

Programme approval visit report

Section one

Programme provider name:	University of Leeds
In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i>	NHS Leeds Teaching Hospital NHS Trust SJUH adult, child, mental health NHS; Bradford Teaching Hospitals NHS Foundation Trust NHS; Harrogate NHS Trust NHS; York Teaching Hospital NHS NHS Airedale NHS Foundation Trust NHS; Leeds Teaching Hospital NHS Trust LGI NHS; South West Yorkshire Partnership NHS Trust
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"/>
Academic level:	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input checked="" 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
Title of programme(s):	Independent/supplementary prescribing for Nurses and Midwives
Date of approval visit:	12 June 2019
Programme start date: Independent and supplementary nurse prescribing V300 Community practitioner nurse prescribing V150 Community practitioner nurse prescribing V100	<input type="text" value="23 September 2019"/> <input type="text" value="N/A"/> <input type="text" value="N/A"/>
QA visitor:	Heather Bain

Section two

Summary of review and findings

The University of Leeds (UoL), school of healthcare is seeking approval to deliver the independent and supplementary nurse and midwifery preparation programme (V300) against the NMC (2018) Standards for prescribing programmes with adoption of the Royal Pharmaceutical Society (RPS) Competence framework for all Prescribers. The programme will be delivered at academic level seven within a 30-credit module over a period of 26 weeks.

Documentary analysis and findings at the approval event demonstrates a commitment towards partnership working with key stakeholders. There is evidence of some partnership between the UoL and practice learning partners (PLPs) in this prescribing programme at both an operational and strategic level. There is evidence of effective communication processes between the school and PLPs to ensure all governance is in place to deliver the programme. There is some evidence of engagement with service users and carers.

The Standards for prescribing programmes (NMC, 2018) and the RPS competency framework for all prescribers are clearly detailed within the documentation and mapped to the programme.

Arrangements at programme level do not meet Gateway one Standards framework for nursing and midwifery education (SFNME). Arrangements at programme level do not meet Gateway two, Standards for student supervision and assessment (SSSA).

The programme is recommended for approval subject to two NMC conditions and one university condition. Two recommendations are made.

8 July 2019

Evidence was provided that the changes required to meet the two NMC conditions and one university condition have been made.

The SFNME is now met.

The SSSA is now 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

	<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>
<p>Conditions:</p> <p><i>Please identify the standard and requirement the condition relates to under the relevant key risk theme.</i></p> <p><i>Please state if the condition is AEI/education institution in nature or specific to NMC standards.</i></p>	<p>Effective partnership working: collaboration, culture, communication and resources</p> <p>Condition one: Develop an implementation plan to explicitly ensure the programme is designed, developed, delivered, evaluated and co-produced with service users and carers. (Standards framework for nursing and midwifery education R1.2, Standards for prescribing programmes R2.1)</p> <p>Selection, admission and progression</p> <p>None identified</p> <p>Practice learning</p> <p>Condition two: Ensure all documentation reflects the language of the SSSA, with an associated implementation plan developed in collaboration with practice learning partners for the role of practice assessors to be undertaken by suitably qualified healthcare professionals, in addition to medical practitioners. (SSSA R6.6, Standards for prescribing programmes R 4.2, R4.6)</p> <p>Assessment, fitness for practice and award</p> <p>Condition three: Address and map the UoL expectations for assessment and feedback and articulate the pass criteria for the objective structure clinical examinations (OSCE) both on the module specification and in the student handbook. (University Condition)</p> <p>Education governance: management and quality assurance</p> <p>None identified</p>
<p>Date condition(s) to be met:</p>	<p>8 July 2019</p>
<p>Recommendations to enhance the programme delivery:</p>	<p>Recommendation one: Consider reviewing the requirement that applicants should have two years' post-qualification experience prior to admission onto the programme. (Standards for prescribing programmes R 1.7)</p>

	<p>Recommendation two: Review the terminology in the portfolio, particularly in the comment sheet, to ensure this aligns with the module specification with regards to the four domains of person centred care, professionalism, professional knowledge and skills, and collaboration. (Standards for prescribing programmes R 2.3)</p>
<p>Focused areas for future monitoring:</p>	<p>The use of SUCs throughout the programme.</p> <p>The role of the practice supervisor and the practice assessor and the professional background of these individuals.</p>

<p>Programme is recommended for approval subject to specific conditions being met</p>	
<p>Commentary post review of evidence against conditions</p> <p>The AEI provided a revised service user and carer (SUC) implementation strategy that ensures sustainable SUC involvement in the delivery of the V300 prescribing programme. Condition one is met.</p> <p>An implementation plan of the SSSA together with amended programme documentation assures effective implementation of the SSSA. Condition two is met.</p> <p>The programme team have addressed and mapped the UoL expectations for assessment and feedback and articulated the pass criteria for the OSCE both on the module specification and in the student handbook. Condition three is met.</p> <p>The SFNME is now met.</p> <p>The SSSA are now met.</p> <p>The Standards for prescribing programmes (independent and supplementary prescribing) are now met.</p>	
<p>AEI Observations</p>	<p>Observations have been made by the education institution YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p>
<p>Summary of observations made, if applicable</p>	<p>The AEI has agreed the accuracy of the report.</p>

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:	8 July 2019

Section three

NMC Programme standards
<p>Please refer to NMC standards reference points</p> <p><u><i>Standards for prescribing programmes</i></u> (NMC, 2018)</p> <p><u><i>Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers)</i></u> (NMC, 2018)</p> <p><u><i>Standards framework for nursing and midwifery education</i></u> (NMC, 2018)</p> <p><u><i>Standards for student supervision and assessment</i></u> (NMC, 2018)</p> <p><u>The Code: Professional standards of practice and behaviour for nurses and midwives</u> (NMC, 2015)</p> <p><u>QA Framework for nursing, midwifery and nursing associate education</u> (NMC, 2018)</p> <p><u>QA Handbook</u> (October 2018)</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><u><i>Standards framework for nursing and midwifery education</i></u> (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 <u><i>Standards for student supervision and assessment</i></u></p> <p>R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of</p>

communication and accountability for the development, delivery, quality assurance and evaluation of their programmes

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

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

Standard 3: Student empowerment:

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

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

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

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

Standard 4: Educators and assessors:

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

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

R4.10 share effective practice and learn from others

Standard 5: Curricula and assessment:

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

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

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

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

Standard 1: Organisation of practice learning:

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

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

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

Standard 2: Expectations of practice supervisors:

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

Standard 3: Practice supervisors: role and responsibilities:

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

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

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

Standard 7: Practice assessors: responsibilities:

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

Standard 9: Academic assessors: responsibilities:

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

Findings against the standard and requirements

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

Documentary evidence and the approval process confirm there is evidence of some effective partnership working between the UoL and key stakeholders. Policies and processes are in place to support a partnership approach to the development and delivery of the programme. The PLPs state they would like further engagement to support the new programme going forward. The UoL has set an entry requirement that that applicants to the programme should have two years post registration experience prior to admission to the prescribing programme. This decision has not been taken in conjunction with PLPs. Recommendation one. Consider reviewing the requirement that applicants should

have two years' post-qualification experience prior to admission onto the programme. (Standards for prescribing programmes R1.7)

Seven students on week six of the current prescribing programme attended the event and spoke positively of their experience to date and the support provided by the UoL. The students value the face to face sessions and spoke of the real-life case studies used within the programme. They had no experience of service users being involved in the selection process, delivery of teaching sessions or being involved in the assessment. Documentary evidence demonstrates that two previous students had the opportunity to comment on the documents developed for the approval event. There was also evidence that the programme team had acted on feedback from students in reviewing the assessment strategy.

The programme team engage with the regional non-medical prescribing network meetings which the prescribing leads within PLPs attend, ensuring a partnership approach across the region.

The School has good practice guidance in engaging SUC. However, there is limited evidence of active SUC engagement across the curriculum both within the documentation and from the approval event. One service user in attendance told us they had the opportunity to feedback on the documentation. This service user made suggestions for future involvement of service users in this programme. This must be addressed. (Condition one) (Standards framework for nursing and midwifery education R1.12, Standards for prescribing programmes R2.1)

Evidence of robust partnership working between the UoL and PLPs in managing the educational audits and ensuring the governance is in place at admission is evident within the documentation and from the approval process. There is a planned joint approach to support practice learning with the practice documentation providing clarity between the roles of practice supervisors, practice assessors and academic assessors. The programme team report that the academic assessor will communicate with practice supervisors and practice assessors by email or telephone and will visit practice if there are causes of concern.

The programme team also report that they intend to continue using designated medical practitioners (DMPs) as practice assessors until further guidance is published from the General Pharmaceutical Society. All the documentation continues to refer to DMPs with practice assessor (PA) in brackets. There was no evidence at the event that the programme team had discussed with PLPs the transition to other health professionals becoming practice assessors. The PLPs report that they require suitable experienced and prepared nurse prescribers to act as practice assessors. This must be addressed. (Condition two) (Standards for student supervision and assessment R6.6, Standards for prescribing programmes R4.2, R4.6)

The PLPs are involved in the selection of students onto the programme which includes an application process that details employers, practice supervisors and practice assessors. This process is a jointly agreed process.

Documentary evidence demonstrates a commitment to an inclusive approach to the selection of students and programme delivery. The programme team report on the UoL services to support students at all times of their journey and the module handbook signposts students to these services. Students are actively encouraged to engage in their learning. Processes are in place to ensure relevant stakeholders including PLPs, practice assessors, practice supervisors and academic assessors

are supported to effectively engage in the student's learning on an individual basis. The practice assessment document is used as the vehicle for this process.

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**

The one service user in attendance reported on his input into the programme curriculum. This was limited to commenting on the completed documentation. There was no evidence of SUCs being involved in the development of the programme or within selection and recruitment processes. The programme team did not articulate SUC involvement within teaching and assessment on the prescribing programme. Students could not report on any teaching with SUCs. (Condition one) (Standards framework for nursing and midwifery education R1.12, Standards for prescribing programmes R2.1)

The documentation continues to refer to designated medical practitioners (DMP) with the term PA in brackets. The programme team reported that they intended to continue using DMPs. However the PLPs would like other registered healthcare professionals, with suitable equivalent qualifications for the programme the student is undertaking, to be considered as PAs. (Condition two) (Standards for student supervision and assessment R6.6, Standards for prescribing programmes R4.2, R4.6)

Gateway 2: Standards for student supervision and assessment

MET **NOT MET**

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

There is little evidence of how SUCs have been involved in the co-production of this programme and how they will sustainably be involved in its delivery.

Condition one: Develop an implementation plan to explicitly ensure the programme is designed, developed, delivered, evaluated and co-produced with SUCs. (Standards framework for nursing and midwifery education R1.12, Standards for prescribing programmes R2.1)

The programme team while acknowledging the roles of PS, PA and AA have not embraced the NMC SSSA in relation to prescribing programmes.

Condition two: Ensure all documentation reflects the language of the NMC SSSA, with an associated implementation plan to be developed in collaboration with practice learning partners for the role of practice assessors to be undertaken by

health professionals in addition to medical practitioners. (SSSA R6.6, Standards for prescribing programmes R 4.2, R4.6)

Post event review

Identify how the condition(s) is met

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

Evidence:

V300 Implementation plan service user and carer involvement, 12 June 2019

Condition two: Programme documentation has been reviewed to reflect the language within the SSSA and the standards for prescribing programmes. An implementation plan has been developed mapped to the Pan-Midlands, Yorkshire and East practice learning group strategic plan to support the role of practice assessors being undertaken by suitably qualified health professionals.

Evidence:

V300 Implementation plan of the students supervision and assessment, dated 12 June 2019

V300 Student handbook, dated 12 June 2019

V300 Practice assessor handbook, dated 12 June 2019

V300 Practice supervisor handbook, dated 12 June 2019

V300 PPA pack prescribing final, dated 12 June 2019

Date condition(s) met: 8 July 2019

Revised outcome after condition(s) met

MET

NOT MET

Condition one is now met.

The SFNME R1.12 is met.

The Standards for prescribing programmes (SPP) R2.1 is now met.

Condition two is now met.

The SSSA R6.6 is met.

The SPP R4.2, R4.6 is met.

Student journey through the programme

Standard 1: Selection, admission and progression

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

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

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

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

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

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

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

R1.6.1 Clinical/health assessment

R1.6.2 Diagnostics/care management

R1.6.3 Planning and evaluation of care

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

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

Findings against the standard and requirements

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

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

YES NO

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

YES NO

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 programme team, the PLPs and the students reported on the process for the selection of students onto the programme. The application form demonstrates that governance is addressed as part of the admission process. An additional self-employed declaration has been incorporated in the programme application pack. Self-employed applicants must self-declare that they have the appropriate indemnity and governance processes in place and their organisation must be Care Quality Commission (CQC) registered. The rating is checked by the module team when reviewing the application forms. The disclosure and barring service (DBS) is in place and the PLPs and students confirm this is part of the admission process. The prescribing lead or equivalent in the organisations confirm that support and governance is in place which includes ensuring there are suitable clinicians to support learning in practice and that protected time will be provided.

The UoL is part of the Yorkshire and Humber region where a database is in place with all the educational audits within the region. Any placements not in this circuit will be audited by the UoL and a placement profile will be created. The application form identifies the practice supervisor and practice assessor.

- 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

<ul style="list-style-type: none"> 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 <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<ul style="list-style-type: none"> 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): <ul style="list-style-type: none"> - Clinical/health assessment - Diagnostics/care management - Planning and evaluation 	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<ul style="list-style-type: none"> 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 <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

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.

The UoL is transferring any students on to the new V300 programme.

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: 12 June 2019

Standard 2: Curriculum

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

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

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

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

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

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

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

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

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

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

Findings against the standard and requirements

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

- There is evidence that the programme complies with the NMC Standards framework for nursing and midwifery education (R2.1)

YES NO

- There is evidence that the programme is designed to fully deliver the competencies set out in the RPS *Competency Framework for all Prescribers*, as necessary for safe and effective prescribing practice (R2.2).

YES NO

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

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

MET **NOT MET**

R2.3 is met. The programme documentation details the structure of the programme. The programme is at masters level and provides 30 academic credits. The programme is the equivalent of 26 days theory. There are 12 compulsory face to face days taught days with 14 blended learning days spent undertaking online learning using the UoL's virtual learning environment. In addition to the theory there are 90 hours protected learning time under the supervision of practice supervisors and a practice assessor.

A variety of teaching and learning approaches are used. There will be co-teaching with pharmacy students. Lectures are used to introduce factual knowledge and are closely linked with the use of case studies. External speakers who are practising prescribers contribute to the teaching. The students in attendance spoke positively of the teaching and they value the case studies. Actors will be used within OSCEs in the new programme. The programme team indicated that service users would be considered to develop case scenarios to be used within the OSCEs. The programme team told us that the selected teaching and learning strategies will be used to support achievement of the RPS competency framework for all prescribers. The practice assessor has to sign off achievement of these competencies in practice. It is noted that in the module specification the programme team have centred the learning outcomes and content on four core domains – person centred care, professionalism, professional knowledge and skills and collaboration. The programme team considered that this would enable the students to link the learning outcomes and content more effectively to the RPS' competency framework for prescribers. However, these four domains are not cited in any other documentation and the practice assessment documentation alternative terminology.

Recommendation two: Review the terminology in the portfolio, particularly in the comment sheet, to ensure this aligns with the module specification with regards to the four domains of person-centred care, professionalism, professional knowledge and skills, and collaboration. (Standards for prescribing programmes R2.3)

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

YES **NO**

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

YES NO

If relevant to the review

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

YES NO N/A

The programme is taught in England.

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

YES NO

The one service user in attendance reported on commenting on the completed documentation. Students did not report on any teaching with service users.

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 is little evidence of how SUCs have been involved in the co-production of this programme and how they will continue to be involved in its delivery.

Condition one: Develop an implementation plan to explicitly ensure the programme is designed, developed, delivered, evaluated and co-produced with SUCs. (Standards framework for nursing and midwifery education R1.12, Standards for prescribing programmes R2.1)

Date: 12 June 2019

Post event review

Identify how the condition(s) is met:

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

Evidence:

V300 Implementation plan service user and carer involvement, 12 June 2019

Date condition(s) met: 8 July 2019

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

Condition one is now met.

SFNME R1.12 is now met.

SPP R2.1 is now 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

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

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

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

MET NOT MET

R3.1 is met. Documentary evidence and discussions at the approval event confirm suitable and effective governance arrangements are in place for practice learning for all applicants, including those who are self-employed. This is assured by effective partnership working between the programme team and the PLPs. The PLPs report how they are involved in the selection process for applicants from their organisation. Practice supervisors and practice assessors are identified within the application process and are prepared by the UoL for their role. The PLPs report that there are sufficient prescribers to be practice supervisors and practice assessors and that they would like to develop registered healthcare professionals who are experienced prescribers to undertake the role of practice assessors.

There is a separate handbook for practice supervisors and practice assessors, which clearly identifies their role. An induction day will be held for practice supervisors and practice assessors. This induction day is not compulsory but is actively encouraged; practice supervisors and practice assessors are also signposted to online resources within the national prescribing centre. The programme team also offer to visit practice supervisors and practice assessors in the workplace if required.

A member of the programme team will be the student's academic assessor and they will make contact with the practice supervisor and practice assessor by email or telephone while the student is on the programme. A visit to practice will be made if there are any concerns. The tripartite relationship of the three roles is articulated in the module handbook and the handbooks for practice supervisors and PA. The UoL prepares staff for their role as academic assessors. The lead midwife for education within the school will be involved in supporting any midwife who accesses the programme.

The application form ensures that governance is in place in practice learning environments for all applicants, including those self-employed.

- 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. Programme documentation and findings at the approval event confirm that a range of simulation and technology-based strategies are used to support learning. The programme team have a library of multi-media presentations including video and audio clips from the internet which are used within the teaching materials. The UoL use lecture capture taken from live and simulated

sessions which are uploaded onto the virtual learning environment for students to access as often as they require. Simulation is used within problem-based learning scenarios to teach consultation skills, providing a safe environment for the students. In addition, the practice assessors are required to develop relevant simulated scenarios in practice to assess the student's numeracy which is detailed within the students practice assessment documentation. Actors are used within OSCEs for the students to be assessed through simulated scenarios. The OSCEs are video recorded for internal moderation and uploaded to Grademark for external moderation. Current students spoke positively of the resources available on the virtual learning environment and confirm they are easily accessible and useful to support their learning.

- 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: 12 June 2019

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%), and

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

Findings against the standards and requirements

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

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

- There is evidence of how the programme will ensure how support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education (R4.1)

MET **NOT MET**

R4.1 is met. Mapping documentation demonstrates how the programme complies with the SFNME. At the approval event PLPs and the programme team told us how a regional approach is being taken to apply the new standards to the programme. The handbooks clearly outline the role of the practice supervisor, practice assessor and academic assessor. The practice supervisor takes responsibility of daily supervision and the practice assessor takes responsibility for the overall assessment and the final declaration of competence at the end of the programme and will liaise with the academic assessor.

The documentation is explicit that learning in practice requires a partnership approach with the student, practice supervisors, practice assessors and the academic assessor. Any breakdown in placements will be managed in partnership with the PLPs taking the lead as the students are in employment.

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

MET **NOT MET**

R4.2 is not met. Educational audits are in place to ensure effective systems are in place to support learning in practice.

The practice assessment document and the guidance in the module handbook and the practice supervisor and practice assessor handbooks ensures that support, supervision, learning and assessment overall complies with the SSSA. However, it is evident that the term designated medical practitioner continues to be used in preference to practice assessor, although practice assessor is contained within brackets. The programme team also report that they intend to continue using designated medical practitioners as practice assessors until further guidance is published from the General Pharmaceutical Society. The PLPs report that they would like the practice assessor role to be undertaken by health professionals in addition to medical practitioners. (Condition two)

It is explicit in all the documentation that the practice supervisor and practice assessor should be different people and it would only be the same person in exceptional circumstances. The PLPs state that it would be exceptional that this would ever be the same person as they have identified a number of individuals to become practice supervisors and practice assessors to support potential students accessing the programme. It is acknowledged within the application process that in a situation where there are no other prescribers this exception could occur and the programme leader would review this on an individual basis. Escalating concern processes are clearly identified within the documentation. There are opportunities to evaluate practice learning throughout the programme and the programme handbook invites students to contribute to the UoL's quality assurance processes.

PLPs demonstrated a good understanding of the SSSA and provide assurance of sufficient numbers of practice supervisors and practice assessors to supervise and assess students on the V300 prescribing programme.

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

YES NO

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

YES NO

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

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

MET NOT MET

R4.5 is met. The PA is identified as part of the admission process and processors are in place to verify their experience and qualifications. The programme team are continuing to use medical practitioners for this role. The practice assessor handbook provides detail of the role of the practice assessor and outlines their overall responsibility for assessing students in practice. The details of how to support students in both formative and summative assessment are provided, including how they will communicate with the academic assessor and practice supervisor. The UoL have elected to have a separate handbook for practice supervisors to PA to help make explicit that the roles are different.

- 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

The documentation continues to refer to DMP with the term PA in brackets. The programme team reported that they intended to continue using DMPs. However, the PLPs would like other suitably qualified health care professionals to be considered as PAs. (Condition two)

Outcome

Is the standard met? MET NOT MET

The programme team whilst acknowledging the roles of PS, PA and AA have not embraced the NMC SSSA.

Condition two: Ensure all documentation reflects the language of the SSSA, with an associated implementation plan developed in collaboration with practice learning partners for the role of practice assessors to be undertaken by suitably qualified healthcare professionals, in addition to medical practitioners. (SSSA R6.6, Standards for prescribing programmes R4.2, R4.6)

Date: 12 June 2019

Post event review

Identify how the condition(s) is met:

Condition two:

Programme documentation has been reviewed to reflect the language within the SSSA and the standards for prescribing programmes. An implementation plan has been developed mapped to the Pan-Midlands, Yorkshire and East practice

learning group strategic plan to support the role of practice assessors being undertaken by suitably qualified health professionals.

Evidence:

V300 Implementation plan of the students supervision and assessment, dated 12 June 2019

V300 Student handbook, dated 12 June 2019

V300 Practice assessor handbook, dated 12 June 2019

V300 Practice supervisor handbook, dated 12 June 2019

V300 PPA pack prescribing final, dated 12 June 2019

Date condition(s) met: 8 July 2019

Revised outcome after condition(s) met:

MET

NOT MET

Condition two is now met.

SSSA R6.6 is met.

SPP R4.2, R4.6 is met.

Standard 5: Qualification to be awarded

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

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

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

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

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

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

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

Findings against the standards and requirements

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

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

YES 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: 12 June 2019

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)	<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)	<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)	<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 confirmation by the education institution and associated practice learning partners to support the programme intentions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>List additional documentation:</p> <p>Post condition documentary evidence to meet conditions:</p> <p>V300 Prescribing module proposal form, 12 June 2019</p> <p>V300 Implementation plan of the students supervision and assessment, 12 June 2019</p> <p>V300 Implementation plan service user and carer involvement, dated 12 June 2019</p> <p>V300 Student handbook, 12 June 2019</p> <p>V300 Practice assessor handbook, 12 June 2019</p> <p>V300 Practice supervisor handbook, 12 June 2019</p> <p>V300 PPA pack prescribing final, 12 June 2019</p>		
If you stated no above, please provide the reason and mitigation		
Additional comments:		

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"/>
<p>If yes, please identify cohort year/programme of study:</p> <p>Seven students on current prescribing programme (week six) attended the approval visit.</p>		

Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation One SUC attended the approval visit.		
Additional comments		

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 The AEI is an established provider of the V300 prescribing programme.		
Additional comments:		

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Issue record

Final Report

Author:	Heather Bain	Date:	21 June 2019
Checked by:	Pamela Page	Date:	2 August 2019
Approved by:	Leeann Greer	Date:	29 August 2019
Submitted by:	Alex Brooker	Date:	28 August 2019