

### Programme approval visit report

#### Section one

<b>Programme provider name:</b>	Brunel University London
<b>In partnership with:</b> <i>(Associated practice learning partners involved in the delivery of the programme)</i>	Central and North West London NHS Foundation Trust Central London Community Healthcare NHS Trust Hounslow and Richmond Community Healthcare NHS Trust Private, voluntary and independent health care providers Education and social care providers
<b>Programmes reviewed:</b>	Independent and supplementary nurse prescribing V300 <input type="checkbox"/> Community practitioner nurse prescribing V150 <input type="checkbox"/> Community practitioner nurse prescribing V100 <input checked="" type="checkbox"/>
<b>Title of programme(s):</b>	Community Practitioner Nurse Prescribing V100
<b>Academic level:</b>	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Community practitioner nurse prescribing V150	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Community practitioner nurse prescribing V100	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7

	<p>SCQF  <input type="checkbox"/> Level 8    <input type="checkbox"/> Level 9    <input type="checkbox"/> Level 10  <input type="checkbox"/> Level 11</p>
<p><b>Date of approval visit:</b></p>	<p>17 May 2021</p>
<p><b>Programme start date:</b></p> <p>Independent and supplementary nurse prescribing V300</p> <p>Community practitioner nurse prescribing V150</p> <p>Community practitioner nurse prescribing V100</p>	<p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text" value="13 September 2021"/></p>
<p><b>QA visitor:</b></p>	<p>Registrant Visitor: Mike Kitching</p>

**Section two**

**Summary of review and findings**

Brunel university London (BUL) is a Nursing and Midwifery Council (NMC) approved education institution (AEI).

The division of nursing (the division) present the community practitioner nurse prescribing (V100) programme for approval. The programme is designed to meet the Standards for prescribing programmes (SPP) (NMC, 2018) and is mapped to the Standards of proficiency for nurse prescriber (adoption of the Royal Pharmaceutical Society (RPS, 2016) competency framework for all prescribers) (NMC, 2018).

The programme is an optional non-credit academic level six award in the Bachelor of Science with honours, the postgraduate diploma and the Master of science specialist community public health nursing (SCPHN) programme. Practice learning partners (PLPs) and the programme team assess the suitability of health visiting and school nursing applicants to undertake the V100 prescribing award as an integrated part of the SCPHN programme.

There's evidence of effective partnership working with PLPs at both operational and strategic levels. Senior PLPs confirm their support for the programme and have informed its development. There are processes in place to support prescribing governance in practice learning environments and to ensure governance arrangements are applied to the application process. BUL work in partnership with PLPs to ensure that if there are any risks to practice learning these are addressed and appropriately actioned.

There's evidence of effective communication and preparation processes in place between BUL, the programme team and PLPs to ensure that there are sufficient and suitably prepared practice assessors, practice supervisors and academic assessors to support students.

The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) and the Standards for student supervision and assessment (SSSA) (NMC, 2018) aren't met at programme level.

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

The programme is recommended to the NMC for approval subject to two NMC conditions. One university recommendation is made.

Updated 18 June 2021:

BUL has provided additional documentation to meet the two NMC conditions.

The conditions are met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
<b>Recommended outcome to the NMC:</b>	<p>Programme is recommended to the NMC for approval <input type="checkbox"/></p> <p>Programme is recommended for approval subject to specific conditions being met <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
<b>Conditions:</b>	<p><b>Effective partnership working: collaboration, culture, communication and resources:</b> Condition one: Provide an implementation plan that ensures key stakeholders are involved in ongoing programme design, co-production, delivery and evaluation. (SFNME R1.12, R4.9)</p> <p><b>Selection, admission and progression:</b> None identified.</p> <p><b>Practice learning:</b> Condition two: Provide practice assessment documentation that makes clear the roles of practice assessors, practice supervisors and academic assessors. (SSSA R3.1, R7.1, R9.1; SPP R4.2)</p> <p><b>Assessment, fitness for practice and award:</b> None identified.</p> <p><b>Education governance: management and quality assurance:</b> None identified.</p>
<b>Date condition(s) to be met:</b>	18 June 2021
<b>Recommendations to enhance the programme delivery:</b>	Recommendation one: Programme team to work with trusts to consider other avenues to facilitate opportunities for nurse prescribing learning in practice for all students. (University recommendation)

<b>Focused areas for future monitoring:</b>	None identified.
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<b>Programme is recommended for approval subject to specific conditions being met</b>	
<p><b>Commentary post review of evidence against conditions:</b> Additional and revised copies of the programme documentation provide evidence the conditions are met.</p> <p>An implementation plan details how stakeholder feedback informs ongoing and future developments in the V100 and V300 programmes. Condition one is met.</p> <p>A revised programme handbook and prescribing portfolio details the roles and responsibilities of the practice assessors, practice supervisors and academic assessors. Condition two is met.</p>	
<b>AEI Observations</b>	<b>Observations have been made by the education institution</b> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<b>Summary of observations made, if applicable</b>	
<b>Final recommendation made to NMC:</b>	Programme is recommended to the NMC for approval <input checked="" type="checkbox"/> Recommended to refuse approval of the programme <input type="checkbox"/>
<b>Date condition(s) met:</b>	18 June 2021

### Section three

<b>NMC Programme standards</b>
Please refer to NMC standards reference points <a href="#">Standards for prescribing programmes</a> (NMC, 2018) <a href="#">Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers)</a> (NMC, 2018) <a href="#">Standards framework for nursing and midwifery education</a> (NMC, 2018) <a href="#">Standards for student supervision and assessment</a> (NMC, 2018) <a href="#">The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates</a> (NMC, 2015 updated 2018)

### NMC Programme standards

[Quality assurance framework for nursing, midwifery and nursing associate education](#) (NMC, 2020)  
[QA Handbook](#) (NMC, 2020)

### 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 co-produced 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.**

Programme documentation and the approval process confirm there's evidence of effective partnership working between BUL, the division and PLPs. The division and PLPs are part of regular strategic non-medical prescribing (NMP) forum meetings. PLPs tell us about the positive opportunities this provides to raise and discuss programme and prescribing related issues. PLPs tell us that they continue to support the development of the V100 programme at BUL, identifying that this enhances the achievement of local workforce plans.

There's evidence of PLP, service user and carer (SUC) and student attendance at an initial V100 programme development event. Students and SUCs couldn't confirm that they'd been involved in the development of the V100 programme and couldn't tell us how they've informed any decision making about its development. There's no further evidence of how key stakeholders have contributed to and informed the development of the V100 programme. The division has a clear SUC strategy; however there's limited evidence of how SUCs engage with the programme. The programme team tell us that they're implementing a process to involve all stakeholders in the ongoing development and delivery of the programme. There's no evidence of this process or a plan for how stakeholders will inform the ongoing design, co-production, delivery and evaluation of the programme. (Condition one)

There's evidence of partnership working between the programme team and PLPs to support the delivery of the programme. They work together to undertake and manage educational audits to ensure students learn in safe practice learning environments. Educational audit provides assurance that practice learning environments must meet the requirements of the SSSA and the governance arrangements associated with prescribing. Care Quality Commission regulatory reports are checked as part of the educational audit process; if there are any actions required these are monitored by BUL and PLPs. Documentary evidence confirms that quality assurance processes within the division are in place and communication between the division and PLPs is effective. Senior divisional staff and the programme team confirm the process for quality reporting and monitoring practice learning. There's clear evidence of a partnership approach to the management and monitoring of prescribing practice learning.

The BUL raising concerns policy is clearly detailed in student, practice assessor and practice supervisor facing programme documentation. Students, practice



assessors and practice supervisors tell us that they understand how to raise any concerns.

Documentary evidence and the approval process confirm there's a clear approach to the selection and preparation of practice assessors and practice supervisors. The programme team and practice assessors and practice supervisors confirm that prescribing specific supervision and assessment induction training is provided. There's a partnership approach to the support for practice assessors and practice supervisors and practice learning environments. Practice assessors liaise with academic assessors to discuss student progress and provide feedback on the achievement of the RPS competencies. The prescribing portfolio identifies specific points within the programme for practice assessors and practice supervisors to document student progression.

Students are positive about their learning experiences and the support provided by BUL. They tell us that they feel well supported with their studies by the programme team and the BUL student support services and processes. Students report that they feel valued and that BUL provides opportunities for them to feedback informally and through formal mechanisms. They tell us that the programme team respond to feedback and where appropriate, actions are taken. Support processes and services are detailed in student facing documentation. These include academic support and referral to occupational health or welfare services. The programme team and students confirm that if additional support needs are identified at the start or during the programme support is provided.

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

**MET**  **NOT MET**

There's no evidence of how key stakeholders including PLPs, SUCs and students will inform the ongoing design, co-production, delivery and evaluation of the programme. (Condition one)

Condition one: Provide an implementation plan that ensures key stakeholders are involved in ongoing programme design, co-production, delivery and evaluation. (SFNME R1.12, R4.9)

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 2: [Standards for student supervision and assessment](#)

**MET**  **NOT MET**

**Post event review**

**Identify how the condition(s) is met**

Condition one: An implementation plan details how stakeholders will be involved in the ongoing design, delivery and evaluation of the programme. A response to conditions document further details how BUL intend to further develop SUC involvement in the programme.

Condition one is met.

Evidence:

Stakeholder involvement, implementation plan, undated  
Response to conditions document, 18 June 2021

**Date condition(s) met:** 18 June 2021

**Revised outcome after condition(s) met**

**MET**

**NOT 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 programmes](#) and [Standards of proficiency for nurse and midwife prescriber \(adoption of the RPS Competency Framework for all Prescribers\)](#). If so, evidence must be provided to support this proposed transfer as part of the education institution’s mapping process at Gateway 3.

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

**Proposed transfer of current students to the [Standards for student supervision and assessment](#)** (NMC, 2018).  
Demonstrate a robust process to transfer current students onto the [Standards for student supervision and assessment](#) (NMC, 2018).

**Findings against the standard and requirements**

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

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

YES  NO

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

YES  NO

**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**  **NOT MET**

R1.3 is met. The documented application process demonstrates a requirement that evidence of governance structures must be in place in practice learning environments. There's a requirement to ensure students have access to protected learning time and clinical support. Applicants to the SCPHN programme are interviewed by PLP managers and the SCPHN programme team. The programme team tell us applicants participate in group and individual interviews. As part of the process an applicant's suitability for the V100 nurse prescribing programme is considered on an individual basis. Selection to undertake the V100 programme includes confirming clinical competence and an NMC registration check. The SCPHN programme entry requirement ensures that a disclosure and barring service check, references and occupational health assessments are undertaken.

Programme documentation, the programme team and PLPs confirm that there's a process to ensure that practice assessors and practice supervisors are identified to support learning in practice. Practice assessors and practice supervisors are required to confirm that they meet the requirements for the role. The programme leader checks the NMC registration status of practice assessors and practice supervisors. Practice assessors who support students undertaking the V100 programme must be a nurse prescriber who can provide appropriate prescribing learning opportunities. SCPHN students undertaking the V100 programme are supported by NHS PLPs; self-employed or non-NHS employed students don't access the V100 programme.

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

- 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**  **NO**

- 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**  **NO**

- 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 <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<ul style="list-style-type: none"> <li>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)</li> </ul>		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
BUL don't deliver a V300 programme.			
<b>Proposed transfer of current students to the programme under review</b>			
<p><i>From your documentary analysis and your meeting with students, provide an <b>evaluative summary</b> to confirm how the <a href="#">Standards for prescribing programmes</a> and <a href="#">Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers)</a> will be met through the transfer of existing students onto the proposed programme.</i></p> <p>There are no students transferring to the proposed V100 programme. All students have completed the current programme.</p>			
<b>Proposed transfer of current students to the <a href="#">Standards for student supervision and assessment (SSSA)</a> (NMC, 2018).</b>			
<p><b>From your documentary analysis and your meetings at the approval visit confirm if students will be transferring to the SSSA, and if so that they have informed choice and are fully prepared for supervision and assessment.</b></p> <p>Students have transferred to the SSSA.</p>			
Assurance is provided that Gateway 1: <a href="#">Standards framework for nursing and midwifery education</a> relevant to selection, admission and progression are met		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Outcome</b>			
Is the standard met?		MET <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>
Date: 17 May 2021			
<b>Post event review</b>			
Identify how the condition(s) is met:		N/A	
Date condition(s) met:		N/A	
Revised outcome after condition(s) met:		MET <input type="checkbox"/>	NOT MET <input type="checkbox"/>
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

**Findings against the standard and requirements**

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

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

**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  NOT MET

R2.3 is met. Programme documentation details the structure of the programme. The teaching, learning and assessment strategy is detailed in the V100 module descriptor and the programme handbook. Students describe a positive experience of the learning and teaching strategies including the use of case studies, they tell us that the programme is well taught.

The programme team tell us that learning is designed using the BUL curriculum model that includes a variety of strategies; interactive lecture activities, problem focused learning, peer-to-peer learning, tutor-led sessions, group work and workshops that address the needs of students. Online learning and materials are delivered in the virtual learning environment (VLE) using a variety of digital learning tools to enhance learning and interactivity. Students develop prescribing case studies; they use the British national formulary (BNF) online to support simulation prescription writing skills. Assessments are mapped to the programme learning outcomes and the RPS, monitoring of student progression is recorded in the prescribing portfolio.

The prescribing portfolio provides a structure to support learning in practice and documents the development and achievement of the RPS competencies. Students are required to develop a prescribing case study that's mapped to the RPS. Practice assessors record progression towards achievement of the RPS competencies and academic assessors record confirmation of achievement.

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

- Evidence of programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice (R2.4):
  - stating the general and professional content necessary to meet the programme outcomes
  - stating the prescribing specific content necessary to meet the programme outcomes
  - confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing

YES  NO

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

YES  NO

**If relevant to the review**

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

YES  NO  N/A

The programme isn't delivered in Wales.

Assurance is provided that Gateway 1: [Standards framework for nursing and midwifery education](#) relevant to curricula and assessment are met

YES  NO

Assurance is provided that Gateway 2: [Standards for student supervision and assessment](#) relevant to curricula are met

YES  NO

**Outcome**

**Is the standard met?**

MET  NOT MET

Date: 17 May 2021

**Post event review**

**Identify how the condition(s) is met:**

N/A

**Date condition(s) met:**

N/A

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

MET  NOT MET

N/A

**Standard 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 [Standards for student supervision and assessment](#)

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

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



**Findings against the standard and requirements**

**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**  **NOT MET**

R3.1 is met. Documentary evidence confirms that governance structures are in place to enable students to undertake and be adequately supported throughout the practice learning experience. The application process confirms that there's assurance that practice learning is undertaken within a defined clinical governance framework. At application, protected learning time and supernumerary status must be agreed.

BUL, in partnership with PLPs, educationally audit practice learning environments and monitor the quality of practice learning. Audit processes provide evidence of safe practice placement environments which meet NMC standards. There's a process to withdraw practice learning environments, implement action plans and reinstate practice learning environments where student learning is at risk. Documentary evidence confirms that there are policies in place that demonstrate a commitment to public protection through the management and escalation of concerns in academic and practice settings. PLPs and practice assessors confirm that there's an audit process and that they know how to raise concerns. Students tell us about the positivity and support they receive from the programme team and confirm they know how to raise concerns.

Suitable practice assessors and practice supervisors are identified as part of the application process and are prepared for their roles by the programme team and PLPs. An induction day is held as part of this preparation and the roles and expectations of supervision and assessment are clearly identified during this preparation. Academic assessors are identified to oversee progression and achievement decisions.

Students, practice assessors and practice supervisors maintain a record of supervised practice in the prescribing portfolio that demonstrates progression towards achievement of the RPS competencies. SCPHN students undertaking the V100 programme are supported by NHS PLPs; self-employed or non-NHS employed students don't access the SCPHN or V100 programmes.

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

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

YES  NO

**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  NOT MET

R3.3 is met. Documentary evidence confirms that the programme uses a range of technology to support learning and assessment; these are effective and proportionate. The programme team tell us about the strategies used to support e-learning; they tell us that academic staff are supported by BUL to develop digital learning approaches.

The programme team tell us that they use technology enhanced activities and resources, including a drug calculation game and a drug calculation mobile phone application to support numeracy skills development. Simulation-based learning includes case study scenarios that require students to practice writing prescriptions. Students use the BNF online to support prescribing decision-making. A blended learning approach to teaching and learning is supported using the VLE. Students tell us that the learning and teaching strategies prepare them for prescribing. There's evidence that the programme supports the application of theory to practice. Students tell us about their positive experiences of using the VLE and the simulation activities.

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

- 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  NO

Assurance is provided that Gateway 1: [Standards framework for nursing and midwifery education](#) relevant to practice learning are met

YES  NO

Assurance is provided that Gateway 2: <a href="#">Standards for student supervision and assessment</a> relevant to practice learning are met		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Outcome</b>			
Is the standard met?		MET <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>
Date: 17 May 2021			
<b>Post event review</b>			
Identify how the condition(s) is met: N/A			
Date condition(s) met: N/A			
Revised outcome after condition(s) met:		MET <input type="checkbox"/>	NOT MET <input type="checkbox"/>
N/A			

<b>Standard 4: Supervision and assessment</b>
<p><b>Approved education institutions, together with practice learning partners, must:</b></p> <p>R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC <a href="#">Standards framework for nursing and midwifery education</a></p> <p>R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC <a href="#">Standards for student supervision and assessment</a></p> <p>R4.3 appoint a programme leader in accordance with the requirements of the NMC <a href="#">Standards framework for nursing and midwifery education</a>. The programme leader of a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience</p> <p>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</p> <p>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</p> <p>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</p> <p>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</p> <p>R4.7 provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes</p>

R4.8 assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice  
 R4.9 ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies. This includes all students:  
 R4.9.1 successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80 percent), and  
 R4.9.2 successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100 percent)

### Findings against the standards and requirements

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

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

**MET**  **NOT MET**

R4.1 is met. The programme handbook, prescribing portfolio and discussion with the programme team, students, practice assessors and practice supervisors confirm that students receive information about how they're supported, supervised and assessed in practice. There's written guidance for students, practice assessors and practice supervisors about gaining SUC consent, promoting public safety and raising and escalating concerns. Students tell us that they're advised about and have access to the procedure for raising a concern in the practice and university learning environments.

Assessments are designed to support students to demonstrate the programme proficiencies, competence and confidence to prescribe. The prescribing portfolio requires students to be assessed by practice assessors through a range of methods, including observation, practice-based assessment and professional discussions. Assessments are mapped to the programme learning outcomes and the RPS and there's specified points for monitoring progression. Programme documentation details a planned approach to support practice learning. Academic assessors meet with practice assessors to discuss and provide feedback on student progress towards achievement of the RPS competencies. PLPs, practice assessors and practice supervisors confirm that they understand the practice assessment process.

- 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  NOT MET

R4.2 is not met. There's documentary evidence that confirms students are assessed by practice assessors and supervised by practice supervisors in the practice learning environment. Evidence of successful completion of practice learning is focused on progression towards achievement of the RPS competencies recorded and confirmed in the prescribing portfolio.

The programme team and PLPs confirm that there's a partnership approach to the preparation of practice assessors and practice supervisors. There's information detailing how practice assessors and practice supervisors are prepared and supported to supervise and assess students. Academic assessors must hold a relevant prescribing qualification and they're prepared for their role by BUL. Academic assessor roles are factored into the staff workload and are monitored through the BUL workload model and appraisal processes.

Programme documentation and the approval process confirm that there's evidence of processes in place to identify, prepare and support practice assessors, practice supervisors and academic assessors. The programme documentation doesn't, however, consistently detail and accurately define the roles and responsibilities of practice assessors, practice supervisors and academic assessors. (Condition two)

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

- Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience (R4.3)  
YES  NO
- Evidence of the programme leader working in conjunction with the LME and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes (R4.4)  
YES  NO  N/A

There's no LME in place, BUL don't deliver a midwifery programme, midwives won't access the programme.

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

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

**MET**

**NOT MET**

R4.5 is met. Appropriate practice assessors are identified at application by PLPs; line managers are required to sign application documentation to confirm their suitability to support students. They're registered healthcare professionals and experienced prescribers with suitable equivalent qualifications to support the development of V100 prescribing. Practice assessors are required to confirm that they meet the requirements to undertake the role as part of the application process. The programme leader undertakes an NMC registration check and confirms that practice assessors are suitably qualified to undertake the role. Programme documentation confirms that normally the practice assessor and the practice supervisor won't be the same person. The programme team and PLPs tell us that if practice assessors and practice supervisors are the same person, they'll individually assess what measures need to be put in place to ensure objectivity and to mitigate risk.

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

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

**YES**       **NO**
- Processes are in place to provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes (R4.7)

**YES**       **NO**
- Processes are in place to assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice (R4.8)

**YES**       **NO**
- Processes are in place to ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies (R4.9). This includes:

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

**YES**       **NO**

Assurance is provided that Gateway 1: [Standards framework for nursing and midwifery education](#) relevant to supervision and assessment are met

YES  NO

Assurance is provided that Gateway 2: [Standards for student supervision and assessment](#) relevant to supervision and assessment are met

YES  NO

The programme documentation doesn't consistently detail and accurately define the roles and responsibilities of practice assessors, practice supervisors and academic assessors. (Condition two)

**Outcome**

**Is the standard met?**

MET  NOT MET

The programme documentation doesn't consistently detail and accurately define the roles and responsibilities of practice assessors, practice supervisors and academic assessors.

Condition two: Provide practice assessment documentation that makes clear the roles of practice assessors, practice supervisors and academic assessors. (SSSA R3.1, R7.1, R9.1; SPP R4.2)

**Date:** 17 May 2021

**Post event review**

**Identify how the condition(s) is met:**

Condition two: The revised programme handbook and prescribing portfolio identify the roles and responsibilities of practice assessors, practice supervisors and academic assessors. A screenshot of an example of the roles in providing student feedback in the prescribing portfolio demonstrates how practice assessors, practice supervisors and academic assessors provide student feedback on practice learning.

Condition two is met.

Evidence:

Revised programme handbook, undated

Screenshot, feedback example, undated

Revised, prescribing portfolio, undated

**Date condition(s) met:** 18 June 2021

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

MET  NOT 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

**Findings against the standards and requirements**

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

- Processes are in place to ensure following successful completion of an NMC approved programme of preparation, confirm that the registered nurse (level 1), midwife or SCPHN is eligible to be recorded as a prescriber, in either or both categories of:
  - a community practitioner nurse (or midwife) prescriber (V100/V150), or
  - a nurse or midwife independent/supplementary prescriber (V300) (R5.1)

YES  NO
  
- Evidence to ensure that successful participation in and completion of an NMC approved prescribing programme leads to accreditation at a level equivalent to a bachelor's degree as a minimum award (R5.2)
 

YES  NO
  
- Processes are in place to inform the student that the award must be registered with the NMC within five years of successfully completing the programme and if they fail to do so they will have to retake and successfully complete the programme in order to qualify and register their award as a prescriber (R5.3)



		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<ul style="list-style-type: none"> <li>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)</li> </ul>		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Assurance is provided that the <a href="#">Standards framework for nursing and midwifery education</a> relevant to the qualification to be awarded are met		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Outcome</b>			
Is the standard met?		MET <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>
Date: 17 May 2021			
<b>Post event review</b>			
Identify how the condition(s) is met:		N/A	
Date condition(s) met:		N/A	
Revised outcome after condition(s) met:		MET <input type="checkbox"/>	NOT MET <input type="checkbox"/>
N/A			

**Section four**

**Sources of evidence**

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

<b>Key documentation</b>	<b>YES</b>	<b>NO</b>
Programme document, including proposal, rationale and consultation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme specification(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Module descriptors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student facing documentation including: programme handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student university handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice assessment documentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice placement handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PAD linked to competence outcomes, and mapped against RPS <i>A Competency Framework for all Prescribers</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC, 2018) (Gateway 1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the <i>Standards for student supervision and assessment</i> (NMC, 2018) apply to the programme(s) (Gateway 2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the programme meets the <i>Standards for prescribing programmes</i> and RPS <i>Standards of proficiency for prescribers</i> (NMC, 2018) (Gateway 3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Curricula vitae for relevant staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Written placement agreements between the education institution and associated practice learning partners to support the programme intentions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation:		
List additional documentation: Post visit documentation: Response to conditions document, 18 June 2021 Stakeholder involvement, implementation plan, undated Revised programme handbook, undated		

Screenshot, feedback example, undated  
Revised, prescribing portfolio, undated  
Additional comments:  
None identified.

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

	YES	NO
Senior managers of the AEI/education institution with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated practice learning partners with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme team/academic assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice leads/practice supervisors/ practice assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, please identify cohort year/programme of study: V100, 2020-2021 x seven V100, 2019-2020 x five		
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation:		
Additional comments: None identified.		

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

	YES	NO
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Library facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Technology enhanced learning Virtual learning environment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Educational audit tools/documentation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Practice learning environments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, state where visited/findings:		
If you stated no above, please provide the reason and mitigation: BUL is an established AEI, visits to facilities weren't needed.		
Additional comments: None identified.		

**Mott MacDonald Group Disclaimer**

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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(s):	Mike Kitching	Date:	21 May 2021
Checked by:	Bernadette Martin	Date:	1 June 2021
Submitted by:	Lucy Percival	Date:	1 July 2021
Approved by:	Emiko Hughes	Date:	6 July 2021