



Programme approval report

Section one

| Programme provider name: | University of Wolverhampton |
|--------------------------|-------------------------------------------------------------------------------------------------|
| Programmes reviewed: | Specialist community public health nursing: |
| | Health visiting 🖂 |
| | Health visiting with integrated independent and supplementary prescribing (V300) |
| | School nurse 🖂 |
| | School nurse with integrated independent and supplementary prescribing (V300) |
| | Occupational health nurse |
| | Occupational health nurse with integrated independent and supplementary prescribing (V300) |
| | Public health nurse |
| | Public health nurse with integrated independent and supplementary prescribing (V300) |
| | Specialist community public health nursing (NMC 2022) apprenticeship: |
| | Health visiting apprenticeship |
| | Health visiting with integrated independent and supplementary prescribing (V300) apprenticeship |
| | School nurse apprenticeship |





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





| SCPHN school nurse with integrated independent and supplementary prescribing (V300) | England, Wales, Northern Ireland Level 7 SCQF Level 11 |
|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| SCPHN occupational health nurse | England, Wales, Northern Ireland Level 7 SCQF Level 11 |
| SCPHN occupational health nurse with integrated independent and supplementary prescribing (V300) | England, Wales, Northern Ireland Level 7 SCQF Level 11 |
| SCPHN public health nurse | England, Wales, Northern Ireland Level 7 SCQF Level 11 |
| SCPHN public health nurse with integrated independent and supplementary prescribing (V300) | England, Wales, Northern Ireland Level 7 SCQF Level 11 |
| SCPHN health visiting apprenticeship | England, Wales, Northern Ireland Level 7 SCQF Level 11 |
| SCPHN health visiting with integrated independent and supplementary prescribing (V300) apprenticeship | England, Wales, Northern Ireland Level 7 SCQF Level 11 |
| SCPHN school nurse apprenticeship | England, Wales, Northern Ireland Level 7 SCQF |





| | Level 11 |
|----------------------------------------------------------------------------------------------------|-------------------------------------------|
| SCPHN school nurse with integrated independent and supplementary prescribing (V300) apprenticeship | England, Wales, Northern Ireland Level 7 |
| processing (1000) appromises inp | SCQF Level 11 |
| SCPHN occupational health nurse apprenticeship | England, Wales, Northern Ireland Level 7 |
| | SCQF Level 11 |
| SCPHN occupational health nurse with integrated independent and supplementary prescribing (V300) | England, Wales, Northern Ireland Level 7 |
| apprenticeship | SCQF Level 11 |
| SCPHN public health nurse apprenticeship | England, Wales, Northern Ireland Level 7 |
| | SCQF Level 11 |
| SCPHN public health nurse with integrated independent and supplementary prescribing (V300) | England, Wales, Northern Ireland Level 7 |
| apprenticeship | SCQF Level 11 |
| Date of approval visit: | 15 May 2024 |
| Programme start date: | |
| SCPHN health visiting | 9 September 2024 |
| SCPHN health visiting with integrated | |
| independent and supplementary prescribing (V300) | |
| SCPHN school nurse | 9 September 2024 |
| SCPHN school nurse with integrated | |
| independent and supplementary | |
| prescribing (V300) | |
| SCPHN occupational health nurse | |





| SCPHN occupational health nurse with | |
|---------------------------------------|-------------------------------|
| integrated independent and | |
| supplementary prescribing (V300) | |
| SCPHN public health nurse | |
| SCPHN public health nurse with | |
| integrated independent and | |
| supplementary prescribing (V300) | |
| SCPHN health visiting apprenticeship | |
| SCPHN health visiting with integrated | |
| independent and supplementary | |
| prescribing (V300) apprenticeship | |
| SCPHN school nurse apprenticeship | |
| SCPHN school nurse with integrated | |
| independent and supplementary | |
| prescribing (V300) apprenticeship | |
| SCPHN occupational health nurse | |
| apprenticeship | |
| SCPHN occupational health nurse with | |
| integrated independent and | |
| supplementary prescribing (V300) | |
| apprenticeship | |
| SCPHN public health nurse | |
| apprenticeship | |
| SCPHN public health nurse with | |
| integrated independent and | |
| supplementary prescribing (V300) | |
| apprenticeship | |
| QA visitor(s): | Registrant Visitor: Zoe Clark |
| | Lay Visitor: Jane Suppiah |
| | |





Section two

Summary of review and findings

The University of Wolverhampton (UOW) is a Nursing and Midwifery Council (NMC) approved education institution (AEI). The UOW faculty of education, health and wellbeing (the faculty) is seeking approval for a specialist community public health nurse (SCPHN) programme with health visiting (HV) and school nursing (SN) fields to be delivered at the City Campus. The proposed programme is a postgraduate diploma (PgDip), offered for full-time study at academic level seven. Successful completion provides eligibility to apply for registration as a SCPHN HV or SN.

The SCPHN HV and SN fields are requested by practice learning partners (PLPs) to support the local development of the SCPHN workforce. The teaching team include current SCPHN HV and SN registrants, as well as staff who've relevant experience in health promotion and community practice from a range of backgrounds including general practice nursing and district nursing. The programme leader is a SCPHN registrant SN.

The programme has an overall length of 52 weeks. The programme has a balance of theory and practice. The programme is mapped to the Standards of proficiency for SCPHNs (SPSCPHN) (NMC, 2022) for HV and SN, with modules delivered in a blended way. Modules are a mix of shared learning across HV, SN and specialist practice qualification (SPQ) students as well as field specific modules. Simulated learning is integrated into the programme and is delivered in new state-of-the-art facilities which include innovative teaching rooms, a mock house and other settings. The UOW have an inter-professional simulation strategy which aligns with the development of the new facilities for delivering simulated practice. There's a range of assessments included across the curriculum.

The independent and supplementary prescribing (V300) award isn't part of the SCPHN programme, however once the student has successfully completed the SCPHN award they can apply for the V300 as continuing professional development. Senior PLP representatives confirm this at the visit.

The UOW adopt the HV and SN specific pan-London practice assessment documents (PADs). The PADs are contextualised to the UOW programme. The UOW assess students' suitability for award based on successful completion of practice relevant to the field and the ongoing record of achievement confirms the SPSCPHN are met. There's a balance of theoretical and practice learning across the programme, culminating in a period of 10 weeks of practice learning in the field specific area. Each student is allocated a practice assessor, practice supervisor and academic assessor/personal tutor. Placements are located with a wide range of PLPs. There are contractual arrangements in place to assure safe and quality





student learning in line with regulatory standards. Practice and programme documentation stipulates the requirement to ensure protected learning time.

The UOW have an academic resource plan agreed to support current student commissions. There's approved academic resource and governance processes in place to deliver the programme. The UOW are in a recruitment cycle to replace one senior lecturer who'll work on the SCPHN programme. Suitable quality assurance processes are also in place to ensure the continuous improvement of both theory and practice learning. Practice placement evaluation is conducted at a tripartite meeting as well as through the placement areas; this is then discussed at practice meetings held four times a year to ensure placements remain high quality. The UOW also has appropriate policies in place for areas such as exception reporting and fitness to practise.

Entry to the PgDip is open to current NMC registered first level nurses or midwives who demonstrate the capability to study at level seven. Applicants require an honours degree with ideally two years post-registration experience. There's a process for applicants without an honours degree to demonstrate equivalence of level six study prior to entry, or for a student with a diploma of higher education or an appropriate science-related degree to apply. There are application routes for those who've secured a sponsored or commissioned place with an NHS or non-NHS employer. Self-employed or self-funding registrants can apply for the programme if there's an identified PLP to provide an appropriate practice placement including a SCPHN practice assessor and practice supervisor. Admissions are overseen by the programme leader and applicants are jointly interviewed by providers of HV or SN services and the UOW. People who use services and carers (PUSCs) are involved in the interview process where appropriate.

Data relating to progression, retention and employability during the programme is monitored through award programme management meetings held at the end of each semester. The strategy for equality, diversity and inclusion (EDI) is operationalised at programme level through faculty meetings where data and metrics are evaluated. This leads to the implementation of action plans for programmes that aren't meeting the AEI's key performance indicators.

Governance structures around practice learning demonstrates how the UOW work collaboratively with PLPs to ensure a safe and effective learning environment for students in practice. Evidence includes PLP agreements, audits and evaluations as well as robust reporting mechanisms for exceptional reporting.

The approval visit is undertaken by remote means.

The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) isn't met at programme level as a condition applies.





The Standards for student supervision and assessment (SSSA) (NMC 2018, updated 2023) are met at programme level.

The programme is recommended for approval subject to one joint NMC and university condition.

Updated 17 June 2024:

The UOW provide evidence to meet the condition.

The programme is recommended to the NMC for approval.

| Recommended outcome of the approval panel | |
|-------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Recommended outcome to the NMC: | Programme is recommended to the NMC for approval |
| | Programme is recommended for approval subject to specific conditions being met |
| | Recommended to refuse approval of the programme |
| | Effective partnership working: collaboration, culture, communication and resources: |
| Conditions: | Condition one: Provide an implementation plan detailing how SCPHN service PUSCs are sustainably recruited, prepared and supported to engage with ongoing programme design, recruitment and selection, delivery, assessment and evaluation processes. (SFNME R1.12, R2.7, R5.14) (NMC and university condition) |
| | Selection, admission and progression: |
| | None identified. |
| | Practice learning: |
| | None identified. |
| | Assessment, fitness for practice and award: |





| | None identified. |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Education governance: management and quality assurance: |
| | None identified. |
| Date condition(s) to be met: | 15 June 2024 |
| Recommendations to enhance the programme delivery: | None identified. |
| Focused areas for future monitoring: | Implementation of the SSSA. |
| _ | |
| Programme is recomme | ended for approval subject to specific conditions being met |
| Commentary post review of evidence against conditions: | |
| Commentary post review | |
| The UOW provide an impler PUSCs are sustainably recr | of evidence against conditions: mentation plan that clearly details how SCPHN service uited, prepared and supported to engage with ongoing nent and selection, delivery, assessment and |
| The UOW provide an impler PUSCs are sustainably recr programme design, recruitm | of evidence against conditions: mentation plan that clearly details how SCPHN service uited, prepared and supported to engage with ongoing nent and selection, delivery, assessment and |
| The UOW provide an impler PUSCs are sustainably recr programme design, recruitm evaluation processes. Cond | mentation plan that clearly details how SCPHN service uited, prepared and supported to engage with ongoing nent and selection, delivery, assessment and ition one is met. Observations have been made by the education |
| The UOW provide an impler PUSCs are sustainably recr programme design, recruitm evaluation processes. Cond AEI Observations Summary of observations made, if | mentation plan that clearly details how SCPHN service uited, prepared and supported to engage with ongoing nent and selection, delivery, assessment and ition one is met. Observations have been made by the education institution YES NO |
| The UOW provide an impler PUSCs are sustainably recr programme design, recruitm evaluation processes. Cond AEI Observations Summary of observations made, if applicable Final recommendation | mentation plan that clearly details how SCPHN service uited, prepared and supported to engage with ongoing nent and selection, delivery, assessment and ition one is met. Observations have been made by the education institution YES NO |

Section three

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





NMC Programme standards

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

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

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

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

QA Handbook (NMC, 2022)

Partnerships

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

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

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

Standard 1: The learning culture:

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

Standard 2: Educational governance and quality:

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





Standard 3: Student empowerment:

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

Standard 4: Educators and assessors:

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

Standard 5: Curricula and assessment:

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

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

Standard 1: Organisation of practice learning:

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

Standard 2: Expectations of practice supervisors:

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





Standard 3: Practice supervisors: role and responsibilities:

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

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

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

Standard 7: Practice assessors: responsibilities:

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

Standard 9: Academic assessors: responsibilities:

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

Findings against the standard and requirements

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

Documentary evidence supports that the UOW has an effective partnership with PLPs and a commitment to enhancing the partnership with PUSCs.

At the visit it's evident that stakeholders are actively involved in the development of the programme. The curriculum is clearly co-designed over the last year and a half following the publication of the new Standards for post-registration programmes (SPRP) (NMC 2022, updated 2023) and SPSCPHN. The new standards are a fixed agenda item on the practice assessor/practice supervisor meetings held four times a year. PLPs and members of the programme team confirm that discussions took place at practice assessor/practice supervisor scheduled educational forums in preparation for more focused meetings as PLPs became more familiar with the changes required. The documentary evidence captures recent approval discussions with PLPs from across the region. The programme team tell us how they gathered PLPs, students and PUSCs to review the new programme. PUSCs explain how invaluable this was and say the inclusive approach allowed them to bring their experience to the discussion and be heard. Students say they're consulted on the programme and review programme documentation. They discuss





feeling involved with the process and the benefits of collaborative working of this nature.

The programme team and PUSCs currently involved in the programme are open and honest about the challenges experienced in recruiting PUSCs with lived experience of 0-19 services. Students tell us that PUSC involvement in academic learning is missing. Challenges in recruitment to the UOW 'service users and carers contributing to educating students for services' (SUCCESS) group are attributed to the COVID-19 pandemic. There's clear evidence that PUSCs' input to the development of the current programme and the PAD makes provision for students to gather feedback from PUSCs in practice learning environments. However, there's no evidence to assure us of how PUSCs are involved in delivery, assessment and evaluation of the proposed SCPHN programme. The evidence of PUSC involvement in recruitment and selection processes is inconsistent across PLPs. Further evidence is needed to show how the UOW will involve SCPHN service PUSCs in recruitment, delivery, assessment and evaluation of the programme. (Condition one)

Stakeholders including practice assessors, practice supervisors, students and PLPs identify that all students in practice are allocated a field specific practice assessor and practice supervisor. The UOW have contractual agreements in place with PLPs. Documentary evidence and discussions with PLPs confirm this. At the visit senior PLP representatives tell us that students have protected time during placement, this is also confirmed by practice assessors, practice supervisors and students. PLPs confirm they work in partnership with the UOW and other AEIs with NMC approved SCPHN programmes to ensure that there are sufficient practice assessors and practice supervisors to support the anticipated student numbers.

Documentary evidence, students and new SCPHN graduates at the approval visit confirm that they've been able to contribute their views to the development of the proposed programme. They give us examples of how their evaluation is informing aspects of the programme development. Module specifications and the programme team tell us that there's shared learning between HV and SN fields to ensure a holistic understanding of working with children and young people and their families and carers from the context of their own field of practice. Opportunities to explore multi-disciplinary working are provided within the module content including through simulated learning activity. There's time allocated in practice learning to explore inter-professional working with alternative public health services. Students confirm they're provided with opportunities to explore working with other professionals and agencies in the wider context of public health. The UOW tells us that listening to the student voice is central to the programme. Students confirm that all modules and practice learning are evaluated. The UOW hold a regular forum for students to meet with the programme team to review and feedback on experience; programme representatives attend meetings to feedback any issues raised by students. Students confirm the UOW is responsive to their feedback and they feel listened to. They give an example of the removal of the prescribing module to leave room in the curriculum to study contemporary issues





in HV and SN. Students tell us that they're well supported by practice assessors and practice supervisors. There's documentary evidence that students' evaluations are raised and discussed with practice assessors, practice supervisors and academic assessors.

| 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 |
| |

PUSCs are involved in developing the programme but there's no evidence of SCPHN service PUSC involvement in delivery, assessment and evaluation of the programme. Consistent involvement of PUSCs in student recruitment and selection isn't assured.

Condition one: Provide an implementation plan detailing how SCPHN service PUSCs are sustainably recruited, prepared and supported to engage with ongoing programme design, recruitment and selection, delivery, assessment and evaluation processes. (SFNME R1.12, R2.7, R5.14) (NMC and university condition)

Assurance is provided that the AEI works in partnership with their practice learning partners, people who use services, students and all other stakeholders as identified in Gateway 2: <u>Standards for student supervision and assessment</u>

MET ⊠ NOT MET □

Post Event Review

Identify how the condition is met:

Condition one: The implementation plan sets out the changing landscape within the UOW and their intention to strengthen the use of SCPHN PUSCs across the programme. The implementation plan gives pre-eminence to recruitment, preparation, engagement, delivery, assessment and feedback. There's evidence of co-production of SCPHN education with PUSCs to enhance learner centred active participation in blended and face-to-face learning, which is associated with benefits such as increased empathy, honed communication skills, confidence in the rights of PUSCs and an enhanced understanding of person-centred care. This collaboration threads throughout the SCPHN educational journey from recruitment to completion. The UOW infrastructure strengthens the provision and integrates PUSCs in a more measured way. The implementation plan includes the need to evaluate PUSC contribution/involvement. The implementation plan discusses the new SUCCESS group; once fully established, video presentations are to be developed, a bank of questions to use during the interview process created and there's an enhanced engagement in SCPHN student presentations. Mindful that resources are limited, the UOW are reaching out to access PUSC groups to develop new and innovative ways to develop, improve and sustain PUSC involvement in SCPHN education.





| Condition one is met. | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|---------------|
| Evidence: SCPHN service PUSCs implementation plan, undate | ed | |
| Date condition(s) met: 15 June 2024 | | |
| Revised outcome after condition(s) met: | MET 🖂 | NOT MET |
| | | |
| Independent/Supplementary Prescriber (V300) | | |
| Please indicate whether the V300 is a compulsory of Specialist community public health nursing program Optional | me. | |
| The V300 isn't included as part of the SCPHN progr | amme. | |
| Please indicate whether the V300 is to be approved <u>Standards for prescribing programmes</u> and <u>Standards and midwife prescriber</u> (adoption of the Royal Pharm competency framework for all prescribers) (NMC, 20 | <u>ds of proficier</u> naceutical So 021) | ncy for nurse |
| OR | | |
| If V300 is approved against <u>Standards for prescribing</u> <u>Standards of proficiency for nurse and midwife prescriping</u> approved: | | |
| N/A | | |

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.

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

Proposed transfer of current students to the programme under review

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

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





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

| <u>student supervision and assessment</u> (NMC 2018, updated 2023). |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Findings against the standard and requirements |
| Evidence provides assurance that the following QA approval criteria are met: |
| 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) YES ⋈ NO N/A |
| Evidence of processes to ensure that the applicant is a NMC registered nurse (level 1) with relevant professional registration, capable of safe and effective practice at the level of proficiency appropriate to the NMC approved Community Nursing Specialist Practice Qualification (SPQ) programme before being considered as eligible to apply for entry (R1.1.2) N/A ⋈ |
| An SPQ programme isn't proposed. |
| 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) YES NO N/A |
| 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) |
| An SPQ programme isn't proposed. |





Provide an <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance 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. Documentary evidence and the visit confirm that there are governance structures in place to support practice learning. There's documentary evidence to demonstrate how the UOW assess for placement capacity through local education audits. Audits ensure the suitability of the learning environment using the pan-London learning environment audit, focused on HV or SN. These

are shared with other AEIs using the area. Audits include information on maximum

student capacity in the placement and confirm that SCPHN practice supervisors and practice assessors are prepared, supported and have experience for the student's field of practice. Audits include the range of experiences available for HV and SN students. External measurements of care quality are monitored as part of the audit cycle. Documentary evidence demonstrates that collated feedback from student placement evaluations is presented to practice assessors and practice supervisors as part of ongoing liaison and development.

Protected learning time is evident in the documentary evidence. The visit also confirms that protected learning time is a priority for students and confirmed by PLPs, practice assessors and practice supervisors.

At the visit, the UOW confirm there's strategic and operational committees as well as organisational leads with responsibility for the quality of practice learning. The UOW tell us of high levels of student satisfaction and their commitment to monitoring and responding to all aspects of student feedback. There are processes to manage risks to the safety and quality of SCPHN education including policies for escalation of concern. There's school level practice learning guidance provided to all healthcare students which includes professional responsibilities and raising concerns and complaints. Students, practice assessors and practice supervisors confirm that these are documented and clear.

There's a contractual process in place with PLPs which confirms that all regulatory requirements are upheld by placement providers. Audits and practice evaluations are used to ensure a continued positive student experience.

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

 Processes are in place to consider recognition of prior learning that is capable of being mapped to programme learning outcomes and standards





| | of proficiency for the applicant's intended field of SCPHN practice or SCPHN public health nurse practice (R1.6.1) |
|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | YES NO N/A |
| • | 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) |
| An SP | PQ programme isn't proposed. |
| • | 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 <i>Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers for applicants</i> (R1.7) YES NO N/A |
| The V | 300 isn't included as part of the SCPHN programme. |
| • | 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) |
| The V | 300 isn't included as part of the SCPHN programme. |
| Propo | osed transfer of current students to the programme under review |
| From | your documentary analysis and your meeting with students, provide |
| an <u>eva</u> educa comm | aluative summary to confirm how the Standards for post-registration ation programmes and Standards of proficiency for specialist nunity public health nurses (NMC, 2022) will be met through the transfer sting students onto the proposed programme. |





Proposed transfer of current students to the <u>Standards for student</u> <u>supervision and assessment (SSSA)</u> (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. There's no proposed transfer of current students. The SSSA are already in place. 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? $MET \boxtimes$ NOT MET **Date:** 15 May 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

Standard 2: Curriculum

N/A

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

| Findings against the standard and requirements |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Evidence provides assurance that the following QA approval criteria are met: |
| R2.1 There is evidence that the programme complies with the NMC <i>Standards</i> framework for nursing and midwifery education including the confirmation of appropriately qualified and experienced people for programme delivery for: |
| all selected fields of SCPHN practice and/or SCPHN PHN practice (R2.1.1) YES ☑ NO ☑ N/A ☑ |
| all selected fields of community nursing SPQ practice and/or in other specified fields of community nursing SPQ in health and social care practice (R2.1.2) |
| N/A 🖂 |
| An SPQ programme isn't proposed. |
| There is evidence that the programme complies with the NMC Standards for a trade of a programme and (PD 9) |
| 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 \(\subseteq \) NO \(\subseteq \) N/A \(\subseteq \) |
| The V300 isn't included as part of the SCPHN programme. |

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





| • | students to enter the SCPHN register in a specif health visitor, school nurse, occupational health | | 4.1) | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|---------------------------------------|--------------------------|-------------|
| students to enter the SCPHN register for the public heal qualification (R2.4.2) | | olic health | nurse | | |
| | quaeau.o (. :== ::=) | YES 🗌 | NO 🗌 | N/A | \boxtimes |
| A SCI | A SCPHN public health nurse route isn't proposed. | | | | |
| • | students to annotate their registration in a specific nursing SPQ practice: community children's nursing disabilities nursing, community mental health nursing practice nursing (R2.4.3) | sing, comn | nunity lea | rning | |
| An SF | PQ programme isn't proposed. | | | | |
| • | students to annotate their registration in communication and social care (R2.4.4) | nity nursinç | g SPQ pra | actice | |
| An SF | PQ programme 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 intended field(s) of SCPHN practice: health visiting, school nursing occupational health nursing (R2.5.1) | | | ne | | |
| | occupational fleatiff fluishing (NZ.3.1) | YES 🖂 | NO 🗌 | N/A | |
| • | core standards of proficiency for SCPHN that are | e tailored t | o public h | ealth | |
| | nursing (R2.5.2) | YES 🗌 | NO 🗌 | N/A | |
| A SCPHN public health nurse route isn't proposed. | | | | | |
| • | standards of proficiency for community nursing sintended field and related context of community may be within community children's nursing, connursing, community mental health nursing, distrinursing or in specified field(s) for community nursocial care practice (R2.5.3) | nursing pra nmunity lea ct nursing, | actice. Th arning dis general p | ese abiliti oracti | ies ce |
| | | | | | |





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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| An SPQ programme isn't | proposed. | |
| evidence AND discussion | ummary from your documentar on at the approval visit to demo proval criteria below is met or | onstrate if assurance is |
| R2.6 There is evidence the necessary to meet the | at sets out the general and profene: | essional content |
| • | eific standards of proficiency for elealth visiting, school nursing, occ | |
| (112.0.1) | MET 🖂 | NOT MET \ N/A \ |
| professional content nece HV or SN. The programm these are shared with SPO with the remaining three r | ary evidence and the visit confirm essary to meet the core and field are e comprises seven level seven c Q students, two modules are sha modules being field specific. All materials and two 10 credit needit modules and two 10 credit needit materials. | specific SPSCPHN for core modules; two of tred with SN and HV, nodules are delivered at |
| children and young people assessment and safeguar There's inclusion of public of health and inequalities different stages. Documer learning methods are use as development of resear SCPHN practice. Documer and the PADs to the SPS SPSCPHN are met for HNSN where core and field is theoretical programme and | corporate universal, targeted and e aged 0-19. There's emphasis or ding of children and young peop chealth and health promotion, incas well as field specific content of tary evidence supports that a variety evidence supports that a | on the holistic le and their families. cluding the determinants on the developing child at ariety of teaching and ic literacy skills as well coration and advancing le learning outcomes and field specific earate PADs for HV and ated. All elements of the completed to |
| core standards of p (R2.6.2) | oroficiency for SCPHN public hea | · |
| A SCPHN public health no | urse route isn't proposed. | |
| the intended field o | iency for the community nursing soft community nursing practice. The real real real real real real real rea | nese may be within |





community mental health nursing, district nursing, general practice nursing, or in other specified field(s) of community nursing in health and social care (R2.6.3)

N/A 🖂

An SPQ programme isn't proposed.

- R2.7 There is evidence that sets out the content necessary to meet the programme outcomes for each intended field of:
 - SCPHN practice: health visiting, school nursing, occupational health nursing and/or SCPHN public health nursing (R2.7.1)

| MET ⋈ NOT MET |
|---------------|
|---------------|

R2.7.1 is met. Programme and module outcomes are core for both fields but are met in the context of HV or SN practice. To support this HV and SN theoretical content is differentiated in three modules where field specific knowledge is covered including 'strengthening community and population health', 'advancing specialist practice' and 'the developing child' (HV)/'the developing child and young person' (SN).

Modules delivered together with both HV and SN include 'safeguarding children and young people', 'leadership in SCPHN', 'evidence-based practice' and 'promoting the health and wellbeing of populations'. The content for these modules aligns with the programme outcomes for each field of practice. An example timetable demonstrates how core and field specific learning is delivered. Shared learning is contextualised in the classroom with breakout sessions which then apply the shared learning to the field of practice. The assessments require students to link to their own specific field of SCPHN practice.

Documentary evidence demonstrates that module learning outcomes are mapped to the SPSCPHN and to the programme outcomes. Mapping demonstrates that the module content and the content of the HV and SN PADs enable students to meet the programme outcomes within their HV or SN fields.

 community nursing SPQ practice: community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing and/or in other specified field(s) of community nursing in health and social care (R2.7.2)

N/A 🖂

An SPQ programme isn't proposed.

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





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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------|
| | MET 🖂 | NOT MET |
| R2.8 is met. Documentation evidences a balance with and practice learning. Module descriptors indicate a valearning strategies including lectures, seminars, works learning and blended learning where appropriate. | ariety of teach | ing and |
| There are seven modules during the programme split of assessments are used including case studies, poste safeguarding scenarios and reports. | | • |
| Simulated learning is contextualised to the localities students are working in for placements, and the UOW utilises technology enhanced simulation. Simulation is multidisciplinary within a new simulation suite including a community room, which is used to run community focused simulation which result in a simulated multidisciplinary team meeting. | | |
| Evidence to ensure that technology-enhanced a opportunities are used effectively and proportion to support learning and assessment (R2.9) | | |
| R2.9 is met. Documentary evidence shows that the UOW ensures that technology and simulation opportunities are used effectively and proportionately across the curriculum to support supervision, learning and assessment. The UOW identify technologies that are used in the teaching and assessment of students. The UOW states that this includes simulations, computer-based learning modules, simulation manikins and other educational software. Simulated learning is integrated into the programme and is delivered in the new state-of-the-art facilities which include innovative teaching rooms, a mock house and other settings. Students confirm simulated learning is effective and they enjoy the technology enhanced learning. PLPs are involved in simulated learning and attend the UOW to support the delivery of this. The UOW show commitment to increasing the use of PUSCs in simulated learning. | | |

The UOW report robust plans to ensure all academic staff are trained to use these new facilities to assist students in navigating simulation experiences.

The faculty has implemented a health and care inter-professional education strategy (2023-2028). Discussion at the visit identifies how students use the simulated learning environment for a wide and diverse range of teaching which will broaden their knowledge.

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





| Evidence to ensure that programmes delivered in Walland to the Wallah language of the Wallah language. | | th any |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------|
| legislation which supports the use of the Welsh langu | | N/A 🖂 |
| The programme isn't delivered in Wales. | | |
| Evidence to ensure programmes are of suitable length to support student achievement of all proficiencies and programme outcomes for their intended SCPHN or community nursing SPQ award (R2.11.1) | | |
| | YES 🖂 | NO 🗌 |
| Evidence to ensure programmes are no less than 45 theory and practice learning for full-time programmes programmes (R2.11.2) | . • | |
| [| YES 🖂 | NO 🗌 |
| Assurance is provided that Gateway 1: Standards framework | rk for nursing a | and |
| midwifery education relevant to curricula are met | YES 🖂 | NO 🗌 |
| Assurance is provided that Gateway 2: Standards for studer | nt supervision | <u>and</u> |
| assessment relevant to curricula are met | YES 🖂 | NO 🗌 |
| Outcome | | |
| Is the standard met? MET | ⊠ NOT I | MET |
| Date: 15 May 2024 | | |
| Post event review | | |
| Identify how the condition(s) is met: | | |
| N/A | | |
| Date condition(s) met: | | |
| N/A | | |
| Revised outcome after condition(s) met: MET | NOT | МЕТ 🗌 |
| N/A | | |
| | | |
| Standard 3: Practice learning | | |
| Approved education institutions must: | | |





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

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

- R3.2 ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC *Standards for student supervision and assessment*
- R3.3 provide practice learning opportunities that allow students to develop, progress and meet all the standards of proficiency for their:
- R3.3.1 intended field of SCPHN practice: health visitor, school nurse and occupational health nurse or,
- R3.3.2 SCPHN public health nurse
- R3.3.3 intended community nursing SPQ: these may be within the fields of community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing or,
- R3.3.4 in other specified field(s) of community nursing in health and social care nursing
- R3.4 ensure that practice learning complies with the NMC Standards for student supervision and assessment
- R3.5 take account of students' individual learning needs and personal circumstances when allocating their practice learning, including making reasonable adjustments for students with disabilities, and
- R3.6 ensure learning experiences are tailored to the student's stage of learning, proficiencies and programme outcomes culminating in a period of practice learning. This is dependent on the individual learning needs of the student to demonstrate overall proficiency and achieve the programme learning outcomes for their:
- R3.6.1 intended field of SCPHN practice, SCPHN PHN practice or
- R3.6.2 their intended field of community nursing SPQ practice or community nursing SPQ in health and social care practice.

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

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

Findings against the standard and requirements

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





| • | Evidence to ensure that suitable and effective a governance for practice learning are in place to arrangements specifically tailored to those applications. | or all students, | including |
|---|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------|
| | employed and/or self-funded (R3.1) | MET 🖂 | NOT MET |
| 1 | is met. Documentary evidence and discussion w | ith senior UO | W leaders and |

R3.1 is met. Documentary evidence and discussion with senior UOW leade the programme team confirm that suitable and effective arrangements and governance for practice learning is in place for all students. The UOW have the relevant governance structure to monitor and quality assure practice learning opportunities that enable students to develop, progress and meet the SPSCPHN for SN and HV in settings that comply with the SSSA.

Documentary evidence and discussions with the programme team, PLPs and practice assessors confirm that educational audit takes place to ensure that placement areas meet the requirements of the SSSA and provide opportunities to enable the achievement of the SPSCPHN and programme outcomes.

The programme team and PLPs confirm that suitable and effective governance arrangements are in place for self-funding and self-employed students. These students must secure an appropriate and approved HV or SN placement and confirmation that the proposed 0-19 years public health practice provider can and will, support practice learning for the duration of the programme. This includes provision of an appropriately qualified practice assessor and practice supervisor. The programme team tell us that the usual application, recruitment and selection process applies to self-funding and self-employed students. PLPs confirm that honorary contracts are issued and organisational processes followed to monitor, support and ensure that students gain the experience required to achieve the SPSCPHN while in practice.

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 stud

| lent supervision and assessment (R3.2) | | |
|----------------------------------------|-------|---------|
| | MFT 🖂 | NOT MET |

R3.2 is met. Documentary evidence supports that students are allocated a SCPHN practice assessor and practice supervisor either with a SCPHN HV or SN qualification or with equivalent experience. The practice learning guide states that all students have access to a practice assessor and practice supervisor as well as an academic assessor from the UOW. PLPs, practice assessors and practice supervisors at the visit confirm and give examples of partnership working to ensure sufficient capacity of practice assessors and practice supervisors. Students confirm that practice learning is overseen by practice assessors and practice supervisors and details are recorded in their PADs. There's some inconsistency in





how students and PLPs describe the separate roles of practice assessors and practice supervisors and therefore this is an area for future monitoring. 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) $MET \boxtimes$ NOT MET N/A R3.3.1 is met. Documentary evidence confirms that practice learning opportunities provided allow students to develop, progress and meet the SPSCPHN in their field of practice. Practice assessors tell us they're proactive in creating tailored opportunities which students confirm meet their individual learning needs. As part of the PADs, students undertake an individual learning needs analysis each term to tailor practice learning opportunities that meet their needs. The programme team, practice assessors and students confirm that learning needs are identified and discussed as part of tripartite meetings, ongoing practice review and feedback. The PAD requires the ongoing achievement of the SPSCPHN to be monitored through tripartite meetings to ensure the student meets the proficiencies required to be signed off at the end of the programme. Action plans are included for development if students require additional support in their progress and achievement. SCPHN public health nurse (R3.3.2) MET | | NOT MET $N/A \times$ A SCPHN public health nurse route 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) $N/A \times$ An SPQ programme isn't proposed. • in other specified field(s) of community nursing in health and social care nursing (R3.3.4) $N/A \mid \nabla \mid$

An SPQ programme 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 learning (R3.5) MET 🖂 NOT MET R3.5 is met. Documentary evidence confirms that processes are in place to consider individual learning needs and personal circumstances in academic and practice settings. PLPs and students confirm that occupational health assessments and students' self-declarations inform reasonable adjustments in practice settings. Supportive measures for academic learning are led by the student support and wellbeing team and library. The programme team tell us that individual learning needs are evidenced in a tutor awareness sheet and allow students to progress learning without prejudice. Students tell us that support for individual learning needs is accessible, impactful and supports attainment of learning outcomes. Examples include students that have 'stepped off' the programme and been successfully supported to re-join and catch up with their student cohort. The EDI policy demonstrates the UOW's commitment to being an inclusive university. Students can use their statement from the student support and wellbeing team to receive an automatic extension on submission deadlines of seven days as per the assessment policy. 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) MET 🖂 NOT MET N/A R3.6.1 is met. The programme structure and delivery plan demonstrate that the stages of learning and proficiencies build to culminate in a 10-week practice placement at the end of the programme. Practice assessors tell us that placements are tailored to the individual students' stage of learning. Students





confirm rich and diverse practice experience opportunities and the use of short spoke placements to broaden learning. Tripartite discussions each semester provide opportunity to review progress towards achieving the SPSCPHN. Students tell us that personal tutors and module leads are accessible and tailor learning experiences to the students' stage of learning.

Practice assessors and PLPs tell us they teach on the academic part of the

| programme, and the programme team and students tell us external speakers bring the curriculum to life. There's a personal tutor scheme which supports learners with their needs; there's also discussion around module leader support to students during teaching and learning as well as before and after sessions. This support alongside the SSSA structure for practice learning assessment means the student is supported to meet the SPSCPHN needed to apply for registration at the end of the programme. | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| their intended field of community nursing SPQ practice or community nursing SPQ in health and social care practice (R3.6.2) N/A ⊠ | | |
| An SPQ programme isn't proposed. | | |
| Assurance is provided that Gateway 1: <u>Standards framework for nursing and</u> | | |
| 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: 15 May 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 <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

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

| MET | NOT MET |
|-----|---------|

R4.1 is met. Documentary evidence and the visit demonstrate that the UOW ensure student support, supervision, learning and assessment complies with the SFNME. Students and PLPs talk about the support available and include discussion around the tripartite meeting process being effective and the use of practice evaluations which are conducted by PLPs at the end of each placement. PLPs and students along with practice assessors and practice supervisors confirm the processes in place to ensure student support in accordance with the SSSA. Evaluations are collated and themes from the student voice are discussed at quarterly PLP meetings with the UOW. At these meetings good practice and any areas of concern are raised.





Documentary evidence demonstrates and discussion with senior UOW representatives confirms that the programme management committee feeds into the faculty committee to monitor overall quality and student experience.

Students are allocated a SCPHN HV or SN registered practice supervisor, practice assessor and academic assessor for the duration of the programme as relevant to their field of practice. There are processes to support individual learning needs in theory and practice, with all stakeholders agreeing this is effective. There's student Signposting to UOW resources that support student health and wellbeing, including support for those requiring reasonable adjustment.

Academic assessors, practice assessors and practice supervisors receive appropriate preceptorship and induction. PLPs confirm that practice assessors take part in preparation organised by the UOW and other AEIs in the region and then receive a preceptor year as a new practice assessor.

Documentary evidence confirms there are processes to ensure students and PLPs are involved in ongoing programme improvement and feedback, including mechanisms to provide feedback to practice assessors and practice supervisors. There are processes for escalating concerns for students and PLPs. They confirm the process of exceptional reporting to the NMC for ongoing risks. There's documentary evidence of UOW fitness to practise procedures appropriate to registrants on a SCPHN programme.

All students confirm good health and character at the beginning and end of the programme.

 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 \boxtimes NOT MET \square

R4.2 is met. Documentary evidence and the visit confirm communication and partnership work between the programme team and PLPs for the preparation, education, training, ongoing learning, support and expertise necessary for practice supervisors, practice assessors and academic assessors that support SCPHN students. Students confirm they've a practice assessor, practice supervisor and academic assessor. They know who they are and have confidence in knowing how to access support if needed.

PLPs confirm that preparation of practice assessors and practice supervisors happens through practice assessors attending a training module delivered by another AEI. PLPs meet regularly with practice assessors and practice supervisors





to provide support in the roles. The UOW hold meetings four times a year with practice assessors and practice supervisors to discuss any current issues or concerns and to ensure the quality of practice learning, related to the UOW programme.

| Documentation and discussions with PLPs and practice assessors evidence collaborative relationships, regular participation in partnership forums and clear and consistent understanding of the programme and arrangements to ensure effective practice learning environments that enable the achievement of the SPSCPHN and programme outcomes. | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | isures practice supervision, the assessment of seessment complies with the NMC <i>Standards for assessment</i> (R4.3) MET NOT MET | | |
| SCPHN practice assessors, pra appropriate to their field. The PA between practice supervisors ar opportunities with the academic is agreed between academic as | ence confirms that students are allocated to ctice supervisors and academic assessors ADs provide opportunities for regular liaison and practice assessors as well as tripartite assessor. The overall confirmation of proficiency sessors and practice assessors as part of the chievement of all theoretical and practice learning evement record. | | |
| Students, practice assessors, practice supervisors and PLPs confirm that learning in practice is protected and, despite challenges in the community, student support isn't affected. All students work alongside a practice assessor and practice supervisor(s) when in placement and have supernumerary status in accordance with NMC requirements for protected learning time. | | | |
| Evidence provides assurance | that the following QA approval criteria are met: | | |
| Processes are in place to period of preceptorship in | ensure practice supervisors have undertaken a line with the NMC principles for preceptorship as rsing SPQ qualified professionals (R4.4.1) or YES NO N/A | | |
| learning and relevant pra facilitate effective evidence | ensure practice supervisors can evidence prior ctice supervisor experience that enables them to be based learning opportunities for postommunity nursing SPQ students (R4.4.2) YES NO NA | | |





| • | 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 NA |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| • | 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 |
| evide | de an <u>evaluative summary</u> from your documentary analysis and nce AND discussion at the approval visit to demonstrate if assurance is ded 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 |
| appropries afe a name of acade supervise the visite appropries and acade supervise acade acade supervise acade acade supervise acade | s met. Documentary evidence states that students are assigned to an priate practice assessor for their field of practice. PLPs collaborate with the amme team to ensure sufficient practice assessor capacity is available for and effective practice learning. PLPs inform the academic assessors of dipractice assessors, and this is documented in the PAD together with mic assessor and practice supervisor details. Practice assessor and practice visor signatory evidence is also required within the PAD. Students confirm at sit that they're assigned to a practice assessor and practice supervisor in field of SCPHN practice. |
| • | 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 |
| place the rol assess | I is met. Documentary evidence and the visit confirm that processes are in to ensure that, in exceptional circumstances only, the same person may fulfil le of practice supervisor and practice assessor. PLPs tell us that practice sor resourcing is sufficient and that they're proactive in maintaining a ne of practice assessors. |





PLPs and the UOW confirm there has never been a time when they needed to use the same person as practice assessor and practice supervisor. If exceptional circumstances are identified, the same person fulfilling the role of practice supervisor and practice assessor is agreed on a short-term basis, for example, in the case of temporary absence or sickness of the practice supervisor. An action plan is developed and monitored to evidence the decision, ensuring that the student is supported and the exceptional circumstance is resolved within an agreed time frame.

| student is supported and the exceptional circumstance is resolved within an agreed time frame. | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------|-----------|--|
| Evid | ence provides assurance that the following G | QA approv | al criteria | are met: | |
| R4.7 | 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: | | | | |
| • | mon monada mona di deli ini pradicioni monami | visitor, sch | ool nurse, | | |
| | occupational health nurse (R4.7.1) | YES 🖂 | NO 🗌 | N/A 🗌 | |
| • | SCPHN public health nurse (R4.7.2) | YES 🗌 | NO 🗌 | N/A 🖂 | |
| A SC | CPHN public health nurse route 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 N/A | | | | |
| An SPQ programme isn't proposed. | | | | | |
| • | other specified field(s) of community nursing S (R4.7.4) | SPQ in hea | lth and so | cial care | |
| An S | SPQ programme isn't proposed. | | | | |
| There is evidence that all SCPHN proficiencies and/or community nursing SPQ proficiencies are recorded in an ongoing record of achievement which confirms SCPHN and/or community nursing SPQ proficiencies have been met (R4.8) | | | | | |
| | mot (rt4.0) | | 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, (P4.9.4) | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|----------------------------------------|--------------------|--|--|
| | occupational health nurse (R4.9.1) | YES 🖂 | NO 🗌 | N/A 🗌 | | |
| • | SCPHN public health nurse practice (R4.9.2) | YES 🗌 | NO 🗌 | N/A 🖂 | | |
| A SCI | PHN public health nurse route isn't proposed. | | | | | |
| • | their intended SPQ in the field of: community of learning disabilities nursing, community mental nursing, general practice nursing (R4.9.3) and | al health nu | • | • | | |
| An SF | PQ programme isn't proposed. | | | | | |
| • | other specified field(s) of community nursing Spractice (R4.9.4) | SPQ in hea | alth and so | cial care N/A ⊠ | | |
| An SF | PQ programme isn't proposed. | | | | | |
| ۸ | rene e in manifel ed the et Cotourer. At Otour de velo fue | | • | | | |
| Assurance is provided that Gateway 1: <u>Standards framework for nursing and</u> <u>midwifery education</u> relevant to supervision and assessment are met | | | | | | |
| | | | | <u>and</u> | | |
| | | | | NO | | |
| <u>midwi</u> Assur | relevant to supervision and assertance is provided that Gateway 2: Standards for | essment ar <u>r student s</u> | re met YES 🖂 | NO 🗌 | | |
| <u>midwi</u> Assur | <u>ifery education</u> relevant to supervision and asse | essment ar <u>r student s</u> | re met YES ⊠ upervision | NO and | | |
| <u>midwi</u> Assur | relevant to supervision and assertance is provided that Gateway 2: Standards for | essment ar <u>r student s</u> | re met YES 🖂 | NO 🗌 | | |
| <u>midwi</u> Assur | relevant to supervision and assertance is provided that Gateway 2: Standards for sament relevant to supervision and assessment | essment ar <u>r student s</u> | re met YES ⊠ upervision | NO and | | |
| Assur asses | relevant to supervision and assertance is provided that Gateway 2: Standards for sament relevant to supervision and assessment | essment ar <u>r student s</u> | re met YES ⊠ upervision YES ⊠ | NO and | | |
| Assur asses Outco | rance is provided that Gateway 2: Standards for sament relevant to supervision and assessment relevant to supervision and assessment standard met? | essment ar <u>r student s</u> t are met | re met YES ⊠ upervision YES ⊠ | NO and NO | | |
| Assurasses Outco | rance is provided that Gateway 2: Standards for sament relevant to supervision and assessment | essment ar <u>r student s</u> t are met | re met YES ⊠ upervision YES ⊠ | NO and NO | | |
| Assurasses Outco | rance is provided that Gateway 2: Standards for sament relevant to supervision and assessment relevant to supervision and assessment estandard met? 15 May 2024 | essment ar <u>r student s</u> t are met | re met YES ⊠ upervision YES ⊠ | NO and NO | | |
| Assurasses Outco | rance is provided that Gateway 2: Standards for sament relevant to supervision and assessment relevant to supervision and assessment standard met? 15 May 2024 event review | essment ar <u>r student s</u> t are met | re met YES ⊠ upervision YES ⊠ | NO and NO | | |
| Assurasses Outco Is the Date: Post Identi | rance is provided that Gateway 2: Standards for sament relevant to supervision and assessment relevant to supervision and assessment standard met? 15 May 2024 event review | essment ar <u>r student s</u> t are met | re met YES ⊠ upervision YES ⊠ | NO and NO | | |
| Assurasses Outco Is the Date: Post Identi | rance is provided that Gateway 2: Standards for sament relevant to supervision and assessment relevant to supervision and assessment estandard met? 15 May 2024 event review ify how the condition(s) is met: | essment ar <u>r student s</u> t are met | re met YES ⊠ upervision YES ⊠ | NO and NO | | |





| 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) NO [YES 🖂 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) YES 🖂 NO 🗌 N/A





| 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 t their professional registration (R5.3) | :0 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| | |
| An SPQ programme isn't proposed. | |
| 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 successfully completing the prescribing programme and if they fail to do st they will have to retake and successfully complete the programme in order to qualify as a prescriber (R5.4), and | of so |
| YES NO NO N/A | \boxtimes |
| The V300 isn't included as part of the SCPHN programme. | |
| 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 with their competence and scope of practice (R5.5) YES NO N/A | in |
| The V300 isn't included as part of the SCPHN programme. | |
| Fall Back Award If there is a fall back exit award with registration as a SCPHN all NMC standards and proficiencies are met within the award YES \(\Boxed{\text{NO}} \ \text{NO} \(\Boxed{\text{N/A}} \) | |
| There is no fall back exit award leading to registration. | |
| 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 MET NOT MET | |
| Date: 15 May 2024 | |





| Post event review | | |
|---------------------------------------------------|-----|---------|
| Identify how the condition(s) is met: | | |
| , , | | |
| N/A | | |
| | | |
| Date condition(s) met: | | |
| July continuents, mon | | |
| N/A | | |
| | | |
| Revised outcome after condition(s) met: | MET | NOT MET |
| The visca data office after defination (3) filet. | | |
| N/A | | |
| 14/7 | | |
| | | |





Section four

Sources of evidence

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

| Key documentation | YES | NO |
|-----------------------------------------------------------|-------------|----|
| Programme document, including proposal, rationale and | \boxtimes | |
| consultation | | |
| Programme specification(s) | \boxtimes | |
| Module descriptors | \boxtimes | |
| Student facing documentation including programme | \square | |
| handbook | | |
| Student university handbook | \boxtimes | |
| Practice assessment documentation | \boxtimes | |
| Ongoing record of achievement (ORA) | \boxtimes | |
| Practice learning environment handbook | \boxtimes | |
| Practice learning handbook for practice supervisors and | \boxtimes | |
| assessors specific to the programme | | |
| Academic assessor focused information specific to the | \boxtimes | |
| programme | | |
| Placement allocation / structure of programme | \boxtimes | |
| PAD linked to competence outcomes, and mapped | \boxtimes | |
| against Standards of proficiency for specialist community | | |
| public health nurses | | |
| Mapping document providing evidence of how the | \boxtimes | |
| education institution has met the Standards framework for | | |
| nursing and midwifery education (NMC 2018, updated | | |
| 2023) (Gateway 1) | | |
| Mapping document providing evidence of how the | \boxtimes | |
| Standards for student supervision and assessment (NMC | | |
| 2018, updated 2023) apply to the programme(s) | | |
| (Gateway 2) | | |
| Mapping document providing evidence of how the | \bowtie | |
| education institution has met the Standards for post- | | |
| registration education programmes (NMC 2022, updated | | |
| 2023) (Gateway 3) | | |
| Curricula vitae (CV) for relevant staff | | |
| CV of the registered SCPHN responsible for directing the | \boxtimes | |
| education programme | 5 | |
| Registrant academic staff details checked on NMC | \boxtimes | |
| website | | |
| External examiner appointments and arrangements | | |
| Written placement agreement(s) between the education | \bowtie | |
| institution and associated practice learning partners to | | |
| support the programme intentions. | | |





| | 1 | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|
| Written agreement(s) to support the programme intentions between the education institution and employer partners for apprenticeship routes (if applicable). | | |
| If you stated no above, please provide the reason and mit There's no apprenticeship route proposed. | igation: | |
| List additional documentation: | | |
| Post visit documentation to meet condition: | | |
| SCPHN service PUSCs implementation plan, undated | | |
| Additional comments: | | |
| None identified. | | |
| During the event the visitor(s) met the following group: | s: | |
| | YES | NO |
| Senior managers of the AEI/education institution with | | |
| responsibility for resources for the programme | | |
| Senior managers from associated practice learning | \boxtimes | |
| partners with responsibility for resources for the | | |
| programme | | |
| Senior managers from associated employer partners | | \boxtimes |
| with responsibility for resources for the programme | | |
| (applicable for apprenticeship routes) | | |
| Programme team/academic assessors | | |
| Practice leads/practice supervisors/practice assessors | | |
| Students | \boxtimes | |
| If yes, please identify cohort year/programme of study: SN year one x three | | |
| HV year one x two | | |
| HV alumni x two | | |
| People who use services and carers | \boxtimes | |
| If you stated no above, please provide the reason and mit | igation: | |
| There's no apprenticeship route proposed. | | |
| Additional comments: | | |
| None identified. | | |
| The visitor(s) viewed the following areas/facilities during | ng the even | t: |
| | YES | NO |
| Specialist teaching accommodation (e.g. clinical skills/simulation suites) | | |
| Library facilities | | |
| Technology enhanced learning/virtual learning | | |
| environment | | |





| Educational audit tools/documentation | | \boxtimes | | | |
|----------------------------------------------------------------------------------------------|--------------|--------------|--|--|--|
| Practice learning environments | | | | | |
| If practice learning environments are visited, state where visited/findings: | | | | | |
| System regulator reports reviewed for practice learning | | | | | |
| partners | | | | | |
| If yes, system regulator reports list: | | | | | |
| Care Quality Commission (CQC) inspection report, Birmin | gham Wome | en's and | | | |
| Children's NHS Foundation Trust, 3 March 2023 | | | | | |
| CQC inspection report, Black Country Healthcare NHS Fo | undation Tru | ust, 12 May | | | |
| 2022 | | | | | |
| CQC inspection report, Kettering General Hospital NHS F | oundation Ti | rust, | | | |
| Kettering General Hospital, 7 March 2024 | | | | | |
| CQC inspection report, Sherwood Forest Hospitals NHS F | -oundation T | rust, King's | | | |
| Mill Hospital, 23 February 2023 | | | | | |
| CQC inspection report, United Lincolnshire Hospitals NHS Trust, Lincoln County | | | | | |
| Hospital, 3 August 2023 | | | | | |
| CQC inspection report, University Hospitals of Derby and | Burton NHS | Foundation | | | |
| Trust, Queens Hospital, 29 November 2023 | | | | | |
| CQC inspection report, University Hospitals of Derby and Burton NHS Foundation | | | | | |
| Trust, Royal Derby Hospital, 29 November 2023 | | | | | |
| CQC inspection report, The Dudley Group NHS Foundation Trust, Russells Hall | | | | | |
| Hospital, 22 November 2023 | I | 20 | | | |
| CQC inspection report, Walsall Healthcare NHS Trust, 25 January 2023 | | | | | |
| CQC inspection report, Walsall Healthcare NHS Trust, Manor Hospital, 15 | | | | | |
| September 2023 | LIC Twick C | ۸ صورا ۱ م | | | |
| CQC inspection report, Worcestershire Acute Hospitals NHS Trust, 6 April 2023 | | | | | |
| CQC inspection report, Worcestershire Acute Hospitals NHS Trust, | | | | | |
| Worcestershire Royal Hospital, 29 November 2023 | igation: | | | | |
| If you stated no above, please provide the reason and mitigation: | | | | | |
| The UoW is an established AEI and visits to facilities isn't required. Additional comments: | | | | | |
| None identified. | | | | | |
| inone identified. | | | | | |

Mott MacDonald Group Disclaimer

Issue record

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|------------------------------------------------------------------------------------|--|
| other parties. | |
| | |





| Final Report | | | | | |
|---------------------------|--------------------|-------|--------------|--|--|
| Author(s): Zoe Clark Jane | | Date: | 24 May 2024 | | |
| , , | Suppiah | | , | | |
| Checked by: | Ian Felstead-Watts | Date: | 14 June 2024 | | |
| Submitted by: | Amy Young | Date: | 2 July 2024 | | |
| Approved by: | Natasha Thompson | Date: | 2 July 2024 | | |