

**Programme approval report**

**Section one**

<b>Programme provider name:</b>	Teesside 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 checked="" 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>	PgDip Specialist Practice in District Nursing  PgDip Specialist Practice in District Nursing (Apprenticeship)
<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  SCQF <input type="checkbox"/> Level 11
SPQ Community learning disabilities 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 mental health nursing apprenticeship	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) apprenticeship	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ District nursing apprenticeship	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) apprenticeship	England, Wales, Northern Ireland <input checked="" type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ General practice nursing apprenticeship	England, Wales, Northern Ireland <input type="checkbox"/> Level 7  SCQF <input type="checkbox"/> Level 11
SPQ General practice nursing with integrated independent and	England, Wales, Northern Ireland <input type="checkbox"/> Level 7

supplementary prescribing (V300) apprenticeship	SCQF <input type="checkbox"/> Level 11
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>	17 April 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	16 September 2024
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: Sarah Beresford Lay Visitor: Sandra Stephenson

## Section two

### Summary of review and findings

Teesside University (TU) is an approved education institution (AEI) and an established provider of the post-registration community nursing specialist practice qualification (SPQ) district nursing (DN) programme and the independent and supplementary nurse prescribing (V300) programme. The school of health and life sciences (SHLS) is seeking approval of a new community nursing SPQ DN programme with V300 prescribing.

The programme is presented for approval against the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018), Standards for student supervision and assessment (SSSA) (NMC 2018, updated 2023), Standards for post-registration programmes (SPRP) (NMC 2022, updated 2023) and Standards of proficiency for community nursing SPQ (SPCNSPQ) (NMC, 2022). The V300 programme is in approval since 26 February 2021.

The proposed programme is a postgraduate diploma (PgDip) and is offered as full-time non-apprenticeship and part-time apprenticeship routes with the integrated V300 programme. The part-time route is only offered as an apprenticeship. TU is proposing a September intake for both the full-time non-apprenticeship and the part-time apprenticeship route. Proposed numbers are eight to 12 for the full-time route and 10 to 15 for the apprenticeship route. The full-time route is delivered across 51 weeks, with 23 months for the part-time apprenticeship route. The programme is delivered at TU's Middlesborough campus.

Practice learning partners' (PLPs) and employer partners' (EPs) details are provided. Proposed EPs for the SPQ DN programme are County Durham and Darlington NHS Foundation Trust, Gateshead Health NHS Foundation Trust, North Tees and Hartlepool NHS Foundation Trust and South Tees Hospitals NHS Foundation Trust. Signed commitment statements are in place.

Programme documentation and the approval visit confirm that recruitment processes ensure that entry to the PgDip is open to current NMC registered nurses (level one) who demonstrate the capability to study at level seven, with additional requirements of skills and experience required for the V300. The programme is open to all applicants, either NHS or non-NHS allowing opportunities for self-funding applicants.

Considering equality, diversity and inclusion (EDI), TU provides monitoring information which considers fee status, gender, ethnicity, age, disability, parental education and highest entry qualification for the student population. TU acknowledges that the northeast is one of the least diverse areas in terms of black, Asian and minority ethnic groups and the student population reflects this, being predominately white British. In terms of gender, maturity of student,



neurodivergence and those first in the family to go to university, documentation and the approval visit confirm TU has positive numbers against the national averages. TU report there's no awarding gap for the SPQ DN programme.

In addition to confirming appropriately qualified practice supervisors and practice assessors for the SPQ DN, EPs and PLPs also confirm appropriately qualified practice supervisors and practice assessors with V300 experience.

Inter-professional learning (IPL) is supported across theory and practice learning. Through the V300 module students can learn alongside other health professionals across the SHLS.

Documentation and the approval visit confirm extensive co-production and collaborative working between TU and all stakeholder groups.

The Association of DN Educators (ADNE) community nursing SPQ practice assessment document (PAD) is adopted. TU's unique V300 PAD and module guide are provided.

TU has processes in place to ensure that risks to public and student safety are identified and are exceptionally reported to the NMC, where required.

The approval visit is undertaken face to face.

The programme is recommended to the NMC for approval. There are three university recommendations.

### Recommended outcome of the approval panel

**Recommended outcome to the NMC:**

Programme is recommended to the NMC for approval

Programme is recommended for approval subject to specific conditions being met

Recommended to refuse approval of the programme

**Conditions:**

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

None identified.

	<p><b>Selection, admission and progression:</b></p> <p>None identified.</p> <p><b>Practice learning:</b></p> <p>None identified.</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>
<b>Date condition(s) to be met:</b>	N/A
<b>Recommendations to enhance the programme delivery:</b>	<p>Recommendation one: To consider further integration of IPL opportunities within the taught element of the SPQ. (University recommendation)</p> <p>Recommendation two: To consider further integration of third sector involvement in DN practice. (University recommendation)</p> <p>Recommendation three: To continue to explore strategies with partners to proactively increase EDI in recruitment. (University recommendation)</p>
<b>Focused areas for future monitoring:</b>	<p>Integration of IPL in theory.</p> <p>Increase in EDI in student recruitment.</p>

<b>Programme is recommended for approval subject to specific conditions being met</b>	
<b>Commentary post review of evidence against conditions:</b>	
N/A	
<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 type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
<b>Date condition(s) met:</b>	N/A

### Section three

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

**Standard 2: Educational governance and quality:**

S2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, people who use services, students and all other stakeholders

R2.4 comply with NMC [Standards for student supervision and assessment](#)

R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes

R2.6 ensure that recruitment and selection of students is open, fair and transparent and includes measures to understand and address underrepresentation

R2.7 ensure that people who use services and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection

**Standard 3: Student empowerment:**

R3.3 have opportunities throughout their programme to work with and learn from a range of people in a variety of practice placements, preparing them to provide care to people with diverse needs

R3.16 have opportunities throughout their programme to collaborate and learn with and from other professionals, to learn with and from peers, and to develop supervision and leadership skills

R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning

R3.18 have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice.

**Standard 4: Educators and assessors:**

R4.7 liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment

R4.9 receive and act upon constructive feedback from students and the people they engage with to enhance the effectiveness of their teaching, supervision and assessment

R4.10 share effective practice and learn from others

**Standard 5: Curricula and assessment:**

R5.4 curricula are developed and evaluated by suitably experienced and qualified educators and practitioners who are accountable for ensuring that the curriculum incorporates relevant programme outcomes

R5.5 curricula are co-produced with stakeholders who have experience relevant to the programme

R5.14 a range of people including people who use services contribute to student assessment

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

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

R1.4 there are suitable systems, processes, resources and individuals in place to ensure safe and effective coordination of learning within practice learning environments

R1.7 students are empowered to be proactive and to take responsibility for their learning

R1.8 students have opportunities to learn from a range of relevant people in practice learning environments, including users of service, registered and non-registered individuals, and other students as appropriate

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

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

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

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

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

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

**Standard 7: Practice assessors: responsibilities:**

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

**Standard 9: Academic assessors: responsibilities:**

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

**Findings against the standard and requirements**

**Provide an 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.**

Documentation and the approval visit confirm joint working in recruitment and selection. TU hosts open events to publicise the SPQ DN programme which are

valued extensively by PLPs and EPs. The programme lead meets with PLPs/EPs to talk through entry criteria for both the non-apprenticeship and apprenticeship routes. Interview questions are developed with people who use services and carers (PUSCS) and reviewed annually by the programme team and the PLPs/EPs. PLPs/EPs advertise according to their need and this process varies between different PLPs/EPs. Interviews are undertaken jointly with interviews held in practice with panel representation from TU.

Documentation and the approval visit confirm a commitment to supporting applicants wanting to self-fund. The programme lead has approached local PLPs/EPs to explore their potential engagement. PLPs/EPs confirm they'd support a self-funding student through the provision of an honorary contract. The self-funding pathway flowchart sets out the process, with TU providing the occupational health (OH) assessment and Disclosure and Barring Service (DBS) check. The placement team contact the PLP/EP to arrange an appropriate placement and check if an educational audit is in place, or complete one if not.

The programme team confirm that only three of the 208 DN students enrolled in previous years haven't been white British. TU acknowledge the northeast is one of the least diverse areas in terms of black, Asian and minority ethnic groups and its student population reflects this. However, in terms of gender, maturity of student, neurodivergence and those first in the family to go to university, documentation and the approval visit confirm TU has positive numbers against the national averages. The programme team tell us they hold open events and recruitment fairs, and work with the principal lecturers for marketing and recruitment to try to raise awareness of the DN role across a wide range of backgrounds. They ensure that pre-registration nursing students understand about the opportunities of the SPQ, and the programme leader is currently undertaking research into factors impacting on career decisions. They tell us they're working with local PLPs/EPs who are encouraging international students who've qualified in the area as nurses to consider the SPQ DN career progression.

Documentation and the approval visit confirm outstanding partnership working between TU and a range of stakeholders, including PLPs, EPs, PUSCs, external examiners, the apprenticeship team and students to develop the programme. Senior staff from local PLPs/EPs tell us they've met with TU several times to look at the outgoing programme, and collaboratively agreed how they wanted it to develop and best meet the needs of practice and therefore, the local population. The inclusion of the integrated V300 was the preferred option for the PLPs/Eps. They tell us they're involved in every discussion with the programme leaders, with excellent communication between practice and TU. Their involvement in the programme begins before recruitment, when they meet with TU to discuss entry criteria, and continues throughout the programme, including the end of programme celebration event.



Documentation and the approval visit confirm collaborative working with the northern collaborative group of programme leads for DN programmes across the north of England, supporting development of an apprenticeship in DN.

Consultation with practice assessors shows a preference for one PAD document, with apprenticeship students accessing the knowledge, skills and behaviours (KSBs) for the apprenticeship standard and associated requirements via their Blackboard site; this is TU's virtual learning environment (VLE). It's felt this reduces potential for confusion. The SPCNSPQ and the apprentice KSBs are mapped to the programme learning outcomes and modules. Senior PLP/EP representatives confirm they've been part of the regional and national DN groups reviewing and developing both the ADNE SPQ PAD and a proposed apprenticeship PAD. The ADNE apprenticeship PAD is yet to be adopted by TU however the core ADNE PAD is adopted.

The programme leader is a member of the regional Queen's Nursing Institute forum and the Northern collaborative group of DN programme leaders from AEs in the north of England. Both groups meet two to three times per year. The programme leader is a member of the ADNE. All senior PLP/EP representatives, practice supervisors and practice assessors we met tell us their relationship with TU is highly positive. They tell us of excellent, open two-way communication with a focus on providing the best possible learning opportunities and support for students. They tell us that their attendance at TU organised events has additional benefits in that it offers networking opportunities and peer support across their geographically spread organisations.

Documentation and the approval visit confirm that TU works extensively in partnership with PLPs and EPs to deliver SSSA training and updates. The programme team works closely with the practice learning teams within each PLP/EP, with regular practice learning meetings held. PLPs/EPs offer their own training to their practice assessors and practice supervisors, but TU also offers training updates. They tell us of jointly developed updates and designated prescribing practitioner (DPP) training. The programme leader tells us of regular full day masterclasses held for practice supervisors, practice assessors and DPPs from local PLPs/EPs. Senior PLP/EP staff tell us the masterclasses for practice supervisors and practice assessors are really valued with superb feedback received from attendees.

TU works in partnership with PLPs/EPs to ensure there are suitably qualified and prepared practice supervisors and practice assessors to support students in practice. Senior PLP/EP staff confirm they've enough staff with the V300 to act as practice supervisors and practice assessors. They also confirm, with TU, that if a practice assessor doesn't have the prescribing qualification, the student is assigned to a DPP and the experience of this is extremely positive. The programme leader confirms that the DN PAD contains contact details to allow the practice assessor and DPP to liaise, with the academic assessor triangulating between both. If the practice assessor raises concerns about a student's

performance related to SPQ DN practice the academic assessor contacts the DPP to check their performance in the V300. If required, a meeting with academic assessor, practice assessor, DPP and the student takes place to action plan and enable the student to progress. All practice assessors we meet tell us that they work closely with the academic assessor, with face to face initial and final tripartite meetings held. Practice assessors and practice supervisors tell us the tripartite meeting relationship is invaluable. They tell us they've an excellent, seamless relationship with the academic assessor who's swift to respond and will come out to practice at any time. They tell us that students receive outstanding support from the academic team.

Apprentice students tell us they always have their protected learning time prioritised and they're extremely well supported by their EP, their practice assessors and practice supervisors and the apprenticeship quality coach who maintains a seamless relationship with the academic assessor from TU.

Documentation and the approval visit confirm that students are consulted about all aspects of the new programme, including programme length, content, modules, assessment schedules, delivery and PUSC involvement. Students are encouraged to provide feedback on each module through an electronic survey system called Evasys. Students we meet tell us the programme team are very supportive and seek out student feedback constantly, wanting to know what has gone well in a session, what could be removed from or put into a module and always wanting to make the programme even better. Student representatives are recruited for each cohort, with two student voice forum events held each year. The spotlight meeting focuses on programme specific issues, with the second a SHLS wide meeting with a broader focus on student experience within the SHLS. As students are usually placed within one practice learning setting throughout the programme, they're encouraged to provide feedback on their practice learning as they progress, rather than waiting for a specific review point. At the end of the programme, they're signposted to the online practice placement system to complete the placement evaluation.

Members of the programme team, the practice learning team including EPs and students tell us that feedback from apprentices about the difficulty in managing workload and assignments led to the apprenticeship programme changing from 19 to 23 months. Senior EP staff tell us the needs of the students and apprentices is the driver behind decisions, with them wanting to avoid pressure points which cause difficulties for student pass rates and the additional stress this causes to them and the staff supporting them. Students we meet tell us the programme lead meets with them regularly and has shared the proposed new programme and that their feedback about the timetable and scheduling of assessments has been taken onboard. DN alumni from different cohorts tell us they can see the changes made to the programme in response to their feedback. Students previously based within general practice (GP) practices tell us their feedback about their prescribing opportunities led to a change to being based in community which offers a much wider range of experiences for them. Practice assessors and practice supervisors



we meet tell us they've been involved all the way through the development of the programme, with the programme team very interested in their feedback. They tell us the programme team are always asking how they can make the programme better and that they listen to students' feedback too.

Documentation and the approval visit confirm PUSCs are given the opportunity to contribute to all aspects of the programmes including recruitment, assessment, co-production of teaching materials and the delivery of learning across the SHLS and wider university. Documentation and PUSCs we meet at the approval visit confirm there's a SHLS dedicated PUSC coordinator who ensures PUSCs are supported and have appropriate training. The senior leadership team tell us PUSCs are the key to many of their programmes across the SHLS. The programme leader tells us how PUSCs are involved from the very start of the DN programme development. They tell us they develop interview questions for use with the SPQ DN interviews, which are refreshed annually. PLPs/EPs confirm that a selection of the questions are used in the interviews. PUSCs tell us they think about what skills and attributes they'd like to see in a DN. They're currently involved in interviewing pre-registration and international students and, if TU's ambition to include them on SPQ DN interviews happens, would welcome the opportunity to be part of the panel. The programme team and PUSCs we meet tell us how the PUSCs developed a new SPQ DN feedback tool which offers one set of questions for people who use services and another for carers. PUSCs tell us how they looked at the existing feedback in the PAD and reflected on what it meant to the person who used services and what it meant to the carer. Collaboration with others, including those from a social work background, enabled them to develop feedback which is now included in the PAD for the new programme.

The programme team tell us the relationship with PUSCs in the SPQ DN programme is evolving and they actively ask them how they want to be involved moving forward. PUSCs tell us how they've sat down with the programme team and reviewed the modules and had input into the redevelopment of the programme. They tell us they've identified opportunities in the programme where they could deliver sessions for the students. They tell us sessions with students are so valuable as the students can ask them anything, as they're not their patients and this can deepen student understanding. PUSCs we meet tell us that their opportunities to talk to students are met and evaluated very positively, such as that the students tell them they'll take that experience with them forever. PUSCs tell us they'll be met by the lecturer to chat through before the session and they're supported throughout, including receiving student feedback and a debrief with the lecturer and the PUSC co-ordinator. They tell us that the voice of the carer, which can often be overlooked within healthcare, is strongly put forward in the programme and this is very important to them and much appreciated. The programme team tell us there's a database of PUSCs which details the mandatory training and updates each person completes and a biography of their experiences, and this is maintained by the PUSC co-ordinator. The PUSCs we meet explain how members of the PUSC group are from different personal and professional

backgrounds, all with their unique experiences to share, which they can do so by 'talking heads' and telling their stories.

PUSCs we meet tell us they're valued by TU and that the evidence is there, in the programme, showing that what they've done towards the programme development was valued and utilised. They tell us they now have an associate account with TU and access Blackboard, which is crucial for their input into assessment processes. They receive EDI, information governance, 'prevent and safeguarding essentials' training, and say that they wouldn't be able to go forward with their role without the relevant training and the outstanding support they receive from TU.

There are IPL opportunities in theory, with the V300 delivered across the SHLS with students from other disciplines. In practice, students are encouraged to learn from specialist teams via insight opportunities in practice, such as the frailty or diabetes team, social workers, allied health professionals, first responders, pharmacists, social prescribers and doctors. Some PLPs and EPs offer Schwartz rounds. As part of the SPQ there are shared modules with health visitor and school nurse students, for example the V300 and research module. There are shadow day opportunities for IPL in practice and different inter-professional personnel come into TU to talk to the student, for example the diabetic consultant.

Documentation and the approval visit confirm collaborative working if concerns are raised with a placement, including adverse Care Quality Commission (CQC) reports. Senior leaders and the programme team tell us they've revised the 'quality concern process and guidance on assigning a risk score' policy. The revisions include formalising the current approach and ensure that intelligence gained from other monitoring systems is collated and considered in an integrated way. The revised policy has been approved through TU's quality process and is about to be rolled out.

TU works collaboratively in partnership with all PLPs, PUSCs and other stakeholders. The programme team tell us that the programme wouldn't be what it is without the rich collaborative approach to working with others, from the planning and development of the programme, student recruitment, to promoting equity for all students, facilitating teaching and learning in both theory and practice and celebrating achievement. During the visit we learn that the key to success is that the existing programme is so well embedded over a long period of time and was exceptionally well respected. The development of the new programme has been extremely well received and the predominant strength of the development of the programme is the collaborative co-produced approach. During the visit we hear that the programme team listen to and act on feedback from all stakeholders, and they provide many opportunities for those discussions and responses.

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**

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

**Post Event Review**

**Identify how the condition is met:**

N/A

**Date condition(s) met:**

N/A

**Revised outcome after condition(s) met:**

MET  NOT MET

N/A

**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:

26 February 2021

**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 met. Documentation and meetings with senior leaders, the programme team and PLPs/EPs at the approval visit confirm that arrangements and governance structures are in place to support practice learning. Signed commitment statements confirm PLPs'/EPs' support for TU's PgDip SPQ DN programme, including the provision of practice learning opportunities that allow students to develop, progress and meet all the SPCNSPQ and protected learning time in line with the SPRP. The senior management team tell us they meet monthly with local PLPs/EPs including for the management of placement quality. They tell us they share and act upon health regulator outcomes and information, meeting more regularly if any adverse reports are received. They confirm they exceptionally report to the NMC.

Students tell us they're very well supported by their practice supervisors, practice assessor and academic assessor in practice. They tell us of three planned tripartite meetings across the programme, with apprentices confirming they've 12 weekly meetings and are also well supported by their apprentice quality coach, in addition to the academic assessor. They confirm they all receive protected learning time. They tell us that practice supervisors and practice assessors always have sufficient time to meet with them and discuss their learning.

Practice learning team staff tell us they're very well supported by the academic team and that they receive supported time from their employers to attend training. They confirm students always receive protected learning time and that they've time to meet with students.

The programme team tell us of procedures in place to ensure that students recognise their joint responsibility to TU and their employers to advise of any absence. Absence information is collated and shared monthly with PLPs/EPs and the student.

**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.

Documentation confirms existing students won't transfer to the proposed 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.

Students are already transferred to the SSSA.

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

Date: 17 April 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 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 practice in health and social care route 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 SPCNSPQ for DN are mapped to the module and programme learning outcomes. KSBs are mapped to modules. Students must successfully complete all four academic modules, achieving 120 Level 7 credits.

In the 'advancing DN one' module (30 credits), students explore issues relating to public health, vulnerability, risk, self-management and teaching and learning. Students explore leadership concepts, service improvement and how workforce efficiency is balanced with patient safety and quality care in the 'advancing DN two' module (30 credits). In the 'physical assessment skills with a focus on long term conditions' module (20 credits) students explore the diagnostic reasoning and clinical management of long-term health conditions. In the 'advancing non-medical prescribing' module (40 credits) students are introduced to the principles of safe and effective prescribing, with key skills including history taking and assessment, writing prescriptions, medicine optimisation, drug calculations and pharmacology.

The programme team tell us the V300 and physical assessment modules are scheduled to run alongside each other as they complement the students' learning. The V300 module is shared across the SHLS and so enables IPL with students from health visiting, school nursing, pharmacology and other allied health professionals.

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. Programme learning outcomes are mapped across the programme to each module to ensure they reflect the SPCNSPQ for DN. The programme team and students tell us of theory sessions held in the morning which lead into clinical skills sessions in the afternoon, allowing students to relate their learning into practice.

- 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. Documentation and the approval visit confirm a balance of theory and practice learning opportunities. The full-time route is delivered over 51 weeks. Students have days allocated for taught and self-directed theory and time allocated for learning in practice. Students complete 105 days in practice, including 78 hours for V300 practice learning and 92 days of theory learning made up of 64 days for taught theory and 28 days for self-directed study.

A range of teaching and learning activities include lectures, seminars, practical activities, group work and structured individual learning, presentations, quizzes, online guided learning and clinical simulation.

Documentation and meetings with the programme team confirm assessment, in a range of formats, facilitates engagement by all students. These include written submissions, such as essays and annotated reference lists, oral submissions including viva voce and oral defence of a presentation, practical assessments such as the modified objective structured long examination review (MOSLER) and successful completion of the SPCNSPQ through the PAD, the V300 practice portfolio and exams including drug calculations for prescribing. To help the students to understand the MOSLER assessment there are different sets of assessment support to meet all learning styles, including talking heads and written

and verbal guidance. Students tell us of different assessment techniques and varied teaching styles and methods, all of which add to the rich diversity of the programme. Students we meet tell us that they wish they could do the year again, they gained so much from the experience.

- 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. Documentation and the approval visit confirm that promoting technology enabled care is embedded throughout the programme. The SHLS has appointed a professor and an associate professor in digital health. The programme team are active on social media and encourage students to draw on professional social media networks for debate, resources and support. Students' digital literacy is supported through apps for clinical assessment and prescribing, and students access NHS e-learning resources. Blackboard includes programme and module information, useful links, learning resources, online assessments and copies of handbooks and policies. Students engage with webinars and online conferences to enhance their learning. The use of Microsoft Teams allows students to engage with national experts as external guest speakers. Students tell us of the use of videos of simulated practice developed by the programme team and shared online for their use. The programme team tell us of an established hybrid model allowing for attendance of large numbers split into remote and face to face groups. If neurodiverse students report difficulties with attending online, they're automatically prioritised for face to face attendance. Turnitin is available for students to submit work.

Documentation confirms that simulation for clinical skills is embedded throughout the programme. For the 'physical assessment skills with a focus on long term conditions' module, students use simulation equipment in interactive skills laboratory workshops to develop their physical assessment skills. Students develop a range of skills from the use of simulation, for example, the knowledge and recognition of heart sounds and the depth needed for palpation. The programme team tell us of simulation programmes used which allows them to monitor and check that students are hearing respiratory and cardiovascular sounds correctly. Students tell us the clinical skills sessions are really useful. Simulation is also used to support student learning around ethics and risk through a mock courtroom environment and coroner's court activities.

The SHLS are embracing opportunities to incorporate artificial intelligence (AI) and large language models into written assessments, and have produced guidance to students and academics on the use of AI. The programme and senior leadership team we meet tell us about maximising evolving technologies and embracing digital technological enhancement to aid student success and support learning.



**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 is delivered in England in English.

- 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: 17 April 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. Documentation and meetings with senior university leaders, PLPs/EPs and the programme team at the approval visit confirm applicants may be sponsored by the PLP/EP, have individual funding plans in place or undertake an apprenticeship. Placement areas are assessed as appropriate and meeting all governance requirements. Educational audits are recorded in the ARC database and reviewed in partnership with the placement environment representative every three years. ARC is the name of the system and not an abbreviation or acronym. Practice placement facilitators (PPFs) are also part of the audit process. Processes are detailed in the practice learning team handbook.

Co-signed commitment statements confirm governance. PLPs/EPs commit to providing appropriate assessment and supervision for the duration of the programme. This commitment confirms that students have access to learning opportunities that enable them to develop, progress and achieve the SPCNSPQ in practice. PLPs/EPs confirm they'll provide a suitable placement, DBS checks and OH provision and practice assessors and practice supervisors, including those able to support the V300.

Documentation confirms that self-funding applicants source their own placement through an honorary contract with a local employer to enable them to practise with insurance. The programme team confirm that TU undertakes OH and DBS for self-funding applicants. Documentation confirms that all employers providing DN services are within the NHS, and all existing governance arrangements for practice learning are followed in line with directly funded full-time or apprentices. The programme team confirm they'll review practice learning audits or undertake a new one if the student is in a new setting.

- 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. The practice learning team handbook and the PAD clearly set out responsibilities under the SSSA for students, practice supervisors, practice assessors, the nominated person and the academic assessor.

The practice assessor must be an experienced community SPQ registered nurse. The practice assessor must meet the NMC criteria to be a practice assessor for prescribing or be a DPP who's received training to be a practice assessor. If the

practice assessor doesn't hold a suitable prescribing qualification an additional DPP is assigned to the student. The practice assessor or DPP must ensure the student has appropriate prescribing experiences.

Practice supervisors are supported in their role by the PPFs. Programme information, including a copy of the PAD, an audio recording explaining the new PAD and a context document as well as a frequently asked questions document are shared through the practice learning support site. The programme team deliver workshops to support practice supervisors and practice assessors. The new PAD is shared with practice assessors, practice supervisors and PPFs, and arrangements made for five half day training sessions to familiarise with the new programme and PAD. During the students' first week practice assessors meet their students in TU, which allows a recap on the PAD and the structure of the new programme. Initial tripartite meetings are held face to face in placement, which is a further opportunity to clarify queries and build confidence in the PAD. Practice supervisors and practice assessors we meet confirm that arrangements are in place by TU to provide training in the use of the new ADNE PAD shortly before the new cohort start in September 2024.

The PAD states students are allocated an academic assessor for the duration of the programme. They'll be a registered nurse with community SPQ with the appropriate equivalent experience in the student's field of practice. The academic assessors are programme team members all with the V300 qualification and in the field of DN.

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. Students are supported by a practice learning team which consists of a practice assessor, academic assessor, practice supervisors, skills facilitators and a nominated person for each placement area, ward, department or community. Apprentice DNs, in addition, are further supported by apprentice quality coaches and the workplace manager.

Documentation and the approval visit confirm that student learning is individualised, with practice learning opportunities tailored to meet the individual student's needs taking into account their prior knowledge and expertise. The personal tutor supports students to plan their development throughout the programme through a tailored learning plan for their practice proficiency.

The initial face to face tripartite meeting in practice between the student, practice assessor and academic assessor identifies the student's individual experience. It identifies how learning is facilitated by the practice assessor and practice supervisors, and discusses the expected evidence needed to support achievement of the SPCNSPQ. During these meetings practice assessors, academic assessors and quality coaches confirm students are receiving appropriate learning opportunities.

The assessment of practice is undertaken by a practice assessor who assesses achievement of SPCNSPQ based on evidence contained within the PAD. Progression is monitored through the PAD with the practice assessor and the academic assessor jointly verifying the student's practice and academic achievement. If the practice assessor for a student doesn't hold the appropriate V300 qualification the DPP links into progression discussions.

Students we meet tell us they're supported to access additional learning opportunities through shadowing or alternative placements, such as with the frailty team. A student tells us that through their inclusion in multidisciplinary team meetings at the GP practice they regularly meet with social prescribers.

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

MET  NOT MET  N/A

A community nursing SPQ in health and social care route isn'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. The practice learning team handbook sets out clearly that practice supervisors and practice assessors must take account of students' individual learning needs and personal circumstances and make reasonable adjustments, where necessary. The DN PAD documents that students confirm they've had the opportunity to discuss reasonable adjustments with the employing organisation or placement provider. The programme team confirm support is in place for students if reasonable adjustments are needed, and that students are encouraged to share any individual support plan with practice. Students tell us that reasonable adjustments are made in practice with involvement from OH which results in an individualised support plan. Individualised support may include an information technology (IT) screen, voice recognition technology provision, use of overlays or additional time for assessments. Practice assessors and practice supervisors tell us they work closely with the academic team to ensure students are supported. They tell us they recognise that if a student is stressed academically this will impact upon their practice learning. They give an example of a neurodivergent student, whose needs were identified while on the programme, being able, through the support and adjustments made, to progress and successfully complete the programme.

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. The practice learning team handbook confirms that students are expected to work with their practice assessor, practice supervisors and skills

facilitators to ensure that they've the appropriate learning opportunities that they need to achieve their learning outcomes. The PAD enables students to work in partnership with their practice assessor and practice supervisors to structure their learning, reflecting their individual learning needs. PLPs/EPs confirm that students have sufficient protected learning time to achieve the SPCNSPQ through the commitment statement. PLPs, EPs and the student are encouraged to contact the programme team and the PPF if there are any concerns about protected learning time. All students, apprentices and practice staff we meet confirm that protected learning time is in place. In addition, all students and apprentices we meet confirm that they know who to contact and how to raise concerns and would feel confident to do so.

Documentation and the programme team confirm that theoretical and practice learning increases in complexity as the programme progresses.

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: 17 April 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. The PgDip SPQ DN award is achieved on successful completion of all programme modules and 120 credits achieved at level seven. Documentation confirms roles and responsibilities, including in the raising and escalating of concerns. Documentation and meetings at the approval visit confirm students are supervised and assessed in practice by SPQ DNs who are prepared for the role. Initial training and updates for practice supervisors and practice assessors are in place and developed collaboratively by PLPs/EPs and TU. There's a partnership approach by the programme team and PLPs/EPs in theory and practice supervision including tripartite meetings between practice assessors, academic assessors and students and regular practice learning team meetings.

Students' individual needs, proficiency and confidence are supported. Students tell us of induction processes to the programme and placement. TU's student life building provides information and resources supporting students in all aspects of their life at TU, including their mental and physical health and wellbeing, financial advice and learning needs support. A personal tutoring system is in place. Students tell us of outstanding support by the programme team and the PLPs/EPs.

Critical self-reflection is promoted through the PAD. Students tell us their reflections are linked to assignments, agreed with their practice supervisor and recorded in the PAD.

Curricula vitae of the programme team demonstrate that they're current in their registered field of practice and hold additional education qualifications. The programme team tell us they meet regularly for training as academic assessors and support each other. Senior managers confirm their commitment and support for the programme and local partners, telling us it's well established and recognises the importance of growing the local workforce. They tell us they've recruited additional staff across the school, including those with V300 who can enhance the programme delivery. Senior EPs and PLPs confirm their commitment to preparing their practice assessors and practice supervisors, including allocation of time for attendance for training and updates. They tell us they're very confident in their capacity to support V300, with some EPs telling us they're adapting to meet the needs of the students with many of their existing DN staff also accessing the V300 qualification.

- 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. TU works closely with each PLP's/EP's practice learning team and checks practice assessor qualifications and training. Practice assessor training documentation is developed by TU and PLPs/EPs. Those with existing supervision experience have to undertake a three-hour mandatory update. Those new to the role must be identified by their manager as appropriate, can demonstrate they meet NMC criteria and undertake a full one-day workshop or online learning equivalent. Masterclasses are delivered for practice supervisors and practice assessors and are very positively reviewed. All training resources are hosted on TU's practice learning support site. TU confirm equity in assessment of the MOSLER through the use of the DPP as clinical assessor. The practice learning support site hosts a talking head to support the DPP with clear guidance provided about the assessment.

- 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 met. Documentation and the approval visit confirm that EPs and PLPs have responsibility for training practice assessors and practice supervisors, with



further development undertaken by the programme team. Practice assessors and practice supervisors are invited to TU for update training, masterclasses and regular practice learning meetings. Senior EPs and PLPs from geographically distant trusts tell us masterclasses are delivered in person at their site by programme leaders. All EP and PLP staff we meet confirm extensive and regular communication between themselves and TU.

Placement visits are undertaken by the academic assessor to ensure appropriate supervision of the student. The academic assessor is from the SPQ DN programme team which consists of a range of SPQ DN professionals, including those with the V300 qualification. Practice supervisors and practice assessors tell us that the academic assessors visit regularly, in addition to the scheduled tripartite meetings.

The PAD provides opportunities for feedback and progression from the practice supervisor, academic assessor and practice assessor. This guides students formatively to link theory to practice throughout the programme. PUSCs and skills facilitators also contribute to feedback. The skills facilitator role is developed with PLPs, recognising non-registrants with particular skill sets such as support workers and health care assistants who can all contribute to student learning. PUSCs and the programme team tell us of the PUSC-led development of a communication tool included in the PAD, which allows for more targeted feedback which gives the carer voice separate to the person who uses services. There's an action planning process included for students requiring additional support in achieving the SPCNSPQ.

**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. There's a process to confirm that students are assigned to an appropriate practice assessor who's an experienced registered community SPQ DN. Guidance on the practice assessor role and responsibilities, and how they're appropriately prepared, is provided in the practice learning team handbook. The role of the practice assessor is also detailed in the PAD. The PAD confirms the practice assessor is a recorded community nursing SPQ who's nominated by the PLP or EP as having been appropriately prepared for the role to meet the SSSA. All students we meet confirm they're always assigned to a suitably experienced SPQ DN. All stakeholders also confirm that the practice assessor assigned has a V300 qualification or, if not, an additional DPP is assigned who liaises with the practice assessor for the SPQ. There's several GPs who like to be involved and act in the DPP role alongside community nurse practitioners and community matrons who hold the V300 qualification. One community matron holds clinical supervision sessions each month which all SPQ students are invited to attend.

- 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 met. Documentation and meetings with the programme team confirm that in exceptional circumstances the student, practice supervisor, practice assessor and TU will need to evidence why it's necessary for the practice supervisor and practice assessor roles to be carried out by the same person. The programme leader tells us it's unlikely to happen as the student would be assigned a new practice assessor. However, they tell us how they'd evidence and record the reasons in the tripartite meeting dialogue sheet and record in the PAD.

**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

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

- There is evidence that all SCPHN proficiencies and/or community nursing SPQ proficiencies are recorded in an ongoing record of achievement which confirms SCPHN and/or community nursing SPQ proficiencies have been 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:

- their intended field of SCPHN practice: health visitor, school nurse, occupational health nurse (R4.9.1)

N/A

A SCPHN programme isn't proposed.

- SCPHN public health nurse practice (R4.9.2)

N/A

A SCPHN programme isn't proposed.

- 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  
YES  NO  N/A
- other specified field(s) of community nursing SPQ in health and social care practice (R4.9.4)  
YES  NO  N/A

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

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

YES  NO

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

YES  NO

#### Outcome

Is the standard met?

MET  NOT MET

Date: 17 April 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 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 leading to NMC annotation as a 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

**Outcome**

Is the standard met?

MET  NOT MET

Date: 17 April 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



**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 checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation:		
List additional documentation: None identified.		
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 checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated employer partners with responsibility for resources for the programme (applicable for apprenticeship routes)	<input checked="" type="checkbox"/>	<input 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: September 2023 cohort x eight students. September 2022 cohort x one student. Previous Bachelor of Science x two students. Previous Master of Science x one student.		
People who use services and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation:		
Additional comments: None identified.		

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

	<b>YES</b>	<b>NO</b>
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: Darlington Memorial Hospital, CQC inspection report, 15 September 2023 North Tees and Hartlepool NHS Foundation Trust, CQC inspection report, 16 September 2022 South Tees Hospitals NHS Foundation Trust CQC inspection report, 24 May 2023 The Ridgeway Hospital, CQC inspection report, 29 June 2022 University Hospital North Durham, CQC inspection report, 15 September 2023 York and Scarborough Teaching Hospitals NHS Foundation Trust, CQC inspection report, 30 June 2023		
If you stated no above, please provide the reason and mitigation:		
TU is an established AEI and there`s no requirement to visit resources.		
Additional comments: None identified.		

### **Mott MacDonald Group Disclaimer**

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

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### **Issue record**

#### **Final Report**

Author(s):	Sandra Stephenson Sarah Beresford	Date:	21 April 2024
Checked by:	Ian Felstead-Watts	Date:	3 May 2024
Submitted by:	Amy Young	Date:	7 June 2024
Approved by:	Leeann Greer	Date:	7 June 2024