



## Programme approval visit report

## Section one

| Programme provider name:  | University of Worcester  |  |  |  |
|---|--|--|--|--|
| In partnership with:  | Wye Valley NHS Hospitals Trust   |  |  |  |
| (Associated practice learning partners involved in the delivery of the programme) | Worcestershire Acute Hospitals NHS<br>Trust  |  |  |  |
| programmo   | Worcestershire Health and Care NHS<br>Trust  |  |  |  |
|   | University Hospitals Birmingham NHS<br>Trust   |  |  |  |
| Programmes reviewed:  | Independent and supplementary nurse prescribing V300                                   |  |  |  |
|   | Nurse prescribing without a specialist practice qualification V150                     |  |  |  |
|   | Community practitioner nurse prescribing V100  |  |  |  |
| Title of programme(s):  | Level 7: Postgraduate Award in<br>Professional Development Non-<br>medical prescribing |  |  |  |
| Date of approval visit:   | 4 March 2019   |  |  |  |
| Programme start date:   | 2 September 2019   |  |  |  |
|   | England, Wales, Northern Ireland   |  |  |  |
|   | ☐ Level 5 ☐ Level 6 ☐ Level 7  |  |  |  |
| Academic level:   | SCQF   |  |  |  |
|   | Level 8 Level 9 Level 10   |  |  |  |
|   | Level 11   |  |  |  |
| QA visitor(s):  | Alison Pooler  |  |  |  |





#### Summary of review and findings

The University of Worcester presented the independent supplementary prescriber preparation programme (V300) for approval at academic level seven. This was a conjoint approval between the Nursing and Midwifery Council (NMC) and the university quality assurance board.

The programme is delivered part-time over two academic terms. The content of the programme reflects the NMC Standards for prescribing programmes (NMC, 2018) and the Royal Pharmaceutical Society's (RPS) (2016) competency framework for non-medical prescribing within both taught and assessed components.

Documentary evidence submitted by the university and subsequent discussion at the approval visit provides clarification and depth. The conclusion drawn from discussions with the programme team, practice learning partners (PLPs), students and service users is that there is good support for students throughout the programme. There is clear evidence of effective partnership working with all stakeholders in the development and delivery of the programme to enhance student learning and development.

Documentary evidence provided confirms the Standards framework for nursing and midwifery education (NMC, 2018), and the Standards for student supervision and assessment (NMC, 2018) are met at programme level.

Three areas of good practice were recognised by the approval panel and these are:

- The service user testimony format in the competency document.
- The flipped classroom approach with case studies to allow the student to review from their own professional background and then facilitate discussion from other professional backgrounds within the classroom.
- The effectiveness and accessibility of support for academic writing.

The programme is recommended to the NMC for approval subject to one specific condition. There are four recommendations.

Updated 29 March 2019

Evidence has been provided confirming changes required to meet the condition have been made. The condition is met.

The programme is recommended to the NMC for approval.

#### Recommended outcome of the approval panel





| Council   | MACDONALD   |  |  |  |  |
|---|---|--|--|--|--|
| Recommended outcome   | Programme is recommended to the NMC for approval  |  |  |  |  |
| to the NMC:   | Programme is recommended for approval subject to specific conditions being met  |  |  |  |  |
|   | Recommended to refuse approval of the programme   |  |  |  |  |
|   | Effective partnership working: collaboration, culture, communication and resources  |  |  |  |  |
| Conditions:   | None identified   |  |  |  |  |
| Please identify the   | Selection, admission and progression  |  |  |  |  |
| standard and requirement  | None identified   |  |  |  |  |
| the condition relates to under the relevant key risk  | Practice learning   |  |  |  |  |
| theme. Please state if the condition is AEI/education institution in nature or specific to NMC standards. | Condition one: Ensure that clarity is provided within the competency document that the student cannot prescribe until qualified, especially within competence four where it states 'prescribe'. (Standards for prescribing programmes R4.8)   |  |  |  |  |
|   | Assessment, fitness for practice and award  |  |  |  |  |
|   | None identified   |  |  |  |  |
|   | Education governance: management and quality assurance  |  |  |  |  |
|   | None identified   |  |  |  |  |
| Date conditions to be met:  | 1 April 2019  |  |  |  |  |
| Recommendations to enhance the programme delivery:  | Recommendation one: To provide clarity of the recognition of prior learning (RPL) process within the course handbook for students. (Standards for prescribing programmes R1.4)  |  |  |  |  |
|   | Recommendation two: In the practice assessor/supervisor handbook clarify how the training workshop content will prepare practice supervisors and practice assessors for their role; and, consider incorporating a self-declaration by staff completing the online version of the training workshop. (Standards for prescribing programme R4.2; Standards for student supervision and assessment R5.1-5.2, R8.1-8.4) |  |  |  |  |
|   | Recommendation three: Consider developing a process whereby students can feedback on their practice assessors and practice supervisors.  (Standards for prescribing programme R4.2;   |  |  |  |  |





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|                                      | Standards for student supervision and assessment R5.1 and R8.3).   |
|                                      | Recommendation four: Provide clarity within the course handbooks where students can access both pastoral and academic support during the programme. (Standards for prescribing programme R4.1; Standards framework for nursing and midwifery education R3.5) |
| Focused areas for future monitoring: | None identified  |

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

## Commentary post review of evidence against conditions

A revised annotated RPS competency practice assessment document provides evidence that the changes required to meet condition one have been made.

Condition one has been met.

| AEI Observations                            | Observations have been made by the education institution YES ⊠ NO □                              |  |  |
|---|--|--|--|
| Summary of observations made, if applicable | The AEI have confirmed the accuracy of this report.  |  |  |
| Final recommendation made to NMC:           | Programme is recommended to the NMC for approval Recommended to refuse approval of the programme |  |  |
| Date conditions met:                        | 29 March 2019  |  |  |





#### **NMC Programme standards**

Please refer to NMC standards reference points

Standards for prescribing programmes (NMC, 2018)

<u>Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers)</u> (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 supported by discussion at the approval visit with the programme team and key stakeholders, including PLPs, students and service users confirm that the Standards framework for nursing and midwifery education (NMC, 2018) and Standards for student supervision and assessment (NMC, 2018) are met at programme level.

There are effective partnerships with all stakeholders and service users and the student voice is incorporated into the programme to facilitate students' learning and development. PLPs from primary and secondary care NHS trusts in the





surrounding region to the AEI have been instrumental to working in partnership with the approved education institution (AEI), in the development of the procedure and governance processes to enable effective support, supervision and assessment of students in the practice learning environments. This work continues and will be reviewed and evaluated through joint partnership working and collaboration.

The student voice has a powerful influence on the continued development of the programme and has been integral to the development of the proposed programme with ideas for new initiatives and formats for teaching and learning within theoretical and practice learning. The programme team are advised to consider a process whereby students can feedback on their practice assessors and practice supervisors in the proposed programme. (Recommendation three) (Standards for student supervision and assessment R5.1 and R8.3)

The AEI has a service user and carer strategy and a group which meets regularly to review and evaluate the development of new education programmes and they have actively participated in the development of the independent supplementary prescriber preparation programme. The programme team told us their input has been invaluable in the development of concepts of the proposed programme which relate to patient interaction. Careful consideration has been given to this within the service user testimony within the competency document where such interactions are assessed in the practice learning environments.

| Assurance is provided that the AEI works in partnersh partners, service users, students and all other stakeholateway 1: Standards framework for nursing and mid | olders as iden           | tified in   |
|---|--------------------------|-------------|
|   | $MET oxed{oxed}$         | NOT MET     |
| Gateway 2: Standards for student supervision and as   | <u>sessment</u><br>MET ⊠ | NOT MET     |
| If not met, state reason and identify which standar are not met and the reason for the outcome  | rd(s) and req            | uirement(s) |

#### 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 🗌 |
|-------|------|
|-------|------|



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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

| programme specification; module de statement on university web pages (   | scriptor, marketing mat   |  |   |
|--|---|--|---|
| Provide an evaluative summary froevidence AND discussion at the approvided that the QA approval crit   | oproval visit to demo   | nstrate if ass   |   |
| <ul> <li>Evidence that the necessary of<br/>clinical support, access to pro-<br/>where appropriate) to enable<br/>supported throughout, the pro-</li> </ul>  | tected learning time an students to undertake,  | d employer su  | ipport  |
|  | MET   | $\boxtimes$ NOT  | MET 🗌   |
| R1.3 is met. Across the West Midlan which has been a collaborative deve organisations. This application form information on application about supfor students accessing the programm agreed by the programme lead and to confirms a robust process is in place throughout the programme. | lopment across AEIs a<br>s used within this prog<br>port mechanisms and p<br>ne. These arrangement<br>he PLP non-medical po | nd NHS trusts ramme to provorotected learn ts are reviewed rescriber (NMF) | and PLP<br>vide<br>ning time<br>d and<br>P). This |
| <ul> <li>Processes are in place to con<br/>capable of being mapped to the<br/>Prescribers (R1.4)</li> </ul>  |   |  |   |
| <ul> <li>Processes are in place to con<br/>undertake a prescribing progra<br/>academic ability to study at th</li> </ul>   | amme has the compete  | ence, experien   | nce and   |
| <ul> <li>Processes are in place to con effective practice at a level of be undertaken and their intendfollowing areas (R1.6):</li> <li>Clinical/health assessment</li> <li>Diagnostics/care manageme</li> </ul>  | proficiency appropriated ded area of prescribing  | to the prograi   | mme to  |
| - Planning and evaluation  | 114   | YES 🖂  | NO 🗌  |





| <ul> <li>Processes are in place to ensure that applical supplementary/independent prescribing prog with the NMC for a minimum of one year prio the programme (R1.7)</li> </ul>   | rammes have                        | n <u>fo</u> r en | •                 |
|--|------------------------------------|------------------|-------------------|
| Proposed transfer of current students to the pro   | gramme und                         | er revie         | <b>}</b> W        |
| From your documentary analysis and your meeting evaluative summary to confirm how the <u>Standards of Standards of proficiency for nurse and midwife presonant Competency Framework for all Prescribers</u> ) will be existing students onto the proposed programme. | or prescribing<br>criber (adoption | prograi          | mmes and<br>e RPS |
| The programme team confirmed current students with independent supplementary prescriber preparation programme is delivered as a standalone module.   |                                    |                  |                   |
| Assurance is provided that Gateway 1: <u>Standards from idwifery education</u> relevant to selection, admission  |                                    |                  |                   |
|  | YES                                |                  | NO 🗌              |
| Outcome  |                                    |                  |                   |
| Is the standard met?   | MET oxtimes                        | NOT              | MET 🗌             |
| Date: 4 March 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

| <b>Findings</b> | against | the | standard  | and | requireme     | nts  |
|-----------------|---------|-----|-----------|-----|---------------|------|
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| Evic | lence provides | assurance | that the | following | QA | approval | criteria | are met |
|------|----------------|-----------|----------|-----------|----|----------|----------|---------|
|------|----------------|-----------|----------|-----------|----|----------|----------|---------|

- There is evidence that the programme complies with the NMC standards for education and training (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 | $\times$ | NO |
|-----|----------|----|
|     | / N      |    |

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 [ | $\overline{\lambda}$ 1 | NOT | MET |  |

R2.3 is met. Documentary evidence in the form of a programme specification, course handbook and competency document outline a variety of learning and teaching methods to be utilised to support the student's achievement of the prescribing competencies as set out by the RPS (2016). One example is the use of the flipped classroom approach, where cases are examined by individual students prior to the theory session, and then discussed and analysed within the class to facilitate deeper understanding from other health care perspectives. This is possible due to the multidisciplinary membership of students studying the prescribing programme.

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



**Date:** 4 March 2019

Better, safer care through quality assurance of nursing, midwifery and nursing associate education.

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| - | 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  $\square$ 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  $\square$  N/A  $\bowtie$ Programme is delivered in England. Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to curricula and assessment are met YES 🔀 NO 🗌 Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to curricula are met YES 🔀 NO | Outcome MET |NOT MET Is the standard met?

| Standard 3: Practice learning |  |
|-------------------------------|--|
| · ·                           |  |





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

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

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

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

### 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).

| MEI 🖂 NOI MEI 🗀 |  | NOT MET |
|-----------------|--|---------|
|-----------------|--|---------|

R3.1 is met. Documentary evidence and discussion at the approval visit with the programme team and stakeholders confirms that the governance for practice learning is in place for all applicants to the programme.

The student support and assessment procedure; developed across the region, sets out a clear framework for the allocation of practice assessors, academic assessors and practice supervisors for students as well as their roles and responsibilities. The procedure sets out the education preparation provided for the practice assessor, academic assessor and practice supervisor roles, along with procedures to follow should there be any problems with student progression. An example is of a practice nurse where the GP may be the practice assessor and supervisor but linking in with other surgeries in the local area provides additional support to facilitate a quality learning environment. This process is facilitated by the AEI team alongside the PLPs.

Discussions at the approval visit with the programme team illustrate the methods employed where applicants are self-employed. This involves tailoring an individualised network of supervision and assessment support, often drawing on PLPs for external support. Additional educational audits are carried out to provide





governance and quality assurance in practice learning environments where selfemployed applicants are located. Applicants are required to provide evidence of governance arrangements as part of the admissions process which is monitored by the admissions tutor. The prescribing programme team report they have access to the University of Worcester legal team to give an added layer to the governance structure if there are issues in relation to self-employed applicants.

| to the University of Worcester legal team to give an added layer to the governance structure if there are issues in relation to self-employed applicants.   |                         |  |  |
|---|-------------------------|--|--|
| There is evidence that the programme complies with the NMC s student supervision and assessment (R3.2)  YES   ✓   | standards for <b>NO</b> |  |  |
| Provide an evaluative summary from your documentary analysis evidence AND discussion at the approval visit to demonstrate if a provided that the QA approval criteria below is met or not met   |                         |  |  |
| <ul> <li>Evidence to ensure technology enhanced and simulation-based<br/>opportunities are used effectively and proportionately to suppor<br/>and assessment (R3.3)</li> </ul>  |                         |  |  |
| MET ⊠ No  | OT MET 🗌                |  |  |
| R3.3 is met. Documentary evidence and discussion at the approval visit provide an outline of technology enhanced and simulation-based learning opportunities in the proposed programme to support learning and assessment. Opportunities include: the use of a virtual learning environment on the programme web page; numeracy software packages to enhance development of numeracy skills; electronic data bases to facilitate review of current evidence base on which to base practice; and, flipped classroom approaches using case-based learning with direct learning resources on the virtual learning environment for student to access. |                         |  |  |
| <ul> <li>Processes are in place to ensure that students work in partners education provider and their practice learning partners to arrang supervision and assessment that complies with the NMC Standstudent supervision and assessment (R3.4)</li> </ul> YES \infty   | ge <sup>.</sup>         |  |  |
| Assurance is provided that Gateway 1: <u>Standards framework for nursiand midwifery education</u> relevant to practice learning are met <b>YES</b>  | ng and<br>NO ☐          |  |  |
| Assurance is provided that Gateway 2: <u>Standards for student supervises assessment</u> relevant to practice learning are met <b>YES</b>   | sion and<br>NO ☐        |  |  |
| Outcome   |                         |  |  |
| Is the standard met? MET 🖂 NO   | OT MET 🗌                |  |  |



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**Date:** 4 March 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 <u>Standards framework for nursing and midwifery education</u>. The programme leader of a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience
- R4.4 ensure the programme leader works in conjunction with the lead midwife for education (LME) and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes
- R4.5 ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking
- R4.5.1 In exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor for that part of the programme where the prescribing student is undergoing training in a practice learning setting. In such instances, the student, practice supervisor/assessor and the AEI will need to evidence why it was necessary for the practice supervisor and assessor roles to be carried out by the same person
- R4.6 ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking
- R4.7 provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes
- R4.8 assess the student's suitability for award based on the successful completion of a period of practice based learning relevant to their field of prescribing practice
- R4.9 ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies. This includes all students:
- R4.9.1 successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and





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

#### Findings against the standards and requirements

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

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

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

R4.1 is met. Documentary evidence and discussion at the approval visit confirms the support available to students during the taught element includes pastoral and tutorial support. The taught element of the programme reflects the RPS framework which is outlined in the mapping document provided. Tutorial support is timetabled. and feedback is provided on draft work for assignments and examination preparation to support students' learning and development.

The approval panel recommend clarity is provided in programme handbooks about where students can access both pastoral and academic support during the programme. (Recommendation four) (Standards framework for nursing and midwifery education R3.5)

The support and assessment of students in practice learning is clearly described. This includes the role of the practice assessor, practice supervisor and academic assessor including the preparation for these roles. A schedule of formal meetings will take place in practice learning and meetings are recorded in the competency document. All the competencies have to be verified by the practice assessor following consultation and feedback from the practice supervisor. Service users will contribute to the assessment of students through the service user testimony within the competency document.

There is evidence of how the Standards for student supervision and assessment are applied to the progra identify the supervisors and assesso for their roles (R4.2)

| il do loi otadont odportiolon and       |
|---|
| amme. There are processes in place to   |
| rs along with how they will be prepared |
|   |
| MET $oxed{oxed}$ NOT MET $oxed{oxed}$   |
| scussion at the approval visit confirms |

R4.2 is met. Documentary evidence and discussion at the approval visit confirms the processes that are in place to identify practice supervisors, practice assessors and academic assessors and how they will be prepared for their roles. This was clarified by the programme team and PLPs, some of whom are going to take on these roles for future students on the proposed programme.



database.

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The programme team are recommended to consider clarifying in the practice assessor/supervisor handbook how the training workshop content will prepare practice supervisors and practice assessors for their role; and, consider incorporating a self-declaration by staff completing the on-line version of the training workshop. (Recommendation two) (Standards for student supervision and assessment R 5.1-5.2, R8.1-8.4)

In addition, the programme team are recommended to consider developing a

| process whereby students can feedback on their practice assessors and practice supervisors. (Recommendation three) (Standards for student supervision and assessment R5.1 and R8.3, Standards for prescribing programmes R4.2)  |  |  |  |
|---|--|--|--|
| <ul> <li>Evidence of programme leader being a registered healthcare professional<br/>with appropriate knowledge, skills and experience (R4.3)</li> </ul>  |  |  |  |
| YES NO  |  |  |  |
| <ul> <li>Evidence of the programme leader working in conjunction with the LME and<br/>the practice assessor to ensure adequate support for any midwives<br/>undertaking prescribing programmes (R4.4)</li> <li>YES ∑ NO □</li> </ul>  |  |  |  |
| 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  |  |  |  |
| <ul> <li>Processes are in place to ensure the student is assigned to a practice<br/>assessor who is a registered healthcare professional and an experienced<br/>prescriber with suitable equivalent qualifications for the programme the<br/>student is undertaking (R4.5)</li> </ul>   |  |  |  |
| MET ⊠ NOT MET □   |  |  |  |
| R4.5 is met. Documentary evidence provides assurance that the student will be assigned a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the prescribing programme. This was clarified during discussion at the approval visit with the programme team and PLPs.  |  |  |  |
| The application form has been developed regionally by the West Midlands NMP group. Within this form there is a section where the student has to complete the details of their nominated practice assessor along with their criteria for nomination. The application form is then reviewed by the programme lead within the AEI and collaboration with the NHS trust NMP or student's employer will confirm the suitability of the practice assessor. The process also checks that the practice assessor has completed the training requirements outlined in the SSSA procedure to undertake this role and that they are registered on the locally held assessor |  |  |  |

Processes are in place to ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable



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| equivalent qualifications for (R4.6)  | the programme the stude     | nt is undertak<br>YES 🏻 | ing<br>NO 🗌 |
|---|-----------------------------|-------------------------|-------------|
| <ul> <li>Processes are in place to programme to support their competencies and programme</li> </ul>   | development as necessa      | _                       |             |
| <ul> <li>Processes are in place to as<br/>on the successful completio<br/>to their field of prescribing p</li> </ul>  | n of a period of practice-b | •                       |             |
| R4.8 is not met. During practice learning, processes are in place to assess the student's suitability for the award. However, we found that within the competency document and specifically within competence four, there are statements stating the student will 'prescribe'. These statements are taken directly from the RPS (2016) framework. However, there should be a footnote within this competence to remind the practice assessors and supervisors that the student cannot prescribe until qualified. Students' learning experience will only be prescribing using specimen prescriptions. This will ensure public protection and also protection for the student undertaking the prescribing preparation programme. (Condition one) |                             |                         |             |
| <ul> <li>Processes are in place to er<br/>met, addressing all areas no<br/>This includes:</li> </ul>  |                             |                         |             |
| <ul> <li>successfully passing a phased with a minimum s</li> </ul>  | · .                         | armacology e            | xam must    |
| <ul> <li>successfully passing a nur<br/>calculation of medicines (the<br/>score of 100%).</li> </ul>  | -                           | •                       | •           |
| Assurance is provided that Gateway 1: <u>Standards framework for nursing and</u> <u>midwifery education</u> relevant to supervision and assessment are met  |                             |                         |             |
|   |                             | YES 🔀                   | NO 🗌        |
| Assurance is provided that Gateway 2: <u>Standards for student supervision and assessment</u> relevant to supervision and assessment are met  |                             |                         |             |
|   |                             | YES 🖂                   | NO 🗌        |
| Outcome   |                             |                         |             |
| Is the standard met?  | MET                         | □ NOT                   |             |





R4.8 Within the competency document and specifically within competence four, there are statements stating the student will 'prescribe'. These statements are taken directly from the RPS (2016) framework. However, there should be a footnote within this competence to remind the practice assessors and practice supervisors that the student cannot prescribe until qualified. Students' learning experience will only be prescribing using specimen prescriptions. This will ensure public protection and also protection for the student undertaking the prescribing preparation. (Condition one)

Condition one: Ensure that clarity is provided within the competency document that the student cannot prescribe until qualified, especially within competence four where it states 'prescribe'. (Standards for prescribing programmes R4.8)

Recommendations two, three and four apply.

The programme team are recommended to consider clarifying in the practice assessor/supervisor handbook how the training workshop content will prepare practice supervisors and practice assessors for their role; and, consider incorporating a self-declaration by staff completing the online version of the training workshop. (Recommendation two)

Recommendation two: In the practice assessor/supervisor handbook clarify how the training workshop content will prepare practice supervisors and practice assessors for their role; and, consider incorporating a self-declaration by staff completing the online version of the training workshop. (Standards for prescribing programmes R4.2; Standards for student supervision and assessment R 5.1-5.2, R8.1-8.4)

The programme team are recommended to consider developing a process whereby students can feedback on their practice assessors and practice supervisors. (Recommendation three)

Recommendation three: Consider developing a process whereby students can feedback on their practice assessors and practice supervisors. (Standards for prescribing programmes R4.2; Standards for student supervision and assessment R5.1 and R8.3)

The approval panel recommend clarity is provided in programme handbooks about where students can access both pastoral and academic support during the programme. (Recommendation four)

Recommendation 4: Provide clarity within the course handbooks where students can access both pastoral and academic support during the programme. (Standards for prescribing programmes R4.1; Standards framework for nursing and midwifery education R3.5)

Date: 4 March 2019

#### Post event review

Identify how the condition(s) is met:

Condition one:





evised annotated RPS competency practice assessment document has been

| Standards for prescribing programmes R4.8 is now u                             | mat         |             |
|--|-------------|-------------|
| Revised outcome after condition(s) met:  | MET 🖂       | NOT MET     |
| Date condition met (s): 29 March 2019  |             |             |
| Revised annotated RPS competency practice assessment document, March 2019      |             |             |
| Programme team's response to condition, undated                                |             |             |
| Evidence:  |             |             |
| This condition is now met.   |             |             |
| submitted. This provides assurance that the student qualified as a prescriber. | cannot pres | cribe until |

#### 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



**Date:** 4 March 2019

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|   | (level 1), midwife or SCPHN is eligible to be recor   | ded as a pr  | escribe  | er, in      |
|   | either or both categories of:                         |              |          |             |
|   | - a community practitioner nurse (or midwife) pres    | scriber (V10 | 0/V150   | )), or      |
|   | - a nurse or midwife independent/supplementary        | prescriber ( | V300) (  | (R5.1)      |
|   |   | YES D        | abla     | NO 🗆        |
|   |   | 120 🛚        |          |             |
|   |   |              |          |             |
| •   | Evidence to ensure that successful participation in   | n and comp   | letion c | of an       |
|   | NMC approved prescribing programme leads to a         |              |          |             |
|   | equivalent to a bachelor's degree as a minimum a      |              |          |             |
|   |   | YES D        | ⊿        | NO 🗆        |
|   |   | ILO 🛚        |          |             |
|   |   |              |          |             |
| •   | Processes are in place to inform the student that     | the award n  | nust be  | <b>)</b>    |
|   | registered with the NMC within five years of succe    |              |          |             |
|   | programme and if they fail to do so they will have    | •            |          | ,           |
|   | complete the programme in order to qualify and re     |              |          | •           |
|   | prescriber (R5.3)                                     | YES 🛚        |          | NO 🗌        |
|   | ,   | _            | _        |             |
|   |   |              |          |             |
| •   | Processes are in place to inform the student that     |              | • •      |             |
|   | once their prescribing qualification has been anno    |              |          |             |
|   | and they may only prescribe from the formulary th     | •            |          |             |
|   | prescribe from and within their competence and s      | cope of pra  | ctice (F | ₹5.4)       |
|   |   | YES 🛚        | abla     | NO 🗌        |
|   |   |              | _        |             |
|   |   |              |          |             |
| Assurance is provided that the <u>Standards framework for nursing and midwifery</u> |   |              |          |             |
|   | ation relevant to the qualification to be awarded are |              |          | <del></del> |
|   |   | YES [        | abla     | NO 🗌        |
|   |   |              | <u> </u> |             |
| Outco   | ome   |              |          |             |
| Is the  | standard met?   | ET 🖂         | NOT N    | /IET 🗌      |





#### Sources of evidence

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

| Key documentation  | YES         | NO |
|--|-------------|----|
| Programme document, including proposal, rationale and consultation   |             |    |
| Programme specification(s)   |             |    |
| Module descriptors   | $\boxtimes$ |    |
| Student facing documentation including: programme handbook   |             |    |
| Student university handbook  |             |    |
| Practice assessment documentation  |             |    |
| Practice placement handbook  | $\boxtimes$ |    |
| PAD linked to competence outcomes, and mapped against RPS A Competency Framework for all Prescribers   |             |    |
| Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC, 2018)                        |             |    |
| 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) |             |    |
| Mapping document providing evidence of how the<br>Standards for student supervision and assessment (NMC, 2018) apply to the programme(s)   |             |    |
| Curricula vitae for relevant staff   |             |    |
| Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website       |             |    |



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| Written confirmation by the education institution and associated practice learning partners to support the programme intentions.   |  |  |  |
|--|--|--|--|
| List additional documentation:   |  |  |  |
| Written pharmacology exam paper, March 2019  |  |  |  |
| Programme approval briefing paper, March 2019  |  |  |  |
| Minutes of meetings with service users, October 2018-March 2019  |  |  |  |
| Minutes of meetings with stakeholders, October 2018-March 2019   |  |  |  |
| Terms of reference for West Midlands prescribing forum, undated  |  |  |  |
| SSSA procedure document, March 2019  |  |  |  |
| Training workshop for practice assessors/supervisors outline, March 2019   |  |  |  |
| Regional non-medical prescribing application form, March 2019  |  |  |  |
| Supervision and assessment in practice handbook, March 2019  |  |  |  |
| Application interview schedule, March 2019   |  |  |  |
| Declaration of good character form, March 2019   |  |  |  |
| Application checklist, March 2019  |  |  |  |
| Post event documentary evidence to meet conditions:  |  |  |  |
| Programme team's response to condition, undated  |  |  |  |
| Revised annotated RPS competency practice assessment document, (March 2019).   |  |  |  |
| If you stated no above, please provide the reason and mitigation   |  |  |  |
| Student university handbook is not directly specific to the NMP students and any relevant information about university services and regulations is contained within the module handbook. |  |  |  |
| 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 | $\boxtimes$ |    |



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| Senior managers from associated practice learning partners with responsibility for resources for the programme  |             |           |  |
| Programme team/academic assessors   | $\boxtimes$ |           |  |
| Practice leads/practice supervisors/ practice assessors   |             |           |  |
| Students  | $\boxtimes$ |           |  |
| If yes, please identify cohort year/programme of study: Four current NMP students Three completed NMP students  |             |           |  |
| Service users and carers  |             |           |  |
| If you stated no above, please provide the reason and mitigation  |             |           |  |
| Practice NMP leads attended the approval visit meeting but as PLPs have not yet identified who the practice assessors or practice supervisors are it was not possible for these people to attend. Some of the past students did identify that they may be taking on these roles for future cohorts of NMP students. |             |           |  |
| Additional comments   |             |           |  |
| Post event documentary evidence to meet conditions:   |             |           |  |
| A revised annotated RPS competency practice assessment document provides evidence that the changes required to meet condition one have been made.   |             |           |  |
| Condition one is met and the programme recommended for approval.  |             |           |  |
|   |             |           |  |

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

|  | YES | NO          |
|--|-----|-------------|
| Specialist teaching accommodation (e.g. clinical skills/simulation suites) |     | $\boxtimes$ |
| Library facilities   |     | $\boxtimes$ |
| Technology enhanced learning Virtual learning environment                  |     | $\boxtimes$ |
| Educational audit tools/documentation                                      |     | $\boxtimes$ |





| Practice learning e   | environments                            |                    |              |             |
|---|---|--------------------|--------------|-------------|
| If yes, state where visited/findings  |   |                    |              |             |
|   |   |                    |              |             |
| If you stated no ab   | ove, please provide                     | the reason and mit | igation      |             |
| Not required for this approval. University of Worcester is an established provider of prescribing programmes.   |   |                    |              | ed provider |
| Additional commer   | nts:                                    |                    |              |             |
| Post event docum  | entary evidence to m                    | eet conditions:    |              |             |
|   | ed RPS competency changes required to r |                    |              | •           |
| Condition one is m  | net and the programm                    | ne recommended fo  | or approval. |             |
|   |   |                    |              |             |
| Mott MacDonald  | Group Disclaimer                        |                    |              |             |
| This document is issued for the party which commissioned it and for specific purposes connected with the captioned project only. It should not be relied upon by any other party or used for any other purpose.  We accept no responsibility for the consequences of this document being relied upon by any other party, or being used for any other purpose, or containing any error or omission which is due to an error or omission in data supplied to us by other parties. |   |                    |              |             |
| Issue record  |   |                    |              |             |
| Interim Report  |   |                    |              |             |
| Author:   | Alison Pooler                           | Date:              |              |             |
| Checked by:   | Pam Page                                | Date:              |              |             |
| Final Report Author:  | Alison Pooler                           | Date:              | 15 An        | ril 2019    |
| Checked by:   | Pam Page                                | Date:              |              | ay 2019     |
| Approved by:  | Leeann Greer                            | Date:              |              | ne 2019     |
| Submitted by:   | Amy Young                               | Date:              |              | ne 2019     |