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Programme approval visit report

<u>**Section one**</u>

Programme provider name:	University of York
In partnership with: *(Associated practice learning partners involved in the delivery of the programme)*	Leeds and York Partnership NHS Foundation Trust York Hospitals NHS Foundation Trust Tees, Esk and Wear Valleys NHS Foundation Trust Harrogate and District NHS Foundation Trust South West Yorkshire Partnership NHS Trust Humber NHS Foundation Trust Private, voluntary and independent health care providers Education and social care providers
Programme(s) reviewed: Programme: Independent and Supplementary Nurse Prescribing Title of programme: Independent and Supplementary Prescribing for Non-Medical Prescribers (Nurses, Midwives & Allied Health Professionals) Programme start date: 1 September 2020 Academic level(s): England, Wales, Northern Ireland: Level 6 Level 7	
Date of approval	19 March 2020
QA visitor(s):	Registrant Visitor: Georgina Ritchie

Summary of review and findings
The University of York (UoY), department of health sciences (the department), present the independent and supplementary prescribing preparation programme for NMC approval. The programme is mapped against the NMC Standards for prescribing programmes (SPP) (NMC, 2018) and Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS, 2016) competency framework for all prescribers) (NMC, 2018). The multi-professional programme at academic level six and seven is delivered over 14 weeks. It's accessed at academic level seven by students undertaking the MSc advanced clinical practice. It can be studied as a standalone programme at academic levels six and seven. The programme can be accessed by allied health professionals (AHPs) and pharmacists. Documentary evidence and the approval process demonstrates evidence of effective partnership working between UoY and key stakeholders; there's active engagement with practice learning partners (PLPs) at strategic and operational levels. PLPs confirm there's effective communication with the programme team. Arrangements at programme level don't meet the Standards framework for nursing and midwifery education (SFNME). Arrangements at programme level don't meet the Standards for student supervision and assessment (SSSA). The programme is recommended to the NMC for approval subject to two NMC conditions. There's one university condition. One NMC recommendation and two university recommendations are made. This visit is undertaken remotely during Covid-19 pandemic. Updated 20 April 2020: UoY has provided documentation to meet the NMC conditions and university condition. All conditions are met. The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	Programme is recommended for approval subject to specific conditions being met
Conditions: *Please identify the standard and requirement the condition relates to under the relevant key risk theme.* *Please state if the condition is AEI/education institution in nature or specific to NMC standards.*	**Effective partnership working: collaboration, culture, communication and resources:** None identified **Selection, admission and progression:** None identified **Practice learning:** None identified **Assessment, fitness for practice and award:** None identified **Education governance: management and quality assurance:** Condition one: To provide a detailed and robust process for examining governance procedures for self-employed applicants. (SPP R1.3, R3.1) Condition two: To provide a plan and associated timeline to demonstrate how non-medical prescribing practice assessors and practice supervisors will be prepared to adopt the SSSA in readiness for the start of the programme. (SFNME R2.4; SSSA R5.1, R8.1; SPP R4.1, R4.2) Condition three: Ensure all documentation relating to the programme is correct and consistent including hours calculations in module descriptions, typographical errors and module title across all documentation. (University condition)
Date condition(s) to be met:	20 April 2020
Recommendations to enhance the programme delivery:	Recommendation one: The programme team are recommended to capture in a plan, arrangements they are putting in place to enable service users and carers to contribute to teaching and learning on the new prescribing programme. (SFNME R1.12)

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	Recommendation two: The programme team should consider further work in distinguishing the differences between academic level six and seven modules, particularly in relation to assessment guidelines and marking criteria. (University recommendation) Recommendation three: Consider whether the ability to critically appraise is a skill that should be assessed in the academic level six module as well as the academic level seven module. (University recommendation)
Focused areas for future monitoring:	None identified

Programme is recommended for approval subject to specific conditions being met	
Commentary post review of evidence against conditions:	
Revised copies of the programme documentation provide evidence that the conditions are met.	

Commentary post review of evidence against conditions:

Revised copies of the programme documentation provide evidence that the conditions are met.

The revised programme documentation clearly details the process for examining governance procedures for self-employed applicants.

Condition one is met.

The revised programme documentation identifies how practice assessors and practice supervisors will be prepared to adopt the SSSA in readiness for the start of the programme.

Condition two is met.

The revised programme documentation has been amended to ensure this is correct and consistent. The hours calculations in module descriptions, typographical errors and module title are accurate.

University condition three is met.

The programme is recommended for approval.

AEI Observations	**Observations have been made by the education institution** No
Summary of observations made, if applicable	
Final recommendation made to NMC:	Programme is recommended to the NMC for approval
Date condition(s) met:	20 April 2020

Section three

NMC Programme standards

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)

QA framework for nursing, midwifery and nursing associate education (NMC, 2018)

QA Handbook (October 2018)

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

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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

We found examples of effective partnership working between UoY and key stakeholders. Documentary evidence and the approval process confirm there's a partnership approach to the development of the proposed programme. PLPs tell us there's clear and consistent links with the programme team which promotes collaborative partnership working. PLPs confirm they're aware of the SSSA; they didn't clearly know the detail of the organisational approach planned by UoY to introduce the SSSA in the programme. (Condition two)

PLPs confirm the programme team encourage and act on their views about programme development and delivery. PLPs tell us they work in partnership with the programme team to ensure practice learning is supported. There are regular meetings in practice learning environments these include students, PLPs and the programme lead. PLPs tell us this contributes to positive learning experiences for students and PLPs.

There's documentary evidence of a UoY service user and carer strategy. The

programme team tell us service users and carers are involved in the development and delivery of the programme. Service users and carers support the delivery of a specific shared decision-making session. They feedback on experiences in the practice learning environment this is recorded in the e-portfolio. Service user and carer representatives confirm they are members of the UoY service and carer group. They tell us they anticipate future involvement in programme development and confirm the programme team listen to their views. A plan which confirms how service user and carer involvement can further enhance the proposed programme should be considered. (Recommendation one)

Documentary evidence and the approval process confirm student involvement in the development of the programme. The student voice is captured through programme evaluation; students tell us their views are listened to, acknowledged and acted on by the programme team. Students describe support systems in place in the university and the practice learning environment which ensure they are empowered and prepared for prescribing practice. They understand the requirements of the SSSA and tell us they are aware they will be future practice assessors and practice supervisors.

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

Not Met

It's not clear how preparation for the practice assessor and practice supervisor roles will be operationalised.

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

Not Met

It's not clear how preparation for the practice assessor and practice supervisor roles will be operationalised.

If not met, state reason

It's not clear how preparation for the practice assessor and practice supervisor roles will be operationalised.

Condition two: To provide a plan and associated timeline to demonstrate how non-

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medical prescribing practice assessors and practice supervisors will be prepared to adopt the SSSA in readiness for the start of the programme. (SFNME R2.4; SSSA R5.1, R8.1; SPP R4.1, R4.2)

Post Event Review

Identify how the condition is met:

Condition two: UoY has provided revised documentation which clearly identifies a plan and associated timeline to demonstrate how practice assessors and practice supervisors will be prepared to adopt the SSSA in readiness for the start of the programme.

Evidence:

Revised, practice supervisor, practice assessor and designated prescribing practitioner handbook, undated

Condition two is met.

Date condition(s) met: 20 April 2020

Revised outcome after condition(s) met:

Met

Condition two is 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

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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 programmesand 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.

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

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

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)

Not Met

R1.3 is not met. The application process requires line managers to confirm support for applicants to undertake the programme. They must sign the application form to verify the applicant is appropriately qualified and experienced and that governance structures are in place to assure protected learning time. Students confirm there's support in the practice learning environment. They tell us practice and theory learning time is protected.

Practice assessors' support must be confirmed at application. They complete a self-evaluation questionnaire to confirm they meet requirements and are prepared for the practice assessment role. This provides the opportunity to identify further support to fulfil the role. The programme team check the professional registration of all practice assessors.

PLP prescribing leads support the application process. PLPs and students tell us applications are reviewed and agreed by prescribing leads before applicants apply to the university. Prescribing lead representatives tell us they meet with students to ensure they're adequately supported throughout the duration of the programme.

Documentary evidence doesn't clearly detail how governance processes are managed for students who are self-employed. The programme team tell us they review recent Care Quality Commission (CQC) reporting to ensure there's no issues raised in the practice learning environment. They check the practice environment educational audit status. The programme team tell us if there's issues in these areas and protected learning can't be confirmed it's unlikely they will accept a self-employed application. There's limited assurance of the process to

ensure governance arrangements for self-employed applicants are comparable with NHS employed applicants. (Condition one)

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

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)

Yes

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):

-Clinical/health assessment

-Diagnostics/care management

-Planning and evaluation

Yes

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

Proposed transfer of current students to the programme under review

From your documentary analysis and your meeting with students, provide an evaluative summary to confirm how the Standards for 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**

The programme team confirm students will not transfer to the proposed programme.

Assurance is provided that Gateway 1: Standards framework for nursing and

midwifery education relevant to selection, admission and progression are met

 Yes

Outcome

Is the standard met?

Not Met

There's limited assurance of the process to ensure governance arrangements for self-employed applicants are comparable with NHS-employed applicants.

Condition one: To provide a detailed and robust process for examining governance procedures for self-employed applicants. (SPP R1.3, R3.1)

Date: *19 March 2020*

Post Event Review

Identify how the condition is met:

Condition one: UoY has provided revised documentation which clearly identifies how they examine the governance procedures for self-employed applicants. The revised application flowchart ensures there's a robust process in place.

Evidence:

Revised, flowchart for self-employed applications, undated

Condition one is met.

Date condition(s) met: 20 April 2020

Revised outcome after condition(s) met:

Met

Condition one is met.

Standard 2 Curriculum

Approved education 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

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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

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

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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

R2.3 is met. Learning and teaching strategies include lectures, seminars, tutorials, and self-directed learning. The programme team tell us students receive formative feedback, for example quizzes, to support preparation for summative assessments. Programme content is mapped the RPS competencies. Students and PLPs tell us the virtual learning environment (VLE) provide the information required to support learning. The programme team tell us the VLE supports discussion boards, encouraging students to engage with each other. The VLE provides access to the online version of the British national formulary (BNF), programme teaching materials and electronic reading lists.

Practice learning is evidenced in an e-portfolio used to support progression towards achievement of the RPS competencies. The e-portfolio is mapped against the RPS. There's evidence of a robust process ensuring students, academic assessors, practice assessors and practice supervisors are able to contribute to ongoing progression. The e-portfolio evidences practice assessor and academic assessor confirmation of achievement of competencies. Students tell us the e-portfolio supports learning. PLPs tell us it promotes a collaborative approach to practice learning.

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

The programme structure demonstrates an equal balance of theory and

practice learning. This is detailed in the designated hours in the module descriptors and practice learning allocations. 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

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)

N/A

The programme is only delivered in England.

Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to curricula and assessment are met

Yes

Assurance is provided that Gateway 2: <u>Standards for student supervision and assessment</u> relevant to curricula and assessment are met

Yes

Outcome
Is the standard met? *Met* **Date:** *19 March 2020*
Post Event Review
Identify how the condition is met:
Date condition(s) met: *N/A* **Revised outcome after condition(s) 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 <u>Standards for student supervision and assessment</u>

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 <u>Standards for student supervision and assessment</u>

Evidence provides assurance that the following QA approval criteria are met

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).

Not Met

R3.1 is not met. There's evidence of suitable and effective arrangements and governance for practice learning for NHS applicants. Prescribing leads review applications before an application to the programme can be made. They confirm applicant suitability for a prescribing role and capacity within the practice learning environment to support learning. Prescribing leads tell us they undertake this process in partnership with the applicants' line manager.

Students tell us prescribing leads provide them with support in the practice learning environment. They confirm there's ongoing review by prescribing leads to ensure protected learning is maintained.

Educational audits are undertaken to ensure practice learning environments can support learning. The programme team tell us the application process requires confirmation that a suitable educational audit has been undertaken and that it's up to date.

There's limited evidence of support for self-employed applicants. The programme team acknowledge governance arrangements specifically tailored to those applicants who are self-employed isn't comparable to NHS applicants.

There must be assurance that comparable governance arrangements are in place to ensure protected learning time for all students. (Condition one)

There is evidence that the programme complies with the NMC Standards for student supervision and assessment (R3.2)

Yes

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

R3.3 is met. Documentary evidence confirms there's a range of simulation-based opportunities supported by the VLE. A flipped classroom approach and recorded lectures support flexible learning. The VLE supports preparation for summative assessments.

The development of practice learning plans and prescribing assessment skills are recorded in the e-portfolio. Prescription writing skills are developed in a workshop. The e-portfolio require evidence of written prescriptions.

Practice assessors, practice supervisors, prescribing leads and the academic assessor can access the e-portfolio. PLPs tell us this provides a transparent and collaborative approach and supports practice learning.

Processes are in place to ensure that students work in partnership with the education provider and their practice learning partners to arrange

supervision and assessment that complies with the NMC Standards for student supervision and assessment. (R3.4)

Yes

Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to practice learning are met

Yes

Assurance is provided that Gateway 2: <u>Standards for student supervision and assessment</u> relevant to practice learning are met

Yes

Outcome

Is the standard met?

Not Met

There's limited assurance of the process to ensure governance arrangements for self-employed applicants are comparable with NHS employed applicants.

Condition one: To provide a detailed and robust process for examining governance procedures for self-employed applicants. (SPP R1.3, R3.1)

Date: *19 March 2020*

Post Event Review

Identify how the condition is met:

Condition one: UoY has provided revised documentation which clearly identifies how they examine the governance procedures for self-employed applicants. The revised application flowchart ensures there's a robust process in place.

Evidence:

Revised, flowchart for self-employed applications, undated

Condition one is met.

Date condition(s) met: 20 April 2020

Revised outcome after condition(s) met:

Met

Condition one is met.

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 aprescribing 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 theprogramme 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%), 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%).

Evidence provides assurance that the following QA approval criteria are 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)

Not Met

R4.1 is not met. Documentary evidence confirms the programme team have multi-professional backgrounds. They include registered nurses, prescribers, pharmacists and a midwife prescriber. The lead midwife for education (LME) is involved in the programme. The LME reviews midwife applications and meets regularly with the midwife prescriber who is part of the programme team to discuss midwifery student progress. PLPs contribute to the delivery of the programme as guest lecturers.

Documentary evidence and the approval process confirm communication between academic assessors and practice assessors is recorded in the e-portfolio. PLPs and the programme team describe their experiences of partnership approaches to resolve issues and concerns about student performance through personal action plans.

Documentary evidence and the approval process confirm there's processes in place for students to evaluate practice learning. Students tell us their feedback is welcomed, listened to and acted upon. Students tell us practice learning environments provide a quality experience where learning is encouraged and supported.

The programme team describe the application of the SSSA to the programme.

They tell us practice assessors, practice supervisors and academic assessors are prepared for the role. It's not clear how this will be operationalised and applied to the programme. PLPs weren't able to clearly identify how the SSSA will be operationalised in the programme.

There's no implementation plan and timeline to confirm how practice assessors and practice supervisors will be prepared for their roles. (Condition two)

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)

Not Met

R4.2 is not met. Documentary evidence and the approval visit confirm there's a strategic approach to the implementation of the SSSA for all NMC programmes. Preparation workshops are delivered for all practice assessors and practice supervisors across practice learning environments. The role and preparation of academic assessors is clearly detailed; this is the responsibility of UoY. The programme team demonstrate a sound understanding of the application of the SSSA to the programme. The programme team tell us academic assessors will further support students in a pastoral role. Documentary evidence confirms the academic assessors are supported through ongoing professional development and the appraisal process to enable them to undertake the role.

A practice assessor and practice supervisor handbook details clear information related to the roles and responsibilities for supervision and assessment in practice. The programme team tell us that, in addition to the handbook, practice assessors and practice supervisors attend updates. They are further supported in the practice learning environment by academic assessors and prescribing leads.

PLPs tell us they're not clear how the practice assessor and practice supervisor roles will be applied to the programme. They tell us they haven't received information related to preparation for the role. It's not clear how preparation for the practice assessor and practice supervisor roles will be operationalised. (Condition two)

Students confirm they're aware of the SSSA. They tell us this approach will enhance existing student support. Students tell us they're aware they will be future practice assessors and practice supervisors.

Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience (R4.3)

Yes

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

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

R4.5 is met. The application process requires identification of practice assessors and practice supervisors. Practice assessors complete a self-evaluation checklist to ensure they are an experienced prescriber working within the scope of the student's future prescribing role and that they're prepared for the role. The checklist supports identification of further personal and professional learning and development needs. The prescribing team undertake practice assessor professional registration checks to ensure they meet the requirements of the assessor role

Documentary evidence and the programme team confirm in exceptional situations where the practice assessor and practice supervisor are the same person there's a process to support this. They co-ordinate a buddy system; alternative placement learning environments are encouraged to support students to have access to practice supervisors. The programme team tell us in exceptional circumstances they visit and monitor practice learning environments to ensure students are appropriately supported.

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

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

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

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

Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to supervision and assessment are met Please provide narrative for any exceptions

No

It's not clear how preparation for the practice assessor and practice supervisor roles will be operationalised.

Assurance is provided that Gateway 2: <u>Standards for student supervision and assessment</u> relevant to supervision and assessment are met Please provide narrative for any exceptions

No

It's not clear how preparation for the practice assessor and practice supervisor roles will be operationalised.

Outcome

Is the standard met?

Not Met

It's not clear how preparation for the practice assessor and practice supervisor roles will be operationalised.

Condition two: To provide a plan and associated timeline to demonstrate how non-medical prescribing practice assessors and practice supervisors will be prepared to adopt the SSSA in readiness for the start of the programme. (SFNME R2.4; SSSA R5.1, R8.1; SPP R4.1, R4.2)

Date: *19 March 2020*

Post Event Review

Identify how the condition is met:

Condition two: UoY has provided revised documentation which clearly identifies a plan and associated timeline to demonstrate how practice assessors and practice supervisors will be prepared to adopt the SSSA in readiness for the start of the programme.

Evidence:

Revised, practice supervisor, practice assessor and designated prescribing practitioner handbook, undated

Condition two is met.

Date condition(s) met: 20 April 2020

Revised outcome after condition(s) met:

Met

Conditions two is 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 asa 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

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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

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

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

Processes are in place to inform the student that they may only prescribe once their
                              prescribing qualification has been annotated on the

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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

Assurance is provided that the <u>Standards framework for nursing and midwifery education</u> relevant to the qualification to be awarded are met

Yes

Outcome

Is the standard met?

Met
Date: *19 March 2020*

Post Event Review

Identify how the condition is met:

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

N/A

Section four

Source 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	Yes
Programme specification(s)	Yes
Module descriptors	Yes
Student facing documentation including: programme handbook	Yes
Student university handbook	Yes
Practice assessment documentation	Yes
Practice placement handbook	Yes
PAD linked to competence outcomes, and mapped against RPS A Competency Framework for all Prescribers	Yes
Mapping document providing evidence of how the education institution has met the Standards framework for nursing and midwifery education (NMC, 2018)	Yes
Mapping document providing evidence of how the programme meets the Standards for prescribing programmes and RPS Standards of proficiency for prescribers (NMC, 2018)	Yes
Mapping document providing evidence of how the Standards for student supervision and assessment (NMC, 2018) apply to the programme(s)	Yes
Curricula vitae for relevant staff	Yes
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website	Yes
Written confirmation by the education institution and associated practice learning partners to support the programme intentions	Yes
List additional documentation: AEI NMC self-assessment 2018-2019, 15 February 2019 Presentation by the programme team, 19 March 2020 Post visit documentation: Revised, service user and carer strategy, undated Revised, flowchart for self-employed applications, undated Revised, practice supervisor, practice assessor and designated prescribing practitioner handbook, undated Revised, module descriptor level six, undated Revised, module descriptor level seven, undated	
If you stated no above, please provide the reason and mitigation	

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Additional comments:

During the visit the visitor(s) met the following groups	Yes/No
Senior managers of the AEI/education institution with responsibility for resources for the programme	Yes
Senior managers from associated practice learning partners with responsibility for resources for the programme	Yes
Programme team/academic assessors	Yes
Practice leads/practice supervisors/ practice assessors	Yes
Students	Yes
If yes, please identify cohort year/programme of study: 2019/20 cohort x 3	
Service users and carers	Yes
If you stated no above, please provide the reason and mitigation	
Additional comments:	

The visitor(s) viewed the following areas/facilities during the visit:	Yes/No
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	No
Library facilities	No
Technology enhanced learning / virtual learning environment	No
Educational audit tools/documentation	No
Practice learning environments	No
If yes, state where visited/findings:	
If you stated no above, please provide the reason and mitigation Not necessary, as an established approved education institution.	
Additional comments:	

Issue record			
Final Report			
Author	Georgina Ritchie	Date	28 March 2020
Checked by	Bernadette Martin	Date	24 April 2020
Submitted by	Amy Young	Date	30 April 2020
Approved by	Helen Shapcott	Date	4 May 2020