Programme approval visit report

Section one

Programme provider name:	Sheffield Hallam University
In partnership with: *(Associated practice learning partners involved in the delivery of the programme)*	Cambridge University Hospitals NHS Trust Barnsley NHS Foundation Trust Doncaster and Bassetlaw NHS Trust Nottinghamshire Health Care Trust Rotherham, Doncaster and South Humber NHS Trust Rotherham NHS Foundation Trust Sheffield Teaching Hospitals Sheffield Children's Hospital Trust South West Yorkshire Foundation Trust Nottinghamshire NHSFT Chesterfield Royal Hospital NHS Trust Sherwood Forest NHSFT Broomgrove Trust Private, voluntary and independent health care providers
Programmes reviewed:	Community practitioner nurse prescribing V100 ☒ Community practitioner nurse prescribing V150 ☒ Independent and supplementary nurse prescribing V300 ☒
Academic level:	

Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland ☐ Level 5 ☒ Level 6 ☒ Level 7 SCQF ☐ Level 8 ☐ Level 9 ☐ Level 10 ☐ Level 11
Community practitioner nurse prescribing V150	England, Wales, Northern Ireland ☐ Level 5 ☒ Level 6 ☒ Level 7 SCQF ☐ Level 8 ☐ Level 9 ☐ Level 10 ☐ Level 11
Community practitioner nurse prescribing V100	England, Wales, Northern Ireland ☐ Level 5 ☒ Level 6 ☒ Level 7 SCQF ☐ Level 8 ☐ Level 9 ☐ Level 10 ☐ Level 11
Title of programme(s):	Non-medical Prescribing Community practitioner nurse prescribing (V100) Prescribing without a specialist practitioner qualification (V150)
Date of approval visit:	29 April 2019
Programme start date: Independent and supplementary nurse prescribing V300 Community practitioner nurse prescribing V150 Community practitioner nurse prescribing V100	1 September 2019 1 September 2019 1 September 2019
QA visitor(s):	Bernadette Martin

Summary of review and findings
Sheffield Hallam University (SHU), faculty of health and wellbeing (the faculty) is seeking approval for the independent and supplementary nurse prescribing (V300) and the community practitioner nurse prescribing (V100) and (V150) programmes. The programme is designed to meet the NMC Standards for prescribing programme (NMC, 2018) and Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency framework for all prescribers (NMC, 2018). Documentary analysis and the approval process demonstrates sound evidence of partnership working with key stakeholders. The programmes are clearly mapped against the Standards for prescribing programmes (NMC, 2018) and the RPS Competency framework for all prescribers. The partnership between SHU and practice learning partners (PLPs) is clearly demonstrated through effective and active engagement at an operational and strategic level. There's evidence of effective communication between the programme development teams delivering the programmes and PLPs to ensure that the student experience is consistent and comparable across practice learning environments. A feature of the V300 programme delivered at academic level seven is that it is offered in distance learning mode as well as attendance mode. It was evident from the meeting with students that the programme development teams are very supportive and inspire a sense of community amongst student cohorts. The programmes are recommended to the NMC for approval subject to four NMC conditions. There's one university condition. The university made one recommendation. Updated 30 May 2019 The programme team submitted revised programme documentation which provides clear evidence that the changes required to meet all four NMC conditions have been made. SHU confirmed that the university condition has been met. The programmes are recommended to the NMC for approval.

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	Programme is recommended for approval subject to specific conditions being met
Conditions: *Please identify the standard and requirement the condition relates to under the relevant key risk theme.* *Please state if the condition is AEI/education institution in nature or specific to NMC standards.*	**Effective partnership working: collaboration, culture, communication and resources:** Condition one: The documentation must include a programme specific plan which addresses the involvement and support for service users and carers to ensure their readiness for the programmes. (Standards framework for nursing and midwifery education (SFNME) R1.12, R2.7, R5.14. Standards for prescribing programmes (SPP) R2.1) **Selection, admission and progression:** Condition two: The programme documentation must evidence and provide the detail which confirms how recognition of prior learning (RPL) is applied directly to the prescribing programmes. (SFNME R2.8. SPP R1.4) Condition three: Make explicit how the governance arrangements are directly and appropriately applied to self-employed or non-NHS employed registrants. (SFNME R2.6. SPP R1.2, R1.3, R3.1) **Practice learning:** None identified **Assessment, fitness for practice and award:** None identified **Education governance: management and quality assurance:** Condition four: Thoroughly review the documentation to provide definitive programme documents that accurately and consistently reflect the practice supervisor, assessor and academic assessor terminology. (SSSA R7.11. SPP R4.2) Condition five: Distinguish the learning outcomes between the modules to represent a clear differentiation between academic levels six and

Date condition(s) to be met:	30 May 2019
Recommendations to enhance the programme delivery:	Recommendation one: Revisit the e-Learning materials to ensure all links are active and content is up to date. Provide a link to the virtual learning environment (VLE) for the academic level seven non-medical prescribing course in distance learning mode, once it is complete and available. (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:

A clear implementation plan has been developed to ensure that service users and carers are supported to be involved in the continued development, delivery and review of the prescribing programmes. This provides evidence that condition one has been met. Condition one is now met. SFNME R1.12, R2.7, R5.14 and SPP R2.1 are now met.

The programme teams have clearly documented how RPL will be applied to all the prescribing programmes. This provides evidence to meet condition two. Condition two is now met. SFNME R2.8 and SPP R1.4 are now met.

A clear operational plan has been developed which ensures that there are governance arrangements which are directly and appropriately applied to self-employed or non-NHS employed registrants. This provides evidence that the changes required to meet condition three have been made. Condition three is now met. SFNME R2.6 and SPP R1.2, R1.3, R3.1 are now met.

The programme teams have reviewed and amended all the documentation to ensure that it meets the requirements of the Standard for student supervision and assessment (SSSA) in reflecting the accurate terminology for the practice supervisor, assessor and academic assessor roles. This provides evidence that the changes required to meet condition four have been made. Condition four is now met. SSSA R7.11 and SPP R4.2 are now met.

The programme team have amended the modules which now clearly differentiate the academic levels of the learning outcomes. The changes required to meet condition five set by the university have been made. Condition five is now met.

AEI Observations	Observations have been made by the education institution YES ☐ NO ☒
Summary of observations made, if applicable	
Final recommendation made to NMC:	Programme is recommended to the NMC for approval
Date condition(s) met:	30 May 2019

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

Partnerships
The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders
Please refer to the following NMC standards reference points for this section: Standards framework for nursing and midwifery education (NMC, 2018) **Standard 1: The learning culture:** R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders R1.13 work with service providers to demonstrate and promote inter-professional learning and working **Standard 2: Educational governance and quality:** R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all

other stakeholders

R2.4 comply with NMC Standards for student supervision and assessment

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

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

R2.7 ensure that service users and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection

Standard 3: Student empowerment:

R3.3 have opportunities throughout their programme to work with and learn from a range of people in a variety of practice placements, preparing them to provide care to people with diverse needs

R3.16 have opportunities throughout their programme to collaborate and learn with and from other professionals, to learn with and from peers, and to develop supervision and leadership skills

R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning

R3.18 have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice

Standard 4: Educators and assessors:

R4.7 liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment

R4.9 receive and act upon constructive feedback from students and the people they engage with to enhance the effectiveness of their teaching, supervision and assessment

R4.10 share effective practice and learn from others

Standard 5: Curricula and assessment:

R5.4 curricula are developed and evaluated by suitably experienced and qualified educators and practitioners who are accountable for ensuring that the curriculum incorporates relevant programme outcomes

R5.5 curricula are co-produced with stakeholders who have experience relevant to the programme

R5.14 a range of people including service users contribute to student assessment
Standards for student supervision and assessment (NMC, 2018)

Standard 1: Organisation of practice learning:

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

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

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

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

Standard 3: Practice supervisors: role and responsibilities:
R3.3 support and supervise students, providing feedback on their progress towards, and achievement of, proficiencies and skills

Standard 4: Practice supervisors: contribution to assessment and progression:
R4.3 have sufficient opportunities to engage with practice assessors and academic assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising

Standard 7: Practice assessors: responsibilities:
R7.9 communication and collaboration between practice and academic assessors is scheduled for relevant points in programme structure and student progression

Standard 9: Academic assessors: responsibilities:
R9.6 communication and collaboration between academic and practice assessors is scheduled for relevant points in programme structure and student progression

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Findings against the standard and requirements

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

We found examples of effective and positive partnership working between SHU and key stakeholders.

The programme teaching teams and representative stakeholders at the approval visit told us the programme design and proposed delivery of the V300, V100 and V150 programmes meet the Standards for prescribing programmes (NMC, 2018) and the Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency framework for all prescribers) (NMC, 2018). The programme teams have multi-professional backgrounds including nurses, midwives, specialist community public health nurses (SCPHN), specialist practitioner district nurses (SPQ DN), physiotherapy, paramedic and pharmacist expertise. The programme

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team will facilitate further multi-professional learning for students undertaking the V300 programme with students undertaking the pharmacist independent prescribing programme. The teaching teams are further supported by clinical practice experts from other fields of practice including for example mental health.

Documentary evidence confirms a strategic commitment to equality and inclusivity; and a proactive approach to supporting people to achieve their potential irrespective of their background. There's evidence that students are signposted to additional support services.

The student voice is captured through the student representative system; course representatives are identified and are supported and work in partnership with the student union to ensure that there's the opportunity to influence ongoing and new course development. Students attend course committees and provide direct feedback on programmes. Module evaluations are undertaken on-line and completed prior to completion of the programmes. Students provide feedback regularly throughout their programme on the theory and practice learning environments; this is reviewed by the programme teams and reported through the SHU quality assurance cycle, any actions required are appropriately implemented and reviewed. There are communication strategies in place to ensure consistency and comparability within practice environments. Student facing documentation details how practice supervisors, assessors and academic assessors will monitor student progress and achievement. Students told us that the programme team listen to their views and address any issues they have appropriately. They told us that the programmes supports them to achieve their potential. Students confirm that the programme team have engaged with them and sought their views about the changes to prescribing programmes and they are aware of the requirements of the SSSA. Students told us about how service users and carers are involved in their programmes.

The faculty has an active service user and carer group that advises on programme development and student learning and assessment. There's some evidence that service users and carers have been included in the development of the programmes. The V100 programme include service user and carer input through the wider specialist community public health nurse SCPHN and specialist practice district nursing SPQ DN programmes. At the approval visit we found that the services user and carer representatives had no knowledge of the development for the prescribing programmes. One service user had very recently been recruited to the proposed V300 programme. They report that they have limited knowledge of what's expected and didn't feel well prepared for their future role. The other service user is actively involved in the pre-registration nursing programmes and was able to describe their role within this programme. They told us that they are well supported by the faculty service user and carer group but that they aren't involved with the prescribing programmes. Both service user and carer representatives told us that they would value feedback on their roles. The service user who was newly appointed to the prescribing programme requested that they have a programme specific induction.

The involvement of service users and carers isn't clearly evidenced in the V150 programme. The V300 programme lead told us that the service user and carer who is actively involved in the prescribing programme was teaching students on the day of the approval visit and had preferred to undertake this activity. At the approval visit we viewed a video of a service user talking about their experiences of prescribing which is available for students. We found the preparation and degree of involvement of service users in the prescribing programmes is unclear. (Condition one).

SHU senior academic staff at the approval visit described their regular engagement with PLPs including professional leads; the programme team regularly engage with strategic prescribing forums.

We found evidence of partnership working between SHU and PLPs for the preparation of practice supervisors and assessors to meet the SSSA (NMC, 2018). There's a planned joint approach to support practice learning including use of the practice assessment document (PAD) for all programmes. This approach includes an intermediate meeting in which the practice assessor and academic assessor must discuss and provide feedback on student progress towards achieving the competencies of the RPS (2016) Competency framework for all prescribers. The V100 programme will additionally monitor student progression through the wider SCPHN and SPQ DN programmes.

At the approval visit PLP representatives included current V100 and V150 practicing community prescriber mentors. Telephone meetings were held with two designated medical practitioners (DMPs). One DMP was aware of the changes to the practice supervisor and assessor roles through discussion at a preparation workshop and through the web-based materials which are utilised to support the DMP role. Both describe a positive relationship with the V300 programme team and agreed that a move to non-medical practice supervision and assessment was appropriate and timely. The PLPs representatives told us that they are aware of the work being undertaken within their organisations to prepare practice assessors and supervisors. The non-medical prescribing (NMP) leads are confident about the capacity to support V300 practice assessment as the numbers of highly experienced non-medical prescribers has significantly increased across clinical areas.

There is evidence that V300 and V150 practice assessors and supervisors will be supported further by the programme teams who will deliver targeted preparation workshops supplemented by web-based support materials. The V100 representatives describe how the preparation for practice assessment will ensure that this meets the SSSA. They describe their involvement and confidence in the preparation for practice supervision and assessment as positive.

There's evidence that the role of the practice link lecturer is embedded within the current programmes. Each academic is assigned to specific practice areas. The programme team describe how these roles will continue to meet the academic

assessor requirement for the new programmes. The programme documentation details the practice supervisor, assessor and academic roles however there are inconsistencies across the documents in relation to the accurate use of the titles for practice supervisors, assessors and academic assessors. This must be addressed to reflect the requirements of the SSSA. (Condition four)

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** ☒

SFNME R1.12, R2.7 and R5.14 require that service users are involved in the co-production of the programme, programme delivery, assessment and monitoring and evaluation. However, we found that there isn't a clear plan of how service users and carers are involved and supported in the planned delivery of the prescribing programmes.

Condition one: The documentation must include a programme specific plan which addresses the involvement and support for service users and carers to ensure their readiness for the programmes. (SFNME R1.12, R2.7, R5.14. SPP R2.1)

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** ☒

SSSA R7.11 requires the accurate use of the titles for practice supervisors, assessors and academic assessors.
Condition four: Thoroughly review the documentation to provide definitive programme documents that accurately and consistently reflect the practice supervisor, assessor and academic assessor terminology. (SSSA R7.11, SPP R4.2)

If not met, state reason and identify which standard(s) and requirement(s) are not met and the reason for the outcome

SPP R2.1 is not met.

There's no involvement of service users or carers in the programmes.

Condition one:

The documentation must include a programme specific plan which addresses the involvement and support for service users and carers to ensure their readiness for the programmes. (SFNME   R1.12, R2.7, R5.14. SPP R2.1)

SPP R4.2 is not met

Practice supervisor, assessor and academic assessor terminology isn't consistent across the documentation.
Condition four: Thoroughly review the documentation to provide definitive programme documents that accurately and consistently reflect the practice supervisor, assessor and academic assessor terminology. (SSSA R7.11. SPP R4.2)

Post Event Review

Identify how the condition is met:

Condition one: Documentation submitted by the programme team includes a clear operational plan that ensures that service users and carers are supported to be involved in all the prescribing programmes. SPP R2.1 is now met.
Assurance is provided that SFNME R1.12, R2.7, R5.14 are met.

Evidence:
Revised approval submission document, undated
Revised module handbook, community practitioner nurse prescribing V150 level six, undated
Revised module handbook, community practitioner nurse prescribing V150 level seven, undated
Revised module handbook, community practitioner nurse prescribing V100 level six, undated
Revised module handbook, community practitioner nurse prescribing V100 level seven, undated
Revised module handbook, non-medical prescribing V300 level six and seven, undated
Revised module descriptor, community practitioner nurse prescribing V150 level six, undated
Revised module descriptor, community practitioner nurse prescribing V150 level seven, undated
Revised module descriptor, community practitioner nurse prescribing V100 level six, undated
Revised module descriptor, community practitioner nurse prescribing V100 level seven, undated
Revised module descriptor, non-medical prescribing V300 level six, undated
Revised module descriptor, non-medical prescribing V300 level seven, undated
Revised module descriptor, non-medical prescribing V300 distance learning, level seven, undated

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Revised practice assessor and practice supervisor handbook V300, V100, V150, undated
Revised prescribing practice assessment document, undated

Condition four: All definitive programme documents now accurately reflect the practice supervisor, assessor and academic assessor terminology. SPP R4.2 is now met.
Assurance is provided that SSSA R7.11 is met.

Evidence
Revised approval submission document, undated
Revised module handbook, community practitioner nurse prescribing V150 level six, undated
Revised module handbook, community practitioner nurse prescribing V150 level seven, undated
Revised module handbook, community practitioner nurse prescribing V100 level six, undated
Revised module handbook, community practitioner nurse prescribing V100 level seven, undated
Revised module handbook, non-medical prescribing V300 level six and seven, undated
Revised module descriptor, community practitioner nurse prescribing V150 level six, undated
Revised module descriptor, community practitioner nurse prescribing V150 level seven, undated
Revised module descriptor, community practitioner nurse prescribing V100 level six, undated
Revised module descriptor, community practitioner nurse prescribing V100 level seven, undated
Revised module descriptor, non-medical prescribing V300 level six, undated
Revised module descriptor, non-medical prescribing V300 level seven, undated
Revised module descriptor, non-medical prescribing V300 distance learning, level seven, undated
Revised practice assessor and practice supervisor handbook V300, V100, V150, undated
Revised prescribing practice assessment document, undated

Date condition(s) met: 30 May 2019

Revised outcome after condition(s)   **MET** ☒   **NOT MET** ☐

SPP R2.1 and R4.2 are now met.
Assurance is provided that SFNME R1.12, R2.7, R5.14 and SSSA R7.11 are 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.

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** ☒

R1.2 is not met. Documentary evidence and discussions at the approval visit confirms some suitable and effective arrangements and governance for selection and admission to the programmes.

The programme team told us that V300 and V150 applicants must have a line manager signature to support the study time. This is confirmed as protected learning time in the selection criteria checklist. The checklist provides comprehensive assurance that the applicant meets the entry requirements and that a practice assessor has been identified and has agreed to undertake practice assessment. The manager must also confirm that on successful qualification registrants will continue to have organisational support and access to mechanisms to monitor continued competence and evaluate their prescribing practice. Students who undertake the V100 programme are interviewed as part of the SCPHN and SPQ DN programme recruitment. The SHU programme leads who teach on the V100 programme are involved in value-based interviews with PLPs. This was confirmed by NMP leads and current practice teachers who attended the approval visit.

The programme team were however not able to clearly confirm how governance arrangements on application to the programme will be applied for self-employed or non-NHS employed registrants.

We found there's an over reliance on the responsibility of applicants as NMC registrants to be assured that comparable governance arrangements would be in place. The programme team must confirm what mechanisms will be operationalised to ensure that learning in practice is comparable for self-employed or non-NHS employed registrants. (Condition three)

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 programme team told us that each student's line manager signs their support for the study hours as part of the application process. This is confirmed as protected learning time within the selection criteria checklist. It includes confirmation that students undertaking the distance learning academic level seven V300 programme must be released for the equivalent protected time. The academic assessor monitors this with the practice assessor and practice supervisor. If any concerns are raised about protected learning time, they are discussed with the practice assessor, manager and the prescribing lead. PLPs and the programme team told us that if protected learning time becomes an issue a meeting would be arranged with the student's manager, academic assessor, practice assessor and the student. The university has a formal process which would enable the student to have more time to complete the practice hours if there were for example issues with capacity in the practice area.

The programme team couldn't clearly confirm how this will be applied for self-employed or non-NHS employed registrant students. The programme team must confirm what governance mechanisms will be operationalised to ensure that learning in practice is comparable for self-employed or non-NHS employed registrant students. (Condition three)

- 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** ☒

R1.4 is not met. At the approval visit the programme team described examples of how RPL is applied to the programmes. They told us how this is quality managed

through SHU assessment processes including external examiner confirmation. However, there's no documentary evidence of this. The programme team must include how the process is managed and how this is mapped to RPS (2016) Competency framework for all prescribers in the programme documentation. (Condition two)

- 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 <u>Standards for prescribing programmes</u> and <u>Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers)</u> will be met through the transfer of existing students onto the proposed programme.

There are no existing students transferring from the current programmes to the proposed programmes. The programme team confirm that two V300 students already studying on the existing prescribing programme will complete this. One part time SCPHN student will study the proposed V100 programme in year two of their SCPHN programme. The V100 programme has been mapped to the SPP and the RPS Competency framework for all prescribers. Email evidence from the student who couldn't attend the approval visit confirms that they have been

informed of this arrangement.

Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to selection, admission and progression are met

YES ☐   **NO** ☒

SFNME R2.8 requires a robust RPL process. It's clear that the academic team are applying RPL to the prescribing programmes but it isn't identified in the programme documentation.

Condition two: The programme documentation must evidence and provide the detail which confirms how RPL is applied directly to the prescribing programmes. (SFNME R2.8. SPP R1.4)

SFNME R2.6 requires that recruitment and selection of students is open and transparent. However, there's limited evidence of a plan to ensure governance checking arrangements are in place at application to the programme and that learning in practice is comparable for self-employed or non-NHS employed registrants.

Condition three: Make explicit how the governance arrangements are directly and appropriately applied to self-employed or non-NHS employed registrants. (SFNME R2.6. SPP R1.2, R1.3, R3.1)

Outcome

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

R1.4 is not met. The RPL process isn't clearly detailed in the programme documentation.

Condition two: The programme documentation must evidence and provide the detail which confirms how RPL is applied directly to the prescribing programmes. (SFNME R2.8. SPP R1.4)

R1.2, R1.3 and R3.1 are not met.
There's no evidence of how governance is applied for self-employed or non-NHS employed registrants.

Condition three: Make explicit how the governance arrangements are directly and appropriately applied to self-employed or non-NHS employed registrants. (SFNME R2.6. SPP R1.2, R1.3, R3.1)

Date: 29 April 2019

Post Event Review

Identify how the condition is met:

Condition two: Documentation submitted by the programme team includes a clear process detailing how RPL can be directly applied to the prescribing programmes. R1.4 is now met.
Assurance is provided that SFNME R2.8 is met.

Evidence:
Revised approval submission document, undated
Revised non-medical prescribing offer making authority form, undated
Revised V300 application form, undated

Condition three: The programme team have submitted a clear and transparent process for how the governance arrangements will be applied to self-employed or non-NHS employed registrants at the point of application. The process has been included in the application documentation. R1.2, R1.3 and R3.1 are now met.
Assurance is provided that SFNME R2.6 is met.

Evidence:
Revised approval submission document, undated
Recognition of prior learning flow chart, undated

Date condition(s) met: 30 May 2019

Revised outcome after condition(s)   **MET** ☒   **NOT MET** ☐

SPP R1.2, R1.3 R1.4 and R3.1 are met. Assurance is provided that SFNME R2.6 and R2.8 are met.

Standard 2: Curriculum

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

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

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

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

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

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

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

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

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

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

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** ☒

R2.1 is not met. The faculty has an active service user and carer group that advises on programme development and student learning and assessment. At the approval visit we found that services users and carers representatives had no knowledge of the development for the prescribing programmes. This must be addressed. (Condition one)

- 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** ☐

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

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

MET ☒   NOT MET ☐

R2.3 is met. The V300, V150 and V100 programmes promote active and independent learning through blended learning approaches. Learning and teaching methods include lectures, seminars, action learning sets which support a critical exploration of practice prescribing issues, self-directed learning and tutorials which are individual. Students have access to online contact with the programme teams. E-Learning is supported by the Health Education England online package standardised computerised re-validation instrument for prescribing and therapeutics (SCRIPT); pre-sessional work is undertaken via blackboard. Students undertaking the academic level seven distance learning V300 programme must engage in webinars which reflect the face to face content. Lectures are recorded, and they have direct online access to the programme team. Students are further supported by the SHU technology enhanced learning team.

Practice learning is evidenced through the PAD; these learning and teaching strategies will be used to support achievement of the RPS (2016) Competency framework for all prescribers.

The programme team describe a common learning approach to development of the shared learning outcomes across all the programmes. There's a clear learning outcome which differentiates each prescribing qualification to be awarded. The assessment strategies confirm that students will be assessed appropriately at academic levels six and seven.

- 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

- 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: <u>Standards framework for nursing and midwifery education</u> relevant to curricula and assessment are met

YES ☐   **NO** ☒

SFNME R1.12, R2.7 and R5.14 require full involvement of service users and carers in the programmes including recruitment, selection and assessment. At the approval visit we found that there isn't a clear plan for how service users and carers are involved and supported in the planned delivery of the prescribing programmes.

Condition one:
The documentation must include a programme specific plan which addresses the involvement and support for service users and carers to ensure their readiness for the programmes. (SFNME R1.12, R2.7, R5.14. SPP R2.1)

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

YES ☒   **NO** ☐

Outcome		
Is the standard met?	**MET** ☐	**NOT MET** ☒

SFNME R1.12, R2.7 and R5.14:
There's no involvement of service users or carers in the programmes.

Condition one:
The documentation must include a programme specific plan which addresses the involvement and support for service users and carers to ensure their readiness for the programmes. (SFNME R1.12, R2.7, R5.14. SPP R2.1)

Date: 29 April 2019

Post Event Review

Identify how the condition is met:

Condition one: Documentation submitted by the programme team includes a clear operational plan that ensures that service users and carers are supported to be involved in all the prescribing programmes. SPP R2.1 is now met.
Assurance is provided that SFNME R1.12, R2.7, R5.14 are met.
Evidence:
Revised approval submission document, undated
Revised module handbook, community practitioner nurse prescribing V150 level six, undated
Revised module handbook, community practitioner nurse prescribing V150 level seven, undated
Revised module handbook, community practitioner nurse prescribing V100 level six, undated
Revised module handbook, community practitioner nurse prescribing V100 level seven, undated
Revised module handbook, non-medical prescribing V300 level six and seven, undated
Revised prescribing practice assessment document, undated
Revised module descriptor, community practitioner nurse prescribing V150 level six, undated
Revised module descriptor, community practitioner nurse prescribing V150 level seven, undated
Revised module descriptor, community practitioner nurse prescribing V100 level six, undated
Revised module descriptor, community practitioner nurse prescribing V100 level seven, undated
Revised module descriptor, non-medical prescribing V300 level six, undated
Revised module descriptor, non-medical prescribing V300 level seven, undated
Revised module descriptor, non-medical prescribing V300, distance learning, level seven, undated

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Date condition(s) met: 30 May 2019

Revised outcome after condition(s)   **MET** ☒   **NOT MET** ☐

SPP R2.1 is met. Assurance is provided that SFNME R1.12, R2.7 and R5.14 are met.

Standard 3: Practice learning

Approved education institutions must:

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

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

R3.2 ensure that practice learning complies with the NMC <u>Standards for student supervision and assessment</u>

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

R3.4 ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC <u>Standards for student supervision and assessment</u>

Evidence provides assurance that the following QA approval criteria are met

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

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

MET ☐   **NOT MET** ☒

R3.1 is not met. Documentary evidence and discussions at the approval visit confirms that suitable and effective arrangements and governance for practice learning are in place for NHS employed registrant applicants to the programmes. This is assured through effective partnership working between the programme team and PLPs. NMP leads and managers from stakeholder organisations are involved in the selection process for their organisation. They sign to confirm arrangements are in place for practice learning support, supervision and assessment are in place. There's a 'joint learning beyond registration' agreement between the student, academic assessor, practice assessor and supervisor. The programme team couldn't confirm comparable arrangements for self-employed or non-NHS employed registrants and how this would be operationalised. The programme team must confirm what mechanisms will be in place to ensure that learning in practice is comparable for self-employed or non-NHS employed registrants. (Condition three)

- 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. All learning and teaching resources are available on the VLE for students to access to support learning and assessment preparation. Students told us that online learning resources are clearly signposted; one student told us that some of the links to online information weren't accessible. They describe the resources as helpful and supportive of flexible learning strategies. The V300 academic level seven distance learning programme further supports flexibility and is a welcome option by the student representatives.
Students identified that they are well supported by the programme team and whilst challenging they enjoyed their respective programmes. The V300 students told us that there were some issues with accessing online materials. The programme team are advised to revisit the e-learning materials to ensure all links are active and content is up to date. They are also asked to provide a link to the VLE for the academic level seven non-medical prescribing programme in distance learning mode, once it is complete and available (Recommendation one). (university)

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- 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: <u>Standards framework for nursing and midwifery education</u> relevant to practice learning are met

YES ☐   **NO** ☒

SFNME R2.6 requires that student recruitment and selection processes are clear and transparent. However, there's limited evidence of a plan to ensure governance checking arrangements are in place at application to the programme and that learning in practice is comparable for self-employed or non-NHS employed registrants.

Condition three: Make explicit how the governance arrangements are directly and appropriately applied to self-employed or non-NHS employed registrants. (SFNME R2.6. SPP R1.2, R1.3, R3.1)

Assurance is provided that Gateway 2: <u>Standards for student supervision and assessment</u> relevant to practice learning are met   **YES** ☒   **NO** ☐

Outcome

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

SPP R1.2, R1.3 and R3.1 are not met.
There's no evidence of how governance is applied for self-employed or non-NHS employed registrants.

Condition three
Make explicit how the governance arrangements are directly and appropriately applied to self-employed or non-NHS employed registrants. (SFNME R2.6. SPP R1.2, R1.3, R3.1)

Date: 29 Apr 2019

Post Event Review

Identify how the condition is met:

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Condition three: The programme team have submitted a clear process for how the governance arrangements will be applied to self-employed or non-NHS employed registrants. This ensures that learning in practice is comparable for all registrants. SPP R1.2, R1.3 and R3.1 are now met.

Assurance is provided that SFNME R2.6 is met.

Evidence:
Revised approval submission document, undated
Revised non-medical prescribing offer making authority form, undated
Revised V300 application form, undated

Date condition(s) met: 30 May 2019

Revised outcome after condition(s) met   MET ☒   NOT MET ☐

SPP R1.2, R1.3 and R3.1 are now met. Assurance is provided that SFNME R2.6 is met.

Standard 4 Supervision and assessment

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

R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC <u>Standards framework for nursing and midwifery education</u>

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 <u>Standards framework for nursing and midwifery education</u>. 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%), 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%).

Findings against the standards and requirements

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

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

- 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 audits are completed for each practice learning area to ensure that appropriate and effective systems and processes are in place to

support students' learning. At application a short non-medical prescribing placement audit must be completed which details the practice learning information. If there's no regional educational audit identified a member of the programme team visits the practice area and undertakes a full educational audit to ensure that the placement can support prescribing learners. Practice learning is evaluated regularly and there's effective communication between the practice assessor and SHU through the programme leaders and academic assessors to identify and address any issues.

Students are advised about, and have access to, the procedure for raising a concern both within the practice. PLPs have processes in place to support students in raising a concern which is confirmed as part of the educational audit. Student facing documentation provides links directly to for example the faculty placement guidelines and policy website.

- 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. There are clear policies and frameworks to support student supervision, learning and assessment. The educational audit process identifies the availability of a nominated person who will actively support students in practice learning. At the approval visit the practice educators and NMP lead told us that they undertook the role of ensuring practice support for students; this is evidenced via the application pack. The V100 process is managed through the wider SCPHN and SPQ DN programmes and ensures that prescribing supervision, learning and assessment isn't compromised.

The programme documentation details the practice supervisor, assessor and academic roles however there are inconsistencies across the documents in relation to the accurate use of the titles for practice supervisors, assessors and academic assessors. This must be addressed to reflect the requirements of the SSSA. (Condition four)

- 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. Documentary evidence confirms there are guidelines and processes in place to assign each student to a practice assessor who is both a registered healthcare professional and an experienced prescriber. The PLPs and programme team told us that this is confirmed at application. There's a clear plan for the management in exceptional circumstances if the same person fulfils the role of practice supervisor and practice assessor. The programme team told us that this is identified at the point of the student's application and closely monitored by the academic assessor through the PAD.

If there's an exceptional need to change the practice assessor during the programme the programme team would consider each student individually. If a student requires additional time to complete their programme, this is facilitated through the university formal process to enable the student to complete the practice hours to ensure a valid assessment of practice. This is closely monitored by the academic assessor and the assessment moderation processes to ensure the student's practice learning and assessment are not compromised.

- 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: <u>Standards framework for nursing and midwifery education</u> relevant to supervision and assessment are met Please provide narrative for any exceptions

YES ☒   **NO** ☐

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

YES ☐   **NO** ☒

SSSA R7.11 requires that practice assessors for students on prescribing programmes support learning in line with the programme requirements. However, the programme documentation includes inconsistencies in relation to the accurate use of the titles for practice supervisors, assessors and academic assessors.

Condition four
Thoroughly review the documentation to provide definitive programme documents that accurately and consistently reflect the practice supervisor, assessor and academic assessor terminology. (SSSA R7.11, SPP R4.2)

Outcome

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Is the standard met?	MET ☐	NOT MET ☒

SPP R4.2 is not met.

Practice supervisor, assessor and academic assessor terminology isn't consistent across the documentation.

Condition four
Thoroughly review the documentation to provide definitive programme documents that accurately and consistently reflect the practice supervisor, assessor and academic assessor terminology. (SSSA R7.11, SPP R4.2)

Date: 29 April 2019

Post Event Review

Identify how the condition is met:

Condition four: All definitive programme documents now accurately reflect the requirements of the SSSA in terms of the terminology for practice supervisor, assessor and academic assessor terminology. R4.2 is now met.
Assurance is provided that SSSA R7.11 is met.
Evidence:
Revised module handbook, community practitioner nurse prescribing V150 level six, undated
Revised module handbook, community practitioner nurse prescribing V150 level seven, undated
Revised module handbook, community practitioner nurse prescribing V100 level six, undated
Revised module handbook, community practitioner nurse prescribing V100 level seven, undated
Revised module handbook, non-medical prescribing V300 level six and seven, undated
Revised module descriptor, community practitioner nurse prescribing V150 level six, undated
Revised module descriptor, community practitioner nurse prescribing V150 level seven, undated
Revised module descriptor, community practitioner nurse prescribing V100 level six, undated
Revised module descriptor, community practitioner nurse prescribing V100 level seven, undated
Revised module descriptor, non-medical prescribing V300 level six, undated
Revised module descriptor, non-medical prescribing V300 level seven, undated
Revised module descriptor, non-medical prescribing V300 – DL level seven, undated

Revised practice assessor and practice supervisor handbook V300, V100, V150, undated
Revised prescribing practice assessment document, undated

Date condition(s) met: 30 May 2019

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

R4.2 is now met. Assurance is provided that SSSA R7.11 is met.

Standard 5 Qualification to be awarded
Approved education institutions, together with practice learning partners, must: R5.1 following successful completion of an NMC approved programme of preparation, confirm that the registered nurse (level 1), midwife or SCPHN is eligible to be recorded asa prescriber, in either or both categories of: R5.1.1 a community practitioner nurse or midwife prescriber (V100/V150), or R5.1.2 a nurse or midwife independent/supplementary prescriber (V300) R5.2 ensure that participation in and successful completion of an NMC approved prescribing programme leads to accreditation at a level equivalent to a bachelor's degree as a minimum award R5.3 inform the student that the award must be registered with us within five years of successfully completing the programme and if they fail to do so they will have to retake and successfully complete the programme in order to qualify and register their award as a prescriber R5.4 inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice
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

    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: 29 April 2019

Source of evidence

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

Key documentation	YES	NO
Programme document, including proposal, rationale and consultation	☒	☐
Programme specification(s)	☒	☐
Module descriptors	☒	☐
Student facing documentation including: programme handbook	☒	☐
Student university handbook	☒	☐
Practice assessment documentation	☒	☐
Practice placement handbook	☒	☐
PAD linked to competence outcomes, and mapped against RPS A Competency Framework for all Prescribers	☒	☐
Mapping document providing evidence of how the education institution has met the Standards framework for nursing and midwifery education (NMC, 2018)	☒	☐
Mapping document providing evidence of how the programme meets the Standards for prescribing programmes and RPS Standards of proficiency for prescribers (NMC, 2018)	☒	☐
Mapping document providing evidence of how the Standards for student supervision and assessment (NMC, 2018) apply to the programme(s)	☒	☐
Curricula vitae for relevant staff	☒	☐
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website	☒	☐
Written confirmation by the education institution and associated practice learning partners to support the programme intentions	☒	☐
List additional documentation: NMC approved education institution (AEI) and practice partners annual self-assessment report 2017-2018, 5 December 2017 Evidence of stakeholder involvement in programme development, various dates External examiner nomination form, 3 October 2018 Level seven coursework grid document, 24 April 2019 Student email, 24 April 2019		

V300 mapping document, 24 April 2019
V300 entry requirements document, 24 April 2019
Screenshot website, resources in induction for academic writing, 24 April 2019
Flyer, stepping up to master's study workshop, 24 April 2019
Proposed assessment brief outline document, 24 April 2019

Updated 30 May 2019
Response from programme development team on the conditions, 30 May 2019
Validation report, draft, undated
Revised approval submission document, undated
Revised non-medical prescribing offer making authority form, undated
Revised V300 application form, undated
Recognition of prior learning flow chart, undated
Revised module handbook, community practitioner nurse prescribing V150 level six, undated
Revised module handbook, community practitioner nurse prescribing V150 level seven, undated
Revised module handbook, community practitioner nurse prescribing V100 level six, undated
Revised module handbook, community practitioner nurse prescribing V100 level seven, undated
Revised module handbook, non-medical prescribing V300 level six and seven, undated
Revised module descriptor, community practitioner nurse prescribing V150 level six, undated
Revised module descriptor, community practitioner nurse prescribing V150 level seven, undated
Revised module descriptor, community practitioner nurse prescribing V100 level six, undated
Revised module descriptor, community practitioner nurse prescribing V100 level seven, undated
Revised module descriptor, non-medical prescribing V300 level six, undated
Revised module descriptor, non-medical prescribing V300 level seven, undated
Revised module descriptor, non-medical prescribing V300, distance learning, level seven, undated
Revised practice assessor and practice supervisor handbook V300, V100, V150, undated
Revised prescribing practice assessment document, undated

If you stated no above, please provide the reason and mitigation

Additional comments:

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

	YES	NO
Senior managers of the AEI/education institution with responsibility for resources for the programme	☒	☐
Senior managers from associated practice learning partners with responsibility for resources for the programme	☒	☐
Programme team/academic assessors	☒	☐
Practice leads/practice supervisors/ practice assessors	☒	☐
Students	☒	☐
If yes, please identify cohort year/programme of study: V100 2018-19 SCPHN cohort V300 2018 cohort		
Service users and carers	☒	☐
If you stated no above, please provide the reason and mitigation		
Additional comments: Presentation by the programme team Service user video		

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

	YES	NO
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	☐	☒
Library facilities	☐	☒
Technology enhanced learning / virtual learning environment	☐	☒
Educational audit tools/documentation	☐	☒
Practice learning environments	☐	☒
If yes, state where visited/findings:		
If you stated no above, please provide the reason and mitigation Visit to practice areas/facilities were not required for this approval visit.		
Additional comments:		

Issue record

Final Report

Author:	Bernadette Martin	Date:	29 April 2019
Checked by:	Bernie Wallis	Date:	1 August 2019
Approved by:	Leeann Greer	Date:	19 August 2019
Submitted by:	Lucy Percival	Date:	19 August 2019