

Programme approval visit report

Section one

Programme provider name:	Cardiff University
In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i>	Aneurin Bevan University Health Board Cardiff and Vale University Health Board Cwm Taf University Health Board Hywel Dda Health Board
Programmes reviewed:	Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V150 <input type="checkbox"/> Community practitioner nurse prescribing V100 <input checked="" type="checkbox"/>
Title of programme(s):	PG Cert Independent/Supplementary Prescribing for Nurses, Midwives and Allied Health professionals. Post Graduate Diploma Community Health Studies SPQ Post Graduate Diploma (PG Dip) Specialist Community Public Health Nursing
Academic level:	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input checked="" 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

<p>Community practitioner nurse prescribing V100</p>	<p>England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input checked="" type="checkbox"/> Level 7</p> <p>SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11</p>
<p>Date of approval visit:</p>	<p>5 May 2021</p>
<p>Programme start date: Independent and supplementary nurse prescribing V300 Community practitioner nurse prescribing V150 Community practitioner nurse prescribing V100</p>	<p><input type="text" value="27 September 2021"/></p> <p><input type="text" value="NA"/></p> <p><input type="text" value="27 September 2021"/></p>
<p>QA visitor:</p>	<p>Registrant Visitor: Rose Havelock</p>

Section two

Summary of review and findings

Cardiff University (the university) is an approved education institution (AEI) and is an established provider of non-medical prescribing education. The school of healthcare science manages the delivery of the proposed programme.

The university presents two routes for approval within a non-medical prescribing programme. The community practitioner nurse prescribing V100 programme is delivered as part of a fully integrated module in both the specialist community public health nursing (SCPHN) programme and the community health studies specialist practitioner qualification (district nursing (DN)) (SPQ) programme. The V300 route is delivered in partnership with the school of pharmacy.

The proposed programme is mapped to the Standards of proficiency for nurse and midwife prescribers (adoption of the Royal Pharmaceutical Society's (RPS) competency framework for all prescribers (RPS, 2016)) and the Standards for prescribing programmes (SPP) (NMC, 2018).

It's proposed that the programme starts on 27 September 2021. The community nurse prescribing (V100) route is delivered part and full-time at level seven. The independent and supplementary prescribing for nurses (V300) is a 60-credit programme comprising two 30 credit modules, delivered part-time at level seven.

The school of healthcare works in partnership with practice learning partners (PLPs), service users (SU) and students. Documentary analysis and discussion at the approval visit doesn't provide assurance that co-production with SU is fully embedded consistently within each route.

Strategic and operational structures ensure that there's co-production with PLPs and clear processes to ensure effective programme governance.

A strong feature of the V300 programme are the inter-professional education (IPE) study days which students tell us enhance their experience.

Midwifery prescribing students are supported by a lead midwife for education, (LME). Appropriate arrangements are in place for Welsh speakers and some members of staff are fluent Welsh speakers. Lectures are delivered in English, but students may submit written work in Welsh.

The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) isn't met at programme level as condition one applies.

The Standards for student supervision and assessment (SSSA) (NMC, 2018) are met at programme level.

The programme is recommended for approval subject to two NMC conditions and three recommendations.

The approval visit is undertaken remotely due to the COVID-19 pandemic.

Updated 5 June 2021:

Evidence is provided that the changes required to meet the two NMC conditions are made.

The programme is recommended for approval.

Recommended outcome of the approval panel

Recommended outcome to the NMC:

Programme is recommended to the NMC for approval

Programme is recommended for approval subject to specific conditions being met

Recommended to refuse approval of the programme

Conditions:

Effective partnership working: collaboration, culture, communication and resources:

Condition one: Provide an implementation plan that ensures that SUs are involved in the recruitment design, delivery and evaluation of the V300 and V100 prescribing programmes. (SFNME R1.12, R2.7)

Selection, admission and progression:

Condition two: To provide application documentation that evidences the process to confirm that applicants to the V100 programme meet the requirement to be proficient in clinical/health assessment, diagnostics/care management, and the planning and evaluation of care. (SPP R1.6)

Practice learning: none

None identified.

Assessment, fitness for practice and award:

None identified.

Education governance: management and quality assurance:

None identified.

Date condition(s) to be met:	2 June 2021
Recommendations to enhance the programme delivery:	<p>Recommendation one: Consider a review of the V300 and V100 practice assessment documentation (PAD) to provide an opportunity for the practice assessor to document failure to progress. (SPP R4.8)</p> <p>Recommendation two: Consider a review to provide more detailed prescribing-related content for the V100 programme. (SPP R2.2, R2.3)</p> <p>Recommendation three: Consider a plan to further enhance the ongoing support for V300 and V100 practice supervisors and practice assessors. (SSSA R5.1, R8.2; SPP R4.2)</p>
Focused areas for future monitoring:	None identified.

Programme is recommended for approval subject to specific conditions being met	
<p>Commentary post review of evidence against conditions:</p> <p>The programme team has provided evidence of a strategic and school level implementation plan that ensures that SU are involved in the recruitment design, delivery, and evaluation of the V300 and V100 prescribing programmes. Condition one is met.</p> <p>The programme team has provided evidence that evidences the process to confirm that applicants to the V100 programme meet the requirement to be proficient in clinical/health assessment, diagnostics/care management, and the planning and evaluation of care. Condition two is met.</p> <p>The SFNME is now met. The SPP are now met.</p>	
AEI Observations	Observations have been made by the education institution YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Summary of observations made, if applicable	
Final recommendation made to NMC:	Programme is recommended to the NMC for approval <input checked="" type="checkbox"/>

	Recommended to refuse approval of the programme <input type="checkbox"/>
Date condition(s) met:	5 June 2021

Section three

NMC Programme standards
<p>Please refer to NMC standards reference points</p> <p>Standards for prescribing programmes (NMC, 2018)</p> <p>Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers) (NMC, 2018)</p> <p>Standards framework for nursing and midwifery education (NMC, 2018)</p> <p>Standards for student supervision and assessment (NMC, 2018)</p> <p>The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates (NMC, 2015 updated 2018)</p> <p>Quality assurance framework for nursing, midwifery and nursing associate education (NMC, 2020)</p> <p>QA Handbook (NMC, 2020)</p>

Partnerships
<p>The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.</p>
<p>Please refer to the following NMC standards reference points for this section:</p> <p>Standards framework for nursing and midwifery education (NMC, 2018)</p> <p>Standard 1: The learning culture:</p> <p>R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders</p> <p>R1.13 work with service providers to demonstrate and promote inter-professional learning and working</p> <p>Standard 2: Educational governance and quality:</p> <p>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</p> <p>R2.4 comply with NMC Standards for student supervision and assessment</p> <p>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</p>

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.

Discussion at the approval visit and documentary analysis provides assurance that there's effective strategic relationships at a school level, which support partnerships with PLPs, SU and students. Documentary analysis indicates that there's appropriate processes in place to safeguard governance and quality of practice learning through strategic partnership meeting and audit. Governance and quality are safeguarded as the programme team work within university processes and an external examiner reviews programme content and moderates assessment processes. Programme development meetings are chaired by the deputy head of school who reports to the school partnership board and the nursing and midwifery executive within the local health boards.

Documentary analysis and discussion at the visit confirms that the programme teamwork alongside PLPs to implement the SSSA, using an All Wales approach which informs the preparation of practice-based staff for these roles. Support and oversight of practice assessment and supervision is provided through strategic partnership meetings with the health boards, educational audit and communications between the programme team and PLPs. PLPs tell us that programme teams are responsive and that there's opportunity to contribute to discussions regarding student proficiency and progression. The frequency of

ongoing planned support varies across prescribing routes. A 12-week review process is in place in the V100 route to facilitate ongoing discussions, while the V300 route offers three meetings over the duration of the programme to enable discussions between PLPs and academic assessors.

Documentary analysis and discussion at the approval visit indicates that at a school level, SU are involved and attend school meetings which review all programmes. The school recognises that further work to enhance patient and public involvement in the prescribing programme is necessary. The school has recently appointed a patient and public involvement lead and there's a clear commitment to develop SU involvement further. We find that at programme level SU involvement varies between the routes.

Documentary analysis and discussion at the approval visit confirms that the V300 programme team holds regular collaborative strategic meetings with PLPs to develop and review programme content and to discuss prescribing related practice. PLPs tell us that the programme team is responsive to feedback and values their contribution. A strong feature of partnership is the contribution that expert clinical staff make to teaching delivery, providing master classes in palliative care, pain management and mental health on the programme.

Applicants to the V300 route are proposed by health boards and the programme manager reviews the application and discusses with the prescribing lead at the relevant health board. V300 applicants are not interviewed. The application form details the identified practice assessor and practice supervisor and the health board support for the applicant to undertake the programme. In addition, the application form requires confirmation that the applicant has the appropriate clinical skills for safe and effective prescribing.

The programme documentation reflects the SSSA. Practice related handbooks provide information outlining the role of practice assessor, practice supervisor and academic assessor and PLPs demonstrated a clear understanding of the process in our discussion with them. A collaborative approach to monitoring the implementation of the SSSA takes place using educational audit, meetings with PLPs and discussions at the programme development group.

PLPs and students tell us that assessment and supervision is effective, supportive, reflects their learning needs and prepares students for prescribing practice. We find that the programme team may wish to review the PAD to provide an opportunity for clearer documentation of a student's failure to progress.
(Recommendation one)

Documentary analysis and discussion at the approval visit confirms that an All Wales approach is taken to the preparation of practice assessors and practice supervisors. PLPs tell us that existing networks to support practice assessors and

practice supervisors are under strain and we make a recommendation to enhance support. (Recommendation three)

Documentary analysis and discussion at the visit indicates that the university and PLPs work in partnership in relation to the development and delivery of the SPP (NMC, 2018).

In relation to the V300 programme a SU is involved in the non-medical prescribing programme development group and reviews documentation. In relation to recruitment and selection, applicants are nominated by the health board for a place on the V300 route. Documentary analysis and discussion at the visit indicated that SU aren't involved in the recruitment and selection of V300 students. Written narrative provided by the programme team states that SU have commented on the questions on the application form, however the SU met at the visit couldn't confirm this.

The V300 programme team noted that SU review of application forms isn't appropriate. SU are unable to confirm the programme team's assertion that a review of the questions on the V300 application form was undertaken. The school has recently appointment a lead to further develop SU involvement in programme provision. SU welcome the development of the patient and public involvement group and wish to move the agenda forward in developing stronger SU involvement as equals with academic staff across all elements of programme provision. We find that SU could be more effectively involved in recruitment and selection processes particularly for the V300 route.

SU contribute with presentations and case studies to non-medical prescribing students and they're invited to feedback after the structured clinical assessment which is part of the assessment strategy for the V300 programme. In relation to prescribing content there's varying levels of engagement with SU in the V100 and V300 routes. SU involvement is not a predominant feature of the recruitment of students nor the design, delivery and evaluation of the prescribing content of V100 route, although it is a feature of the wider programme (SPQ and SCPHN) in which the V100 content sits. SU contribute to the recruitment and selection process of the V100 (SCPHN) applicants, however this is oriented towards how the SU might feel about having the applicant visit them as a health visitor rather than focussing on prescribing practice. SU are invited to provide feedback to students in practice.

We find that SU involvement is not embedded consistently across all routes in relation to recruitment and selection design delivery and evaluation and condition one applies.

Documentary analysis indicates that there's appropriate structures in place to support student feedback to the programme teams. Student representatives attend monthly staff student panels and the board of studies. At programme level informal and formal opportunities exist for students to provide feedback, in lectures and

seminars and in module evaluations. Students tell us that their feedback is sought and responded to and tell us that the programme team, across all routes, are very supportive.

Students are drawn from a range of disciplinary backgrounds and contexts and taught together on the V100 programme. The school provides opportunities for interdisciplinary study with IPE days including pharmacy, social work and nursing on the V300 programme. Students receive feedback from their personal tutor, practice assessor and practice supervisor and from SU, which is evidenced in the PAD.

V300 students tell us that they've opportunity to provide feedback on the development of the new prescribing programme and students welcome the integration of the RPS competency for all prescribers framework into practice documentation.

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**

SU who have experience of prescribing issues aren't engaged in effective partnerships in all of the programme routes or the various aspects of programme delivery.

Condition one: Provide an implementation plan that ensures that SU are involved in the recruitment, design, delivery, and evaluation of the V300 and V100 prescribing programmes. (SFNME R1.12, R2.7)

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:

The programme team has provided evidence of a strategic and programme level implementation plan that ensures that SU are involved in the recruitment design, delivery, and evaluation of the V300 and V100 prescribing programmes.

The implementation plan clearly articulates the actions at both strategic and programme level to be taken, who is responsible and timeframes.

Condition one is now met.

Evidence: G04.05.21 Implementation plan for patient and public involvement (PPI).docx, undated		
Date condition(s) met: 5 June 2021		
Revised outcome after condition(s) met	MET <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>

Student journey through the programme
Standard 1: Selection, admission and progression
<p>Approved education institutions, together with practice learning partners, must:</p> <p>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</p> <p>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</p> <p>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</p> <p>R1.4 consider recognition of prior learning that is capable of being mapped to the RPS Competency Framework for all Prescribers</p> <p>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</p> <p>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:</p> <p>R1.6.1 Clinical/health assessment</p> <p>R1.6.2 Diagnostics/care management</p> <p>R1.6.3 Planning and evaluation of care</p> <p>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</p> <p>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,</p>

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. Documentary analysis and discussion at the approval visit provides assurance that the governance structures in place provided the appropriate level

of support to students to undertake the programme. PLPs tell us that applicants are nominated as a result of a training need identified through annual personal development reviews and service need. Places are commissioned and filled as a consequence of this process. Students identify their practice assessor and practice supervisor and gain their agreement prior to application. Processes are in place to scrutinise applications from self-employed applicants to ensure that arrangements are suitable.

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 NO

R1.6 is not met. Documentary analysis and discussion at the approval visit in relation to recruitment and selection of V100 applicants indicates that the process is orientated to meet SPQ and SCPHN programme requirements. PLPs are involved in interviewing V100 (SPQ route) applicants. The V100 programme team tell us that the requirement to ensure that the applicant be proficient in clinical/health assessment, diagnostics/care management, and the planning and evaluation of care (in relation to prescribing) is met through the nomination process at the health board. PLPs describe a process of selection but no evidence is presented that this includes consideration of the said requirement. Discussion at the approval visit indicates that the programme team rely on the nomination process at health board level to ensure that applicants meet this criterion. PLPs describe a robust nomination process but the application form and interview doesn't specifically address this requirement. Condition two.

This requirement is met for the V300 route.

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

YES NO

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.

For the V100 (SPQ DN only) route: The part-time programme will span into the 2021/22 academic year. The prescribing content will be undertaken in academic year 2021/22. Students will therefore migrate to the revised PAD which includes adoption of the RPS competency framework for all prescribers.

Students and practice staff demonstrate understanding of the SPP and RPS competencies and welcome the introduction of the RPS competencies in the PAD.

Proposed transfer of current students to the Standards for student supervision and assessment (SSSA) (NMC, 2018).

From your documentary analysis and your meetings at the approval visit confirm if students will be transferring to the SSSA, and if so that they have informed choice and are fully prepared for supervision and assessment.

Documentary analysis and discussion at the visit confirms that the SSSA is already implemented across the programme.

Current students tell us that they are familiar with the SSSA and understand how this operates in relation to their programme.

Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to selection, admission and progression are met

YES NO

Outcome

Is the standard met? MET NOT MET

Documentary analysis and discussion at the approval visit in relation to recruitment and selection of V100 applicants indicates that the process is orientated to meet SPQ and SCPHN programme requirements. PLPs are involved in interviewing V100 (SPQ route) applicants. The SPQ programme team tell us that the requirement to ensure that the applicant be proficient in clinical/health assessment,

diagnostics/care management, and the planning and evaluation of care (in relation to prescribing) is met through the nomination process at the health board. PLPs describe a process of selection but no evidence is presented that this includes consideration of the said requirement. Discussion at the approval visit indicates that the programme team rely on the nomination process at health board level to ensure that applicants meet this criterion. PLPs describe a robust nomination process but the application form and interview doesn't specifically address this requirement.

Condition two: To provide application documentation that evidences the process to confirm that applicants to the V100 programme meet the requirement to be proficient in clinical/health assessment, diagnostics/care management, and the planning and evaluation of care. (SPP R1.6)

Date: 5 May 2021

Post event review

Identify how the condition(s) is met:

Condition two:

The programme team has provided evidence that evidences the process to confirm that applicants to the V100 programme meet the requirement to be proficient in clinical/health assessment, diagnostics/care management, and the planning and evaluation of care.

The programme team provide an application form that specifically identifies how the applicant is proficient in clinical/health assessment, diagnostics/care management and the planning and evaluation of care. The programme team has provided a flow diagram to describe the stages of the application process.

Condition two is now met.

Evidence:

G4.04.05.21 Application flow process.doc, undated

G4.03.05.21 SPQ additional application form, undated

G4.02.05.21 SCPHN additional application form, undated

Date condition(s) met: 5 June 2021

Revised outcome after condition(s) met:

MET

NOT MET

Standard 2: Curriculum

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

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

Findings against the standard and requirements

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

- There is evidence that the programme complies with the NMC Standards framework for nursing and midwifery education (R2.1) **YES** **NO**
- There is evidence that the programme is designed to fully deliver the competencies set out in the RPS *Competency Framework for all Prescribers*, as necessary for safe and effective prescribing practice (R2.2). **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. Documentary analysis indicates that there's a learning and teaching strategy in the school to deliver teaching which is effective and enables student achievement. A blended approach to learning including asynchronous and synchronous learning online and problem-based learning is offered. This

complements the inter-professional teaching strategy delivering workshops and study days for a range of disciplines including pharmacists, allied health professionals, social work and psychology students. This is a distinctive feature of the V300 programme.

V100 curriculum documents indicate that the community nurse prescribing theory is fully integrated into a 30-credit module within each of the programmes, providing three study days to cover the prescribing related content.

V100 students tell us they're provided with an online workbook some 12 weeks before the module begins. Students tell us that their learning is enhanced when links are made between the content of this workbook and theory delivered in the taught sessions but that this isn't always made explicit.

The V100 prescribing content is delivered in the first year of their SCPHN or SPQ DN programme. One student makes the observation that this impacts on their prescribing confidence because it's 18 months afterward that they're qualified to prescribe, however others reported that it doesn't affect their confidence. The experience of students is positive in relation to the online provision of teaching and feel that the teaching is related to their scope of practice. V100 curriculum documents indicate that the community nurse prescribing theory is fully integrated into a 30 credit module within each of the programmes, providing three study days to deliver prescribing related content. V100 students tell us that they're provided with an online workbook some 12 weeks before the module begins. Students tell us that their learning is enhanced when links are made between the content of this workbook and theory delivered in the taught sessions, but this isn't always made explicit. (Recommendation two)

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

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: 5 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. Discussion at the approval visit and documentary analysis provides assurance that suitable, effective arrangements and governance for practice learning are in place for all students. All practice placement areas within the health boards are subject to educational audit. Applicants are nominated or express an interest in the programme and this is scrutinised by the educational lead taking into consideration the applicants record of previous learning, requirement for prescribing in that particular role and availability of a prescribing budget. The divisional lead nurse and the corporate lead nurse undertake further scrutiny of any application. No application, directly to the university, is accepted and any application is cross matched with the health board. This robust process enables support to be ensured. Practice staff are prepared to support practice learning through the All Wales approach and have access to online training. Self-employed applicants must provide two references and the programme lead undertakes an educational audit to ensure effective arrangements are in place. Places are generally filled by commissioned health board students.

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. The programmes offer a blended learning approach which includes proportionate and effective use of technology and effective use of simulation-

based learning. A virtual learning environment is provided for students to access learning materials. Lectures are asynchronous and synchronous.

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: [Standards for student supervision and assessment](#) relevant to practice learning are met

YES NO

Outcome

Is the standard met? MET NOT MET

Date: 5 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 4: Supervision and assessment

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

R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC [Standards framework for nursing and midwifery education](#)

R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC [Standards for student supervision and assessment](#)

R4.3 appoint a programme leader in accordance with the requirements of the NMC [Standards framework for nursing and midwifery education](#). The programme leader of a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience

R4.4 ensure the programme leader works in conjunction with the lead midwife for education (LME) and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes

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

R4.5.1 In exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor for that part of the programme where the prescribing student is undergoing training in a practice learning setting. In such instances, the student, practice supervisor/assessor and the AEI will need to evidence why it was necessary for the practice supervisor and assessor roles to be carried out by the same person

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

R4.7 provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes

R4.8 assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice

R4.9 ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies. This includes all students:

R4.9.1 successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80 percent), and

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

Findings against the standards and requirements

Provide an 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. Mapping documentation demonstrates how the programmes comply with the SFNME. Documentary analysis and discussion with the programme team, PLPs and students confirm that arrangements are in place for the preparation of practice assessors, practice supervisors and students. Practice assessors and practice supervisors tell us that they are familiar with the roles outlined in the SSSA, this includes former designated supervisory medical practitioners.

- 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 met. Documentary analysis and discussion at the visit provides assurance that the SSSA is embedded across the programme. Applicants identify their practice supervisor and practice assessor as part of the application process and the health board confirms this support. The All Wales approach supports the preparation of practice assessors and practice supervisors. Academic assessors are supported with ongoing support through the annual performance appraisal process. The PAD reflects the adoption of the roles of practice assessor, practice supervisor and academic assessor. Students and practice staff are familiar with the roles. PLPs tell us that the usual networks between practice supervisors and practice assessors are under pressure due to the pandemic and providing support for staff and students is challenging. Given that the frequency and mechanisms of support from the programme team vary across the routes recommendation three is made.

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

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. Documentary analysis and discussion at the approval visit demonstrates assurance that there's effective processes in place to ensure that suitable staff are identified as practice assessors. Information is clear in the

programme documentation that practice assessors have an equivalent qualification and this is also reflected in the V300 application form. PLPs describe robust processes for nomination of applicants which includes review of the support required.

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

Outcome

Is the standard met? MET NOT MET

Date: 5 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 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

<ul style="list-style-type: none"> 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 <input checked="" type="checkbox"/> NO <input type="checkbox"/> 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"/> Processes are in place to inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice (R5.4) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<p>Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p>
<p>Outcome</p> <p>Is the standard met? MET <input checked="" type="checkbox"/> NOT MET <input type="checkbox"/></p> <p>Date: 5 May 2021</p> <p>Post event review</p> <p>Identify how the condition(s) is met: N/A</p> <p>Date condition(s) met: N/A</p> <p>Revised outcome after condition(s) met: MET <input type="checkbox"/> NOT MET <input type="checkbox"/> N/A</p>

Section four

Sources of evidence

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

Key documentation	YES	NO
Programme document, including proposal, rationale and consultation	<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 condition documentation. G4.01.05.21 Implementation plan for PPI, undated G4.04.05.21 Application flow process, undated G4.03.05.21 SPQ additional application form, undated G4.02.05.21 SCPHN additional application form, undated		
Additional comments: None identified.		

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

	YES	NO
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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"/>
Current and alumni students V100 five students, V300 five students.		
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: The approval visit is conducted remotely due to the COVID-19 pandemic. Cardiff University is an established AEI and a resource check is not required.		
Additional comments: None identified.		

Mott MacDonald Group Disclaimer

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Issue record

Final Report

Author(s):	Rose Havelock	Date:	16 May 2021
Checked by:	Pamela Page	Date:	18 May 2021
Submitted by:	Lucy Percival	Date:	22 June 2021
Approved by:	Leeann Greer	Date:	23 June 2021