nursing SPQ student learn assessment (R4.2)	ning and
MET 🗵	NOT MET $\square$
R4.2 is met. Documentary evidence indicates that practice supervassessors and academic assessors are either from the same field can evidence prior learning and relevant practice supervisor expe SCPHN students. Practice supervisors and practice assessors co London training. Programme introductory and update meetings are them in their roles in supporting students. Practice assessors attend to practice session with the students, which includes an introduct There's documentary evidence which indicates that PLPs are concurriculum development and practice learning. There's documentary PLPs engage with PABs.	of practice or rience to support mplete the pan-re used to train nd the induction to the PAD. asulted in
At the approval visit, practice assessors and practice supervisors of they're supported in delivering the programme and in supporting a cause for concern. Practice supervisors and practice assessors they're prepared for their roles both by CUoL and PLPs. The programme hold practice meetings for practice supervisors and practice assess they're required to attend. Practice assessors and practice supervithat they attend these meetings and have received updates and for student evaluations of practice environments. They understand the practice assessment process.	students that are confirm that ramme team ssors, which isors confirm eedback on
Practice assessors and practice supervisors confirm how their feet implement changes to programme delivery. This includes breast from the training now being situated earlier in the programme, foll from practice assessors that it was delivered too late into the programmes students to utilise it effectively and be assessed against this in practice.	eeding friendly lowing feedback ramme for
There is evidence that ensures practice supervision, the as practice and academic assessment complies with the NMC student supervision and assessment (R4.3)	
R4.3 is met. Documentary evidence and discussions at the approach that practice supervision, the assessment of practice and academ complies with the SSSA. This is evidenced within the pan-London SAF. Academic assessors, practice assessors and practice super qualifications they require for their roles. Practice assessors and publications that they're suitably prepared for both roles while students to be reallocated to a new practice assessor or practice assessors in the plant of the process of the	ic assessment n PAD and the visors have the practice ich enables supervisor

Practice assessors and practice supervisors confirm they've had training for the

SSSA and SPSCPHN to support student learning in practice.





Evidence provides assurance that the following QA approval criteria are met:
<ul> <li>Processes are in place to ensure practice supervisors have undertaken a period of preceptorship in line with the NMC principles for preceptorship as SCPHN or community nursing SPQ qualified professionals (R4.4.1) or YES ⋈ NO □ N/A □</li> </ul>
<ul> <li>Processes are in place to ensure practice supervisors can evidence prior learning and relevant practice supervisor experience that enables them to facilitate effective evidence-based learning opportunities for post-registration SCPHN or community nursing SPQ students (R4.4.2)</li> <li>YES ⋈ NO □ N/A □</li> </ul>
<ul> <li>Processes are in place to ensure practice and academic assessors have undertaken a period of preceptorship in line with the NMC principles for preceptorship as SCPHNs or community nurses with a SPQ (R4.5.1) or YES ⋈ NO ⋈ N/A ⋈</li> </ul>
<ul> <li>Processes are in place to ensure practice and academic assessors can evidence prior learning and relevant practice assessor experience that enables them to engage in fair, reliable and valid assessment processes in the context of SCPHN and/or community nursing SPQ (R4.5.2)</li> <li>YES ⋈ NO □ N/A □</li> </ul>
Provide an <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met
<ul> <li>Processes are in place to ensure the student is assigned to a practice assessor who is an experienced registered SCPHN or community SPQ nurse for the programme the student is undertaking (R4.6)</li> <li>MET ☒ NOT MET ☐</li> </ul>
R4.6 is met. Evidence within the SAF indicates that students are assigned to an appropriate practice assessor. At the visit, discussions confirm that there are sufficient numbers of practice assessors and practice supervisors to support the intended student cohort. Practice assessors and practice supervisors tell us of the processes in place for reallocation of a new practice assessor or practice supervisor in the event of staff sickness.





•	Processes are in place to ensure that in exce same person may fulfil the role of practice su for a part of the programme where the SCPH student is undergoing education and training In such instances, the student, practice super need to evidence why it was necessary for the practice assessor roles to be carried out by the	ipervisor ar IN/commur g in a pract rvisor/asse ie practice	nd practice nity nursin ice learnir ssor and the superviso erson (R4.	e assessor g SPQ ng setting. ne AEI will r and
R4.6.1 is met. There's documentary evidence within the programme specification that the same person may fulfil the role of practice assessor and practice supervisor in exceptional circumstances. At the visit the programme team and PLPs assure us that there are sufficient practice supervisors and practice assessors available within practice to support students undertaking the programme. Documentary evidence and discussion with practice supervisors and practice assessors confirm at the approval visit that if exceptional circumstances should occur, this will be escalated to the programme team and reviewed regularly.				
Evide	ence provides assurance that the following	QA approv	al criteria	a are met:
	Processes are in place to provide constructive throughout the programme to support their lea meeting the standards of proficiency and prog	rning and o	developme	ent for
•	their intended field of SCPHN practice: healt	h visitor, so	chool nurs	se,
	occupational health nurse (R4.7.1)	YES⊠	NO 🗆	N/A □
• A pul	SCPHN public health nurse (R4.7.2)  olic health nurse route isn't proposed.	YES 🗆	NO 🗆	N/A ⊠
<ul> <li>their intended community nursing SPQ in the field of: community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing (R4.7.3) or</li> </ul>				
				N/A ⊠
An S	PQ programme isn't proposed.			
•	other specified field(s) of community nursing (R4.7.4)	SPQ in he	ealth and	social care
	. ,			N/A ⊠
An S	PQ programme isn't proposed.			





There is evidence that all SCPHN proficiencies and/or community nursing SPQ proficiencies are recorded in an ongoing record of achievement which confirms SCPHN and/or community nursing SPQ proficiencies have been and (DAR).				
met (R4.8) YES 🗵 N	IO 🗆			
R4.9 There is evidence of processes to assess the student's suitability for award and confirm overall proficiency based on the successful completion of all practice learning relevant to:				
their intended field of SCPHN practice: health visitor, school nurse,  accurational health pures (P4.9.1).				
occupational health nurse (R4.9.1)  YES  NO  N/A	<b>A</b> 🗆			
SCPHN public health nurse practice (R4.9.2)     YES    NO    N/A	a 🗵			
A public health nurse route isn't proposed.				
<ul> <li>their intended SPQ in the field of: community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing (R4.9.3) and/or</li> </ul>				
N/A				
An SPQ programme isn't proposed.				
<ul> <li>other specified field(s) of community nursing SPQ in health and social care practice (R4.9.4)</li> </ul>				
	A 🛛			
An SPQ programme isn't proposed.				
Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to supervision and assessment are met  YES  N	IO 🗆			
Assurance is provided that Gateway 2: <u>Standards for student supervision and assessment</u> relevant to supervision and assessment are met  YES  N	<u>d</u> 10 🗆			
Outcome	<b>T</b>			
Is the standard met? MET MET MOT ME	<b>'</b>			





<b>Date:</b> 15 March 2024	
Post event review	
Identify how the condition(s) is met:	
N/A	
Date condition(s) met:	
N/A	
Revised outcome after condition(s) met:	NOT MET $\square$
N/A	

#### Standard 5: Qualification to be awarded

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

- R5.1 ensure that the minimum academic level for SCPHN and community nursing SPQ is at postgraduate masters' level
- R5.2 inform the student that the SCPHN award must be registered with us within five years of successfully completing the programme and if they fail to do so they will have to undertake additional education and training or gain such experience as specified in NMC standards for the award to be registered
- R5.3 inform the student that the community nursing SPQ award must be registered with us within five years of successfully completing the programme and if they fail to do so they will have to undertake additional education and training or gain such experience as specified in NMC standards for the award to be added as an annotation to their professional registration
- R5.4 inform the SCPHN and/or community nursing SPQ student that following successful completion of an NMC approved programme of preparation for SCPHN or community nursing SPQ, which included an NMC approved independent/supplementary prescribing qualification, the V300 award must be registered with us within five years of successfully completing the prescribing programme. If they fail to do so they will have to retake and successfully complete the programme in order to qualify as a prescriber, and
- R5.5 inform the SCPHN and/or community nursing SPQ student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice.

Standards framework for nursing and midwifery education, specifically R2.12, R2.21

Findings against the standards and requirements

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





•	The programme award to be approved is clearly documentation and is a minimum of a postgrad		nast		
•	Processes are in place to inform the student the be registered with the NMC within five years or programme and if they fail to do so they will have education and training or gain such experience standards for the award to be registered (R5.2)	f succeave to use as as	essfu Inde Decif	ully comp ertake add	leting the ditional
•	Processes are in place to inform the student the SPQ award must be registered with us within form the programme and if they fail to do undertake additional education and training or specified in NMC standards for the award to be their professional registration (R5.3)	five yea o so the r gain s	ars o ey w such	f succes ill have to experier	sfully o nce as
An SP	Q programme isn't proposed.				
•	Processes are in place to inform the SCPHN a SPQ student that following successful comple programme of preparation for SCPHN or commincluded an NMC approved independent/suppqualification, the V300 award must be registered successfully completing the prescribing program they will have to retake and successfully completing the qualify as a prescriber (R5.4), and	etion of nunity olemen ed with amme a olete th	an I nurs tary us v and i e pro	NMC app ing SPQ prescribi within fiv if they fai	roved , which ng e years of I to do so in order
A V30	0 qualification isn't proposed.		_	_	
•	Processes are in place to inform the SCPHN a SPQ student that they may only prescribe once qualification has been annotated on the NMC prescribe from the formulary they are qualified their competence and scope of practice (R5.5)	e their registe I to pres	pres er an scrib	cribing d they m	ay only
A V30	0 qualification isn't proposed.				
Fall B	ack Award				





and proficiencies are met within the award	a SCPHN a	II NIVIC sta	andards
and proficiencies are met within the award	YES 🗌	NO 🗆	N/A ⊠
There are no fall back exit awards with registration	as a SCPHN	١.	
Assume as is presided that Catavas A. Ctarada ada f			
Assurance is provided that Gateway 1: <u>Standards from individery education</u> relevant to the qualification to I		_	<u>ana</u>
		YES 🛛	NO 🗆
Outcome			
Is the standard met?	MET $oxtimes$	NOT	
<b>Date:</b> 15 March 2024			
Post event review			
Identify how the condition(s) is met:			
N/A			
Date condition(s) met:			
N/A			
Revised outcome after condition(s) met:	MET 🗌	NOT	МЕТ 🗌
N/A			





## **Section four**

#### Sources of evidence

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

Key documentation	YES	NO
Programme document, including proposal, rationale and	$\boxtimes$	
consultation		
Programme specification(s)	$\boxtimes$	
Module descriptors	$\boxtimes$	
Student facing documentation including programme		$\boxtimes$
handbook		
Student university handbook		$\square$
Practice assessment documentation	$\boxtimes$	
Ongoing record of achievement (ORA)	$\boxtimes$	
Practice learning environment handbook		
Practice learning handbook for practice supervisors and		
assessors specific to the programme		
Academic assessor focused information specific to the	$\boxtimes$	
programme		
Placement allocation / structure of programme	$\boxtimes$	
PAD linked to competence outcomes, and mapped	$\boxtimes$	
against Standards of proficiency for specialist community		
public health nurses		
Mapping document providing evidence of how the	$\boxtimes$	
education institution has met the Standards framework for		
nursing and midwifery education (NMC 2018, updated		
2023) (Gateway 1)		
Mapping document providing evidence of how the	$\boxtimes$	
Standards for student supervision and assessment (NMC		
2018, updated 2023) apply to the programme(s)		
(Gateway 2)		
Mapping document providing evidence of how the	$\boxtimes$	
education institution has met the Standards for post-		
registration education programmes (NMC 2022, updated		
2023) (Gateway 3)		
Curricula vitae (CV) for relevant staff		
CV of the registered SCPHN responsible for directing the	$\bowtie$	
education programme		
Registrant academic staff details checked on NMC	$\boxtimes$	
website		
External examiner appointments and arrangements	$\boxtimes$	
Written placement agreement(s) between the education		
institution and associated practice learning partners to		
support the programme intentions.		





Council	nationing abbounds outstanding	MAG	CDONALD
Written agreement(s) to intentions between the e partners for apprenticesh	ducation institution and employer		$\boxtimes$
<ul> <li>Programme hand as part of conditions part of conditions.</li> <li>Student university requested as part.</li> <li>Practice learning three, requested as part.</li> <li>Practice learning to the programme the approval visit support practice a evidence of attendars written placement associated practice.</li> </ul>	lease provide the reason and mitiglook - Not provided as part of gate in three. I handbook - Not provided as part of condition three. I environment handbook - Not provide part of condition three. I handbook for practice supervisors - Not provided as part of gateway provides assurance that the processessors and practice supervisors dance at PAD training and regular tragreement(s) between the educate learning partners to support the part of gateway three, Requested	of gateway to gateway to gateway three, rand assessin places. There's also networking ation institution programme	of gateway ors specific ussion at e to so meetings. on and intentions
City, UoL LLECP onboard EDI training, undated CUoL EDI Strategy 2020 PGDip Public Health and Programme PUSC involving SHPS DBS Guidance, 8 SHPS OH Guidance, Ju Updated SCPHN SPQ sepublic health recruitment and onboard employed sponsored sturb Updated programme specific template for 2024-25 programme specific program	nitted 24 April 2024: erms of reference,15 December 20 ding process, undated  -2026, undated I Specialist Community Nursing (Solvement action, 9 April 2024 June 2023 ne 2023 upplementary application form, under and specialist community Nursing and specialist community Nursing process flowchart for NHS, pridents, undated	CPHN/SPQ ndated ng (SCPHN/ ivate and thi	SPQ)
Placement agreements f Tower Hamlets GP Care Whittington Health NHS	Group CIC, 22 April 2024		

London Borough of Newham, 5 April 2024





Homerton Healthcare NHS Foundation Trust, 22 Septem	ber 2022	
Croydon Health Services NHS Trust, 23 April 2024		
Additional comments:		
None identified.		
None lacitatica.		
During the event the visitor(s) met the following group	s:	
33 14		
	YES	NO
Senior managers of the AEI/education institution with	$\boxtimes$	
responsibility for resources for the programme		
Senior managers from associated practice learning	$\square$	
partners with responsibility for resources for the		
programme		
Continuos and a frame and sisted a smaller on a set and		$\bowtie$
Senior managers from associated employer partners		
with responsibility for resources for the programme		
(applicable for apprenticeship routes)		
Programme team/academic assessors		
Practice leads/practice supervisors/practice assessors	M	
Students  If yes, please identify cohort year/programme of study:		
students. Alumni from September 2022 cohort, two SN and three H	IV.	
People who use services and carers		
If you stated no above, please provide the reason and mi	itigation:	
An apprenticeship route isn't proposed.		
Additional comments:		
None identified.		
The visitor(s) viewed the following areas/facilities duri	ng the event	:
	YES	NO
Specialist teaching accommodation (e.g. clinical		$\boxtimes$
skills/simulation suites)		
Library facilities		$\boxtimes$
Technology enhanced learning/virtual learning		$\boxtimes$
environment		
Educational audit tools/documentation	$\square$	
Practice learning environments		$\overline{\boxtimes}$
If practice learning environments are visited, state where	visited/findir	ngs:





System regulator reports reviewed for practice learning				
partners				
If yes, system regulator reports list:				
Cygnet Hospital, Harrow CQC report, 18 October 2023				
East London NHS Foundation Trust CQC report, 13 January 2022				
London Bridge Hospital CQC report, 25 September 2021				
Priory Hospital Hayes CQC report, 7 June 2021				
The Royal London Hospital CQC report, 15 November 2022				
St. George's Hospital (Tooting) CQC report, 17 August 2023				
St. George's University Hospital NHS Foundation Trust CQC report, 18 December				
2019				
The Barkantine Centre CQC report, 17 January 2023				
If you stated no above, please provide the reason and mitigation:				
CUoL is an established AEI. A resource check isn't required.				
Additional comments:				
None identified.				

# **Mott MacDonald Group Disclaimer**

This document is issued for the party which commissioned it and for specific purposes connected with the captioned project only. It should not be relied upon by any other party or used for any other purpose.

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

Issue record				
Final Report				
Author(s):	Veronique Oldfield	Date:	27 March 2024	
	Caroline Thomas			
Checked by:	Pamela Page	Date:	15 April 2024	
Submitted by:	Mubaraq Sanusi	Date:	29 May 2024	
Approved by:	Leeann Greer	Date:	30 May 2024	