

Programme approval visit report

Section one

Programme provider name:	University of Brighton
In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i>	<p>NHS Portsmouth CCG</p> <p>NHS Brighton and Hove CCG</p> <p>NHS High Wealds Lewes Havens CCG</p> <p>East Sussex Healthcare NHS Trust</p> <p>NHS Coastal West Sussex CCG</p> <p>Western Sussex Hospitals NHS Foundation Trust</p> <p>Sussex Partnership NHS Foundation Trust</p> <p>NHS Horsham and Mid Sussex CCG</p> <p>Sussex Community NHS Foundation Trust</p> <p>Brighton and Sussex University Hospitals NHS Trust</p> <p>NHS Eastbourne, Hailsham and Seaford CCG</p> <p>Kent Community Health NHS Foundation Trust</p> <p>South East Coast Ambulance Service NHS Foundation Trust</p> <p>Queen Victoria Hospital NHS Foundation Trust</p> <p>Surrey and Sussex Healthcare NHS Trust</p> <p>NHS Crawley CCG</p> <p>NHS West Kent and Medway CCG</p>

	<p>Maidstone and Tunbridge Wells NHS Trust</p> <p>NHS Hastings and Rother CCG</p> <p>Private, voluntary and independent health care providers</p> <p>Education and social care providers</p>
Programmes reviewed:	<p>Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/></p> <p>Community practitioner nurse prescribing V150 <input type="checkbox"/></p> <p>Community practitioner nurse prescribing V100 <input checked="" type="checkbox"/></p>
Title of programme(s):	<p>Independent prescribing</p> <p>Community practitioner nurse prescribing</p>
Academic level:	
Independent and supplementary nurse prescribing V300	<p>England, Wales, Northern Ireland</p> <p><input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input checked="" type="checkbox"/> Level 7</p> <p>SCQF</p> <p><input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10</p> <p><input type="checkbox"/> Level 11</p>
Community practitioner nurse prescribing V150	<p>England, Wales, Northern Ireland</p> <p><input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7</p> <p>SCQF</p> <p><input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10</p> <p><input type="checkbox"/> Level 11</p>

<p>Community practitioner nurse prescribing V100</p>	<p>England, Wales, Northern Ireland</p> <p><input type="checkbox"/> Level 5 <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7</p> <p>SCQF</p> <p><input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10</p> <p><input type="checkbox"/> Level 11</p>
<p>Date of approval visit:</p>	<p>13 October 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 February 2021"/></p> <p><input type="text" value="N/A"/></p> <p><input type="text" value="19 April 2021"/></p>
<p>QA visitor:</p>	<p>Georgina Ritchie</p>

Section two

Summary of review and findings

University of Brighton (UoB), school of health sciences (the school) present the community practitioner nurse prescribing (V100) and the independent and supplementary prescribing (V300) programmes for approval. The V100 award is offered at academic level six, V300 is offered at academic level seven. The programmes are comprehensively 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 V300 award is accessed by nurses, midwives and allied health professionals undertaking the multi-disciplinary Master of Science (MSc) in advanced clinical practice (ACP) programme. It can be accessed as a stand-alone programme. The V100 award is an integrated programme in the specialist practice qualification (SPQ) it's an option in the specialist community public health nursing (SCPHN) programme.

Documentary analysis and the approval process demonstrates evidence of effective partnership working between stakeholders and the school. The programmes are co-produced in partnership with a range of stakeholders, including service users and carers (SUCs), practice learning partners (PLPs) and students. SUCs and PLPs tell us they are involved in the delivery of the programmes. There's a nominated programme lead for both programmes and the same teaching team deliver both programmes. PLPs confirm a robust working partnership with the team across both programmes. Documentary evidence confirms there's an effective framework in place across PLP organisations and the school to ensure there's quality management and education governance at strategic and operational levels.

Arrangements at programme level don't meet the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018). Arrangements at programme level meet Standards for student supervision and assessment (SSSA) (NMC, 2018).

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

The programmes are recommended for approval subject to two NMC conditions and one university condition.

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

Updated 24 November 2020:

UoB provided additional evidence to meet the two NMC conditions, they confirm the university condition is met.

All conditions are met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
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: Condition two: The programme team must provide robust V300 documentation that confirms the governance structures and processes that are in place for self-employed and non-NHS applicants. (SFNME R2.6; SPP R1.3, R3.1)</p> <p>Practice learning: None identified.</p> <p>Assessment, fitness for practice and award: None identified.</p> <p>Education governance: management and quality assurance: Condition one: The programme team must provide amended V300 student facing documentation that accurately reflects the terminology used to identify PLPs. (SFNME R2.9)</p> <p>Condition three: Relating to module NA7210 amend the pre-requisite for students to have studied in the last five years. Amend to normally and articulate this more clearly in the admissions criteria. (University condition)</p>

Date condition(s) to be met:	24 November 2020
Recommendations to enhance the programme delivery:	Recommendation one: Review the student handbook, correct the teaching hours and include more developed statement on inclusivity and diversity. (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	
<p>Additional and revised programme documentation provides evidence the conditions are met.</p> <p>Revised V300 programme documentation accurately details PLPs as organisations who work in partnership with UoB to provide student practice learning placements. Reference to PLP organisations as NMC approved organisations is removed. Condition one is met.</p> <p>An overview of the governance structure is provided to reflect the processes which take place to ensure quality assurance for the inclusion of non-NHS and self-employed practitioners on the programme. Condition two is met.</p> <p>The programme is recommended for approval.</p>	
AEI Observations	Observations have been made by the education institution YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Summary of observations made, if applicable	The AEI confirm the accuracy of the programme approval report.
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:	24 November 2020

Section three

NMC Programme standards
<p>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) QA Handbook</p>
Partnerships
<p>The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.</p>
<p>Please refer to the following NMC standards reference points for this section:</p> <p>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</p> <p>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</p> <p>Standard 3: Student empowerment:</p>

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.

Documentary evidence and the approval visit confirm there's effective partnership working between UoB and key stakeholders. UoB has a strategic level SUC involvement strategy, which is operational at programme level. SUCs tell us they actively contribute to programme development through attendance at stakeholder planning groups. SUCs contribute to teaching and learning activities and programme assessments. SUCs tell us they regularly meet with the programme team to review the teaching, learning and assessment strategies. SUCs tell us their opinions are actively invited, listened to and acted upon and they feel welcomed by the programme team. SUCs confirm that they know what the procedure is to escalate concerns and that they're empowered to do this. They describe their contribution to online and face to face teaching sessions and tell us that the programme team support them to develop the skills they need to use technology enhanced learning. Using online live teaching platforms, with the programme teaching team they contribute to the V100 and V300 programmes. There's evidence of a commitment to SUC co-delivery of the programmes.

Senior PLP leads tell us they're committed to ensuring future prescribers are prepared for clinical practice. They're confident that the programmes suitably prepare students to fulfil the prescribing role. PLPs tell us that they support practice learning with a commitment to protected time for practice assessors and practice supervisors and to ensure they are updated and supported. They tell us they're committed to supporting students by ensuring that practice learning time is protected, and that practice assessors and practice supervisors are accessible. Senior PLPs tell us UoB consistently work in partnership with them at strategic levels to ensure a collaborative approach to support programme development and delivery. At operational levels practice assessors, practice supervisors and non-medical prescribing (NMP) leads tell us they feel prepared to facilitate practice

learning and assessment of students. They tell us they're involved in programme development and delivery for the V100 and V300 programmes. PLPs tell us they're confident in the robust processes in place to ensure ongoing communication and continuous evaluation of the programmes. PLPs confirm they understand the process to escalate concerns and have confidence in UoB processes for escalating concerns. V300 student facing documentation inaccurately describes PLPs as NMC approved organisations. (Condition one)

The UoB education and student experience strategic plan encourages a partnership working approach between student groups, academics and professional staff in the co-development and support of learning and teaching initiatives. Students tell us they're involved in the design of the new programmes and prepared to supervise and assess students. They tell us their input is welcome, and evaluation of theoretical learning and practice learning is encouraged. Students tell us they're encouraged to feedback to the school and practice learning environments about their experiences of the programmes which they welcome. Students confirm that they feel supported and understand how to access support if they have concerns.

Discussion at the visit confirms that PLPs have a sound understanding of and are committed to the implementation and operationalisation of the SSSA. There's documentary evidence of a strategic partnership approach between UoB and PLPs to ensure efficient employment of the SSSA at a strategic level. At operational levels NMP leads tell us they're supporting transition to the roles of practice assessor and practice supervisor within the context of prescribing practice. There's a robust and sustained commitment to support prescribing practice learning and the ongoing development for qualified prescribers. Robust practice assessor and practice supervisor handbooks detail roles and responsibilities. Practice assessors and practice supervisors tell us that they feel suitably prepared for the role and that they're supported in the role.

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**

V300 student facing documentation inaccurately describes PLP organisations as NMC approved organisations.

Condition one: The programme team must provide amended V300 student facing documentation that accurately reflects the terminology used to identify PLPs. (SFNME R2.9)

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**

Post event review

Identify how the condition(s) is met

Condition one: Additional and revised V300 programme documentation accurately detail PLPs as organisations who work in partnership with UoB to provide students practice learning placements. Reference to PLP organisations as NMC approved organisations is removed.

Evidence:

- Self-employed and non-NHS admissions, recruitment, selection and admissions flow chart and checklist, undated
- Revised, V300 practice assessor, practice supervisor and academic assessor, handbook, undated
- Revised, V300 independent prescribing, practice portfolio, undated
- Revised, V300 three-way application agreement form, undated
- Revised, website, independent prescribing programme information, undated

Condition one is met.

Date condition(s) met: 24 November 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 not met. V100 and V300 applicants are required to complete an application process undertaken in partnership with their employers. V100 applicants complete the prescribing specific application form in addition to the SPQ or SCPHN programme application process. Applicants to the ACP programmes must apply separately to undertake the V300 programme.

The application form requires applicants to detail the governance structures in place to support learning. Supporting line managers, NMP leads and practice assessors must sign the application form before it's submitted to UoB. Applicants must detail their proposed area of prescribing practice, their clinical experience, including clinical assessment skills and any formal education undertaken in this area. A signed declaration of good health and character is required and if appropriate details of fitness to practice investigations. They confirm their ability to study at the appropriate academic level. PLPs are required to confirm organisational support for protected learning time and confirm that the practice learning environment has an educational audit in place. NMP leads confirm they support student learning. The programme team scrutinise all applications and check applicants and practice assessors' professional registrations. The school checks that educational audits are up to date for proposed practice learning environments.

The application form details how those applicants who are self-employed or non-NHS employed can access the V300 programme. The programme team tell us governance structures must be in place to enable self-employed applicants to access the programme. They tell us that an educational audit is undertaken if one is not already in place. Care Quality Commission (CQC) reports are checked to identify any highlighted areas of concern. The programme team tell us that if a

non-NHS practice area is unable to meet the requirements of the educational audit self-employed or non-NHS applicants won't be accepted on the programme. The programme team tell us that for new and non-NHS practice learning environments they undertake at least one additional practice visit to ensure practice learning is protected. This provides the opportunity to prepare practice assessors and practice supervisors to ensure students are supported. The process for ensuring governance arrangements are in place for self-employed and non-NHS employees isn't fully detailed in the V300 programme documentation. (Condition two)

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)

YES NO
- 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 NO
- 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 NO

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.

Current students on the V300 programme who interrupted the programme due to workforce challenges will complete the current programme. The programme team tell us current programmes are assessed against the RPS competency framework for all prescribers. Students who interrupt their studies, tell us they're supported by the programme team to continue their studies.

All V100 students have completed their studies.

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

From your documentary analysis and your meetings at the approval visit confirm if students will be transferring to the SSSA, and if so that they have informed choice and are fully prepared for supervision and assessment.

Students who interrupt will not transfer to the SSSA.

Assurance is provided that Gateway 1: [Standards framework for nursing and midwifery education](#) relevant to selection, admission and progression are met

YES NO

The V300 programme documentation doesn't fully detail how the governance structures are applied to self-employed and non-NHS employed applicants. (Condition two)

Outcome

Is the standard met? MET NOT MET

The V300 programme documentation doesn't fully detail how the governance structures are applied to self-employed and non-NHS employed applicants.

Condition two: The programme team must provide robust V300 documentation that confirms the governance structures and processes that are in place for self-employed and non-NHS applicants. (SFNME R2.6; SPP R1.3, R3.1)

Date: 13 October 2020

Post event review

Identify how the condition(s) is met:

Condition two: Revised V300 programme documentation details a robust governance structure to ensure appropriate application, inclusion and support for self-employed and non-NHS students. Revised programme documentation confirms the programme team undertake additional support visits to practice learning environments if required. Further support includes virtual and telephone communication.

Evidence:

Self-employed and non-NHS admissions, recruitment, selection and admissions flow chart and checklist, undated
 Revised, V300 practice assessor, practice supervisor and academic assessor, handbook, undated
 Revised, V300 independent prescribing, practice portfolio, undated
 Revised, V300 three-way application agreement form, undated
 Revised, website, independent prescribing programme information, undated
 Revised, student handbook, independent prescribing V300, undated

Condition two is met.

Date condition(s) met: 24 November 2020

Revised outcome after condition(s) met: 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. There's a variety of learning and teaching strategies including keynote lectures, self-directed learning, guided study, case-based learning, simulation and group discussion. Online learning supports face-to-face learning. Students, PLPs and the programme team tell us the blended delivery approach supports workforce requirements. Documentary evidence confirms students receive formative feedback to support preparation for summative assessments. Programme content and assessments are mapped to the RPS competencies. Students tell us the virtual learning environment (VLE) provides the information they need to support individual learning. SUCs tell us that they work with the programme team to further support online learning to ensure they can participate in sustained programme delivery.

V100 and V300 practice learning is evidenced in a portfolio of prescribing practice. This is used to support progression towards achievement of the RPS competencies. The portfolios of prescribing practice are clearly mapped against the RPS competency framework for all prescribers. There's evidence of a robust process that ensures students, practice assessors, practice supervisors and academic assessors contribute to and efficiently record ongoing progression. Practice learning hours are recorded in the portfolio of prescribing practice and provide confirmation of achievement of competencies through planned quadripartite meetings. There's clear evidence of progression towards achievement of the RPS competencies confirmed by practice assessors and agreed by academic assessors. Students tell us the portfolio of prescribing practice is effective in structuring their learning. PLPs tell us this promotes a collaborative approach to practice learning, and they appreciate the structured approach this offers.

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 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 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: 13 October 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 <input type="checkbox"/> NOT MET <input type="checkbox"/>

Standard 3: Practice learning
<p>Approved education institutions must:</p> <p>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</p> <p>Approved education institutions, together with practice learning partners, must:</p> <p>R3.2 ensure that practice learning complies with the NMC Standards for student supervision and assessment</p> <p>R3.3 ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment</p> <p>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</p>
Findings against the standard and requirements
<p>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</p> <ul style="list-style-type: none"> 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) <p>MET <input type="checkbox"/> NOT MET <input checked="" type="checkbox"/></p> <p>R3.1 is not met. There's evidence of appropriate arrangements and a robust governance framework for NHS practice learning environments. V100 and V300 PLPs support the application process ensuring applicants are suitability qualified and experienced to fulfil the prescribing role. The educational audit process ensures capacity exists within practice learning environments to sufficiently support practice learning. V100 and V300 applicants are required to demonstrate</p>

that they have identified a suitably qualified and experience practice assessor and practice supervisor. Students tell us they feel well supported by NMP leads in the practice learning environment. Students confirm that there's ongoing collaboration with NMP leads to support them, practice assessors and practice supervisors.

Educational audits further assure that practice learning environments are adequately resourced and supported. The educational audits process is undertaken in a co-ordinated way at school level and undertaken with PLPs who co-complete the documentation. The programme teams tell us the application process requires confirmation that a suitable educational audit has been undertaken and that it's up to date. The V300 programme team describe how governance arrangements are specifically tailored to those applicants who are self-employed or non-NHS employees. The process for ensuring governance arrangements are in place for self-employed and non-NHS employees isn't fully detailed in the V300 programme documentation. (Condition two)

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. There's clear and robust evidence that demonstrates technology enhanced learning is well established within the V100 and V300 programmes. The programme teams tell us about the variety of virtual facilities available to support students using the VLE. The programmes employ a blended approach to learning with some face-to-face teaching and learning activities being undertaken on Microsoft Teams and as pre-recorded or directed study.

The VLE is used to undertake formative and summative assessments and examinations. Simulation is employed for prescription writing practice. Student practice prescribing assessment skills in the practice learning environment which supports preparation for assessments. Students and PLPs tell us this enhanced technology approach mean the programme content is more accessible to them.

SUCs tell us that the programme team support them to develop the skills to use technology enhanced learning to enable them to participate in live teaching synchronously with the programme teaching team and students. This facilitates

questions from students and constructive dialogue in a virtual classroom environment.

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

- 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 NO

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

YES NO

The V300 programme documentation doesn't fully detail how the governance structures are applied to self-employed and non-NHS employed applicants. (Condition two)

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

YES NO

Outcome

Is the standard met? MET NOT MET

The V300 programme documentation doesn't fully detail how the governance structures are applied to self-employed and non-NHS employed applicants.

Condition two: The programme team must provide robust V300 documentation that confirms the governance structures and processes that are in place for self-employed and non-NHS applicants. (SFNME R2.6; SPP R1.3, R3.1)

Date: 13 October 2020

Post event review

Identify how the condition(s) is met:

Condition two: Revised V300 programme documentation details a robust governance structure to ensure appropriate application, inclusion and support for self-employed and non-NHS students. Revised programme documentation confirms the programme team undertake additional support visits to practice learning environments if required. Further support includes virtual and telephone communication.

Evidence:

Self-employed and non-NHS admissions, recruitment, selection and admissions flow chart and checklist, undated
Revised, V300 practice assessor, practice supervisor and academic assessor, handbook, undated
Revised, V300 independent prescribing, practice portfolio, undated
Revised, V300 three-way application agreement form, undated
Revised, website, independent prescribing programme information, undated
Revised, student handbook, independent prescribing V300, undated

Condition two is met.

Date condition(s) met: 24 November 2020

Revised outcome after condition(s) met: MET NOT 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 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. Educational audit is used to ensure appropriate systems and processes are in place to support student learning. On application to the programmes there must be a satisfactory audit of the practice learning environment. Non-NHS practice learning environments must have a satisfactory educational audit in place. Documentary evidence and the approval visit confirms the school has a clear policy for raising concerns. Students, and PLPs tell us they know the process for raising concerns. The programme team, students and PLPs tell us that continuous evaluation of practice learning environments is undertaken. There's evidence of communication between practice assessors and academic assessors to identify and address any issues related to practice learning. Documentary evidence and discussion at the approval visit confirms practice assessors, practice supervisors and academic assessors work in partnership to support and assess practice learning and progression towards achievement of the RPS competencies.

- 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 met. Documentary evidence and the approval visit confirms there's an effective programme to prepare and support practice assessor and practice supervisor roles. PLPs tell us generic SSSA workshops are delivered in the practice learning environment supported by educational leads. Workshops are scheduled throughout the year and can be accessed online or on a face-to-face

format. NMP leads support prescribing specific preparation in regular prescribing updates for all prescribers including those who act as practice assessors and practice supervisors. Practice assessors and practice supervisors have access to programme specific guidance including practice assessor and practice supervisor handbooks which provide detailed support and preparation information. Practice assessors and practice supervisors for self-employed students are supported by the programme team who provide preparation for the roles and updates during practice visits. They are required to attend a virtual induction and ongoing updates.

V100 practice assessors and practice supervisors attend SPQ and SCPHN updates which include a prescribing specific focus. This provides a forum to discuss any prescribing specific issues within the context of the SPQ and SCPHN programmes. The prescribing programme team tell us that they teach on the SCPHN and SPQ programmes which ensures prescribing remains a focus with the programmes.

Documentary evidence confirms there's a programme in the school to prepare academic staff to undertake the role of academic assessor. The programme team tell us this has prepared them for the role and specifically to understand and apply the principles of SSSA to the prescribing programme. They tell us they are adequately prepared and supported as academic assessors.

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 documentation details the process to confirm there's appropriate guidelines and processes in place to assign V100 and V300 students to a practice assessor who is a registered healthcare professional and an

experienced prescriber. Practice assessors are required to sign the application form to confirm that they are currently prescribing in practice, eligible to act as a practice assessor and have attended practice assessor training. They confirm they've received and read the practice assessor handbook and understand the requirements of the role. They must declare that they're supported to undertake the role and have accessed a prescribing update. PLPs tell us students are assigned to practice assessors who prescribe in the same field of practice as students.

There's a process for managing exceptional circumstances where the same person fulfils the practice assessor and practice supervisor roles. Documentary evidence and the programme team confirm this is identified at the point of application and closely monitored by the programme lead.

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 <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to supervision and assessment 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: 13 October 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 5: Qualification to be awarded
<p>Approved education institutions, together with practice learning partners, must:</p> <p>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</p>

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 NO

- 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 NO

- 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 NO

Assurance is provided that the [Standards framework for nursing and midwifery education](#) relevant to the qualification to be awarded are met

YES NO

Outcome

Is the standard met? MET NOT MET

Date: 13 October 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 <input type="checkbox"/> NOT MET <input type="checkbox"/>

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 checked="" type="checkbox"/>	<input 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		
List additional documentation:		
Post visit documentation: Self-employed and non-NHS admissions, recruitment, selection and admissions flow chart and checklist, undated		

Revised, V300 practice assessor, practice supervisor and academic assessor, handbook, undated
 Revised, V300 independent prescribing, practice portfolio, undated
 Revised, V300 three-way application agreement form, undated
 Revised, website, independent prescribing programme information, undated
 Revised, V300 student handbook, undated
 Revised, V100 student handbook, undated
 Revised, V100 practice assessor, practice supervisor and academic assessor, handbook, undated
 Revised, NA7210, module specification, undated
 Periodic review report, 13 October 2020
 Email from chair, confirmation the university condition is met, 23 November 2020

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:		
V300, September 2020 x three V300, April 2020 x one V100, alumni x two V300, alumni x one		
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 type="checkbox"/>	<input checked="" type="checkbox"/>
Educational audit tools/documentation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Practice learning environments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, state where visited/findings		
If you stated no above, please provide the reason and mitigation This is an established AEI and visits to facilities weren't needed.		
Additional comments: None identified.		

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Issue record

Final Report

Author(s):	Georgina Ritchie	Date:	19 October 2020
Checked by:	Bernadette Martin	Date:	23 October 2020
Submitted by:	Lucy Percival	Date:	8 December 2020
Approved by:	Leeann Greer	Date:	10 December 2020