



Programme approval visit report

Section one

Programme provider name:	University of Sunderland
In partnership with: (Associated practice learning partners involved in the delivery of the programme)	Northumbria Health Care NHS Foundation Trust Tees Esk and Wear Valley NHS Foundation Trust City Hospitals Sunderland Foundation Trust South Tyneside NHS Foundation Trust, County Durham and Darlington NHS Foundation Trust North Tees and Hartlepool NHS Foundation Trust Newcastle upon Tyne Hospitals NHS Foundation Trust Sunderland Clinical Commissioning Group Northumberland Tyne and Wear NHS Foundation Mental Health Trust

Programme(s) reviewed:

Programme: Independent and Supplementary Nurse Prescribing

Title of programme: Level 6: Prescribing for health professionals: level 7 Enhanced

prescribing for health professionals. Programme start date: 6 July 2020

Academic level(s):

England, Wales, Northern Ireland:

Level 6 Level 7

Date of approval	17 December 2019
QA visitor(s):	Registrant Visitor: Heather Bain





Summary of review and findings

The University of Sunderland (UoS) (the university) faculty of health sciences and wellbeing, is an established approved educational institution (AEI) of preregistration nursing programmes and have experience in delivering prescribing programmes since 2018. UoS is seeking to deliver the independent/supplementary prescribing programme (V300) against the NMC (2018) Standards for prescribing programmes (SPP) with adoption of the Royal Pharmaceutical Society (RPS, 2016) competence framework for all prescribers. The V300 programme will be delivered at academic levels six and seven as standalone 40 credit modules over a period of four months.

Documentary analysis and findings at the approval visit demonstrate commitment towards partnership working with key stakeholders. There's evidence of partnership between UoS and practice learning partners (PLPs) in delivering prescribing programmes at operational and strategic levels. There's evidence of effective communication processes between UoS and PLPs to ensure all governance is in place to deliver the programme. There's evidence of engagement with service users and carers (SUC).

The SPP (NMC, 2018) and the RPS competency framework for all prescribers are detailed in the documentation and mapped to the programme.

Arrangements at programme level don't meet the Standards for nursing and midwifery education (SFNME) and the Standards for student supervision and assessment (SSSA) as conditions apply.

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

Update 24 January 2020

Evidence was provided to meet the one NMC condition and two university conditions. The conditions and related standards are now met.

In addition to this the university has chosen to consider recommendation one around the renaming of the programme and has selected to action this. The level six route will be titled, 'prescribing for health professionals', and the level seven route, 'enhanced prescribing for health professionals'.

The programme is recommended to the NMC for approval.





Recommended outcome of the approval panel	
Recommended outcome to the NMC:	Programme is recommended for approval subject to specific conditions being met
	Effective partnership working: collaboration, culture, communication and resources:
	None identified
Conditions:	Selection, admission and progression:
Please identify the standard and	None identified
requirement the condition relates to under the relevant key	Practice learning:
risk theme. Please state if the condition is AEI/education institution in nature or specific to NMC standards.	Condition one: The programme team to add to the application proforma a requirement to provide details of practice supervisor and assessor experience relevant to the role. (SSSA R6.6; SPP R4.2, R4.5)
	Assessment, fitness for practice and award:
	None identified
	Education governance: management and quality assurance:
	Condition two: The programme team to develop and seek approval for programme specific regulations to ensure programme assessment strategy is robust. (University condition)
	Condition three: The programme team is to undertake a thorough read of the programme documentation and amend any anomalies and typographical errors. (University condition)
Date condition(s) to be met:	24 January 2020
Recommendations to enhance the programme delivery:	Recommendation one: The programme team to consider renaming the programme as it was strongly supported by employers, to remove the term "non-medical" and replace with for example 'prescribing for healthcare professionals'. (University recommendation)





Council	MACDONALD
	Recommendation two: The programme team to consider reviewing the assessment strategy in view of: developing an e-portfolio and also consider how clinical management plans and supplementary prescribing may be of limited relevance to some roles. (University recommendation)
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:

Revised copies of the programme documentation provide evidence that the conditions are met.

The application form has been amended to include the required prescribing experience of the practice supervisor and practice assessor. Condition one is now met.

AEI Observations	Observations have been made by the education institution No
Summary of observations made, if applicable	
Final recommendation made to NMC:	Programme is recommended to the NMC for approval
Date condition(s) met:	24 January 2020

Section three

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) (NMC, 2018)</u>

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

Standards for student supervision and assessment (NMC, 2018)

The Code: Professional standards of practice and behaviour for nurses and





midwives (NMC, 2015)

QA framework for nursing, midwifery and nursing associate education (NMC, 2018)

QA Handbook (October 2018)

Partnerships

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

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

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

Standard 1: The learning culture:

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

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

Standard 2: Educational governance and quality:

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

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

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

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

Standard 3: Student empowerment:

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

R3.16 have opportunities throughout their programme to collaborate and learn with





and from other professionals, to learn with and from peers, and to develop supervision and leadership skills

R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning R3.18 have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice

Standard 4: Educators and assessors:

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

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

R4.10 share effective practice and learn from others

Standard 5: Curricula and assessment:

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

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

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

Standard 1: Organisation of practice learning:

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

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

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

Standard 2: Expectations of practice supervisors:

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

Standard 3: Practice supervisors: role and responsibilities:

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

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

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





Standard 7: Practice assessors: responsibilities:

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

Standard 9: Academic assessors: responsibilities:

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

Findings against the standard and requirements

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

Documentary evidence and the approval process confirms there's effective partnership working between UoS and key stakeholders including PLPs, SUC and students, in the development, delivery and evaluation of the programme at a strategic and operational level. Policies and processes are in place to support a partnership approach to the development and future delivery of the prescribing programme. It was reported that the Dean and Head of School has regular strategic partnership meetings with PLPs. The prescribing programme team have regular meetings with prescribing leads in the Trusts and there are regular regional non-medical prescribing meetings that the programme team attend. The PLPs attending the approval visit confirm the close working relationship with UoS.

Evidence of partnership working between UoS and PLPs in managing the educational audits, and the preparation of practice supervisors and practice assessors to meet the SSSA (NMC, 2018) is evident within the documentation and from the approval process. The programme team report a planned joint approach to support practice learning whereby the programme team will liaise with the practice assessor to discuss and provide feedback on student progress towards achieving the competencies within the RPS (2016) competency framework for all prescribers.

UoS have an established patient, carer and public involvement programme. The service users in attendance at the approval visit spoke of their involvement in the development of this programme through a stakeholder event and their ongoing contribution to the Faculty of Health Sciences and Wellbeing. The service users also told us they have been involved in the development of the patient and service user feedback tool within the learning in practice portfolio for students undertaking the prescribing programme.

The previous prescribing students in attendance at the approval visit spoke





positively of their experience of the school and the effectiveness of the support provided to them from UoS. The students report the programme was intense but enjoyable and the quality of the teaching resources was good. They have had the opportunity to feed into the development of this new programme and report the school provides opportunities for them to feedback informally and through formal mechanisms. Any feedback students have provided previously has been responded to and actions taken as appropriate. The students told us how UoS work with PLPs to ensure that students are supported to achieve their competencies in practice. The students report that they have no experience of service users being involved in the delivery of any face to face sessions within their cohort, but they were aware that this is a planned development for the new programme. Service users have contributed to their learning in practice.

There's staff guidance for patient, carer and public involvement. The service users in attendance at the approval visit report in their involvement within the UoS which reflected what is in this guidance. Their involvement included participation at a stakeholder event to develop this new programme. The service users report how they were involved in the development of assessments, particularly in the objective structured clinical examination in practice (OSCE) and reviewing the practice assessment document. The service users told us about their future involvement within the classroom where they will share their experiences related to medicines.

Documentary evidence demonstrates a partnership to the selection of students onto the programme with PLPs and the programme team. No selection interviews are carried out as the students are sponsored onto the programme by employers. The application form is explicit in the admission criteria and that NMC requirements are met.

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

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





If not met, state reason	
Post Event Review	
Identify how the condition is met:	
Date condition(s) met:	
N/A	
Revised outcome after condition(s) met:	

Student journey through the programme

Standard 1 Selection, admission and progression

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

- R1.1 ensure that the applicant is a registered nurse (level 1), a registered midwife or a SCPHN before being considered as eligible to apply for entry onto an NMC approved prescribing programme
- R1.2 provide opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non- NHS employed registrants) to apply for entry onto an NMC approved prescribing programme
- R1.3 confirm that the necessary governance structures are in place (including clinical support, access to protected learning time and employer support where appropriate) to enable students to undertake, and be adequately supported throughout, the programme
- R1.4 consider recognition of prior learning that is capable of being mapped to the





RPS Competency Framework for all Prescribers

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

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

- R1.6.1 Clinical/health assessment
- R1.6.2 Diagnostics/care management
- R1.6.3 Planning and evaluation of care

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

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

Evidence provides assurance that the following QA approval criteria are met

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

Yes

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





Yes

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

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

Met

R1.3 is met. The application form demonstrates governance is considered as part of the admission process. Disclosure and barring service (DBS) checks are in place within the application process which students and PLPs confirm. Applicants are invited to undertake a numeracy entrance exam which they are required to pass at 80 percent before commencing the programme. The PLPs support this entrance exam as it allows them to put in additional support for any individuals who are challenged in numeracy skills. Line managers confirm applicants meet all NMC requirements and applicants are capable of safe and effective practice at a level appropriate to the applicant's area of future prescribing practice.

Self-employed and candidates working in private practice are identified in the application form and must meet the same criteria. On the application form there are additional measures for self-employed candidates to ensure governance is in place. This includes the applicant providing two clinical references, and evidence of business and personal indemnity insurance, evidence of training, workplace policies related to medicines and prescribing management, satisfactory systems regulator reports. The programme team would undertake the educational audit for the self-employed applicants.

The faculty has adopted the regional approach to undertaking educational audits in the north east of England. Educational audits are already in place with associated PLPs and address pre-registration nursing and prescribing programmes. This audit process involves a collaborative approach with UoS and PLPs.

Processes for managing causes for concern are in place for all students. Assurance is given that all governance is in place.

PLPs confirm they'll fully support programme requirements including learning in practice and ensure students are provided with protected learning time. Students confirm they're well supported by their employers and are released by their employers to attend the taught elements of the programme and are provided with protected learning time. PLPs will support identifying practice supervisors and practice assessors to support students within the admission process. PLPs will





determine and allocate practice supervisors and a practice assessor for each student. The application process identifies who the practice supervisors and the practice assessor will be to UoS. Professional registration of all practice assessors is checked at the admission stage by the programme team.

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

Yes

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

Yes

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

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

Yes

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

Yes

Proposed transfer of current students to the programme under review

From your documentary analysis and your meeting with students, provide an evaluative summary to confirm how the Standards for prescribing programmes and Standards of proficiency for nurse and midwife prescriber





(adoption of the RPS Competency Framework for all Prescribers) will be met through the transfer of existing students onto the proposed programme

Current students will remain on the previously approved programme and no students will be transferred onto this programme.		
Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to selection, admission and progression are met		
Yes		
Outcome		
Is the standard met?		
Met		
Date: 17 December 2019		
Post Event Review		
Identify how the condition is met:		
Date condition(s) met:		
N/A		
Revised outcome after condition(s) met:		
N/A		

Standard 2 Curriculum

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

R2.1 ensure programmes comply with the NMC Standards framework for nursing





and midwifery education

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

Evidence provides assurance that the following QA approval criteria are met

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

Yes

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

Yes

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that





the QA approval criteria below is met or not met

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

Met

R2.3 is met. Programme documentation details the structure of the V300 programme. The V300 programme will be delivered at academic level six and seven within a 40-credit module over a period of approximately four months with 26 days attendance at the university. There will be a week block of learning at the beginning, followed by a day a week for 16 weeks followed by a final week block. The V300 learning in practice under supervision of the practice supervisor and practice assessor will be 78 hours. The students and PLPs in attendance supported the decision to state the required hours of learning in practice.

The V300 programme is currently open to nurses with an intention to open it up to allied health professions following approval by Health Professional and Care Council in spring 2020. This will provide an opportunity for inter-professional learning within the programme.

A variety of teaching and learning approaches will be used to meet the needs of all students. Learning and teaching strategies includes interactive lecturers, seminars, problem-based learning, case-based discussions, tutor directed learning and self-directed learning. Service users will be used within the classroom in sessions to share their experiences with a particular focus on medicine errors and polypharmacy.

The programme team expect all students to attend taught sessions but recognise on occasions this isn't possible and then directed study will be expected in preparation for future programmed sessions. Students are positive about their learning experience in the programme. Students confirm they have good support from the programme team and are always provided with timely feedback. Students will mainly be taught together on the programme with differing academic levels supported by additional tutorials.

The programme team report the selected learning and teaching strategies will be used to support achievement of the RPS competency framework for all prescribers. Module specifications are explicit and use the RPS competency framework for all prescribers. The RPS competencies are mapped and assessed in all the practice assessment documentation.

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





-stating the general and professional content necessary to meet the programme outcomes

-stating the prescribing specific content necessary to meet the programme outcomes

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

Yes

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

Yes

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

N/A

This programme is delivered to students in England.

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

Yes

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

Yes

Outcome





Is the standard met?
Met
Date: 17 December 2019
Post Event Review
Identify how the condition is met:
Date condition(s) met:
N/A
Revised outcome after condition(s) met:
N/A

Standard 3 Practice learning

Approved education institutions must:

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

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

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

Evidence provides assurance that the following QA approval criteria are met





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

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

Met

R3.1 is met. Documentary evidence and discussions at the approval visit confirm suitable and effective arrangements and governance for practice learning are in place for all applicants. This is assured by effective partnership working between the teaching team and PLPs.

Prescribing leads and PLP managers report how they will be involved in the selection process for applicants from their organisation. Practice supervisors and practice assessors are identified at the application stage in the application form and are prepared by UoS for their role. Self-employed applicants are responsible for nominating an appropriate practice supervisor and practice assessor. There's a statement for both individuals to sign regarding impartiality within the application form. The programme leader will visit non-NHS, private and independent practice learning environments prior to an applicant being accepted onto the programme to undertake an educational audit and ensure all governance is in place. The programme leader reports that roles and responsibilities will be reiterated at this point.

All practice supervisors and practice assessors are offered to attend a briefing session and are provided with a handbook which outline the programme and clarify their roles. Practice assessors are encouraged to contact the programme leader with any queries or concerns and a practice visit can be arranged if necessary. The programme team report they will provide any additional support by telephone or a visit to practice if required. PLPs report there are sufficient appropriately experienced and qualified prescribers to be practice supervisors and practice assessors. The students report that they are well supported and provided with protected time for their learning in practice. The student records their time in practice within their practice assessment document and this is countersigned by their practice supervisor or practice assessor. If there are any concerns in practice identified a member of the programme team will undertake a tripartite visit to ensure all governance is in place.

Practice learning governance arrangements are in place in practice learning environments for all students.

There is evidence that the programme complies with the NMC Standards for





student supervision and assessment (R3.2)

Yes

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

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

Met

R3.3 is met. Programme documentation and findings at the approval visit confirm a range of simulation-based and technology enhanced strategies are used appropriately to support learning and assessment and these are integrated throughout the programme. The virtual learning environment (Canvas) is used to engage with students throughout the programme. Strategies include online numeracy resources and access to anatomy suite (anatomage) and an online clinical skills package. Students are also directed to e-learning for health where they can complete online modules to supplement their learning. The students have access to simulation facilities at UoS to further develop clinical examination skills if required and service users are available for this purpose. However, as students are required to have this skill on admission the programme team report that it's optional for students to access this resource. V300 students are encouraged to use simulated activities as part of their learning in practice to prepare for their objective structured clinical examination. The programme use case studies within the learning materials. Current students speak positively about resources available on the virtual learning environment and say they're easily accessible.

Processes are in place to ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC Standards for student supervision and assessment. (R3.4)

Yes

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

Yes

Assurance is provided that Gateway 2: Standards for student supervision





and assessment relevant to practice learning are met
Yes
Outcome
Is the standard met?
Met
Date: 17 December 2019
Post Event Review
Identify how the condition is met:
Date condition(s) met:
N/A
Revised outcome after condition(s) met:
N/A

Standard 4 Supervision and assessment

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

R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC 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%).

Evidence provides assurance that the following QA approval criteria are met

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

Met





R4.1 is met. Mapping documentation demonstrates how the programme complies with the SFNME and the SSSA

. At the approval visit the programme team and the PLPs report how they have engaged collaboratively to apply the new standards to the programme and confirm support for practice supervisors and practice assessors. The practice documentation clearly outlines the role of the practice supervisor, practice assessor and academic assessor. The practice supervisor takes responsibility for the day to day supervision. The practice assessor takes overall responsibility for the initial meeting, mid-point and the final declaration of competence at the end of the programme and will liaise with the academic assessor. The practice assessors will also be required to provide the academic assessor with a scenario pertinent to the student's area of practice. This scenario will then be used for the student's OSCE within the university setting.

The documentation is explicit that learning in practice requires a partnership approach with managers, practice supervisors, practice assessors, the programme team and the student. Processes are in place to manage concerns about a student's progress or conduct which are detailed in the student handbook and practice assessment document. The first point of contact should be the academic assessor who will undertake a tripartite meeting to discuss any issues. Any concerns arising in practice learning environments will be managed in partnership with the PLPs taking the lead as the students are in employment. PLPs and the programme team confirmed support for students raising any concerns. Students and PLPs report that they are aware of who to contact for any concerns.

The programme team have appropriate qualifications and experience to support the programme.

There are clear processes for evaluating practice learning.

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

Not Met

R4.2 is not met. The programme team complete educational audits or access audits undertaken by other AEIs to ensure effective systems and processes are in place in practice learning environments to support student's learning. For non-NHS providers, the admission process ensures that the relevant public liability insurance, employer liability insurance and professional indemnity insurance is in place.

Practice supervisors and practice assessors are identified in the admission process. Academic assessors are identified by the programme leader at the





commencement of the programme. However, none of the documents indicated how much prescribing experience was required to undertake the roles of practice supervisors and practice assessors. (Condition one) (SSSA R6.6; SPP R4.2, R4.5)

It's explicit in programme documentation that the practice supervisor and practice assessor should be different people and can only be the same person in exceptional circumstances. If this occurs, it must be made clear at the application stage and will be subject to scrutiny by the academic assessor and the reason for the exceptional circumstances clearly documented.

Practice supervisors and practice assessors are prepared for their role by attending a pre-programme workshop. Attendance at this workshop is compulsory for individuals undertaking either of the roles the first time. A handbook is available to support the practice supervisor and practice assessor and outline their roles and responsibilities. The PLPs also report that there are regional workshops in practice to prepare all healthcare practitioners for the role of practice supervisor and practice assessor. The UoS is delivering workshops to prepare academic assessors.

All PLPs and students at the approval visit demonstrated an understanding of the SSSA requirements and an understanding of the relevant roles which involved a tripartite approach.

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

Yes

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

Yes

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

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

Not Met





R4.5 is not met. Practice supervisors and practice assessors are identified in the admission process. However, none of the documents indicate how much prescribing experience is required to undertake the roles of practice supervisor and practice assessor. While one PLP has identified three levels of prescriber, with the third level being able to undertake the role of practice assessor the remaining PLPs report that they would like some guidance on the experience required of practice supervisors and practice assessors. (Condition one) (SSSA R6.6; SPP R4.2, R4.5)

Processes are in place to ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking (R4.6)

Yes

Processes are in place to provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes (R4.7)

Yes

Processes are in place to assess the student's suitability for award based on the successful completion of a period of practice based learning relevant to their field of prescribing practice (R4.8)

Yes

Processes are in place to ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies (R4.9). This includes:

- successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and
- successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100%)

Yes

Assurance is provided that Gateway 1: Standards framework for nursing and





midwifery education relevant to supervision and assessment are met Please provide narrative for any exceptions

Yes

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

No

The level of prescribing experience required of the practice supervisor and practice assessor to support students undertaking prescribing programmes learning in practice is not detailed in any of the documents. This doesn't meet SSSA R6.6. (Condition one) (SSSA R6.6; SPP R4.2, R4.5)

Outcome

Is the standard met?

Not Met

SPP R4.2 and R4.5 are not met. The experience required of the practice supervisor and practice assessor to support prescribing students learning in practice is not detailed in any of the documents.

Condition one:

The programme team to add to the application proforma a requirement to provide details of practise supervisor and assessor experience relevant to the role. (SSSA R6.6; SPP R4.2, R4.5)

Date: 17 December 2019

Post Event Review

Identify how the condition is met:

The application form has been amended to include the required prescribing experience of the practice supervisor and practice assessor. The practice assessor is normally expected to have a minimum of two years prescribing experience and the prescribing supervisor is normally be expected to have a minimum one year's experience as a prescriber.





Condition one is now met.

Evidence:

Revised application form, December 2019

Date condition(s) met: 24 January 2020

Revised outcome after condition(s) met:

Met

Condition one is now met.

Assurance is provided that SSSA R6.6, SPP R4.2 and R4.5 are now met.

Standard 5 Qualification to be awarded

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

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





Evidence provides assurance that the following QA approval criteria are met

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

- a community practitioner nurse (or midwife) prescriber (V100/V150), or
- a nurse or midwife independent/supplementary prescriber (V300) (R5.1)

Yes

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

Yes

Processes 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

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

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

Yes

Outcome





Is the standard met?
Met
Date: 17 December 2019
Post Event Review
Identify how the condition is met:
Date condition(s) met:
N/A
Revised outcome after condition(s) met:
N/A





Source of evidence

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

Key documentation	Yes/No
Programme document, including proposal, rationale and	Yes
consultation	
Programme specification(s)	Yes
Module descriptors	Yes
Student facing documentation including: programme handbook	Yes
Student university handbook	Yes
Practice assessment documentation	Yes
Practice placement handbook	Yes
PAD linked to competence outcomes, and mapped against RPS	Yes
A Competency Framework for all Prescribers	
Mapping document providing evidence of how the education	Yes
institution has met the Standards framework for nursing and	
midwifery education (NMC, 2018)	
Mapping document providing evidence of how the programme	Yes
meets the Standards for prescribing programmes and RPS	
Standards of proficiency for prescribers (NMC, 2018)	
Mapping document providing evidence of how the Standards for	Yes
student supervision and assessment (NMC, 2018) apply to the	
programme(s)	
Curricula vitae for relevant staff	Yes
Registered healthcare professionals, experienced prescribers	Yes
with suitable equivalent qualifications for the programme -	
registration checked on relevant regulators website	
Written confirmation by the education institution and associated	Yes
practice learning partners to support the programme intentions	
List additional documentation:	
Post approval visit	
Revised application form, December 2019	
If you stated no above, please provide the reason and mitigation	
Additional comments:	

During the visit the visitor(s) met the following groups	Yes/No
Senior managers of the AEI/education institution with	Yes
responsibility for resources for the programme	
Senior managers from associated practice learning partners	Yes
with responsibility for resources for the programme	





	MACDONALD
Programme team/academic assessors	Yes
Practice leads/practice supervisors/ practice assessors	Yes
Students	Yes
If yes, please identify cohort year/programme of study:	
One current student and one completed student	
Service users and carers	Yes
If you stated no above, please provide the reason and mitigation	
Additional comments:	

The visitor(s) viewed the following areas/facilities during	Yes/No
the visit:	
Specialist teaching accommodation (e.g. clinical skills/simulation	No
suites)	
Library facilities	No
Technology enhanced learning / virtual learning environment	No
Educational audit tools/documentation	No
Practice learning environments	No
If ves. state where visited/findings:	

If you stated no above, please provide the reason and mitigation There was no requirement to undertake a visit of facilities for this programme approval. This is an established AEI.

Additional comments:

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Issue record			
Final Report			
Author	Heather Bain	Date	23 December 2019
Checked by	Bernadette Wallis	Date	19 February 2020
Submitted by	Lucy Percival	Date	26 February 2020
Approved by	Leeann Greer	Date	27 February 2020