



Programme approval visit report

Section one

| Programme provider name: | University of West of Scotland | |
|--|---|--|
| In partnership with: (Associated practice learning partners involved in the delivery of the programme) | NHS Sector Greater Glasgow and Clyde NHS Sector Lanarkshire NHS Sector Highland (Argyll and Bute) NHS Sector Ayrshire and Arran NHS Sector Dumfries and Galloway Private, voluntary and independent health care providers | |

Programme(s) reviewed:

Programme: Independent and Supplementary Nurse Prescribing Title of programme: Independent and supplementary prescribing (L9 V300)/Independent and supplementary prescribing (L11 V300)

Programme start date: 7 September 2020

Academic level(s):

SCQF: Level 9 Level 11

Programme: Community practitioner nurse prescribing V150 Title of programme: V150 Community nurse prescribing

Programme start date: 7 September 2020

Academic level(s):

SCQF: Level 9

| Date of approval | 13 May 2020 | |
|------------------|----------------------------------|--|
| QA visitor(s): | Registrant Visitor: Heather Bain | |





Summary of review and findings

The University of West of Scotland (UWS) is an established approved education institution (AEI) of pre-registration, post registration and prescribing programmes. The school of health and life sciences (the school) present the independent and supplementary nurse prescribing preparation programme (V300), and community practitioner prescribing (V150) for NMC approval against the NMC Standards for prescribing programmes (SPP) (NMC, 2018) and the adoption of the Royal Pharmaceutical Society (RPS) competency framework for all prescribers.

The programmes are mapped against the SPP with adoption of the RPS competency framework for all prescribers. The V300 programme will be offered at academic level nine and 11 and delivered part time over 24 weeks. The V150 will be offered at level nine and delivered over 12 weeks. Students can undertake the V150 and V300 programme within the Bachelor of Science (BSc) professional health studies as an option. The V300 is core in the Masters of Science (MSc) advanced clinical practitioner as core and postgraduate diploma specialist practitioner district nursing.

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

The SPP and the RPS competency framework for all prescribers are detailed within the documentation and mapped to the programme.

Arrangements at programme level do not meet the Standards framework for nursing and midwifery education (SFNME) and SPP. Arrangements at programme level meet the Standards for student supervision and assessment (SSSA).

The visit is undertaken remotely during the Covid-19 pandemic.

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

Updated 19 June 2020:

Evidence is provided of changes required to meet the NMC condition and two university conditions. The conditions are met. The programme is recommended to the NMC for approval.





| Recommended outcome of the approval panel | | |
|---|--|--|
| Recommended outcome to the NMC: | Programme is recommended for approval subject to specific conditions being met | |
| | Effective partnership working: collaboration, culture, communication and resources: | |
| Conditions: Please identify the standard and requirement the condition | Condition one: Develop an implementation plan to explicitly ensure the programme is designed, developed, delivered, evaluated and co-produced with SUCs and involved in selection and admission. (SFNME R1.12, R2.7, R3.3, R5.14; SPP R2.1) | |
| relates to under the relevant key risk theme. | Selection, admission and progression: | |
| Please state if the condition is AEI/education institution in | None identified | |
| nature or specific to NMC standards. | Practice learning: | |
| standards. | None identified | |
| | Assessment, fitness for practice and award: | |
| | None identified | |
| | Education governance: management and quality assurance: | |
| | Condition two: The team is required to revisit the learning outcomes for both level nine and level 11 module descriptors for the V300 to ensure distinctiveness and alignment to Scottish credit and qualifications frameworks. (University condition) | |
| | Condition three: Module descriptors should be updated to ensure accuracy with current European credit transfer scheme (ECTS) framework. (University condition) | |
| Date condition(s) to be met: | 19 June 2020 | |
| Recommendations to enhance the programme delivery: | Recommendation one: The panel invite the team to reflect on current module titles as the wording 'non-medical' is rather dated and there may be scope to refresh this with a more current and engaging title. (University recommendation) | |





| Council | MACDONALD |
|--------------------------------------|--|
| | Recommendation two: The programme team are advised to continue developing the curriculum to expand online presence for academic taught elements of the programmes. (University recommendation) |
| | Recommendation three: It is recommended to continue the good practice of involving students in future curriculum development and review activities. (University recommendation) |
| Focused areas for future monitoring: | The use of SUCs in the development, delivery and evaluation of the programme. |





Programme is recommended for approval subject to specific conditions being met

Commentary post review of evidence against conditions:

UWS has provided a SUC implementation plan which ensures sustainable SUC involvement in the delivery of the V300 prescribing programme. There's confirmation the university conditions are met. The programme is recommended for approval.

| 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: | 19 June 2020 |

Section three

NMC Programme standards

Please refer to NMC standards reference points

Standards for prescribing programmes (NMC, 2018)

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

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

Standards for student supervision and assessment (NMC, 2018)

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

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

Documentary evidence and the approval process confirm there's effective partnership working between UWS and key stakeholders. Policies and processes are in place to support a partnership approach to the development and delivery of the programme. There are specific prescribing networks at strategic and operational level. PLPs tell us the programme teams meet with board prescribing leads and confirm there's effective working across all programmes. The programme leader engages with the Scottish prescribing network of programme leaders to ensure consistency across Scotland within prescribing programmes.

Two students from the September 2019 V300 cohort speak positively of their experience to date and the support provided by UWS. Students are positive about their learning and teaching experience and commend the resources available on their virtual learning environment. Students understand changes in supervision of practice. They say how they've had opportunity to evaluate the programme and the programme team act on their feedback. Students are members of the curriculum development group. They cannot recall any service users being involved in the delivery of their prescribing programme. (Condition one)

Interprofessional learning is integrated throughout all prescribing programmes, with students having shared learning on taught days. Allied health professionals undertake the V300 programme. In practice, students are encouraged to experience prescribing practice with a range of health practitioners. Students say there's a range of students from different backgrounds in their cohort and this helps their learning.

The school has evidence of engaging SUCs across all programmes and service users are involved in curriculum development meetings for this programme. There's some documentary evidence of active SUC engagement with students including SUC feedback within their practice assessment document. The programme team say all prescribing programmes have one teaching day set aside for SUC involvement. SUCs are not involved in the admission process. One service user in attendance has no involvement in the programme apart from being asked to attend the approval visit. This service user made suggestions for future involvement of service users in prescribing programmes. This must be addressed.





(Condition one)

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

Documentary evidence demonstrates a commitment to an inclusive approach to the selection of students and programme delivery. PLPs are involved in selection of students onto programmes. No interviews are carried out as students are selected onto the programme by employers. The programme team review all application forms and confirm all entry criteria is met. There is a separate admission form for self-employed applicants which includes additional criteria including an academic reference and evidence of independent clinic regulation by Health Improvement Scotland (HIS).

Students are actively encouraged to engage in their learning by the programme team. Students on all prescribing programmes have a practice assessment document that identifies the key individuals involved in their learning including practice assessors, practice supervisors and academic assessors, who are all prepared by the school for their role.

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 1: Standards framework for nursing and midwifery education

Not Met

There is little evidence of how SUCs are involved in the co-production of this programme and how they will continue to be involved in its delivery. (Condition 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 2: Standards for student supervision and assessment

Met





If not met, state reason

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

Condition one: Develop an implementation plan to explicitly ensure the programme is designed, developed, delivered, evaluated and co-produced with SUCs and involved in selection and admission. (SFNME R1.12, R2.7, R3.3, R5.14; SPP R2.1)

Post Event Review

Identify how the condition is met:

Condition one: UWS has provided a SUC implementation plan which ensures sustainable SUC involvement in the delivery of the V300 prescribing programme.

Evidence:

Implementation plan to address role of service users in the ongoing development, delivery, evaluation and coproduction of the prescribing programmes at UWS, June 2020

Condition one is met.

Date condition(s) met: 19 June 2020

Revised outcome after condition(s) met:

Met

Condition one is met.

Student journey through the programme

Standard 1 Selection, admission and progression

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

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





approved prescribing programme

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

Note: Education institutions and their practice learning partners may propose to transfer current students onto the new programme to meet the Standards for prescribing 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 programme team, PLPs and students report on the process for the selection of students onto the programmes. The admissions process adopts a national standard which is agreed in partnership between AEI leads and NHS stakeholders in Scotland over a two-year consultation period. The entry process for UWS is in two phases; applicants are screened for suitability in the first phase by their health board/private employer and provisionally allocated one of a set number of health board/private places. In the second phase, they are screened by the AEI programme team to ensure all entry criteria are met. The application form identifies the practice supervisor and practice assessor and confirms governance is in place. An additional independent admission criteria form is incorporated in the admission process. Self-employed applicants must self-declare they have the appropriate indemnity and governance processes in place and their organisation must be HIS regulated. A member of the programme team will undertake a clinical audit of all applicants outwith their PLPs. The protection of vulnerable groups scheme (PVG) is in place and PLPs and students confirm this is part of the admission process. The prescribing lead and line manager, within the admission form, confirm that support and governance is in place which includes ensuring there are suitable practice supervisors and practice assessors to support learning in practice and that protected time will be provided.

UWS, as part of a Scottish approach has a process in place for all NHS partners in relation to all the educational audits within the region. The educational audit ensures each practice learning environment supports learning and there's access





to practice supervisors and practice assessors. Any placements not in this circuit will be audited by the school. The application form identifies the practice supervisor and practice assessor and ensures they are suitably qualified to support student learning from the formulary they will prescribe from. A student's intention to prescribe on completion of the programmes is confirmed in the application form.

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





No students will be transferred onto the new programme. Any student who defers will continue on the current programme which is underpinned by the RPS competency framework. The SSSA will be adopted.

| midwifery education relevant to selection, admission and progression are met |
|--|
| Yes |
| Outcome |
| Is the standard met? |
| Met |
| Date: 13 May 2020 |
| 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)

No

R2.1 is not met. There is little evidence of how SUCs are involved in the coproduction of this programme and how they will continue to be involved in its delivery. (Condition one)

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 programmes. V300 programme runs over 24 weeks with 10 face-to-face days at the university with further online learning. Students complete 90 hours practice learning. The V150 programme runs over 12 weeks with six face-to-face days at the university with further online learning and 65 hours practice learning. PLPs confirm they support the delivery methods, including the attendance at the university, and the hours allocated to practice learning. The V150 students share face-to-face days with the V300 students.

A variety of teaching and learning approaches are used to meet the learning needs of students. The face-to-face days include generic lecture content that is contextualised into the student's area of practice through inter-active activities, case studies and group work. Learning and teaching strategies include web-based materials delivered on the university e-learning platform. Online learning includes online peer reviewed discussion forums, quizzes, past exam work and workbooks. The programme team tell us they plan to develop using service users in the programme and they will be involved in sharing their experiences and for developing consultation skills. Students tell us their learning experiences are positive and the programmes prepare them for prescribing practice. Students on each programme are taught together; academic differentiation is supported by additional specific tutorials.

Programme documentation and the approval visit confirms learning and teaching across all programmes is mapped to the RPS competencies. Practice learning and progression towards achievement of RPS competencies is recorded and confirmed in the practice portfolio by practice assessors and academic assessors.

The programme teams tell us they expect all students to attend all taught sessions. If there's issues with attendance, directed study is available online and this is monitored and reported to PLPs.

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

- -stating the general and professional content necessary to meet the programme outcomes
- -stating the prescribing specific content necessary to meet the programme outcomes
- -confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist





community public health nursing

Yes

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

Yes

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

N/A

The programmes are delivered in Scotland only.

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

No

There is little evidence of how SUCs are involved in the co-production of this programme and how they will continue to be involved in its delivery. (Condition one)

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?

Not Met

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

Condition one: Develop an implementation plan to explicitly ensure the programme





is designed, developed, delivered, evaluated and co-produced with SUCs and involved in selection and admission. (SFNME R1.12, R2.7, R3.3, R5.14; SPP R2.1)

Date: 13 May 2020

Post Event Review

Identify how the condition is met:

Condition one: UWS has provided a SUC implementation plan which ensures sustainable SUC involvement in the delivery of the V300 prescribing programme.

Evidence:

Implementation plan to address role of service users in the ongoing development, delivery, evaluation and coproduction of the prescribing programmes at UWS, June 2020

Condition one is met.

Date condition(s) met: 19 June 2020

Revised outcome after condition(s) met:

Met

Condition one is met.

Standard 3 Practice learning

Approved education institutions must:

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

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

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

Evidence provides assurance that the following QA approval criteria are met

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

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

Met

R3.1 is met. Documentary evidence and discussions at the approval visit confirm suitable and effective governance arrangements are in place for practice learning for all applicants. This is assured by effective partnership working between the programme team and the PLPs. Practice supervisor and practice assessor experience is checked by the programme team. PLPs report how they are involved in the selection process for applicants from their organisation. Prescribing leads and line managers are involved in the selection process and sign off the admission form. Candidates employed in the private sector must meet additional criteria prior to entry onto the programme. These include providing a satisfactory academic reference and a satisfactory professional reference, evidence of independent clinic regulation by HIS and completion of a satisfactory educational audit. Practice supervisors and practice assessors are identified within the application process and are prepared by UWS for their role. PLPs report there are sufficient prescribers to be practice supervisors and practice assessors and they'll be developing registered nurses and midwives staff who are prescribers to undertake the role of practice assessors.

There's a separate handbook for practice supervisors and practice assessors for both V150 and V300. An induction pack based on national guidance is provided to all practice supervisors and practice assessors This induction pack outlines their role, provides an overview of prescribing programmes, contains useful resources and identifies key contacts from the programme team. Optional induction sessions are provided. A member of the programme team will be the student's academic assessor and they will contact practice supervisors and the practice assessor by email or telephone while the student is on the programme, and confirm that all assessments are met at the end of the programme. A visit to practice will be made if there are any concerns. Programme handbooks outline the process for students





to raise concerns and the first point of contact is the academic assessor. The tripartite relationship of the three roles is explained in the programme handbooks and handbooks for practice supervisors and practice assessors. UWS prepares staff for their role as academic assessors. The lead midwife for education within the school will be involved in supporting any midwife who accesses the programme. Students tell us practice learning is supported and protected.

The application form and the admission process ensures governance is in place in practice learning environments for all applicants.

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. Student learning is supported by technology enhanced and simulated learning. Face-to-face delivery is supported by the virtual learning environment where core reading and virtual activities are included to support achieving RPS competencies. Students are signposted to relevant online links and additional online activities such as quizzes. Students are encouraged to use mobile phone applications such as the British national formulary in their learning. Simulation-based learning currently focuses on consultation and will be developed going forward with the inclusion of SUCs. Students speak positively about resources available on the virtual learning environment and confirm they are easily accessible and useful to support their learning.

The practice assessment documents of the V150 and V300 are paper based but can be completed electronically if the student prefers. In the absence of an electronic signature an email from a letter headed email account is required to be submitted from the practice assessor to the academic assessor to ensure authenticity. The practice assessment documents are structured to support the student's learning and assessment and are signed off by the practice assessors and the academic assessors on successful completion. The RPS competency framework, templates for action plans, case-based discussions, drug profile templates, service user testimonies and a learning log are all included within them. The V300 practice assessment document includes a systematic and detailed examination in practice. Mapping documentation and the curriculum guidance





document demonstrates that technology enhanced and simulation-based learning are used effectively and proportionately.

| education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC Standards for student supervision and assessment. (R3.4) |
|---|
| Yes |
| Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to practice learning are met |
| Yes |
| Assurance is provided that Gateway 2: <u>Standards for student supervision</u> and assessment relevant to practice learning are met |
| Yes |
| Outcome |
| Is the standard met? |
| Met Date: 13 May 2020 |
| 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. The programme teams are suitably qualified to deliver the programmes as identified in their curriculum vitae. They are registered with the NMC with V100 and V300 prescribing qualifications. Senior staff in the university and PLPs confirm their commitment to ensuring adequate resources are in place to deliver the programmes.

Mapping documentation demonstrates how the programme complies with the Standards framework for nursing and midwifery education. At the approval visit, PLPs and the programme team tell us how a national approach is being taken to apply the new standards to the programme. Handbooks outline the roles of practice supervisor, practice assessor and academic assessor. The practice supervisor takes responsibility of daily supervision and the practice assessor takes responsibility for the overall assessment and final declaration of competence at the end of the programme and will liaise with the academic assessor. The practice assessor will establish and maintain effective communication and collaboration with the nominated practice supervisor, additional practice supervisors and the nominated academic assessor as identified in the induction pack for practice assessors and practice supervisors. The practice assessment document records student progress.

The induction pack for practice supervisors and practice assessors, programme handbooks and practice assessment documents are explicit that learning in practice requires a partnership approach with the student, practice supervisors, practice assessor and academic assessor. Any breakdown in placements will be managed in partnership with the PLPs taking the lead as students are in employment. The academic assessor will manage any concerns for self-employed students.

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





Met

R4.2 is met. Practice assessor and practice supervisor handbooks outline their roles. Practice supervisors are responsible for ensuring students receive practice learning supervision. Practice assessors ensure assessment of practice and student achievement of RPS competencies is recorded and confirmed in partnership with the academic assessor in the practice portfolio. The practice portfolio requires all students to develop a learning contract in agreement with their practice assessor to support achieving RPS competencies. Practice assessors sign a form verifying practice attendance. Student facing documentation details the role and responsibilities of practice assessors, practice supervisors and academic assessors.

Documentary evidence and the approval process confirms practice assessors and practice supervisors are prepared as agreed nationally. UWS provides them with a handbook, induction pack and opportunity to attend an induction session prior to each cohort commencing the programme. Academic assessors are prepared as national guidance requires and undergo regular appraisal in line with UWS quality processes.

PLPs demonstrate sound understanding of the SSSA and SPP. They confirm there's sufficient practice assessors and practice supervisors to support the V300 and V150 programmes. Students tell us they understand the requirements of the SSSA and the implications of the NMC requirements of the programmes.

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)

Met





R4.5 is met. The practice assessor is identified in the admission process and processes are in place for the programme team to verify their experience and qualifications. The programme team are continuing to use medical practitioners for this role within the V300 programme currently but will be working towards nurses who have the V300 qualification being prepared in the future for this role. Within the V150 programme the practice assessor is usually a registered nurse with the V100, V150 or V300 qualification but occasionally a medical practitioner may undertake the role. The programme team report that in only exceptional circumstances would the practice supervisor and practice assessor be the same person. Evidence would be required to justify the reasoning for this in the admission process and the academic assessor would monitor the rationale and provide additional support as required.

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

Yes

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

Yes

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

Yes

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

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

Yes

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





provide narrative for any exceptions

| Yes |
|--|
| Assurance is provided that Gateway 2: <u>Standards for student supervision</u> and assessment relevant to supervision and assessment are met Please provide narrative for any exceptions |
| Yes |
| Outcome |
| Is the standard met? |
| Met Date: 13 May 2020 |
| Post Event Review |
| Identify how the condition is met: |
| Date condition(s) met: |
| N/A |
| Revised outcome after condition(s) 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

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)





Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met Yes

Outcome

Is the standard met?

Met Date: 13 May 2020

Post Event Review

Identify how the condition is met:

Date condition(s) met:

N/A

Revised outcome after condition(s) met:





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) | No |
| 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:

NMC annual self-assessment report, 10 January 2020

HIS report Royal Hospital for Sick Children and department of clinical neuroscience, Western General Hospital, October 2019

HIS report Queen Elizabeth Hospital, January 2019

Post visit evidence:

Implementation plan to address role of service users in the ongoing development, delivery, evaluation and coproduction of the prescribing programmes at UWS, June 2020

UWS situation, background, assessment, recommendations paper for SUC plus appendices, January 2020

V300 module handbook, September 2020

V150 module handbook, September 2020

V150 clinical portfolio, undated





V300 clinical portfolio, level nine and level 11, undated

V150 revised module descriptor, session 2020/2021

V300 revised module descriptor level 11, session 2020/2021

V300 revised module descriptor level nine, session 2020/2021

Paper three breakdown of teaching hours, undated

If you stated no above, please provide the reason and mitigation These are stand-alone modules and there is no associated programme specification. The module descriptors provide the required details along with the admission forms, admission checklists, induction packs and programme handbooks and guidelines.

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 | |
| Programme team/academic assessors | Yes |
| Practice leads/practice supervisors/ practice assessors | Yes |
| Students | Yes |
| If yes, please identify cohort year/programme of study: | |
| Two from September 2019 undertaking the V300. | |
| 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 yes, state where visited/findings: | |
| | |
| If you stated no above, please provide the reason and mitigation | |
| Not required for this visit. | |
| Additional comments: | |
| | |





Mott MacDonald Group Disclaimer

This document is issued for the party which commissioned it and for specific purposes connected with the captioned project only. It should not be relied upon by any other party or used for any other purpose.

We accept no responsibility for the consequences of this document being relied upon by any other party, or being used for any other purpose, or containing any error or omission which is due to an error or omission in data supplied to us by other parties.

| Issue record | | | |
|--------------|-------------------|------|--------------|
| Final Report | | | |
| Author | Heather Bain | Date | 22 May 2020 |
| Checked by | Bernadette Wallis | Date | 24 June 2020 |
| Submitted by | Amy Young | Date | 1 July 2020 |
| Approved by | Leeann Greer | Date | 6 July 2020 |