

Programme approval visit report

Section one

Programme provider name:	Nottingham Trent University
Programmes reviewed:	Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V150 <input type="checkbox"/> Community practitioner nurse prescribing V100 <input type="checkbox"/>
Title of programme(s):	Independent and Supplementary Prescribing
Academic level:	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input checked="" type="checkbox"/> Level 6 <input checked="" type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Community practitioner nurse prescribing V150	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Community practitioner nurse prescribing V100	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Date of approval visit:	22 November 2022

<p>Programme start date:</p> <p>Independent and supplementary nurse prescribing V300</p> <p>Community practitioner nurse prescribing V150</p> <p>Community practitioner nurse prescribing V100</p>	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">12 March 2023</div> <div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px;"></div>
<p>QA visitor:</p>	<p>Registrant Visitor: Mike Kitching</p>

Section two

Summary of review and findings

Nottingham Trent University (NTU) is a Nursing and Midwifery Council (NMC) approved education institution (AEI). The institute of health and allied health professions (IHAP) present an independent and supplementary nurse prescribing (V300) programme for approval.

The programme is designed to meet the Standards for prescribing programmes (SPP) (NMC, 2018) and is mapped to the Royal Pharmaceutical Society (RPS) competency framework for all prescribers (RPS, 2021).

The V300 programme is awarded as a qualification in independent and supplementary nurse prescribing. It's a part-time six-month programme for NMC registered nurses, comprising one 40 credit module at either academic level six or seven. The IHAP adopts a multi-professional approach to prescribing education and nurses learn together with allied health professionals (AHPs). The programme is delivered by a multi-disciplinary team that's jointly led by NMC and Health and Care Professions Council registrants who each hold an independent prescribing qualification. Students complete the V300 as a standalone programme or as an optional part of the Master of Science in advanced clinical practice.

NTU doesn't have a validated midwifery programme and confirm they aren't admitting midwives to the programme.

Documentary evidence and discussion at the approval visit confirms effective partnership working with practice learning partners (PLPs) at both an operational and strategic level. The IHAP senior team tell us they meet regularly with PLPs to discuss post registration education and workforce planning. They confirm that the programme is developed to meet the increasing need for independent prescribers in nursing within the local health economy. Senior nursing leaders confirm their support for the programme development and have processes in place to support the governance of prescribing applicants and students in the practice learning environment.

At operational level there's evidence of effective communication and preparation processes between the programme team and PLPs to ensure sufficient practice supervisors and practice assessors.

This visit is undertaken face-to-face.

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

The programme is recommended to the NMC for approval.

There's one NMC recommendation, one university recommendation and one joint NMC and university recommendation.

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	<p>Programme is recommended to the NMC for approval <input checked="" type="checkbox"/></p> <p>Programme is recommended for approval subject to specific conditions being met <input type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
Conditions:	<p>Effective partnership working: collaboration, culture, communication and resources: None identified.</p> <p>Selection, admission and progression: None identified.</p> <p>Practice learning: None identified.</p> <p>Assessment, fitness for practice and award: None identified.</p> <p>Education governance: management and quality assurance: None identified.</p>
Date condition(s) to be met:	N/A
Recommendations to enhance the programme delivery:	Recommendation one: The programme team are recommended to consider how the application process ensures there's no conflict of interest between the applicant and the practice supervisor

	<p>and practice assessor. (SFNME R5.8; SPP R4.1) (NMC and university recommendation)</p> <p>Recommendation two: The programme team are recommended to review the employer support letter in regard to assurance of the applicant's capability to undertake the prescribing programme. (SPP R1.5, R1.6)</p> <p>Recommendation three: Consider how to handle students withdrawing from the course and whether they might be readmitted under certain circumstances. Clear direction would need adding to the course specification on how students will be handled if the decision is to deviate from the NTU quality handbook. (University recommendation)</p>
Focused areas for future monitoring:	None identified.

Programme is recommended for approval subject to specific conditions being met	
Commentary post review of evidence against conditions:	
N/A	
AEI Observations	Observations have been made by the education institution YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Summary of observations made, if applicable	
Final recommendation made to NMC:	Programme is recommended to the NMC for approval <input type="checkbox"/> Recommended to refuse approval of the programme <input type="checkbox"/>
Date condition(s) met:	N/A

Section three

NMC Programme standards
Please refer to NMC standards reference points

NMC Programme standards

[Standards for prescribing programmes](#) (NMC, 2018)
[Standards of proficiency for nurse and midwife prescriber \(adoption of the Royal Pharmaceutical Society \(RPS\) Competency Framework for all Prescribers\)](#)
(NMC, 2018)
[Standards framework for nursing and midwifery education](#) (NMC, 2018)
[Standards for student supervision and assessment](#) (NMC, 2018)
[The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates](#) (NMC, 2015 updated 2018)
[Quality assurance framework for nursing, midwifery and nursing associate education](#) (NMC, 2020)
[QA Handbook](#) (NMC, 2020)

Partnerships

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

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

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

Standard 1: The learning culture:

- R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders
- R1.13 work with service providers to demonstrate and promote inter-professional learning and working

Standard 2: Educational governance and quality:

- R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders
- R2.4 comply with NMC [Standards for student supervision and assessment](#)
- R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes
- R2.6 ensure that recruitment and selection of students is open, fair and transparent and includes measures to understand and address underrepresentation
- R2.7 ensure that service users and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection

Standard 3: Student empowerment:

- R3.3 have opportunities throughout their programme to work with and learn from a range of people in a variety of practice placements, preparing them to provide care to people with diverse needs

R3.16 have opportunities throughout their programme to collaborate and learn with and from other professionals, to learn with and from peers, and to develop supervision and leadership skills

R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning

R3.18 have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice.

Standard 4: Educators and assessors:

R4.7 liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment

R4.9 receive and act upon constructive feedback from students and the people they engage with to enhance the effectiveness of their teaching, supervision and assessment

R4.10 share effective practice and learn from others

Standard 5: Curricula and assessment:

R5.4 curricula are developed and evaluated by suitably experienced and qualified educators and practitioners who are accountable for ensuring that the curriculum incorporates relevant programme outcomes

R5.5 curricula are co-produced with stakeholders who have experience relevant to the programme

R5.14 a range of people including service users contribute to student assessment

Standards for student supervision and assessment (NMC, 2018)

Standard 1: Organisation of practice learning:

R1.4 there are suitable systems, processes, resources and individuals in place to ensure safe and effective coordination of learning within practice learning environments

R1.7 students are empowered to be proactive and to take responsibility for their learning

R1.8 students have opportunities to learn from a range of relevant people in practice learning environments, including service users, registered and non-registered individuals, and other students as appropriate

Standard 2: Expectations of practice supervisors:

R2.2 there is support and oversight of practice supervision to ensure safe and effective learning

Standard 3: Practice supervisors: role and responsibilities:

R3.3 support and supervise students, providing feedback on their progress towards, and achievement of, proficiencies and skills

Standard 4: Practice supervisors: contribution to assessment and progression:

R4.3 have sufficient opportunities to engage with practice assessors and academic assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising

Standard 7: Practice assessors: responsibilities:

R7.9 communication and collaboration between practice and academic assessors is scheduled for relevant points in programme structure and student progression

Standard 9: Academic assessors: responsibilities:

R9.6 communication and collaboration between academic and practice assessors is scheduled for relevant points in programme structure and student progression

Findings against the standard and requirements

Provide an evaluative summary about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders.

Documentary evidence and discussion at the approval visit demonstrate partnership working between NTU, PLPs, students and service users and carers (SUCs) in the co-production of the proposed programme.

There's evidence of partnership working between NTU and PLPs, with close working relationships confirmed at the approval visit. PLPs tell us about the effective partnership working with the programme team.

NTU and PLPs meet regularly and PLPs speak positively about the opportunities this provides to raise and discuss programme related issues. NTU tell us, and PLPs confirm, that strategic meetings take place with set frequency between monthly, termly, three times a year and annual, depending on the context and focus of the meeting. PLPs tell us these meetings enable discussion of programme currency, PLP workforce planning and placement capacity. PLPs tell us of their support for the development of the prescribing programme at NTU, identifying that this will enhance achievement of local workforce plans.

At operational level, there's evidence of partnership working between NTU and PLPs to support recruitment to and delivery, assessment and evaluation of the programme. NTU and PLPs work together to undertake and manage educational audits to ensure a safe learning environment. The educational audit assures that practice learning areas meet the requirements of the SSSA. Outstanding actions are monitored by the programme team. The quality assurance process within NTU ensures there's feedback to PLPs. Senior NTU staff and the programme team confirm the process for quality reporting.

There's a handbook for practice supervisors and practice assessors which clearly identifies their role and the expectations. The programme team tell us they plan to provide a narrated slide presentation and online sessions to provide ongoing support for practice supervisors and practice assessors. PLPs tell us that preparation and ongoing support of practice supervisors and practice assessors is discussed as part of co-production of the programme.

There's evidence of effective and positive partnership working between NTU and SUCs. NTU has a clear service user strategy and there's evidence of programme team engagement with SUCs in the co-production of the programme for nurses. There's a dedicated post/role to deliver the IHAP SUC involvement strategy.

SUCs confirm their involvement in the co-production of the programme and that they feel listened to, with their feedback acted upon. SUCs describe their involvement in programme recruitment to ensure the values important them are considered. This is through development of the application form where applicants are asked to document supporting information. They describe their contribution to curriculum development. Documentary evidence demonstrates and SUCs confirm their involvement in providing student feedback within the practice assessment document.

Students tell us they feel listened to and that their feedback is acted upon during co-production of the programme. They tell us they discuss student feedback with the programme team and the importance of providing programme feedback as part of continual quality assurance processes. Students speak about "prescriber readiness" and the link between the proposed programme and some of the content delivered as part of the pre-registration nursing programme at NTU.

Students are positive about their learning experiences and support provided from NTU. Students report they feel valued and NTU provides opportunities for them to feedback informally and through formal mechanisms. Students tell us feedback is responded to and appropriate actions are taken.

Documentary evidence and discussion at the approval visit demonstrate a commitment to interprofessional learning. Students can learn from, with and about other prescribers including AHPs in both theory and practice settings.

NTU evidence processes for raising concerns in the IHAP and the practice learning environment. PLPs and students confirm they know how to raise concerns and confirm that they receive feedback on any actions undertaken as a result of concerns.

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 1: [Standards framework for nursing and midwifery education](#)

MET **NOT MET**

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 2: [Standards for student supervision and assessment](#)

MET **NOT MET**

Post event review

Identify how the condition(s) is met:

N/A

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

MET **NOT MET**

N/A

Student journey through the programme

Standard 1: Selection, admission and progression

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

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

R1.6.3 Planning and evaluation of care
R1.7 ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme

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

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

Proposed transfer of current students to the [Standards for student supervision and assessment](#) (NMC, 2018).
Demonstrate a robust process to transfer current students onto the [Standards for student supervision and assessment](#) (NMC, 2018).

Findings against the standard and requirements

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

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

YES NO

- Evidence of selection process that demonstrates opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non-NHS employed registrants) to apply for entry onto an NMC approved prescribing programme. Evidence of this statement in documentation such as: programme specification; module descriptor, marketing material. Evidence of this statement on university web pages (R1.2)

YES NO

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

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

MET NOT MET

R1.3 is met. The documented application process demonstrates a governance structure to ensure there's access to protected learning time and employer and clinical support.

The programme team and PLPs tell us there's a process to ensure that a practice supervisor and practice assessor is in place to support learning in practice. As part of the application process practice supervisors and practice assessors complete a self-declaration confirming their experience and qualification to undertake these roles. The programme lead confirms that all applications are reviewed as part of the recruitment process to ensure that students, practice supervisors and practice assessors meet the relevant criteria.

Upon application PLPs confirm the clinical competence of the student and agree that protected learning time will be provided. PLPs tell us they're committed to protected learning time. This is included as part of some PLPs' non-medical prescribing policy. Documentary evidence in student facing documents demonstrates the process for programme concerns, including students raising concerns with the programme team if protected learning time isn't maintained.

NTU complete educational audits confirming that practice learning environments meet SSSA requirements. This is checked by the programme lead during the application process. As part of the application process self-employed applicants identify a practice supervisor and practice assessor. Self-employed applicants complete the educational audit process. These are reviewed and verified by the programme lead.

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

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

YES NO

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

YES NO

- Processes are in place to confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to

<p>be undertaken and their intended area of prescribing practice in the following areas (R1.6):</p> <ul style="list-style-type: none"> - Clinical/health assessment - Diagnostics/care management - Planning and evaluation <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p>• 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)</p> <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/></p>
<p>Proposed transfer of current students to the programme under review</p> <p><i>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.</i></p> <p>This is a proposed new prescribing programme for nurses at NTU, therefore there's no existing students to transfer.</p>
<p>Proposed transfer of current students to the Standards for student supervision and assessment (SSSA) (NMC, 2018).</p> <p>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.</p> <p>This is a proposed new prescribing programme for nurses at NTU, therefore there's no existing students to transfer to the SSSA.</p>
<p>Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to selection, admission and progression are met</p> <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p>
<p>Outcome</p> <p>Is the standard met? MET <input checked="" type="checkbox"/> NOT MET <input type="checkbox"/></p> <p>Date: 22 November 2022</p>
<p>Post event review</p> <p>Identify how the condition(s) is met:</p> <p>N/A</p>
<p>Date condition(s) met:</p>

N/A

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

N/A

Standard 2: Curriculum

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

R2.1 ensure programmes comply with the NMC *Standards framework for nursing and midwifery education*

R2.2 ensure that all prescribing programmes are designed to fully deliver the competencies set out in the RPS *A Competency Framework for all Prescribers*, as necessary for safe and effective prescribing practice

R2.3 state the learning and teaching strategies that will be used to support achievement of those competencies

R2.4 develop programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice:

R2.4.1 stating the general and professional content necessary to meet the programme outcomes

R2.4.2 stating the prescribing specific content necessary to meet the programme outcomes

R2.4.3 confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing

R2.5 ensure that the curriculum provides a balance of theory and practice learning, using a range of learning and teaching strategies

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

Findings against the standard and requirements

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

- There is evidence that the programme complies with the NMC Standards framework for nursing and midwifery education (R2.1)

YES NO

- There is evidence that the programme is designed to fully deliver the competencies set out in the RPS *Competency Framework for all Prescribers*, as necessary for safe and effective prescribing practice (R2.2).

YES NO

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

- Evidence of the learning and teaching strategies that will be used to support achievement of those competencies (R2.3)

MET **NOT MET**

R2.3 is met. Programme documentation details the structure of the V300 programme. The V300 programme is delivered at academic level six and seven, comprising of one 40 academic credit module, delivered part-time. The teaching, learning and assessment strategy is detailed in the module handbook and course specification. The programme team tell us the V300 programme is delivered using a variety of strategies including interactive lecture activities, peer-to-peer learning, tutor-led sessions, group work and workshops to address the needs of all learners. The programme team tell us they use a blended approach, combining e-learning with face-to-face teaching. E-learning is delivered via the university's virtual learning environment (VLE) (Nottingham online workspace) and makes use of a variety of digital learning tools to enhance learning and interactivity. Students speak positively about the VLE and IHAP support with dedicated IHAP staff to support e-learning and the development of digital literacy. Students tell us they're able to access library support from an online "learning room".

The programme team includes a range of professionals to support the development of nurses' understanding of pharmacology and prescribing practice. There's an interprofessional approach to learning with shared teaching between nurses and AHP students undertaking the prescribing programme.

There's 90 hours of practice learning supervised by a practice supervisor and practice assessor. There's an e-portfolio which requires the development of reflective and case-based learning. The portfolio provides a structure to support learning and documents the student development and achievement of the RPS competencies. The practice assessor and academic assessor record in the practice assessment documentation when RPS competencies are met.

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 a balance of theory and practice learning. A range of learning and teaching strategies are detailed in the programme specification, programme handbook and module descriptor with theory / practice balance detailed. There are appropriate module aims, descriptors and outcomes specified. (R2.5)

YES NO

If relevant to the review

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

YES NO N/A

The programme isn't delivered in Wales.

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

YES NO

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

YES NO

Outcome

Is the standard met? MET NOT MET

Date: 22 November 2022

Post event review

Identify how the condition(s) is met:

N/A

Date condition(s) met:

N/A

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

N/A

Standard 3: Practice learning

Approved education institutions must:

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

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

- R3.2 ensure that practice learning complies with the NMC [Standards for student supervision and assessment](#)
- R3.3 ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment
- R3.4 ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC [Standards for student supervision and assessment](#)

Findings against the standard and requirements

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

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

MET **NOT MET**

R3.1 is met. Documentary evidence confirms that governance structures are in place to enable students to undertake and be appropriately supported throughout their practice learning. The programme team tells us strategic meetings are held with PLPs to determine training needs and resources. They tell us these meetings enable the monitoring of practice learning environments.

The programme team tell us the application process confirms assurance that the student works within a defined clinical governance framework, including ensuring protected learning time for students.

NTU and PLPs audit practice learning environments and monitor their quality. Audit processes provide evidence of safe practice placement environments which meet SFNME and SSSA requirements. There's a process to withdraw practice learning environments, implement action plans and reinstate practice learning areas where student learning is at risk. There are policies in place demonstrating commitment to public protection through the management and escalation of concerns in academic and practice settings.

Suitable practice supervisors and practice assessors are identified as part of the application process and are prepared by NTU for these roles. There's a handbook for practice supervisors and practice assessors which clearly identifies their role and the expectations. The programme team tell us they plan to provide a narrated slide presentation and online sessions to provide ongoing support for practice supervisors and practice assessors. Academic assessors are identified from the programme team and prepared for the role by the IHAP, to oversee progression and achievement decisions.

Within the portfolio students maintain a record of supervised practice to demonstrate progress in practice learning and to act as a basis for ongoing assessment and achievement. A range of evidence is required to demonstrate achievement of the RPS competencies. The practice assessor and academic assessor communicate at relevant points to ensure progression.

Self-employed applicants are required to identify a practice placement as part of the application process. Their application confirms their practice placement area and the programme team confirm an educational audit is completed. The audit is reviewed by the programme lead. As part of the application process self-employed applicants identify a practice supervisor and practice assessor. Practice supervisors and practice assessors are required to confirm that they meet the criteria for the role as part of the application form.

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

- There is evidence that the programme complies with the NMC standards for student supervision and assessment (R3.2)

YES NO

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

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

MET NOT MET

R3.3 is met. Documentary evidence and discussion at the approval visit confirms the programme uses a range of technology enhanced and simulation-based learning opportunities to support learning and assessment, and that this is effective and proportionate.

The programme team tell us of the range of tools to support e-learning for students. This includes use of a simulated learning suite and simulated practice skills laboratory. A blended learning approach to teaching and learning is taken with the VLE supporting students to integrate and apply theory to their own area of prescribing practice.

Staff are supported to develop their digital learning capability. The IHAP have a dedicated digital curriculum development role to assist in the development of technology enhanced learning.

Documentation demonstrates, and the programme team tell us, that problem-based learning is used as part of face-to-face teaching, allowing students to tailor

their learning on a subject area relevant to their identified learning needs. Practice based assessments are embedded in the programme to support learning, either via simulation or in practice settings. The programme team tell us they have simulation facilities, including virtual reality, clinical and community rooms, to support simulation learning.

The programme team tell us they use an e-portfolio with learning resources to support practice supervisors and practice assessors.

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

- Processes are in place to ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC *Standards for student supervision and assessment* (R3.4)

YES NO

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

YES NO

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

YES NO

Outcome

Is the standard met? MET NOT MET

Date: 22 November 2022

Post event review

Identify how the condition(s) is met:

N/A

Date condition(s) met:

N/A

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

N/A

Standard 4: Supervision and assessment

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

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

- R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC [Standards for student supervision and assessment](#)
- R4.3 appoint a programme leader in accordance with the requirements of the NMC [Standards framework for nursing and midwifery education](#). The programme leader of a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience
- R4.4 ensure the programme leader works in conjunction with the lead midwife for education (LME) and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes
- R4.5 ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking
- R4.5.1 In exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor for that part of the programme where the prescribing student is undergoing training in a practice learning setting. In such instances, the student, practice supervisor/assessor and the AEI will need to evidence why it was necessary for the practice supervisor and assessor roles to be carried out by the same person
- R4.6 ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking
- R4.7 provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes
- R4.8 assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice
- R4.9 ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies. This includes all students:
- R4.9.1 successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80 percent), and
- R4.9.2 successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100 percent)

Findings against the standards and requirements

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

- There is evidence of how the programme will ensure how support, supervision, learning and assessment provided complies with the NMC [Standards framework for nursing and midwifery education](#) (R4.1)

MET **NOT MET**

R4.1 is met. Documentary analysis and meetings with the programme team, students, practice supervisors and practice assessors confirm that support, supervision, learning and assessment comply with the SFNME.

Programme documentation demonstrates that robust processes and policies are in place to ensure a partnership approach to supporting practice supervision, learning and assessment. PLPs tell us how they engage with the programme team to ensure the requirements of the SFNME and SSSA are applied to the programme. Any concerns identified in practice learning environments are managed in partnership with PLPs.

Information for students is contained in the programme and module handbooks and practice portfolio. Students, practice supervisors and practice assessors are given written guidance about gaining consent, promoting public safety and raising and escalating concerns. Students tell us they're advised about, and have access to, the procedure for raising a concern within both the practice and university learning environments.

SUCs tell us they contribute to the assessment of students through clinical practice and the provision of feedback to students within the practice assessment documentation.

Programme assessments are designed to support students to demonstrate confidence to prescribe and achievement of the RPS competencies. The practice assessment documentation requires that students are assessed by their practice assessor through a range of methods such as observation, workplace-based assessment and professional discussions. Assessments are mapped to the learning outcomes and the RPS competencies. A range of evidence is required to demonstrate achievement of the RPS competencies. The practice assessor and academic assessor communicate at relevant points to ensure student progression. Programme documentation supports a planned approach to practice learning.

Documentary evidence confirms that the practice assessment record and evaluation audit system of practice learning environments is undertaken to ensure appropriate systems and processes are in place to support safe practice learning.

As part of the application process, students identify their practice supervisor and practice assessor. The programme team are recommended to consider how the application process ensures there's no conflict of interest between the applicant and the practice supervisor and practice assessor. (Recommendation one)

- There is evidence of how the [Standards for student supervision and assessment](#) are applied to the programme. There are processes in place to identify the supervisors and assessors along with how they will be prepared for their roles (R4.2)

MET **NOT MET**

R4.2 is met. Documentary evidence confirms the practice supervisor and practice assessor are identified and confirmed through the application process. Students are assessed in practice by a practice assessor, with support from a practice supervisor.

The practice supervisor contributes to the practice assessment process, giving feedback to the student and their practice assessor on progression with the RPS competencies. Assessment documentation includes feedback on the students' performance and competence from SUCs and other members of the healthcare team. Evidence of successful completion of practice learning mapped to the RPS competencies is clearly demonstrated within the practice portfolio.

PLPs understand the principles and requirements of the SSSA and the roles of practice supervisors, practice assessors and academic assessors. Assurance is given that there are adequate practice supervisors and practice assessors to support learning in practice. The programme team tell us that communication between practice assessors and academic assessors is recorded within an e-portfolio to provide feedback on student progress towards achieving the RPS competencies. PLPs confirm they understand the practice assessment process.

Practice supervisors and practice assessors are prepared by NTU for these roles. There's a handbook for practice supervisors and practice assessors, which clearly identifies their role and the expectations. The programme team tell us they plan to provide a narrated slide presentation and online sessions to provide ongoing support for practice supervisors and practice assessors. Academic assessors hold a relevant prescribing qualification and are prepared for their role by NTU through a face-to-face workshop. The academic assessor role is factored into the staff workload and is monitored through university appraisal processes.

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

NTU doesn't have an approved midwifery programme and confirm they aren't admitting midwives to the programme.

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

- Processes are in place to ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking (R4.5)

MET **NOT MET**

R4.5 is met. Documentary evidence confirm processes are in place to ensure students are assigned to an appropriate practice assessor who's an experienced prescriber. The application form is completed specifying details of the practice assessor. The requirements of the role are detailed in the practice supervisor and practice assessor handbook.

The programme team confirm they check and verify the practice assessor's professional qualifications. Normally the practice assessor and the practice supervisor won't be the same person. NTU tell us that, in exceptional circumstances, when the practice assessor and practice supervisor are required to be the same person, they'll assess what measures are in place to ensure objectivity and mitigate risk.

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

- Processes are in place to ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking (R4.6)

YES **NO**

- Processes are in place to provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes (R4.7)

YES **NO**

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

YES **NO**

- Processes are in place to ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies (R4.9). This includes:
 - successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and
 - successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100%).

YES **NO**

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

YES NO

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

YES NO

Outcome

Is the standard met? MET NOT MET

Date: 22 November 2022

Post event review

Identify how the condition(s) is met:

N/A

Date condition(s) met:

N/A

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

N/A

Standard 5: Qualification to be awarded

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

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

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

R5.1.2 a nurse or midwife independent/supplementary prescriber (V300)

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

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

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

Findings against the standards and requirements

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

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

YES NO
- Evidence to ensure that successful participation in and completion of an NMC approved prescribing programme leads to accreditation at a level equivalent to a bachelor's degree as a minimum award (R5.2)

YES NO
- Processes are in place to inform the student that the award must be registered with the NMC within five years of successfully completing the programme and if they fail to do so they will have to retake and successfully complete the programme in order to qualify and register their award as a prescriber (R5.3)

YES NO
- 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? MET NOT MET

Date: 22 November 2022

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

Section four

Sources of evidence

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

Key documentation	YES	NO
Programme document, including proposal, rationale and consultation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme specification(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Module descriptors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student facing documentation including: programme handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student university handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice assessment documentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice placement handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PAD linked to competence outcomes, and mapped against RPS <i>A Competency Framework for all Prescribers</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC, 2018) (Gateway 1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the <i>Standards for student supervision and assessment</i> (NMC, 2018) apply to the programme(s) (Gateway 2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the programme meets the <i>Standards for prescribing programmes</i> and RPS <i>Standards of proficiency for prescribers</i> (NMC, 2018) (Gateway 3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Curricula vitae for relevant staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Written placement agreements between the education institution and associated practice learning partners to support the programme intentions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation:		
List additional documentation: None identified.		
Additional comments: None identified.		

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

	YES	NO
Senior managers of the AEI/education institution with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated practice learning partners with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme team/academic assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice leads/practice supervisors/ practice assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, please identify cohort year/programme of study: Bachelor of Science (BSc) nursing year two x one BSc nursing year three x one		
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation:		
Additional comments: None identified.		

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

	YES	NO
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Library facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Technology enhanced learning Virtual learning environment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Educational audit tools/documentation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Practice learning environments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If practice learning environments are visited, state where visited/findings:		
If you stated no above, please provide the reason and mitigation: NTU is an established AEI. Clinical skills/simulation suites are viewed during the visit but there's no requirement to review other areas/facilities.		
Additional comments: None identified.		

Mott MacDonald Group Disclaimer

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We accept no responsibility for the consequences of this document being relied upon by any other party, or being used for any other purpose, or containing any

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Issue record

Final Report

Author(s):	Mike Kitching	Date:	28 November 2022
Checked by:	Ian Felstead-Watts	Date:	2 December 2022
Submitted by:	Amy Young	Date:	13 December 2022
Approved by:	Leeann Greer	Date:	15 December 2022