

Programme approval visit report

Section one

Programme provider name:	University of Exeter
In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i>	Devon Partnership NHS Trust Northern Devon Healthcare NHS Trust Royal Devon and Exeter NHS Foundation Trust Torbay and South Devon NHS Trusts NHS Devon Clinical Commissioning Group Private, voluntary and independent providers
Programmes reviewed:	Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V150 <input type="checkbox"/> Community practitioner nurse prescribing V100 <input type="checkbox"/>
Title of programme(s):	Practice Certificate in Independent Prescribing
Academic level:	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input checked="" type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Community practitioner nurse prescribing V150	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Community practitioner nurse prescribing V100	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10

	<input type="checkbox"/> Level 11
Date of approval visit:	20 January 2021
Programme start date:	
Independent and supplementary nurse prescribing V300	<input type="text" value="1 October 2021"/>
Community practitioner nurse prescribing V150	<input type="text" value="N/A"/>
Community practitioner nurse prescribing V100	<input type="text" value="N/A"/>
QA visitor:	Registrant Visitor: Mike Kitching

Section two

Summary of review and findings

The University of Exeter (UoE) is a Nursing and Midwifery Council (NMC) approved education institution (AEI). The College of medicine and health (the college) present an independent and supplementary prescribing (ISP V300) programme for approval. The programme is designed to meet the Standards for prescribing programmes (SPP) (NMC, 2018) and mapped to the Standards of proficiency for nurse prescriber (adoption of the Royal Pharmaceutical Society (RPS), 2016) competency framework for all prescribers) (NMC, 2018).

The ISP V300 programme is awarded as a Practice certificate in independent prescribing. It's a part-time six month programme for NMC registered nurses and midwives, comprising one 45 credit module at academic level seven. The college are adopting a multi-professional approach to prescribing education and nurses and midwives will learn together with pharmacists and allied health professionals. The programme is delivered by the college's pharmacy team and led by a pharmacist who holds an independent prescribing qualification. There's a current nurse independent prescriber in the programme team and a senior nurse from the UoE academy of nursing is involved in the oversight of programme governance. Students can complete ISP V300 as a standalone programme or as an optional part of the MSc in advanced clinical practice.

Documentary evidence and discussion at the approval visit confirms effective partnership working with practice learning partners (PLPs) at both an operational and strategic level. The college senior team tell us they meet regularly with PLPs to discuss post registration education and workforce planning. They confirm that the programme is developed to meet the increasing need for independent prescribers in nursing within the local health economy. Senior nursing leaders confirm their support for the programme development and have processes in place to support the governance of prescribing applicants and students in the practice learning environment.

At operational level there's evidence of effective communication and preparation processes between the programme team and PLPs to ensure sufficient practice assessors and practice supervisors. UoE confirm the practice assessor must be an active, experienced prescriber, normally with three years or more recent clinical experience for a group of patients/clients in the applicant's field of practice. However, documentation is currently inconsistent in defining the roles of practice assessors and supervisors. Students achieve the Competency framework for all prescribers (RPS, 2016) within the practice setting using the UoE portfolio of practice document.

A student on the current independent prescribing programme approved for pharmacists confirms there are opportunities to evaluate the programme and the

programme team listen to feedback that they give. Students from other programmes confirm that they feel well supported in their studies by UoE staff, processes and services.

The college has a clear service user strategy, however there's little evidence of programme team engagement with service users and carers in the co-production of the programme for nurses and midwives. The university tell us they're implementing a process to involve all stakeholders in the ongoing coproduction and design of the programme, however there's no clear implementation plan for this.

The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) is not met at programme level as a condition applies.

The Standards for student supervision and assessment (SSSA) (NMC, 2018) are not met at programme level as a condition applies.

The programme is recommended to the NMC for approval subject to two NMC conditions. There are no recommendations.

Updated 19 February 2021:

UoE have provided evidence in response to the two NMC conditions. The NMC conditions are met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	<p>Programme is recommended to the NMC for approval <input type="checkbox"/></p> <p>Programme is recommended for approval subject to specific conditions being met <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
Conditions:	<p>Effective partnership working: collaboration, culture, communication and resources:</p> <p>Condition one: UoE must provide an implementation plan to ensure the prescribing programme is designed, delivered, evaluated and co-produced with stakeholders. (SFNME R1.12; SPP 2.1)</p> <p>Selection, admission and progression: None identified.</p>

	<p>Practice learning: Condition two: UoE must provide practice assessment documentation that makes clear the roles of practice assessor, practice supervisor and academic assessor. (SPP R4.2)</p> <p>Assessment, fitness for practice and award: None identified.</p> <p>Education governance: management and quality assurance: None identified.</p>
Date condition(s) to be met:	19 February 2021
Recommendations to enhance the programme delivery:	None identified.
Focused areas for future monitoring:	None identified.

Programme is recommended for approval subject to specific conditions being met	
Commentary post review of evidence against conditions	
<p>UoE have developed a stakeholder implementation plan together with a terms of reference for the prescribing programme. The membership and functions of the group has been designed to ensure that there's co-production of the curriculum with all stakeholders. Condition one is met.</p> <p>UoE have now clearly documented the roles of practice assessor, practice supervisor and academic assessor. This document will be provided as an annexe in both the designated prescribing practitioner handbook and portfolio of practice so that it's clearly communicated to stakeholders including students, practice assessors, practice supervisors and academic assessors. Condition two is met.</p>	
AEI Observations	Observations have been made by the education institution YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Summary of observations made, if applicable	The AEI noted that yes and no had been checked for Gateway one mapping in the sources of evidence section. This has been amended to yes.

Final recommendation made to NMC:	Programme is recommended to the NMC for approval <input checked="" type="checkbox"/>
	Recommended to refuse approval of the programme <input type="checkbox"/>
Date condition(s) met:	19 February 2021

Section three

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

Partnerships
<p>The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.</p>
<p>Please refer to the following NMC standards reference points for this section:</p> <p>Standards framework for nursing and midwifery education (NMC, 2018)</p> <p>Standard 1: The learning culture:</p> <p>R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders</p> <p>R1.13 work with service providers to demonstrate and promote inter-professional learning and working</p> <p>Standard 2: Educational governance and quality:</p> <p>R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders</p> <p>R2.4 comply with NMC Standards for student supervision and assessment</p> <p>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</p>

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

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

Standard 3: Student empowerment:

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

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

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

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

Standard 4: Educators and assessors:

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

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

R4.10 share effective practice and learn from others

Standard 5: Curricula and assessment:

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

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

R5.14 a range of people including service users contribute to student assessment

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

Standard 1: Organisation of practice learning:

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

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

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

Standard 2: Expectations of practice supervisors:

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

Standard 3: Practice supervisors: role and responsibilities:

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

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

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

Standard 7: Practice assessors: responsibilities:

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

Standard 9: Academic assessors: responsibilities:

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

Findings against the standard and requirements

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

There's evidence of partnership working between the college and PLPs with close working relationships confirmed. The college and PLPs are part of regular non-medical prescribing (NMP) forum meetings and PLPs speak positively about the opportunities this will provide to raise and discuss programme related issues. PLPs tell us of their support for the development of the IPS V300 programme at UoE identifying that this will enhance achievement of local workforce plans.

Inter-professional (IPL) prescribing education is supported by a college Inter-professional learning strategy. This is overseen at college level by the IPL committee who are responsible for the implementation of the strategy with representation from all programmes involved. The IPL committee reports to the UoE education quality standards group.

There's documentary evidence of service user and carers and other stakeholder involvement at an initial programme development event for the Practice certificate in independent prescribing. This is confirmed by stakeholders. However, there's no evidence of how this informed decision making in the development of the ISP V300 curriculum or how stakeholders will be involved in the ongoing co-production of the programme. (Condition one)

At operational level, there's evidence of partnership working between UoE and PLPs to support the delivery of the programme. They work together to undertake and manage educational audits to ensure a safe learning environment. The educational audit assures that practice learning areas will meet the requirements of the SPP (NMC, 2018). Outstanding actions are monitored by the programme team. The quality assurance process within the college ensures there's feedback to the PLPs. Senior UoE staff and the programme team confirm the process for quality reporting to enable the NMC annual monitoring process. UoE have a raising concerns policy and students and PLPs can articulate the raising concerns process.

Documentary evidence and the approval process confirm a clear approach to selecting and preparing practice supervisors and practice assessors to meet the SSSA. Practice assessors and practice supervisors have a handbook and the programme team confirm induction training is offered. The programme team report a planned joint approach to supporting practice learning. The practice assessor will liaise with the academic assessor to discuss student progress and provide feedback towards achieving RPS (2016) competencies. The portfolio of practice identifies specific points within the programme for practice assessor to document student progress.

Students from similar courses at UoE are positive about their learning experiences and support provided. Students report they feel valued and they have opportunities to feedback informally and through formal mechanisms. Student feedback is responded to and appropriate actions taken. All assessments are mapped to the learning outcomes and the competency framework for prescribers (RPS, 2016) and ensure appropriate monitoring of student progression.

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**

There's documentary evidence of stakeholder attendance at an initial programme development event, confirmed by stakeholders. However, there's no evidence of how this informed decision making in the IPS V300 curriculum and how stakeholders will be involved in the ongoing co-production of the programme. The college need to clearly show how it will implement its plans for stakeholder involvement in the prescribing programme to provide assurance that co-production of the programme will be achieved.

Condition one: UoE must provide an implementation plan to ensure the prescribing programme is designed, delivered, evaluated and co-produced with stakeholders. (SFNME R1.12; 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**

Post event review

Identify how the condition(s) is met

Condition one: A stakeholder implementation plan and terms of reference explicit to the prescribing programme has been developed that meets the NMC standards.

Condition one is met.

Evidence:

Independent prescribing stakeholder implementation plan, 19 February 2021
Independent Prescribing Advisory Group (IPAG) - terms of reference, 19 February 2021

Date condition(s) met: 19 February 2021

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

Student journey through the programme

Standard 1: Selection, admission and progression

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

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

R1.2 provide opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non- NHS employed registrants) to apply for entry onto an NMC approved prescribing programme

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

R1.4 consider recognition of prior learning that is capable of being mapped to the [RPS Competency Framework for all Prescribers](#)

R1.5 confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme

R1.6 confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas:

R1.6.1 Clinical/health assessment

R1.6.2 Diagnostics/care management

R1.6.3 Planning and evaluation of care

R1.7 ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme

Note: Education institutions and their practice learning partners may propose to transfer current students onto the new programme to meet the [Standards for prescribing programmes](#) and [Standards of proficiency for nurse and midwife prescriber \(adoption of the RPS Competency Framework for all Prescribers\)](#). If so, evidence must be provided to support this proposed transfer as part of the education institution's mapping process at Gateway 3.

Proposed transfer of current students to the programme under review

Demonstrate a robust process to transfer current students onto the proposed programme to ensure programme learning outcomes and proficiencies meet the [Standards for pre-registration midwifery programmes](#) (NMC, 2019).

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

Demonstrate a robust process to transfer current students onto the [Standards for student supervision and assessment](#) (NMC, 2018).

Findings against the standard and requirements

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

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

YES NO

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

marketing material. Evidence of this statement on university web pages (R1.2)

YES NO

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

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

MET NOT MET

R1.3 is met. The documented application process demonstrates a governance structure to ensure there'll be access to protected learning time, employer and clinical support. Applicants must have secured employer support and their managers will be required to confirm the suitability of the applicant to prescribe. This includes confirming clinical competence and an agreement that protected time will be provided. As part of the application process employers also confirm that an up to date disclosure and barring service (DBS) confirmation is in place. A self-declaration is required by self-employed applicants to confirm the entry criteria where these would be normally signed by an employer.

The programme team and PLPs tell us there's a process to ensure that a practice supervisor and practice assessor is in place to support learning in practice. Practice assessors and practice supervisors are required to confirm that they meet the criteria for the role as part of the application form. The programme lead confirms they meet the role criteria as part of the application process.

The programme leader confirms that all applications are reviewed as part of the application process to ensure that students and assessors meet the relevant criteria. Telephone interviews are carried out to follow up applications where there are concerns or queries regarding governance or an applicant's suitability. The programme leader confirms the final approval for an applicant to be admitted in all cases.

UoE and PLPs complete educational audits confirming that practice learning environments meet SSSA criteria. This is checked by the programme leader during the application process. Self-employed applicants complete the educational audit process in conjunction with their identified practice assessor. These are reviewed and acted upon by the programme leader.

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

- Processes are in place to consider recognition of prior learning that is capable of being mapped to the RPS *Competency Framework for all Prescribers* (R1.4)

YES NO
- Processes are in place to confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme (R1.5)

YES NO
- Processes are in place to confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas (R1.6):

 - Clinical/health assessment
 - Diagnostics/care management
 - Planning and evaluation

YES NO
- Processes are in place to ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme (R1.7)

YES NO

Proposed transfer of current students to the programme under review

From your documentary analysis and your meeting with students, provide an evaluative summary to confirm how the Standards for prescribing programmes and Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers) will be met through the transfer of existing students onto the proposed programme.

This is a proposed new prescribing programme for nurses at UoE and therefore there are no existing students to transfer.

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

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

This is a proposed new prescribing programme for nurses at UoE and therefore there are no existing students to transfer to the SSSA.

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

YES NO

Outcome

Is the standard met? MET NOT MET

Date: 20 January 2021

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

R2.1 is not met. There's no evidence of how stakeholder engagement informed decision making in the co-production of the curriculum. The college need to clearly show how it will implement its plans for stakeholder involvement in the prescribing programme to provide assurance that co-production in the programme will be achieved. (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

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. Programme documentation details the structure of the ISP V300 programme. The ISP V300 programme will be delivered at academic level seven, comprising of one module, 45 academic credits, delivered part time. The teaching, learning and assessment strategy is detailed in the module descriptor and programme handbook. The programme team tell us they use a blended approach, combining e-learning with face-to-face teaching. Learning is designed using the university's curriculum model and includes a variety of strategies including interactive lecture activities, peer-to-peer learning, tutor-led sessions, group work and workshops to address the needs of all learners. E-learning is delivered via the university's virtual learning environment (VLE) and makes use of a variety of digital learning tools to enhance learning and interactivity.

The programme team includes a range of professionals including pharmacists to support the development of nurses understanding of pharmacology and prescribing practice. Students will be able to develop clinical examination and prescribing practice through simulated and practice learning and there are opportunities for objective structured clinical examination (OSCE). There's an inter-professional approach to learning with shared teaching between nurses,

pharmacists and allied health professional students undertaking the Practice certificate in independent prescribing.

There's 90 hours of practice learning supervised by a practice assessor and practice supervisor. A portfolio of prescribing practice requires the development of individual learning plans, reflective and cased based learning. The portfolio provides a structure to support student learning and enables the practice supervisor, practice assessor and academic assessor to document the students development and achievement of RPS (2016) competencies. The practice assessor and academic assessor record in the practice assessment documentation that RPS competencies are met.

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

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

YES NO

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

YES NO

If relevant to the review

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

YES NO N/A

The programme will not be delivered in Wales.

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

YES NO

There's no documentary evidence of how stakeholders are involved in and inform decision making in the co-production of this programme. (Condition one)

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**

There's no documentary evidence of how stakeholders are involved in and inform decision making in the co-production of the programme.

Condition one: UoE must provide an implementation plan to ensure the prescribing programme is designed, delivered, evaluated and co-produced with stakeholders. (SFNME R1.12; SPP R2.1)

Date: 20 January 2021

Post event review

Identify how the condition(s) is met:

Condition one: A stakeholder implementation plan explicit to the prescribing programme has been developed that meets the NMC standards.

Condition one is met.

Evidence:

Independent prescribing stakeholder implementation plan, 19 February 2021
IPAG - terms of reference, 19 February 2021

Date condition(s) met: 19 February 2021

Revised outcome after condition(s) met: **MET** **NOT 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 [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 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 met. Documentary evidence confirms that governance structures are in place to enable students to undertake and be adequately supported throughout their practice learning. This begins with the application process where assurance is provided that the student will work within a defined clinical governance framework, including ensuring protected learning time for students.

UoE and PLPs audit practice learning environments and monitor their quality. Audit processes provide evidence of safe practice placement environments which meet NMC standards. There's a process to withdraw practice learning environments, implement action plans and reinstate practice learning areas where student learning is at risk. There are policies in place demonstrating commitment to public protection through the management and escalation of concerns in academic and practice settings.

PLPs tell us they have leads in their organisations who support the governance for NMP students on the programme. Suitable practice supervisors and practice assessors are identified for students as part of the application process and are prepared by UoE for these roles. There's a handbook for practice supervisors and practice assessors, which clearly identifies their role and the expectations. An induction day will be held as part of the preparation of practice supervisors and practice assessors. Academic assessors are identified to oversee progression and achievement decisions.

With the practice portfolio, students maintain a record of supervised practice to demonstrate progress in practice learning and to act as a basis of ongoing assessment and achievement. A minimum of 45 hours is required to be spent

directly with the practice assessor. A range of evidence is required to demonstrate achievement of RPS (2016) proficiencies and there are regular progression points to review student progress.

Self-employed applicants are required to complete self-certification as part of the application process, including providing a reference. Their application confirms their practice placement area and the programme team confirm that they complete an educational audit in conjunction with the agreed practice assessor. The audit is reviewed by programme lead.

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

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

YES NO

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

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

MET NOT MET

R3.3 is met. Documentary evidence confirms the programme uses a range of technology to support learning and assessment, these are effective and proportionate. The programme team tell us of the range of tools to support e-learning for students and staff are supported to develop their digital learning approaches.

This includes use of a simulated learning suite and simulated practice skills laboratories. A blended learning approach to teaching and learning is taken with the VLE supporting students to integrate and apply theory to their own area of prescribing practice.

Documentation and the programme team tell us that problem-based learning (PBL) will be used as part of face-to-face teaching, allowing students to tailor their learning on subject areas most relevant to their identified learning needs. Practice based assessments are embedded in the programme to support learning, either via simulation or in practice settings. OSCE is used as part of the assessment strategy to demonstrate the application of clinical skills to simulated scenarios, including communication skills, taking a history, communication skills, shared decision-making and prescription writing. SUC confirm their involvement in OSCE assessment.

The programme team confirm that the portfolio of practice is currently paper based, however, they plan to develop this into an e-portfolio. They tell us that stakeholders will be included in this development through a planned IPAG.

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: 20 January 2021

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 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. Documentary analysis and meetings with the UoE teaching team, students, practice supervisors and practice assessors, confirm that students will receive information to support supervision, learning and assessment. This is contained in the programme and module handbooks and practice portfolio. Students, practice supervisors and practice assessors will be given written

guidance about providing consent, promoting public safety and raising and escalating concerns. SUC contribute to the assessment of students through clinical practice and the provision of feedback to students within the practice assessment documentation. Students tell us they're advised about and have access to the procedure for raising a concern within both the practice and university learning environments.

Programme assessments are designed to support students to demonstrate the programme proficiencies, competence and confidence to prescribe. The practice assessment document requires students to be assessed by their practice assessor through a range of methods, such as observation, workplace-based assessment and professional discussions. Assessments are mapped to the learning outcomes and the competency framework for all prescribers (RPS, 2016) and there's points for monitoring progression. The documentation supports a planned approach to support practice learning whereby the academic assessor will meet with the practice assessor to discuss and provide feedback on student progress towards achieving the competencies within the RPS (2016) competency framework for all prescribers. PLP confirm they understand the practice assessment process.

The programme lead confirms they'll work in conjunction with a lead midwife for education (LME) and the practice assessor to ensure there's support for any midwives undertaking the prescribing module. The LME will review the personal learning plans within the portfolio of practice and will be available to offer feedback and advice to the practice assessor if needed.

- 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's documentary evidence that students will be assessed in practice by a practice assessor, with support from a practice supervisor.

The practice supervisor is able to contribute to the practice assessment process at initial and midpoint review and final assessment, however the roles of the practice assessor, practice supervisor and academic assessor are inconsistently identified and defined in the documentation and need clarifying in order to assure the process. (Condition two). Assessment documentation also includes contributions from SUCs and other members of the healthcare team. Evidence of successful completion of practice learning is focused on achieving the RPS competencies within their portfolio of practice.

UoE are adopting a regional approach to developing practice supervisors and practice assessors through the south west area placement partnership. There's a handbook to prepare and support practice assessors and supervisors in their roles and responsibilities with students. There's an online induction session which

introduces practice assessors and supervisors to the prescribing programme at UoE. Academic assessors must hold a relevant prescribing qualification and are prepared for their role by UoE either through a face-to-face workshop or online provision. The academic assessor role is factored into the staff workload and is monitored through university appraisal processes.

The processes for student support are detailed within student facing documentation. This includes academic support and referral to occupational health or welfare services. The programme team confirm with students if additional support needs are identified either before or during the course.

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

- Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience (R4.3)
YES NO
- Evidence of the programme leader working in conjunction with the LME and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes (R4.4)
YES NO

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

- Processes are in place to ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking (R4.5)
MET NOT MET

R4.5 is met. An appropriate practice assessor is identified by the student's employer as part of the application process. They're registered healthcare professionals and experienced prescribers with suitable equivalent qualifications for the prescribing programme. The AEI checks and confirms practice assessor qualifications. Supported applications are signed by line managers and NMP leads within the employing health care organisation. Normally the practice assessor and the practice supervisor won't be the same person. UoE tell us that when the practice assessor and supervisor are required to be the same person, they'll assess what measures are in place to ensure objectivity and mitigate risk. Feedback is sought from various sources to ensure objectivity in practice assessment.

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

Documentation is inconsistent in applying the roles of practice supervisor, practice assessor and academic assessor as defined in the SSSA. (Condition two)

Outcome

Is the standard met?

MET

NOT MET

Condition two: UoE must provide practice assessment documentation that makes clear the roles of practice assessor, practice supervisor and academic assessor. (SPP R4.2)

Date: 20 January 2021

Post event review

Identify how the condition(s) is met:

Condition two: UoE have produced an independent prescribing roles and responsibilities document that makes clear the roles of practice assessor, practice supervisor and academic assessor. This document will be provided as an annexe in both the designated prescribing practitioner handbook and portfolio of practice.

Condition two is met.

Evidence:

Independent prescribing roles and responsibilities document, 19 February 2021

Date condition(s) met: 19 February 2021

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

Standard 5: Qualification to be awarded

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

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

R5.1.1 a community practitioner nurse or midwife prescriber (V100/V150), or
R5.1.2 a nurse or midwife independent/supplementary prescriber (V300)

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

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

R5.4 inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they're 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 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: 20 January 2021

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

Section four

Sources of evidence

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

Key documentation	YES	NO
Programme document, including proposal, rationale and consultation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme specification(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Module descriptors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student facing documentation including: programme handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student university handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice assessment documentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice placement handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PAD linked to competence outcomes, and mapped against RPS <i>A Competency Framework for all Prescribers</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC, 2018) (Gateway 1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the <i>Standards for student supervision and assessment</i> (NMC, 2018) apply to the programme(s) (Gateway 2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the programme meets the <i>Standards for prescribing programmes</i> and RPS <i>Standards of proficiency for prescribers</i> (NMC, 2018) (Gateway 3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Curricula vitae for relevant staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Written placement agreements between the education institution and associated practice learning partners to support the programme intentions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation		
List additional documentation: External advisor report, January 2021 Post approval event documentary evidence to meet conditions one and two: Independent prescribing stakeholder implementation plan, 19 February 2021 IPAG - terms of reference, 19 February 2021		

Independent prescribing roles and responsibilities document, 19 February 2021

Additional comments:
None identified.

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

	YES	NO
Senior managers of the AEI/education institution with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated practice learning partners with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme team/academic assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice leads/practice supervisors/ practice assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, please identify cohort year/programme of study: Pre-registration nursing year one x four students Pre-registration nursing year two x one student Practice certificate in independent prescribing (pharmacist) x one student MSc Clinical pharmacy x one student MSc Advanced clinical practice x one student		
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation		
Additional comments None identified.		

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

	YES	NO
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Library facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Technology enhanced learning Virtual learning environment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Educational audit tools/documentation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Practice learning environments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, state where visited/findings		
If you stated no above, please provide the reason and mitigation UoE is an AEI. The visit was undertaken remotely.		

Additional comments:
None identified.

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Issue record

Final Report

Author(s):	Mike Kitching	Date:	29 January 2021
Checked by:	Patricia Hibberd	Date:	3 February 2021
Submitted by:	Lucy Percival	Date:	18 March 2021
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