



Programme approval visit report

Section one

University of Stirling
NHS Forth Valley NHS Tayside NHS Dumfries and Galloway NHS Ayrshire and Arran NHS Lothian NHS Borders Private, voluntary and independent health care providers Education and social care providers
Independent and supplementary nurse prescribing V300
Prescribing for Health Care Professionals
England, Wales, Northern Ireland Level 5 Level 6 Level 7 SCQF Level 8 Level 9 Level 10 Level 11
England, Wales, Northern Ireland Level 5 Level 6 Level 7 SCQF Level 8 Level 9 Level 10 Level 11
England, Wales, Northern Ireland Level 5 Level 6 Level 7 SCQF



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	MACDONALD
	Level 8 Level 9 Level 10
	Level 11
Date of approval visit:	
	27 October 2020
Programme start date:	
Independent and supplementary nurse prescribing V300 Community practitioner nurse prescribing V150 Community practitioner nurse prescribing V100	1 February 2021 N/A N/A
QA visitor:	Registrant Visitor: Neil Thomas





Summary of review and findings

The University of Stirling (UoS), faculty of health sciences and sport (the faculty) is an established approved education institution (AEI). The faculty present the independent and supplementary prescribing (V300) programme for approval. The programme is mapped against the NMC Standards for prescribing programmes (SPP) (NMC, 2018) and Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS, 2016) competency framework for all prescribers (NMC, 2018).

The V300 is a 40-credit award delivered at the Scottish credit and qualifications framework (SCQF) academic levels nine and 11. It can be undertaken as a standalone programme or as part of the Master of Science (MSc) advanced clinical practice programme. The multi-professional programme can be accessed by allied health professionals (AHPs).

Programme documentation and approval process confirm evidence of effective partnership working between the faculty and key stakeholders. There's evidence of engagement with practice learning partners (PLPs), service users and carers (SUCs) and students in the development of the programme.

The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) and the Standards for student supervision and assessment (SSSA) (NMC, 2018) are met at programme level.

The programme is recommended for approval. There's one NMC recommendation and two joint NMC and university recommendations.

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

Recomme	nded outcome of the approval panel
Recommended outcome to the NMC:	Programme is recommended to the NMC for approval
	Programme is recommended for approval subject to specific conditions being met
	Recommended to refuse approval of the programme





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	Effective partnership working: collaboration, culture, communication and resources:
Conditions:	None identified.
Conditions.	None identified.
	Selection, admission and progression:
	None identified.
	Practice learning:
	None identified.
	Assessment fitness for practice and award:
	Assessment, fitness for practice and award: None identified.
	None identified.
	Education governance: management and quality assurance:
	None identified.
Date condition(s) to be	N/A
met:	
Recommendations to	Recommendation one: The faculty management
enhance the programme	team should continue to proactively monitor and
delivery:	review the resources available to support the academic assessor role and to effectively deliver the
	programme. (SFNME R2.14) (NMC and University
	recommendation)
	, , , , , , , , , , , , , , , , , , , ,
	Recommendation two: Monitor and continue to
	enhance the SUCs involvement in future
	development, delivery and assessment of the
	programme. (SFNME R1.12) (NMC and university
	recommendation)
	Recommendation three: Monitor and evaluate the
	implementation of the SSSA from a prescribing
	perspective for PLPs, AEI and prescribing students.
	(SPP R4.2)
Focused areas for future	
1	lan in den i
monitoring:	None identified.

Programme is rec	ommended for appro being m	val subject to specifi net	c conditions
Commentary post re	view of evidence aga	inst conditions	
AEI Observations	Observations have institution	been made by the ed YES	lucation NO





Summary of	The AEI confirm the accuracy of the report.	
observations made,		
if applicable		
Final	Programme is recommended to the NMC for approval	\boxtimes
recommendation made to NMC:	Recommended to refuse approval of the programme	
Date condition(s)	N/A	
met:		

Section three

NMC Programme standards

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

<u>Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers)</u>
(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 and midwives (NMC, 2015 updated 2018)

QA Framework for nursing, midwifery and nursing associate education (NMC, 2018)

QA Handbook

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 there's effective partnership working between key stakeholders and the faculty in the development of the programme. PLPs, students and SUCs tell us they've contributed to the development of the programme. Documentary evidence confirms a commitment to the development of academic roles with clear guidance on the responsibilities of academic staff for programme delivery, management and student support. Senior faculty management team representatives tell us they're committed to ensuring the programme is resourced. The programme team tell us the programme is suitably resourced and they're supported to develop their academic and professional roles.





Academic staff from the faculty and clinicians from clinical practice support the delivery of the programme.

The programme leader is a member of Scottish prescribing programme leaders' network (SPPLeN). This collaborative network supports a national profile approach to partnership working in ensuring that prescribing programmes meet requirements in line with NHS education for Scotland (NES). Programme documentation, the senior faculty management team and PLPs confirm governance processes associated with prescribing and the practice learning environment are assured.

The senior faculty management team describe how the AEI work in partnership at strategic levels across Scotland to ensure a robust approach to the implementation of the SSSA. PLPs are engaged and committed to supporting the SSSA and tell us they support nurses and AHPs undertaking the role of practice assessors and practice supervisors. The programme team describe how operational collaboration with the prescribing leads forum and curriculum development group include student and SUC contribution. Documentary evidence and PLPs confirm they've contributed to the implementation of the SSSA. They tell us they're fully engaged in the consultation and development of the programme. PLPs tell us about the effective communication and positive working relationship they have with the faculty.

Students tell us the programme supports the development and expansion of their clinical roles. They confirm they're satisfied with the delivery and organisation of the programme. Documentary evidence and the approval visit confirms student feedback influences the development of the programme. The student voice is captured through programme evaluations, students are represented at staff and student meetings. Documentary evidence and students confirm that they undertake evaluation of the programme. Students describe a positive experience of the programme and that they can provide both verbal and written feedback. The prescribing practice assessment document (PAD) facilitates ongoing evaluation through reflection and reviews across the duration of the programme. Students tell us they're supported to share their views and issues are dealt with promptly by practice assessors, practice supervisors or the programme team. Online access to the virtual learning environment (VLE) Canvas, ensures learning is supported with access to additional academic support. Student, practice assessor and practice supervisor facing documentation clearly detail the process for raising concerns in the faculty and in practice learning environments. Students confirm they know how to raise concerns. They tell us the programme team are supportive and proactive in responding to their questions or concerns. They tell us learning in practice is protected; if they have issues, they're confident to report these to practice assessors, academic assessors or the programme leader.

The programme team and PLPs have processes ensuring reasonable adjustments are in place in the practice learning environment to support students with specific health challenges or disabilities. Student facing documentation describes how, if





students have occupational health requirements, they can access specific organisational occupational health service support.

Students commend the programme team for the level of support they provide. Students tell us the level of communication between the programme team and PLPs is positive, they confirm that any areas of concern that arise are consistently resolved to their satisfaction.

Documentary evidence and the approval process confirms SUC involvement in the development and delivery of the programme. The faculty SUC involving people and communities implementation plan confirms a commitment to ensure SUCs contribute to NMC programmes. The inclusion of SUCs in the development of the programme is evident in minutes of curriculum development group meetings. SUC representatives are complimentary in their views of the programme, they confirm involvement in its development. Programme documentation demonstrates a commitment to increase the involvement of SUCs in the delivery of the programme. SUC representatives describe how they're involved in the application and selection process. The application form includes a SUC specific question developed by them. Applicants response to the question is reviewed by SUCs and the programme team. The programme team, in partnership with SUCs develop problem-based scenarios used in the delivery of the programme. Students reflect on SUC feedback in the practice learning environment and record this in the PAD.

SUCs confirm they receive support and training for their role within the faculty. SUCs tell us they welcome the opportunity of further involvement in the programme acknowledging the importance of the non-medical prescribing role. The programme team are advised to consider how SUCs can be further involved in the design, development, delivery and evaluation of the programme. (Recommendation two)

Assurance is provided that the AEI works in partnership with their	practice learning
partners, service users, students and all other stakeholders as ide	
Gateway 1: Standards framework for nursing and midwifery education	
MET 🗵	NOT MET
Assurance is provided that the AEI works in partnership with their partners, service users, students and all other stakeholders as ide Gateway 2: Standards for student supervision and assessment MET	
Post event review	
Identify how the condition(s) is met	
N/A	
Date condition(s) met:	
Date deliation(e) met.	



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Revised outcome after condition(s) met N/A

MET

NOT MET

Student journey through the programme

Standard 1: Selection, admission and progression

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

- R1.1 ensure that the applicant is a registered nurse (level 1), a registered midwife or a SCPHN before being considered as eligible to apply for entry onto an NMC approved prescribing programme
- R1.2 provide opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non- NHS employed registrants) to apply for entry onto an NMC approved prescribing programme
- R1.3 confirm that the necessary governance structures are in place (including clinical support, access to protected learning time and employer support where appropriate) to enable students to undertake, and be adequately supported throughout, the programme
- R1.4 consider recognition of prior learning that is capable of being mapped to the RPS Competency Framework for all Prescribers
- R1.5 confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme
- R1.6 confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas:
- R1.6.1 Clinical/health assessment
- R1.6.2 Diagnostics/care management
- R1.6.3 Planning and evaluation of care
- R1.7 ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme

Note: Education institutions and their practice learning partners may propose to transfer current students onto the new programme to meet the *Standards for*





prescribing programmes and Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers). If so, evidence must be provided to support this proposed transfer as part of the education institution's mapping process at Gateway 3.

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

Proposed transfer of current students to the <u>Standards for student</u> <u>supervision and assessment</u> (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

	(R1.1) YES ⋈ NO □
	eligible to apply for entry onto an NMC approved prescribing programme
	(level 1), a registered midwife or a SCPHN before being considered as
•	Evidence of processes to ensure that the applicant is a registered nurse

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)

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)





R1.3 is met. Programme documentation and the approval process confirms there's an effective and collaborative approach to the application process. Applicants complete a comprehensive nationally adopted application process. They must have employer support; line managers sign to confirm governance arrangements are in place to support protected practice learning time. and prescribing practice. The application form ensures applicants fully meet NMC entry requirements. Practice assessors and practice supervisors must be identified and meet the requirements of the SSSA. They must sign to confirm their suitability to supervise and assess students and that they prescribe in the same field of prescribing practice as the applicant. The professional registrations of applicants, practice assessors and practice supervisors are checked by the programme team. Organisational prescribing leads sign to confirm they support the application.

Prescribing must be identified as essential to the applicant's role and there must be the intention to prescribe. There's a strategic approach to ensure prescribing is effectively managed and practice learning is protected. The suitability of all practice learning environments is assured through the Scottish approach to the management of educational audit. The quality management of practice learning environments (QMPLE) database is the mechanism for ensuring they meet the requirements of the SSSA and the SFNME. Practice learning environments are audited by practice education facilitators (PEFs).

Self-employed and non-NHS employed V300 applicants must meet all entry requirements. They must work and learn in a practice learning environment which is suitably registered with the systems regulator Health Improvement Scotland (HIS) and have a satisfactory educational audit. As for all applicants they must have a suitable protection of vulnerable groups (PVG) disclosure check. An academic and professional reference must be provided. Documentary evidence and the programme team confirm non-NHS employed, or self-employed applications are fully scrutinised by the programme leader and managed on an individual basis. Academic assessors monitor practice learning to ensure learning is protected.

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 <i>Competency Framework for all Prescribers</i> (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 a effective practice at a level of proficiency ap be undertaken and their intended area of pr following areas (R1.6): Clinical/health assessment Diagnostics/care management 	propriate to the pr	ogramme to	
- Planning and evaluation	YES	NO □	
 Processes are in place to ensure that applic supplementary/independent prescribing pro with the NMC for a minimum of one year pri the programme (R1.7) 	grammes have be		
	YES [× NO	
Proposed transfer of current students to the pr	ogramme under r	review	
From your documentary analysis and your med			
an <u>evaluative summary</u> to confirm how the <u>State programmes</u> and <u>Standards of proficiency for adoption of the RPS Competency Framework</u> through the transfer of existing students onto	ndards for prescr nurse and midwif for all Prescribers	ribing e prescriber s) will be met	
The programme leader confirms there's no transfe proposed programme. It's anticipated that current programme. Students who interrupt will complete t	students will have	completed the	
Proposed transfer of current students to the <u>supervision and assessment (SSSA)</u> (NMC, 201		<u>ent</u>	
From your documentary analysis and your med confirm if students will be transferring to the S informed choice and are fully prepared for sup. The programme leader confirms there's no transfer SSSA. Current students will complete the current programme.	etings at the appr SSA, and if so that ervision and asse r of current studen	at they have essment.	
·			
Assurance is provided that Gateway 1: <u>Standards</u> <u>midwifery education</u> relevant to selection, admission		are met	
Outcome			
Is the standard met?	MET ⊠ N	NOT MET 🗌	
Date: 27 October 2020			





Doot event review		MAS	DONALD
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 N	ЛЕТ 🗌
N/A			
Standard 2: Curriculum			
Approved educations institutions, together with practice	leari	ning nar	tners
must:	icari	iiig pai	tileis,
must.			
DO 4 and an arrangement of the state of the			
R2.1 ensure programmes comply with the NMC Standards fra	amev	vork tor i	nursing
and midwifery education			_
R2.2 ensure that all prescribing programmes are designed to			
competencies set out in the RPS A Competency Framework	for al	Il Prescri	bers, as
necessary for safe and effective prescribing practice			
R2.3 state the learning and teaching strategies that will be us	ed to	support	
achievement of those competencies			
R2.4 develop programme outcomes that inform learning in re	latior	to the fo	ormulary
relevant to the individual's intended scope of prescribing prac			•
R2.4.1 stating the general and professional content necessary		neet the	
programme outcomes	,		
R2.4.2 stating the prescribing specific content necessary to m	eet t	he progr	amme
outcomes	1001	ino progr	ammo
R2.4.3 confirming that the programme outcomes can be appli	iod to	all narte	s of the
NMC register: the four fields of nursing practice (adult, menta			
disabilities and children's nursing); midwifery; and specialist of	OHIII	iuriity pu	DIIC
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	ı any	legislati	on
which supports the use of the Welsh language			
Findings against the standard and requirements			
Evidence provides assurance that the following QA appro	oval	criteria	are met:
 There is evidence that the programme complies with the 	ne NN	MC Stan	dards
framework for nursing and midwifery education (R2.1)			
marriewerk for majoring and milawhory oddoaction (112.1)	VΕ	s 🖂	NO 🗌
			.40
There is evidence that the pregramme is decired to the	اء عال	lalivar H-	•
There is evidence that the programme is designed to find the PRS. Compared to the programme is designed to find the programme in the programme is designed to find the programme in the programme is designed to find the programme in the programme is designed to find the programme in the programme is designed to find the programme in the programme is designed to find the programme in the programme in the programme is designed to find the programme in the prog	-		U
competencies set out in the RPS Competency Framev			(D0.0)
Prescribers, as necessary for safe and effective prescr	gniai	practice) (K2.2).
			🔽
	YE	S 🖂	NO



assurance of nursing, midwifery and



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

	,	$MET \boxtimes$	NOT	MET
	achievement of those competencies (R2.3)			
•	Evidence of the learning and teaching strategies	s that will b	pe used to	support

R2.3 is met. Documentary evidence and the approval process confirm teaching and learning strategies support achievement of the RPS competences. A blended learning approach includes classroom teaching and online guided and independent learning supported by the VLE. Students undertake 10 contact days on campus, with 12 days delivered via online learning through the VLE Canvas site. Direct learning comprises of lectures, group discussion, seminars and tutorials which encourage problem solving and reflective practice.

Practice learning and progression towards achievement of the RPS competencies is supported by practice assessors and practice supervisors. Programme outcomes are mapped against the RPS competency framework for all prescribers. Achievement of the RPS competencies is verified by the practice assessor in agreement with the academic assessor. The programme is co-taught with healthcare professionals, students are from a variety of healthcare backgrounds supporting inter-professional learning.

The PAD requires practice assessors to record confirmation of achievement of the RPS competencies; academic assessors record agreement. Programme documentation details clear communication processes between practice assessors, practice supervisors and academic assessors. The PAD has been developed nationally to ensure consistency of practice learning across Scotland.

Students tell us teaching and online resources support their learning and that there's effective support from the programme team. They confirm learning and teaching strategies prepare them for prescribing practice. Students confirm there's effective communication between PLPs, the programme team and practice assessors.

Programme documentation demonstrates mapping of programme learning outcomes to the assessments; the programme is mapped to the RPS competency framework for all prescribers. Formative assessment supports preparation for summative assessments. Students receive ongoing feedback on their progress by the programme team. Summative assessments include numeracy and pharmacology examinations. The PAD records progression towards achievement of the RPS competencies. Reflective accounts and a written assignment are related to clinical prescribing scenarios.

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





Evidence of programme outcomes that inform learning in relation to the

Identify how the condition(s) is met: N/A			
Post event review			
Date: 27 October 2020	IET 🖂 🛚 I	NOT MET [
Outcome	IET 🗆	NOT MET	
Outcome			
Assurance is provided that Gateway 2: <u>Standards for stassessment</u> relevant to curricula are met	<u>udent superv</u> YES ⊠		
Assurance is provided that Gateway 1: <u>Standards frame</u> <u>midwifery education</u> relevant to curricula and assessme			
The programme is delivered in Scotland.			
If relevant to the review ■ Evidence to ensure that programmes delivered in legislation which supports the use of the Welsh la YES ———————————————————————————————————		•	
aims, descriptors and outcomes specified. (112.0)	YES 🔀	NO 🗌	
 The programme structure demonstrates an equal practice learning. This is detailed in the designate descriptors and practice learning allocations. A ra- teaching strategies are detailed in the programme handbook and module descriptors with theory / p each part of the programme and at end point. The aims, descriptors and outcomes specified. (R2.5) 	ed hours in thange of learnie specification ractice balanere are appro	ne module ing and n, programme ce detailed at	
specialist community public health hursing	YES 🔀	NO 🗌	
 (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 			
(D2.4).	ppe of prescri	bing practice	

N/



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Date condition(s) met:		MAGDONALI	
· ,			
N/A		NOT MET	
Revised outcome after condition(s) met:	MET 🗌	NOT MET	
N/A			
Standard 3: Practice learning			
Approved education institutions must:			
••			
R3.1 ensure that suitable and effective arrangements	and governar	nce for practice	
learning are in place for all applicants including arrangements			
to those applicants who are self-employed	joinoino opoc	micany tanoroa	
to those applicants who are self-employed			
Approved advection institutions, together with pr	aatiaa laarnii	ac partners	
Approved education institutions, together with pra	actice learning	ig partilers,	
must:	11.40 00 1	In the same to the	
R3.2 ensure that practice learning complies with the N	NIVIC <u>Standar</u>	<u>as for student</u>	
supervision and assessment			
R3.3 ensure technology enhanced and simulation-base			
used effectively and proportionately to support learning	ig and assess	sment	
R3.4 ensure that students work in partnership with the	education pr	rovider and their	
practice learning partners to arrange supervision and			
with the NMC Standards for student supervision and a			
with the two danadrae for stadent supervision and t	<u> </u>		
Findings against the standard and	requirements	2	
i manigo agamot the standard and	equirements	•	
Provide an evaluative summary from your docume	ontary analy	eie and	
evidence AND discussion at the approval visit to o			
provided that the QA approval criteria below is me	et or not met		
 Evidence to ensure that suitable and effective a 			
governance for practice learning are in place for all applicants including			
arrangements specifically tailored to those app	licants who a	re self-	
employed (R3.1)			
, , ,	MET igtimes	NOT MET	
R3.1 is met. Documentary evidence confirms suitable	and effective	arrangements	
•	and are in place to assure practice learning governance for students including self-		

R3.1 is met. Documentary evidence confirms suitable and effective arrangements and are in place to assure practice learning governance for students including self-employed and non-NHS students. Application screening confirms QMPLE educational audits are in place across NHS health boards for practice learning environments.

There's evidence of how programme teams work collaboratively with prescribing specific professional groups who ensure governance frameworks are in place and are effective in ensuring sound practice learning for students. Students tell us they're supported by their employers to ensure practice learning is protected. They confirm confidence in their employers to support them in their prescribing roles and are aware of the strategic importance of prescribing. Documentary evidence and





students confirm if they disclose issues associated with protected practice learning time the faculty practice learning support protocol procedure is initiated.

Self-employed and non-NHS employed applicants are screened at application to ensure suitable HIS reporting is in place this is confirmed by the programme team and the faculty senior management team. The additional tailored section of the application form enables the programme team to assess the suitability of the practice area and if there's appropriate support by practice assessors. Programme documentation confirms this process, the programme team tell us self-employed and non-NHS employed applications are assessed and verified by the programme leader. Protected learning time must be agreed at application and is monitored by academic assessors.

There is evidence that the programme complies with the NMC standards for student supervision and assessment (R3.2) YES ⋈ NO □

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

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
MET 🖂	NOT MET

R3.3 is met. The programme team and SUCs tell us they work in partnership to develop video resources to support student online learning via the VLE. Students tell us learning resources are available and accessible on the VLE. They confirm online learning is effective and a positive experience that supports their development in a flexible way.

The PAD requires students to undertake and record 90 hours practice learning with practice assessors and practice supervisors. They develop prescribing and consultation skills through simulated learning. Prescribing specific assessment skills are simulated in the practice learning environment in preparation for a consultation assessment by their practice assessor. Learning experiences are documented in the PAD and are mapped against the RPS competency framework for all prescribers. The PAD includes evidence of how SUCs provide feedback on student performance following completion of a prescribing consultation. Students practice prescribing assessment skills in the faculty and in practice in preparation for the prescribing decision-making assessment in the practice learning environment.





	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) 				
Student Supervision and assessment (NS.4)	YE	S NO		
Assurance is provided that Gateway 1: <u>Standards fram</u> midwifery education relevant to practice learning are me		nursing and		
		S NO		
Assurance is provided that Gateway 2: <u>Standards for sassessment</u> relevant to practice learning are met		ervision and SS⊠ NO□		
Outcome				
Is the standard met? Date: 27 October 2020	MET 🔀	NOT MET		
Post event review				
Identify how the condition(s) is met: N/A				
Identify how the condition(s) is met: N/A Date condition(s) met: N/A				
Identify how the condition(s) is met: N/A Date condition(s) met: N/A	МЕТ 🗌	NOT MET		
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 _		
Identify how the condition(s) is met: N/A Date condition(s) met: N/A Revised outcome after condition(s) met:		_		





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 ☑ NOT MET ☐

R4.1 is met. The programme team are established, experienced and appropriately qualified V300, V150 prescribers and NMC teachers. The programme is supported by pharmacist prescribers and lecturer practitioners from the practice setting. The learning in practice handbook clearly details the roles of practice assessors, practice supervisors and academic assessors. Programme documentation confirms there's opportunities for students to reflect on learning. A learning contract enables self-assessment of learning needs which are agreed with practice assessors and practice supervisors. This is reviewed at initial, interim and final review meetings. These meetings support student reflection on their development through the programme. Practice assessors are responsible for the assessment of





practice and must verify the RPS competencies have been achieved.

Documentary evidence and the approval process confirms academic assessors work in partnership with practice assessors and practice supervisors to support practice learning. Academic assessors review student progression towards achievement. There's evidence of effective communication with practice assessors and the process for agreement of achievement of the RPS competencies.

Educational audit ensures appropriate and effective systems and processes are in place to support student learning. Practice learning is evaluated, students provide formal and informal feedback. There's evidence of effective communication between practice assessors, practice supervisors and academic assessors to identify and address issues related to student progression. Documentary evidence and students confirm they've access to the procedure for raising concerns in the university and the practice learning environment. PLPs confirm processes are in place to support students raising concerns; this is identified as part of the educational audit. They describe effective communication with the programme teams through continued partnership working ensuring support in the practice learning environment is maintained.

 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)

R4.2 is met. Documentary evidence and the approval process confirms practice assessors and practice supervisors are identified at the point of application to the programme.

The senior faculty team and PLPs confirm there's a strategic and standardised approach adopted by NES to the implementation of the SSSA across all NMC programmes. The national framework for the preparation for all practice assessors, practice supervisors and academic assessors in Scotland is operationalised locally to specifically prepare for the role in prescribing programmes. NHS health board governance frameworks support prescribing and assure learning is supported.

Documentary evidence and the approval visit confirm the application and educational audit processes ensure practice assessors and practice supervisors are prepared for their roles. Programme documentation explicitly details prescribing specific roles, responsibilities and the preparation of practice assessors, practice supervisors and academic assessors. Practice assessors and practice supervisors attend preparation workshops delivered by the programme team to complement NES educational online preparation units. The programme team facilitate online or face-to-face preparation in the practice learning environment. Practice assessor and practice supervisor handbooks provide detailed roles and responsibilities information. The programme team describe the





preparation of practice assessors, practice supervisors and academic assessors. This is supported by documentary evidence in an implementation plan for practice assessor, practice supervisor and academic assessor preparation.

Academic assessors are identified members of the programme team. Documentary evidence details a training plan to support academic assessor roles. Development of the role is supported through the faculty workload model process. Senior faculty management representatives confirm support and the intention to provide adequate resources to support the role. The programme team confirm they're supported and adequately prepared to undertake the role. In order to ensure appropriate succession planning and development of academic assessors the faculty management team should continue to proactively monitor and review the resources available to support the role and effectively deliver the programme. (Recommendation one)

PLPs confirm a commitment to support the programme team to ensure practice assessors and practice supervisors are prepared for the respective roles. Past student representatives tell us they're aware of the SSSA and confirm they'll be undertaking practice assessor and practice supervisor roles in the future. They acknowledge the importance of preparation. Students tell us they're aware of the SSSA through their involvement in the development of the programmes. To further enhance the application of the SSSA the programme team should monitor and evaluate the implementation of prescribing specific preparation. (Recommendation three)

ence 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
de an <u>evaluative summary</u> from your documentary analysis and ence AND discussion at the approval visit to demonstrate if assurance is ded that the QA approval criteria below is met or not met
Processes are in place to ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking (R4.5)
MET ⊠ NOT MET □





R4.5 is met. Documentary evidence confirms there's guidelines and processes in place to assign each student to a practice assessor who's a registered prescribing healthcare professional. They must be an experienced prescriber who prescribes in the same field of practice as the student. The application documentation confirms practice assessors and practice supervisors shouldn't be the same person. Evidence for the need for any exception to this must be submitted by students, practice assessors and practice supervisors at application. If there's a situation where this can't be avoided academic assessors monitor student support in the practice learning environment.

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

situati	on where this can't be avoided academic assessors more practice learning environment.			
Evide	nce provides assurance that the following QA appr	oval criteria	are met:	
 Processes are in place to ensure the student is assigned to an acade assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking (R4.6) 				
	(174.0)	YES 🖂	NO 🗌	
•	Processes are in place to provide feedback to student programme to support their development as necessar competencies and programme outcomes (R4.7)	•		
	competencies and programme outcomes (14.7)	YES 🖂	NO 🗌	
Processes are in place to assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to the first state of the student's suitability for award based.				
	to their field of prescribing practice (R4.8)	YES 🖂	NO 🗌	
•	Processes are in place to ensure that all programme lemet, addressing all areas necessary to meet the RPS This includes:			
	- successfully passing a pharmacology exam (the phabe passed with a minimum score of 80%), and			
	- successfully passing a numeracy assessment related calculation of medicines (the numeracy assessment m score of 100%).			
	Score of 100 %).	YES 🖂	NO 🗌	
Accur	ance is provided that Gateway 1: Standards framework	for nursing	and	
	fery education relevant to supervision and assessment		NO 🗌	
Assurance is provided that Gateway 2: <u>Standards for student supervision and</u> <u>assessment</u> relevant to supervision and assessment are met				
3.0000	The families of the second and accomment are me	YES 🖂	NO□	





Outcome		
Is the standard met?	MET 🖂	NOT MET
Date: 27 October 2020		
Post event review		
Identify how the condition(s) is met:		
N/A		
Date condition(s) met:		
N/A		
Revised outcome after condition(s) met:	MET	NOT MET
N/A		

Standard 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)





complete the programme in order to qualify and register their award as a prescriber (R5.3) YES NO • Processes are in place to inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice (R5.4) YES NO Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met YES NO Outcome Is the standard met? NOT MET Date: 27 October 2020 Post event review Identify how the condition(s) is met: N/A Date condition(s) met: N/A Revised outcome after condition(s) met: MET NOT MET	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) 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) 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) Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met Post event review dentify how the condition(s) is met: N/A Revised outcome after condition(s) met: MET NOT MET NOT MET NOT MET NOT MET NOT MET				IIIAODOITAED
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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 Processes are in place to inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice (R5.4) YES NO Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met YES NO Dutcome Is the standard met? MET NOT MET Date: 27 October 2020 Post event review Identify how the condition(s) is met: N/A Date condition(s) met: N/A Revised outcome after condition(s) met: MET NOT MET	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 • Processes are in place to inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice (R5.4) YES NO Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met YES NO Dutcome In the standard met? NOT MET NOT MET NOT MET Date: 27 October 2020 Post event review dentify how the condition(s) is met: N/A Date condition(s) met: N/A Revised outcome after condition(s) met: MET NOT MET NOT MET	•	NMC approved prescribing programme leads to accre-	ditation atd (R5.2)	a level
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once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice (R5.4) YES NO Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met YES NO Outcome Is the standard met? MET NOT MET Date: 27 October 2020 Post event review (dentify how the condition(s) is met: N/A Date condition(s) met: N/A Revised outcome after condition(s) met: MET NOT MET	once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice (R5.4) YES NO Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met YES NO Outcome Is the standard met? NOT MET Date: 27 October 2020 Post event review dentify how the condition(s) is met: N/A Date condition(s) met: N/A Revised outcome after condition(s) met: MET NOT MET NOT MET NOT M		presented (No.0)	YES 🗵	NO 🗌
Post event review Identify how the condition(s) is met: N/A Revised outcome after condition(s) met: NO YES NO NO NOT MET NOT MET NOT MET NOT MET NOT MET NOT MET NOT MET NOT MET NOT MET NOT MET NOT MET NOT MET NOT MET	Dutcome s the standard met? Date: 27 October 2020 Post event review dentify how the condition(s) is met: N/A Date condition(s) met: N/A Revised outcome after condition(s) met: MET NOT MET NOT MET NOT MET NOT MET NOT MET	•	once their prescribing qualification has been annotated and they may only prescribe from the formulary they a	d on the Ne re qualified of practic	IMC register ed to ce (R5.4)
Outcome Is the standard met? Date: 27 October 2020 Post event review Identify how the condition(s) is met: N/A Date condition(s) met: N/A Revised outcome after condition(s) met: MET NOT MET	Outcome s the standard met? Date: 27 October 2020 Post event review dentify how the condition(s) is met: N/A Date condition(s) met: N/A Revised outcome after condition(s) met: MET NOT MET NOT MET				<u>nidwifery</u>
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Date: 27 October 2020 Post event review Identify how the condition(s) is met: N/A Date condition(s) met: N/A Revised outcome after condition(s) met: MET NOT MET	Date: 27 October 2020 Post event review dentify how the condition(s) is met: N/A Date condition(s) met: N/A Revised outcome after condition(s) met: MET NOT MET	Outco	ome		
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Revised outcome after condition(s) met: MET NOT MET	Revised outcome after condition(s) met: MET NOT MET		condition(s) met:		
N/A			ed outcome after condition(s) met: MET	N	OT MET





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		
Programme specification(s)	\boxtimes	
Module descriptors	\boxtimes	
Student facing documentation including: programme	\square	
handbook		
Student university handbook	\boxtimes	
Practice assessment documentation	\boxtimes	
Practice placement handbook	\boxtimes	
PAD linked to competence outcomes, and mapped	\boxtimes	
against RPS A Competency Framework for all		
Prescribers		
Mapping document providing evidence of how the	\boxtimes	
education institution has met the Standards framework for		
nursing and midwifery education (NMC, 2018) (Gateway		
1)		
Mapping document providing evidence of how the		
Standards for student supervision and assessment (NMC,		
2018) apply to the programme(s) (Gateway 2)		
Mapping document providing evidence of how the	\boxtimes	
programme meets the Standards for prescribing		
programmes and RPS Standards of proficiency for		
prescribers (NMC, 2018) (Gateway 3)		
Curricula vitae for relevant staff	\boxtimes	
Registered healthcare professionals, experienced	\bowtie	
prescribers with suitable equivalent qualifications for the		
programme - registration checked on relevant regulators		
website		
Written placement agreements between the education	\boxtimes	
institution and associated practice learning partners to		
support the programme intentions.		
If you stated no above, please provide the reason and mitig	ation	
List additional decumentation:		
List additional documentation:		
Approval minutes, 24 November 2020		
Additional comments:		
None identified.		





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

YES	NO
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igation	
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	NO
	NO
	NO ⊠
	NO
YES	NO
YES	NO
	igation

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Issue record			
Final Report			
Author(s):	Neil Thomas	Date:	2 November 2020
Checked by:	Bernadette Martin	Date:	6 November 2020
Approved by:	Lucy Percival	Date:	18 December 2020
Submitted by:	Leeann Greer	Date:	21 December 2020