

**Programme approval visit report**

**Section one**

<b>Programme provider name:</b>	University of East Anglia
<b>In partnership with:</b> <i>(Associated practice learning partners involved in the delivery of the programme)</i>	<p>Cambridge Community Services NHS Trust</p> <p>Cambridge University Hospitals NHS Foundation Trust</p> <p>East Suffolk and North Essex Foundation Trust</p> <p>James Paget University Hospital NHS Foundation Trust</p> <p>Norwich Community Health and Care NHS Trust</p> <p>Norfolk and Norwich University Hospital Foundation Trust</p> <p>Norfolk and Suffolk NHS Foundation Trust</p> <p>Queen Elizabeth Hospital NHS Foundation Trust</p> <p>West Suffolk NHS Foundation Trust</p> <p>The Royal Marsden NHS Foundation Trust</p> <p>Croydon Health Services NHS Trust</p> <p>Southend University Hospital NHS Foundation Trust</p> <p>Epsom and St Helier University Hospitals NHS Trust</p> <p>Barts Health NHS Trust</p> <p>Private, voluntary and independent health care providers</p>
<b>Programmes reviewed:</b>	<p>Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/></p> <p>Community practitioner nurse prescribing V150 <input type="checkbox"/></p> <p>Community practitioner nurse prescribing V100 <input type="checkbox"/></p>

<b>Title of programme(s):</b>	Independent prescribing programme
<b>Academic level:</b>	
Independent and supplementary nurse prescribing V300	<p>England, Wales, Northern Ireland  <input type="checkbox"/> Level 5   <input type="checkbox"/> Level 6   <input checked="" type="checkbox"/> Level 7</p> <p>SCQF  <input type="checkbox"/> Level 8   <input type="checkbox"/> Level 9   <input type="checkbox"/> Level 10  <input type="checkbox"/> Level 11</p>
Community practitioner nurse prescribing V150	<p>England, Wales, Northern Ireland  <input type="checkbox"/> Level 5   <input type="checkbox"/> Level 6   <input type="checkbox"/> Level 7</p> <p>SCQF  <input type="checkbox"/> Level 8   <input type="checkbox"/> Level 9   <input type="checkbox"/> Level 10  <input type="checkbox"/> Level 11</p>
Community practitioner nurse prescribing V100	<p>England, Wales, Northern Ireland  <input type="checkbox"/> Level 5   <input type="checkbox"/> Level 6   <input type="checkbox"/> Level 7</p> <p>SCQF  <input type="checkbox"/> Level 8   <input type="checkbox"/> Level 9   <input type="checkbox"/> Level 10  <input type="checkbox"/> Level 11</p>
<b>Date of approval visit:</b>	16 March 2021
<b>Programme start date:</b>	
Independent and supplementary nurse prescribing V300	<input type="text" value="15 September 2021"/>
Community practitioner nurse prescribing V150	<input type="text"/>
Community practitioner nurse prescribing V100	<input type="text"/>
<b>QA visitor:</b>	Registrant Visitor: Suzanne Everett

**Section two**

**Summary of review and findings**

University of East Anglia (UEA), school of health sciences (the school) presents the independent and supplementary prescribing (V300) preparation programme for Nursing and Midwifery Council (NMC) approval. The programme is delivered at the UEA Norwich campus and is also delivered by the Royal Marsden School (RMS), London, which is an approved NMC satellite site.

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

The independent prescribing programme is a 40-credit module delivered at academic level seven. It is undertaken as a standalone module or as an optional module in the MSc Advanced Professional Practice programme at UEA, or within the following programmes: MSc Advanced Clinical Practitioner Degree Apprenticeship at UEA, PG certificate/PG diploma/MSc Cancer Care at RMS and PG Dip/MSc Cancer Care: Advanced Practice MSc Advanced Cancer Care at RMS.

The independent prescribing programme is taught over 26 weeks and comprises of 26 study days and 12 days of supervised practice. The independent prescribing programme is delivered four times a year at UEA in September, January and April and delivered once a year at the RMS in January. The programme can be accessed by allied health professionals (AHPs).

Programme documentation and the approval process confirm evidence of effective partnership working between the school 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.

Arrangements at programme level don't meet the Standards for student supervision and assessment (SSSA) (NMC, 2018).

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

The visit is undertaken remotely during COVID-19 pandemic.

Updated 29 March 2021:

Evidence is provided to meet the four conditions. The university confirm the three university conditions are met. The conditions and related standards are now met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
<b>Recommended outcome to the NMC:</b>	<p>Programme is recommended to the NMC for approval <input type="checkbox"/></p> <p>Programme is recommended for approval subject to specific conditions being met <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
<b>Conditions:</b>	<p><b>Effective partnership working: collaboration, culture, communication and resources:</b></p> <p>None identified.</p> <p><b>Selection, admission and progression:</b></p> <p>None identified.</p> <p><b>Practice learning:</b></p> <p>None identified.</p> <p><b>Assessment, fitness for practice and award:</b></p> <p>None identified.</p> <p><b>Education governance: management and quality assurance:</b></p> <p>Condition one: Provide an implementation plan for the preparation of practice supervisors and practice assessors for the prescribing programme in relation to a September 2021 start date. (SSSA R5.1, R8.1; SPP R4.2)</p> <p>Condition two: Need clarification on the 30 percent or one third requirement of contact time for working with designated prescribing practitioner (DPP). (University condition)</p> <p>Condition three: Ensure page numbers in handbooks and curriculum documentation. (University condition)</p> <p>Condition four: Only one mention of welfare in the student handbook; signpost to other services with a</p>

	headed section relating to welfare. (University condition)
<b>Date condition(s) to be met:</b>	13 April 2021
<b>Recommendations to enhance the programme delivery:</b>	<p>Recommendation one: Consider signposting the opportunity and process for applicants to have prior learning recognised in relation to the RPS competency framework for all prescribers. (SPP R1.4)</p> <p>Recommendation two: Consider enhancing student and PLP engagement in the development, design, delivery and evaluation of the prescribing programme to ensure co-production. (SFNME R1.12, R5.5; SPP R2.1)</p> <p>Recommendation three: Consider enhancing SUC engagement in partnership, with respect to student recruitment and selection. (SFNME R2.7; SPP R2.1)</p>
<b>Focused areas for future monitoring:</b>	<p>Involvement of SUC in recruitment and selection processes.</p> <p>Implementation of the SSSA.</p>

<b>Programme is recommended for approval subject to specific conditions being met</b>	
<b>Commentary post review of evidence against conditions:</b>	
<p>Revised copies of the programme documentation confirm that the university's conditions are met.</p> <p>An implementation plan details the preparation of practice assessors and practice supervisors.</p> <p>Condition one is now met.</p> <p>The university confirm the three university conditions are met.</p> <p>The programme is recommended for approval.</p>	
<b>AEI Observations</b>	<b>Observations have been made by the education institution</b> <b>YES</b> <input checked="" type="checkbox"/> <b>NO</b> <input type="checkbox"/>

<b>Summary of observations made, if applicable</b>	A correction to R4.1 is made.
<b>Final recommendation made to NMC:</b>	Programme is recommended to the NMC for approval <input checked="" type="checkbox"/> Recommended to refuse approval of the programme <input type="checkbox"/>
<b>Date condition(s) met:</b>	29 March 2021

### Section three

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

Partnerships
The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.
<p><b>Please refer to the following NMC standards reference points for this section:</b></p> <p><a href="#">Standards framework for nursing and midwifery education</a> (NMC, 2018)</p> <p><b>Standard 1: The learning culture:</b>            R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders            R1.13 work with service providers to demonstrate and promote inter-professional learning and working</p> <p><b>Standard 2: Educational governance and quality:</b>            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</p>



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 the approval visit confirm that there's effective partnership working between key stakeholders and the school in the development of the programme. PLPs, students and SUCs contribute to the development of the programme. There is evidence of stakeholder meetings and an independent curriculum review workshop. There is documentation and evidence of involvement in an independent prescribing programme committee. 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 co-production of the programme and involved in the teaching of the curriculum. PLPs tell us there's effective communication with the school and programme team.

There is evidence of the involvement of SUCs in recruitment, selection, programme design, development and evaluation. This is seen through the collaboration of service users in the interview process, and interview documentation. Service users are involved in the programme design which is



evidenced through course committee meetings. They contribute to the delivery of course through a webinar of their shared lived experiences. SUCs provide feedback on student performance in the practice learning environment. The assessment of practice is informed by SUC feedback in the practice assessment document (PAD). Service users tell us that there's effective communication with the programme team. They tell us their contribution is valued by the school and programme team; they would welcome further involvement in the programme. (Recommendation three)

Students tell us that the programme supports the development and expansion of their clinical role. They confirm they're satisfied with the delivery and organisation of the programme. Documentary evidence confirms that student feedback has influenced the development of the programme. Students tell us their experience of the programme is positive. They confirm they understand the process for raising concerns with the school and the practice learning environment. They're supported by practice assessors, practice supervisors and the prescribing team. The students told us they had limited involvement in the programme development. (Recommendation two)

Practice assessors and practice supervisors confirm they understand the process to raise concerns; their point of contact is the programme leader. The programme team have developed a module on the virtual learning environment (VLE) to prepare practice assessors and practice supervisors for their role, along with monthly Microsoft (MS) Teams meetings. However, practice assessors and practice supervisors could not provide assurance of the preparation for their roles for the prescribing programme in relation to the SSSA. (Condition one)

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**

Documentary evidence shows the preparation of practice assessors and supervisors. The programme team tell us how they communicate and prepare practice assessors, practice supervisors and academic assessors. However, at the visit practice assessors and practice supervisors could not provide assurances of these preparations.

Condition one: Provide an implementation plan for the preparation of practice supervisors and practice assessors for the prescribing programme in relation to a September 2021 start date. (SSSA R5.1, R8.1; SPP R4.2)

Post event review	
<b>Identify how the condition(s) is met</b>	
<p>Condition one: Documentary evidence provides an implementation plan for the preparation of practice assessors and practice supervisors.</p> <p>Evidence:                      Independent prescribing flowchart for preparation of DPPs from April 2021, 9 December 2020                      Plan for practice supervisors and practice assessors, undated                      Independent prescribing SSSA overview, 4 December 2020</p>	
<b>Date condition(s) met:</b> 29 March 2021	
<b>Revised outcome after condition(s) met</b>	<b>MET</b> <input checked="" type="checkbox"/> <b>NOT MET</b> <input type="checkbox"/>

Student journey through the programme
<b>Standard 1: Selection, admission and progression</b>
<p><b>Approved education institutions, together with practice learning partners, must:</b></p> <p>R1.1 ensure that the applicant is a registered nurse (level 1), a registered midwife or a SCPHN before being considered as eligible to apply for entry onto an NMC approved prescribing programme</p> <p>R1.2 provide opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non- NHS employed registrants) to apply for entry onto an NMC approved prescribing programme</p> <p>R1.3 confirm that the necessary governance structures are in place (including clinical support, access to protected learning time and employer support where appropriate) to enable students to undertake, and be adequately supported throughout, the programme</p> <p>R1.4 consider recognition of prior learning that is capable of being mapped to the <a href="#">RPS Competency Framework for all Prescribers</a></p> <p>R1.5 confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme</p> <p>R1.6 confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas:</p> <p>R1.6.1 Clinical/health assessment</p> <p>R1.6.2 Diagnostics/care management</p> <p>R1.6.3 Planning and evaluation of care</p>

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 UEA and RMS application forms must be signed for employer support to undertake the programme. The application process ensures there's confirmation that clinical support and protected learning time throughout the programme are assured. Line managers must confirm that applicants have the required clinical competence and experience to undertake the programme. They must confirm there's the opportunity to prescribe on successful completion of the programme. The suitability of practice learning environments is assured through the educational audit quality standards practice placement for practice learning environment (QSPP). A disclosure and barring service check (DBS) must be complete and satisfactory. At application there must be confirmation that a practice assessor is identified. Practice assessors complete a section of the application form to confirm they're an experienced prescriber with suitable equivalent qualifications to support and assess the student. The practice team tell us that they verify qualifications of the practice assessor and practice supervisor with relevant professional bodies.

Documentation and the visit confirm that self-employed and non-NHS employed registrant applicants must meet all entry requirements and be supported by a practice assessor who meets the requirements of the role. Applications are fully scrutinised by the programme leader, evidenced in the overview of application process for the independent prescribing module. The overview of application process for the independent prescribing module addresses self-employed and non-NHS applicants. The process to support self-employed or non-NHS applicants is clearly included in the evidence presented through the application process, and audit of self-employed and non-NHS applicants. The programme lead tells us that they review all self-employed and non-NHS employed applicants and audit practice placement areas; documentation confirms this process.

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

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

**YES**  **NO**

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

**YES**  **NO**

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

be undertaken and their intended area of prescribing practice in the following areas (R1.6):

- Clinical/health assessment
- Diagnostics/care management
- Planning and evaluation

YES  NO

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

YES  NO

**Proposed transfer of current students to the programme under review**

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

The first cohort of the new programmes will commence on 15 September 2021; the last cohort of the old programmes commences on 21 April 2021. The programme team tell us that there will be no transfer of students to the new programme. However, if students have had a break in studies, they will consider on an individual basis the transfer of students onto the new programme, in line with UEA regulations. The programme team tell us that they will review applications and practice assessors to ensure that they meet the new standards in this event.

**Proposed transfer of current students to the Standards for student supervision and assessment (SSSA) (NMC, 2018).**

**From your documentary analysis and your meetings at the approval visit confirm if students will be transferring to the SSSA, and if so that they have informed choice and are fully prepared for supervision and assessment.**

Documentation and the programme team tell us that they prepare any students because of a break in studies, who are transferred to the new programme against the SSSA. They tell us that they will ensure that practice assessors are prepared against the new standards and programme.

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

YES  NO

**Outcome**

Is the standard met? MET  NOT MET



Date: 16 March 2021

**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 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. Documentary evidence confirm that teaching and learning strategies support achievement of the RPS competences. A blended learning approach includes online weekly one-hour webinars, and guided independent learning is supported by the school's VLE. Programme resources are presented as asynchronous learning, with a variety of reading material, podcast, narrated PowerPoint, recorded conversations, written workbook activities and discussion board activities to consolidate learning. Documentation and the students tell us the VLE resources are available, accessible and support learning. Students tell us that the learning and teaching strategies prepare them effectively for prescribing 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; students are assessed against these. Achievement of the competencies is verified by the practice assessor in agreement with the academic assessor. Feedback from SUCs on students' consultation skills in the practice learning environment is evidenced in the PAD. Students are encouraged to reflect on SUC feedback.

There's evidence of SUC involvement in programme planning. SUCs are involved in the curriculum, designing a webinar of their experiences and through the course committee. They tell us that there is a good relationship with the programme team, and have contributed to the interview design, interview questions and scoring criteria. They are involved in the recruitment and selection of applicants and the recruitment process.

Formative assessment supports preparation for summative assessments. Students receive ongoing feedback on their progress by the programme team. Support for numeracy and literacy are identified early in the programme through formative assessments. Students told us that they were aware of the learning and teaching service, and how to raise concerns over practice or programme issues. Summative assessments include numeracy and pharmacology examinations. Students tell that feedback from the programme team is timely and constructive.

The PAD records progression towards achievement of the RPS competencies. Reflective accounts and 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 formulary relevant to the individual's intended scope of prescribing practice (R2.4):
  - stating the general and professional content necessary to meet the programme outcomes
  - stating the prescribing specific content necessary to meet the programme outcomes
  - confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing

YES  NO

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

YES  NO

**If relevant to the review**

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

YES  NO  N/A

This programme is delivered in England.

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

YES  NO

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

YES  NO

**Outcome**

Is the standard met? MET  NOT MET

Date: 16 March 2021

**Post event review**

<b>Identify how the condition(s) is met:</b>	
N/A	
<b>Date condition(s) met:</b>	
N/A	
<b>Revised outcome after condition(s) met:</b>	<b>MET</b> <input type="checkbox"/> <b>NOT MET</b> <input type="checkbox"/>
N/A	

<b>Standard 3: Practice learning</b>	
<b>Approved education institutions must:</b>	
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	
<b>Approved education institutions, together with practice learning partners, must:</b>	
R3.2 ensure that practice learning complies with the NMC <a href="#">Standards for student supervision and assessment</a>	
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 <a href="#">Standards for student supervision and assessment</a>	
<b>Findings against the standard and requirements</b>	
<b>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</b>	
<ul style="list-style-type: none"> <li>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)</li> </ul>	<b>MET</b> <input checked="" type="checkbox"/> <b>NOT MET</b> <input type="checkbox"/>
R3.1 is met. Documentary evidence confirms that suitable and effective arrangements are in place to assure practice learning governance for students. Application screening confirms that QSP educational audits are in place across	

NHS trusts and the private, voluntary and independent sector for practice learning environments.

Documentation and the practice team tell us that self-employed and non-NHS applicants are reviewed by the programme team to ensure practice placements are suitable and effective practice learning environments.

Student facing documentation confirms the process for reporting concerns to the programme leader. PLPs, students, practice assessors and practice supervisors tell us that they know how to raise concerns. UEA's policy and how to raise concerns is documented in student and practice assessor handbooks and the VLE.

Programme documentation details how the application process ensures practice learning is protected. Managers confirm practice learning time is protected and support is in place. Self-employed and non-NHS applicants are screened at application to ensure suitable DBS reporting is in place. The application form enables the programme team to assess suitability of the practice area and if there's appropriate support by practice assessors. Programme documentation and the programme team confirms this process.

**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. Enhanced technology and simulated learning are used to support learning through the school's VLE with webinars, podcast, narrated PowerPoint and discussion board activities, including a webinar produced by service users.

The PAD includes evidence of how SUCs provide feedback on student performance following completion of a prescribing consultation by students.

The PAD requires students to undertake and record 78 hours practice learning with practice assessors and practice supervisors. They develop prescribing and consultation 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. Students must submit simulated prescriptions and clinical management plan in the PAD. Practice learning and assessment and practice hours are verified by the practice assessor.

Students tell us simulation-based learning resources support the development and assessment of the clinical skills required to ensure safe and effective future prescribing practice.

**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: 16 March 2021

**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. The programme team are established, experienced and appropriately qualified V300 prescribers.

The practice assessor and practice supervisor handbook evidences the roles of practice assessors, practice supervisors and academic assessors. Practice assessors are non-medical, medical and AHP prescribers who must demonstrate they have the experience to assess students. This is assured at application to the programme.

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 confirms that academic assessors work in partnership with practice assessors and practice supervisors to support practice learning. Academic assessors review student progression at staged intervals; initial, interim and final meetings towards achievement. There's evidence of effective communication with practice assessors and the process for agreement of achievement of the RPS competencies.

- 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 not met. There are processes in place to identify practice assessors and practice supervisors for the V300 programme. PLPs told us that they support the roles of practice assessors and practice supervisors in the practice area and show that they are aware of attributes required for these roles. At the visit the PLPs told us that they have a good relationship with the programme team and are involved in the course management meetings. The practice team confirm that practice assessors and practice supervisors are identified at application, and their prescribing qualification confirmed by them.

The development of practice assessors and practice supervisors is clearly demonstrated by the programme team and evidenced in the documentation. Practice assessors and practice supervisors access mandatory preparatory sessions and confirm with the programme team that these are completed. The programme team has developed monthly MS Teams meetings for practice assessors, practice supervisors and academic assessors to support communication and networking. At the visit practice assessors and practice

supervisors did not give assurance that they understood this process of preparation for the role. Practice assessors and supervisors confirmed they knew the process of raising concerns. There is documentary evidence of the preparation of practice assessors and practice supervisors but no implemented plan. (Condition one)

The programme team undertake the role of academic assessors. Students are allocated an academic assessor who is a registered healthcare professional from the prescribing team with suitable qualification. There is a newly qualified V300 teacher on the programme team and the programme team has developed a training session to address the role of the academic assessor, evidenced through documentation.

**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

**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. The application process confirms that practice assessors verify they're an experienced prescriber with suitable equivalent qualifications to support and assess the student. They must complete and sign the application form and confirm their professional registration. Programme documentation and the application form ensure that practice assessors meet the requirements to support and assess students. The programme team tell us they check and verify all practice assessor professional registrations at the point of application.

Documentary evidence confirms that the practice assessor, academic assessor and lead midwife for education have strategies to support student learning.

**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

Documentation confirms the operational process to prepare practice assessors and practice supervisors to assess and supervise students. At the visit the practice assessors and supervisors did not give assurance that they knew the preparation process for their roles. There is no implementation plan for the operational preparation of practice assessors and practice supervisors in relation to the V300 programme. (Condition one)

**Outcome**

**Is the standard met?** MET  NOT MET

The programme team has developed a virtual learning module to prepare practice assessors and practice supervisors and this is evidenced through the visit and documentation. The programme team has developed MS Teams monthly

meetings for practice assessors, practice supervisors and academic assessors to increase communication and encourage networking. However, at the visit practice assessors and practice supervisors are unable to give assurances of these processes.

Condition one: Provide an implementation plan for the preparation of practice supervisors and practice assessors for the prescribing programme in relation to a September 2021 start date. (SSSA R5.1, R8.1; SPP R4.2)

**Date:** 16 March 2021

**Post event review**

**Identify how the condition(s) is met:**

Condition one: Documentary evidence provides an implementation plan for the preparation of practice assessors and practice supervisors. This is clearly outlined for the practice assessors and practice supervisors in their handbook. The implementation plan outlines how practice assessors and practice supervisors will be prepared from application to the end of the programme.

Condition one is now met.

**Evidence:**

Independent prescribing flowchart for preparation of DPPs from April 2021, 9 December 2020

Plan for practice supervisors and practice assessors, undated

Independent prescribing SSSA overview, 4 December 2021

**Date condition(s) met:** 29 March 2021

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

**Standard 5: Qualification to be awarded**

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

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

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

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

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

R5.3 inform the student that the award must be registered with us within five years of successfully completing the programme and if they fail to do so they will have to

retake and successfully complete the programme in order to qualify and register their award as a prescriber  
 R5.4 inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice

**Findings against the standards and requirements**

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

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

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: 16 March 2021

**Post event review**

<b>Identify how the condition(s) is met:</b>  N/A
<b>Date condition(s) met:</b>  N/A
<b>Revised outcome after condition(s) met:</b> <b>MET</b> <input type="checkbox"/> <b>NOT MET</b> <input type="checkbox"/>  N/A



**Section four**

**Sources of evidence**

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

<b>Key documentation</b>	<b>YES</b>	<b>NO</b>
Programme document, including proposal, rationale and consultation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme specification(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Module descriptors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student facing documentation including: programme handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student university handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice assessment documentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice placement handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PAD linked to competence outcomes, and mapped against RPS <i>A Competency Framework for all Prescribers</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC, 2018) (Gateway 1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the <i>Standards for student supervision and assessment</i> (NMC, 2018) apply to the programme(s) (Gateway 2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the programme meets the <i>Standards for prescribing programmes</i> and RPS <i>Standards of proficiency for prescribers</i> (NMC, 2018) (Gateway 3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Curricula vitae for relevant staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Written placement agreements between the education institution and associated practice learning partners to support the programme intentions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation:		
List additional documentation:		
Post visit documentation: Independent prescribing flowchart for preparation of DPPs from April 2021, 9 December 2020		

Plan for practice supervisors and practice assessors, undated  
Independent prescribing SSSA overview, 4 December 2020

Additional comments:  
None identified.

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

	YES	NO
Senior managers of the AEI/education institution with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated practice learning partners with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme team/academic assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice leads/practice supervisors/ practice assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, please identify cohort year/programme of study:		
Two V300 students from MSc cohort year two One V300 student from advanced clinical practice pathway year two		
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation:		
Additional comments: None identified.		

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

	YES	NO
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Library facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Technology enhanced learning Virtual learning environment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Educational audit tools/documentation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Practice learning environments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, state where visited/findings:		
If you stated no above, please provide the reason and mitigation:		
Not required as UEA is an established approved education institution (AEI).		
Additional comments:		

None identified.

**Mott MacDonald Group Disclaimer**

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**Issue record**

**Final Report**

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