

## Programme approval report

### Section one

<b>Programme provider name:</b>	Sheffield Hallam University
<b>Programmes reviewed:</b>	<p><b>Specialist practice qualification:</b></p> <p>Community children’s nursing <input type="checkbox"/></p> <p>Community children’s nursing with integrated independent and supplementary prescribing (V300) <input type="checkbox"/></p> <p>Community learning disabilities nursing <input type="checkbox"/></p> <p>Community learning disabilities nursing with integrated independent and supplementary prescribing (V300) <input type="checkbox"/></p> <p>Community mental health nursing <input type="checkbox"/></p> <p>Community mental health nursing with integrated independent and supplementary prescribing (V300) <input type="checkbox"/></p> <p>District nursing <input type="checkbox"/></p> <p>District nursing with integrated independent and supplementary prescribing (V300) <input checked="" type="checkbox"/></p> <p>General practice nursing <input type="checkbox"/></p> <p>General practice nursing with integrated independent and supplementary prescribing (V300) <input type="checkbox"/></p> <p>Health and social care nursing <input type="checkbox"/></p> <p>Health and social care nursing with integrated independent and supplementary prescribing (V300) <input type="checkbox"/></p>

	<p><b>Community nurse specialist practice (NMC 2022) apprenticeship:</b></p> <p>Community children's nursing apprenticeship <input type="checkbox"/></p> <p>Community children's nursing with integrated independent and supplementary prescribing (V300) apprenticeship <input type="checkbox"/></p> <p>Community learning disabilities nursing apprenticeship <input type="checkbox"/></p> <p>Community learning disabilities nursing with integrated independent and supplementary prescribing (V300) apprenticeship <input type="checkbox"/></p> <p>Community mental health nursing apprenticeship <input type="checkbox"/></p> <p>Community mental health nursing with integrated independent and supplementary prescribing (V300) apprenticeship <input type="checkbox"/></p> <p>District nursing apprenticeship <input type="checkbox"/></p> <p>District nursing with integrated independent and supplementary prescribing (V300) apprenticeship <input type="checkbox"/></p> <p>General practice nursing apprenticeship <input type="checkbox"/></p> <p>General practice nursing with integrated independent and supplementary prescribing (V300) apprenticeship <input type="checkbox"/></p> <p>Health and social care nursing apprenticeship <input type="checkbox"/></p> <p>Health and social care nursing with integrated independent and supplementary prescribing (V300) apprenticeship <input type="checkbox"/></p>
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<b>Title of programme(s):</b>	Postgraduate Diploma District Nursing
<b>Academic levels:</b>	
SPQ Community children's nursing	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ Community children's nursing with integrated independent and supplementary prescribing (V300)	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ Community learning disabilities nursing	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ Community learning disabilities nursing with integrated independent and supplementary prescribing (V300)	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ Community mental health nursing	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ Community mental health nursing with integrated independent and supplementary prescribing (V300)	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ District nursing	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11

SPQ District nursing with integrated independent and supplementary prescribing (V300)	England, Wales, Northern Ireland <input checked="" type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ General practice nursing	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ General practice nursing with integrated independent and supplementary prescribing (V300)	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ Health and social care nursing	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ Health and social care nursing with integrated independent and supplementary prescribing (V300)	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ Community children's nursing apprenticeship	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ Community children's nursing with integrated independent and supplementary prescribing (V300) apprenticeship	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ Community learning disabilities nursing apprenticeship	England, Wales, Northern Ireland <input type="checkbox"/> Level 7

	<p>SCQF <input type="checkbox"/> Level 11</p>
<p>SPQ Community learning disabilities nursing with integrated independent and supplementary prescribing (V300) apprenticeship</p>	<p>England, Wales, Northern Ireland <input type="checkbox"/> Level 7</p> <p>SCQF <input type="checkbox"/> Level 11</p>
<p>SPQ Community mental health nursing apprenticeship</p>	<p>England, Wales, Northern Ireland <input type="checkbox"/> Level 7</p> <p>SCQF <input type="checkbox"/> Level 11</p>
<p>SPQ Community mental health nursing with integrated independent and supplementary prescribing (V300) apprenticeship</p>	<p>England, Wales, Northern Ireland <input type="checkbox"/> Level 7</p> <p>SCQF <input type="checkbox"/> Level 11</p>
<p>SPQ District nursing apprenticeship</p>	<p>England, Wales, Northern Ireland <input type="checkbox"/> Level 7</p> <p>SCQF <input type="checkbox"/> Level 11</p>
<p>SPQ District nursing with integrated independent and supplementary prescribing (V300) apprenticeship</p>	<p>England, Wales, Northern Ireland <input type="checkbox"/> Level 7</p> <p>SCQF <input type="checkbox"/> Level 11</p>
<p>SPQ General practice nursing apprenticeship</p>	<p>England, Wales, Northern Ireland <input type="checkbox"/> Level 7</p> <p>SCQF <input type="checkbox"/> Level 11</p>
<p>SPQ General practice nursing with integrated independent and supplementary prescribing (V300) apprenticeship</p>	<p>England, Wales, Northern Ireland <input type="checkbox"/> Level 7</p> <p>SCQF <input type="checkbox"/> Level 11</p>

SPQ Health and social care nursing apprenticeship	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ Health and social care nursing with integrated independent and supplementary prescribing (V300) apprenticeship	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
<b>Date of approval visit:</b>	10 June 2024
<b>Programme start date:</b>	
SPQ Community children's nursing	
SPQ Community children's nursing with integrated independent and supplementary prescribing (V300)	
SPQ Community learning disabilities nursing	
SPQ Community learning disabilities nursing with integrated independent and supplementary prescribing (V300)	
SPQ Community mental health nursing	
SPQ Community mental health nursing with integrated independent and supplementary prescribing (V300)	
SPQ District nursing	
SPQ District nursing with integrated independent and supplementary prescribing (V300)	16 September 2024
SPQ General practice nursing	
SPQ General practice nursing with integrated independent and supplementary prescribing (V300)	
SPQ Health and social care nursing	
SPQ Health and social care nursing with integrated independent and supplementary prescribing (V300)	
SPQ Community children's nursing apprenticeship	
SPQ Community children's nursing with integrated independent and supplementary prescribing (V300) apprenticeship	

SPQ Community learning disabilities nursing apprenticeship	
SPQ Community learning disabilities nursing with integrated independent and supplementary prescribing (V300) apprenticeship	
SPQ Community mental health nursing apprenticeship	
SPQ Community mental health nursing with integrated independent and supplementary prescribing (V300) apprenticeship	
SPQ District nursing apprenticeship	
SPQ District nursing with integrated independent and supplementary prescribing (V300) apprenticeship	
SPQ General practice nursing apprenticeship	
SPQ General practice nursing with integrated independent and supplementary prescribing (V300) apprenticeship	
SPQ Health and social care nursing apprenticeship	
SPQ Health and social care nursing with integrated independent and supplementary prescribing (V300) apprenticeship	
<b>QA visitor(s):</b>	Registrant Visitor: Hannah Ingram Lay Visitor: Adrian Mason

## Section two

### Summary of review and findings

Sheffield Hallam University (SHU) is a Nursing and Midwifery Council (NMC) approved education institution (AEI). The department of nursing and midwifery (the department) within the college of health, wellbeing and life sciences present for approval a specialist practice qualification (SPQ) in district nursing (DN) with integrated independent and supplementary nurse prescribing (V300). The programme is offered as a full-time route and the V300 is integrated as a module of study within the programme structure. The V300 programme is in approval by the NMC since 22 August 2019. Successful completion of the programme qualifies students to record the SPQ of DN with integrated V300 prescribing with the NMC. A cohort of 15 students is proposed to commence from 16 September 2024. The programme is delivered at the SHU city campus in Sheffield.

The documentary evidence suggests that the programme is redeveloped and redesigned with a reduction in the number of, and changes to, the programme modules. An advanced health assessment module is included to support prescribing practice together with a practice learning module. The documentary evidence suggests that assessment processes are streamlined based on student feedback. The programme is designed to meet the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018 updated 2023), the Standards for student supervision and assessment (SSSA) (NMC 2018, updated 2023) and the Standards for post-registration programmes (SPRP) (NMC 2022, updated 2023). Programme learning outcomes are mapped to the Standards of proficiency for community nursing SPQs (SPCNSPQ) (NMC, 2022) and the Royal Pharmaceutical Society (RPS) competency framework for all prescribers (RPS, 2021).

Programme documentation and the approval visit provide limited evidence of established relationships between the AEI and practice learning partners (PLPs). Documentary evidence confirms there are service level agreements in place. Education leads, practice assessors and practice supervisors tell us that there are liaison days with the AEI that provide them with a link to the programme team. However, senior PLPs with strategic oversight of practice learning aren't present at the approval visit and triangulation of partnership working at strategic level isn't therefore possible.

Discussion at the approval visit and documentary evidence provides limited assurance of the involvement of stakeholders in the co-production of the programme. People who use services and carers (PUSCs), students and PLPs present at the approval visit tell us they're not involved with the design, delivery, development, evaluation and co-production of the proposed programme. PUSCs tell us that equality, diversity and inclusion (EDI) training is



made available to them, however they welcome wider training about how to fulfil the role of a PUSC in other aspects of the programme.

Students, practice assessors and practice supervisors tell us that the opportunities for inter-professional learning (IPL) in theory and practice settings are limited. Some students tell us that the IPL they experience is in the practice learning environment, however opportunities are inconsistent. Other students tell us that IPL isn't facilitated anywhere in the programme.

Documentary evidence indicates that students receive protected learning time. At the approval visit, students tell us that protected learning time isn't always a reality or guaranteed during the programme. They tell us that they need to work and study during programmed annual leave weeks as learning time isn't consistently protected for all students. Students tell us that allocated study time isn't set at a useful or appropriate time in the programme.

Documentary evidence and the approval visit doesn't assure us that there are sufficient practice assessors and practice supervisors in place to support practice learning. Practice assessors, practice supervisors and students tell us that there are limited staff available to ensure appropriate supervision and assessment in the practice learning environment. They tell us there's a limited number of practice supervisors and practice assessors with the relevant skills, knowledge and expertise who can support students on the advanced physical assessment module and V300 module. We're unable to explore this further with senior PLPs who've oversight of practice learning at the approval visit as they aren't present. Education leads, practice assessors and practice supervisors can't confirm there are sufficient numbers of practice supervisors and practice assessors in place to support practice learning.

Documentary evidence suggests that the same person may act as the practice assessor and practice supervisor for the same student simultaneously in exceptional circumstances. Students tell us that this situation occurs in practice. Documentary evidence and discussion at the approval visit doesn't assure us that there's appropriate governance in place for the oversight and management of this scenario.

SHU has an EDI strategy. The programme team confirm they're aware of the impact of university policies on EDI and are working to improve widening participation through diverse placement experiences in the wider community. However, there's a lack of programme level data that will enhance oversight of EDI issues and more effectively align with SHU's overall strategy. The programme team tell us that they support individual students' needs and take account of them to enhance progression and achievement of learning outcomes. Individual academic and study support is available.

The approval visit is undertaken via remote means.

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

The SSSA aren't met at programme level as conditions apply.

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

Updated 9 July 2024:

SHU provide documentation to meet the joint conditions. SHU confirm the conditions are met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
<b>Recommended outcome to the NMC:</b>	<p>Programme is recommended to the NMC for approval <input type="checkbox"/></p> <p>Programme is recommended for approval subject to specific conditions being met <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
<b>Conditions:</b>	<p><b>Effective partnership working: collaboration, culture, communication and resources:</b></p> <p>Condition one: Provide an explicit implementation plan that demonstrates how the programme is designed, developed, delivered, evaluated and co-produced with PUSCs, students and PLPs. (SFNME R1.12) (NMC and university condition)</p> <p>Condition two: Provide an explicit implementation plan in partnership with PLPs that demonstrates how IPL is promoted and facilitated within all aspects of the programme. (SFNME R1.13, R3.16) (NMC and university condition)</p> <p><b>Selection, admission and progression:</b></p> <p>None identified.</p>

	<p><b>Practice learning:</b></p> <p>Condition three: Provide an explicit implementation plan in partnership with PLPs that demonstrates there are sufficient practice supervisors and practice assessors in place to ensure safe and effective coordination of learning within practice learning environments. (SSSA R1.4, SPRP R4.3) (NMC and university condition)</p> <p>Condition four: Provide programme documentation that clearly demonstrates the governance structures in place to support protected learning time. (SPRP R1.5) (NMC and university condition)</p> <p>Condition five: Provide programme documentation that clearly demonstrates the governance structures in place for oversight and management of exceptional circumstances where the roles of practice assessor and practice supervisor are fulfilled by the same person. (SPRP R4.6.1) (NMC and university condition)</p> <p><b>Assessment, fitness for practice and award:</b></p> <p>None identified.</p> <p><b>Education governance: management and quality assurance:</b></p> <p>None identified.</p>
<p><b>Date condition(s) to be met:</b></p>	<p>9 July 2024</p>
<p><b>Recommendations to enhance the programme delivery:</b></p>	<p>Recommendation one: The programme team are advised to enhance their oversight of EDI by collecting and reviewing programme level data. (SFNME R2.1.2)</p> <p>Recommendation two: The programme team are advised to develop further simulation opportunities across the programme to support supervision, learning and assessment. (SPRP R2.9)</p>

<b>Focused areas for future monitoring:</b>	Ongoing training and support for PUSCs to undertake their role.
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<b>Programme is recommended for approval subject to specific conditions being met</b>	
<b>Commentary post review of evidence against conditions:</b>	
<p>SHU submit an implementation plan that details current and proposed actions to ensure that the programme is designed, developed, delivered, evaluated and co-produced with PUSCs, students and PLPs. Condition one is met.</p> <p>SHU submit an implementation plan in partnership with PLPs that details how IPL is promoted and facilitated within all aspects of the programme. Condition two is met.</p> <p>SHU provide an implementation plan in partnership with PLPs that demonstrates a process for ensuring sufficient practice supervisors and practice assessors are in place to ensure safe and effective coordination of learning within practice learning environments. Condition three is met.</p> <p>SHU provide programme documentation that demonstrates the governance structures in place to support protected learning time. Condition four is met.</p> <p>SHU provide programme documentation that demonstrates the governance structures in place for the oversight and management of exceptional circumstances where the roles of practice assessor and practice supervisor are fulfilled by the same person. Condition five is met.</p> <p>SHU provide evidence to confirm the conditions are met.</p>	
<b>AEI Observations</b>	<b>Observations have been made by the education institution</b> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<b>Summary of observations made, if applicable</b>	
<b>Final recommendation made to NMC:</b>	<p>Programme is recommended to the NMC for approval <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
<b>Date condition(s) met:</b>	9 July 2024

### **Section three**

NMC Programme standards
<p>Please refer to NMC standards reference points:</p> <p><a href="#"><u>Standards for post-registration education programmes</u></a> (NMC 2022, updated 2023)</p> <p><a href="#"><u>Standards of proficiency for community nursing specialist practice qualifications</u></a> (NMC, 2022)</p> <p><a href="#"><u>Standards framework for nursing and midwifery education</u></a> (NMC 2018, updated 2023)</p> <p><a href="#"><u>Standards for student supervision and assessment</u></a> (NMC 2018, updated 2023)</p> <p><a href="#"><u>The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates</u></a> (NMC, 2015 updated 2018)</p> <p><a href="#"><u>Quality assurance framework for nursing, midwifery and nursing associate education</u></a> (NMC, 2020)</p> <p><a href="#"><u>QA Handbook</u></a> (NMC, 2022)</p>

Partnerships
<p>The AEI works in partnership with their practice learning partners, people who use services, students and all other stakeholders.</p>
<p><b>Please refer to the following NMC standards reference points for this section:</b></p> <p><a href="#"><u>Standards framework for nursing and midwifery education</u></a> (NMC 2018, updated 2023)</p> <p><b>Standard 1: The learning culture:</b></p> <p>R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with people who use services and other stakeholders</p> <p>R1.13 work with service providers to demonstrate and promote inter-professional learning and working</p> <p><b>Standard 2: Educational governance and quality:</b></p> <p>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</p> <p>R2.4 comply with NMC <a href="#"><u>Standards for student supervision and assessment</u></a></p> <p>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</p>

- 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 evaluative summary 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 senior representatives from SHU confirm there's a university and department strategy in place for the inclusion of PUSCs in programme design and delivery. The programme team tell us that PUSCs are included in programme planning meetings, sessions with students and simulation. However, documentary evidence doesn't provide detail on the processes undertaken to ensure PUSC involvement in the programme design, development, delivery, evaluation and co-production. PUSC representatives at the approval visit tell us they're not included in programme planning meetings. One PUSC tells us they provide a lecture for students about long term conditions management, however students tell us this is a short talk and not well-attended. PUSCs tell us they don't participate in skills or simulation sessions. Documentary evidence



indicates that students, practice assessors and practice supervisors are included in co-production of the programme, however they tell us they're not involved in programme design, development or evaluation and would like to be. The programme team must therefore provide an explicit implementation plan that demonstrates how the programme is designed, developed, delivered, evaluated and co-produced with PUSCs, students and PLPs. (Condition one)

Documentary evidence provides limited information about IPL across the programme. The programme team tell us that IPL occurs in the leadership module and in the V300 module. However, all the students we meet tell us that IPL is limited and generally only occurs in the practice learning environment, although opportunities are frequently inconsistent. At the approval visit, practice assessors and practice supervisors confirm that students have opportunities for IPL in the practice setting and that this is encouraged and facilitated where possible. Students tell us that IPL in the programme involves being in the classroom with specialist community public health nursing students. The programme team are therefore required to provide an explicit implementation plan in partnership with PLPs that demonstrates how IPL is promoted and facilitated within all aspects of the programme. (Condition two)

Education leads present at the approval visit tell us that relationships with the programme team are open and collaborative, that liaison days are facilitated and that they find it easy to contact the programme team. They also tell us that resourcing for practice assessors and practice supervisors is variable across PLPs. Documentary evidence and discussion at the approval visit with education leads, practice supervisors and practice assessors confirms that practice assessors and practice supervisors are trained and supported to undertake their roles. The programme team, practice assessors and practice supervisors confirm that liaison days are facilitated by the programme team to support supervision and assessment in practice.

Practice assessors, practice supervisors and students tell us they're concerned about the limited number of staff available, particularly for the advanced physical assessment module and the V300 module. They tell us that staff aren't being put forward to undertake the required SSSA training in order to fulfil the practice supervisor and practice assessor roles for these specialist elements of the programme. Education leads tell us that a shortage of suitable practice assessors and practice supervisors is a current issue and that they're working to access other suitable healthcare professionals, for example general practitioners, rapid response and in-patient services staff. The programme team tell us that it's the responsibility of the PLPs to allocate appropriate practice supervisors and practice assessors. The senior team at SHU describe the programme as sustainable, especially given that the catchment area is widened and it's well established over a number of years. However, there's a lack of documentary evidence that provides assurance there's a governance plan in place to ensure there's a sufficient number of practice assessors and practice supervisors available to support safe and effective student learning. The programme team must therefore provide an explicit



implementation plan in partnership with PLPs that demonstrates there are sufficient practice supervisors and practice assessors in place to ensure safe and effective coordination of learning within practice learning environments. (Condition three)

Students have access to an online university handbook and there's a programme specific handbook that outlines key information. There's documentary evidence of the processes in place for students to raise concerns about the programme, university or practice placements. Students, practice assessors and practice supervisors confirm they're aware of the processes in place for raising concerns, and assure us they know where to look for this information and how to access support.

Programme documentation and the approval visit confirm that there's a student representative system in place and that regular student and staff forums occur. Students tell us that there are two student representatives in place for their programme, although neither are able to attend the approval visit. Feedback provided by students via their group representatives or the forums is considered by the programme team. For example, changes are made to assessments throughout the programme to alleviate assessment burden.

Programme documentation describes the AEI's ongoing work to ensure that the student voice is heard and acknowledges that key performance indicators aren't currently met. There's a clear response to address this deficit that focuses on a perceived lack of student understanding about how feedback is responded to and the feedback loop closed. Documentary evidence and the programme team tell us that student and staff forums provide a platform for closing feedback loops. Students tell us that student representatives attend meetings with the programme team and report back any changes. They feel that their voices are heard by the programme team.

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: [Standards framework for nursing and midwifery education](#)

**MET**  **NOT MET**

There's insufficient documentary evidence and discussions at the approval visit don't provide assurance that the programme is designed, developed, delivered, evaluated and co-produced with all stakeholders.

Condition one: Provide an explicit implementation plan that demonstrates how the programme is designed, developed, delivered, evaluated and co-produced with PUSCs, students and PLPs. (SFNME R1.12) (NMC and university condition)

Students tell us that opportunities for IPL are limited, inconsistent and generally only occur in the practice learning environment. Documentary evidence and discussions with the programme team identify that IPL occurs when students undertaking a range of healthcare programmes are in the classroom or virtual

classroom together. However, the programme team and students highlight that this is inconsistent.

Condition two: Provide an explicit implementation plan in partnership with PLPs that demonstrates how IPL is promoted and facilitated within all aspects of the programme (SFNME R1.13, R3.16) (NMC and university condition)

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 2: [Standards for student supervision and assessment](#)

MET

NOT MET

Students, practice assessors, practice supervisors and education leads tell us there are a limited number of staff available who can effectively support the advanced physical assessment module and the V300 module due to the skills, knowledge and experience required. There's a lack of documentary evidence that demonstrates a plan is in place to ensure sufficient numbers of practice supervisors and practice assessors are available to support student learning across all aspects of the programme.

Condition three: Provide an explicit implementation plan in partnership with PLPs that demonstrates there are sufficient practice supervisors and practice assessors in place to ensure safe and effective coordination of learning within practice learning environments. (SSSA R1.4, SPRP R4.3) (NMC and university condition)

### Post Event Review

#### Identify how the condition is met:

Condition one: SHU provide an implementation plan for PUSC, PLP and student involvement in all elements of the programme design, development, delivery, evaluation and co-production. This evidences the activities undertaken and those planned prior to the commencement and throughout the duration of the programme.

Condition one is met.

Evidence:

Implementation plan, undated

Letter of confirmation of conditions met NMC SCPHN, 5 July 2024

Condition two: SHU provide an implementation in partnership with PLPs that demonstrates how IPL is promoted and facilitated within all aspects of the programme.

Condition two is met.

Evidence:

Implementation plan, undated

Letter of confirmation of conditions met NMC SCPHN, 5 July 2024

Condition three: SHU provide an implementation plan in partnership with PLPs that clearly demonstrates a process for ensuring sufficient practice supervisors and practice assessors are in place to ensure safe and effective coordination of learning within practice learning environments.

Condition three is met.

Evidence:

Placement learning expectations document, undated

Updated information about preparation and training of practice supervisors and practice assessors in DN student handbook, undated

Governance and implementation plan for safe and effective coordination of learning within practice learning environments in conjunction with PLPs, undated  
Letter of confirmation of conditions met NMC SCPHN, 5 July 2024

**Date condition(s) met:** 9 July 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 practice programme.

**Optional**  **Compulsory**  **N/A**

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 Society competency framework for all prescribers) (NMC, 2021)

**YES**  **NO**

**OR**

If V300 is approved against [Standards for prescribing programmes](#) and [Standards of proficiency for nurse and midwife prescriber](#) provide the date it was approved:

22 August 2019

## 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 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.

[Standards framework for nursing and midwifery education](#), 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 [Standards for post-registration education programmes](#) (NMC 2022, updated 2023).

**Proposed transfer of current students to the [Standards for student supervision and assessment](#)** (NMC 2018, updated 2023).

Demonstrate a robust process to transfer current students onto the [Standards for student supervision and assessment](#) (NMC 2018, updated 2023).

### Findings against the standard and requirements

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

- Evidence of processes to ensure that the applicant is a 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 (R1.1.1)

N/A

A SCPHN programme isn't proposed.

- 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)

YES  NO  N/A

- 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 (R1.2)

YES  NO

- 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 entry onto an NMC approved SCPHN programme (R1.3)

N/A

A SCPHN programme isn't proposed.

- Evidence of selection process that demonstrates 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 (R1.4)

YES  NO  N/A

**Provide an evaluative summary 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 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)

MET  NOT MET

R1.5 is not met. There's a lack of evidence that assures us the necessary arrangements and governance structures are in place to support protected learning time for students. Although clearly stated as a requirement in statements of commitment from PLPs for example, other documentary evidence makes reference only to the support and training requirements for practice assessors and practice supervisors. There's inconsistency of terms used in some of the programme documentation. For example, the programme handbook refers to protected learning time that's negotiated in practice on an individual basis. and the recruitment and selection handbook refers to students having supernumerary status. The programme team, practice supervisors and practice assessors tell us that students are supported with protected learning time and are supernumerary in the practice learning environment. However, students tell us that they frequently use protected learning time to catch up on study or assessment activities in order to meet the programme requirements. They confirm they're supernumerary in placement and aware they should have protected learning time, however they tell us this doesn't always happen. This is confirmed by practice assessors, practice supervisors and education leads. There's a lack of documentary evidence that assures us there's a robust governance process in place that provides oversight of protected learning time. The programme team must therefore provide programme documentation that clearly demonstrates the governance structures in place to support protected learning time. (Condition four)

Documentary evidence and the approval visit confirm that educational audit is in place to monitor safe and effective practice learning environments. These are updated every two years by PLPs in partnership with the programme team. The programme team describe an electronic system in place that records the audits which are checked by the programme team when students are admitted to the



programme. If the audit isn't up to date or due to expire, this is actioned by the practice link team at SHU.

**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)

N/A

A SCPHN programme isn't proposed.

- 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)

YES  NO  N/A

- 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)

YES  NO  N/A

- 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

**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* will be met through the transfer of existing students onto the proposed programme.**

Discussion at the approval visit and documentary evidence confirm that no students will transfer to the new programme.

**Proposed transfer of current students to the [Standards for student 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.**

The SSSA are embedded within the existing programme and therefore there are no students who require transfer.

Assurance is provided that Gateway 1: [Standards framework for nursing and midwifery education](#) relevant to selection, admission and progression are met

YES  NO

**Outcome**

**Is the standard met? MET  NOT MET**

Students tell us that practice learning time isn't consistently protected. There's a lack of documentary evidence, and discussions at the approval visit don't assure us there's robust governance processes in place that support and provide oversight of protected learning time for students.

Condition four: Provide programme documentation that clearly demonstrates the governance structures in place to support protected learning time. (SPRP R1.5) (NMC and university condition)

**Date:** 10 June 2024

**Post event review**

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

Condition four: SHU provide programme documentation that demonstrates the governance structure in place to support protected learning time.

Condition four is met.

Evidence:

Placement learning expectations document, undated

Updated DN programme handbook, undated

Governance and implementation plan for safe and effective coordination of learning within practice learning environments in conjunction with PLPs, undated

Letter of confirmation of conditions met NMC SCPHN, 5 July 2024

**Date condition(s) met:** 9 July 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 *Standards 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)

N/A

A SCPHN programme isn't proposed.

- 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)

YES  NO  N/A

- There is evidence that the programme complies with the NMC *Standards for student supervision and assessment* (R2.2)

YES  NO

- 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)

YES  NO  N/A

R2.4 There is evidence that routes are stated within the programme for:

- students to enter the SCPHN register in a specific field of SCPHN practice: health visitor, school nurse, occupational health nurse (R2.4.1)

N/A

A SCPHN programme isn't proposed.

- students to enter the SCPHN register for the public health nurse qualification (R2.4.2)

N/A

A SCPHN programme isn't proposed.

- 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)

YES  NO  N/A

- students to annotate their registration in community nursing SPQ practice in health and social care (R2.4.4)

YES  NO  N/A

A SPQ in health and social care isn't proposed.

R2.5 There is evidence to ensure programme learning outcomes reflect the:

- 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 (R2.5.1)

N/A

A SCPHN programme isn't proposed.

- core standards of proficiency for SCPHN that are tailored to public health nursing (R2.5.2)

N/A

A SCPHN programme isn't proposed.

- 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 (R2.5.3)

YES  NO  N/A

**Provide an evaluative summary 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:

- core and field specific standards of proficiency for each intended field of SCPHN practice: health visiting, school nursing, occupational health nursing (R2.6.1)

N/A

A SCPHN programme isn't proposed.

- core standards of proficiency for SCPHN public health nurse qualification (R2.6.2)

N/A

A SCPHN programme 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)

MET  NOT MET

R2.6.3 is met. The proposed SPQ DN programme is modular in design consisting of five modules over three trimesters. Students undertake advanced physical assessment and consultation skills and leadership in practice in trimester one. The leadership module is delivered by distance learning. In trimester two, students undertake the V300 and in the third trimester advancing specialist practice in DN. The zero credit practice assessment document (PAD) forms a module that's undertaken across the three trimesters.

Students are assessed on each SPCNSPQ through a range of assessment strategies and in practice through the PAD. Documentation provided tells us that the programme learning outcomes are mapped to the SPCNSPQ.

There's a SHU specific PAD that outlines the required SPCNSPQ. There's specific mention in the PAD of the number of hours students are required to achieve in each trimester. There's a place for students to record their practice hours and the requirement for the minimum number of practice hours is clearly evident. Practice assessors and practice supervisors tell us they're not fully clear about the specific amount of hours required for each trimester in the new PAD. However, they confirm that a forthcoming training day provided by the programme team will focus on the use and implementation of the new PAD. Practice assessors and practice supervisors confirm that regular liaison days are facilitated by the programme team to support supervision and assessment in practice.

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)

N/A

A SCPHN programme isn't proposed.

- 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)

**MET**  **NOT MET**

R2.7.2 is met. Documentary evidence and discussion with the programme team at the approval visit demonstrate that theory and practice based learning content is mapped to the programme learning outcomes. The programme content supports learning and achievement of the SPCNSPQ through a modular approach. Documentation and discussion with the programme team inform us that within the modular structure of the programme there's a specific 'advanced physical assessment and consultation' module and an 'advancing specialist practice' module for SPQ DN students which reflect the requirements of the SPCNSPQ.

The practice assessment module is specific to the SCPNSPQ requiring the proficiencies are met in practice. The leadership module and the V300 module are open to other students.

Module assessments are linked to practice. For example, the assessment for the 'advancing specialist practice' module reflects the requirements for platform six in the SPCNSPQ, as it requires the student to complete a service improvement project. The programme team confirm that other options for this assessment include a literature review and a health needs assessment. These enable students to explore wider aspects of DN practice, for example inequalities in care and the patient experience.

Students, practice assessors, practice supervisors and education leads tell us the programme specific PAD guides the structure of practice learning. The programme team, practice assessors and practice supervisors tell us that use of the PAD is supported through liaison days facilitated by the programme team.

- 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)

**MET**  **NOT MET**

R2.8 is met. The documentation provided and discussion at the approval visit confirm there's a balance of theory and practice learning. The programme team, students, practice assessors and practice supervisors tell us that students have one main placement for the duration of the programme. The programme team confirm that students are encouraged to gain a global perspective and are encouraged to go out into the wider community on placement. This is supported by practice assessors and practice supervisors who tell us that a variety of practice based learning experiences with other services is encouraged where possible.

Students tell us there's an equal split between theory and practice learning. The programme team tell us there's a range of assessments in place that support students to manage the variety of health complexities experienced in practice. Students and the programme team tell us that the programme utilises a virtual learning environment for communication and the teaching and learning resources for the programme. The programme team, students and documentary evidence confirm that the programme is delivered using a blended approach that includes face to face and online delivery.

- 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)

**MET**  **NOT MET**



R2.9 is met. Documentary evidence and the programme team describe the provision of simulated learning opportunities in the advanced physical assessment module and in the V300 module. The programme team tell us that students can simulate physical assessment in the classroom and that scenarios are used to simulate practice in the V300 module. There's a 'sim-flat' and other simulation activities, however, students aren't able to confirm experience of these and tell us that opportunities for simulation occur during practice learning only. For example, scenarios, simulating difficult conversations and clinical skills practice such as Doppler assessment and use of syringe drivers. This is confirmed at the visit by practice assessors and practice supervisors. The programme team are therefore advised to develop further simulation opportunities across the programme to support supervision, learning and assessment. (Recommendation two)

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

- Evidence to ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language (R2.10)

YES  NO  N/A

The programme isn't delivered in Wales.

- Evidence to ensure programmes are of suitable length to support student achievement of all proficiencies and programme outcomes for their intended SCPHN or community nursing SPQ award (R2.11.1)

YES  NO

- Evidence to ensure programmes are no less than 45 programmed weeks of theory and practice learning for full-time programmes/pro rata for part time programmes (R2.11.2)

YES  NO

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

YES  NO

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

YES  NO

**Outcome**

Is the standard met?

MET  NOT MET

Date: 10 June 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 MET

N/A

**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 evaluative summary 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 self-employed and/or self-funded (R3.1)

**MET**  **NOT MET**

R3.1 is met. There's documentary evidence that provides assurance of effective arrangements and governance in place for practice learning, including process maps for the inclusion of self-funded and self-employed students. The programme team tell us that students are required to have a new Disclosure and Barring Service check in progress on application to the programme, confirmed by educational leads and students at the visit. Documentary evidence and the programme team tell us that liaison days with PLPs are provided throughout the programme. Education leads, practice assessors and practice supervisors confirm attendance at these days and that they provide opportunities for discussion and to receive updates about the programme. PLPs tell us that relationships with the programme team are open and collaborative. The programme team, PLPs and students tell us there are meetings every trimester between the programme team, academic assessor, practice assessor and the student. PLPs tell us that applications from self-funding or self-employed students haven't yet occurred, however they confirm that the same governance processes and criteria are applied.

- 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)

**MET**  **NOT MET**

R3.2 is met. Programme documentation confirms the AEI has a student charter in place to support partnership working. Documentary evidence and discussions with the programme team, PLPs and students confirm that there's a student meeting in each trimester and that the meeting is recorded in the student's PAD. There's a

practice supervisor and practice assessor handbook. The programme team tell us that PLPs allocate appropriate practice supervisors and practice assessors for each student prior to commencement of the programme. Discussions with education leads, practice assessors and practice supervisors confirm this. PLPs confirm that practice assessors and practice supervisors receive training for their roles within the organisation. Documentary evidence and discussions with the programme team and PLPs confirm that liaison days are in place which support practice assessors and practice supervisors to undertake their roles. Discussion at the approval visit with the programme team, PLPs and students confirms that students have supernumerary status for protected learning for the duration of the programme.

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:

- intended field of SCPHN practice: health visitor, school nurse and occupational health nurse or (R3.3.1)

N/A

A SCPHN programme isn't proposed.

- SCPHN public health nurse (R3.3.2)

N/A

A SCPHN programme isn't proposed.

- 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)

**MET**       **NOT MET**       **N/A**

R3.3.3 is met. Documentary evidence and discussions with the programme team, PLPs and students confirm that practice learning is integrated throughout the programme and is designed to support achievement of the SPCNSPQ. The number of specified hours that a student must complete is detailed in the PAD and specific to each trimester of the programme. The PAD is specific to SHU and utilised in electronic format using the PebblePad platform. The programme team and PLPs confirm that training about implementation and use of the PAD for the new programme is planned prior to commencement of the new programme. Practice assessors, practice supervisors and the programme team tell us that a similar version is currently used in practice and therefore they're not unfamiliar with it. Action plans are captured in the PAD for any student who isn't on target to achieve the required SPCNSPQ.

- in other specified field(s) of community nursing in health and social care nursing (R3.3.4)

MET  NOT MET  N/A

Other fields of community nursing in health and social care aren't proposed.

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

- There is evidence that the programme complies with the NMC *Standards for student supervision and assessment* (R3.4)

YES  NO

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

- There is evidence to demonstrate that the programme team takes account of students' individual learning needs and personal circumstances when allocating their practice learning, including making reasonable adjustments for students with disabilities, and (R3.5)

MET  NOT MET

R3.5 is met. Students have an opportunity to discuss any reasonable adjustments they may have in the practice learning environment with the practice supervisor during an initial interview. This is recorded and updated in the PAD. Discussions with the programme team and PLPs confirm that support is provided for students and reasonable adjustments accommodated as required. Students tell us that they're able to ask for reasonable adjustments. For example, one student tells us of a request to move to a different placement area because of travel difficulties and that this was supported by both the programme team and PLP.

R3.6 There is evidence to 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:

- intended field of SCPHN practice, SCPHN PHN practice or (R3.6.1)

N/A

A SCPHN programme isn't proposed.

- their intended field of community nursing SPQ practice or community nursing SPQ in health and social care practice (R3.6.2)

MET  NOT MET  N/A

R3.6.2 is met. There's documentary evidence that demonstrates how modules are mapped to programme learning outcomes over three trimesters. The programme team, practice assessors, practice supervisors and students tell us that the programme is tailored to their learning through set meetings at the end of each trimester with the practice assessor, academic assessor and student. They tell us that student achievement is reviewed at this review meeting, and action plans are developed if students require additional support and learning opportunities to achieve the PAD requirements. The programme team and education leads tell us that students may have an extension to practice if required to achieve the SPCNSPQ.

The programme team tell us that students have the opportunity for formative assessment with modules and receive constructive feedback on which to develop their work. The programme team tell us that students have further opportunities to undertake the module assessments if required. The programme team tell us that students are supported with three attempts at the 'advanced physical assessment and consultation skills' module in the first trimester but are unable to continue on the programme if this isn't achieved.

The PAD enables progress and achievement in practice learning to be documented. There's evidence that the programme culminates in a period of four weeks of continuous practice learning. Discussion with the programme team, practice assessors, practice supervisors and students confirm that the PAD is reviewed by the academic assessor at the end of each trimester. Discussions with the programme team and PLPs confirm that students who fail to achieve the SPCNSPQ are provided with an action plan which determines how the requirements can be met within a negotiated timeframe.

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

YES  NO

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

YES  NO

### Outcome

Is the standard met?

MET  NOT MET

Date: 10 June 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 MET**

N/A

**Standard 4: Supervision and assessment**

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

R4.1 ensure student support, supervision, learning and assessment complies with the NMC *Standards framework for nursing and midwifery education*

R4.2 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 support SCPHN and community nursing SPQ student learning and assessment

R4.3 ensure practice supervision, the assessment of practice and academic assessment complies with the NMC *Standards for student supervision and assessment*

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 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 evaluative summary 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**  **NOT MET**

R4.1 is met. Documentary evidence provided and discussion with the programme team and students confirm that processes for raising concerns are in place and detailed in the programme handbook. Students tell us they're able to raise any issues with their student representatives who liaise with the programme team and



feedback accordingly. Practice assessors and practice supervisors tell us the programme team are accessible and approachable if concerns or issues need to be raised.

The programme team, practice assessors, practice supervisors and students tell us that feedback from PUSCs is sought in practice through student and patient interactions. Documentary evidence in the PAD confirms that students can obtain testimonies and feedback from PUSCs about their practice. The programme team tell us that students are provided with a range of opportunities to feedback to the team, utilising both formal and informal processes. For example, students are encouraged to complete formal module evaluations. They tell us that the results of module evaluations are discussed at the staff and student committee meetings, including what changes are made as a result of the feedback received. Students tell us that group representatives attend the staff and student committee and report back to their cohort. The programme team tell us that informal discussions take place between the programme team and students during classroom sessions at frequent intervals. Students confirm they're able to approach the programme team with feedback at any time and they feel their voices are heard.

The programme team tell us about the range of assessments introduced into the programme following annual evaluation of the programme where students reported that the assessment burden is high and that assessments are bunched together. The programme team describe how the modular structure in the proposed programme will reduce the bunching of assessments for students. Discussion with the programme team and students confirm that each student has an academic assessor. The programme and university senior teams tell us that the academic assessor role is fulfilled by a member of the programme team who holds the SPQ DN.

- 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 support SCPHN and community nursing SPQ student learning and assessment (R4.2)

**MET**  **NOT MET**

R4.2 is met. Documentary evidence and discussions with the programme team and PLPs confirm that liaison days are facilitated by the programme team that support practice assessors and practice supervisors to undertake their roles. The programme team, education leads, practice assessors and practice supervisors tell us that training is to be provided about implementation and use of the PAD prior to commencement of the new programme. Practice assessors, practice supervisors and the programme team tell us that they're familiar with the PebblePad platform used for the PAD as it's currently in use.

- There is evidence that ensures practice supervision, the assessment of practice and academic assessment complies with the NMC *Standards for student supervision and assessment* (R4.3)

MET  NOT MET

R4.3 is not met. Practice assessors, practice supervisors and students tell us they're concerned about the limited number of staff available to undertake the practice assessor and practice supervisor roles, particularly for the advanced physical assessment module and the V300 module. They tell us this is because staff aren't being trained or put forward to undertake the required SSSA training to undertake the practice supervisor and practice assessor roles for these specialist elements of the programme. Education leads tell us that a shortage of suitable practice assessors and practice supervisors is a current issue and that they're working to access other suitable healthcare professionals, for example general practitioners, rapid response and in-patient services staff. Discussion with the senior AEI and programme teams confirms there are sufficient numbers of staff to deliver the programme, however documentary evidence and the approval visit doesn't provide assurance there's a governance plan in place to ensure there's a sufficient number of practice assessors and practice supervisors available to support safe and effective practice learning. The programme team must therefore provide an explicit implementation plan in partnership with PLPs that demonstrates there are sufficient practice supervisors and practice assessors in place to ensure safe and effective coordination of learning within practice learning environments. (Condition three)

The programme team and documentary evidence confirm that liaison days facilitated by the programme team support practice assessors and practice supervisors to undertake the roles. Discussions at the approval visit and documentary evidence confirm there's a practice meeting in each trimester for each student. Documentary evidence and the senior and programme teams confirm the resources in place for academic assessment. Students tell us they each have an academic assessor who contributes to formative assessment of practice in each trimester.

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

- 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
- 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)  
YES  NO  N/A



- 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
- 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)  
YES  NO  N/A

**Provide an evaluative summary 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**

- 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)  
MET  NOT MET

R4.6 is met. The documentary evidence provided and discussions with the programme team, PLPs and students confirm that students are assigned a practice assessor who's an experienced SPQ DN. The programme team and education leads tell us that each student is allocated a practice assessor on recruitment to the programme who's a qualified SPQ DN.

- Processes are in place to ensure that in exceptional circumstances only, 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 (R4.6.1)  
MET  NOT MET

R4.6.1 is not met. Documentary evidence provided states that in exceptional circumstances, the same person will act as both the practice assessor and practice supervisor for the same student simultaneously. Discussion with the programme team confirms that this does occur during the programme, however they're not able to clarify what the exceptional circumstances may be, how the situation is managed or describe the governance process that supports and monitors the situation. Students tell us there are several occasions where the same person acts as practice assessor and practice supervisor and that this continues for a number of weeks and months. They confirm that assessments aren't undertaken during this time. Practice supervisors, practice assessors and

education leads aren't able to describe the exceptional circumstances leading to this scenario or confirm there's appropriate governance in place. The programme team must therefore provide programme documentation that clearly demonstrates the governance structures in place for oversight and management of exceptional circumstances where the roles of practice assessor and practice supervisor are fulfilled by the same person. (Condition five)

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

R4.7 Processes are in place to 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:

- their intended field of SCPHN practice: health visitor, school nurse, occupational health nurse (R4.7.1) N/A

A SCPHN programme isn't proposed.

- SCPHN public health nurse (R4.7.2) N/A

A SCPHN programme isn't proposed.

- 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 YES  NO  N/A

- other specified field(s) of community nursing SPQ in health and social care (R4.7.4) YES  NO  N/A

Other specified fields of community nursing and health and social care aren'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 met (R4.8) YES  NO

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:

<ul style="list-style-type: none"> <li>• their intended field of SCPHN practice: health visitor, school nurse, occupational health nurse (R4.9.1)</li> </ul> <p style="text-align: right;">N/A <input checked="" type="checkbox"/></p> <p>A SCPHN programme isn't proposed.</p> <ul style="list-style-type: none"> <li>• SCPHN public health nurse practice (R4.9.2)</li> </ul> <p style="text-align: right;">N/A <input checked="" type="checkbox"/></p> <p>A SCPHN programme isn't proposed.</p> <ul style="list-style-type: none"> <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> <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/></p> <ul style="list-style-type: none"> <li>• other specified field(s) of community nursing SPQ in health and social care practice (R4.9.4)</li> </ul> <p style="text-align: right;">YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/></p> <p>Other specified fields of community nursing and health and social care aren't proposed.</p>
<p>Assurance is provided that Gateway 1: <a href="#">Standards framework for nursing and midwifery education</a> relevant to supervision and assessment are met</p> <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p>Assurance is provided that Gateway 2: <a href="#">Standards for student supervision and assessment</a> relevant to supervision and assessment are met</p> <p style="text-align: right;">YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>Students, practice assessors and practice supervisors tell us that there are insufficient practice assessors and practice supervisors to support SPQ DN students in practice, specifically in relation to the advanced physical assessment module and the V300 module. Both of these elements are new to the proposed programme. (Condition three)</p>
<p><b>Outcome</b></p> <p><b>Is the standard met?</b> MET <input type="checkbox"/> NOT MET <input checked="" type="checkbox"/></p> <p>Documentary evidence and discussions at the approval visit don't provide assurance that there are sufficient numbers of practice assessors and practice supervisors in place to support SPQDN students in the practice learning environment.</p>

Condition three: Provide an explicit implementation plan in partnership with PLPs that demonstrates there are sufficient practice supervisors and practice assessors in place to ensure safe and effective coordination of learning within practice learning environments. (SSSA R1.4, SPRP R4.3) (NMC and university condition)

Documentary evidence and discussions at the approval visit don't provide assurance that appropriate governance processes are in place where exceptional circumstance occur and the roles of practice assessor and practice supervisor are fulfilled by the same person for the same student.

Condition five: Provide programme documentation that clearly demonstrates the governance structures in place for oversight and management of exceptional circumstances where the roles of practice assessor and practice supervisor are fulfilled by the same person. (SPRP R4.6.1) (NMC and university condition)

**Date:** 10 June 2024

#### Post event review

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

Condition three: SHU provide an implementation plan in partnership with PLPs that clearly demonstrates a process for ensuring sufficient practice supervisors and practice assessors are in place to ensure safe and effective coordination of learning within practice learning environments.

Condition three is met.

Evidence:

Placement learning expectations document, undated  
Updated information about preparation and training of practice supervisors and practice assessors in DN student handbook, undated  
Governance and implementation plan for safe and effective coordination of learning within practice learning environments in conjunction with PLPs, undated  
Letter of confirmation of conditions met NMC SCPHN, 5 July 2024

Condition five: SHU provide programme documentation that clearly demonstrates the governance structures in place for the oversight and management of exceptional circumstances where the roles of practice assessor and practice supervisor are fulfilled by the same person.

Condition five is met.

Evidence:

Screenshot of additional wording added to the PAD in the supervision and assessment section, undated  
List of acceptable exceptional circumstances, undated

Governance and implementation plan for safe and effective coordination of learning within practice learning environments in conjunction with PLPs, undated  
Flow chart of appropriate support for DN SPQ students during practice placement, undated  
Letter of confirmation of conditions met NMC SCPHN, 5 July 2024

**Date condition(s) met:** 9 July 2024

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

**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 identified in all programme documentation and is a minimum of a postgraduate masters' level (R5.1)

YES  NO

- Processes are in place to inform the student that the SCPHN award must be registered with the NMC 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 (R5.2)

N/A

A SCPHN programme isn't proposed.

- Processes are in place to 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 (R5.3)

YES  NO  N/A

- Processes are in place to 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 and if they fail to do so they will have to retake and successfully complete the programme in order to qualify as a prescriber (R5.4), and

YES  NO  N/A

- Processes are in place to 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 (R5.5)

YES  NO  N/A

#### Fall Back Award

If there is a fall back exit award with an SPQ annotation all NMC standards and proficiencies are met within the award

YES  NO  N/A

There's no fall back exit award with SPQ annotation. The V300 is awarded subject to the student achieving all requirements of the SPQ DN.

Assurance is provided that Gateway 1: [Standards framework for nursing and midwifery education](#) relevant to the qualification to be awarded are met

YES  NO

<b>Outcome</b>		
Is the standard met?	MET <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>
Date: 10 June 2024		
<b>Post event review</b>		
Identify how the condition(s) is met:		
N/A		
Date condition(s) met:		
N/A		
Revised outcome after condition(s) met:	MET <input type="checkbox"/>	NOT MET <input type="checkbox"/>
N/A		



**Section four**

**Sources of evidence**

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

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

Written agreement(s) to support the programme intentions between the education institution and employer partners for apprenticeship routes (if applicable).	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If you stated no above, please provide the reason and mitigation: SHU provides an online university handbook that isn't accessible outside of the organisation. A screenshot of the contents page is provided as evidence. There's no apprenticeship route proposed.		
List additional documentation: Flow chart of appropriate support for DN SPQ students during practice placement, undated Governance and implementation plan for safe and effective coordination of learning within practice learning environments, undated Implementation plan for promotion and facilitation of IPL, undated Implementation plan for PUSC, PLP and student involvement, undated List of acceptable exceptional circumstances, undated Placement learning expectations document, undated Screenshot of additional wording added to the PAD in the supervision and assessment section, undated Updated DN student handbook, undated Letter of confirmation of conditions met NMC SCPHN, 5 July 2024		
Additional comments: None identified.		

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

	<b>YES</b>	<b>NO</b>
Senior managers of the AEI/education institution with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated practice learning partners with responsibility for resources for the programme	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Senior managers from associated employer partners with responsibility for resources for the programme (applicable for apprenticeship routes)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Programme team/academic assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice leads/practice supervisors/practice assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, please identify cohort year/programme of study: Five x current students, September 2023 cohort One x alumnus		
People who use services and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation: Senior managers from PLPs didn't attend the approval visit, however representation is provided by education leads.		

There's no apprenticeship route proposed.
Additional comments: None identified.

**The visitor(s) viewed the following areas/facilities during the event:**

	YES	NO
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Library facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Technology enhanced learning/virtual learning environment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Educational audit tools/documentation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Practice learning environments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If practice learning environments are visited, state where visited/findings:		
System regulator reports reviewed for practice learning partners	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, system regulator reports list: Barnsley Hospice, Care Quality Commission (CQC) inspection report, 25 January 2023 Barnsley Hospital, CQC inspection report, 1 September 2023 Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust, CQC inspection report, 28 March 2024 Kings Mill Hospital and Sheffield Teaching Hospital NHS Foundation Trust, CQC inspection report, 23 February 2023		
If you stated no above, please provide the reason and mitigation: SHU is an established AEI and therefore visits to practice learning environments and inspection of resources aren't required.		
Additional comments: None identified.		

**Mott MacDonald Group Disclaimer**

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

**Issue record**

**Final Report**

Author(s):	Hannah Ingram	Date:	15 June 2024
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Submitted by:	Amy Young	Date:	7 August 2024
Approved by:	Natasha Thompson	Date:	7 August 2024