



## Programme approval visit report

## Section one

Programme provider name:	University of Liverpool			
In partnership with: (Associated practice learning partners involved in the delivery of the programme)	Liverpool University Hospitals NHS Foundation Trust St Helens and Knowsley Teaching Hospitals NHS Foundation Trust Wirral University Teaching Hospital NHS Foundation Trust Mersey Care NHS Foundation Trust Alder Hey Children's NHS Foundation Trust Wirral University Teaching Hospital NHS Foundation Trust			
Programmes reviewed:	Independent and supplementary nurse prescribing V300Image: Community practitioner nurse prescribing V150Community practitioner nurse prescribing V100Image: Community practitioner nurse prescribing V100			
Title of programme(s):	Independent and Supplementary Nurse Prescribing (V300)			
Academic level:	•			
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland Level 5 Level 6 Level 7 SCQF Level 8 Level 9 Level 10 Level 11			
Community practitioner nurse prescribing V150	England, Wales, Northern Ireland Level 5 Level 6 Level 7 SCQF Level 8 Level 9 Level 10 Level 11			
Community practitioner nurse prescribing V100	England, Wales, Northern Ireland			

Nursing & Midwifery Council	Better, safer care through quality assurance of nursing, midwifery and nursing associate education.		M MOTT MACDONALD
		Level 8 Le	vel 9 🗌 Level 10
		Level 11	
Date of approval visit:		12 April 2021	
Programme start date:			
Independent and suppleme	•	22 September 2021	
prese Community practitioner nurse	cribing V300		
Community practitioner hurse	V150		
Community practitioner nurse			
	V100		
QA visitor:		Registrant Visitor: A	lison Wood





#### Summary of review and findings

The University of Liverpool (UoL) School of Health Sciences (the school) is an established approved education institution (AEI). The proposed V300 independent and supplementary nurse prescribing programme consists of two modules. The 30 and 10 credit modules run concurrently over an academic year and are delivered at academic level seven.

There's one intake each academic year in September. The part-time multi professional V300 programme can be undertaken as a stand-alone programme or as an option in the Master of Science (MSc) advanced practice in health care or the MSc advanced clinical practitioner/nursing.

The programme is clearly mapped to the Nursing and Midwifery Council (NMC) Standards for prescribing programmes (SPP) (NMC, 2018) and the Standards of proficiency for nurse prescriber (adoption of the Royal Pharmaceutical Society (RPS, 2016) competency framework for all prescribers) (NMC, 2018).

The programme is delivered over 24 weeks with a requirement of 90 hours practice learning. Practice learning is facilitated by practice assessors and practice supervisors. At least 45 practice learning hours are required to be undertaken with practice assessors. A prescribing practice portfolio assesses practice learning and records prescribing practice experience, critical reflections of prescribing practice and the achievement of the RPS competencies.

The North West non-medical prescribing education group (NWNMPEG) application process is used for application to the V300 programme. There's evidence of partnership working with practice learning partners (PLPs). There are opportunities for PLPs to provide feedback on the programme through formal meetings and informal mechanisms directly with the programme team. The NWNMPEG and PLPs provide a wide strategic network within the North West region. There's evidence of stakeholder contribution in the development, the recruitment process and the delivery of the programme.

The programme team are suitably qualified and have V300 and V100 community practitioner nurse prescribing qualifications. The programme team are further supported by a pharmacist prescriber.

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

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





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

Updated 20 May 2021:

UoL have provided evidence to meet the two NMC conditions, they confirm the university condition is met.

The conditions are met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel				
Recommended outcome	Programme is recommended to the NMC for approval			
to the NMC:	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.			
	<b>Selection, admission and progression:</b> Condition one: The AEI must make the interview process explicit for students within the application process for the prescribing programme. (SFNME R2.6; SPP R1.2)			
	Practice learning: None identified.			
	Assessment, fitness for practice and award: Condition two: The AEI must adapt practice assessment documentation to allow academic assessors to make and record decisions and provide feedback in collaboration with practice supervisors, practice assessors and students across the duration of programme. (SSSA R4.1, R7.2, R9.1; SPP R4.7)			
	Education governance: management and quality assurance: Condition three: Thoroughly review the documentation to provide definitive programme documents that accurately and consistently reflect the			

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	terminology throughout the documentation for the programme. (University condition)
Date condition(s) to be met:	10 May 2021
Recommendations to enhance the programme delivery:	Recommendation one: Consider further strengthening the existing information about the Recognition of Prior Learning (RPL) process in student facing documentation. (SPP R1.4) Recommendation two: Consider further strengthening communication between the practice assessor, student and academic assessor across the programme. (SSSA R9.6; SPP R4.2) Recommendation three: Consider how to further develop partnership working with PLPs in relation to the ongoing development, delivery and support for the prescribing programme. Particularly consider an evaluation of practice assessor and practice supervisor prescribing specific preparation workshops. (SFNME R1.12; SSSA R5.1, R8.1)
Focused areas for future monitoring:	Service user and carer (SUC) involvement in the prescribing programme. Implementation of the SSSA within the prescribing programme.

# Programme is recommended for approval subject to specific conditions being met

#### Commentary post review of evidence against conditions

Revised programme documentation provides evidence that the two NMC conditions are met.

A screenshot of the website information details that there's an interview as part of the application process. Condition one is met.

The revised handbook and prescribing practice portfolio evidence that academic assessor decisions and feedback are recorded in portfolio. Condition two is met.

An email from the Chair of the approval panel confirms the university condition is met. Condition three is met.





The programme is recommended for approval.

AEI Observations	Observations have been made by the education institution YES NO		
Summary of observations made, if applicable			
Final recommendation	Programme is recommended to the NMC for approval		
made to NMC:	Recommended to refuse approval of the programme		
Date condition(s) met:	20 May 2021		
Section three			

#### **NMC Programme standards**

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

#### Partnerships

The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.

## Please refer to the following NMC standards reference points for this section:

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

#### Standard 1: The learning culture:

R1.12 ensure programmes are designed, developed, delivered, evaluated and coproduced with service users and other stakeholders

R1.13 work with service providers to demonstrate and promote inter-professional learning and working

Standard 2: Educational governance and quality:





R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders

R2.4 comply with NMC <u>Standards for student supervision and assessment</u> 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 <u>evaluative summary</u> about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders.

Documentary evidence and the approval visit confirm that there's effective partnership working between key stakeholders and the programme team in the development and delivery of the programme. There's documentary evidence of stakeholder engagement with PLP leads, prescribers and SUCs.

Programme documentation and PLPs confirm that there are mechanisms in place to support the application process. These processes ensure that governance arrangements are in place to support prescribing practice learning. PLPs work in partnership with UoL to provide support for practice assessors and practice supervisors. PLPs ensure practice assessors and practice supervisors are suitably





qualified to support students prior to application to the programme. PLPs tell us that they are in the process of developing a practice assessor register to ensure students are assigned to appropriate practice assessors.

PLPs confirm that there are strong links with the programme team and that they work in partnership with them if there are issues or concerns; they confirm that there's a process for ongoing feedback about how concerns are managed. PLPs tell us that they've been involved in the programme design and delivery discussions; this is clearly evidenced in programme documentation. Some PLPs in attendance at the approval visit confirm they've had less involvement in the programme development due to recent post changes. They confirm that they're aware of the programme specific mechanisms and processes that are in place to ensure, for example, a partnership approach to applications and support for practice assessors and practice supervisors. All PLP representatives confirm a commitment to support the ongoing development and delivery of the programme and are fully aware of the importance of working in partnership with UoL and the programme team at both strategic and operational levels. Programme documentation and PLPs confirm that they work in partnership with the programme team and other AEIs and organisations as part of the regional NWNMPEG. PLPs confirm a partnership approach to the implementation of the SSSA. They confirm commitment to ensure practice assessors and practice supervisors access prescribing specific preparation workshops that have been developed by and are delivered by the prescribing programme team. Practice assessor and practice supervisor representatives tell us that they're aware of the requirements to attend a prescribing specific preparation workshop. Whilst they haven't attended to date, they confirm that this will be required before they undertake the supervision and assessment of students. The programme team tell us that practice assessors and practice supervisors must attend preparation for the roles before they can support students. The application process confirms this requirement. Practice assessors and practice supervisors are further supported to prepare through resources and engagement with the programme team. The programme team are advised to consider how partnership working and engagement with PLPs can be further developed and to evaluate the prescribing specific preparation workshops. (Recommendation three)

SUCs confirm that their voice is heard across elements of the programme. They tell us that they've been fully involved in the design, development and provision of the programme. SUC involvement in the recruitment process includes designing questions and being part of the interview panel. The school leadership team tell us that they recognise the key role that SUCs have across all programmes in the school. They describe the importance of how SUC involvement is embedded throughout learning and teaching strategies within all programmes including the prescribing programme. The school provide support for SUCs to be involved and engaged and there's documentary evidence of a school SUC strategy. SUCs are required to attend training on recruitment, equality and diversity and assessment prior to being involved in the programme and curriculum events. They tell us they're well supported and prepared for their role.





Students tell us that the programme team are enthusiastic and that they provide a quality teaching and learning experience. They confirm that there are opportunities in the programme to support their learning and experience. Students feel well supported to develop prescribing learning experiences in the practice learning environment. They tell us that they enjoy a range of teaching and learning opportunities and they're positive about the blended learning approach. Students share learning with allied health professionals and pharmacists; this contributes to inter-professional learning experiences. Students feel able to provide feedback using the evaluation process during and at the end of the programme. Students tell us that they know how to raise and escalate concerns with PLPs and the programme team. They describe positive learning experiences in the practice learning environment.

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: <u>Standards framework for nursing and midwifery education</u> 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: <u>Standards for student supervision and assessment</u>

	MET	$\boxtimes$	
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			





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 <u>Standards for student</u> supervision and assessment (NMC, 2018).

Demonstrate a robust process to transfer current students onto the <u>Standards for</u> <u>student supervision and assessment</u> (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





NO 🖂

 Evidence of selection process that demonstrates opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, selfemployed 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)

R1.2 is not met. Programme application documentation doesn't provide clear information about the interview process for applicants. The interview information isn't identified as part of the application process. The prescribing programme information on the UoL website don't include reference to an applicant interview. (Condition one)

Provide an <u>evaluative summary</u> 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)



YES 🗌

R1.3 is met. Applicants follow the NWNMPEG application process that requires completion of the NWNMPEG application form. Applicants must demonstrate that they meet the programme entry criteria. NHS employees are identified by PLPs as potential applicants, who assess their suitability as future prescribers. Self-employed applicants must evidence that governance arrangements meet the requirements of the application process. Non-NHS employed registrants must evidence to meet the programme requirements.

The programme team review applications and the identified practice learning environment educational audit prior to interview. The professional registrations of applicants and their identified practice assessors and practice supervisors are checked and confirmed by the programme team. The application process requires assurance that practice assessors and practice supervisors meet the requirements of the SSSA. They must evidence that they're suitability qualified prescribers who prescribe in the same area of practice as students. Practice assessors and practice supervisors are required to complete a detailed self-declaration that includes that they meet the requirements of the SSSA and understand the roles and responsibilities required of them when supporting students. Self-employed and non-NHS employed applicants must complete the NWNMPEG application process. Practice learning environments must meet the requirements of the





NO 🗌

NO 🗌

educational audit which is completed alongside confirmation that the requirements of SSSA are met and that protected learning time is assured. Any Care Quality Commission reports are checked for suitability and there's additional audit questions related to prescribing and medicines management governance arrangements. If there's no practice learning environment educational audit in place the programme team will complete this. There must be a satisfactory educational audit in order for an applicant to be accepted onto the programme. Line managers are required to confirm at application that students will be supported to undertake the theory and practice learning requirements of the programme.

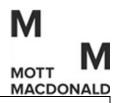
## Evidence provides assurance that the following QA approval criteria are met:

- Processes are in place to consider recognition of prior learning that is capable of being mapped to the RPS Competency Framework for all Prescribers (R1.4) YES 🖂
- 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
- 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 🖂

YES 🖂

Proposed transfer of current students to the programme under review From your documentary analysis and your meeting with students, provide an evaluative summary to confirm how the Standards for prescribing programmes and Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers) will be met through the transfer of existing students onto the proposed programme.





Discussion at the approval visit confirms that students won't transfer to the proposed programme. If any current students interrupt their studies, they'll complete the current programme.
Proposed transfer of current students to the <u>Standards for student</u> <u>supervision and assessment (SSSA)</u> (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.
Discussion at the approval visit confirms that there are no students transferring to the SSSA as they will have completed the programme.
Assurance is provided that Gateway 1: <u>Standards framework for nursing and</u> <u>midwifery education</u> relevant to selection, admission and progression are met YES X NO
Outcome
Is the standard met? MET NOT MET
It's not clear from the admissions process and programme documentation that there's an interview as part of the application and selection process. Condition one: The AEI must make the interview process explicit for students within the application process for the prescribing programme. (SPP R1.2) <b>Date:</b> 12 April 2021
Post event review
Identify how the condition(s) is met: A screenshot of the application website and a review of the UoL website confirms that the application process has been updated to include information for applicants about attendance at an interview. Condition one is met. Evidence: Screenshot, application website, undated Date condition(s) met: 20 May 2021
Revised outcome after condition(s) met: MET NOT MET

## **Standard 2: Curriculum**

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





R2.1 ensure programmes comply with the NMC Standards framework for nursing and midwifery education R2.2 ensure that all prescribing programmes are designed to fully deliver the competencies set out in the RPS A Competency Framework for all Prescribers, as necessary for safe and effective prescribing practice R2.3 state the learning and teaching strategies that will be used to support achievement of those competencies R2.4 develop programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice: R2.4.1 stating the general and professional content necessary to meet the programme outcomes R2.4.2 stating the prescribing specific content necessary to meet the programme outcomes R2.4.3 confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing R2.5 ensure that the curriculum provides a balance of theory and practice learning, using a range of learning and teaching strategies R2.6 ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language Findings against the standard and requirements Evidence provides assurance that the following QA approval criteria are met: There is evidence that the programme complies with the NMC Standards framework for nursing and midwifery education (R2.1) YES 🖂 NO 🗌 There is evidence that the programme is designed to fully deliver the competencies set out in the RPS Competency Framework for all *Prescribers*, as necessary for safe and effective prescribing practice (R2.2). YES 🔀 NO Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met Evidence of the learning and teaching strategies that will be used to support achievement of those competencies (R2.3) NOT MET R2.3 is met. Programme documentation and the approval visit confirm that there's a variety of learning and teaching strategies identified that support students to achieve the RPS competencies. The programme is clearly mapped against the RPS competency framework for all prescribers. Students undertake two modules; 15





the essentials of pharmacology for non-medical prescribing and non-medical prescribing practice. Both must be successfully completed to achieve the programme and record the nurse independent and supplementary prescriber on the NMC register.

A blended learning approach using lectures, workshops and self-directed learning is utilised. Face-to-face learning is undertaken once weekly across the duration of the programme. The virtual learning environment (VLE) supports directed and self-directed study opportunities. Lectures are recorded and available on the VLE for students to review for the duration of the programme. Programme documentation confirms that the teaching and learning strategies are designed to meet the RPS competencies.

Documentary evidence confirms and students tell us that they're signposted to additional support services at UoL, particularly for the development of numeracy and academic skills. At interview, applicants are signposted to the UoL additional resources.

The assessments are clearly mapped to the programme outcomes and the RPS competencies. An examination and practical assessments test consultation, diagnosis, prescribing and prescription writing skills; these are undertaken in the school and assessed by the programme team. Practice assessment requires students to demonstrate progression towards achievement of the RPS in the prescribing practice portfolio document. A record of 90 hours practice learning is recorded in the prescribing practice portfolio document and confirmed by practice assessors. Students are required to complete reflective accounts within the prescribing practice portfolio document. Achievement of the RPS competencies is confirmed in a final statement of competency in the prescribing practice portfolio by practice assessors.

## 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

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teaching strategies are handbook and module each part of the progra	ce learning allocations. A rang e detailed in the programme s e descriptors with theory / prac amme and at end point. There outcomes specified. (R2.5)	pecification, p	rogramme detailed at
· · ·	• • • •	YES 🖂	NO 🗌
If relevant to the review			
	at programmes delivered in W		with any
legislation which supp	orts the use of the Welsh lang YES	NO	N/A 🖂
The programme is delivered	in England.		
	ateway 1: <u>Standards framewo</u>		<u>i and</u>
<u>midwifery education</u> relevant	to curricula and assessment	are met YES 🖂	ΝΟ
Assurance is provided that G <u>assessment</u> relevant to curri	ateway 2: <u>Standards for stud</u> icula are met	<u>ent supervisio</u> YES ⊠	<u>n and</u> NO 🗌
Outcome			
Is the standard met?	MET		Г МЕТ 🗌
Date: 12 April 2021			
Date: 12 April 2021 Post event review			
•	s) is met:		
Post event review Identify how the condition( N/A Date condition(s) met:	s) is met:		
Post event review Identify how the condition( N/A Date condition(s) met: N/A			
Post event review Identify how the condition( N/A Date condition(s) met:		Г 🗌 NO1	Г МЕТ 🗌

#### Standard 3: Practice learning

Approved education institutions must:

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

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

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

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





R3.4 ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC <u>Standards for student supervision and assessment</u>

## Findings against the standard and requirements

Provide an <u>evaluative summary</u> 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, students and PLPs confirm that governance arrangements are in place for practice learning for both NHS and self-employed applicants. The NWNMPEG application provides assurance that there are processes in place to ensure all practice learning environments meet the requirements for prescribing governance. Line managers must evidence support for protected learning, the suitability of applicants and that there's appropriate supervision and assessment of students. Practice assessors and practice supervisors must be prepared for the supervision and assessment of prescribing students. All practice learning environments must have a satisfactory educational audit. Self-employed applicants are required to provide additional assurance that governance arrangements for practice learning are in place. The programme team are responsible for checking that governance arrangements are in place to ensure that prescribing practice learning environments placements provide a safe and supportive learning environment. Academic assessors monitor that practice learning is protected.

Programme documentation demonstrates that there's a collaborative approach to any concerns about students or if students raise concerns in practice. PLPs and students tell us that they know how to raise and escalate concerns.

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 X NO X

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





Evidence to ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment (R3.3)
 MET NOT MET 

R3.3 is met. The approval visit confirms the use of technology to support learning and assessment. Programme documentation confirms that simulation-based learning opportunities are provided and support the preparation for the practical assessment of prescribing practice. Students practice prescribing assessment and prescription writing skills. Technology enhanced learning is embedded within the programme. Students have access to the online British national formulary, the VLE supports directed and self-directed study opportunities. Lectures are recorded and available on the VLE for students to revisit.

The programme team describe how the Health Education England (HEE) standardised numeracy assessment tool process (SN@P) is accessed online. SN@P is used to further support students who require additional support with numeracy. The programme content utilises online learning tools and resources provided by the HEE co-operative. Students complete online assessments and rate this highly. Students tell us that the online resources reflect the work undertaken within the classroom led by the programme team. Students are positive about the use of online learning to support their engagement with the programme whilst remaining in practice roles. They confirm that online and flexible learning supports their development.

Evidence provides a	assurance that the followi	ing 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	$\square$	NO 🗌
Assurance is provided that Gateway 1: <u>Standards framidwifery education</u> relevant to practice learning are in		rsing a	<u>nd</u>
mawnery education relevant to practice learning are i	YES	$\square$	NO 🗌
Assurance is provided that Gateway 2: Standards for	student super	vision a	and
assessment relevant to practice learning are met	YES	$\square$	
Outcome			
Is the standard met?	MET 🖂	NOT N	

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Date: 12 April 2021		
Post event review		
Identify how the condition	(s) is met:	
N/A		
Date condition(s) met:		
N/A		
Revised outcome after cor	ndition(s) met: MET	NOT MET
N/A		

#### Standard 4: Supervision and assessment

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

R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC <u>Standards framework for nursing and midwifery education</u>

R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC <u>Standards for student supervision and assessment</u>

R4.3 appoint a programme leader in accordance with the requirements of the NMC <u>Standards framework for nursing and midwifery education</u>. The programme leader of a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience

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

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

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

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

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

R4.8 assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice R4.9 ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies. This includes all students:

R4.9.1 successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80 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 <u>evaluative summary</u> 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 <u>Standards framework for nursing and midwifery education</u> (R4.1) MET X NOT MET

R4.1 is met. The programme team review a practice learning environment checklist within the application process to ensure that governance arrangements are appropriate and in place. This is confirmed by PLPs. The suitability of practice assessors is determined at application; practice assessors and practice supervisors confirm that they meet the requirements for supervision and assessment. There's effective communication between practice assessors, the programme leader and academic assessors to highlight any concerns. Students are advised about and have access to the procedure for raising a concern both within the practice and UoL learning environments. Students confirm that they're confident to discuss concerns in the first instance with practice assessors or the programme leader. Documentation and discussion at the approval visit confirm that there's a process for the academic assessor to confirm student achievement of the RPS competencies.

• There is evidence of how the <u>Standards for student supervision and</u> <u>assessment</u> 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. The practice handbook for students, practice assessors and practice supervisors provide comprehensive information on the roles and responsibilities for practice assessors, practice supervisors and academic assessors. Practice assessors and practice supervisors are identified by applicants. Their suitability for the role is confirmed by line managers and the programme team as part of the application process.

Practice assessors and practice supervisors are supported and prepared through resources and engagement with the programme team. Prescribing leads support practice assessors and practice supervisors in PLP organisations. Prescribing





specific workshops are provided by the programme team, who undertake one to one preparation if required. A record of attendance is maintained and held by the programme team. Practice assessors and practice supervisors tell us that they are well supported by the programme team and prescribing leads.

The programme team comprises of three qualified prescribers who act as academic assessors. Academic assessors are supported in their role by UoL and are required to complete a self-declaration as evidence of how they meet the requirements of the academic assessor role.

PLPs, practice assessors and practice supervisors confirm that the programme team are supportive and that they can contact them if there are any student issues or concerns. They tell us that if they have any questions or require clarification about any aspect of learning, teaching and assessment, the programme team are responsive. The programme team meet with students during the programme as part of programme teaching sessions. As this meeting doesn't include practice assessors or practice supervisors, the programme team are advised to consider documenting this in the prescribing practice portfolio. This will support clearer communication channels and further evidence a record of the discussion for practice assessors, practice supervisors and students to review. (Recommendation two)

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

• Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience (R4.3)

YES 🖂

NO [

• Evidence of the programme leader working in conjunction with the LME and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes (R4.4)

YES 🗌 NO 🗌	N/A 🖂
------------	-------

UoL don't deliver a midwifery programme, midwives won't access the programme. Midwives who undertake a prescribing qualification attend a local AEI.

Provide an <u>evaluative summary</u> 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)





R4.5 is met. Documentary analysis and discussion at the approval visit provide evidence that there's a process to confirm that practice assessors are experienced prescribers and registered healthcare professionals. This is checked by the programme team during the application process. Applications to the programme require the support of PLPs and line managers. This is reviewed and confirmed by the programme team during the application and interview process. Practice assessors and practice supervisors are identified on the application form and their professional registration checked on professional registers by the programme team.

Practice assessors and practice supervisors confirm that completion of the required 90 practice hours is recorded and verified in the prescribing practice portfolio. Programme documentation confirms that students engage with academic assessors and the programme team over the programme duration. Academic assessors monitor protected learning time as part of a support engagement with students, practice assessors and practice supervisors.

The practice handbook and assessment in practice document clearly states the process where the same person fulfils the practice assessor and practice supervisor roles. In cases where this occurs the programme team and practice assessors will provide evidence of the reason for this.

#### 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
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• 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 N	0	$\square$
-------	---	-----------

R4.7 is not met. Discussion at the approval visit confirms that students receive feedback from SUCs, practice assessors, practice supervisors and academic assessors on their progression towards achievement of the RPS. There's a competency statement in the prescribing practice portfolio that's agreed by practice assessors and academic assessors. It's not clear in the prescribing practice portfolio how academic assessors in partnership with practice assessors, practice supervisors and students record decisions and provide feedback about student progression across the programme. (Condition two)

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	to assess the student's suitability oletion of a period of practice-bas ing practice (R4.8)		
met, addressing all are This includes: - successfully passing a be passed with a minin - successfully passing a calculation of medicine	to ensure that all programme lea as necessary to meet the RPS co a pharmacology exam (the pharm num score of 80%), and a numeracy assessment related to s (the numeracy assessment mu	ompetencies (R4.9). nacology exam must to prescribing and	
score of 100%).		YES 🛛 NO 🗌	
	ateway 1: <u>Standards framework fo</u> to supervision and assessment a <b>Y</b>		
•	ateway 2: <u>Standards for student s</u> rvision and assessment are met <b>Y</b>	ES 🗌 NO 🖂	
It's not clear in the prescribing practice portfolio how academic assessors in partnership with practice assessors, practice supervisors and students record decisions and provide feedback about student progression across the programme. (Condition two)			
Outcome			
Is the standard met?	MET 🗌	NOT MET 🔀	
It's not clear in the prescribing practice portfolio how academic assessors in partnership with practice assessors, practice supervisors and students record decisions and provide feedback about student progression across the programme. Condition two: The AEI must adapt the prescribing practice assessment documentation to allow academic assessors to make and record decisions and feedback in collaboration with practice assessors, practice supervisors and the student across the duration of programme. (SSSA R4.1, R7.2, R9.1; SPP R4.7)			
Date: 12 April 2021			
Post event review			
Identify how the condition(s	s) is met:		





The handbook and prescribing practice portfolio clearly evidence the process for communication between practice assessors, practice supervisors and academic assessors. This includes evidence that academic assessor decisions and feedback are recorded in portfolio.

Condition two is met.

Evidence:

Revised, handbook, undated Revised prescribing practice portfolio, undated

Date condition(s) met: 20 May 2021

Revised outcome after condition(s) met:

MET 🖂

NOT MET

Standard 5: Qualification to be awarded

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

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

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

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

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

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

# Findings against the standards and requirements

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

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

- a community practitioner nurse (or midwife) prescriber (V100/V150), or

- a nurse or midwife independent/supplementary prescriber (V300) (R5.1)

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	`	YES 🖂 🛛 I	NO
NMC approved pres	that successful participation in and contribution in and contribution programme leads to accreditate elor's degree as a minimum award (I	ation at a leve R5.2)	
registered with the N programme and if th	ice to inform the student that the awa IMC within five years of successfully ey fail to do so they will have to retal mme in order to qualify and register t	completing th ke and succes	ssfully
	•	YES 🖂 🛛 I	
and they may only p prescribe from and v	g qualification has been annotated o rescribe from the formulary they are within their competence and scope of the <u>Standards framework for nursing</u>	qualified to f practice (R5. <b>YES</b> ⊠ I	.4) NO 🗌
	ualification to be awarded are met		
		YES 🛛 🛛 I	
Outcome Is the standard met?	MET	NOT ME	<b>T</b>
Date: 12 April 2021			
Post event review Identify how the condition	n(s) is mot		
N/A	11(3) 13 11161.		
Date condition(s) met: N/A			
Revised outcome after co	ondition(s) met: MET	NOT ME	Т





## 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	$\boxtimes$	
Programme specification(s)	$\boxtimes$	
Module descriptors		
Student facing documentation including: programme		
handbook	$\boxtimes$	
Student university handbook	$\boxtimes$	
Practice assessment documentation	$\square$	
Practice placement handbook	$\square$	
PAD linked to competence outcomes, and mapped against RPS A Competency Framework for all Prescribers	$\boxtimes$	
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)		
Mapping document providing evidence of how the <i>Standards for student supervision and assessment</i> (NMC, 2018) apply to the programme(s) (Gateway 2)		
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)		
Curricula vitae for relevant staff	$\boxtimes$	
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website		
Written placement agreements between the education institution and associated practice learning partners to support the programme intentions.	$\boxtimes$	
If you stated no above, please provide the reason and mitig	ation	·
List additional documentation: Post visit documentation: Screenshot, application website, undated Revised, handbook, undated Revised prescribing practice portfolio, undated		

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Confirmation email from the	chair that the university condition is m	
2021		
Additional comments:		
None identified.		

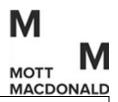
# During the event the visitor(s) met the following groups:

	YES	NO
Senior managers of the AEI/education institution with	$\boxtimes$	
responsibility for resources for the programme		
Senior managers from associated practice learning	$\boxtimes$	
partners with responsibility for resources for the		
programme		
Programme team/academic assessors	$\boxtimes$	
Practice leads/practice supervisors/ practice assessors	$\boxtimes$	
Students	$\boxtimes$	
If yes, please identify cohort year/programme of study:		
V300 students, 2020/2021 x six		
Service users and carers	$\boxtimes$	
If you stated no above, please provide the reason and mit	igation	
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)		$\square$
Library facilities		$\boxtimes$
Technology enhanced learning		$\square$
Virtual learning environment		
Educational audit tools/documentation		$\boxtimes$
Practice learning environments		$\square$
If yes, state where visited/findings		
If you stated no above, please provide the reason and mit	igation	
This is an existing AEI and visits to resources weren't requ	uired.	
Additional comments:		
None identified.		





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Issue record			
Final Report			
Author(s):	Alison Wood	Date:	19 April 2021
Checked by:	Bernadette Martin	Date:	26 April 2021
Submitted by:	Lucy Percival	Date:	21 June 2021
Approved by:	Emiko Hughes	Date:	22 June 2021