

Programme approval visit report

Section one

Programme provider name:	Leeds Beckett University
In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i>	Leeds Community Healthcare NHS Trust Leeds Teaching Hospitals NHS Trust Leeds and York Partnership NHS Foundation Trust Harrogate and District NHS Foundation Trust Airedale NHS Foundation Trust Bradford District Care NHS Foundation Trust Calderdale and Huddersfield NHS Foundation Trust The Mid Yorkshire Hospitals NHS Trust York Teaching Hospital NHS Trust Locala Community Partnerships CIC Private, voluntary and independent health care providers
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 type="checkbox"/>
Title of programme(s):	Non-Medical Prescribing
Academic level:	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input checked="" 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

<p>Community practitioner nurse prescribing V150</p>	<p>England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input 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>Community practitioner nurse prescribing V100</p>	<p>England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input 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>18 November 2020</p>
<p>Programme start date:</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" value="12 April 2021"/></p> <p><input type="text" value="NA"/></p> <p><input type="text" value="NA"/></p>
<p>QA visitor:</p>	<p>Registrant Visitor: Hilary Field</p>

Section two

Summary of review and findings

Leeds Beckett University (LBU) is an established approved education institution (AEI). The school of health and community studies (the school) present the independent and supplementary nurse prescribing (V300) programme for approval. The programme development is informed by the Standards framework for nursing and midwifery education (SFNME) (Nursing and Midwifery Council (NMC), 2018) and the Standards for student supervision and assessment (SSSA) (NMC, 2018). The programme is mapped to the Standards for prescribing programmes (SPP) (NMC, 2018) and the Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS, 2016) competency framework for all prescribers) (NMC, 2018).

The programme is a 40 credit multi-professional award delivered part-time twice a year at academic levels six and seven. It's delivered over 26 days with a practice learning requirement of 90 hours. It can be undertaken as a standalone programme; it's integrated into the postgraduate diploma specialist practitioner qualification district nursing (SPQ DN). It's core to the Master of science (MSc) advanced clinical practice programme and optional in the Bachelor of science (BSc) (Hons) health and community care and the MSc health and community care programmes.

Documentary evidence and discussion at the approval visit demonstrate a commitment to partnership working with key stakeholders. There's evidence of effective working between LBU practice learning partners (PLPs), students and service users and carers (SUCs) who confirm involvement in the programme planning board. There's clear evidence of involvement in the programme co-production by PLPs, students and SUCs.

There's evidence of a robust partnership working approach between LBU and PLPs who tell us there's a commitment to effective engagement at operational and strategic levels. There's evidence of effective communication between the programme team and PLPs.

Documentary evidence and the approval process confirm there's a partnership approach to the management of risk associated with adverse system regulator reports including the Care Quality Commission (CQC). Practice learning environments are subject to educational audit to ensure a safe quality learning experience.

Arrangements at programme level don't meet the SFNME. Arrangements at programme level meet the SSSA.

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

The programme is recommended for approval subject to one NMC condition. There's one NMC recommendation.

Updated 7 December 2020:

LBU has provided additional evidence to meet the NMC condition. The condition is met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel

Recommended outcome to the NMC:

Programme is recommended to the NMC for approval

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:

None identified.

Selection, admission and progression:

Condition one: Provide application documentation that explicitly details how governance arrangements are directly and appropriately applied to self-employed and non-NHS applicants. (SFNME R2.6; SPP R1.3, R3.1)

Practice learning:

None identified.

Assessment, fitness for practice and award:

None identified.

Education governance: management and quality assurance:

	None identified.
Date condition(s) to be met:	11 December 2020
Recommendations to enhance the programme delivery:	Recommendation one: Continue to develop partnership working with SUCs in the development, delivery and evaluation of the prescribing programme. (SFNME R1.12)
Focused areas for future monitoring:	None identified.

Programme is recommended for approval subject to specific conditions being met	
Commentary post review of evidence against conditions	
<p>Revised application documentation provides detail about how governance arrangements are directly and appropriately applied to self-employed and non-NHS applicants.</p> <p>Condition one is met.</p> <p>The programme is recommended for approval.</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:	7 December 2020

Section three

NMC Programme standards
Please refer to NMC standards reference points Standards for prescribing programmes (NMC, 2018)

NMC Programme standards

[Standards of proficiency for nurse and midwife prescriber \(adoption of the Royal Pharmaceutical Society \(RPS\) Competency Framework for all Prescribers\)](#)

(NMC, 2018)

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

[Standards for student supervision and assessment](#) (NMC, 2018)

[The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates](#) (NMC, 2015 updated 2018)

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

[QA Handbook](#) (NMC, 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.

There's effective and positive partnership working between LBU and key stakeholders. The programme team and representative stakeholders tell us the design and proposed delivery of the programme meets the SPP and RPS competency framework for all prescribers. Students tell us there's the opportunity for inter-professional learning alongside nurses from different fields of practice and allied health professionals.

The programme team include registered nurses with relevant field specific and NMC prescribing qualifications. Senior school team representatives confirm there's appropriate resources within the programme team to support the academic assessor role and delivery of the programme. They confirm that future recruitment of academic staff will consider applicants who have a prescribing qualification. They tell us the programme is further supported by practising multi-professional prescribers who contribute to teaching and assessment activities. PLPs confirm involvement in the development of the V300 programme. They confirm there's robust communication channels with the programme team who proactively support service need.

Documentary evidence and the approval process confirms a commitment by the school who have a strategic plan to enhance the involvement of SUCs across health-related programmes. The school demonstrates a commitment to the involvement of SUCs across NMC programmes. The SUC representative confirms that SUCs have access to equality and inclusion training and are supported by the school to undertake the role. They tell us about the active contribution of SUCs to nursing programmes, they value the relationship with the school and feel part of the team. There's documentary evidence of the involvement of SUCs in the development and future involvement in the programme. SUCs confirm they're able to provide feedback to programme teams. SUCs tell us that whilst they don't yet contribute to the teaching, they see the value of incorporating SUC perspectives

into the taught element of the prescribing programme and welcome the opportunity to be further involved. The programme team are advised to consider how they can continue to develop further partnership working with SUCs in the development, delivery and evaluation of the programme. (Recommendation one)

Documentary evidence and the approval visit confirms the student voice is captured through programme evaluations. LBU's monitoring, annual review and enhancement process facilitates ongoing evaluation of the programme. Documentary evidence confirms that student views are listened to, and changes made to the programme delivery reflect this. Students tell us they feel supported to share their views. They tell us the programme team respond appropriately to issues raised in theory and practice learning environments. Students report that the teaching team are supportive and accessible and that PLPs are supportive in ensuring they have access to protected learning time throughout the programme.

Programme documentation evidences a partnership approach to the processes for raising concerns in the school and the practice learning environment. Student and practice assessor facing programme documentation clearly details these processes. Students, PLPs and practice assessors confirm they know how to raise concerns, and confirm they receive feedback on any actions undertaken as a result of these. Students confirm they're supported both in the practice learning environment and at LBU. They tell us they feel confident to discuss concerns with practice assessors or the programme team. Practice assessors and practice supervisors confirm they know how to raise concerns and confirm they receive feedback on any actions undertaken as a result of these. Practice assessors and practice supervisors confirm that they attend a practice assessor day which provides training and clarification of their role in relation to the prescribing programme.

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**

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

N/A

Date condition(s) met:

N/A

Revised outcome after condition(s) met

MET

NOT MET

N/A

Student journey through the programme

Standard 1: Selection, admission and progression

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

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

R1.2 provide opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non- NHS employed registrants) to apply for entry onto an NMC approved prescribing programme

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

R1.4 consider recognition of prior learning that is capable of being mapped to the [RPS Competency Framework for all Prescribers](#)

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

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

R1.6.1 Clinical/health assessment

R1.6.2 Diagnostics/care management

R1.6.3 Planning and evaluation of care

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

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

Proposed transfer of current students to the programme under review

Demonstrate a robust process to transfer current students onto the proposed programme to ensure programme learning outcomes and proficiencies meet the [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 not met. There's a robust application process in place supported in collaboration with PLPs. To ensure governance structures are in place for each applicant and they meet the entry criteria, they must complete the AEI's non-medical prescribing (NMP) application form. Documentary evidence and discussion at the approval visit confirms this information is checked by the continuing professional development admissions team and the admissions tutor who confirm the entry criteria is met. The application form provides information about support mechanisms and protected learning time.

Applicants must have employer support to undertake the programme, clinical leads sign to confirm practice learning time is protected. Clinical leads must confirm a satisfactory disclosure and barring service (DBS) check is in place, that applicants are working in a role that justifies a V300 prescribing qualification and that they have appropriate numeracy skills. Practice assessors and practice supervisors must be confirmed and complete the application form to declare they meet the requirements to undertake supervision and assessment of the applicant.

Educational audit is assured through a practice assessment record and evaluation (PARE) of the practice learning environment. This must be in place and confirmed at application. These arrangements are reviewed and agreed by PLP leads who confirm that governance arrangements are in place. All practice learning environments are subject to an educational audit process and are completed in partnership with LBU every two years. PLPs confirm that for NHS applicants where there isn't an educational audit in place, this will be completed prior to applicants being offered a place on the programme. In addition, each applicant must provide two professional references to confirm their suitability to undertake the programme. Students confirm the application process and tell us practice learning time is protected and that they feel supported in the practice learning environment.

PLPs confirm there's a process in place to ensure non-NHS practice learning environments are subject to educational audit. Self-employed applicants must demonstrate they meet the entry requirements of the programme. The application process doesn't clearly evidence how governance arrangements are applied for those applicants who are self-employed or non-NHS employees. The programme team weren't able to clearly describe the process. (Condition one)

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

- 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.*

The programme team tell us they don't expect any existing students to transfer to the proposed programme. If students interrupt their studies, they'll complete the current programme. The current programme is assessed against the RPS competency framework for all prescribers.

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.

It's anticipated that current students will complete the current programme, and if any current student requires an interruption, they will continue on the current programme with assessment in practice undertaken by a designated medical practitioner.

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

YES NO

The application process doesn't clearly evidence how governance arrangements are applied for those applicants who are self-employed or non-NHS employees. The programme team weren't able to clearly describe the process. (Condition one)

Outcome

Is the standard met? MET NOT MET

The application process doesn't clearly evidence how governance arrangements are applied for those applicants who are self-employed or non-NHS employees. The programme team weren't able to clearly describe the process.

Condition one: Provide application documentation that explicitly details how governance arrangements are directly and appropriately applied to self-employed and non-NHS applicants. (SFNME R2.6; SPP R1.3, R3.1)

Date: 18 November 2020

Post event review

Identify how the condition(s) is met:

Condition one: Revised application documentation provides evidence of the process to ensure clinical governance arrangements are in place to support self-employed and non-NHS students. All practice learning environments must have a satisfactory PARE audit in place before an applicant is accepted onto the programme. This includes a suitable CQC report and relevant policies and procedures to support safe learning and prescribing practice. A member of the programme team will undertake the audit if there's not one in place. Requirements for self-employed and non-NHS employed applicants are clearly detailed in the application form. Applicants must evidence professional and clinical liability insurance arrangements and have two independent health professional references.

Evidence:

- Revised, NMP programme, frequently asked questions, undated
- Revised, application form, undated
- Revised, application checklist and process, undated
- Revised, programme flyer, undated

Condition one is met.

Date condition(s) met: 7 December 2020

Revised outcome after condition(s) met: MET NOT MET

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. Students reflect on practice learning, performance and progression towards achievement of the RPS competencies in a PebblePad electronic portfolio. Progression is monitored at three points by practice assessors and practice supervisors. Final sign-off of the RPS competencies is assessed by practice assessors and confirmed by academic assessors. Students are required to record practice learning hours which are confirmed by practice assessors. The PebblePad electronic portfolio requires students to submit a detailed record of practice learning including three reflective prescribing decision-making case studies. This must include a reflection on a decision not to prescribe and include a personal drugs formulary.

The virtual learning environment (VLE) supports a blended learning approach that encourages both independent and active learning. This is supported through a variety of teaching methods including lectures, seminars, self-directed learning and

tutorials. The programme is delivered by an experienced multi-professional programme team.

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 is delivered in England.

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: 18 November 2020

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 not met. Documentary evidence and discussion at the approval visit confirm suitable and effective arrangements, and governance for practice learning is in place for all NHS applicants. This is assured by effective partnership working between the programme team and PLPs. NMP leads and managers from stakeholder organisations are involved in the selection process for their

organisation. They sign the application form to confirm that arrangements are in place for practice learning support, supervision and assessment. Managers confirm that applicants have the appropriate clinical capability to undertake the programme and that there's a DBS check undertaken within the last three years. Managers sign to confirm that nominated practice assessors and practice supervisors meet the required standards. In addition, applicants must provide two professional references to confirm their suitability to undertake the programme. There must be a suitable systems regulator report in place. The programme team tell us these arrangements are actively monitored by the programme leader.

Self-employed and non-NHS employed applicants must evidence that they meet the programme entry requirements. The application process doesn't explicitly evidence how the governance for practice learning is assured for non-NHS practice learning environments. The programme team couldn't clearly confirm how governance arrangements at application are applied for self-employed or non-NHS employed applicants. (Condition one)

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. Technology enhanced learning is supported by the VLE which enables student access to learning materials including timetables and relevant programme documentation. Students tell us online learning resources are signposted and accessible. They describe online resources as supportive of flexible learning strategies. PebblePad, the electronic portfolio, enables students to document their practice-based learning. Students confirm that they're fully supported to access and effectively use these electronic resources. Students tell us simulation-based based learning is effective and supports their learning, for example in the development of clinical management plans and prescription writing.

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 <i>Standards for student supervision and assessment</i> (R3.4)		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to practice learning are met		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
<p>The application process doesn't clearly evidence how governance arrangements are applied for those applicants who are self-employed or non-NHS employees. The programme team weren't able to clearly describe the process. (Condition one)</p> <p>Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to practice learning are met</p>			
		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Outcome			
Is the standard met?		MET <input type="checkbox"/>	NOT MET <input checked="" type="checkbox"/>
<p>The application process doesn't clearly evidence how governance arrangements are applied for those applicants who are self-employed or non-NHS employees. The programme team weren't able to clearly describe the process.</p> <p>Condition one: Provide application documentation that explicitly details how governance arrangements are directly and appropriately applied to self-employed and non-NHS applicants (SFNME R2.6; SPP R1.3, R3.1)</p> <p>Date: 18 November 2020</p>			
Post event review			
Identify how the condition(s) is met:			
<p>Condition one: Revised application documentation provides evidence of the process to ensure clinical governance arrangements are in place to support self-employed and non-NHS students. All practice learning environments must have a satisfactory PARE audit in place before an applicant is accepted onto the programme. This includes a suitable CQC report and relevant policies and procedures to support safe learning and prescribing practice. A member of the programme team will undertake the audit if there's not one in place. Requirements for self-employed and non-NHS employed applicants are clearly detailed in the application form. Applicants must evidence professional and clinical liability insurance arrangements and have two independent health professional references.</p> <p>Evidence: Revised, NMP programme, frequently asked questions, undated Revised, application form, undated Revised, application checklist and process, undated</p>			

Revised, programme flyer, undated

Condition one is met.

Date condition(s) met: 7 December 2020

Revised outcome after condition(s) met: MET NOT MET

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. Documentary evidence and the approval visit confirm the PARE audit system of practice learning environments are undertaken to ensure appropriate systems and processes are in place to support safe practice learning.

Students have access to the procedure for raising a concern in practice. They tell us they're aware of the process which is detailed in student facing documentation. PLPs confirm there's processes in place to support students raising concerns. They tell us there's effective communication with the programme team in respect of issues identified in practice learning environments. There's evidence of sound communication between practice assessors, practice supervisors and academic assessors to address any issues related to student progression or the practice learning environment. Students commend the programme team for the educational and pastoral support available.

- 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 evidence and the approval process confirms there's a partnership approach to the implementation and operationalisation of the SSSA. Senior PLP representatives and the senior school team describe the strategic management of this. Students and practice assessors tell us they're aware of the SSSA. The application process ensures that practice assessors and practice supervisors are identified. The applicant's manager signs to confirm practice assessor and practice supervisor suitability, and preparation to support students at the point of application. Students confirm that they'll be undertaking the supervision and assessment roles for future students. Practice assessors and

practice supervisors have the opportunity to attend a practice assessor study day and confirm they're prepared for the role.

Evidence of the programme teams' educational and professional experience confirms they meet the requirements to undertake the academic assessor role. The senior school team confirm that the academic assessor role is identified and supported through professional development. They tell us recruitment of future academic staff with a prescribing qualification will further support the academic assessor role.

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

- Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience (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

There's no LME in place, LBU don't deliver a midwifery 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. Documentary evidence, students and PLPs confirm that applicants must have the support of a practice assessor and practice supervisor who are both a registered healthcare professional and an experienced prescriber. There's a documented process for the exceptional circumstances where the same person fulfils the role of practice assessor and practice supervisor; this details how students and practice assessors are supported.

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

<ul style="list-style-type: none"> 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 <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<ul style="list-style-type: none"> 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 <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> - 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 <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to supervision and assessment are met	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to supervision and assessment are met	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Outcome		
Is the standard met?	MET <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>
Date: 18 November 2020		
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 <input type="checkbox"/>	NOT MET <input type="checkbox"/>
N/A		

Standard 5: Qualification to be awarded

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

R5.1 following successful completion of an NMC approved programme of preparation, confirm that the registered nurse (level 1), midwife or SCPHN is eligible to be recorded as a prescriber, in either or both categories of:

R5.1.1 a community practitioner nurse or midwife prescriber (V100/V150), or
R5.1.2 a nurse or midwife independent/supplementary prescriber (V300)

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

R5.3 inform the student that the award must be registered with us within five years of successfully completing the programme and if they fail to do so they will have to retake and successfully complete the programme in order to qualify and register their award as a prescriber

R5.4 inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice

Findings against the standards and requirements

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

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

YES NO

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

YES NO

- Processes are in place to inform the student that the award must be registered with the NMC within five years of successfully completing the programme and if they fail to do so they will have to retake and successfully complete the programme in order to qualify and register their award as a prescriber (R5.3)

YES NO

<ul style="list-style-type: none"> 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) <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO</p>	
<p>Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met</p> <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p>	
Outcome	
Is the standard met?	MET <input checked="" type="checkbox"/> NOT MET <input type="checkbox"/>
Date: 18 November 2020	
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 <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):

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 visit: School of health and community studies, response to condition, undated Revised, NMP programme, frequently asked questions, undated Revised, application form, undated		

Revised, application checklist and process, undated
Revised, programme flyer, undated
Minutes of approval visit, signed by the chair, 10 December 2020
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: September 2020 x one September 2018 x two		
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		
This is an established AEI and visits to facilities weren't needed.		
Additional comments: None identified.		

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Issue record

Final Report

Author(s):	Hilary Field	Date:	28 November 2020
Checked by:	Bernadette Martin	Date:	30 November 2020
Submitted by:	Amy Young	Date:	6 January 2021
Approved by:	Leeann Greer	Date:	8 January 2021