Programme approval visit report

<u>Section one</u>

Programme provider name:	University of Derby
In partnership with: *(Associated practice learning partners involved in the delivery of the programme)*	Nottinghamshire Healthcare NHS Foundation Trust Derbyshire Healthcare NHS Foundation Trust Chesterfield Royal Hospitals NHS Foundation Trust Derbyshire Community Health Service NHS Foundation Trust University Hospitals of Derby and Burton NHS Foundation Trust Private voluntary and independent health care providers
Programmes reviewed:	Independent and supplementary nurse prescribing V300 ☒ Community practitioner nurse prescribing V150 ☒ Community practitioner nurse prescribing V100 ☒
Title of programme(s):	Practice Certificate in Independent and Supplementary Prescribing for Nurses and Midwives (V300) Postgraduate Practice Certificate in Independent and Supplementary Prescribing for Nurses and Midwives (V300) Certificate of Credit in Community Practitioner Nurse and Midwife Prescribing (V150) Community Practitioner Nurse Prescribing (V100)

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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
Date of approval visit:	2 October 2020
Programme start date: Independent and supplementary nurse prescribing V300 Community practitioner nurse prescribing V150 Community practitioner nurse prescribing V100	13 January 2021 18 January 2021 18 January 2021
QA visitor:	Registrant Visitor: Heather Bain

Summary of review and findings
The University of Derby (UoD), department of healthcare practice is an established approved educational institution (AEI) present the independent and supplementary nurse prescribing (V300) and the community practitioner nurse prescribing (V150 and V100) programmes for approval.

The V300 programme is delivered at academic levels six and seven as a stand-alone 40 credit module delivered over six months. Students can undertake the programme as part the Master of Science (MSc) advanced clinical practice and MSc health and social care. Students undertaking the MSc specialist community practice qualification (SPQ) or MSc specialist community public health (SCPHN) programmes have the option to undertake V300 at academic level seven. Students undertaking a Bachelor of Science (BSc) (Hons) SPQ or SCPHN study V300 at academic level six. The V300 is a multi-professional programme accessed by physiotherapists, podiatrists, paramedics and pharmacists. V150 is offered at academic levels six and seven as a stand-alone 20 credit module over three months. V100 is a 20-credit core module offered at academic level six only. It's an integrated award in the BSc (Hons) SPQ and SCPHN programmes and is undertaken at academic level six for students on the MSc SPQ and SCPHN programmes. Students who don't undertake the V300 option will study the V100 award.

Documentary analysis and findings at the approval visit demonstrate a commitment to effective communication and partnership working approach with all key stakeholders. There's evidence of engagement with practice learning partners (PLPs), students and service users and carers in the development of the programme.

The programmes are mapped against the NMC Standards for prescribing programmes (SPP) (NMC, 2018) and Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS, 2016) competency framework for all prescribers) (NMC, 2018).

Arrangements at programme level meet the Standards for nursing and midwifery education (SFNME) (NMC, 2018). Arrangements at programme level meet the Standards for student supervision and assessment (SSSA) (NMC, 2018).

The programmes are recommended for approval subject to three university conditions. Two NMC recommendations are made.

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

Updated 6 November 2020:

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UoD confirm the three university conditions have been met.

The conditions are met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	Programme is recommended to the NMC for approval ☐ Programme is recommended for approval subject to specific conditions being met ☒ Recommended to refuse approval of the programme ☐
Conditions:	**Effective partnership working: collaboration, culture, communication and resources:** None identified. **Selection, admission and progression:** None Identified. **Practice learning:** None identified. **Assessment, fitness for practice and award:** None identified. **Education governance: management and quality assurance:** Condition one: To submit the outstanding curriculum modification paperwork relating to the impact of the changes on other programmes. (University condition) Condition two: Revisit and amend the programme learning outcomes considering the feedback received from the centre for excellence in learning and teaching. (University condition) Condition three: Respond to the feedback provided by the panel in relation to the module specifications and the points raised by the programme and curriculum management team. (University condition)
Date condition(s) to be met:	6 November 2020

Recommendations to enhance the programme delivery:	Recommendation one: Strengthen partnership working with service users and carers in the development, delivery and evaluation of the prescribing programme. (SFNME R1.12) Recommendation two: Review the pre-admission guidance document to reconsider the requirement of a medical practitioner being a practice supervisor if the practice assessor is a nurse of midwife. (SSSA R6.6; SPP R4.2)
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 An approval outcome document signed by the chair of the approval panel confirms the three university conditions have been met. Conditions one, two and three are met.	
AEI Observations	Observations have been made by the education institution **YES** ☒ **NO** ☐
Summary of observations made, if applicable	The AEI confirm the accuracy of the report.
Final recommendation made to NMC:	Programme is recommended to the NMC for approval ☒ Recommended to refuse approval of the programme ☐
Date condition(s) met:	6 November 2020

Section three

NMC Programme standards
Please refer to NMC standards reference points *Standards for prescribing programmes* (NMC, 2018) *Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers)* (NMC, 2018)

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NMC Programme standards
Standards framework for nursing and midwifery education (NMC, 2018) *Standards for student supervision and assessment* (NMC, 2018) The Code: Professional standards of practice and behaviour for nurses and midwives (NMC, 2015 updated 2018) QA Framework for nursing, midwifery and nursing associate education (NMC, 2018) QA Handbook

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

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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

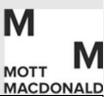**Standard 3: Practice supervisors: role and responsibilities:**
R3.3 support and supervise students, providing feedback on their progress towards, and achievement of, proficiencies and skills

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:

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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 <u>evaluative summary</u> 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 process confirms there's effective partnership working between UoD and key stakeholders including PLPs, service users and carers and students, in the development, delivery and evaluation of the programmes at strategic and operational levels. Policies and processes are in place to support the development and future delivery of the programmes. The head of school tells us they attend a strategic educational group that meets four times a year with PLPs. The programme teams are actively involved in local and regional specific prescribing networks. The UoD work in partnership with the Midlands, Yorkshire and East of England practice learning group to ensure a consistent approach to the adoption of the SSSA. Placement partnership meetings are held with PLPs every two months. Course committee meetings support the operational aspects of the programmes. PLPs tell us the programme teams meet with them regularly, they confirm attendance at regular stakeholder programme development and tell us there's effective partnership working across the prescribing programmes.

There's evidence of partnership working between UoD and PLPs in managing the practice learning environment. Documentary evidence and the approval process confirms there's preparation of practice supervisors and practice assessors to meet the SSSA. The programme teams tell us there's a planned approach to support practice learning. There's a generic placement audit form that's used across the region.

UoD have established working relationships with service users and carers who are experts by experience through four key areas including recruitment, teaching, assessment and practice assessment. There are regular experts by experience forum group meetings where curriculum development is discussed. Service user and carer representatives tell us they were given the opportunity to discuss the development of the programmes. They had the opportunity to comment on the pre-admission portfolio and the practice assessment document (PAD). Service users and carers confirm they contribute to teaching through sharing their stories with students in other programmes. Service users and carers tell us they've not directly contributed to the prescribing programmes. V300 Students tell us service users and carers do share real life experiences related to prescribing in a taught session during the programme. The programme teams tell us service users and carers will be further involved through the development service user and carer video stories.

Evidence of the involvement of service users and carers in the assessment of students is recorded in the V100, V150 and V300 PADs. Service users and carers provide feedback about students' professional values and attitude's during assessments. Practice supervisors and practice assessors use this feedback to inform formative and summative assessments of practice.

Documentary evidence demonstrates a partnership approach to the recruitment and selection process. Service users and carers tell us they contribute to the interview process for the SCPHN and SPQ programmes. They confirm they are prepared for the role and receive equality and diversity training. Service users and carers tell us they would welcome more involvement in the prescribing programmes. (Recommendation one)

Students tell us their learning experience is positive and they receive effective support from the programme teams who provide timely feedback. Students tell us the programmes are intense, they confirm protected learning time and the content supports them to achieve the learning outcomes. Documentary evidence and students confirm their contribution to the development of the proposed programmes. They tell us they've had the opportunity to feedback and inform the programme developments. Students tell us how the objective structured clinical examination (OSCE) undertaken in the AEI is a false situation. The programme team and PLPs tell us they've considered this feedback and practice assessors will provide a practice-based scenario for the OSCEs to be undertaken within the AEI. Practice assessors confirm they agree with this arrangement.

Students tell us they have the opportunity to feedback informally, on the virtual learning environment (VLE) platform Blackboard and formal evaluation mechanisms are in place. There are opportunities for students to evaluate practice learning throughout the programme and on their taught attendance days. Formal online evaluations support students to feedback regularly on theory and practice learning. Documentary evidence and the approval process confirms student feedback and any concerns are responded to appropriately by the programme team and any actions taken reported back to the students. Students tell us UoD work with PLPs to ensure they are supported and achieve their competencies in the practice learning environment. Students tell us that their feedback is valued.

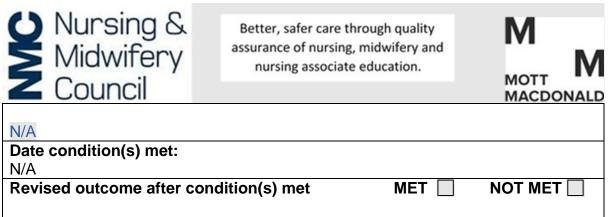|		
Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 1: *Standards framework for nursing and midwifery education*	**MET** ☒	**NOT MET** ☐
Assurance is provided that the AEI works 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.

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Proposed transfer of current students to the programme under review
Demonstrate a robust process to transfer current students onto the proposed programme to ensure programme learning outcomes and proficiencies meet the *Standards for pre-registration midwifery programmes* (NMC, 2019).

Proposed transfer of current students to the *Standards for student supervision and assessment* (NMC, 2018).
Demonstrate a robust process to transfer current students onto the *Standards for student supervision and assessment* (NMC, 2018).

Findings against the standard and requirements

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

- Evidence of processes to ensure that the applicant is a registered nurse (level 1), a registered midwife or a SCPHN before being considered as eligible to apply for entry onto an NMC approved prescribing programme (R1.1)

  YES ☒   **NO** ☐

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

  YES ☒   **NO** ☐

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

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

  MET ☒   **NOT MET** ☐

R1.3 is met. UoD have developed a detailed pre-admission portfolio document with associated guidance documents to ensure the admission process demonstrates governance structures are in place for the programmes. No interviews are carried out for the V150 and V300 applicants, they are selected and

supported by their employers. V100 applicants are interviewed as part of their wider programmes in collaboration with PLPs and service users and carers. Students and PLPs confirm disclosure and barring service (DBS) checks are in place within the application process. Line managers, prescribing and professional leads tell us they must confirm support is in place for students and that all applicants must meet NMC requirements. Self-employed and non-NHS applicants are identified in the pre-admission portfolio and must fully meet the admission criteria. In addition to completion of the pre-admission portfolio they must provide additional evidence for review by the programme team including how they will evidence protected learning time. A bespoke audit tool is used for self-employed applicants; this includes additional governance checking including systems regular reports, indemnity arrangements, and health and safety arrangements in the practice learning environment.

Educational audits are undertaken using a regional approach. These are in place with associated PLPs that address prescribing programmes. If there's no audit in place the programme leader will identify this from the pre-admission portfolio and undertake an audit in line with the UoD process This involves self-assessment by the practice learning environment followed by a visit or remote discussion for ratification by the programme team.

Processes for managing causes for concern are in place for students, practice supervisors and practice assessors. Students and PLPs confirm they know the process to raise concerns and that it's detailed in the PADs.

PLPs confirm they're fully involved in the development of the pre-admission portfolio and support programme requirements including learning in the practice learning environment. They ensure students are provided with protected learning time. Students confirm they are well supported by their employers and are released to attend the taught elements of the programmes. Students tell us practice learning is protected. Practice supervisors and practice assessors are identified within the pre-admission portfolio. V100, V150 and V300 practice assessors are required to have three years recent prescribing experience in a relevant area of practice. Practice supervisors for all programmes must be a qualified prescriber with experience in a relevant area of practice for a minimum of one year. The professional registration of all practice supervisors and practice assessors is checked at the admission stage by the programme team. The pre-admission portfolio guidance document recommends two practice supervisors are allocated to each student.

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** ☐

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

Proposed transfer of current students to the Standards for student supervision and assessment (SSSA) (NMC, 2018).
From your documentary analysis and your meetings at the approval visit confirm if students will be transferring to the SSSA, and if so that they have informed choice and are fully prepared for supervision and assessment. Students on the prescribing programmes will complete the current programmes. Any potential students who interrupt will continue on the current programme. V300 students will maintain the designated medical practitioner practice assessor.

Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to selection, admission and progression are met **YES** ☒   **NO** ☐

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Outcome		
Is the standard met?	**MET** ☒	**NOT MET** ☐
Date: 2 October 2020		
Post event review		
Identify how the condition(s) is met:		
N/A		
Date condition(s) met:		
N/A		
Revised outcome after condition(s) met:	**MET** ☐	**NOT MET** ☐
N/A		

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 <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met
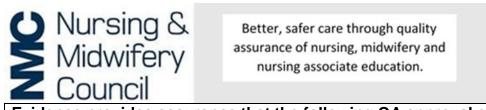
- Evidence of the learning and teaching strategies that will be used to support achievement of those competencies (R2.3)

  MET ☒　　　**NOT MET** ☐

R2.3 is met. Documentary evidence and the approval process confirms teaching and learning strategies support achievement of the RPS competencies in the programmes. Student facing documentation details the structure of the programmes. A blended learning approach includes classroom teaching and online guided and independent learning. Practice learning is supported by practice supervisors and practice assessors. Programme outcomes are mapped against the RPS competency framework for all prescribers. Students are assessed against these in the PAD. Achievement of the competencies is verified by practice assessors in agreement with academic assessors. V150 and V100 students share learning.

A variety of teaching and learning methods are used to address the learning needs of students. These include the VLE platform Blackboard, flipped classroom approaches, Panopto lecture capture is delivered on the VLE. V300 students practice the consultation skills required for prescribing in a clinical skills suite. V100 and V150 students utilise a scenario-based approach related to the community practitioner formulary. The V300 programme emphasises pharmacology for students to apply to their specialist areas of practice. Students tell us their learning experiences are positive and the programmes prepare them for prescribing practice. Students on each programme are taught together and academic differentiation is supported by additional tutorials. Students confirm they receive support from the programme team, who communicate effectively with PLPs, practice supervisors and practice assessors.

The programme team tell us that students are expected to attend all taught sessions. Online engagement is monitored, if there are any issues PLPs are informed by the programme team. PLPs confirm they support the delivery methods used.

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

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

  YES ☒   **NO** ☐

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

  YES ☒   **NO** ☐

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

  YES ☐   **NO** ☐   **N/A** ☒

The programmes are delivered in England

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

  YES ☒   **NO** ☐

Assurance is provided that Gateway 2: *Standards for student supervision and assessment* relevant to curricula are met   **YES** ☒   **NO** ☐

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

Date: 2 October 2020

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Post event review
Identify how the condition(s) is met:

N/A |
| **Date condition(s) met:**

N/A |
| **Revised outcome after condition(s) met:**   MET ☐   NOT MET ☐

N/A |

Standard 3: Practice learning
Approved education institutions must:

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

Approved education institutions, together with practice learning partners, must:
R3.2 ensure that practice learning complies with the NMC *Standards for student supervision and assessment*
R3.3 ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment
R3.4 ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC *Standards for student supervision and assessment* |

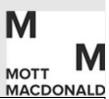| Findings against the standard and requirements |
| --- |
| **Provide an <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met**

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

    MET ☒   NOT MET ☐

R3.1 is met. Documentary evidence and the approval visit confirm suitable and effective arrangements and governance are in place for all applicants including those who are self-employed. This is assured by effective partnership working between the programme team and PLPs. Prescribing leads and PLPs confirm their involvement in the selection process for applicants from their organisation. |

Practice supervisors and practice assessors are identified at the application stage in the pre-admission portfolio and are prepared for their role by the AEI. All attend a workshop or attend programme induction sessions which include prescribing programme updates. All practice assessors and practice supervisors are provided with a handbook of practice assessment guidance and they have access to additional online resources. The programme team tell us they provide additional support as required including if required a practice learning environment visit. Students and PLPs tell us practice learning is supported and protected and there's robust approach to ensuring practice assessors and practice supervisors are well prepared.

The pre-admission portfolio must be completed by self-employed applicants. The programme team scrutinise the evidence including a personal statement, self-declaration and evidence of assessed clinical knowledge and skills. Clinical governance arrangements are assured through a bespoke educational audit. The audit includes questions related to health and safety policies, indemnity assurance and the commitment by practice assessors and practice supervisors that there's sufficient time to support a safe learning culture and adherence to governance.

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 <u>evaluative summary</u> 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. Programme documentation and the approval visit confirm a range of simulation-based and technology enhanced strategies are used appropriately to support learning and assessment and these are integrated throughout the programmes. Strategies include the use of recorded lectures using Panopto, collaborate classrooms, online workbooks and online quizzes that address calculations and pharmacology. Students confirm their positivity about the learning resources on the VLE. The OSCE in the V300 programme uses simulation to practice prescribing assessment skills. V100, V150 and V300 students practice prescribing assessment skills and prescription generation and writing skills in the practice learning environment. The programmes use case studies to support the development of prescribing skills.

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** ☐

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** ☐
Date: 2 October 2020		
Post event review		
Identify how the condition(s) is met: N/A		
Date condition(s) met: N/A		
Revised outcome after condition(s) met:	**MET** ☐	**NOT MET** ☐
N/A		

Standard 4: Supervision and assessment
Approved education institutions, together with practice learning partners, must: R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC *Standards framework for nursing and midwifery education* R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC *Standards for student supervision and assessment* R4.3 appoint a programme leader in accordance with the requirements of the NMC *Standards framework for nursing and midwifery education.* The programme leader of a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience

R4.4 ensure the programme leader works in conjunction with the lead midwife for education (LME) and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes

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

R4.5.1 In exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor for that part of the programme where the prescribing student is undergoing training in a practice learning setting. In such instances, the student, practice supervisor/assessor and the AEI will need to evidence why it was necessary for the practice supervisor and assessor roles to be carried out by the same person

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

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

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

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

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

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

Findings against the standards and requirements

Provide an <u>evaluative summary</u> 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. The programme team are established and appropriately qualified to deliver the programmes. PLPs tell us they engage with the programme teams to ensure the SFNME is applied to the programmes. PLPs and UoD work in partnership to manage issues associated with practice learning environments. If required, academic assessors will visit practice learning environments to provide additional support and undertake tripartite meetings with students and practice assessors. Initial meetings include the development of an action plan for students

to work towards achievement of the RPS competencies in partnership with their practice assessor, practice supervisor and academic assessor.

The PAD clearly details the communication process between practice assessors and practice supervisors are at three main points in the programmes. The documentation at each stage provides evidence of progression towards achievement of the RPS competencies. V100, V150 and V300 final programme sign-off is agreed with academic assessors and recorded in the PAD. Practice assessor and practice supervisor facing documentation details the planned points of communication. Practice assessor and practice supervisor handbooks ensure they have access to cause for concern flow charts, an escalating form and key contacts including academic assessor details. The PAD requires students to sign a learning agreement that includes setting dates to review their progress. This encourages them to feedback any issues identified in the practice learning environment to practice assessors and academic assessors.

- 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 met. Educational audits and admission processes are in place to support practice learning and ensure that practice supervisors and practice assessors are identified at admission. The programme team and PLPs tell us there's effective relationships between practice supervisors, practice assessors and academic assessors.

Documentary evidence and the approval process confirms there's a comprehensive practice assessors and practice supervisors prescribing specific preparation package. This requires all new practice assessors and practice supervisors to undertake an online assessed preparation course. A portfolio of evidence includes mapping to the RPS (2019) designated prescribing practitioner competency framework. All practice assessors and practice supervisors are required to attend a prescribing specific workshop and prescribing programme updates. Existing practice assessors and practice supervisors undertake the online course; they are not required to produce a portfolio. There's a requirement that they attend a prescribing update. Online updates are delivered at regular intervals, practice assessors and practice supervisors are offered the opportunity to attend the student induction sessions. PLPs tell us they fully support the preparation and confirm the importance of the prescribing updates. If the V300 practice assessor is a nurse or midwife prescriber a medical prescriber must be identified as one of the practice supervisors. The programme team and PLPs tell us this is to support the transition of nurse and midwife V300 practice assessors. The programme team are asked to consider the requirement for this approach. (Recommendation two)

The head of school confirms assurance that there are adequate academic assessors with relevant experience and professional backgrounds to support the

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programmes. The role is resourced in line with workload allocations. Academic assessors must hold a relevant professional qualification and been prepared for their role within staff development days. PLPs tell us they understand the principles of the SSSA and the role of practice assessors, practice supervisors and academic assessors. PLPs tell us there are adequate practice assessors and practice supervisors to support learning in practice.

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

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

  YES ☒   **NO** ☐

- Evidence of the programme leader working in conjunction with the LME and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes (R4.4)

  YES ☒   **NO** ☐

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

- Processes are in place to ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking (R4.5)

  MET ☒   **NOT MET** ☐

R4.5 is met. The pre-admission portfolio identifies practice assessors and confirms they must have relevant qualifications and three years recent prescribing experience. The programme team confirm they scrutinise all practice assessor qualifications at application. All students have a practice assessor with relevant experience and qualifications commensurate with the prescribing programme they are undertaking. PLPs confirm sufficient practice assessors to support V100 and V150 students. All SCPHN practice assessors are V100 prescribers. For SPQ and SCPHN applicants who intend to undertake the V300 programme they must follow the V300 application process. For those students who don't have a SPQ or SCPHN V300 prescribing practice assessor they must identify a suitably qualified V300 prescriber to act as the practice assessor at application. Students tell us they are supported by qualified prescribers relevant to the programme they are undertaking.

It's explicit in the pre-admission portfolio that practice assessors and practice supervisors should be different individuals; only in exceptional circumstances can

they be the same person. If this occurs it's clear this must be identified at application supported by a suitable rationale from the applicant's line manager or practice assessor. The arrangement is subject to scrutiny and monitoring by the programme leader.

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

- Processes are in place to ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking (R4.6)

    YES ☒   **NO** ☐

- Processes are in place to provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes (R4.7)

    YES ☒   **NO** ☐

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

    YES ☒   **NO** ☐

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

    YES ☒   **NO** ☐

Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to supervision and assessment are met

    YES ☒   **NO** ☐

Assurance is provided that Gateway 2: *Standards for student supervision and assessment* relevant to supervision and assessment are met

    YES ☒   **NO** ☐

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Outcome		
Is the standard met?	**MET** ☒	**NOT MET** ☐
Date: 2 October 2020		
Post event review		
Identify how the condition(s) is met: N/A		
Date condition(s) met: N/A		
Revised outcome after condition(s) met:	**MET** ☐	**NOT MET** ☐
N/A		

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

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- a nurse or midwife independent/supplementary prescriber (V300) (R5.1)

YES ☒   **NO** ☐

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

YES ☒   **NO** ☐

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

YES ☒   **NO** ☐

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

YES ☒   **NO** ☐

Assurance is provided that the *Standards framework for nursing and midwifery education* relevant to the qualification to be awarded are met

YES ☒   **NO** ☐

Outcome		
Is the standard met?	**MET** ☒	**NOT MET** ☐
Date: 2 October 2020		
Post event review		
Identify how the condition(s) is met: N/A		
Date condition(s) met: N/A		
Revised outcome after condition(s) met:	**MET** ☐	**NOT MET** ☐
N/A		

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	☒	☐
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) (Gateway 1)	☒	☐
Mapping document providing evidence of how the *Standards for student supervision and assessment* (NMC, 2018) apply to the programme(s) (Gateway 2)	☒	☐
Mapping document providing evidence of how the programme meets the *Standards for prescribing programmes* and RPS *Standards of proficiency for prescribers* (NMC, 2018) (Gateway 3)	☒	☐
Curricula vitae for relevant staff	☒	☐
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website	☒	☐
Written placement agreements between the education institution and associated practice learning partners to support the programme intentions.	☒	☐
If you stated no above, please provide the reason and mitigation		
List additional documentation:

Post visit documentation:

Signed approval outcome report confirming the university conditions are met, 3 November 2020 | | |

Additional comments:
None identified.

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

	YES	NO
Senior managers of the AEI/education institution with responsibility for resources for the programme	☒	☐
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: Past V100 student and V300 January 2020 x one Past V100 student and V300 September 2017 x one		
Service users and carers	☒	☐
If you stated no above, please provide the reason and mitigation This is an established AEI and visits to facilities weren't needed.		
Additional comments None identified.		

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

	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 This is an established AEI and visits to facilities weren't needed.		
Additional comments: None identified.		

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Issue record			
Final Report			
Author(s):	Heather Bain	Date:	12 October 2020
Checked by:	Bernadette Martin	Date:	15 October 2020
Submitted by:	Lucy Percival	Date:	19 November 2020
Approved by:	Leeann Greer	Date:	23 November 2020