

**Programme approval visit report**

**Section one**

<b>Programme provider name:</b>	University of East London
<b>Programmes reviewed:</b>	Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V150 <input type="checkbox"/> Community practitioner nurse prescribing V100 <input type="checkbox"/>
<b>Title of programme(s):</b>	PGCert Independent and Supplementary Prescribing for Nurses, Midwives and eligible Allied Health Professionals
<b>Academic level:</b>	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input checked="" type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Community practitioner nurse prescribing V150	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Community practitioner nurse prescribing V100	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
<b>Date of approval visit:</b>	16 November 2021

<b>Programme start date:</b>	
Independent and supplementary nurse prescribing V300	12 September 2022
Community practitioner nurse prescribing V150	N/A
Community practitioner nurse prescribing V100	N/A
<b>QA visitor:</b>	Registrant Visitor: Heather Bain

## Section two

### Summary of review and findings

The School of health sport and bioscience (the school), University of East London (UEL) is an approved education institution (AEI) seeking approval of the independent and supplementary nurse prescribing (V300). The postgraduate certificate independent and supplementary prescribing for nurses, midwives and eligible allied health professionals (AHPs) is mapped against the Standards for prescribing programmes (SPP) (Nursing and Midwifery Council (NMC), 2018) and adopts the Royal Pharmaceutical Society ((RPS), 2021) competency framework for all prescribers.

The programme is delivered at academic level seven and is a 60 credit multi-professional award delivered part-time over two terms twice a year. The programme uses a blended learning approach. The first eight weeks of the programme requires students to attend a blend of online and face to face seminars and tutorials. Students undertake 90 hours of practice learning across the remainder of the programme. The programme provides the opportunity for shared learning with AHPs. It's UEL's intention for the proposed programme to be part of a master of science in advanced practice that's being developed within the school.

Programme documentation and discussion at the approval visit confirms that there's effective partnership working at strategic and operational levels with key stakeholders including practice learning partners (PLPs), students and service users and carers (SUCs). UEL work in partnership with PLPs to ensure that if there's any risks to practice learning these are addressed and appropriately actioned.

Documentary evidence and discussion with senior school staff and the programme team provides assurance that the programme team are experienced with relevant prescribing, pharmacology and clinical prescribing experience. There's currently no lead midwife for education (LME) at UEL. Senior school staff confirm the intention to appoint an LME to support the programme. UEL are preparing for the development of a pre-registration midwifery programme. It's confirmed that

midwives won't access the V300 programme until the LME has been appointed and is in post.

This visit is undertaken face to face.

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

The programme is recommended for approval subject to five NMC conditions. Two NMC recommendations are made.

Updated 11 January 2022:

UEL has provided additional and revised documentation to meet the five NMC conditions.

All conditions are met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
<b>Recommended outcome to the NMC:</b>	<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>
<b>Conditions:</b>	<p><b>Effective partnership working: collaboration, culture, communication and resources:</b></p> <p>Condition one: Provide programme documentation that evidences the role of the LME and how they will work in collaboration with future midwife students, practice supervisors, practice assessors and academic assessors. (SPP R4.4)</p> <p><b>Selection, admission and progression:</b></p> <p>Condition two: Provide programme and application documentation that explicitly details how governance arrangements are directly and appropriately applied to self-employed and non-NHS employed applicants and how these arrangements are monitored in the</p>

	<p>practice learning environment. (SFNME R2.6; SPP R1.3, R3.1)</p> <p><b>Practice learning:</b></p> <p>Condition three: Thoroughly review and provide revised programme documentation that includes reference to the academic assessor. (SSSA R6.8; SPP R4.2, R4.6)</p> <p>Condition four: Thoroughly review and provide revised programme documentation that clearly identifies the roles, responsibilities and relationships between practice supervisors, practice assessors and academic assessors. (SSSA R6.7; R3.1, R7.2, R9.4; SPP R4.2)</p> <p>Condition five: Provide detailed programme documentation that clearly evidences how practice supervisors, practice assessors and academic assessors are prepared to supervise and assess students. (SSSA R5.1, R6.8; R8.2, R10.3; SPP R4.2)</p> <p><b>Assessment, fitness for practice and award:</b></p> <p>None identified.</p> <p><b>Education governance: management and quality assurance:</b></p> <p>None identified.</p>
<p><b>Date condition(s) to be met:</b></p>	<p>11 January 2022</p>
<p><b>Recommendations to enhance the programme delivery:</b></p>	<p>Recommendation one: The programme team should monitor how SUCs inform the ongoing design, co-production, recruitment, delivery and evaluation of the programme. (SFNME R1.12, R2.7)</p> <p>Recommendation two: The programme team should monitor the level of assessment in relation to student workload. (SFNME R5.8; SPP R2.3)</p>

<p><b>Focused areas for future monitoring:</b></p>	<p>LME engagement within the programme team related to the delivery of the programme and support for future students who are midwives.</p> <p>The application of the SSSA in practice learning environments.</p> <p>Student academic assessment workload.</p>
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<p><b>Programme is recommended for approval subject to specific conditions being met</b></p>	
<p><b>Commentary post review of evidence against conditions:</b></p> <p>Additional and revised copies of the programme documentation provide evidence that the conditions are met.</p> <p>Revised programme documentation provides evidence of the role of the LME in the programme. A LME has been identified and the NMC have been informed. Condition one is met.</p> <p>Additional application documentation and the revised validation document details the governance arrangements for self-employed and non-NHS employed applicants. This includes how governance arrangements are monitored in practice learning environments. Condition two is met.</p> <p>Revised programme documentation makes explicit reference to academic assessors and their roles and responsibilities. Condition three is met.</p> <p>Revised programme documentation including student and practice supervisor and practice assessor facing documentation clearly identifies the roles, responsibilities and relationships of practice supervisors, practice assessors and academic assessors. Condition four is met.</p> <p>Revised programme documentation provides assurance that practice supervisors, practice assessors and academic assessors are prepared to supervise and assess students. Condition five is met.</p>	
<p><b>AEI Observations</b></p>	<p><b>Observations have been made by the education institution</b> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>
<p><b>Summary of observations made, if applicable</b></p>	

<b>Final recommendation made to NMC:</b>	Programme is recommended to the NMC for approval <input checked="" type="checkbox"/> Recommended to refuse approval of the programme <input type="checkbox"/>
<b>Date condition(s) met:</b>	11 January 2022

### Section three

NMC Programme standards
Please refer to NMC standards reference points <a href="#">Standards for prescribing programmes</a> (NMC, 2018) <a href="#">Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers)</a> (NMC, 2018) <a href="#">Standards framework for nursing and midwifery education</a> (NMC, 2018) <a href="#">Standards for student supervision and assessment</a> (NMC, 2018) <a href="#">The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates</a> (NMC, 2015 updated 2018) <a href="#">Quality assurance framework for nursing, midwifery and nursing associate education</a> (NMC, 2020) <a href="#">QA Handbook</a> (NMC, 2020)

Partnerships
The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.
<p><b>Please refer to the following NMC standards reference points for this section:</b></p> <p><a href="#">Standards framework for nursing and midwifery education</a> (NMC, 2018)</p> <p><b>Standard 1: The learning culture:</b></p> <p>R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders</p> <p>R1.13 work with service providers to demonstrate and promote inter-professional learning and working</p> <p><b>Standard 2: Educational governance and quality:</b></p> <p>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</p>

- R2.4 comply with NMC [Standards for student supervision and assessment](#)
- R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes
- R2.6 ensure that recruitment and selection of students is open, fair and transparent and includes measures to understand and address underrepresentation
- R2.7 ensure that service users and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection

**Standard 3: Student empowerment:**

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

**Standard 4: Educators and assessors:**

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

**Standard 5: Curricula and assessment:**

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

[Standards for student supervision and assessment](#) (NMC, 2018)

**Standard 1: Organisation of practice learning:**

- R1.4 there are suitable systems, processes, resources and individuals in place to ensure safe and effective coordination of learning within practice learning environments

R1.7 students are empowered to be proactive and to take responsibility for their learning

R1.8 students have opportunities to learn from a range of relevant people in practice learning environments, including service users, registered and non-registered individuals, and other students as appropriate

**Standard 2: Expectations of practice supervisors:**

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

**Standard 3: Practice supervisors: role and responsibilities:**

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

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

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

**Standard 7: Practice assessors: responsibilities:**

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

**Standard 9: Academic assessors: responsibilities:**

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

**Findings against the standard and requirements**

**Provide an evaluative summary about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders.**

Documentary evidence and the approval visit confirm that there's effective partnership working between all key stakeholders and UEL. Established meetings including the north east London chief nurse meeting have informed the development of the programme. Discussion with senior PLPs confirm that they are committed to ensuring that the local east London nursing workforce can access this locally delivered programme at UEL. There's evidence of a commitment by the school and all PLPs to support the diverse local population. PLPs and SUCs confirm that they've been included in discussions with the programme team that have been specific to the development of the proposed prescribing programme.



PLPs tell us that they have a positive partnership working relationship with UEL who they describe as innovative, responsive and creative. There are established monthly partnership meetings between UEL and PLPs to raise any practice learning concerns and to share best practice. PLPs tell us how they've influenced the design of the programme to manage the local workforce and to provide a seamless progression from pre-registration to post registration education. They tell us that the inclusion of inter-professional learning and the development of advanced practice skills including clinical examination skills are key elements that they requested should be included in the programme.

There's evidence of a robust process to ensure the quality of practice learning environments. A partnership approach to educational audit ensures that there's an effective process to monitor practice learning. This ensures that UEL and PLPs can act on issues identified by students or system regulatory reports including any adverse Care Quality Commission reporting through placement audit action plans and risk registers.

Documentary evidence and discussion at the approval visit confirm that students and PLPs know how to raise and escalate concerns. The practice assessment portfolio (PAP), student handbook and practice assessor and practice supervisor handbook detail how to escalate and raise concerns. The SSSA is established in the pre-registration nursing programme and the principles are transferable to the proposed prescribing programme.

Pre-registration nursing students confirm that there are robust processes in place that ensure that UEL support their learning in theory and practice. They know about the development of the programme and tell us that they're very keen to undertake the programme in the future after completion of their nursing programme. Students tell us that they have had the opportunity to provide feedback and that the school is receptive and responsive to their feedback. They tell us that they know how to raise any concerns about practice learning and that support is in place in the school and in the practice setting. They tell us that tripartite meetings are held with practice assessors and academic assessors. The programme team tell us that these processes will be applied to the prescribing programme. Students tell us SUCs are involved in their programme at recruitment and in the ongoing delivery of the pre-registration nursing programme.

There's a school SUC strategy with a supporting action plan that confirms how SUCs will be involved in the prescribing programme. SUCs tell us that they had the opportunity to review the programme documentation and provide feedback. The feedback given has been actioned by the programme team and has resulted in the development of prescribing specific interview questions by SUCs. They also tell us about how there's plans to further develop a network of SUCs who can specifically contribute to the ongoing design, co-production, recruitment, delivery and evaluation of the programme. (Recommendation one)

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

**MET**  **NOT MET**

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

**MET**  **NOT MET**

**Post event review**

**Identify how the condition(s) is met**

N/A

**Date condition(s) met:**

N/A

**Revised outcome after condition(s) met**

**MET**  **NOT MET**

N/A

**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. The application process requires applicants to demonstrate how they meet the entry criteria; this must be confirmed and be signed by line managers. Managers are required to confirm an applicant's clinical competence and that a satisfactory disclosure and barring service check has been undertaken in the last three years. They must also confirm that students will have protected learning time to undertake the programme. The process confirms that there's support from PLPs and that practice supervisors and practice assessors have been identified and meet the requirements of the SSSA. Practice supervisors and practice assessors are required to complete a section within the application form to confirm that they meet the required criteria and can undertake the role.

Applicants are interviewed by the programme leader. The programme team tell us that interview questions are informed by SUCs. All applications are reviewed by the programme team who confirm that all the requirements to undertake the programme must be met.

The programme team tell us that there's a placement team within the school who manage and monitor all practice learning environments and ensure educational audits are in place. The process to manage any exceptional circumstances where practice supervisors and practice assessors are the same person involves close monitoring by academic assessors through regular tripartite meetings in practice.

There's reference in the application documentation to self-employed and non-NHS employed applicants. It's not clear how self-employed and non-NHS employed applicants demonstrate that they meet the entry requirements. The application process doesn't clearly document and evidence how governance arrangements are applied to those applicants who are self-employed or who are non-NHS employees and how these arrangements are monitored in practice learning environments. (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  N/A

**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.*

This is a new programme; there's no transfer of students.

**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.**

This is a new programme; there's no 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 programme documentation including the application process doesn't clearly evidence how governance arrangements are applied to those applicants who are self-employed or non-NHS employees. It's not clear how governance arrangements are applied at application, during the interview process and monitored in practice learning environments. (Condition two)

**Outcome**

**Is the standard met?** MET  NOT MET

It's not clear for self-employed or non-NHS employees how governance arrangements are applied at application, during the interview process and monitored in practice learning environments.

Condition two: Provide programme and application documentation that explicitly details how governance arrangements are directly and appropriately applied to self-employed and non-NHS employed applicants and how these arrangements are monitored in the practice learning environment. (SFNME R2.6; SPP R1.3, R3.1)

**Date:** 16 November 2021

**Post event review**

**Identify how the condition(s) is met:**

Condition two: An additional application form that's explicit to self-employed and non-NHS employed practitioners details the governance arrangements in place for the recruitment of self-employed and non-NHS employed applicants. The revised validation document details the governance arrangements for self-employed and non-NHS applicants. This includes how governance arrangements are monitored in practice learning environments.

Evidence:

Revised, application form, undated

Self-employed and non-NHS employed application form, undated

Revised, validation document, undated

Condition two is met.

**Date condition(s) met:** 11 January 2022

**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. The programme has a blended teaching and learning approach. There's evidence of a sound information technology infrastructure to support online learning. Students tell us that there's good support available for on campus and online learning. There's nine hours simulation learning on campus that focuses on clinical examination and consultation skills over the period of the programme. There's 30 hours of synchronous lectures delivered online with dedicated time for self-directed study. Face to face teaching is also delivered across the programme and includes lecturers, seminars, case-based learning sessions and facilitated reflective practice. Students are required to complete 90 hours of practice learning. There's clear mapping of the programme outcomes to the RPS competencies.

Programme documentation and the approval visit confirm that there are adequate resources in place to deliver the programme. The multi-professional programme team include a wide group of prescribers and pharmacists who support the delivery of the programme. A tour of the onsite UEL hospital and primary care training hub provides assurance that students have the opportunity learn within a range of simulated environments. Students tell us that the school simulation resources are well established to support their learning, and the programme team tell us how they'll use the simulation suite to support prescribing focused formative objective structured clinical examinations (OSCE). SUCs will be involved in the OSCEs, providing a range of prescribing focused scenarios. The assessment strategy is mapped to the RPS competency framework. Five summative components include the recording of progression and achievement of the RPS in the PAP, a numeracy and pharmacology examination, a portfolio with two extended case studies and the development of a personal student formulary that reflects students' scope of prescribing practice. The programme team are advised to monitor the impact of the level of assessment on student workload. (Recommendation two)

**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 a 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: <a href="#">Standards framework for nursing and midwifery education</a> relevant to curricula and assessment are met	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Assurance is provided that Gateway 2: <a href="#">Standards for student supervision and assessment</a> relevant to curricula are met	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<b>Outcome</b>	
Is the standard met?	MET <input checked="" type="checkbox"/> NOT MET <input type="checkbox"/>
Date: 16 November 2021	
<b>Post event review</b>	
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	

<b>Standard 3: Practice learning</b>
<b>Approved education institutions must:</b> 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
<b>Approved education institutions, together with practice learning partners, must:</b> R3.2 ensure that practice learning complies with the NMC <a href="#">Standards for student supervision and assessment</a> 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 <a href="#">Standards for student supervision and assessment</a>
<b>Findings against the standard and requirements</b>

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

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

**MET**  **NOT MET**

R3.1 is not met. The application process ensures that all governance arrangements are in place for NHS applicants. Programme documentation confirms that PLPs are actively involved in the application process. Educational audits confirm that practice learning is suitable and supports students to meet the requirements of the programme. There's reference in the application documentation to self-employed and non-NHS employed applicants. It's not clear how self-employed and non-NHS employed applicants demonstrate that they meet the entry requirements. The application process doesn't clearly document and evidence how governance arrangements are applied to those applicants who are self-employed or non-NHS employees and how these arrangements are monitored in practice learning environments. (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. Documentary evidence and the approval visit confirm that technology enhanced and simulation-based learning are used effectively and proportionately. UEL has invested in a simulation suite to support student learning and have recruited an interprofessional and immersive technology team which includes a pharmacist. Dedicated simulated-based learning is embedded in the programme and delivered within the UEL hospital and primary care training hub. Simulation-based learning focuses on the development of clinical examination and prescribing specific consultation skills that support students to develop a personal formulary. Formative OSCEs are undertaken in the simulation suite and prepare students for learning in practice.

Technology enhanced learning is also embedded in the programme. The virtual learning environment (VLE) is used for directed and self-directed study throughout the programme. Students have access for example to the safeMedicate tool that supports them to further develop the numeracy skills required for safe drug and prescribing calculations. Students tell us that the VLE facilitates learning and that there's adequate support in place if required.

**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

It's not clear for self-employed or non-NHS employees how governance arrangements are applied at application, during the interview process and how arrangements are monitored in the practice learning environment. (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

It's not clear for self-employed or non-NHS employees how governance arrangements are applied at application, during the interview process and how arrangements are monitored in the practice learning environment.

Condition two: Provide programme and application documentation that explicitly details how governance arrangements are directly and appropriately applied to self-employed and non-NHS employed applicants and how these arrangements are monitored in the practice learning environment. (SFNME R2.6; SPP R1.3, R3.1)

**Date:** 16 November 2021

**Post event review**

**Identify how the condition(s) is met:**

Condition two: An additional application form that's explicit to self-employed and non-NHS employed practitioners details the governance arrangements in place for

the recruitment of self-employed and non-NHS employed applicants. The revised validation document details the governance arrangements for self-employed and non-NHS employed applicants. This includes how governance arrangements are monitored in practice learning environments.

Evidence:

Revised application form, undated

Self-employed and non-NHS employed application form, undated

Revised validation document, undated

Condition two is met.

**Date condition(s) met:** 11 January 2022

**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. Mapping documentation demonstrates how the programme complies with the SFNME. PLPs tell us about how they engage with the programme team to ensure the SFNME is applied to the programme. They confirm a commitment to support practice supervisors and practice assessors. Educational audits ensure that practice learning environments are appropriate to support learning. PLPs tell us that there's effective mechanisms in place to address any issues or concerns that impact on practice learning environments. These are managed conjointly with the programme team. The programme team tell us that, if required, academic assessors will visit practice learning environments to provide additional support for students.

Practice assessments are designed and mapped to the programme outcomes ensuring that students meet the RPS. The PAP provides evidence that students are assessed by practice assessors through a range of methods including the development of a learning contract, completion of learning logs, reflective discussions and the achievement of the RPS competencies. The programme structure with an element of front-loaded theoretical learning supports preparation of practice learning. PLPs confirm that they understand how practice learning is applied to a prescribing programme.

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

**MET**  **NOT MET**

R4.2 is not met. Educational audits and effective systems are in place to support prescribing practice learning. The programme team and PLPs report that there's effective relationships between practice supervisors, practice assessors and academic assessors. Assurance is given by senior PLPs that there are adequate and appropriate practice supervisors and practice assessors to support prescribing specific learning in practice. The senior school team and staff curricula vitae (CVs) provide assurance that there's an appropriately qualified programme team to support the programme. Support to undertake the role is factored into UEL's academic workload model. However, there's no evidence in the programme documentation for students, practice supervisors and practice assessors that makes reference to academic assessors or details their roles and responsibilities. (Condition three)

There's documentary evidence in the admission process and the PAP that students are assessed by practice assessors with support from practice supervisors. The role of practice assessors is outlined in the PAP. They support the development and assessment of student progression towards achievement of the RPS competencies. They undertake an initial, midpoint and final tripartite process. Practice supervisors are identified in the PAP and there's details about how they're required to sign off student learning logs.

The programme team tell us that academic assessors will be involved in the tripartite arrangement with practice supervisors and practice assessors. The programme documentation, including the practice supervisor and practice assessor handbook, don't provide a detailed description of the roles, responsibilities and relationship between practice supervisors, practice assessors and academic assessors. There's no clear evidence of how those who are supervising and assessing students work in partnership to support students. (Condition four)

The programme team and PLPs tell us that they're adopting a regional approach to develop practice supervisors and practice assessors. There are non-credit bearing courses available to future practice supervisors and practice assessors led by PLPs. PLPs tell us that they provide regular prescribing specific updates throughout each year for prescribing practice supervisors and practice assessors. They and the programme team describe how updates focus on the RPS competency framework. The programme documentation and specifically the programme handbook don't provide explicit detail about the preparation and support for practice supervisors and practice assessors. A potential future practice assessor representative wasn't clearly aware of the requirements of the SSSA. There's no explicit documentary evidence that details how practice supervisors, practice assessors and academic assessors are prepared to supervise and assess students. (Condition five)

**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  N/A

R4.4 is not met. The programme specification and admissions documentation indicate that midwives can access the programme. There's no LME employed by UEL as they currently don't deliver a pre-registration midwifery programme. The senior school team tell us that there's a midwife employed as part of other school provision; they confirm that they are currently recruiting an LME to both support the proposed V300 programme and to develop a pre-registration midwifery programme. It's confirmed that midwives won't access the V300 programme until an LME has been appointed and is in place. Senior PLPs tell us that they fully support the need for midwives to undertake the V300 programme. There's no evidence in the prescribing programme documentation related to the role of the LME or how they will work in the proposed programme. There's no reference to how the LME will for example work in collaboration with and support any future midwifery prescribing students, PLPs, practice supervisors, practice assessors and academic assessors. (Condition one)

**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. Appropriate practice assessors must be identified as part of the application process. They must be registered healthcare professionals who are experienced prescribers in the same area of practice that students intend to prescribe in. The programme team check and confirm practice assessors' qualifications. Normally the practice assessor and practice supervisor will not be the same person. Programme documentation and the programme team tell us that in exceptional circumstances when practice supervisors and practice assessors are the same person there's close monitoring by academic assessors. Regular tripartite meetings will ensure objectivity and mitigate any risk.

**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

R4.6 is not met. The programme team tell us that students will be assigned to an academic assessor. Academic staff CVs provide assurance that there's an appropriately qualified programme team who can act as prescribing academic assessors. However, there's no evidence in the programme documentation for students, practice supervisors and practice assessors that makes reference to academic assessors or details their roles and responsibilities. (Condition three)

- 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)
- 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)
- 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

YES  NO

YES  NO

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

YES  NO

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

YES  NO

There's no evidence in the programme documentation for students, practice supervisors and practice assessors that makes reference to academic assessors or details their roles and responsibilities. (Condition three)

The programme documentation, including the practice supervisor and practice assessor handbook, don't provide a detailed description of the roles,



responsibilities and relationships between practice supervisors, practice assessors and academic assessors. There's no evidence of how they work in partnership to support students. (Condition four)

There's no explicit documentary evidence that details how practice supervisors, practice assessors and academic assessors are prepared to supervise and assess students. (Condition five)

**Outcome**

**Is the standard met?**

**MET**

**NOT MET**

There's no evidence in the programme documentation related to the role of the LME or how they will work in collaboration with and support any future midwife prescribing students, practice supervisors, practice assessors and academic assessors.

Condition one: Provide programme documentation that evidences the role of the LME and also details how they will work in collaboration with midwife students, practice supervisors, practice assessors and academic assessors. (SPP R4.4)

There's no evidence in the programme documentation for students, practice supervisors and practice assessors that makes reference to academic assessors or details their roles and responsibilities.

Condition three: Thoroughly review and provide revised programme documentation that includes reference to the academic assessor. (SSSA R6.8; SPP R4.2, R4.6)

The programme documentation, including the practice supervisor and practice assessor handbook, don't provide a detailed description of the roles, responsibilities and relationships between practice supervisors, practice assessors and academic assessors. There's no evidence of how they work in partnership to support students.

Condition four: Thoroughly review and provide revised programme documentation that clearly identifies the roles, responsibilities and relationships between practice supervisors, practice assessors and academic assessors. (SSSA R6.7; R3.1, R7.2, R9.4; SPP 4.2)

There's no explicit documentary evidence that details how practice supervisors, practice assessors and academic assessors will be prepared to supervise and assess the students.

Condition five: Provide detailed programme documentation that clearly evidences how practice supervisors, practice assessors and academic assessors are prepared to supervise and assess students. (SSSA R5.1, R6.8; R8.2, R10.3; SPP R4.2)

**Date:** 16 November 2021

**Post event review**

**Identify how the condition(s) is met:**

Condition one: The revised PAP and validation document details the role of the LME. The conditions document confirms that an LME has been identified and the NMC have been informed.

Evidence:

Revised, PAP, undated

Revised, validation document, undated

Conditions response, 11 January 2022

Condition one is met.

Condition three: Revised programme documentation including the PAP and student and practice supervisor and practice assessor facing documentation clearly detail the roles and responsibilities of academic assessors.

Evidence:

Revised, PAP, undated

Revised, practice assessor and practice supervisor handbook, undated

Revised, V300 student handbook, undated

Revised, validation document, undated

Condition three is met.

Condition four: The revised PAP, student handbook and the practice assessor and practice supervisor handbook clearly detail the roles, responsibilities and relationship between practice supervisors, practice assessors and academic assessors. This includes how they work together to support and assess students to meet the RPS competencies.

Evidence:

Revised, PAP, undated

Revised, practice assessor and practice supervisor handbook, undated

Revised, V300 student handbook, undated

Revised, validation document, undated

Condition four is met.

Condition five: Revised practice documentation provides assurance that practice supervisors, practice assessors and academic assessors are appropriately prepared to supervise and assess students. Practice supervisors, practice assessors and academic assessors are required to complete the pan-London practice learning e-learning resource. They can access prescribing updates

provided by UEL throughout the duration of the programme. PLPs' specific bespoke preparation events are available for practice supervisors and practice assessors.

Evidence:

Revised, practice assessor and practice supervisor handbook, undated

Revised, V300 student handbook, undated

Revised, validation document, undated

Condition five is met.

**Date condition(s) met:** 11 January 2022

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

### Standard 5: Qualification to be awarded

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

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

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

R5.1.2 a nurse or midwife independent/supplementary prescriber (V300)

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

R5.3 inform the student that the award must be registered with us within five years of successfully completing the programme and if they fail to do so they will have to retake and successfully complete the programme in order to qualify and register their award as a prescriber

R5.4 inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice

### Findings against the standards and requirements

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

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

	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<ul style="list-style-type: none"> <li>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)</li> </ul>	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<ul style="list-style-type: none"> <li>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)</li> </ul>	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<ul style="list-style-type: none"> <li>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)</li> </ul>	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Assurance is provided that the <a href="#">Standards framework for nursing and midwifery education</a> relevant to the qualification to be awarded are met	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Outcome</b>		
Is the standard met?	MET <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>
Date: 16 November 2021		
<b>Post event review</b>		
Identify how the condition(s) is met:		
N/A		
Date condition(s) met:		
N/A		
Revised outcome after condition(s) met:	MET <input type="checkbox"/>	NOT MET <input type="checkbox"/>
N/A		

**Section four**

**Sources of evidence**

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

Key documentation	YES	NO
Programme document, including proposal, rationale and consultation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme specification(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Module descriptors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student facing documentation including: programme handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student university handbook	<input 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: Revised, PAP, undated Revised, validation document, undated Revised, application form, undated Self-employed and non-NHS employed application form, undated Revised, practice assessor and supervisor handbook, undated Revised, V300 student handbook, undated Conditions response, 11 January 2022		

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: BSc adult nursing apprenticeship, year one x three BSc adult nursing, year two x one BSc adult nursing, year three x four		
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 checked="" type="checkbox"/>	<input type="checkbox"/>
Library facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Technology enhanced learning Virtual learning environment	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Educational audit tools/documentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice learning environments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If practice learning environments are visited, state where visited/findings:		
If you stated no above, please provide the reason and mitigation: UEL is an approved institution therefore visits to practice learning environments weren't required.		
Additional comments: None identified.		

**Mott MacDonald Group Disclaimer**

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

**Issue record**

**Final Report**

Author(s):	Heather Bain	Date:	25 November 2021
Checked by:	Bernadette Martin	Date:	29 November 2021
Submitted by:	Amy Young	Date:	21 January 2022
Approved by:	Leeann Greer	Date:	24 January 2022