Nursing and Midwifery Council Quality Assurance Review

Programme Approval Report for:

Post-registration qualifications leading to:

Specialist Community Public Health Nurse – Health Visiting

London South Bank University

April 2025

Contents

Key institutional and programme details

Name and location of Approved Education Institution (AEI)	London South Bank University Southwark Campus 103 Borough Road London SE1 0AA
AEI institution Identifier [UKPRN]	10004078
Name and location of academic delivery partner(s) if not the AEI noted above	Not applicable
Name of practice learning/employer partners	No employer partners
Approval type	Programme approval

Name of programme					
NMC Programme Title	**AEI/EI Programme Title (in full)**	**Academic level**	**Apprenticeship**	**Full-time**	**Part-time**
Specialist Community Public Health Nurse – Health Visiting	Specialist Community Public Health Nursing (Health Visiting)	England, Wales, Northern Ireland ☒ Level 7	☐	☒	☐

Interim awards available There are no interim awards for this qualification that lead to NMC registration	
Proposed programme start date	22 September 2025
Standard(s) under assessment	☐ Part 2: Standards for student supervision and assessment ☒ Part 3: Standards for post-registration programmes The AEI has taken an institutional approach to Part 2: Standards for student supervision and assessment and therefore compliance with Part 2 has been confirmed through a previous review.
Date of visit	15 April 2025
Visitor team	Registrant Visitors: Mrs Theresa Titchener, Professor Oluwafemi Idowu Lay Visitor: Dr Sifelani Chikunya

Executive summary

Quality Assurance Reviews (QARs) are undertaken for the specific purpose of making recommendations to the Nursing and Midwifery Council (NMC) in relation to the approval (or otherwise) of the above-named programme(s) or in relation to the approval (or otherwise) of major modifications to the above-named programme. Reviews follow the Gateway approach to programme approvals and major modifications, as outlined in QAA Guidance for Approved Education Institutions and Education Institutions on NMC Quality Assurance Reviews.

Reviews involve a period of desk-based analysis with the opportunity for NMC visitors to request further information, evidence or clarification and a conjoint visit with the Approved Education Institution (AEI) programme approval panel. All evidence submitted by the AEI is reviewed by the visitors.

Visits enable both the NMC visitors and the AEI programme approval panel to gather further evidence and clarifications to inform their judgements and make recommendations about the AEI ability to meet the NMC standards. Visits will normally include meetings with a range of stakeholders such as students, people who use services and carers, employers, practice learning partners, the programme visitor team and senior managers.

Following a review, a draft report is shared with the AEI for the purposes of confirming factual accuracy before the report is finalised.

The conjoint visit with the AEI approval panel took place on 15 April 2025.

Context for the review

The proposed PGDip Specialist Community Public Health Nursing (Health Visiting) course is designed to meet the Nursing and Midwifery Council (NMC) Standards for post-registration programmes. The Standards of proficiency for specialist community public health nurses published in June 2022 represent significant changes to the requirements for curricula content, programme design and delivery. This means that NMC approval for existing London South Bank University (LSBU) programmes which were approved against the NMC (2004) standards will cease. To continue delivering the SCPHN courses LSBU therefore seeks approval in line with the NMC (2022) standards.

The **final recommendation** made by the visitor team to the NMC, following consideration of the AEI response to any conditions required by the approval panel, is as follows:

> **Programme is recommended to the NMC for approval**. The programme meets all standards and requirements and enables students to achieve stated NMC standards of proficiency and learning outcomes for theory and practice.

The detailed findings of the NMC visitor team's review are explained in more detail in the following sections. This includes a summary of any conditions of approval and confirmation of whether these have been satisfactorily addressed.

Where Part 2: Standards for Student Supervision and Assessment are reviewed simultaneously with Part 3: Standards for post-registration programmes, the associated summary of findings is recorded as Annexe 1.

Conditions and recommendations

The **provisional judgement** (following the visit and prior to the consideration of the AEI response to any conditions) was as follows:

> **Programme is recommended to the NMC for approval after conditions are met** to ensure the programme meets all standards and requirements and enables students to achieve stated NMC standards of proficiency and learning outcomes for theory and practice.

Conditions

No.	Condition details	Specific standard not met	NMC only/Joint	AEI/EI only
Conditions				
C1	Develop a plan demonstrating how SCPHN students will be involved in the ongoing development and evaluation of the programme.	2.1	NMC only	
C2	Provide a strategy and implementation plan detailing how people who use services and carers (PSCs) are recruited, prepared for and involved in the co-production, design, delivery, assessment and evaluation of the programme. The programme team should also explain how they will ensure that the sample of PSCs involved is diverse and representative of the broader population they serve.	2.1	NMC only	
C3	Develop an assessment schedule identifying formative and summative submission dates that demonstrates an equal spread of assessment over the duration of the programme.	2.7	NMC only	
C4	Remove references to MSc top-up course from course specification.			AEI only
Date for all conditions to be met to meet intended delivery date		27 May 2025		

Joint conditions relate to both NMC standards and the AEI approval outcomes. All conditions must be met for a programme to be recommended to the NMC for final approval.

Recommendations for enhancement

No.	Recommendation	Specific standard(s)	NMC only/Joint	AEI/EI only
Recommendations				
R1	Ensure that practice assessors reflect their understanding of their role by utilising	2.2	Joint	

	accurate terminology that fully aligns with the SSSA standards				
R2	Review module learning outcomes to consider reducing the number and/or specificity of learning outcomes. (If they are reduced the programme team will need to remap them against the NMC standards to assure they are still met)				AEI only
R3	Ensure that appropriate technological support is in place for use of the ePAD.				AEI only

Recommendations are to be addressed and reported in the annual self-assessment report.

Response to conditions

The visitor team reviewed in full the response(s) and evidence from the AEI to the conditions set. The findings of the visitor team with regard to responses to individual conditions are recorded below.

Response to NMC and Joint NMC/AEI conditions

Response to conditions		
No.	**Condition details**	**Findings**
C1	Develop a plan demonstrating how SCPHN students will be involved in the ongoing development and evaluation of the programme	The visitor team considered the response document and the student handbook and found that LSBU has clearly documented how students will be involved in the development and evaluation of the programme. The plan presented for student involvement through student representatives is credible and allows student feedback to be captured and discussed. There is provision for appropriate action planning and progress updates. The visitor team therefore considers that for Condition C1, LSBU has fully addressed the requirements of the condition and Standard 2.1 is met.
C2	Provide a strategy and implementation plan detailing how people who use services and carers (PSCs) are recruited, prepared for and involved in the co-production, design, delivery, assessment and evaluation of the programme. The programme team should also explain how they will ensure that the sample of PSCs involved is diverse and representative of the broader population they serve.	The visitor team considered the strategy and implementation plan provided in the response document and confirmed that these detail how PSCs will be recruited, prepared for and involved in the co-production, design, delivery, assessment and evaluation of the programme. The strategy also states the aim to recruit PSCs from a diverse population that meet the requirements of a 0-5 health visiting service. The course team will work with the project manager of the LSBU People's Academy and the communications team to access members of the public. The visitor team therefore considers that for Condition C2, LSBU has fully addressed the requirements of the condition and Standard 2.1 is met.
C3	Develop an assessment schedule identifying formative and summative	The visitor team considered the assessment schedule developed which demonstrates the use of formative and summative assessments. The visitor team

	submission dates that demonstrates an equal spread of assessment over the duration of the programme.	confirmed that there is an equal spread of assessment over the duration of the programme. Summative submissions are in line with the LSBU academic calendar. Students are provided with the programme and assessment schedule at the start of the academic year.
		The visitor team therefore considers that for Condition C3, LSBU has fully addressed the requirements of the condition and Standard 2.7 is met.

Response to AEI only conditions

The response to LSBU conditions that are not directly related to individual NMC standards are reported in the table below.

Response to AEI/EI only conditions		
No.	Condition details	Findings
C4	Remove references to MSc top-up course from course specification.	The Chair of the conjoint panel confirmed on 6 June 2025 that all internal conditions, as noted in the minutes of the visit, have been met.
		The visitor team considers that for Condition C4, LSBU has addressed the requirements of the condition and therefore Condition C4 is met.

The visitor team considers that all conditions have been satisfactorily addressed resulting in the team being able to confirm that all required standards are met.

The **final recommendation** made by the visitor team to the NMC, following consideration of the AEI response to any conditions set, is therefore as follows:

All conditions relating to this programme have been addressed and **the programme is recommended to the NMC for approval**. The programme meets all standards and requirements and enables students to achieve stated NMC standards of proficiency and learning outcomes for theory and practice.

Explanation of findings for Part 3

1: Selection, admission, and progression

Approved education institutions, together with practice learning partners, must:		Met	Not Met	Met after conditions	Not applicable
1.1	Ensure that on entry to the programme the applicant is an: 1.1.1 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. 1.1.2 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.	☒	☐	☐	☐
1.2	Confirm on entry that each applicant selected to undertake **SCPHN** or community nursing **SPQ** programme has the academic capability to study at the level required for that programme	☒	☐	☐	☐
1.3	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.	☒	☐	☐	☐
1.4	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.	☐	☐	☐	☒
1.5	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.	☒	☐	☐	☐
1.6	Consider recognition of prior learning that is capable of being mapped to the: 1.6.1 programme learning outcomes and standards of proficiency for the applicant's intended field of **SCPHN** practice or **SCPHN** public health nurse practice. 1.6.2 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.	☒	☐	☐	☐
1.7	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 RPS Competency Framework for all Prescribers for applicants.		☐	☐	☐	
1.8	Where programmes intend to offer admission to an NMC approved independent/supplementary (V300) prescribing programme 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.		☐	☐	☐	☒

Findings

1. The visitor team considered a range of evidence for this standard including the course specification, the course handbook and guidance for students on protected learning time, academic and practice learning documentation and assessment documentation. The visitor team also met with a range of stakeholders including the programme and senior staff, practice learning partners, people who use services and carers (PSCs) as well as students from a cognate programme.

2. In consideration of Standard 1.1, the visitor team found that LSBU has appropriate mechanisms in place to ensure that on entry to the programme the applicant is an NMC Registered Nurse (Level 1) or NMC Registered Midwife capable of safe and effective practice at the level of proficiency appropriate to the programme. This is because applicants initially apply to the Practice Learning Partner (PLP) who confirms the NMC registration of all successful applicants as part of their recruitment processes. Applicants have to provide their NMC PIN, date of registration and annual renewal. Review of this information includes confirmation that the applicant has an active registration and does not have any restrictions on their practice. Applicants are also required to provide evidence of registration and photographic ID during the interview. The process for checking self-funding applicants is conducted via honorary contracts that are required to be in place before they start.

3. In further considering Standard 1.1, the visitor team heard that the involvement of PSCs in recruitment is still in its infancy (see condition 2, Standard 2.1). LSBU is currently working with three PSCs from the People's Academy (a university-wide partnership between individuals with lived experience and professionals), and are reaching out to PLPs to recruit more. PSCs confirmed their involvement in developing interview questions for the SCPHN programme under review and reported that they have received training in equality, diversity and unconscious bias to support them in their role in recruitment. Similarly, PLPs confirmed being involved in the development of interview questions and in conducting joint interviews with LSBU staff. The joint interview panels review questions before each interview ensuring PSC questions are included. Practice supervisors (PSs) and practice assessors (PAs) involved in recruitment confirmed that they have completed recruitment and retention training, and other mandatory training as required.

4. In considering Standard 1.2, the visitor team found that LSBU adequately assures that applicants have the academic capability to study at the level required for the programme. In line with LSBU's admissions requirements, applicants must have achieved a first degree of 2:2 or above. This information is also included in the course information on the LSBU website. Until recently LSBU also had a requirement that applicants provide evidence of recent academic study in a health-related field which usually included successful completion of a module at Level 7 or above within the two years prior to application. The visitor team queried this requirement, and the programme team responded that while the addition of evidence of recent study was identified as important by PLPs and the programme team during the development of

the programme, it was never intended as an essential criterion for recruitment and the selection purposes. The statement has, therefore, been removed from the course specification to reduce the potential for this to become a barrier for applicants. The recent study requirement is now included in the person specification as a desirable element and applicants who have met the required essential criteria will be selected for interview, despite not providing evidence of recent study. At the visit the programme team reported that potential applicants are encouraged to consider doing the research module as a start to their staff development journey to aid their transition to Level 7 study before they fully commit.

5. In considering Standard 1.3, the visitor team confirmed that the programme is open to eligible applicants including NHS, non-NHS, self-employed or self-funded applicants. The visitor team found that there is a clear process for recruiting non-NHS, self-employed or self-funded applicants to the programme. LSBU requires non-NHS, self-employed or self-funded applicants to secure a placement with an organisation which will provide the resources needed to support, facilitate and assess learning in line with the NMC Standards for student supervision and assessment (SSSA) before they can consider their application. Students, including those who are self-funded and self-employed, and PLPs are informed during the recruitment and selection process of the requirement for protected learning time throughout the duration of the programme.

6. In considering Standard 1.5, the visitor team established that LSBU requires employers to agree honorary contracts with students, and to have processes for conducting mandatory checks such as the Disclosure and Barring Service (DBS) checks, indemnity insurance, and signed commitments to provide students with protected learning time, required mandatory training and an induction to the placement/service. This was confirmed by PLPs at the visit. Confirmation from the host organisation must also include provision for extending the period of learning to accommodate the need for resubmission, and programme interruption. LSBU has an appropriate process for setting up new placements which identifies the necessary arrangements and governance structures to support student learning and confirms that these are in place. For example, the host organisation must engage in practice learning environment audits which evidence their ability to comply with the SSSA, including the provision of a PS and PA. All practice learning areas have education audits at least every two years, and action plans are developed and reviewed for any areas of concern. Signed placement agreements with Central London Community and Healthcare NHS Trust, Guy's and St Thomas' NHS Foundation Trust, and Lewisham and Greenwich NHS Trust are in place to illustrate the commitment of employers to the programme under review. At the visit, students from a cognate programme confirmed that they have protected learning time while in practice learning settings. They were also aware of how to raise and escalate concerns about practice learning and reported that information on how to do this is provided on the virtual learning environment (VLE) with a form to complete.

7. In considering Standard 1.6, the visitor team found that there are opportunities for the recognition of prior learning (RPL), codified in the Recognition of Prior Learning Policy where an applicant can demonstrate how they have achieved the learning outcomes prior to commencing the programme. All decisions to approve the transfer of credit will be reported at the relevant Examination Board. At the visit the programme team reported that applicants seeking RPL would normally request that for the research methods module. While over the last four years, there have no RPL claims, the process outlined in the policy would be followed.

8. Standards 1.4, 1.7 and 1.8 are not applicable to this approval and therefore were not considered.

9. Based on the information made available, the visitor team considers that LSBU has in place the appropriate arrangements for Standard 1: Selection, admission and progression to enable the NMC standards to be met.

2: Curriculum

Approved education institutions, together with practice learning partners, must:		Met	Not Met	Met after conditions	Not applicable
2.1	Ensure that 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: 2.1.1 all selected fields of **SCPHN** practice and/or **SCPHN PHN** practice and/or for 2.1.2 all selected fields of community nursing **SPQ** practice and/or in other specified fields of community nursing **SPQ** in health and social care practice	☐	☐	☒	☐
2.2	Comply with the NMC Standards for student supervision and assessment.	☒	☐	☐	☐
2.3	Confirm **SCPHN** and/or community nursing **SPQ** programmes comply with the NMC Standards for prescribing programmes.	☐	☐	☐	☒
2.4	State routes within the programme for: 2.4.1 students to enter the **SCPHN** register in a specific field of **SCPHN** practice: health visitor, school nurse, occupational health nurse. 2.4.2 students to enter the **SCPHN** register for the public health nurse qualification. 2.4.3 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. 2.4.4 students to annotate their registration in community nursing **SPQ** practice in health and social care.	☒	☐	☐	☐
2.5	Ensure programme learning outcomes reflect the: 2.5.1 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 2.5.2 core standards of proficiency for **SCPHN** that are tailored to **SCPHN** public health nursing. 2.5.3 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.	☒	☐	☐	☐

2.6	Set out the general and professional content necessary to meet the: 2.6.1 core and field specific standards of proficiency for each intended field of **SCPHN** practice: health visiting, school nursing, occupational health nursing, 2.6.2 core standards of proficiency for **SCPHN** public health nurse qualification. 2.6.3 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	☒	☐	☐	☐
2.7	Set out the content necessary to meet the programme outcomes for each intended field of: 2.7.1 **SCPHN** practice: health visiting, school nursing, occupational health nursing and/or **SCPHN** public health nursing, 2.7.2 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.	☐	☐	☒	☐
2.8	Ensure that the curriculum provides a balance of theory and practice learning opportunities, using a range of learning and teaching strategies.	☒	☐	☐	☐
2.9	Ensure technology and simulation opportunities are used effectively and proportionately across the curriculum to support supervision, learning and assessment.	☒	☐	☐	☐
2.10	Ensure programmes delivered in Wales comply with legislation which supports use of the Welsh language.	☐	☐	☐	☒
2.11	Ensure programmes are: 2.11.1 of suitable length to support student achievement of all proficiencies and programme outcomes for their intended **SCPHN or** community nursing **SPQ** award. 2.11.2 no less than 45 programmed weeks of theory and practice learning for full-time programmes/pro rata for part time programmes.	☒	☐	☐	☐

Curriculum requirements

There is a balanced weighting of theory and practice learning. The programme schedule indicates 108 days of theory and 107 days of practice learning.

Findings

10. The visitor team considered a range of evidence for this standard including course documentation, mapping documents, staff CVs, academic and practice learning documentation and assessment documentation. The visitor team also met with the senior staff and the programme team, students from a cognate programme, and practice learning partners.

11. In considering Standard 2.1, the visitor team examined course documentation and saw that LSBU has mapped the programme content to the SCHPN Standards of proficiency and the programme learning outcomes to the programme content so that they align with the standards. The visitor team also found that LSBU has sufficient and appropriate resources to deliver the programme. Staff CVs show that appropriately registered, qualified and experienced people will contribute to the delivery of the programme. There are three members of staff with a health visiting background. Senior staff confirmed at the visit that teaching workloads are monitored and additional support from academics in the School with relevant experience, for example in leadership and quality improvement in the NHS, is available in the event of an increase in student numbers.

12. In further considering Standard 2.1, the visitor team established from meeting notes that the programme has been developed in consultation with PLPs and to some degree with PSCs and students. At the visit PLPs confirmed that there are regular opportunities to provide feedback and evaluate the programme throughout the academic year. As there are currently no SCHPN students, the visitor team was unable to confirm in the meeting with students from a cognate programme whether past SCHPN students had contributed to the development of the programme and what their future involvement would be. The visitor team, therefore, set a **condition (C1)** that LSBU develop a clear and robust plan demonstrating how SCPHN students will be involved in the ongoing development and evaluation of the programme.

13. At the visit, the PSCs present reported that they had not been involved in programme development, recruitment, delivery or assessment of the SCPHN programme but would welcome the opportunity. The visitor team was satisfied that there is a commitment from the programme team and senior managers to involve PSCs in all aspects of the programme. The programme team reported that they are working with the People's Academy to further develop PSC involvement. At present there are opportunities for PSCs to provide feedback about students in the practice assessment document (PAD). However, because of the limited documentary evidence and oral testimony from the visit on how PSCs are recruited and prepared for their involvement in the programme the visitor team specified a **condition (C2)** that LSBU provide a strategy and implementation plan detailing how PSCs are recruited, prepared for and involved in the co-production, design, delivery, assessment and evaluation of the programme. As part of this strategy the programme team should also explain how they will ensure that the sample of PSCs involved is diverse and representative of the broader population they serve.

14. In considering Standard 2.2, the visitor team was able to confirm that the programme complies with the NMC SSSA. This is because signed placement agreements are in place with all PLPs. There are clear policies and procedures for the set-up of PLPs, the monitoring of protected learning time, as well as the selection, preparation and training of PSs, PAs and Academic Assessors (AAs). These include processes for the identification and raising of concerns in relation to practice learning and are fully understood and implemented by PLPs and LSBU programme staff (see standards 3.4 and 4.2 below for further details). All practice learning settings have initial and

regular review education audits. At the visit some PAs referred to themselves as 'practice teachers' and the visitor team therefore **recommends (R1)** that PAs reflect their understanding of their role by utilising accurate terminology that fully aligns with the SSSA standards.

15. Standard 2.3 is not applicable for this approval as the programme does not include a prescribing element.

16. In considering Standard 2.4, the visitor team was satisfied that the programme provides a route for students to enter the SCPHN register in the field of health visiting. The course specification and the programme handbook clearly state that successful completion of the PGDip programme enables a student to register the professional award SCPHN (Health Visiting) with the NMC.

17. In considering Standard 2.5, the visitor team examined the course specification, module descriptors and mapping documents and found that the Standards of proficiency are addressed in the curriculum. The programme learning outcomes fully reflect the core and field-specific Standards of proficiency for SCPHN (Health Visiting) and the mapping documents illustrate where in the programme the core and specific SCPHN standards of proficiency are addressed. For example, in the Leading and Managing Professional Practice module students will explore legislation to improve the quality of care, life changes and outcomes for children and families and is mapped to proficiencies A3, D2, D3, D4, D5. DHV13, EHV4.

18. Similarly, in considering Standard 2.6, the visitor team found that the course specification, module descriptors and mapping documents set out the general and professional content necessary to meet the core and field-specific standards of proficiency for the SCPHN (Health Visiting). The programme consists of four modules. Theoretical content takes place in two terms in blocks of learning, and practice learning is delivered throughout the year with students completing a practice learning experience in health visiting; 47.5 hours of simulated learning take place in the theory modules and all modules are compulsory. The learning outcomes are outlined in each module descriptor and the module timetable indicates the content and delivery method. For example, in the Advancing Children's Health, Safety and Wellbeing within the Family Context modules, using a lifecycle approach students explore strategies for using advanced interpersonal, communication and social interaction skills to improve health, safety and wellbeing outcomes for children. The Quality Improvement for Public Health Practice and Service Delivery module introduces students to the concept of quality improvement and preventative strategies for developing and delivering public health from the perspective of local, national and international policy and legislation.

19. With regard to Standard 2.7, the visitor team found that the programme content is outlined in the module descriptors and the mapping documents illustrate how the programme outcomes for the SCPHN (Health Visiting) are being met. It demonstrates that the successful completion of module assessment is required to achieve the programme outcomes and there is no compensation. Some assessments are mapped to module and programme learning outcomes - for example, within the Advanced Children's Health, Safety and Wellbeing within the Family Context module, students must successfully pass a safeguarding report about a concern and its impact on the child's health, safety and wellbeing. In addition, students are required to present the safeguarding report to a panel. From the course documentation the assessment load throughout the programme is not clear and the

visitor team therefore set a **condition (C3)** that LSBU develop an assessment schedule identifying formative and summative submission dates which demonstrates an equal spread of assessment over the duration of the programme.

20. In respect of Standard 2.8, the visitor team was satisfied that the curriculum provides a balance of theory and practice learning opportunities, using a range of learning and teaching strategies. This is because according to the programme schedule the programme provides 108 days of theory and 107 days of practice learning. The curriculum has been developed using the principles of the spiral curriculum where learning is carefully planned to suit the content and learning outcomes for each module. Simulated learning will be used in the theory modules to ensure students have opportunities to develop, practice and refine skills including communication and interpersonal skills needed when engaging in challenging conversations and situations. The course specification and module descriptors evidence the use of a range of teaching, learning and assessment strategies such as lectures, workshops, seminars, simulation, enquiry, and problem-based learning activities.

21. In considering Standard 2.9, the visitor team found that technology-enhanced learning and simulation will be used across the curriculum. The course specification indicates a range of blended learning opportunities, and the VLE, with embedded resources, will be used to support student learning. The VLE allows students to access library resources and online study skills resources promoting literacy and academic writing skills. Digital resources will also be used to enable students to apply theory to practice in an interactive way, for example when learning about genomics and for examination and assessment of child development in the Advancing Children's Health Safety, and Wellbeing within the Family Context module. Students will also be exposed to the electronic patient record systems used in the practice placement and the academic databases to enhance their ability to use research to inform their practice.

22. In further considering Standard 2.9, the visitor team established that simulation will be used and a table indicates where simulated learning appears throughout the programme. Students will learn from real-life situations artificially created in the VLE and through simulation activities allowing them to explore a range of issues including the use of communication and negotiation skills to manage challenging situations and conversations. The programme team will work with PSCs to develop real-life case scenarios. There is support for students and staff in the use of digital technology from the Skills for Success Team.

23. Standard 2.10 does not apply to this approval and was therefore not considered.

24. In considering Standard 2.11, the visitor team established that the programme is a one-year taught programme for full-time students with 45 taught weeks (221 days). This is deemed to be of sufficient length by the visitor team to enable students to achieve all required SCHPN (Health Visiting) proficiencies and the programme outcomes.

25. Based on the information made available, the visitor team considers that LSBU has in place the appropriate arrangements for Standard 2: Curriculum to enable the NMC standards to be met subject to meeting **conditions 1, 2 and 3**.

3: Practice learning

Approved education institutions, together with practice learning partners, must:	Met	Not met	Met after conditions	Not applicable
3.1	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.	☒	☐	☐	☐
3.2	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.	☒	☐	☐	☐
3.3	Provide practice learning opportunities that allow students to develop, progress and meet all the standards of proficiency for their: 3.3.1 intended field of **SCPHN** practice: health visitor, school nurse, occupational health nurse or, 3.3.2 **SCPHN** public health nurse 3.3.3 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, 3.3.4 in other specified field(s) of community nursing in health and social care nursing.	☒	☐	☐	☐
3.4	Ensure that practice learning complies with the NMC Standards for student supervision and assessment.	☒	☐	☐	☐
3.5	Take account of students' individual learning needs and personal circumstances when allocating their practice learning, including making reasonable adjustments for students with disabilities.	☒	☐	☐	☐
3.6	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: 3.6.1 intended field of **SCPHN** practice, **SCPHN PHN** practice or, 3.6.2 their intended field of community nursing **SPQ** practice or community nursing **SPQ** in health and social care practice.	☒	☐	☐	☐

Practice learning requirements

The programme requires 107 days of practice learning. 47.5 hours of simulated learning will be used in theory modules.

Findings

26. The visitor team considered a range of evidence for this standard including course and practice learning documentation such as practice learning policies, procedures and contracts, practice learning handbooks and guidance for students, PSs and PAs, as well as the practice learning document. The visitor team also met with PLPs, students from a cognate programme and the programme team.

27. In considering Standard 3.1, the visitor team found that LSBU has suitable arrangements and appropriate governance in place for practice learning for all groups of students. This is because all recruitment and selection to the programme takes place in partnership with the PLPs. NHS-funded students will be offered a practice learning opportunity and protected learning time as part of the application process. Self-funding or self-employed students will need to secure the practice learning opportunity and associated governance, including protected learning time, as part of their application process. These applicants will be advised to contact a member of the course team who will support them to understand the process and its requirements; the Head of Practice Learning confirms if the proposed placement learning partner is listed in the LSBU IHS placement agreements database. Sound processes are in place for setting up new PLPs as providers. Signed agreements have to be in place and education audits have to be completed for the practice learning areas. At the visit, PLPs confirmed that there is effective partnership working to support high-quality student learning. Suitable arrangements are in place to ensure the protected learning time for all students, including those who are self-employed or self-funding. These include documented meetings between the Personal Tutor, AA, PA, PS, and student to discuss progress of the placement, learning opportunities and learning achievements. In addition, there are progress review meetings in each learning period where the AA, PA, PS and the student monitor progress of learning and assessment. Minuted PLP meetings take place four times during the year and routinely discuss practice learning, programme and PLP updates. Students are encouraged to raise concerns they may have during their placement and documented processes are in place for solving problems in practice learning which are available on the VLE.

28. In respect of Standard 3.2, the visitor team confirmed that there are opportunities for students to work in partnership with LSBU and PLPs to arrange supervision and assessment that complies with the NMC Standards for student supervision and assessment (SSSA). This is because during the induction day students are introduced to the SSSA requirements, the practice assessment document (PAD) and context document and consider how they may use the information during the placement. In addition, students spend two days in the practice learning area with their PA and PS where they are introduced to the learning environment, the team and work base. Students are allocated to a PA and PS by their employer in collaboration with the Course Lead. The visitor team formed the view that the Assuring Student Supervision and Assessment Policy helps to ensure that practice supervision and assessment complies with SSSA standards as it clearly outlines the steps taken to gain assurance that non-NHS funded, self-employed and self-funded students are allocated an appropriately prepared PA and PS and are supported to learn in the practice setting. LSBU has adopted the Pan-London PAD. It provides another

opportunity for students to work in partnership with LSBU and the PLP because the PAD records all interactions between the PA, PS, AA and student. The PAD context document outlines the processes that will be employed by the PA and PS, AA and student to jointly monitor student learning and development during the programme. This includes documented placement meetings at least once per semester, progress review meetings in learning periods one and two, and a summative assessment meeting in learning period three. Any action plans will be reviewed at agreed set times to ensure that learning is continuously monitored and appropriate measures taken to support student learning.

29. In considering Standard 3.3, the visitor team concluded that LSBU provides sufficient practice learning opportunities that allow students to develop, progress and meet all the Standards of proficiency for health visiting. This is because students undertake a health visiting practice learning experience in London with an NHS Trust of their choice. Health visiting services offered by the Trusts range from universal to specialist and targeted provision. Education audits show the range of learning opportunities and resources available during placement which are appropriate to allow students to successfully achieve SCPHN specialist health visiting practice. There are opportunities for alternative experiences; for example, students can spend time in another geographical area or work with health and social care professionals who can tailor learning that supports individual learning needs. Trusts engage with people from many ethnic and cultural backgrounds, who have a range of health and care needs, and students therefore have the opportunity to gain experience of working with people who have complex care needs, and in situations that are unpredictable, complex, and uncertain. In addition, they have opportunities to work with specialist practitioners from different agencies and disciplines. Opportunities for reflective thinking and discussion will be available during the programme to enable students to consider events from practice in a timely manner and engage with their peers to develop strategies for resilience, practice, and professional development.

30. In reviewing the PAD, the visitor team found evidence of developmental feedback opportunities which should help students to develop, progress and eventually meet all the required Standards of proficiency. This is because at the start of the placement and each learning period, the student and the PA collaborate to create a learning agreement which will be reviewed at least once a month. This enables them to plan how the available learning opportunities will enable the student to achieve the Standards of proficiencies. Regular placement and progress review meetings which are also documented in the PAD should provide assurance that students have access to a range of experiences in addition to mainstream health visiting practice. Any concerns about the range of available experiences will be discussed during each meeting of the AA, Link Tutor and PA. The PAD requires students to conduct self-assessments addressing strengths, challenges, opportunities and barriers to learning at the onset of each practice placement and before entering the 10-week block placement. All practice learning achievements are evidenced in the PAD, thus enabling students, PSs, PAs and AAs to monitor progress with and meeting of the required Standards of proficiency.

31. In considering Standard 3.4, the visitor team was satisfied that practice learning complies with the NMC SSSA. This is because LSBU assures itself that PLPs comply with SSSA when the practice learning experience is initially set up and in subsequent two-yearly education audits. The set-up process involves the completion of an audit and the signing of a practice learning agreement and a protected learning time agreement. PLPs maintain a register of staff who can act as PA and PS after they have undergone mandatory preparation and training and assign students accordingly. In exceptional circumstances these roles may be held by the same

person. In these situations, LSBU and the PLP will use the Process for Managing Exceptional Circumstances to reach a resolution. The preparation of PAs and PSs is comprehensive and follows the development route map agreed by the Pan London Practice Learning Group. PAs and PSs are invited to attend six learning and assessment update days provided by LSBU and attendance is recorded and monitored. Lack of engagement is followed up and LSBU tries to resolve any underlying issues that form barriers to engagement. For example, a recording may be made of the session content and shared with those unable to attend. LSBU also provides its academic staff with the initial AA training and there are annual updates. Staff who have completed the training are entered into a database and keep a portfolio that enables them to record and reflect on their learning and development.

32. In considering Standard 3.5, the visitor team found that students are encouraged to complete a personal development plan (PDP) during induction which allows them to identify their learning preferences and any needs they may have. Students who require additional support and advice are followed up by the Student Services Team who outline the services available to address their needs and learning preferences. This may include information about a range of learning and support resources as well as an appointment with a Disability Advisor within the LSBU Dyslexia, Disability Services (DDS) for additional support. The visitor team was satisfied that personal circumstances are taken into account when allocating practice learning because all students (including those who are self-funded) will be able to access the Occupational Health Service from their host Trust as necessary during the course. Students are also encouraged to share any information about a learning disability diagnosis and special needs with the Human Resources team within their host Trust to ensure the necessary adjustments are made to support their learning in practice. Any reasonable adjustments that may be needed are discussed during the placement meetings. If students raise concerns that their needs are not being met, additional placement meetings will be arranged to discuss an implementation plan.

33. In respect of Standard 3.6, the visitor team found evidence that the programme ensures students' learning experiences are tailored to their stage of learning. For example, students will undertake the Quality Improvement for Public Health Practice and Service Delivery module in semester two, which will enable them to benefit from their semester one learning and apply their knowledge and understanding to the implementation of a project relating to a service need in their practice learning setting. By incorporating the practice learning experience into the Leading and Managing Professional Practice module during the year, students can progress their learning using strategies of direct and indirect supervision. While concurrently learning about practice, theory, policy and legislation in inner city organisations in their practice learning, students can integrate the two as they develop into reflective, critical thinkers. In addition, students complete a placement during the summative learning period (learning period three) of at least 10 weeks towards the end of the programme. This enables them to consolidate their learning. The emphasis on personal and academic reflective writing throughout the PAD encourages them to continuously consider their learning needs and achievement.

34. Based on the information made available, the visitor team considers that LSBU has in place the appropriate arrangements for Standard 3: Practice learning to enable the NMC standards to be met.

4: Supervision and assessment

	Approved education institutions, together with practice learning partners, must:	Met	Not met	Met after conditions	Not applicable
4.1	Ensure student support, supervision, learning, and assessment complies with the NMC Standards framework for nursing and midwifery education.	☒	☐	☐	☐
4.2	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.	☒	☐	☐	☐
4.3	Ensure practice supervision, the assessment of practice and academic assessment complies with the NMC Standards for student supervision and assessment.	☒	☐	☐	☐
4.4	Ensure practice supervisors: 4.4.1 have undertaken a period of preceptorship in line with the NMC principles for preceptorship as **SCPHN** or community nursing **SPQ** qualified professionals or 4.4.2 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	☒	☐	☐	☐
4.5	Ensure practice and academic assessors: 4.5.1 have undertaken a period of preceptorship in line with the NMC principles for preceptorship as **SCPHNs** or community nurses with a **SPQ** or, 4.5.2 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**.	☒	☐	☐	☐
4.6	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. 4.6.1 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.	☒	☐	☐	☐
4.7	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:	☒	☐	☐	☐

	4.7.1 their intended field of **SCPHN** practice: health visitor, school nurse, occupational health nurse, 4.7.2 **SCPHN** public health nurse, 4.7.3 their intended **SPQ** in the field of: community children's nursing, community learning disabilities nursing, community mental health nursing, district nursing, general practice nursing, or 4.7.4 other specified field(s) of community nursing **SPQ** in health and social care.				
4.8	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.	☒	☐	☐	☐
4.9	Assess the student's suitability for award and confirm overall proficiency based on the successful completion of all practice learning relevant to: 4.9.1 their intended field of **SCPHN** practice: health visitor, school nurse, occupational health nurse, 4.9.2 **SCPHN** public health nurse practice, 4.9.3 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 4.9.4 other specified field(s) of practice for the community nursing **SPQ** in health and social care.	☒	☐	☐	☐

Findings

35. The visitor team considered a range of evidence for this standard including the course and module specifications, student support and practice supervision policies and guidance, and staff CVs. The visitor team also met with practice learning partners, PSCs, students from a cognate programme and the programme team.

36. In considering Standard 4.1, the visitor team established that LSBU adequately ensures that student support, supervision, learning and assessment complies with the NMC Standards framework for nursing and midwifery education. This is because, in relation to student support all students have access to the LSBU student support services. In addition, students will have a Personal Tutor and will be provided with comprehensive information on the course content, learning requirements and resources on the VLE. Support from the Skills for Success Team is integral to the programme which includes sessions on scheduling and planning learning, critical thinking, and the use of technology. PSCs of the People's Academy will also support student learning during planned sessions. In relation to student supervision, the visitor team concluded that sound mechanisms are in place for the selection and preparation of PAs, PSs and AAs, which includes comprehensive training and annual updating (see standard 3.4 above). PLPs keep a record of the learning and development completed by each PS and PA. In addition, the requirements for those undertaking the PA and PS roles are clearly outlined in the PAD. The number of students admitted per year will be determined by placement capacity and the PS/PA resources to ensure adequate support and supervision. The host NHS Trust and the programme team will discuss the PA/PS allocation decisions during the recruitment

and selection process. With regards to learning and assessment, the visitor team found that LSBU has mapped the programme learning outcomes to the programme content which in turn is mapped to the SCPHN proficiencies. The assessment schedule clearly sets out the type of summative assessment for each module as well as the practice placement together with the assessment weighting and the pass mark. Comprehensive information about academic assessment and examination regulation and procedures is available to students via the MYLSBU system. Reasonable adjustments are made when marking work submitted by students with additional learning needs in line with the Disability Dyslexia Marking Policy. Such students can also submit their work up to five days from the published deadline with no penalty applied in accordance with the Late Submission and Extenuating Circumstances Procedure.

37. In considering Standard 4.2, the visitor team found that there is strong evidence of collaboration in the preparation, training and ongoing support for PAs, PSs and AAs who support and assess students on the programme. This is because all practice learning issues, including the ongoing learning, support of PAs and PSs are discussed as a standing agenda item at the PLP meetings. In addition, the NHS Trusts confirm to LSBU that all allocated PAs and PSs have completed the required training in line with the Pan London Practice Learning Group's development route map for PAs and PSs. This includes learning about the NMC Standards for post registration programmes and the SSSA, understanding students and giving feedback. In addition, LSBU provides six training days for them and prepares its AAs appropriately (see standard 3.4 above). PLPs are supportive of these training days and make the necessary arrangements to release the PAs and PSs from the placement areas. All dates are planned and circulated at the start of the course. The sessions are designed to enable the PAs and PSs to facilitate student learning and assessment and include: giving feedback; using the PAD and planning learning activities in line with the Standards of proficiency for specialist community public health nurses; and providing opportunities for reflection and peer learning.

38. In considering Standard 4.3, the visitor team established that LSBU adequately ensures that practice supervision and academic and practice assessment complies with the NMC SSSA. This is because agreements with PLPs to ensure protected learning time and sufficient guidance for students on protected learning time are in place. In addition, there are effective processes for the selection, training and support of PAs, PSs and AAs (see Standards 3.4 and 4.2 above). Taken together, these mechanisms should ensure that practice supervision occurs in line with the SSSA. As for assessment, the PAD, which includes the ongoing record of achievement holds the evidence that students meet the required proficiencies and programme outcomes, makes up a significant part of the overall assessment. PAs are required to assess a student's progress towards and achievement of proficiencies periodically to ensure the student is progressing in line with expectations. The proficiencies can be gained in the practice placement or alternative learning experiences and must be assessed as 'demonstrated' at least once by the end of the programme. Academic assessments follow the programme's assessment schedule and are governed by assessment rules and regulations that are easily accessible to students (see Standard 4.1 above for further details).

39. In considering Standard 4.4, the visitor team is satisfied that PSs have undertaken a period of preceptorship in line with the NMC principles for preceptorship as SCPHN qualified professionals. This is because the allocation of PSs includes confirmation that the individual has completed a period of preceptorship, training and has the experience and expertise required to fulfil the PS role as outlined in the Pan London PA/PS development route map.

40. In considering Standard 4.5, the visitor team is satisfied that PAs have undertaken a period of preceptorship in line with the NMC principles for preceptorship as SCPHN qualified professionals. This is because the allocation of PAs includes confirmation that the individual has completed a period of preceptorship, training and has the experience and expertise required to fulfil the PA role as outlined in the Pan London PA/PS development route map. AAs are appropriately trained for their role by LSBU (see Standard 3.4 above for further information).

41. In considering Standard 4.6, the visitor team found that LSBU has suitable processes in place to ensure that students are assigned to a PA who is an experienced registered SCPHN nurse. This is because the allocation of a PA to a student requires confirmation by the PLP that the individual is suitably registered, qualified and experienced, and has completed a period of preceptorship and training for the role (see Standards 3.4 and 4.4). Furthermore, clear procedures are in place if changes are needed in practice assessment arrangements to ensure that adequate provision is in place for ongoing student supervision and learning. In such circumstances the LSBU Link Tutor will meet with the student and the PLP's Education Lead or the Service Manager to plan for the new allocation. Similarly, clear procedures are in place if there is a need to allocate the same person to the PA and PS role. These are set out in the Process for Managing Exceptional Circumstances and an action plan will be implemented to promote timely resolution of the situation.

42. In considering Standard 4.7, the visitor team concluded that there are sufficient opportunities to provide students with feedback to support their learning and development for meeting the Standards of proficiency and programme learning outcomes. This is because all students have the opportunity and are encouraged to complete formative and summative academic assessments for each module. Formative assessment submissions provide opportunities for the student to receive feedback and feedforward to support development of the summative submission. With regards to practice learning, students complete formative and summative assessments on which they receive feedback from the PA. There is also provision in the PAD for feedback from clients and PSCs.

43. In considering Standard 4.8, the visitor team examined the PAD which contains the ORA and was satisfied that the document appropriately records all SCPHN proficiencies and confirms whether these proficiencies have been met. Students are encouraged to complete their learning continuously during the programme using the learning agreement and this is monitored during the placement and progress review meetings which are recorded in the PAD. Poor record-keeping and failure to achieve the required learning during each learning period will result in an action plan. The PA and the AA meet to monitor progress during learning periods one and two, and will assess achievement during the summative assessment in learning period three.

44. In considering Standard 4.9, the visitor team found that LSBU appropriately ensures that PAs and AAs assess students' suitability for award and confirm overall proficiency based on the successful completion of all relevant practice learning. This is because the completed PAD will be assessed by the PA and reviewed by the AA to ensure all elements have been achieved and appropriately recorded. All elements of assessment from academic and practice learning will be considered by the LSBU Examination Board for the programme to confirm the award at the end of the programme.

45. Based on the information made available, the visitor team considers that LSBU has in place the appropriate arrangements for Standard 4: Supervision and assessment to enable the NMC standards to be met.

5: Qualification to be awarded

Approved education institutions, together with practice learning partners, must:		Met	Not met	Met after conditions	Not applicable
5.1	Ensure that the minimum academic level for **SCPHN** and community nursing **SPQ** is at postgraduate masters' level.	☒	☐	☐	☐
5.2	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.	☒	☐	☐	☐
5.3	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.	☐	☐	☐	☒
5.4	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.	☐	☐	☐	☒
5.5	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.	☐	☐	☐	☒

Findings

46. The visitor team considered the course specification and the course guide for this standard.

47. In considering Standard 5.1, the visitor team found that the course specification and the course guide confirm that the minimum academic level for the PG Dip Specialist Community Public Health Nursing (Health Visiting) programme is at postgraduate master's level (Level 7 FHEQ).

48. In considering Standard 5.2, the visitor team confirmed that LSBU meets the requirement in relation to its obligation to inform students about the need to register their award within five years. The course guide clearly stipulates this as it contains information about the process and time-scale for registering the award with the NMC. Students are informed that they must register the award with the NMC as soon as possible and within five years of completion. Students are also informed that failure to register the award with the NMC within this time will mean they must undertake additional education, training or experience to demonstrate achievement of the NMC

standards. LSBU also discusses this requirement with the students during course induction and prior to the end of the course.

49. Standards 5.3 to 5.5 are not applicable to this approval and were therefore not considered.

50. Based on the information made available, the visitor team considers that LSBU has in place the appropriate arrangements for Standard 5: Qualification to be awarded to enable the NMC standards to be met.