

Programme approval visit report

Section one

Programme provider name:	Staffordshire University
In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i>	<p>Birmingham Women's and Children's NHS Foundation Trust</p> <p>The Royal Wolverhampton NHS Trust</p> <p>Mid Cheshire Hospitals NHS Trust</p> <p>Midlands Partnership NHS Foundation Trust</p> <p>North Staffordshire Combined Healthcare NHS Trust</p> <p>Powys Teaching Health Board</p> <p>University Hospitals of Derby and Burton NHS Foundation Trust</p> <p>Shrewsbury and Telford Hospital NHS Trust</p> <p>Shropshire Community Health NHS Trust</p> <p>University Hospitals of North Midlands NHS Trust</p> <p>The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust</p>
Programmes reviewed:	<p>Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/></p> <p>Community practitioner nurse prescribing V150 <input type="checkbox"/></p> <p>Community practitioner nurse prescribing V100 <input type="checkbox"/></p>
Title of programme(s):	Independent and Supplementary nurse Prescribing V300
Academic level:	
Independent and supplementary nurse prescribing V300	<p>England, Wales, Northern Ireland</p> <p><input type="checkbox"/> Level 5 <input checked="" 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>
Community practitioner nurse prescribing V150	<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>
Community practitioner nurse prescribing V100	<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>
Date of approval visit:	3 November 2020
Programme start date:	
Independent and supplementary nurse prescribing V300	<input type="text" value="6 September 2021"/>
Community practitioner nurse prescribing V150	<input type="text" value="N/A"/>
Community practitioner nurse prescribing V100	<input type="text" value="N/A"/>
QA visitor:	Registrant Visitor: Dianne Bowskill

Section two

Summary of review and findings

Staffordshire University (the university) is an approved education institution (AEI), the school of health and social care (the school) is experienced in delivering prescribing programmes. The school present the independent and supplementary prescribing (V300) programme for approval. The programme is mapped against the NMC Standards for prescribing programmes (SPP) (NMC, 2018).

The V300 programme is a stand-alone module delivered at academic level six and academic level seven. The academic level seven programme is integrated in the masters in advanced clinical practice. The programme is delivered twice a year over 26 weeks. It comprises 24 days theory with a practice learning requirement of 78 hours. Students attend in two-day blocks timetabled over the first 12 weeks. Students and practice learning partners (PLPs) tell us they like this pattern of delivery.

Documentary evidence and the approval visit confirm there's effective partnership working between the school and PLPs. There's evidence of strategic and operational partnership with PLPs, students and service users who've engaged in the development of the programmes. They confirm they've influenced development of the proposed programme and specifically delivery methods, practice learning hours and written assessment.

There's strong evidence of service user involvement in curriculum development, teaching and assessment across the proposed independent and supplementary prescribing programme. Service users tell us they're involved in recruitment by attending offer holder days, in teaching and in student assessment.

The independent and supplementary programme team have adopted NMC practice assessor and practice supervisor titles. Programme documentation clearly identifies the roles and responsibilities of practice assessors and practice supervisors. There's a process to assign each student to a practice assessor who's both a registered healthcare professional and experienced prescriber. Practice assessors and supervisors are required to complete preparation for the role and provide the student with feedback at a minimum of three points during the programme.

The regional application form demonstrates partnership working with PLPs and other universities. The form is designed to enable self-employed and non-NHS applicants to apply. Documentary evidence provides assurance that all practice learning placements have an audit check for suitability prior to the start of practice learning. The university has a process in place to manage risk associated with adverse system regulator reports and this involves increased frequency and scrutiny of audits.

Documentary evidence and discussion with the programme team provides assurance that the programme teams are experienced with relevant prescribing qualifications and clinical experience across the fields of nursing practice. Midwives undertaking the programme have support from the lead midwife for education (LME).

Arrangements at a programme level meet the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018). Arrangements at programme level meet the Standards for student supervision and assessment (SSSA) (NMC, 2018).

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

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

Updated 8 December 2020:

The university has provided documentation to meet the two NMC conditions.

All conditions are met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	<p>Programme is recommended to the NMC for approval <input type="checkbox"/></p> <p>Programme is recommended for approval subject to specific conditions being met <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
Conditions:	<p>Effective partnership working: collaboration, culture, communication and resources None identified.</p> <p>Selection, admission and progression None identified.</p> <p>Practice learning None identified.</p> <p>Assessment, fitness for practice and award Condition one: The programme team must ensure that programme learning outcomes and assessments</p>

	<p>are mapped to the royal pharmaceutical society (RPS) competency framework for all prescribers. (SPP R2.2)</p> <p>Condition two: The programme team must write an additional learning outcome that describes the pharmacology knowledge the student is expected to achieve by the end of the programme. (SPP R2.4.2)</p> <p>Education governance: management and quality assurance</p> <p>None identified.</p>
Date condition(s) to be met:	7 December 2020
Recommendations to enhance the programme delivery:	Recommendation one: The school should consider appointment of a pharmacist or pharmacologist to teach and assess pharmacology on non-medical prescribing programmes.
Focused areas for future monitoring:	The continued introduction of technology enabled learning to enhance the student learning experience.

Programme is recommended for approval subject to specific conditions being met	
Commentary post review of evidence against conditions	
<p>Revised documentation provides evidence the conditions are met.</p> <p>All learning outcomes are mapped to the RPS competency standards and to assessments. This provides assurance that RPS competencies are met throughout the programme.</p> <p>Condition one is now met.</p> <p>The module descriptor level seven and module descriptor level six are amended to include an additional learning outcome. This outcome describes the pharmacology knowledge the student is to achieve by the end of the programme.</p> <p>Condition two is now met.</p>	
AEI Observations	<p>Observations have been made by the education institution</p> <p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>

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:	8 December 2020

Section three

NMC Programme standards
Please refer to NMC standards reference points Standards for prescribing programmes (NMC, 2018) Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers) (NMC, 2018) Standards framework for nursing and midwifery education (NMC, 2018) Standards for student supervision and assessment (NMC, 2018) 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.
<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: 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</p> <p>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</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

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.

Documentary evidence and discussion with stakeholders confirms effective partnership working with the programme team in the development of the proposed independent and supplementary prescribing programme.

PLPs, students and service users attended curriculum development meetings over a period of 18 months where they contributed to the development of the programme. They confirm they've influenced development of the proposed programme and specifically delivery methods, practice learning hours and written assessment. Student representatives are very supportive of the change from a 6,000-word portfolio to a 2,500-word case study.

There's strong evidence of service user involvement in curriculum development, teaching and assessment across the school including the proposed independent and supplementary prescribing programme. Service users tell us they're involved

in recruitment by attending offer holder days, in teaching and in student assessment.

Their involvement in the moderation of objective structured clinical examination (OSCE) assessments is new. Service users and the programme lead assure there's training provided for service users involved in moderation. The opportunity to provide students with feedback is valued by service users and students we spoke to. Service users we met contribute to prescribing education by presenting their story in timetabled sessions. They tell us they're supported by both the school and programme team in doing this work.

There's school commitment to include service users in the long-term development, delivery and evaluation of programmes, led by the school service user and carer co-ordinator. Service users commend the school and programme approach telling us their role is embedded in curriculum development and delivery. The school assures continued commitment to service user involvement in the programme in their 2020 service user strategy.

The curriculum uses a blended learning approach to support inter-professional learning. Students tell us they value inter-professional learning opportunities in the classroom and in practice learning. Designated medical practitioners (DMPs) and students give examples of learning from pharmacists, specialist doctors and other prescribing professionals.

Documentary evidence provides assurance that the programme team are experienced with relevant prescribing qualifications and clinical experience across the fields of nursing practice. Pharmacology is taught by a pharmacist on a casual contract. Students tell us this teaching helps them apply theory to clinical practice. The university does not employ the pharmacist who teaches pharmacology on the programme. Should the pharmacist choose not to continue this casual arrangement the delivery and assessment of pharmacology on the programme is at risk of not being delivered. (Recommendation one)

There's evidence of partnership working with PLPs and other universities as the school is using a shared regional application form. The form is designed to enable self-employed and non-NHS applicants to apply. There's a section to assure self-employed applicants have governance in place to support prescribing. PLPs and students confirm collaborative working prior to university application. The programme lead has oversight of the process to assure applicants meet NMC entry requirements. This process applies to applications and where a change of practice supervisor or practice assessor is needed during the programme.

Practice learning environments used by prescribing students have a placement audit. There's evidence in the audit document of a joint approach with PLPs to assure the quality of the practice learning environment. The practice learning facilitator confirms prescribing practice audits are ratified through school process. Where a practice area is rated inadequate by the care quality commission (CQC)

quality practice learning is assured by increased frequency of auditing to three monthly and audits are reviewed by the practice learning facilitator.

The school continuous monitoring procedure confirms commitment to continuous improvement at programme, school and institutional levels. Documentary evidence confirms students have opportunity to give feedback on the quality of their theory and practice learning experience. One student explains their role as nominated representative in attendance at the twice-yearly programme committee. All students are invited to complete the end of module evaluation and student representatives tell us their evaluations have informed the proposed curriculum.

Students tell us that they receive constructive and timely feedback on their progress in the academic and practice learning environment. Anonymity for service user feedback is enabled as the student isn't present when the feedback is written. It's provided to the student at a later date. The service users, students and DMP we spoke to are very supportive of this approach. The programme assessment requires the student to actively participate in reflection of practice in response to service user and staff feedback.

Students commend the programme team for the level of support provided for the duration of their studies. The school document, reporting concerns relating to student professional conduct, confirms a commitment to raising and escalating concerns. Student representatives and student facing documentation assure us they know how to raise and escalate concerns. Independent and supplementary prescribing practice assessor and practice supervisor facing documentation details how concerns are raised and addressed. Practice assessors and students confirm awareness of the process for raising a concern including reporting to the NMC.

The assessment of practice requires students to demonstrate achievement of the RPS competencies. Practice learning hours are recorded in the practice assessment document (PAD) and are confirmed by the practice assessor at the final assessment of practice. Evidence of achievement of the RPS competencies is confirmed and recorded by the practice assessor with the agreement of the academic assessor. PADs are subject to the school internal moderation process by the programme team and service users prior to review by the programme external examiner.

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 N/A	MET <input type="checkbox"/>	NOT MET <input type="checkbox"/>

Student journey through the programme	
Standard 1: Selection, admission and progression	
Approved education institutions, together with practice learning partners, must:	
<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>	
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 prescribing programmes* and *Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers)* (NMC, 2018).

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. Applicants to the V300 programme must secure evidence of employer support at application. Students undertaking the award integrated in the MSc advanced clinical practice programme must have employer agreement and complete an application form. PLPs confirm line managers must sign applications to confirm practice learning time is protected and that there's a service need for prescribing within the applicant's role. Documentary evidence and discussion with PLPs and students confirm applicants are supported by appropriately qualified and prepared practice assessors and practice supervisors. Students tell us practice learning time is protected.

Self-employed and non-NHS employed applicants must meet the requirements of the independent and supplementary prescribing application process and are required to complete an additional governance declaration. They must provide evidence of the governance structures supporting their prescribing practice. This includes the indemnity in place for their employment status and how their learning will be supported and protected. All applications are scrutinised by the programme lead.

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.

No students will transfer to the new programme.

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.

The programme lead confirms that no current students will transfer to the new 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

Date: 3 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:

N/A

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

R2.2 is not met. The programme team tell us the timetabled content fully delivers to RPS competencies. Students are assessed in practice learning on their achievement of the RPS competencies. There's no mapping document or evidence to assure the content of the programme fully delivers to the RPS competencies. Evidence is required to assure the programme is designed to fully deliver the RPS competencies as set out in the RPS competency framework. (Condition one)

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 evidence and discussion confirms the programme uses a blended learning approach. The university access and participation plan confirms commitment to innovative and applied learning. The programme uses lead lectures with student led and group discussion to explore clinical application across fields of practice and prescribing professions. Students tell us inter-professional learning in the classroom adds to their learning experience. Using clinical examples, students tell us they're able to practice writing prescriptions and preparing clinical management plans for assessment. Students and the DMP confirm consultation, decision-making and medicines management skills taught in theory are practised under supervision during practice learning.

The programme uses a PAD which provides information about practice learning and clearly identifies points of formative assessment that enable students to develop their learning towards achievement of the programme outcomes. All students are required to apply learning to prescribing knowledge and skills in their practice learning environment. A DMP representative tells us they observe patient assessments and provide feedback during practice learning. Students confirm this approach helps them develop prescribing consultation and clinical decision-making skills. Students complete an OSCE assessed consultation of a prescribing patient consultation as a summative assessment in a simulated learning environment at the university.

The assessment of practice requires all students to demonstrate achievement of the RPS competencies. Practice learning hours are recorded in the PAD and are confirmed by the practice assessor at the final assessment of practice. Evidence of achievement of the RPS competencies is confirmed and recorded by the practice assessor with agreement of the academic assessor. PADs are subject to the school internal moderation process by the programme team and service users prior to review by the programme external examiner.

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 (R2.4.1)
 - stating the prescribing specific content necessary to meet the programme outcomes (R2.4.2)
 - 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 (R2.4.3)

YES NO

R2.4.2 is not met. Programme specifications for academic level six and academic level seven have four learning outcomes. Pharmacology is not identified in the stated learning outcomes. The timetable includes pharmacology learning and the programme specification academic level six and academic level seven include assessment of pharmacology knowledge by examination. The programme lead confirms pharmacology learning is included in the content and assessment of the programme but isn't included in the programme learning outcomes. (Condition two).

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

YES NO

If relevant to the review

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

YES NO N/A

The programme isn't delivered in Wales.

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

YES NO

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

YES NO

Outcome

Is the standard met?

MET NOT MET

The standard isn't met. Evidence is required to assure the programme is designed to fully deliver the RPS competencies as set out in the RPS competency framework. (Condition one)

There's no evidence that programme outcomes meet prescribing specific content. The programme lead confirms pharmacology learning is included in the content and assessment of the programme but isn't included in the programme learning outcomes. (Condition two)

Date: 3 November 2020

Post event review

Identify how the condition(s) is met:

The mapping document is updated to include mapping of programme learning outcomes, including the additional learning outcome, against the RPS prescribing competency statements.

Condition one is now met.

Evidence:

Mapping document two independent and supplementary prescribing programme 2020, undated

Module descriptors level six and level seven are amended to include an additional learning outcome. This learning outcome describes the pharmacology knowledge the student is to achieve by the end of the programme.

Condition two is now met.

Evidence:

Module descriptor level six, undated
Module descriptor level seven, undated

Date condition(s) met: 8 December 2020

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

Standard 3: Practice learning

Approved education institutions must:

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

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

R3.2 ensure that practice learning complies with the NMC [Standards for student supervision and assessment](#)

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

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

Findings against the standard and requirements

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

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

MET **NOT MET**

R3.1 is met. Documentary evidence and discussion at the approval visit confirm suitable arrangements and governance for practice learning are in place for all applicants including those who are non-NHS employed and self-employed. This is assured by effective partnership working between PLPs and the prescribing programme team. PLPs tell us they work closely with the programme team and the practice learning facilitator to assure the quality and safety of practice learning areas. Self-employed and non-NHS applicants' practice learning environments must demonstrate they meet the requirements of the practice learning environment audit process. There're additional governance arrangements where a CQC report is inadequate or requires improvement. The practice learning facilitator confirms there's increased frequency of audit to three monthly and increased scrutiny of the practice learning environment. The programme team, PLPs and practice facilitator confirm the practice learning audit for prescribing students is ratified within school governance processes.

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 embedded within the virtual learning environment (VLE), blackboard. Students tell us resources housed in the platform support their learning. Students confirm they're familiar with and can use the digital health technologies that support medicines management and prescribing practice. Students tell us they use digital resources such as the British national formulary (BNF) online, the BNF app and the electronic medicines compendium to support their learning.

The university access and participation plan confirms commitment to innovative and applied learning. Students tell us they've access to the learning resources they need through blackboard. Teaching and learning is predominantly face-to-face and this approach is supported by students and PLPs we spoke to. The programme team tell us students don't have access to more progressive teaching and learning e-technologies in the programme. The programme team plan to increase their use of e-learning resources and innovative technologies.

Students confirm they've opportunity to participate in simulation-based learning in their practice learning environment. Students practice the clinical and prescribing assessment skills required to ensure they can prescribe safely. Students tell us the development of these skills is supported and supervised by practice supervisors and practice assessors.

The practice assessor provides formative feedback to the student on their progress on a minimum of three points; initial, halfway and end of the programme. Formative feedback on the achievement of RPS competencies completed by the practice assessor in collaboration with the academic assessor at the halfway point is submitted to the programme team. The opportunity for formative feedback is valued by students who tell us they use it to inform learning in their remaining practice learning hours. Formative and summative practice learning assessments are recorded in the PAD.

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 <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Outcome			
Is the standard met?		MET <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>
Date: 3 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 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 discussion at the approval visit confirm educational audits of all practice learning environments are undertaken to ensure appropriate systems and processes are in place to support practice learning. On application there must be an audit of the practice learning environment that's ratified and approved by school process. This requirement applies to NHS and non-NHS learning environments. Where an audit doesn't meet the required standard, the applicant isn't offered a place on the programme.

PLPs tell us students have protected learning time and this is confirmed by student representatives. DMPs attend a preparation session and tell us they're adequately prepared for their role. Students confirm they receive feedback on practice learning and their progress to achieving the RPS competencies from the DMP mid-way through the period of practice learning. Students tell us this feedback is timely and helpful.

Discussion at the visit supports documentary evidence that confirms communication occurs between practice assessors and academic assessors to identify and address any issues related to practice learning. Student, practice supervisor and practice assessor facing documentation instructs students to raise and escalate concerns through the NMC reporting process and provides a flow diagram to assist this. Students tell us they know how to raise a concern; this is detailed in the programme handbook and the programme team advise them about

this during contact days. The DMP representative confirms this information is available to them in the handbook. PLPs and the programme team also tell us this information is available in the school reporting concerns relating to student professional conduct policy document.

- 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. There's evidence of a partnership approach with PLPs to the implementation of the SSSA. PLPs confirm there are sufficient practice supervisors and practice assessors to meet the training needs of prescribing students and this is evidenced through the application process.

Practice supervisors and practice assessors must confirm upon student application that they meet the requirements to undertake the supervision and/or assessment role. Their credentials are scrutinised by the programme team before the applicant is offered a place. Practice assessors who haven't previously undertaken the role must attend a specific practice assessor session. The programme team, practice facilitator and a future practice assessor assure the training is suitable and available on a rolling programme.

Students and practice assessors have the opportunity for further support by a follow-up face-to-face practice tripartite visit by a member of the programme team. The practice assessor and practice supervisor documentation is provided in advance of the programme start date and provides them with appropriate information about their role. Students tell us practice assessors are well prepared for the role. The DMP tells us their preparation for the role is good and they're adequately supported by the programme team.

Academic assessors are required to complete preparation for their role. The programme lead is the academic assessor for nursing students. The LME is the academic assessor for midwife prescribing students. Each student has a nominated person for practice support and is allocated a personal tutor. Students tell us they feel well supported by the programme team.

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

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. PLPs confirm a partnership approach to assure sufficient appropriately qualified practice assessors and practice supervisors are available. Students tell us there are sufficient practice assessors available and confirm the assessor has protected time to support their learning. Documentary evidence and discussion with PLPs confirm there are processes in place to assign each student to a practice assessor who's both a registered healthcare professional and experienced prescriber.

The programme lead assures there's a plan in place for the management in exceptional circumstances if the same person fulfils the role of practice assessor and practice supervisor. All applications are scrutinised by the programme lead and specific attention is given to assure the requirement for a practice supervisor and practice assessor. Should an applicant propose the same prescriber for practice supervisor and practice assessor roles the programme lead will contact the applicant individually for clarification. The applicant is required to provide robust evidence to explain why the requirement for a practice supervisor and practice assessor cannot be met. We're assured if approved by the programme lead this would be exceptional and appropriately checked.

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 <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: 3 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: N/A	MET <input type="checkbox"/>	NOT MET <input type="checkbox"/>

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 <input type="checkbox"/></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: 3 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: Academic assessor presentation, undated Regional application form, undated Steering group meeting minutes, 2018 – 2020 Service user meeting minutes, 2019 – 2020		

<p>Timetable independent and supplementary prescribing, undated University of Stafford AEI annual self-report, 16 January 2020 Royal Shrewsbury Hospital CQC quality report, 6 December 2019 Shrewsbury and Telford Hospital CQC inspection report, 29 November 2018 University Hospital of North Midlands NHS Trust CQC inspection report, 14 February 2020 The Princess Royal Hospital CQC quality report, 6 December 2019 Approval visit presentation, 3 November 2020 Module descriptor level six, undated Module descriptor level seven, undated Mapping document two independent and supplementary prescribing programme 2020, undated</p> <p>Additional comments: None identified.</p>

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"/>
<p>If yes, please identify cohort year/programme of study: Independent and supplementary prescribing nurse x one, May 2019 cohort Independent and supplementary prescribing nurse x one, May 2019 cohort Independent and supplementary prescribing nurse x one, September 2017 cohort Independent and supplementary prescribing nurse x one, September 2020 cohort Independent and supplementary prescribing physiotherapist x one, May 2019 cohort</p>		
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation		
<p>Additional comments None identified.</p>		

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

	YES	NO
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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):	Dianne Bowskill	Date:	11 November 2020
Checked by:	Ian Felstead-Watts	Date:	14 November 2020
Submitted by:	Lucy Percival	Date:	16 December 2020
Approved by:	Emiko Hughes	Date:	16 December 2020