

Programme approval visit report

Section one

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| Programme provider name: | University of Birmingham |
| In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i> | Birmingham Community Healthcare NHS Foundation Trust South Warwickshire NHS Foundation Trust The Royal Orthopaedic Hospital NHS Foundation Trust The Royal Wolverhampton NHS Trust Birmingham Women's and Children's NHS Foundation Trust Sandwell and West Birmingham NHS Trust The Dudley Group NHS Foundation Trust University Hospitals Birmingham NHS Foundation Trust Private, voluntary and independent health care providers |
| Programmes reviewed: | Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V150 <input type="checkbox"/> Community practitioner nurse prescribing V100 <input type="checkbox"/> |
| Title of programme(s): | Practice certificate in independent prescribing |
| Academic level: | |
| Independent and supplementary nurse prescribing V300 | England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input checked="" type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11 |

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| <p>Community practitioner nurse prescribing V150</p> | <p>England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7</p> <p>SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11</p> |
| <p>Community practitioner nurse prescribing V100</p> | <p>England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7</p> <p>SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11</p> |
| <p>Date of approval visit:</p> | <p>12 November 2020</p> |
| <p>Programme start date:</p> <p>Independent and supplementary nurse prescribing V300</p> <p>Community practitioner nurse prescribing V150</p> <p>Community practitioner nurse prescribing V100</p> | <p><input type="text" value="1 March 2021"/></p> <p><input type="text"/></p> <p><input type="text"/></p> |
| <p>QA visitor:</p> | <p>Registrant Visitor: Rose Havelock</p> |

Section two

Summary of review and findings

The University of Birmingham (the university) is an approved education institution (AEI). The university takes a multi-professional approach to the delivery of its practice certificate in independent prescribing. The programme has been jointly delivered by the school of nursing and the school of pharmacy (the school), situated in the college of medical and dental sciences, since 2016. The school presents the independent/supplementary prescribing preparation programme (V300) for approval. The programme will be delivered at academic level seven. Students can complete as an independent programme or as part of an MSc in advanced clinical practice.

The proposed V300 programme is mapped to the Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society's (RPS) competency framework for all prescribers (RPS, 2016)), and the Standards for prescribing programmes (SPP) (NMC, 2018).

The programme is proposed to start on 1 March 2021. The programme is delivered part-time and there are two cohorts planned per year in March and September. The programme is delivered over 26 weeks.

The university doesn't offer pre-registration midwifery education but visiting arrangements are in place for a lead midwife for education (LME) from another AEI to support any midwife prescribing students.

Strategic and operational meeting structures ensure that there's co-production with practice learning partners (PLPs) and clear processes to ensure effective programme governance.

From documentary analysis and discussion at the approval visit we find that a regional approach has been taken to prepare PLPs for implementation of the Standards for student supervision and assessment (SSSA) (NMC, 2018).

The approval visit is undertaken remotely due to the COVID-19 pandemic.

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

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

Update 10 December 2020:

Evidence is provided that meets the condition.

The programme is recommended to the NMC for approval.

| Recommended outcome of the approval panel | |
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| Recommended outcome to the NMC: | <p>Programme is recommended to the NMC for approval <input type="checkbox"/></p> <p>Programme is recommended for approval subject to specific conditions being met <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p> |
| Conditions: | <p>Effective partnership working: collaboration, culture, communication and resources: None identified.</p> <p>Selection, admission and progression: None identified.</p> <p>Practice learning: Condition one: The programme team must develop a plan for ongoing support related to implementation of the SSSA within PLPs. (SSSA R5.1, R8.2; SPP R4.2)</p> <p>Assessment, fitness for practice and award: None identified.</p> <p>Education governance: management and quality assurance: None identified.</p> |
| Date condition(s) to be met: | 10 December 2020 |
| Recommendations to enhance the programme delivery: | <p>Recommendation one: For V300 stand-alone students consider strengthening communications between the practice assessor and academic assessor at progression meetings. (SSSA R9.6; SPP R4.2) (NMC and university recommendation)</p> <p>Recommendation two: To carefully monitor student feedback to ensure there's sufficient pharmacology</p> |

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| | content in the programme. (University recommendation) |
| Focused areas for future monitoring: | None identified. |

| Programme is recommended for approval subject to specific conditions being met | |
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| Commentary post review of evidence against conditions | |
| <p>The programme team has provided evidence of a plan for ongoing support related to the implementation of the SSSA within PLPs. The plan clearly evidences previous and future preparation and support for the integration of roles stipulated by the SSSA.</p> <p>Condition one is now met.</p> | |
| AEI Observations | Observations have been made by the education institution YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| Summary of observations made, if applicable | |
| Final recommendation made to NMC: | Programme is recommended to the NMC for approval <input checked="" type="checkbox"/> Recommended to refuse approval of the programme <input type="checkbox"/> |
| Date condition(s) met: | 10 December 2020 |

Section three

| NMC Programme standards |
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| Please refer to NMC standards reference points Standards for prescribing programmes (NMC, 2018) Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers) (NMC, 2018) Standards framework for nursing and midwifery education (NMC, 2018) Standards for student supervision and assessment (NMC, 2018) The Code: Professional standards of practice and behaviour for nurses and midwives (NMC, 2015 updated 2018) QA Framework for nursing, midwifery and nursing associate education (NMC, 2018) |

NMC Programme standards

[QA Handbook](#)

Partnerships

The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.

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

[Standards framework for nursing and midwifery education](#) (NMC, 2018)

Standard 1: The learning culture:

R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders

R1.13 work with service providers to demonstrate and promote inter-professional learning and working

Standard 2: Educational governance and quality:

R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders

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

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

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

R2.7 ensure that service users 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 service users contribute to student assessment

Standards for student supervision and assessment (NMC, 2018)

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 service users, registered and non-registered individuals, and other students as appropriate

Standard 2: Expectations of practice supervisors:

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

Standard 3: Practice supervisors: role and responsibilities:

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

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

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

Standard 7: Practice assessors: responsibilities:

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

Standard 9: Academic assessors: responsibilities:

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

Findings against the standard and requirements

Provide an evaluative summary about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders based on QA visitor (s) documentary analysis and discussions at the approval visit, taking into consideration the QA approval criteria

Documentary evidence and discussion at the approval visit indicate effective partnership working with PLPs, service users and students. Written evidence and discussion confirm that the university holds collaborative strategic meetings with PLPs including steering group meetings to develop and review programme content. Governance and quality are safeguarded as the programme team work within usual university processes and an external examiner who's an expert in prescribing reviews programme content and moderates assessment processes. Partnerships with students are effective and there's evidence of regional partnership working, for example, the programme team are members of a west midlands regional prescribing group. Student representatives are involved in programme review meetings and staff student committees. At the approval visit we met students and they provide assurance that their input to programme review and feedback is sought, welcomed and responded to. For example, student feedback led to changes in the numeracy assessment and the word count for another module.

Discussion at the approval visit confirms that partnership working is particularly evident with service users through the patient engagement in nursing (PEN) group who contribute to the design of the application forms in relation to recruitment and selection. They are involved in programme delivery in objective structured clinical examination (OSCE) assessments. Service users tell us that their contribution is valued by the programme team. Service users inform the content of the curriculum in relation to adherence strategies. PEN group members are involved in regular meetings with the programme team and contribute to ongoing review of the programme.

The programme team are active in regional networks and have co-produced with PLPs resources for the preparation of practice supervisors and practice assessors. There's evidence of partnership working with PLPs with a shared approach to theory and practice. This is evidenced in the practice portfolio; attendance of programme staff at the west midlands regional prescribing group and support offered by the programme team to practice assessors and practice supervisors.

The programme documentation reflects the SSSA. A collaborative approach to monitoring the implementation of the SSSA takes place using educational audit,

meetings with PLPs and discussions at the west midlands regional prescribing group.

The practice supervision and assessment handbook provides detail of how the implementation of the SSSA will work. The student handbook states the practice assessor, practice supervisor and academic assessor roles correlate to the roles of designated prescribing practitioner, practice supervisor and personal academic tutor, but at the visit PLPs are unclear about the processes involved. Discussion with PLPs confirm that medical practitioners will fulfil the practice assessor role. Practice partners tell us that in some settings the release of experienced non-medical prescribers to act as practice supervisors might be challenging.

While preparation has taken place, we find more work is needed to support implementation of the SSSA. The programme team are required to develop a plan to provide ongoing support related to the implementation of the SSSA within practice learning placements. (Condition one)

Given that PLPs are unclear about the process involved and how often discussion with academic assessors should take place it's recommended that the programme team consider strengthening the process whereby academic assessors and practice assessors communicate at progression points, for V300 stand-alone students. (Recommendation one)

Students on the MSc advanced clinical practice route have planned tripartite discussions.

In relation to providing feedback on their learning experience, in both theory and practice, students tell us that they feel their voice is heard and responded to. Students tell us about positive and supportive academic staff and the meetings that they're able to attend to provide feedback on their programme, including at programme management meetings and student staff committees. Students comment that feedback is listened to and informs programme development. Students tell us that they welcome the proposed changes to the programme structure. They express that the optional study days offered with the new programme will enable students to explore their individual learning needs. Students tell us that there's a desire for more pharmacology in the programme content. This position has been reflected in a university recommendation. (Recommendation two)

Documentary analysis and discussion at the visit with the programme team assure us that there are suitable systems and processes in place which ensure safe and effective learning. The programme documentation indicates, and students confirm, an educational philosophy which encourages students to self-direct their learning whilst developing professional and reflective skills. This is evidenced in the practice portfolio and the portfolio handbook. Students confirm the interdisciplinary learning and opportunities to work with and learn from service users.

A clear process for recruitment and selection is evident and PLPs are involved in the process. Applicants are required to identify their practice assessor and practice supervisor who complete the application form with the applicant. The NMC route lead confirms that all applications are scrutinised prior to enrolment on the programme, with the applicant having to secure employer support for protected time and agreement from practice assessors and practice supervisors. Separate arrangements for self-employed applicants require similarly robust checks. Arrangements for applicants who propose that the same person act as practice assessor and practice supervisor are reviewed on a case by case basis by the NMC route lead and are expected to be exceptional.

Discussion at the approval visit confirms that there's enough resource in place for programme delivery with route leads in place, and educators who are prescribing practitioners.

Students are drawn from and learn in a variety of settings and contexts and work with a diverse population. There's evidence of inter-professional working as applicants are drawn from pharmacy and allied health professions as well as nursing/midwifery, and teaching spaces are shared. A strength of the programme is the opportunities for interdisciplinary working and learning afforded by being situated in the college for medical and dental sciences.

The programme is delivered in a multi-professional context and students tell us that their learning needs, in relation to prescribing in a nursing context, are met by the programme. The programme is designed to meet the proficiencies and outcomes of the RPS (2016) competency framework for all prescribers and the SPP (NMC, 2018). The reflective practice portfolio is mapped to the RPS competency framework.

Most practice assessors are experienced assessors who have previously been designated medical practitioners. Students receive feedback from stakeholders, including at least two commentaries from service users, in the practice portfolio.

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 1: [Standards framework for nursing and midwifery education](#)

MET **NOT MET**

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 2: [Standards for student supervision and assessment](#)

MET **NOT MET**

Despite a regional approach to the preparation of the practice assessors and practice supervisors some medical colleagues (who had previously acted as designated medical practitioners) tell us that they didn't see the necessity of a

collaborative approach with the university. To support colleagues understanding of the SSSA, a condition is applied.

Condition one: The programme team must develop a plan for ongoing support related to implementation of the SSSA within PLPs. (SSSA R5.1, R8.2; SPP R4.2)

Post event review

Identify how the condition(s) is met

The programme team have provided a plan describing revised measures to ensure that practice assessors and practice supervisors are prepared and offered ongoing support in relation to implementation of the SSSA. The revised measures strengthen the partnership between the university and PLPs. These arrangements include a process to support new practice assessors and practice supervisors, including earlier identification at the application stage and the provision of an allocated mentor, who'll be a member of the programme team. The supervision and assessment preparation event will be mandatory for professionals new to the practice assessor and practice supervisor role. Arrangements for established practice assessors and practice supervisors include access to a range of resources and discussion of the requirements of the RPS competency framework for all prescribers and the competency framework for designated prescribing practitioners. Monitoring processes are strengthened to ensure that PLPs are informed when a practice assessor or practice supervisor attends a preparation event.

Condition one is now met.

Evidence:
School of nursing response, undated

Date condition(s) met: 10 December 2020

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

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 a registered nurse (level 1), a registered midwife or a SCPHN before being considered as eligible to apply for entry onto an NMC approved prescribing programme

R1.2 provide opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non- NHS employed registrants) to apply for entry onto an NMC approved prescribing programme

R1.3 confirm that the necessary governance structures are in place (including clinical support, access to protected learning time and employer support where appropriate) to enable students to undertake, and be adequately supported throughout, the programme

R1.4 consider recognition of prior learning that is capable of being mapped to the [RPS Competency Framework for all Prescribers](#)

R1.5 confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme

R1.6 confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas:

R1.6.1 Clinical/health assessment

R1.6.2 Diagnostics/care management

R1.6.3 Planning and evaluation of care

R1.7 ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme

Note: Education institutions and their practice learning partners may propose to transfer current students onto the new programme to meet the [Standards for prescribing programmes](#) and [Standards of proficiency for nurse and midwife prescriber \(adoption of the RPS Competency Framework for all Prescribers\)](#). If so, evidence must be provided to support this proposed transfer as part of the education institution's mapping process at Gateway 3.

Proposed transfer of current students to the programme under review

Demonstrate a robust process to transfer current students onto the proposed programme to ensure programme learning outcomes and proficiencies meet the [Standards for pre-registration midwifery programmes](#) (NMC, 2019).

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

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

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 registered nurse (level 1), a registered midwife or a SCPHN before being considered as

eligible to apply for entry onto an NMC approved prescribing programme (R1.1)

YES NO

- Evidence of selection process that demonstrates opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non-NHS employed registrants) to apply for entry onto an NMC approved prescribing programme. Evidence of this statement in documentation such as: programme specification; module descriptor, marketing material. Evidence of this statement on university web pages (R1.2)

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

- Evidence that the necessary governance structures are in place (including clinical support, access to protected learning time and employer support where appropriate) to enable students to undertake, and be adequately supported throughout, the programme (R1.3)

MET NOT MET

R1.3 is met. Documentary evidence and discussion with the programme team and PLPs confirm that there's a governance structure in place for students to be adequately supported throughout their study on the V300 programme.

The application process and forms outline arrangements that are robust. We found evidence of a recruitment and selection process which confirms the suitability of applicants and the NMC route lead checks their status on the NMC register. The practice supervisor and practice assessor as well as the line manager (or responsible person in the case of self-employed applicants) are required to make a signed declaration supporting the time required to complete the programme. PLPs confirm their commitment to the programme and the support of student prescribers.

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 the RPS *Competency Framework for all Prescribers* (R1.4)

YES NO

- Processes are in place to confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme (R1.5)

| | |
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| YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| <ul style="list-style-type: none"> Processes are in place to confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas (R1.6): <ul style="list-style-type: none"> - Clinical/health assessment - Diagnostics/care management - Planning and evaluation | |
| YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| <ul style="list-style-type: none"> Processes are in place to ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme (R1.7) | |
| YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| Proposed transfer of current students to the programme under review | |
| <p><i>From your documentary analysis and your meeting with students, provide an <u>evaluative summary</u> to confirm how the Standards for prescribing programmes and Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers) will be met through the transfer of existing students onto the proposed programme.</i></p> <p>Discussion at the approval visit confirms that there are no students transferring to the proposed programme. Assurance is given that current students will complete their studies on the current approved programme.</p> | |
| Proposed transfer of current students to the Standards for student supervision and assessment (SSSA) (NMC, 2018). | |
| <p>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.</p> <p>Discussion at the approval visit confirms that there are no students transferring to the proposed programme or the SSSA.</p> | |
| <p>Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to selection, admission and progression are met</p> | |
| YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| Outcome | |
| Is the standard met? | MET <input checked="" type="checkbox"/> NOT MET <input type="checkbox"/> |
| Date: 12 November 2020 | |
| Post event review | |
| Identify how the condition(s) is met: | |

N/A

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

N/A

MET

NOT MET

Standard 2: Curriculum

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

R2.1 ensure programmes comply with the NMC *Standards framework for nursing and midwifery education*

R2.2 ensure that all prescribing programmes are designed to fully deliver the competencies set out in the RPS *A Competency Framework for all Prescribers*, as necessary for safe and effective prescribing practice

R2.3 state the learning and teaching strategies that will be used to support achievement of those competencies

R2.4 develop programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice:

R2.4.1 stating the general and professional content necessary to meet the programme outcomes

R2.4.2 stating the prescribing specific content necessary to meet the programme outcomes

R2.4.3 confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing

R2.5 ensure that the curriculum provides a balance of theory and practice learning, using a range of learning and teaching strategies

R2.6 ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language

Findings against the standard and requirements

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

- There is evidence that the programme complies with the NMC Standards framework for nursing and midwifery education (R2.1)

YES

NO

- There is evidence that the programme is designed to fully deliver the competencies set out in the RPS *Competency Framework for all Prescribers*, as necessary for safe and effective prescribing practice (R2.2).

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

- Evidence of the learning and teaching strategies that will be used to support achievement of those competencies (R2.3)

MET **NOT MET**

R2.3 is met. Documentary analysis and discussion at the approval visit confirm that the programme team employs a range of learning and teaching strategies to support students in their achievement of competencies. Key features of the programme include the e-learning units and optional study days which support individual learning development within a blended learning strategy.

A blended approach to delivery, including the e-learning units, reflective writing, experiential learning, and case-based discussion are used. The requirement for a pharmacology exam and a numeracy assessment related to prescribing and calculation of medicines is met. These strategies underpin enquiry-based learning delivered in a blended format, that the programme team describe in the programme documentation. The combination of reflective writing, case-based review and stakeholder feedback evidence in the practice portfolio further supports this requirement.

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

- Evidence of programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice (R2.4):
 - stating the general and professional content necessary to meet the programme outcomes
 - stating the prescribing specific content necessary to meet the programme outcomes
 - confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing

YES **NO**

- The programme structure demonstrates an equal balance of theory and practice learning. This is detailed in the designated hours in the module descriptors and student handbook. A range of learning and teaching strategies are detailed in the programme specification, programme handbook and module descriptors with theory / practice balance detailed at each part of the programme and at end point. There are appropriate module aims, descriptors and outcomes specified. (R2.5)

YES **NO**

If relevant to the review

- Evidence to ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language. (R2.6)

YES NO N/A

The programme is delivered in England.

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

YES NO

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

YES NO

Outcome

Is the standard met?

MET NOT MET

Date: 12 November 2020

Post event review

Identify how the condition(s) is met:

N/A

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

MET NOT MET

N/A

Standard 3: Practice learning

Approved education institutions must:

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

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

R3.2 ensure that practice learning complies with the NMC [Standards for student supervision and assessment](#)

R3.3 ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment

R3.4 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](#)

Findings against the standard and requirements

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

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

MET **NOT MET**

R3.1 is met. Discussion with the programme team and documentary analysis provide assurance that suitable and effective arrangements and governance for practice learning are in place for all applicants. Consideration has been given to the governance of self-employed applicants. The programme team require a statement from an identified responsible person to provide a reference for the self-employed applicant. The responsible person must also be a registered healthcare professional. Applicants are required to provide evidence of educational audit in their practice learning environment. The NMC route lead provides assurance that each individual application form is scrutinised before a decision is made to support the application.

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 (R3.2)

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

- Evidence to ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment (R3.3)

MET **NOT MET**

R3.3 is met. The school provides a blended learning approach which includes the proportionate and effective use of simulation-based learning and technology. Students tell us that the e-learning modules developed by the school of pharmacy are very helpful in supporting student learning. A virtual learning environment is provided for students to access programme material and documentation. Simulated learning is provided in module two using the school's associate clinical educators (ACE) to inform OSCEs.

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

| | | |
|---|---|----------------------------------|
| <ul style="list-style-type: none"> 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 <i>Standards for student supervision and assessment</i> (R3.4) | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to practice learning are met | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to practice learning are met | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| Outcome | | |
| Is the standard met? | MET <input checked="" type="checkbox"/> | NOT MET <input type="checkbox"/> |
| Date: 12 November 2020 | | |
| 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 <input type="checkbox"/> | NOT MET <input type="checkbox"/> |
| N/A | | |

| |
|--|
| Standard 4: Supervision and assessment |
| Approved education institutions, together with practice learning partners, must: |
| R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education |
| R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC Standards for student supervision and assessment |
| R4.3 appoint a programme leader in accordance with the requirements of the NMC Standards framework for nursing and midwifery education . The programme leader of a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience |
| R4.4 ensure the programme leader works in conjunction with the lead midwife for education (LME) and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes |

R4.5 ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking

R4.5.1 In exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor for that part of the programme where the prescribing student is undergoing 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 assessor roles to be carried out by the same person

R4.6 ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking

R4.7 provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes

R4.8 assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice

R4.9 ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies. This includes all students:

R4.9.1 successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80 percent), and

R4.9.2 successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100 percent)

Findings against the standards and requirements

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

- There is evidence of how the programme will ensure how support, supervision, learning and assessment provided complies with the NMC [Standards framework for nursing and midwifery education](#) (R4.1)

MET **NOT MET**

R4.1 is met. Mapping documentation demonstrates how the programme complies with the SFNME. Discussion at the approval visit confirms that the arrangements for the preparation of practice assessors and practice supervisors were agreed with PLPs who form (along with local universities) the west midlands regional prescribing group.

The practice supervision and assessment handbook, portfolio handbook and portfolio (PebblePad document) describe the roles and responsibilities of the practice assessor, practice supervisor and academic assessor. The practice assessor role will be undertaken primarily by former designated medical

practitioners. Non-medical prescribing nurses and registered healthcare professionals will undertake the role of practice supervisor. A regional approach has been taken to support the preparation of practice supervisors and practice assessors.

The west midlands regional prescribing group continue to have oversight of this process. The programme team have effective governance and review processes in place to review how these arrangements are effective. In addition, academic assessors and the programme lead tell us that they'll provide support to practice assessors and practice supervisors in practice through regular contact and update meetings.

- There is evidence of how the [Standards for student supervision and assessment](#) are applied to the programme. There are processes in place to identify the supervisors and assessors along with how they will be prepared for their roles (R4.2)

MET **NOT MET**

R4.2 is not met. Practice assessors and practice supervisors are confirmed as part of the application process. PLPs tell us that the programme team have held preparatory meetings with practice assessors and practice supervisors for the proposed programme. The programme documentation makes clear that the role of practice assessor will be undertaken by a designated prescribing practitioner (previously designated medical practitioner) and this is explained in the programme documentation. The portfolio indicates that there should be three progression meetings between the student and the practice assessor but the PLPs weren't clear how academic assessors would contribute to this process. It's not clear that PLPs understood the role of practice supervisors or academic assessors. PLPs indicate that collaboration with the university isn't necessary. PLPs tell us that they know who to contact if there's any concern about the conduct or proficiency of a prescribing student.

While documentary analysis indicates the adoption of the titles of practice assessor, practice supervisor and academic assessor within programme documentation and existing arrangements for student supervision, we find that this isn't consistently adopted in practice learning environments. Discussion at the approval visit indicates that designated medical practitioners haven't fully adopted the move to the SSSA and the associated change necessary in working with practice supervisors and academic assessors. Some feel that the involvement of the university isn't necessary while others don't fully appreciate the scope of the requirements of the SSSA. In order to support PLPs in the implementation of the SSSA we require the programme team to develop a plan to offer ongoing support to PLPs to address this. (Condition one)

It's unclear if there are consistent arrangements in place to support the tripartite nature of progression meetings. We find that there are opportunities to strengthen the plans for collaborative discussion at the beginning and middle point of the

programme for students on the stand alone V300 programme. (Recommendation one)

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

- Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience (R4.3)
YES NO
- Evidence of the programme leader working in conjunction with the LME and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes (R4.4)
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

- Processes are in place to ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking (R4.5)
MET NOT MET

R4.5 is met. The application form and process have been collaboratively developed between local universities and PLPs through the west midlands regional prescribing group. The applicant is required to provide details of the practice assessor in the application process. The programme team verify suitability and willingness of the medical practitioner to undertake the role of practice assessor and the practice assessor completes the application form to say they'll act in this role. The programme team confirm this with the nominated practice assessor.

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

- Processes are in place to ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking (R4.6)
YES NO
- Processes are in place to provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes (R4.7)
YES NO

- Processes are in place to assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice (R4.8)

YES NO

- Processes are in place to ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies (R4.9). This includes:
 - successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and
 - successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100%).

YES NO

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

YES NO

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

YES NO

At the approval visit PLPs didn't provide assurance that they'd fully implement the SSSA and it's clear that the existing arrangements would continue in relation to supervision and assessment. Further preparation is necessary to ensure that practice assessors and practice supervisors receive ongoing support in order that they may reflect on and develop their role. (Condition one)

Outcome

Is the standard met?

MET NOT MET

At the approval visit PLPs didn't provide assurance that they'd fully implement the SSSA and it's clear that the existing arrangements would continue in relation to supervision and assessment. Further preparation is necessary to ensure that practice assessors and practice supervisors receive ongoing support in order that they may reflect on and develop their role.

Condition one: The programme team must develop a plan for ongoing support related to implementation of the SSSA within PLPs. (SSSA R5.1, R8.2; SPP R4.2)

Date: 12 November 2020

Post event review

Identify how the condition(s) is met:

The programme team have provided a plan that describes arrangements to provide ongoing support related to the implementation of the SSSA.

Condition one is now met.

Evidence:
School of nursing response, undated

Date condition(s) met: 10 December 2020

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

Standard 5: Qualification to be awarded

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

R5.1 following successful completion of an NMC approved programme of preparation, confirm that the registered nurse (level 1), midwife or SCPHN is eligible to be recorded as a prescriber, in either or both categories of:

R5.1.1 a community practitioner nurse or midwife prescriber (V100/V150), or
R5.1.2 a nurse or midwife independent/supplementary prescriber (V300)

R5.2 ensure that participation in and successful completion of an NMC approved prescribing programme leads to accreditation at a level equivalent to a bachelor's degree as a minimum award

R5.3 inform the student that the 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 retake and successfully complete the programme in order to qualify and register their award as a prescriber

R5.4 inform the 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 against the standards and requirements

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

- Processes are in place to ensure following successful completion of an NMC approved programme of preparation, confirm that the registered nurse (level 1), midwife or SCPHN is eligible to be recorded as a prescriber, in either or both categories of:
 - a community practitioner nurse (or midwife) prescriber (V100/V150), or
 - a nurse or midwife independent/supplementary prescriber (V300) (R5.1)

YES NO

- Evidence to ensure that successful participation in and completion of an NMC approved prescribing programme leads to accreditation at a level equivalent to a bachelor's degree as a minimum award (R5.2)

| | | |
|---|---|----------------------------------|
| | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| <ul style="list-style-type: none"> Processes are in place to inform the student that the 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 retake and successfully complete the programme in order to qualify and register their award as a prescriber (R5.3) | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| <ul style="list-style-type: none"> Processes are in place to inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice (R5.4) | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| Outcome | | |
| Is the standard met? | MET <input checked="" type="checkbox"/> | NOT MET <input type="checkbox"/> |
| Date: 12 November 2020 | | |
| 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 <input type="checkbox"/> | NOT MET <input type="checkbox"/> |
| N/A | | |

Section four

Sources of evidence

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

| Key documentation | YES | NO |
|--|-------------------------------------|-------------------------------------|
| Programme document, including proposal, rationale and consultation | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Programme specification(s) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Module descriptors | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Student facing documentation including: programme handbook | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Student university handbook | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Practice assessment documentation | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Practice placement handbook | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| PAD linked to competence outcomes, and mapped against RPS <i>A Competency Framework for all Prescribers</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC, 2018) (Gateway 1) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Mapping document providing evidence of how the <i>Standards for student supervision and assessment</i> (NMC, 2018) apply to the programme(s) (Gateway 2) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Mapping document providing evidence of how the programme meets the <i>Standards for prescribing programmes</i> and RPS <i>Standards of proficiency for prescribers</i> (NMC, 2018) (Gateway 3) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Curricula vitae for relevant staff | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Written placement agreements between the education institution and associated practice learning partners to support the programme intentions. | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If you stated no above, please provide the reason and mitigation There's no specific student university handbook. The student programme handbook included information about university regulations. | | |
| List additional documentation: Post visit: School of nursing response, undated | | |

Additional comments:
None identified.

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

| | YES | NO |
|--|-------------------------------------|--------------------------|
| Senior managers of the AEI/education institution with responsibility for resources for the programme | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Senior managers from associated practice learning partners with responsibility for resources for the programme | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Programme team/academic assessors | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Practice leads/practice supervisors/ practice assessors | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Students | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If yes, please identify cohort year/programme of study: Five prescribing students. One student was a representative from the 2019 cohort and four were from previous cohorts. | | |
| Service users and carers | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If you stated no above, please provide the reason and mitigation | | |
| Additional comments None identified. | | |

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

| | YES | NO |
|--|-------------------------------------|-------------------------------------|
| Specialist teaching accommodation (e.g. clinical skills/simulation suites) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Library facilities | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Technology enhanced learning Virtual learning environment | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Educational audit tools/documentation | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Practice learning environments | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes, state where visited/findings As part of the review the e-learning units were accessed. Students commented at the approval visit that the virtual learning environment and the e-learning units were effective in supporting their learning. | | |
| If you stated no above, please provide the reason and mitigation The university is an established AEI and visits to facilities weren't required. | | |
| Additional comments: None identified. | | |

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

Issue record

Final Report

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|---------------|--------------------|-------|------------------|
| Author(s): | Rose Havelock | Date: | 16 November 2020 |
| Checked by: | Ian Felstead-Watts | Date: | 14 December 2020 |
| Submitted by: | Leeann Greer | Date: | 22 December 2020 |
| Approved by: | Emiko Hughes | Date: | 23 December 2020 |