



Programme Major Modification report

Section one

| Programme provider name: | University of Wolverhampton | | |
|--|---|--|--|
| Programmes reviewed: <i>This is the NMC programme title(s)</i> | Independent and supplementary nurse prescribing V300 | | |
| | Community practitioner nurse prescribing V150 | | |
| | Community practitioner nurse prescribing V100 | | |
| AEI programme title(s): | | | |
| Current AEI programme title(s): Please include all currently approved programme titles | Independent/supplementary non- medical prescribing (V300) - level six Independent/supplementary non- medical prescribing (V300) – level seven | | |
| | Prescribing for practice (V150) – level six | | |
| | Prescribing for practice (V150) – level seven | | |
| | Community practitioner nurse prescribing V100 – level six | | |
| | Community practitioner nurse prescribing V100 – level seven | | |
| Modified AEI programme title(s) if applicable: Please include new title(s) if current AEI programme title(s) are being modified as a result of this modification or add N/A | Postgraduate certificate in non-medical prescribing for nurses, midwives and allied health professionals | | |
| Additional AEI programme title(s) if applicable: Please include any additional AEI programme title(s) for approval as a result of this modification (for example new routes being added that have a | N/A | | |





| different title to those already approved) or add N/A | | | |
|---|---|--|--|
| Academic level of current programme: | | | |
| | England, Wales, Northern Ireland | | |
| Independent and supplementary nurse prescribing V300 | SCQF | | |
| | Level 11 | | |
| | □ N/A | | |
| | England, Wales, Northern Ireland | | |
| Community practitioner nurse prescribing | SCQF | | |
| V 150 | Level 11 | | |
| | ⊠ N/A | | |
| | England, Wales, Northern Ireland | | |
| Community practitioner nurse prescribing V100 | SCQF | | |
| | | | |
| | Level 11 | | |
| | □ Level 11 ⊠ N/A | | |
| Academic levels of modified/additional | ⊠ N/A | | |
| Academic levels of modified/additional | ⊠ N/A | | |
| Academic levels of modified/additional Independent and supplementary nurse prescribing V300 | N/A programme(s)/route(s): England, Wales, Northern Ireland | | |





| | □ N/A | | |
|---|----------------------------------|--|--|
| | England, Wales, Northern Ireland | | |
| Community practitioner nurse prescribing V150 | SCQF | | |
| | Level 11 | | |
| | ⊠ N/A | | |
| | England, Wales, Northern Ireland | | |
| Community practitioner nurse prescribing V100 | SCQF | | |
| | Level 11 | | |
| | ⊠ N/A | | |
| Programme approval dates: | | | |
| Date of NMC approval of the programme being modified: This is the approval date under the most recent NMC standards. | 24 January 2020 | | |
| Date(s) of NMC approval of any modifications since last approval: | 15 July 2020 | | |
| Programme start dates: | | | |
| Current modification programme start date: | | | |
| Independent and supplementary nurse prescribing V300 | 11 September 2023 | | |
| Community practitioner nurse prescribing V150 | N/A | | |
| Community practitioner nurse prescribing V100 | N/A | | |
| Date of modification: | 3 May 2023 | | |
| Type of modification: | Desktop | | |





| QA visitor: | Registrant Visitor: Neil Thomas |
|-------------|---------------------------------|
|-------------|---------------------------------|





Section two

Summary of review and findings

The University of Wolverhampton (UoW) (the university) are an approved education institution (AEI) with a range of Nursing and Midwifery Council (NMC) programmes and are seeking to modify their approved independent/supplementary prescribing (V300). The programme was approved on 24 January 2020.

The V300 programme is mapped against the NMC Standards for prescribing programmes (SPP) (NMC, 2018) and Standards of proficiency for nurse and midwife prescribers (adoption of the Royal Pharmaceutical Society (RPS, 2021) competency framework for all prescribers) (NMC, 2021). The current V300 programme is delivered at level six and seven, over a period of six months part-time, comprising of two modules each at 20 credits.

The proposed modification is to change the programme to one 40-credit module. This 40-credit module will be incorporated into a postgraduate certificate (PG Cert) offer that includes a health assessment module to provide an award for practitioners opting for this route. There have been changes to the learning outcomes for the proposed modified programme.

This major modification takes place as a desktop event.

The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) and the Standards for student supervision and assessment (SSSA) (NMC, 2028) are met at programme level.

The modification to the prescribing programme is recommended to the NMC for approval.

| Recommended outcome of the approval panel | | |
|---|--|--|
| Recommended outcome to the NMC: | Programme is recommended to the NMC for approval \square | |
| | 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: | |
|--|---|--|
| | None identified. | |
| | Selection, admission and progression: | |
| | None identified. | |
| | Practice learning: | |
| Conditions: | None identified. | |
| | Assessment, fitness for practice and award: | |
| | None identified. | |
| | Education governance: management and quality assurance: | |
| | None identified. | |
| Date condition(s) to be met: | N/A | |
| Recommendations to enhance the programme delivery: | Recommendation one: Monitor and continue to enhance the people who use services and carers (PUSC) involvement in future development, delivery and assessment of the programme. (SFNME R1.12) | |
| 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 | | |
| N/A | | |
| AEI Observations | Observations have been made by the education | |
| | institution YES | NO 🖂 |





| Summary of observations made, if applicable | | |
|---|--|-----------|
| Final recommendation | Programme is recommended to the NMC for approval | \square |
| made to NMC: | Recommended to refuse approval of the programme | |
| Date condition(s) met: | N/A | |

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, 2021) |
| 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, midwives |
| and nursing associates (NMC, 2015 updated 2018) |
| Quality assurance framework for nursing, midwifery and nursing associate |
| education (NMC, 2020) |
| QA Handbook (NMC, 2022) |

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:

<u>Standards framework for nursing and midwifery education (NMC, 2018)</u> 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 Standards for student supervision and assessment
- R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes
- R2.6 ensure that recruitment and selection of students is open, fair and transparent and includes measures to understand and address underrepresentation
- R2.7 ensure that service users and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection

Standard 3: Student empowerment:

- R3.3 have opportunities throughout their programme to work with and learn from a range of people in a variety of practice placements, preparing them to provide care to people with diverse needs
- R3.16 have opportunities throughout their programme to collaborate and learn with and from other professionals, to learn with and from peers, and to develop supervision and leadership skills
- R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning
- 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 <u>evaluative summary</u> about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders.

Programme documentation confirms evidence of effective partnership working between the school and key stakeholders. There's evidence of engagement with practice learning partners (PLPs), PUSC and students in the development of the programme modification and the planning, recruitment and delivery of the





programme. The school has a specific group, service users and carers contributing to educating students for services, (SUCCESS) and are planning to enhance their involvement in recruitment and delivery of the programme. The SUCCESS group are involved in the delivery of the programme and have contributed to the planning and developments of the major modification. The programme team are recommended to continue to monitor and enhance the PUSC involvement in future development, delivery and assessment of the programme. (Recommendation one) Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 1: Standards framework for nursing and midwifery education MET NOT MET \mathbb{N} Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 2: Standards for student supervision and assessment MET NOT MET \bowtie Post event review Identify how the condition(s) is met N/A Date condition(s) met: N/A Revised outcome after condition(s) met MET NOT MET N/A

Student journey through the programme

Standard 1: Selection, admission and progression

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

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





- R1.2 provide opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non- NHS employed registrants) to apply for entry onto an NMC approved prescribing programme
- R1.3 confirm that the necessary governance structures are in place (including clinical support, access to protected learning time and employer support where appropriate) to enable students to undertake, and be adequately supported throughout, the programme
- R1.4 consider recognition of prior learning that is capable of being mapped to the RPS Competency Framework for all Prescribers
- R1.5 confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme
- R1.6 confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas:
- R1.6.1 Clinical/health assessment
- R1.6.2 Diagnostics/care management
- R1.6.3 Planning and evaluation of care
- R1.7 ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme

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

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

Proposed transfer of current students to the <u>Standards for student</u> <u>supervision and assessment</u> (NMC, 2018).

Demonstrate a robust process to transfer current students onto the <u>Standards for</u> <u>student supervision and assessment</u> (NMC, 2018).

Findings against the standard and requirements

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

• Evidence of processes to ensure that the applicant is a registered nurse (level 1), a registered midwife or a SCPHN before being considered as





| | eligible to apply for entry onto an NMC approved prescribing programme (R1.1) | | | |
|---|---|---|--|--|
| | YES 🖂 | | | |
| • | Evidence of selection process that demonstrates opportunities all nurse (level 1), midwife or SCPHN registrants (including NH employed or non-NHS employed registrants) to apply for entry NMC approved prescribing programme. Evidence of this staten documentation such as: programme specification; module desc marketing material. Evidence of this statement on university we (R1.2) | IS, self- onto an ment in criptor, | | |
| | YES 🖂 | | | |
| evide | Provide an <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met | | | |
| • | Evidence that the necessary governance structures are in place clinical support, access to protected learning time and employe where appropriate) to enable students to undertake, and be add supported throughout, the programme (R1.3) MET | er support | | |
| R1.3 i | is met. Unchanged throughout this modification. | | | |
| Evide | ence provides assurance that the following QA approval crite | eria are met: | | |
| Processes are in place to consider recognition of prior learning the capable of being mapped to the RPS Competency Framework for Prescribers (R1.4) | | | | |
| | YES | NO 🗌 | | |
| • | Processes are in place to confirm on entry that any applicant set undertake a prescribing programme has the competence, experimentation ability to study at the level required for that programme YES \searrow | erience and me (R1.5) | | |
| | | | | |
| • | Processes are in place to confirm that the applicant is capable of effective practice at a level of proficiency appropriate to the probe undertaken and their intended area of prescribing practice in following areas (R1.6): - Clinical/health assessment - Diagnostics/care management - Planning and evaluation | ogramme to | | |





| Processes are in place to ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme (R1.7) YES NO N/A | | | |
|--|--|--|--|
| Description of compart students (s.the presence on description | | | |
| Proposed transfer of current students to the programme under review | | | |
| From your documentary analysis and your meeting with students, provide an <u>evaluative summary</u> to confirm how the <u>Standards for prescribing</u> <u>programmes</u> and <u>Standards of proficiency for nurse and midwife prescriber</u> (adoption of the RPS Competency Framework for all Prescribers) will be met | | | |
| through the transfer of existing students onto the proposed programme. | | | |
| The documentary analysis indicates that existing students won't be transferred to the modified programme. | | | |
| Proposed transfer of current students to the Standards for student | | | |
| supervision and assessment (SSSA) (NMC, 2018). | | | |
| From your documentary analysis and your meetings at the approval visit confirm if students will be transferring to the SSSA, and if so that they have informed choice and are fully prepared for supervision and assessment. | | | |
| Documentary analysis confirms that the SSSA is already implemented in the current programme. | | | |
| Assurance is provided that Gateway 1: <u>Standards framework for nursing and</u> <u>midwifery education</u> relevant to selection, admission and progression are met YES \boxtimes NO | | | |
| Outcome | | | |
| Is the standard met? MET NOT MET | | | |
| Date: 3 May 2023 | | | |
| Post event review | | | |
| Identify how the condition(s) is met: | | | |
| N/A | | | |
| Date condition(s) met: | | | |
| N/A | | | |
| Revised outcome after condition(s) met: MET NOT MET | | | |
| N/A | | | |





Standard 2: Curriculum

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

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

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

- There is evidence that the programme complies with the NMC Standards framework for nursing and midwifery education (R2.1)
 YES NO
 - There is evidence that the programme is designed to fully deliver the competencies set out in the RPS *Competency Framework for all Prescribers*, as necessary for safe and effective prescribing practice (R2.2).

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

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





| R2.3 is met. Unchanged through this modification. | | | |
|---|-----------------------------|-------------------|--|
| Evidence provides assurance that the following QA | A approval o | criteria are met: | |
| Evidence of programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice (R2.4): stating the general and professional content necessary to meet the programme outcomes stating the prescribing specific content necessary to meet the programme outcomes confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing | | | |
| | YES | ⊠ NO [_] | |
| • The programme structure demonstrates a balance of theory and practice learning. A range of learning and teaching strategies are detailed in the programme specification, programme handbook and module descriptor with theory / practice balance detailed. There are appropriate module aims, descriptors and outcomes specified. | | | |
| (R2.5) | YES | NO 🗌 | |
| If relevant to the review Evidence to ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language. (R2.6) YES NO N/A X | | | |
| The programme is delivered in England only. | | | |
| Assurance is provided that Gateway 1: <u>Standards framework for nursing and</u> <u>midwifery education</u> relevant to curricula and assessment are met YES X NO | | | |
| Assurance is provided that Gateway 2: <u>Standards for sament</u> relevant to curricula are met | s <u>tudent supe</u> YES | | |
| Outcome | | | |
| Is the standard met? MET MET NOT MET | | | |
| Date: 3 May 2023 | | | |
| Post event review Identify how the condition(s) is met: | | | |
| | | | |





| N/A | | |
|---|-------|--|
| Date condition(s) met: | | |
| N/A | | |
| Revised outcome after condition(s) met: | MET 🗌 | |
| 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> <u>supervision and assessment</u>
- 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 <u>Standards for student supervision and assessment</u>

Findings against the standard and requirements

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

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

MET 🛛 NOT MET 🗌

R3.1 is met. Unchanged through this modification.





| Evidence provides assurance that the following QA | approval criteria a | re met: |
|--|--|-----------|
| • There is evidence that the programme complies student supervision and assessment (R3.2) | with the NMC standa | ards for |
| | YES 🖂 | NO 🗌 |
| Provide an <u>evaluative summary</u> from your document evidence AND discussion at the approval visit to de provided that the QA approval criteria below is met | emonstrate if assura | ance is |
| Evidence to ensure technology enhanced and si opportunities are used effectively and proportion and assessment (R3.3) | | - |
| | | |
| R3.3 is met. Documentary evidence confirms that a ran are made available to students, including technology er virtual learning environment and low fidelity simulation- online teaching in the classroom and high fidelity in the | nhanced learning via based learning along | the |
| Evidence provides assurance that the following QA | approval criteria a | re met: |
| Processes are in place to ensure that students v education provider and their practice learning pa supervision and assessment that complies with student supervision and assessment (R3.4) | rtners to arrange | |
| | YES 🖂 | NO 🗌 |
| Assurance is provided that Gateway 1: <u>Standards fram</u> <u>midwifery education</u> relevant to practice learning are m | et | |
| | YES 🖂 | |
| Assurance is provided that Gateway 2: <u>Standards for sasessment</u> relevant to practice learning are met | tudent supervision ar | <u>nd</u> |
| | YES 🖂 | NO 🗌 |
| Outcome | | |
| Is the standard met? | | ET 🗌 |
| Date: 3 May 2023 | | |
| Post event review | | |
| Identify how the condition(s) is met: | | |
| N/A | | |
| Date condition(s) met: | | |





N/A

Revised outcome after condition(s) met:

MET 🗌

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NOT MET
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N/A

Standard 4: Supervision and assessment Approved education institutions, together with practice learning partners, must: R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC Standards for student supervision and assessment R4.3 appoint a programme leader in accordance with the requirements of the NMC Standards framework for nursing and midwifery education. The programme leader of a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience R4.4 ensure the programme leader works in conjunction with the lead midwife for education (LME) and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes R4.5 ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking R4.5.1 In exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor for that part of the programme where the prescribing student is undergoing training in a practice learning setting. In such instances, the student, practice supervisor/assessor and the AEI will need to evidence why it was necessary for the practice supervisor

- and assessor roles to be carried out by the same person R4.6 ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking
- R4.7 provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes
- R4.8 assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice
- R4.9 ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies. This includes all students:
- R4.9.1 successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80 percent), and





| R4.9.2 successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100 percent) | | | |
|--|--|--|--|
| Findings against the standards and requirements | | | |
| Provide an <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met | | | |
| There is evidence of how the programme will ensure how support, supervision, learning and assessment provided complies with the NMC <u>Standards framework for nursing and midwifery education</u> (R4.1) MET X NOT MET X | | | |
| R4.1 is met. Unchanged through this modification. | | | |
| There is evidence of how the <u>Standards for student supervision and</u> <u>assessment</u> are applied to the programme. There are processes in place to identify the supervisors and assessors along with how they will be prepared for their roles (R4.2) MET NOT MET | | | |
| R4.2 is met. Documentary evidence confirms that processes are in place to identify supervisors and assessors and that they are adequately prepared to undertake their role. | | | |
| Evidence provides assurance that the following QA approval criteria are met: | | | |
| • Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience in accordance with the requirements of the <i>Standards framework for nursing and midwifery</i> | | | |
| education. (R4.3) YES 🛛 NO 🗌 | | | |
| Evidence of the programme leader working in conjunction with the LME and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes (R4.4) | | | |
| | | | |
| Provide an <u>evaluative summary</u> from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met | | | |





Processes are in place to ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking. Processes are in place to ensure that in exceptional circumstances only, 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 (R4.5) NOT MET R4.5 is met. There is documentary evidence that all programme documentation has been amended and developed to reflect standard R4.5 which ensures that the student is assigned to a practice assessor and that only in exceptional circumstances would the same person fulfil the role of supervisor and assessor. Processes are in place and conveyed throughout the programme documentation should this situation occur. Evidence provides assurance that the following QA approval criteria are met: Processes are in place to ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking (R4.6) YES 🖂 NO 🗌 Processes are in place to provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes (R4.7) YES 🖂 NO 🗌 Processes are in place to assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice (R4.8) YES 🖂 NO [Processes are in place to ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies (R4.9). This includes: - successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and - successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100%). YES 🖂 NO





| Assurance is provided that Gateway 1: <u>Standards framework for nursing and</u> midwifery education relevant to supervision and assessment are met | | | |
|--|-------|-------------|--|
| | YES | | |
| Assurance is provided that Gateway 2: <u>Standards for</u> assessment relevant to supervision and assessment | | rvision and | |
| | YES | NO 🗌 | |
| Outcome | | | |
| Is the standard met? | MET 🔀 | NOT MET | |
| Date: 3 May 2023 | | | |
| Post event review | | | |
| Identify how the condition(s) is met: | | | |
| N/A | | | |
| Date condition(s) met: | | | |
| N/A | | | |
| Revised outcome after condition(s) met: | MET | | |
| N/A | | | |

Standard 5: Qualification to be awarded

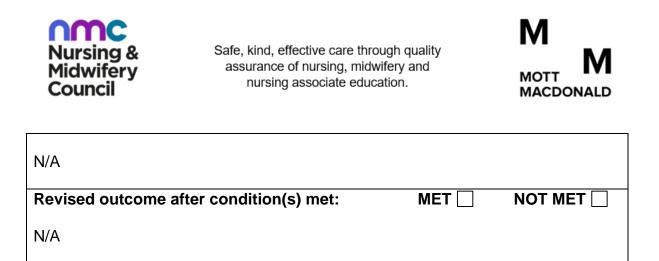
Approved education institutions, together with practice learning partners, must:

- R5.1 following successful completion of an NMC approved programme of preparation, confirm that the registered nurse (level 1), midwife or SCPHN is eligible to be recorded as a prescriber, in either or both categories of:
- R5.1.1 a community practitioner nurse or midwife prescriber (V100/V150), or
- R5.1.2 a nurse or midwife independent/supplementary prescriber (V300)
- R5.2 ensure that participation in and successful completion of an NMC approved prescribing programme leads to accreditation at a level equivalent to a bachelor's degree as a minimum award
- R5.3 inform the student that the award must be registered with us within five years of successfully completing the programme and if they fail to do so they will have to retake and successfully complete the programme in order to qualify and register their award as a prescriber
- R5.4 inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice





| Findings against the standards and requirements |
|---|
| Evidence provides assurance that the following QA approval criteria are met: |
| Processes are in place to ensure following successful completion of an NMC approved programme of preparation, confirm that the registered nurse (level 1), midwife or SCPHN is eligible to be recorded as a prescriber, in either or both categories of: a community practitioner nurse (or midwife) prescriber (V100/V150), or a nurse or midwife independent/supplementary prescriber (V300) (R5.1) YES NO |
| Evidence to ensure that successful participation in and completion of an NMC approved prescribing programme leads to accreditation at a level equivalent to a bachelor's degree as a minimum award (R5.2) YES X NO |
| • Processes are in place to inform the student that the award must be registered with the NMC within five years of successfully completing the programme and if they fail to do so they will have to retake and successfully complete the programme in order to qualify and register their award as a prescriber (R5.3) |
| YES ⋈ NO □ Processes are in place to inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice (R5.4) YES ⋈ NO □ |
| Assurance is provided that the Standards framework for nursing and midwifery |
| education relevant to the qualification to be awarded are met |
| Outcome |
| Is the standard met? MET MET NOT MET |
| Date: 3 May 2023 |
| Post event review |
| Identify how the condition(s) is met: |
| N/A |
| Date condition(s) met: |







Section four

Sources of evidence

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

| Key documentation | YES | NO |
|---|-------------|----|
| Programme document, including proposal, rationale and consultation | \square | |
| Programme specification(s) | \square | |
| Module descriptors | \square | |
| Student facing documentation including: programme handbook | \square | |
| Student university handbook | \square | |
| Practice assessment documentation | \boxtimes | |
| Practice placement handbook | \boxtimes | |
| PAD linked to competence outcomes, and mapped against RPS A Competency Framework for all Prescribers | \boxtimes | |
| Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC, 2018) (Gateway 1) | | |
| Mapping document providing evidence of how the <i>Standards for student supervision and assessment</i> (NMC, 2018) apply to the programme(s) (Gateway 2) | \boxtimes | |
| Mapping document providing evidence of how the programme meets the <i>Standards for prescribing</i> <i>programmes</i> and RPS <i>Standards of proficiency for</i> <i>prescribers</i> (NMC, 2018) (Gateway 3) | | |
| Curricula vitae for relevant staff | \square | |
| Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website | | |
| Written placement agreements between the education institution and associated practice learning partners to support the programme intentions. | | |
| If you stated no above, please provide the reason and mitig | ation: | |
| List additional documentation: Birmingham Children's Hospital Care Quality Commission (CQC) report, 3 March 2023 | | |





Birmingham Women's and Children's NHS Foundation Trust CQC report, 3 March 2023 Black Country Healthcare NHS Foundation Trust CQC report, 12 May 2022

Cygnet Wast Hills CQC report, 28 October 2022

Kettering General Hospital CQC report, 6 May 2022

Lincolnshire Community Health Services NHS Trust CQC report, 27 September 2018

Lincolnshire Partnership NHS Foundation Trust CQC report, 22 June 2020 Shrewsbury and Telford NHS Trust CQC report, 18 November 2021 United Lincolnshire Hospitals NHS Trust CQC report, 8 February 2022 University Hospitals of Derby and Burton NHS Foundation Trust CQC report, 16 June 2021

Walsall Healthcare NHS Trust CQC report, 25 January 2023 Worcestershire Royal Hospital CQC report, 19 February 2021

Additional comments: None identified.

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

| | YES | NO | |
|--|-----|-------------|--|
| Senior managers of the AEI/education institution with | | \boxtimes | |
| responsibility for resources for the programme | | | |
| Senior managers from associated practice learning | | \boxtimes | |
| partners with responsibility for resources for the | | | |
| programme | | | |
| Programme team/academic assessors | | \boxtimes | |
| Practice leads/practice supervisors/ practice assessors | | \boxtimes | |
| Students | | \boxtimes | |
| If yes, please identify cohort year/programme of study: | | | |
| Service users and carers | | \boxtimes | |
| If you stated no above, please provide the reason and mitigation: This was a remote desktop major modification that didn't require meeting with the team or stakeholders. The documentary evidence was robust and confirmed all standards were met. | | | |
| Additional comments: None identified. | | | |

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

| YES | NO |
|-----|----|
| • | |





| Specialist teaching accommodation (e.g. clinical skills/simulation suites) | | | |
|--|--|-----------|--|
| Library facilities | | \square | |
| Technology enhanced learning Virtual learning environment | | | |
| Educational audit tools/documentation | | | |
| Practice learning environments | | \square | |
| If practice learning environments are visited, state where visited/findings: | | | |
| If you stated no above, please provide the reason and mitigation: This was a remote desktop modification. | | | |
| Additional comments: | | | |
| None identified. | | | |

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| Issue record | | | |
|---------------|--------------|-------|-------------|
| Final Report | | | |
| Author(s): | Neil Thomas | Date: | 3 May 2023 |
| Checked by: | Pamela Page | Date: | 5 May 2023 |
| Submitted by: | Amy Young | Date: | 25 May 2023 |
| Approved by: | Leeann Greer | Date: | 26 May 2023 |