



# Programme approval visit report

## Section one

Programme provider name:	Warwick University
Programmes reviewed:	Independent and supplementary nurse prescribing V300
	Community practitioner nurse prescribing V150
	Community practitioner nurse prescribing V100
Title of programme(s):	Independent and Supplementary Prescribing
Academic level:	
	England, Wales, Northern Ireland  Level 5 Level 6 Level 7
Independent and supplementary nurse prescribing V300	SCQF Level 8 Level 9 Level 10
	Level 11
	England, Wales, Northern Ireland  Level 5 Level 6 Level 7
Community practitioner nurse prescribing V150	SCQF Level 8 Level 9 Level 10
	Level 11
	England, Wales, Northern Ireland  Level 5 Level 6 Level 7
Community practitioner nurse prescribing V100	SCQF Level 8 Level 9 Level 10
	Level 11
Date of approval visit:	16-17 March 2023





Programme start date:	
Independent and supplementary nurse prescribing V300 Community practitioner nurse prescribing V150 Community practitioner nurse prescribing V100	12 June 2023
QA visitor:	Registrant Visitor: Alison Wood





#### **Section two**

#### **Summary of review and findings**

Warwick University (WU) and Warwick Medical School (WMS) have significant expertise in the field of health and medicine, through undergraduate and postgraduate programmes in medical science, medicine and a suite of postgraduate continuing professional development and research programmes. Many of these programmes include placements and work experience which are accredited and regulated by organisations such as the General Medical Council.

Several academic staff are closely aligned with healthcare and the National Health Service (NHS), through professional practice in areas such as medicine and advanced clinical practice. Postgraduate programmes have attracted physicians and more recently nurses and allied health professionals. There's an established Master of Science (MSc) advanced clinical practice programme which local practice learning partners (PLPs) access.

WU is seeking approval as a new approved education institution (AEI) for delivery of an independent and supplementary prescribing programme (V300) within WMS.

The approval visit is undertaken face to face.

WU seeking AEI status is in response to feedback from students, PLPs and employers. Documentation and discussion at the approval visit confirm that the proposed programme is developed in response to PLPs and students requesting a V300 programme within the existing MSc advanced clinical practice programme.

There's clear commitment and investment to the proposed prescribing programme evidenced through the documentation and approval visit. WU will use WMS facilities for delivery of the programme, including access to student support services and specialised pastoral support within the WMS campus. Senior WMS representatives confirm the ongoing investment in the facilities available at WMS. Library representatives identify investments in their provision including this programme of study in their portfolio. The approval visit supports direct engagement with the information technology (IT) and student support teams within WMS as well as the pastoral support colleagues within WMS and the wider WU campus. The resources visited are appropriate for delivery of the proposed prescribing programme.

There are two ways to undertake the proposed V300 prescribing qualification for nurses. There's a part-time non-medical prescribing (V300) programme delivered as part of the MSc in advanced clinical practice in year two and a standalone part-time non-medical prescribing (V300) programme over six months leading to 40 credits at level seven. There's one intake each academic year for the prescribing





programme with a blended approach to learning with online and classroom sessions.

Programme documentation and discussions at the approval visit confirm evidence of effective partnership working and co-production of the prescribing programme between WU, PLPs, students and people who use services and carers (PUSC). There's evidence that the content and approach to learning, teaching and assessment is co-produced with PLPs, PUSC, students and employers. This includes current student feedback on their engagement with other AEI prescribing programmes, WMS modules and PLP requirements.

The programme is mapped to the Standards for prescribing programmes (SPP) (NMC, 2018), the Standards for student supervision and assessment (SSSA) (NMC, 2018) and the Royal Pharmaceutical Society (RPS) competency framework for all prescribers (RPS, 2021) which has been adopted by the NMC as the Standards of competency for prescribing practice.

Arrangements at programme level don't meet the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) or the SSSA as conditions apply.

WU and the V300 prescribing programme is recommended to the NMC for approval subject to five NMC conditions and three university conditions.

Two NMC recommendations, one university recommendation and one joint NMC and university recommendation are made.

Updated 22 May 2023:

WU has provided documentation to meet the NMC conditions. WU confirm the university conditions are met.

The programme is recommended to the NMC for approval.

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





Effective partnership working: collaboration, culture, communication and resources:

Condition five: The programme team must provide evidence that details opportunities throughout the programme for students to give feedback on their experience and the quality of all aspects of the programme in both theory and practice. (SFNME R3.18)

#### Selection, admission and progression:

Condition two: The programme team must provide evidence of the involvement of PUSC in the recruitment and selection of students to the prescribing programme. (SFNME R2.7)

#### **Practice learning:**

Condition one: The programme team must provide evidence of a formal audit process that ensures safe and effective practice learning environments for all students on the prescribing programme, including NHS, self-employed and non-NHS employed registrants. (SFNME R2.13; SPP R3.1)

Condition four: The programme team must provide a detailed implementation plan that clearly evidences how practice supervisors and practice assessors are prepared and supported to supervise and assess students undertaking the WU prescribing programme. (SSSA R5.1, R5.2, R8.1, R8.4; SPP R4.2)

#### Assessment, fitness for practice and award:

Condition three: The programme team must provide evidence of the agreed lead midwife for education (LME) partnership process or confirm that midwives aren't recruited to undertake the prescribing programme. (SPP R4.4)

Education governance: management and quality assurance:

Condition six: The programme team must review and revise the documentary paperwork for the

#### **Conditions:**





	programme with particular focus on clear mapping of the RPS framework, ensuring learning outcome three refers to the wider prescribing practitioners and that documentation is accurate, up-to-date and consistent throughout. Use full names of frameworks and documents that are being used to support teaching on the programme. (University condition)  Condition seven: The programme team must undertake the university level course approval process to approve the module as a postgraduate award. (University condition)  Condition eight: The programme team must revise the assessment strategy to remove the objective structured clinical examination element and clarify the reflective assignment component to ensure students have the opportunity to develop level seven critical reflection. (University condition)
Date condition(s) to be met:	15 May 2023
Recommendations to enhance the programme delivery:	Recommendation one: The programme team are recommended to strengthen students' understanding of how to raise and escalate concerns. (SFNME R1.5)
	Recommendation two: The programme team are recommended to review partnership working with PLPs to ensure a shared responsibility for theory and practice learning governance and quality assurance. (SFNME R2.5)
	Recommendation three: The programme team are recommended to develop a strategy to build on and embed PUSC engagement in the ongoing development and enhancement of the prescribing programme. (SFNME R1.12) (NMC and university recommendation)
	Recommendation four: The programme team are recommended to develop and enhance articulation of awareness of student knowledge and access of wider university support services. (University recommendation)





Focused areas for future	Partnership working with all stakeholders.
monitoring:	
	Practice learning environment audit and evaluation
	process.

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

#### Commentary post review of evidence against conditions:

WU has met the conditions set out by the panel at the approval visit.

The programme team provide evidence of a formal audit process that ensures safe and effective practice learning environments for all students on the prescribing programme. Condition one is met.

The programme team provide a process for PUSC to be involved in the recruitment and selection of students to the prescribing programme. Condition two is met.

The programme team confirm the appointment of the LME and their role within the programme. Condition three is met.

The programme team provide details on how practice supervisors and practice assessors are prepared and supported to supervise and assess students undertaking the WU prescribing programme. Condition four is met.

The programme team provide evidence that details opportunities throughout the programme for students to give feedback on their experience and the quality of all aspects of the programme in both theory and practice. Condition five is met.

The panel chair confirms that the university conditions six, seven and eight are met.

AEI Observations	Observations have been made by the education institution YES ☐ NO ⊠	
Summary of observations made, if applicable		
Final recommendation made to NMC:	Programme is recommended to the NMC for approval  Recommended to refuse approval of the programme	





Date condition(s)	15 May 2023
met:	

#### **Section three**

#### **NMC Programme standards**

Please refer to NMC standards reference points

Standards for prescribing programmes (NMC, 2018)

<u>Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers)</u>
(NMC, 2021)

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, 2022)

#### **Partnerships**

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

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

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

#### **Standard 1: The learning culture:**

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

#### Standard 2: Educational governance and quality:

- R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders
- R2.4 comply with NMC <u>Standards for student supervision and assessment</u>
- R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes





- R2.6 ensure that recruitment and selection of students is open, fair and transparent and includes measures to understand and address underrepresentation
- R2.7 ensure that service users and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection

#### **Standard 3: Student empowerment:**

- R3.3 have opportunities throughout their programme to work with and learn from a range of people in a variety of practice placements, preparing them to provide care to people with diverse needs
- R3.16 have opportunities throughout their programme to collaborate and learn with and from other professionals, to learn with and from peers, and to develop supervision and leadership skills
- R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning
- R3.18 have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice.

#### Standard 4: Educators and assessors:

- R4.7 liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment
- R4.9 receive and act upon constructive feedback from students and the people they engage with to enhance the effectiveness of their teaching, supervision and assessment
- R4.10 share effective practice and learn from others

#### Standard 5: Curricula and assessment:

- R5.4 curricula are developed and evaluated by suitably experienced and qualified educators and practitioners who are accountable for ensuring that the curriculum incorporates relevant programme outcomes
- R5.5 curricula are co-produced with stakeholders who have experience relevant to the programme
- R5.14 a range of people including service users contribute to student assessment

Standards for student supervision and assessment (NMC, 2018)

#### **Standard 1: Organisation of practice learning:**

- R1.4 there are suitable systems, processes, resources and individuals in place to ensure safe and effective coordination of learning within practice learning environments
- R1.7 students are empowered to be proactive and to take responsibility for their learning





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

#### **Standard 2: Expectations of practice supervisors:**

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

#### Standard 3: Practice supervisors: role and responsibilities:

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

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

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

#### Standard 7: Practice assessors: responsibilities:

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

#### Standard 9: Academic assessors: responsibilities:

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

#### Findings against the standard and requirements

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

Documentary evidence and the approval visit confirm that there's effective partnership working between the programme team, PLPs, PUSC and students in the development and planned delivery of the programme. PLPs, PUSC and students describe being part of programme development, and documentary evidence supports meetings and stakeholder engagement events having taken place with the programme team. The programme steering group remains in place to support continued engagement with all stakeholders, and documentary evidence and stakeholders confirm their engagement with this process.

Programme documentation and PLPs confirm that there's mechanisms in place to support the programme application process. These processes ensure that governance arrangements are in place to support prescribing practice learning.





PLPs work in partnership with WMS to provide support for practice assessors and practice supervisors. WMS provide opportunities so that practice assessors and practice supervisors are suitably prepared and qualified to support students engaging with the prescribing programme. WMS provide online preparation for these roles with access to the Health Education England (HEE) cooperative resources. At the approval visit, practice supervisors and practice assessors don't however feel prepared to support students on the WU prescribing programme and are unaware of the WMS approach to preparation for these roles. (Condition four)

PLPs confirm that there's strong links within the programme team structures and programme steering group. PLPs tell us they already work in partnership with the programme team if there's issues or concerns related to the existing MSc programme and are aware of the opportunities to provide feedback within the existing programme structures. PLPs tell us that they fully support WMS seeking approval of a prescribing programme. They confirm that they're aware of the programme specific mechanisms and processes that are already in place for the advanced clinical practice programme and development of the prescribing programme, and that these will remain in place to ensure a partnership approach to applications.

PLP representatives confirm a commitment to support the ongoing development and delivery of the programme and are fully aware of the importance of working in partnership with WMS and the programme team at both strategic and operational levels. At the visit we see evidence of engagement between PLP leads with WMS on the provision of required, and appropriate and flexible education for the workforce supported by WU and WMS strategies. The prescribing programme steering group membership includes PLPs and provides opportunities for programme specific operational and strategic governance discussion. The bimonthly meetings of the WMS postgraduate learning, teaching and quality committee provide opportunities for quality assurance of all modules and postgraduate programmes. Programme documentation indicates and PLPs confirm that PLPs work in partnership with the programme team and other AEIs and organisations as part of existing prescribing programmes. WMS plan to engage in this governance structure with the PLPs and other AEIs. (Recommendation two)

PUSC confirm that their voice is heard across various elements of the programme through their engagement and inclusion with the programme steering group. There's documentation, which reflects their existing and ongoing involvement in programme development. They tell us that they've been fully involved in the development and planned provision of the proposed programme. PUSC are part of the programme steering group and feel their voice is embedded throughout learning and teaching strategies and within assessments. They tell us they're well supported and prepared for their role in the programme by the programme team and WMS. At the visit PUSC share how support from the programme team includes using new technology and being supported to understand and change the





use of acronyms and university language. The programme steering group comprising of the programme team support PUSC to engage and contribute on a programme level.

There's currently no PUSC involvement in the recruitment and selection of students, however PUSC at the visit confirm they're willing to be involved in this aspect of the programme. (Condition two)

At the approval visit, we also hear how PUSC contribute to other elements within the wider WMS and WU suite of programmes. PUSC state there are other ways they could be involved and that the group could be expanded. (Recommendation three)

We meet current WMS advanced clinical practice programme students within clinical practice and at the visit. Students tell us that the WMS programme team are enthusiastic and that they provide a quality teaching and learning experience. Students feel able to provide feedback using the evaluation process during and at the end of the programme. Students in the clinical areas and at the visit feel their voices are heard and confirm opportunities to feedback to the programme team regularly, particularly due to the joint appointments of the programme team situated 50 percent of their time in practice.

Some students tell us they know how to raise and escalate concerns and speak highly of the support provided at WMS. There are however some mechanisms which students don't know about when considering raising or escalating concerns. (Recommendation one)

There's documentation which evidence WMS processes for module and programme evaluations as well as student staff liaison committees which provide opportunities for student feedback. Some students at the visit can't however identify the feedback processes for theory or practice learning at WMS or tell us how feedback is used by the programme team. (Condition five)

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: <a href="Standards framework for nursing and midwifery education">Standards framework for nursing and midwifery education</a> <a href="MET">MET</a> <a href="MET">NOT MET</a>
There's no PUSC involvement in the recruitment and selection of students for the prescribing programme.
Condition two: The programme team must provide evidence of the involvement of PUSC in the recruitment and selection of students to the prescribing programme. (SFNME R2.7)





Some students at the visit can't identify the feedback processes at WMS or tell us how feedback is used by the programme team.

Condition five: The programme team must provide evidence that details opportunities throughout the programme for students to give feedback on their experience and the quality of all aspects of the programme in both theory and practice. (SFNME R3.18)

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	$\geq$
-----	-----------	--------

WMS provide online preparation for practice supervisor and practice assessor roles with access to the HEE cooperative resources. At the approval visit, practice supervisors and practice assessors don't feel prepared to support students on the WU prescribing programme and are unaware of the WMS approach to preparation for these roles.

Condition four: The programme team must provide a detailed implementation plan that clearly evidences how practice supervisors and practice assessors are prepared and supported to supervise and assess students undertaking the WU prescribing programme. (SSSA R5.1, R5.2, R8.1, R8.4; SPP R4.2)

#### Post event review

#### Identify how the condition(s) is met

Condition two: The programme team provide evidence of PUSC involvement in the recruitment and selection of students. PUSC are part of application process. Questions set by PUSC are added to the application form for applicants and PUSC are invited to a review meeting with the programme team.

Condition two is met.

#### Evidence:

Independent and supplementary prescribing (ISP) admissions process map for new applicant, undated

ISP admissions process map for offer holder, undated

Module application form, undated

Minutes from ISP steering group, 4 May 2023

Condition four: The programme team provide an implementation plan evidencing how practice supervisors and practice assessors are prepared and supported for the role. The HEE preparation online programme is provided by WMS and preparedness is captured within the application form.





Condition four is met.	
Evidence: Module application form, undated Pre-module approval process document, 25 April 2023 Supervisor handbook, undated Indicative summary for practice assessor and practice supervisor preparation and support document, undated	
Condition five: The programme team provide evidence of the various opportunities throughout the programme for students to give feedback on their experience and the quality of all aspects of the programme in both theory and practice. Students have access to the end of module evaluation form alongside tripartite meetings throughout the duration of the programme. These are signposted within the module guide for all students.	
Condition five is met.	
Evidence: Module evaluation form, undated Indicative summary for practice assessor and practice supervisor preparation and support document, undated Module guide 2022-2023, undated	
Date condition(s) met: 15 May 2023	
Revised outcome after condition(s) met MET NOT MET	

#### Student journey through the programme

#### Standard 1: Selection, admission and progression

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

- R1.1 ensure that the applicant is a registered nurse (level 1), a registered midwife or a SCPHN before being considered as eligible to apply for entry onto an NMC approved prescribing programme
- R1.2 provide opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non- NHS employed registrants) to apply for entry onto an NMC approved prescribing programme
- R1.3 confirm that the necessary governance structures are in place (including clinical support, access to protected learning time and employer support where appropriate) to enable students to undertake, and be adequately supported throughout, the programme





- R1.4 consider recognition of prior learning that is capable of being mapped to the RPS Competency Framework for all Prescribers
- R1.5 confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme
- R1.6 confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas:
- R1.6.1 Clinical/health assessment
- R1.6.2 Diagnostics/care management
- R1.6.3 Planning and evaluation of care
- R1.7 ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme

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

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

Proposed transfer of current students to the <u>Standards for student</u> <u>supervision and assessment</u> (NMC, 2018).

Demonstrate a robust process to transfer current students onto the <u>Standards for</u> <u>student supervision and assessment</u> (NMC, 2018).

#### Findings against the standard and requirements

### **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)

YFS 🔯	NO 🗆
	110

 Evidence of selection process that demonstrates opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, selfemployed or non-NHS employed registrants) to apply for entry onto an





NMC approved prescribing programme. Evidence of this statement in documentation such as: programme specification; module descriptor, marketing material. Evidence of this statement on university web pages (R1.2)  YES  NO				
TES NO				
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				
<ul> <li>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)</li> </ul>				
MET ⊠ NOT MET □				
R1.3 is met. The documented application process demonstrates there's a governance structure to ensure access to protected learning time and employer and clinical support. Those already on the MSc are supported to meet the prescribing programme admission criteria by year two of their programme.				
All applicants follow the WMS prescribing application process that requires completion of a specific V300 prescribing application form. Applicants must demonstrate that they meet the programme entry criteria by completing a level seven clinical assessment module prior to commencement of the prescribing programme. The programme team check the suitability of applicants and their supporting evidence.				
Applicants who are NHS employees are identified by PLPs as potential applicants, who assess their suitability as future prescribers and for the programme. Self-employed applicants must evidence governance arrangements that meet the requirements of the application process. Non-NHS employed registrants must evidence organisational support and that governance arrangements also meet the programme requirements. All applicants must also complete the independent and supplementary prescribing supervisor nomination form providing the practice assessor and practice supervisor information for the applicant to the programme team.				
Evidence provides assurance that the following QA approval criteria are met:				
<ul> <li>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)</li> </ul>				
YES ⊠ NO □				





	Processes are in place to confirm on entry that an undertake a prescribing programme has the compacademic ability to study at the level required for t	petence, that progr	experience	and
	Processes are in place to confirm that the applica effective practice at a level of proficiency appropri be undertaken and their intended area of prescrib following areas (R1.6):  - Clinical/health assessment - Diagnostics/care management - Planning and evaluation	iate to the	e programn	
	Processes are in place to ensure that applicants for supplementary/independent prescribing programme with the NMC for a minimum of one year prior to a the programme (R1.7)	nes have	n for entry	
Propo	sed transfer of current students to the progran	nme und	ler review	
an <u>eva</u> progra (adopt throug	your documentary analysis and your meeting valuative summary to confirm how the Standard ammes and Standards of proficiency for nurse tion of the RPS Competency Framework for all gh the transfer of existing students onto the programm are no current students as this is a new programm	Is for pre and mid Prescrit roposed	e <u>scribing</u> Iwife preso bers) will k programm	criber be met
	sed transfer of current students to the <b>Standar</b>	ras tor s	<u>tuaent</u>	
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.  There are no current students as this is a new programme.				
	ance is provided that Gateway 1: <u>Standards frame</u> fery education relevant to selection, admission and		sion are m	
Outco	me			
Is the	standard met? M	ET 🖂	NOT MI	ET 🗌
Date:	17 March 2023			
Post e	event review			





Identify how the condition(s) is met:
N/A
Date condition(s) met:
Date condition(s) met.
N/A
Revised outcome after condition(s) met: MET NOT MET
N/A
Otan Ind I O O water I was
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
3.19
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 <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
<ul> <li>Evidence of the learning and teaching strategies that will be used to support achievement of those competencies (R2.3)</li> </ul>
MET ⊠ NOT MET □
R2.3 is met. Programme documentation and the approval visit confirms that here's a variety of learning and teaching strategies identified that support students to achieve the RPS competencies. The programme content is delivered through a R0-credit module and is mapped against the RPS competency framework for all prescribers. Students undertake one module which combines face to face teaching and online learning via the HEE cooperative online course and WMS virtual earning environment (VLE). There's a clear timetable of topics and mapping to demonstrate how this supports the achievement of the programme outcomes.
The exam assessments are mapped to the programme outcomes and the RPS competencies. Practice assessment requires students to demonstrate progression owards achievement of the RPS competencies over the six-month programme in the logbook. A detailed record of 70 hours practice learning is recorded in the practice logbook document and electronic OneFile (this is the IT platform) V300 portfolio which is confirmed by the students' practice assessor and practice supervisor.

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

Students are supervised in practice. WMS require at least 75 percent of practice learning supervision to be with the named practice supervisor provided at the application stage. Students are also required to have at least three supervised

sessions with their practice assessor during the prescribing programme.

Achievement of the RPS competencies is confirmed in the logbook through a statement of competency which is signed by the practice assessor and practice

supervisor and agreed by the academic assessor.

- 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 nec	essary to mee	et the
programme outcomes - confirming that the programme outcomes of the NMC register: the four fields of nursing health, learning disabilities and children's nursing specialist community public health nursing	practice (adu	lt, mental
, ,,	YES	⊠ NO □
<ul> <li>The programme structure demonstrates a bala learning. A range of learning and teaching stra programme specification, programme handboo theory / practice balance detailed. There are a descriptors and outcomes specified. (R2.5)</li> </ul>	itegies are de ok and module	tailed in the e descriptor with odule aims,
If relevant to the review		
Evidence to ensure that programmes delivered  A significant which are parts the way of the Walds  Output  Description of the Walds  Outpu		
legislation which supports the use of the Welsl YES		N/A 🖂
The programme is only delivered in England.		
Assurance is provided that Gateway 1: Standards fra	mework for n	ursing and
•		<u> </u>
midwifery education relevant to curricula and assessi		
<u>midwifery education</u> relevant to curricula and assessing Assurance is provided that Gateway 2: <u>Standards for the standards for the stand</u>	ment are met YES	⊠ NO □
midwifery education relevant to curricula and assessing	ment are met YES	NO
midwifery education relevant to curricula and assessment Assurance is provided that Gateway 2: Standards for assessment relevant to curricula are met  Outcome	ment are met YES student supe YES	NO
midwifery education relevant to curricula and assessing Assurance is provided that Gateway 2: Standards for assessment relevant to curricula are met	ment are met YES student supe	NO
midwifery education relevant to curricula and assessment Assurance is provided that Gateway 2: Standards for assessment relevant to curricula are met  Outcome	ment are met YES student supe YES	NO
Assurance is provided that Gateway 2: Standards for assessment relevant to curricula are met  Outcome Is the standard met?  Date: 17 March 2023  Post event review	ment are met YES student supe YES	NO
Assurance is provided that Gateway 2: Standards for assessment relevant to curricula are met  Outcome Is the standard met?  Date: 17 March 2023	ment are met YES student supe YES	NO  Prvision and  NO  NO  NO
Assurance is provided that Gateway 2: Standards for assessment relevant to curricula are met  Outcome Is the standard met?  Date: 17 March 2023  Post event review	ment are met YES student supe YES	NO  Prvision and NO  NO  NO
Assurance is provided that Gateway 2: Standards for assessment relevant to curricula are met  Outcome Is the standard met?  Date: 17 March 2023  Post event review Identify how the condition(s) is met:	ment are met YES student supe YES	NO  Prvision and NO  NO  NO
Assurance is provided that Gateway 2: Standards for assessment relevant to curricula are met  Outcome Is the standard met?  Date: 17 March 2023  Post event review Identify how the condition(s) is met:  N/A	ment are met YES student supe YES	NO  Prvision and NO  NO  NO
Assurance is provided that Gateway 2: Standards for assessment relevant to curricula are met  Outcome Is the standard met?  Date: 17 March 2023  Post event review Identify how the condition(s) is met:  N/A  Date condition(s) met:	ment are met YES student supe YES	NO  Prvision and NO  NO  NO
Assurance is provided that Gateway 2: Standards for assessment relevant to curricula are met  Outcome Is the standard met?  Date: 17 March 2023  Post event review Identify how the condition(s) is met:  N/A  Date condition(s) met:  N/A	ment are met YES  student supe YES  MET	NO Dervision and NO DERVISION AND DEVISION 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 <u>Standards for student</u> 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 <u>Standards for student supervision and assessment</u>

#### Findings against the standard and requirements

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

	MET ☐ NOT MET ⊠
	employed (R3.1)
	arrangements specifically tailored to those applicants who are self-
	governance for practice learning are in place for all applicants including
•	Evidence to ensure that suitable and effective arrangements and

	_	_
R3.1 is not met. The application process ensur	es that all governance	
arrangements are in place for NHS applicants.	self-employed and non-l	NHS

arrangements are in place for NHS applicants, self-employed and non-NHS applicants. All applications are scrutinised by the programme leader who's a registered nurse and prescriber.

PLPs at the visit confirm that governance arrangements are in place for practice learning. Line managers must evidence support for protected learning time, the suitability of applicants and that there's appropriate supervision and assessment of students as part of the application process and nomination forms. PLPs agree to support preparation of practice assessors and practice supervisors for the supervision and assessment of prescribing students via engagement and completion of the HEE cooperative designated prescribing practitioner (DPP) resource. This is a requirement on the nomination form for the practice supervisor and practice assessor. The programme team are responsible for checking that governance arrangements are in place, and academic assessors monitor that





practice learning is protected through the tripartite meetings during the programme with the student and practice assessor/practice supervisor.

There's no audit or monitoring process in place to ensure practice learning environments are safe and effective for student learning. (Condition one)

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

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

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

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

MET oxtimes	NOT MET

R3.3 is met. Documentary evidence and the approval visit confirms the use of technology to support learning and assessment. Programme documentation confirms that learning opportunities are provided and support the preparation for the practical assessment of prescribing practice in the learner's clinical area. Students receive support and preparation in prescribing assessments and prescription writing skills in the classroom. WMS have teaching facilities and experienced prescribers and educators to support students in this theoretical area.

Technology enhanced learning is embedded within the programme. Students have access to the online British national formulary and the VLE supports directed and self-directed study opportunities. Programme documentation and the approval visit evidence how the HEE standardised numeracy assessment tool process is accessed online. The programme content utilises online learning tools and resources provided by the HEE cooperative. WMS has a dedicated learning technologist to support the development of the VLE and integration of the HEE cooperative resources into the programme. The OneFile portfolio and a practice logbook is used for practice-based learning assessments with midway and end point assessments against each competency.

#### 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)





	YE	S⊠	NO 🗌
Assurance is provided that Gateway 1: Standards framew	ork for r	nursing ar	<u>nd</u>
midwifery education relevant to practice learning are met	YE	s□	NO 🖂
There's no audit or monitoring process in place to ensure environments are safe and effective for student learning. (	•	_	
Assurance is provided that Gateway 2: Standards for students assessment relevant to practice learning are met	<u>lent supe</u>	<u>ervision a</u>	<u>ınd</u>
assessment relevant to practice learning are met	YE	S⊠	NO 🗌
Outcome			
Is the standard met?	Т	NOT M	IET 🛛
There's no audit or monitoring process in place to ensure environments are safe and effective for student learning.	practice	learning	
Condition one: The programme team must provide eviden process that ensures safe and effective practice learning estudents on the prescribing programme, including NHS, so NHS employed registrants. (SFNME R2.13; SPP R3.1)	environm	nents for a	all
<b>Date:</b> 17 March 2023			
Post event review			
Identify how the condition(s) is met:			
Condition one: The programme team produce a formal au safe and effective practice learning environments for all st prescribing programme. This includes NHS, self-employed employed registrants. Information is provided at the time of practice learning area and monitored through feedback ar group.	udents of and no of applica	on the on-NHS ation for e	each
Condition one is met.			
Evidence: Pre-module approval process document, 25 April 2023 Module application form, undated Module evaluation form, undated Process document for ongoing monitoring of practice learn undated ISP steering group terms of reference, undated	ning env	ironment	S,
Date condition(s) met: 15 May 2023			





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

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

Findings against the standards and requirements





Provide an 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
<ul> <li>There is evidence of how the programme will ensure how support, supervision, learning and assessment provided complies with the NMC <u>Standards framework for nursing and midwifery education</u> (R4.1)</li> <li>MET ☑ NOT MET ☐</li> </ul>
R4.1 is met. Programme documentation and the approval visit provide assurance that the programme ensures support, supervision, learning and assessment complies with the SFNME.
The suitability of practice assessors and practice supervisors is determined at commencement of the programme. Information on the roles is provided to the practice supervisors, practice assessors and students in the programme documents and in the practice supervisor and practice assessor nomination form. Those undertaking these roles have access to a preparation programme provided by WMS via the HEE cooperative online platform. Practice assessors and practice supervisors confirm that they meet the requirements for supervision and assessment via the practice supervisor and practice assessor nomination form.
PUSC feedback is gained within the student logbook. There's effective communication between the practice assessor and academic assessors via the OneFile portfolio document and practice logbook which provides the opportunity to highlight any concerns. Students confirm that they're confident to discuss concerns in the first instance with the support team at WMS. Documents and discussion at the approval visit confirm there's a process for the academic assessor to confirm student achievement of competencies.
There is evidence of how the <u>Standards for student supervision and</u> <u>assessment</u> are applied to the programme. There are processes in place to identify the supervisors and assessors along with how they will be prepared for their roles (R4.2)
R4.2 is not met. The programme team comprises of three qualified prescribers who act as academic assessors and hold roles within WMS and within PLPs. Academic assessors are supported in their role by WMS, and regular programme steering group meetings ensure no academic assessor is acting as a practice assessor for any students on the programme.
PLPs, practice assessors and practice supervisors confirm that the programme team are supportive and they're able to contact them if there's any student issues

or concerns. WMS engages with the DPP e-learning resource from the HEE





cooperative. Potential practice supervisors and practice assessors obtain access to this resource via the WMS programme team.

Practice supervisors and practice assessors currently support students on prescribing programmes at other AEIs and feel prepared for this. The practice a р р

assessors and practice supervisors at the visit don't however prepared to undertake the role to supervise and assess stude prescribing programme. (Condition four)	feel adequatents on the	ately WU	
Evidence provides assurance that the following QA appro	oval criteria	a are met:	
<ul> <li>Evidence of programme leader being a registered heal with appropriate knowledge, skills and experience in a requirements of the Standards framework for nursing a education. (R4.3)</li> </ul>	ccordance vand midwife	with the ery	
	YES 🔀	NO 🗌	
<ul> <li>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)</li> </ul>			
YES 🗆	NO $\boxtimes$	N/A	
R4.4 is not met. WU don't provide midwifery education. WU a recruit midwives onto their prescribing programme. The progreurrently engaging with a local AEI and exploring an arranger support midwives recruited to the prescribing programme at V arrangement isn't yet agreed. Documentary evidence of the abetween WU and a LME is required if WU are going to admit prescribing programme. (Condition three)	ramme tean ment for the WU. This agreed arrar	n are eir LME to ngement	
Provide an <u>evaluative summary</u> from your documentary a evidence AND discussion at the approval visit to demons provided that the QA approval criteria below is met or no	strate if ass		
<ul> <li>Processes are in place to ensure the student is assign assessor who is a registered healthcare professional a prescriber with suitable equivalent qualifications for the student is undertaking. Processes are in place to ensu circumstances only, the same person may fulfil the role supervisor and practice assessor for that part of the profescribing student is undergoing training in a practice such instances, the student, practice supervisor/asses need to evidence why it was necessary for the practice assessor roles to be carried out by the same person (Fig. 1).</li> </ul>	and an expense programmere that in expense of practice ogramme we learning sear and the expervisor R4.5)	erienced the the exceptional e where the etting. In AEI will	





R4.5 is met. Students are required to submit written evidence of their practice assessor and practice supervisor prior to the start of the prescribing programme within the application and nomination forms, and submit to the programme lead for prescribing. The practice supervisor and practice assessor nomination is reviewed by the programme team as part of the application process and within the prescribing programme steering group to ensure the correct support is in place.

The programme team provide support to a student to find an appropriately prepared practice assessor and separate practice supervisor if the student is unable to find one within their practice area by the start of the programme. WMS programme team confirm an individual won't hold both roles for the same student.

Documents and discussion at the approval visit confirm a process for ongoing and effective communication between the practice assessor and academic assessor to support student progress and achievement of competencies. There are opportunities within the programmes online electronic OneFile portfolio and practice logbook for practice assessors, practice supervisors and academic assessors to document progress. Feedback, focusing on attaining the learning outcomes and RPS competencies, is facilitated throughout the OneFile portfolio, the practice logbook and regular student tripartite meetings with the programme team. There's a particular focus on midway assessment and final assessment at the end of the programme. Regular tripartite meetings ensure objectivity and mitigate any risks to 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 we equivalent qualifications for the programme the student		
	(R4.6)	YES 🖂	NO 🗌
•	Processes are in place to provide feedback to students programme to support their development as necessary competencies and programme outcomes (R4.7)		
	compositioned and programme datesmes (it in )	YES 🖂	NO 🗌
•	Processes are in place to assess the student's suitability for aw on the successful completion of a period of practice-based learn to their field of prescribing practice (R4.8)		
	to their hold of procenting practice (ivi.e)	YES 🖂	NO 🗌
•	Processes are in place to ensure that all programme le	arning outcon	nes are

This includes:

met, addressing all areas necessary to meet the RPS competencies (R4.9).





<ul> <li>successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and</li> <li>successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a</li> </ul>		
score of 100%).  YES  NO		
Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to supervision and assessment are met  YES NO		
Assurance is provided that Gateway 2: <u>Standards for student supervision and assessment</u> relevant to supervision and assessment are met  YES \[ \] NO \[ \]		
Practice supervisors and practice assessors are unable to provide information on how they're prepared to take on the role for students who undertake the WU prescribing programme. There's a concern that they don't have a robust understanding of the proficiencies and programme outcomes they're supporting students to achieve, related to the WU programme. (Condition four)		
Outcome		
Outcome         Is the standard met?       MET □ NOT MET □		
Is the standard met? MET ☐ NOT MET ☐  There's no LME in place to support midwives recruited to the prescribing		
Is the standard met?  MET NOT MET  There's no LME in place to support midwives recruited to the prescribing programme.  Condition three: The programme team must provide evidence of the agreed LME partnership process or confirm that midwives won't be recruited to undertake the		
Is the standard met?  MET NOT MET  There's no LME in place to support midwives recruited to the prescribing programme.  Condition three: The programme team must provide evidence of the agreed LME partnership process or confirm that midwives won't be recruited to undertake the prescribing programme. (SPP R4.4)  Practice supervisors and practice assessors are unable to provide information on		
There's no LME in place to support midwives recruited to the prescribing programme.  Condition three: The programme team must provide evidence of the agreed LME partnership process or confirm that midwives won't be recruited to undertake the prescribing programme. (SPP R4.4)  Practice supervisors and practice assessors are unable to provide information on how they're prepared to take on the role for the WU prescribing programme.  Condition four: The programme team must provide a detailed implementation plan that clearly evidences how practice supervisors and practice assessors are prepared and supported to supervise and assess students undertaking the WU		





Identify how the condition(s) is met:
Condition three: An LME is appointed and the programme team outline the LME role to support midwives on the prescribing programme.
Condition three is met.
Evidence: Confirmation of acceptance letter from LME, 24 April 2023 Outline of LME role in course management, undated
Condition four: The programme team provide an implementation plan evidencing how practice supervisors and practice assessors are prepared and supported for the role. The HEE preparation online programme is provided by WMS and preparedness is captured within the application form.
Condition four is met.
Evidence: Module application form, undated Pre-module approval process document, 25 April 2023 Supervisor handbook, undated Indicative summary for practice assessor and practice supervisor preparation and

C
to
n
45
r
1 6
₹.
0
١.
ıa
li
fi
'n
4
_
n
+,
`
h
Δ
2
۱A
ı
r
4
۵,
4

Revised outcome after condition(s) met:

Date condition(s) met: 15 May 2023

support document, undated

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

MET 🖂

NOT MET

- 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 their competence and scope of practice

## prescribe from the formulary they are qualified to prescribe from and within 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 $\square$ 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? $MET \boxtimes$ NOT MET **Date:** 17 March 2023 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	$\boxtimes$	
consultation		
Programme specification(s)		$\square$
Module descriptors	$\boxtimes$	
Student facing documentation including: programme	$\boxtimes$	
handbook		
Student university handbook	$\boxtimes$	
Practice assessment documentation	$\boxtimes$	
Practice placement handbook	$\boxtimes$	
PAD linked to competence outcomes, and mapped	$\boxtimes$	
against RPS A Competency Framework for all		
Prescribers		
Mapping document providing evidence of how the	$\boxtimes$	
education institution has met the Standards framework for		
nursing and midwifery education (NMC, 2018) (Gateway		
1)		
Mapping document providing evidence of how the	$\boxtimes$	
Standards for student supervision and assessment (NMC,		
2018) apply to the programme(s) (Gateway 2)		
Mapping document providing evidence of how the	$\boxtimes$	
programme meets the Standards for prescribing		
programmes and RPS Standards of proficiency for		
prescribers (NMC, 2018) (Gateway 3)		
Curricula vitae for relevant staff		
Registered healthcare professionals, experienced	$\boxtimes$	
prescribers with suitable equivalent qualifications for the		
programme - registration checked on relevant regulators		
website	<b>6</b>	
Written placement agreements between the education	$\boxtimes$	
institution and associated practice learning partners to		
support the programme intentions.		
If you stated no above, please provide the reason and mitig		
There's no programme specification; all information is included in the module		
descriptor and programme handbook.		
List additional documentation:		
Documentation to meet conditions:		
ISP admissions process map for new applicant, undated		
ISP admissions process map for offer holder, undated		
Module application form, undated		





Minutes from ISP steering group, 4 May 2023 Pre-module approval process document, 25 April 2023 Supervisor handbook, undated Indicative summary for practice assessor and practice supsupport document, undated Module evaluation form, undated Module guide 2022-2023, undated Module application form, undated Process document for ongoing monitoring of practice lear undated ISP steering group terms of reference, undated Confirmation of acceptance letter from LME, 24 April 2023 Outline of LME role in course management, undated Additional comments:	ning environ		
None identified.			
During the event the visitor(s) met the following group	s:		
	YES	NO	
Senior managers of the AEI/education institution with responsibility for resources for the programme			
Senior managers from associated practice learning partners with responsibility for resources for the programme			
Programme team/academic assessors			
Practice leads/practice supervisors/ practice assessors			
Students			
If yes, please identify cohort year/programme of study: Two x MSc advanced clinical practice year three			
Service users and carers			
If you stated no above, please provide the reason and mit	igation:		
Additional comments: None identified.			
The visitor(s) viewed the following areas/facilities duri	ng the even	t:	
	YES	NO	
Specialist teaching accommodation (e.g. clinical skills/simulation suites)			
Library facilities			
Technology enhanced learning  Virtual learning environment			
Educational audit tools/documentation			

Practice learning environments





If practice learning environments are visited, state where visited/findings: Review of practice learning environments and meetings with WMS students, practice assessors, practice supervisors, as well as clinical leaders at University Hospitals Birmingham NHS Foundation Trust, Heartlands Hospital. As part of the PLP visit, current WMS students are met in the clinical setting and those who support students on the MSc advanced clinical practice programme at WMS. These practice learning environments are suitable for V300 prescribing

We toured the WMS campus, including student study spaces, various classrooms including technology-enhanced spaces for those with additional learning needs and the WMS library on campus. We also met with the team who provide pastoral support for all WMS students and the student administration and VLE team who support the students and administrative processes.

If you stated no above, please provide the reason and mitigation: An educational audit tool isn't available. This is subject to a condition (Condition one).

Additional comments:

None identified.

students.

#### **Mott MacDonald Group Disclaimer**

This document is issued for the party which commissioned it and for specific purposes connected with the captioned project only. It should not be relied upon by any other party or used for any other purpose.

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 error or omission which is due to an error or omission in data supplied to us by other parties.

Issue record				
Final Report				
Author(s):	Alison Wood	Date:	28 March 2023	
Checked by:	Ian Felstead-Watts	Date:	3 April 2023	
Submitted by:	Amy Young	Date:	31 May 2023	
Approved by:	Leeann Greer	Date:	5 June 2023	