



#### Programme approval visit report

#### **Section one**

| Programme provider name:   | University of Reading  |
|--|--|
| In partnership with: (Associated practice learning partners involved in the delivery of the programme) | Royal Berkshire NHS Foundation Trust Trust Berkshire West Clinical Commissioning Group (CCG) Berkshire East CCG North East Hampshire and Farnham CCG Oxfordshire CCG |

#### Programme(s) reviewed:

Programme: Independent and Supplementary Nurse Prescribing

Title of programme: Independent and Supplementary Prescribing for Nurses

Programme start date: 19 January 2020

Academic level(s):

England, Wales, Northern Ireland:

Level 6 Level 7

| Date of approval | 10 October 2019                   |
|------------------|-----------------------------------|
| QA visitor(s):   | Registrant Visitor: Kevin Gormley |





#### Summary of review and findings

The University of Reading (UoR), centre for inter-professional postgraduate education and training (CIPPET) presented the independent and supplementary nurse and midwife (V300) preparation programme for approval.

The Standards for prescribing programmes (SPP) (NMC, 2018) and the Standards of proficiency for nurse and midwife prescriber adoption of the Royal Pharmaceutical Society (RPS) competency framework for all prescribers (NMC, 2018) are clearly detailed in the documentation and mapped to the proposed programme.

The programme will be delivered at academic level six and seven and is made up of two modules totalling 60 academic credits delivered over a period of six months. There's evidence of partnership working between the UoR and associated practice learning partners (PLPs) at an operational and strategic level. There's evidence of effective communication processes between CIPPET and PLPs which ensure that supportive governance arrangements are in place to support the delivery of the programme. There's evidence of service user and carer engagement in the development and planned delivery of the programme.

Arrangements at programme level do not meet the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) and the Standards for student supervision and assessment (SSSA) (NMC, 2018) as a condition applies.

The programme is recommended for approval subject to one NMC condition. There are three NMC recommendations and one university recommendation.

Updated 24 October 2019

Evidence has been submitted to address the condition. The condition 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 for approval subject to specific conditions being met |





| MACDON  |   |
|---|---|
|   | Effective partnership working: collaboration, culture, communication and resources:   |
| Conditions:  Please identify the standard and requirement the condition relates to under the relevant key risk theme. | Condition one: Produce an operational plan with timeline for the preparation of practice assessors, practice supervisors and academic assessors in advance of the commencement of the V300 programme (SFNME R2.4, R4.1; SSSA R5.1, R5.2, R8.1, R8.2, R9.1, R9.2; SPP R4.1, R4.2)  |
| Please state if the condition is  | Selection, admission and progression:   |
| AEI/education institution in nature or specific to NMC  | None identified   |
| standards.  | Practice learning:  |
|   | None identified   |
|   | Assessment, fitness for practice and award:   |
|   | None identified   |
|   | Education governance: management and quality assurance:   |
|   | None identified   |
| Date condition(s) to be met:  | 24 October 2019   |
| Recommendations to enhance the programme delivery:  | Recommendation one: The programme team are advised to monitor the contribution of the external examiner in providing oversight for all aspects of delivery of the programme. (SFNME R2.20)  Recommendation two: Consider the further development of the contribution of service users and carers to the programme. (SFNME R1.12; SPP R2.1)  Recommendation three: The programme team are advised to develop the frequency of meetings with PLPs at an operational level and have clear terms of reference. (SFNME R2.5) |
|   | Recommendation four: The panels recommend that the teaching team liaise with the director of teaching and learning to discuss the implementation of staggered submission dates for programme assessments. (University recommendation)   |





| Council                              | MACDONALD  |
|--------------------------------------|--|
|                                      |  |
| Focused areas for future monitoring: | The contribution of service user and carers to the delivery and continued review of the programme. |





# Programme is recommended for approval subject to specific conditions being met

#### Commentary post review of evidence against conditions:

The university submitted documentary evidence outlining an operational plan with timelines for the preparation of practice supervisors, practice assessors and academic assessors. Condition one is now met.

| AEI Observations                            | Observations have been made by the education institution Yes  |
|---|---|
| Summary of observations made, if applicable | The report summary refers to the programme as comprising of one 60 credit module rather than two modules. Report amended accordingly. |
| Final recommendation made to NMC:           | Programme is recommended to the NMC for approval  |
| Date condition(s) met:                      | 24 October 2019   |

#### **Section three**

#### **NMC Programme standards**

Please refer to NMC standards reference points

Standards for prescribing programmes (NMC, 2018)

Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers) (NMC, 2018)

Standards framework for nursing and midwifery education (NMC, 2018)

Standards for student supervision and assessment (NMC, 2018)

The Code: Professional standards of practice and behaviour for nurses and midwives (NMC, 2015)

QA framework for nursing, midwifery and nursing associate education (NMC,





2018)

QA Handbook (October 2018)

#### **Partnerships**

The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders

## Please refer to the following NMC standards reference points for this section:

Standards framework for nursing and midwifery education (NMC, 2018)

#### **Standard 1: The learning culture:**

R1.12 ensure programmes are designed, developed, delivered, evaluated and coproduced with service users and other stakeholders

R1.13 work with service providers to demonstrate and promote inter-professional learning and working

#### Standard 2: Educational governance and quality:

R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders

R2.4 comply with NMC <u>Standards for student supervision and assessment</u>
R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes

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

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

#### **Standard 3: Student empowerment:**

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

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

R3.17 receive constructive feedback throughout the programme from stakeholders





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

#### Standard 4: Educators and assessors:

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

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

R4.10 share effective practice and learn from others

#### Standard 5: Curricula and assessment:

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

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

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

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

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

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

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

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

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

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

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

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

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

#### Standard 7: Practice assessors: responsibilities:

R7.9 communication and collaboration between practice and academic assessors





is scheduled for relevant points in programme structure and student progression

#### Standard 9: Academic assessors: responsibilities:

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

#### Findings against the standard and requirements

Provide an evaluative summary about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders 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 effective partnership working between the UoR and key stakeholders including PLPs, students, and service users and carers in the development, delivery and evaluation of the programme. PLPs, students and service users and carers confirmed their involvement in the design and development of the programme. There is a shared understanding with regard to the proposed delivery of the V300 programme that clearly adheres to the SPP (NMC, 2018) and the Standards of proficiency for nurse and midwife prescribers (NMC, 2018).

The programme team tell us the external examiner will participate in visits to practice learning environments to meet students and their practice assessor and practice supervisors. The panel asked about the external examiner's role in relation to recognition of prior experiential learning (RPEL) specifically where students have to enrol on a level six module which requires evidence of a nurse's personal preparatory learning for prescribing. The programme team are advised to monitor the contribution of the external examiner in providing oversight for all aspects of delivery of the programme, including the quality assurance of RPEL. (Recommendation one) (SFNME R2.20)

We met with service users and carers who told us about their positive contribution to the development of the proposed programme. They tell us about their additional interest in contributing to proposed innovative teaching strategies for the V300 programme; including the use of drama and role play scenarios. The programme team are advised to consider the further development of the contribution of service users and carers to the programme. (Recommendation two) (SFNME R1.12; SPP R2.1)

UoR representatives and associated PLPs tell us that strategic partnership meetings take place regularly. PLPs tell us that operational level meetings that could provide valuable oversight of the programme and strengthen shared ownership and partnership occur less frequently. The programme team are





advised to develop the frequency of meetings with PLPs at an operational level and have clear terms of reference. (Recommendation three) (SFNME R2.5)

Documentary evidence and discussion at the approval visit suggests partnership working to support the implementation of the SSSA (NMC, 2018). However, there is no evidence of a programme of preparation for practice supervisors, practice assessors and academic assessors for the V300 programme. This must be implemented prior to the commencement of the programme. (Condition one) (SFNME R2.4, R4.1; SSSA R5.1, R5.2, R8.1, R8.2, R9.1, R9.2; SPP R4.1, R4.2)

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

#### Not Met

During the approval process there is no evidence of a programme of preparation for practice supervisors, practice assessors and academic assessors for the V300 programme. This must be addressed prior to the commencement of the programme. (Condition one) (SFNME R2.4, R4.1; SSSA R5.1, R5.2, R8.1, R8.2, R9.1, R9.2; SPP R4.1 R4.2)

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

#### Not Met

During the approval process there is no evidence of a programme of preparation for practice supervisors, practice assessors and academic assessors for the V300 programme. This must be addressed prior to the commencement of the programme. (Condition one) (SFNME R2.4, R4.1; SSSA R5.1, R5.2, R8.1, R8.2, R9.1, R9.2; SPP R4.1 R4.2)

#### If not met, state reason

Documentary evidence and discussion at the approval visit suggests partnership working to support the implementation of the SSSA (NMC, 2018). However, there is no evidence of a programme of preparation for practice supervisors, practice assessors and academic assessors for the V300 programme. This must be implemented prior to the commencement of the programme. (Condition one)





Condition one: Produce an operational plan with timeline for the preparation of practice assessors, practice supervisors and academic assessors in advance of the commencement of the V300 programme. (SFNME R2.4, R4.1; SSSA R5.1, R5.2, R8.1, R8.2, R9.1, R9.2; SPP R4.1, R4.2)

#### **Post Event Review**

#### Identify how the condition is met:

Condition one: UoR submitted documentary evidence that outlines an operational plan with timeline for the preparation of practice supervisors, practice assessors and academic assessors. Condition one is now met.

#### Evidence:

UoR response to the condition, October 2019

Operation plan with timelines for the preparation of practice supervisors, practice assessors and academic assessors, October 2019

Date condition(s) met: 24 October 2019

Revised outcome after condition(s) met:

#### Met

Condition one is now met. SFNME R2.4 and R4.1 are now met. SSSA R5.1, R5.2, R8.1, R8.2, R9.1, and R9.2 are now met. SPP R4.1 and R4.2 are now 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 programmesand 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.

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

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

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

R1.3 is met. Documentary evidence and discussion at the approval visit demonstrates an effective and collaborative approach to the application process. The prescribing programme practice learning screening process is used to confirm governance arrangements are in place. In addition to the employing organisation declaration, which supports the admissions tutor to confirm that governance structures are in place, each PLP will also be screened for initial compliance with NMC standards using the screening process. The non-medical prescriber (NMP) lead for the Royal Berkshire NHS Foundation Trust confirmed a process of internal selection and support for applicants from their organisation. All applications are subject to scrutiny by the programme lead to assure entry criteria is met and this includes confirmation of professional registration, time release and appropriate manager support. UoR teaching team tell us that each student's line manager signs their support for the study hours as part of the application process. The NMP lead and the teaching team tell us that if protected learning time became a concern, a meeting would be arranged with the student's line manager, academic assessor, practice assessor and/or supervisor and the student to resolve the issue.

In addition to the screening process self-funding students are required to submit





an additional declaration which explores the governance structures in detail to confirm that they have appropriate access to clinical support. The admissions tutor will ask sponsored/commissioned applicants who are undertaking their practice learning outside their usual employer to also complete this process. If there are any queries arising from this screening process the programme team tell us they will use the interview process to gather additional information to ensure compliance with the NMC entry criteria.

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

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

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

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

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 UoR programme team confirmed that students studying the current V300 prescribing programme will not transfer to the proposed programme or to the SSSA (NMC, 2018). |  |  |
|--|--|--|
| Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to selection, admission and progression are met          |  |  |
| Yes  |  |  |
| Outcome  |  |  |
| Is the standard met?   |  |  |
| Met  |  |  |
| Date: 10 October 2019  |  |  |
| Post Event Review  |  |  |
| Identify how the condition is met:   |  |  |
| Date condition(s) met:   |  |  |
| N/A  |  |  |
| Revised outcome after condition(s) met:  |  |  |
| N/A  |  |  |
|  |  |  |





#### **Standard 2 Curriculum**

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

- R2.1 ensure programmes comply with the NMC Standards framework for nursing and midwifery education
- R2.2 ensure that all prescribing programmes are designed to fully deliver the competencies set out in the RPS A Competency Framework for all Prescribers, as necessary for safe and effective prescribing practice
- R2.3 state the learning and teaching strategies that will be used to support achievement of those competencies
- R2.4 develop programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice:
- R2.4.1 stating the general and professional content necessary to meet the programme outcomes
- R2.4.2 stating the prescribing specific content necessary to meet the programme outcomes
- R2.4.3 confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing
- R2.5 ensure that the curriculum provides a balance of theory and practice learning, using a range of learning and teaching strategies
- R2.6 ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language

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

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

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

R2.3 is met. The principles of adult education theories provide an over-arching approach to student learning on the V300 programme.

The programme is delivered as blended learning via face to face teaching and directed study via the virtual learning environment (VLE) Blackboard Learn, as well as learning in practice. All these resources are designed to support students to develop their self-directed learning plan. Students are required to reflect on their learning individually and in group settings.

The UoR teaching team tell us about the use of simulated learning strategies that will support active learning, including drama and role play to support legal content and the use of debate to discuss influences on prescribing.

Practice learning is evidenced through a professional portfolio of learning in practice which is used to support achievement of the RPS competency framework for all prescribers. The learning outcomes for the programme are all underpinned by the Prescribing Competency Framework for All Prescribers with each assessment being mapped to the learning outcomes and the framework to ensure all proficiencies are demonstrated.

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

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

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)

N/A

The programme is provided in England.

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

Yes

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

Yes

Outcome

Is the standard met?

Met

Date: 10 October 2019





| Post Event Review                       |
|---|
| Identify how the condition is met:      |
| Date condition(s) met:                  |
| N/A                                     |
| Revised outcome after condition(s) met: |
| N/A                                     |
|   |

#### **Standard 3 Practice learning**

#### **Approved education institutions must:**

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

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

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

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

R3.1 is met. Documentary evidence and discussion at the approval visit confirm suitable and effective arrangements and governance for practice learning are in place for all applicants. This is assured by comprehensive and effective partnership working between the programme team and PLPs. The professional lead tutor will undertake site visits of practice learning environments to complete an educational audit to monitor the practice learning environment and governance arrangements. Any concerns raised related to practice learning are managed in line with the CIPPET raising concerns policy. The NMP lead and managers from the stakeholder organisations sign to confirm arrangements for practice learning support, supervision and assessment are in place. There is a joint learning agreement for practice learning between the student, academic assessor, practice assessor and practice supervisor. For applicants who are self-employed or non-NHS employed registrants there's further enhanced scrutiny in respect of governance arrangements at practice level. For self-funding students they are required to submit an additional declaration that details the governance structures and confirm that they have access to clinical support.

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

#### Yes

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

R3.3 is met. Documentary evidence and discussion at the approval visit confirms the programme is supported by a VLE, Blackboard Learn, which contains supporting information and students directed and self-directed learning and teaching resources to access and download to support learning and assessment preparation. Blackboard Learn also includes discussion boards and webinar facilities which are used in a learning centred approach. Former students tell us online learning resources are signposted and accessible.





Simulation based learning is used to support practice learning such as prescription writing and patient consultation in preparation for the assessment of practice learning. A practice objective structured clinical examination (OSCE) and case presentations support students to learn through role play and simulation. Workplace-based assessments are embedded in the programme to support practice-based learning with patients, through simulation or real-life.

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

Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to practice learning are met

Yes

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

Yes

| Outcome                            |
|------------------------------------|
| Is the standard met?               |
| Met                                |
| Date: 10 October 2019              |
| Post Event Review                  |
| Identify how the condition is met: |
| Date condition(s) met:             |
| N/A                                |





#### Revised outcome after condition(s) 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 <u>Standards framework for nursing and midwifery education</u>
- R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC Standards for student supervision and assessment
- R4.3 appoint a programme leader in accordance with the requirements of the NMC <u>Standards framework for nursing and midwifery education</u>. The programme leader of aprescribing 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%).

Evidence provides assurance that the following QA approval criteria are 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)

#### Not Met

R4.1 is not met. UoR teaching team undertake educational audits to ensure appropriate and effective systems and processes are in place in practice learning environments to support students' learning. Practice learning is evaluated regularly and there is effective communication between the practice assessor and the university through the programme leader and academic assessors to identify any areas of improvement. Students confirm providing formal and informal feedback on practice learning.

Students are advised about and have access to the procedure for raising a concern both within the practice learning areas and university learning environments. PLPs have processes in place to support students in raising a concern which is confirmed as part of the educational audit. The information handbook for practice assessors and supervisors' outlines responsibilities of each role and the process by which the UoR will support partnership working. Student progress to achievement of RPS competencies is initially self-reported by the student but the achievement of competencies is assessed and verified by the practice assessor in discussion with the academic assessor. Students are required to complete a reflective account, along with implications for their practice in the case study and learning in practice diary. There is a planned approach to support practice learning whereby the academic assessor will meet with practice assessor to discuss and provide feedback on student progress towards achieving the competencies within the RPS (2016) competency framework for all prescribers.





However, there is no evidence of a programme of preparation for practice supervisors, assessors and academic assessors for the V300 programme; this must be addressed prior to the commencement of the programme. (Condition one)

Documentary evidence and discussion at the approval visit with the programme team confirms there is a mechanism for supporting students who are not showing progress as expected. A student at the approval visit confirmed awareness of this process. Documentary evidence and discussion at the approval visit confirms that pastoral and tutorial support are also available to students. This is confirmed by former students who spoke highly of the support they have received.

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)

#### Not Met

R4.2 is not met. Documentary evidence and discussion at the approval visit provides a clear process for the allocation and preparation of practice supervisor, practice assessor and academic assessor roles. The criteria for practice supervisor and practice assessor roles is compliant with the SSSA and are detailed in the V300 admission criteria and programme documentation. PLPs confirm commitment to release practitioners and prescribers to take the roles of practice supervisor and assessor and time to support student learning. The information handbook for assessors and supervisors outlines the role requirements and training for practice supervisor and practice assessor. Practice learning is evidenced through a professional portfolio of learning in practice which is used to support achievement of the RPS competency framework for all prescribers. The practice supervisor supports the development of the student though the portfolio and the practice assessor confirms the achievement of the RPS competency framework in discussion with the academic assessor.

UoR teaching team tell us that the practice supervisor and assessor should not be the same person and individual scrutiny of applications by the programme lead assures this requirement. The programme team further confirmed that in exceptional circumstances when this might happen, for example in a community setting a monitoring process and support for the student and the PLP by the UoR will be provided. There is no evidence of a programme of preparation for practice supervisors, assessors or academic assessors for the V300 programme in place; this must be addressed. (Condition one)

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





Yes

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)

#### No

The UoR does not have a lead midwife for education (LME) as they are not providers of NMC approved pre-registration midwifery programmes. Therefore the UoR cannot enrol midwives on the V300 programme.

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

R4.5 is met. There is documentary evidence of guidelines and processes in place to assign each student to a practice assessor who is both a registered health care professional and an experienced prescriber. As part of the admissions process, applicants must submit a declaration from their proposed practice supervisor and practice assessor which details how they meet the SSSA (NMC, 2018) requirements and information on how UoR will support applicants when exceptional circumstances apply. The practice assessor is identified in the admission process and processes are in place to check prescriber qualifications and appropriate experience as a prescriber to support the student. This detail is contained in the admission form and is checked by the programme leader.

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

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

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

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

Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to supervision and assessment are met Please provide narrative for any exceptions

#### No

There is no evidence of a programme of preparation for practice supervisors, assessors and academic assessors for the V300 programme; this must be addressed prior to the commencement of the programme. (Condition one)

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

#### No

There is no evidence of a programme of preparation for practice supervisors, assessors or academic assessors for the V300 programme in place; this must be addressed. (Condition one)

#### Outcome



#### Is the standard met?

#### Not Met

At the approval event there is no evidence of a programme of preparation for practice supervisors, assessors and academic assessors for the V300 programme; this must be addressed prior to the commencement of the programme. (Condition one)

Condition one: Produce an operational plan with timeline for the preparation of practice assessors, practice supervisors and academic assessors in advance of the commencement of the V300 programme. (SFNME R2.4, R4.1; SSSA R5.1, R5.2, R8.1, R8.2; R9.1 R9.2; SPP R4.1, R4.2)

Date: 24 October 2019

#### **Post Event Review**

#### Identify how the condition is met:

Condition one: UoR submitted documentary evidence that outlines an operational plan with timeline for the preparation of practice supervisors, practice assessors and academic assessors. Condition one is now met.

#### Evidence:

UoR response to the condition, October 2019

Operation plan with timelines for the preparation of practice supervisors, practice assessors and academic assessors, October 2019

Date condition(s) met: 24 October 2019

#### Revised outcome after condition(s) met:

#### Met

Condition one is now met.

SFNME R2.4 and R4.1 are now met.

SSSA R5.1, R5.2 R8.1, R8.2, R9.1, and R9.2 are now met.

SPP R4.1 and R4.2 are now 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

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

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

| Processes a  | are in place to inform the student that the award must be           |
|--------------|---|
| registered v | vith 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 th  | e programme in order to qualify and register their award as a       |
| prescriber ( | R5.3)   |

Yes

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

Yes

Assurance is provided that the <u>Standards framework for nursing and midwifery education</u> relevant to the qualification to be awarded are met

Outcome

Is the standard met?

Met

**Date: 10 October 2019** 

**Post Event Review** 

Identify how the condition is met:

Date condition(s) met:

N/A

Revised outcome after condition(s) met:



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N/A





#### Source of evidence

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

| Key documentation  | Yes/No |
|--|--------|
| Programme document, including proposal, rationale and            | Yes    |
| consultation   |        |
| Programme specification(s)                                       | Yes    |
| Module descriptors   | Yes    |
| Student facing documentation including: programme handbook       | Yes    |
| Student university handbook                                      | Yes    |
| Practice assessment documentation                                | Yes    |
| Practice placement handbook                                      | Yes    |
| PAD linked to competence outcomes, and mapped against RPS        | Yes    |
| A Competency Framework for all Prescribers                       |        |
| Mapping document providing evidence of how the education         | Yes    |
| institution has met the Standards framework for nursing and      |        |
| midwifery education (NMC, 2018)                                  |        |
| Mapping document providing evidence of how the programme         | Yes    |
| meets the Standards for prescribing programmes and RPS           |        |
| Standards of proficiency for prescribers (NMC, 2018)             |        |
| Mapping document providing evidence of how the Standards for     | Yes    |
| student supervision and assessment (NMC, 2018) apply to the      |        |
| programme(s)   |        |
| Curricula vitae for relevant staff                               | Yes    |
| Registered healthcare professionals, experienced prescribers     | Yes    |
| with suitable equivalent qualifications for the programme -      |        |
| registration checked on relevant regulators website              |        |
| Written confirmation by the education institution and associated | Yes    |
| practice learning partners to support the programme intentions   |        |

List additional documentation:

UoR NMC self assessment report, December 2019
UoR response document to NMC QA registrant visitor, undated

Post event documentation to meet the condition:

UoR response to the condition, October 2019

Operation plan with timelines for the preparation of practice supervisors, practice assessors and academic assessors, October 2019

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

Additional comments:





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|--|-----------|
| During the visit the visitor(s) met the following groups         | Yes/No    |
| Senior managers of the AEI/education institution with            | Yes       |
| responsibility for resources for the programme                   |           |
| Senior managers from associated practice learning partners       | Yes       |
| with responsibility for resources for the programme              |           |
| Programme team/academic assessors                                | Yes       |
| Practice leads/practice supervisors/ practice assessors          | Yes       |
| Students   | Yes       |
| If yes, please identify cohort year/programme of study:          |           |
| Two x V300 academic level six                                    |           |
| One x V300 academic level seven                                  |           |
| Service users and carers   | Yes       |
| If you stated no above, please provide the reason and mitigation |           |
| Additional comments:   |           |

| No |
|----|
| No |
| No |
| No |
| No |
|    |

If yes, state where visited/findings:

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

This is an established AEI therefore visits to areas/facilities are not required for this approval visit.

Additional comments:

None identified

#### **Mott MacDonald Group Disclaimer**

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error or omission which is due to an error or omission in data supplied to us by other parties.

| Issue record |               |      |                  |
|--------------|---------------|------|------------------|
| Final Report |               |      |                  |
| Author       | Kevin Gormley | Date | 18 October 2019  |
| Checked by   | Judith Porch  | Date | 22 November 2019 |
| Submitted by | Leeann Greer  | Date | 4 December 2019  |
| Approved by  | Andrea Bacon  | Date | 9 December 2019  |