Programme approval report

Section one

<table>
<thead>
<tr>
<th>Programme provider name:</th>
<th>University of Salford</th>
</tr>
</thead>
</table>

**In partnership with:**  
*(Associated practice learning partners involved in the delivery of the programme)*

<table>
<thead>
<tr>
<th>Clinical Commissioning Groups:</th>
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</thead>
<tbody>
<tr>
<td>Bolton Primary Care Services</td>
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<tr>
<td>Bury Primary Care Services</td>
</tr>
<tr>
<td>Heywood, Middleton and Rochdale Primary Care Services</td>
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<tr>
<td>Manchester Primary Care Services</td>
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<tr>
<td>Oldham Primary Care Services</td>
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<tr>
<td>Salford Primary Care Services</td>
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<tr>
<td>Stockport Primary Care Services</td>
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<tr>
<td>Tameside and Glossop Primary Care Services</td>
</tr>
<tr>
<td>Trafford Primary Care Services</td>
</tr>
<tr>
<td>Wigan Borough Primary Care Services</td>
</tr>
</tbody>
</table>

**NHS Trusts**

<p>| East Lancashire Hospitals NHS Trust |
| Royal Blackburn Hospital |
| Bolton NHS Foundation Trust; Royal Bolton Hospital |
| Manchester University NHS Foundation Trust: Royal Manchester Children's Hospital |
| Royal Manchester Eye Hospital |
| Lancashire Teaching Hospitals: |
| Royal Preston Hospital |</p>
<table>
<thead>
<tr>
<th>Programs reviewed:</th>
<th>Independent and supplementary nurse prescribing V300</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title of programme(s):</td>
<td>Independent and supplementary nurse prescribing</td>
</tr>
<tr>
<td>Date of approval visit:</td>
<td>31 January 2019</td>
</tr>
<tr>
<td>Programme start date:</td>
<td>6 June 2019</td>
</tr>
<tr>
<td>Academic level:</td>
<td>England, Wales, Northern Ireland</td>
</tr>
<tr>
<td>QA visitor(s):</td>
<td>Kevin Gormley</td>
</tr>
</tbody>
</table>
Section two

Summary of review and findings

The University of Salford (UoS), school of health and society (the school) is seeking approval for the independent and supplementary nurse prescribing preparation programme (V300) against the NMC Standards for prescribing programmes (NMC, 2018) and Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers) (NMC, 2018).

Documentary review and the approval process demonstrates robust evidence of a commitment towards partnership working with key stakeholders. The programme is clearly mapped against the Standards for prescribing programmes (NMC, 2018) and the RPS competency framework for all prescribers. The partnership between UoS and practice learning partners (PLPs) is robust, with evidence of active and effective engagement at an operational and strategic level. There is evidence of effective communication networks between academic staff delivering the programme and PLPs to ensure consistency and comparability of students experience across differing practice learning environments.

The programme is recommended to the NMC for approval with two conditions. One recommendation is made.

29 March 2019

Evidence was provided that the changes required to meet the two conditions have been made. The 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
**Conditions:**

*Please identify the standard and requirement the condition relates to under the relevant key risk theme. Please state if the condition is AEI/education institution in nature or specific to NMC standards.*

<table>
<thead>
<tr>
<th>Condition</th>
<th>Effective partnership working: collaboration, culture, communication and resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Condition one: Produce an operational plan, including narrative, that ensures sustainable service user and carer involvement in the delivery of the V300 programme. <em>(Standards framework for nursing and midwifery education R1.12, R2.7, R5.14. Standards for prescribing programmes R2.1)</em></td>
<td></td>
</tr>
<tr>
<td>Condition two: Provide an implementation plan of practice supervisor and assessor preparation for their role in supporting students on the V300 programme. <em>(Standards framework for nursing and midwifery education R2.4, R4.1. Standards for student supervision and assessment R5.1, R5.2, R8.1, R8.2 Standards for prescribing programmes R.4.1 R4.2)</em></td>
<td></td>
</tr>
</tbody>
</table>

| Selection, admission and progression | None identified |
| Practice learning | None identified |
| Assessment, fitness for practice and award | None identified |
| Education governance: management and quality assurance | None identified |

| Date conditions to be met: | 3 May 2019 |
| Recommendations to enhance the programme delivery: | Recommendation one: Think about developing an effective preparation strategy for increasing numbers of practice supervisors and assessors from differing clinical backgrounds. *(Standards framework for nursing and midwifery education R2.4, R4.1. Standards for student supervision and assessment R5.1, R5.2, R8.1, R8.2. Standards for prescribing programmes, R4.2)* |
Better, safer care through quality assurance of nursing, midwifery and nursing associate education.

<table>
<thead>
<tr>
<th>Focused areas for future monitoring:</th>
<th>• The capacity of practice supervisors and assessors, who are effectively prepared to support practice learning and meet NMC Standards for student supervision and assessment, (standard five and eight).</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Programme is recommended for approval subject to specific conditions being met</th>
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<tbody>
<tr>
<td>Commentary post review of evidence against conditions</td>
</tr>
<tr>
<td>The university has developed a clear operational plan with timelines to ensure the engagement of service users and carers in the continued development, delivery and review of the V300 programme. This provides evidence that the changes required to meet condition one have been made.</td>
</tr>
<tr>
<td>A clear implementation plan for practice supervisor and assessor preparation for their role in supporting students on the V300 programme is provided. The plan provides details around proposed dates and the purpose and content of the training sessions. This provides evidence that condition two has been met.</td>
</tr>
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<table>
<thead>
<tr>
<th>Observations have been made by the education institution YES ☐ NO ☒</th>
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<tbody>
<tr>
<td>The university had one calendar month to provide observations on the report. No observations have been received.</td>
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<thead>
<tr>
<th>Final recommendation made to NMC:</th>
<th>Programme is recommended to the NMC for approval ☒</th>
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<tbody>
<tr>
<td></td>
<td>Recommended to refuse approval of the programme ☐</td>
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</table>

| Date conditions met: | 29 March 2019 |
Section three

<table>
<thead>
<tr>
<th>NMC Programme standards</th>
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<tbody>
<tr>
<td>Please refer to NMC standards reference points</td>
</tr>
<tr>
<td><em>Standards for prescribing programmes</em> (NMC, 2018)</td>
</tr>
<tr>
<td><em>Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers)</em> (NMC, 2018)</td>
</tr>
<tr>
<td><em>Standards framework for nursing and midwifery education</em> (NMC, 2018)</td>
</tr>
<tr>
<td><em>Standards for student supervision and assessment</em> (NMC, 2018)</td>
</tr>
<tr>
<td>The Code: Professional standards of practice and behaviour for nurses and midwives (NMC, 2015)</td>
</tr>
<tr>
<td>QA Framework for nursing, midwifery and nursing associate education (NMC, 2018)</td>
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<tr>
<td>QA Handbook (September 2018)</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Partnerships</th>
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<tbody>
<tr>
<td>The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.</td>
</tr>
</tbody>
</table>

Please refer to the following NMC standards reference points for this section:  
*Standards framework for nursing and midwifery education* (NMC, 2018)

**Standard 1: The learning culture:**

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

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

**Standard 2: Educational governance and quality:**

R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders
R2.4 comply with NMC *Standards for student supervision and assessment*

R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes

R2.6 ensure that recruitment and selection of students is open, fair and transparent and includes measures to understand and address underrepresentation

R2.7 ensure that service users and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection

**Standard 3: Student empowerment:**

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

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

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

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

**Standard 4: Educators and assessors:**

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

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

R4.10 share effective practice and learn from others

**Standard 5: Curricula and assessment:**

R5.4 curricula are developed and evaluated by suitably experienced and qualified educators and practitioners who are accountable for ensuring that the curriculum incorporates relevant programme outcomes
R5.5 curricula are co-produced with stakeholders who have experience relevant to the programme

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

**Standards for student supervision and assessment (NMC, 2018)**

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

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

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

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

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

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

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

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

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

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

**Standard 7: Practice assessors: responsibilities:**

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

**Standard 9: Academic assessors: responsibilities:**

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

**Findings against the standard and requirements**
QA visitor(s) to 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. This will be based on QA visitor(s) documentary analysis and discussions at the approval visit, taking into consideration the QA approval criteria identified above.

We found examples of positive and effective partnership working between UoS and key stakeholders.

UoS teaching team and other representative stakeholders at the approval visit tell us the curriculum design and proposed delivery of the V300 programme meets the Standards for prescribing programmes (NMC, 2018) and Standards of proficiency for nurse and midwife prescriber (NMC, 2018). The teaching team has a multi-professional background including midwives and nurses from adult, children’s and mental health fields of practice, a pharmacist and physiotherapy expertise. This professional knowledge and expertise provide a valuable informed perspective to advise and support students and practice assessors from a range of clinical backgrounds.

Documentary evidence demonstrates a commitment to proactively advance equality and to support people to achieve their potential through inclusive practices. Fundamental to achieving this aim is the belief that everyone will be treated fairly and with respect, irrespective of their cultural background, race, religion, disability, gender, sexual orientation, or age.

The student voice is captured via a student group evaluation which is completed with each cohort using the headings ‘what was good?’ ‘what was not so good?’ ‘what would be good’. Student evaluations have, for example, informed changes to the structure of the virtual learning environment Blackboard which is used to support learning and teaching, includes the programme handbook and formative methods of student feedback. There are communication strategies in place to ensure consistency and comparability within practice learning environments. Students provide feedback on their theory and practice learning experiences; this is reviewed and reported within the school through the UoS programme monitoring and enhancement procedure, any actions required are appropriately implemented and reviewed.

There is an active service user and carer group within the school that advises on programme development and student learning and teaching. The teaching team told us that the group of service users and carers originally invited to advise on the development of the prescribing programme were unable to continue due to personal circumstances. At the approval visit we found service users and carers are not included in the planned delivery of the proposed prescribing programme. This must be addressed (Condition one). (Standards framework for nursing and midwifery education R1.12, R2.7, R5.14. Standards for prescribing programmes R2.1)
During the approval visit UoS senior academic staff describe the positive effects of regular engagement and partnership working with professional development leads and strategic discussions about NHS England workforce transformation. The UoS has also engaged with Health Education England (HEE) in the review of the prescribing programme delivery across the northern region, through representation at northern regional non-medical prescribing (NMP) leads forum, Greater Manchester NMP sub-group and the northwest NMP education group.

We found some evidence of partnership working between UoS and PLPs for the preparation of practice supervisors and assessors to meet the Standards for student supervision and assessment (NMC, 2018). There is a planned joint approach to support practice learning whereby the academic assessor will meet with the practice assessor to discuss and provide feedback on student progress towards achieving the competencies within the RPS (2016) competency framework for all prescribers. However, at the approval visit there was no evidence or confirmation of a plan to prepare practice supervisors and assessors for their role which must be addressed prior to the programme commencing (Condition two). (Standards framework for nursing and midwifery education R2.4, R4.1. Standards for student supervision and assessment R5.1, R5.2, R8.1, R8.2 Standards for prescribing programmes R.4.1 R4.2)

The school, in partnership with PLPs, is also asked to consider developing an effective preparation strategy for increasing numbers of practice supervisors and assessors from differing clinical backgrounds. (Recommendation one) (Standards framework for nursing and midwifery education R2.4, R4.1. Standards for student supervision and assessment R5.1, R5.2, R8.1, R8.2. Standards for prescribing programmes, R4.2)

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

<table>
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<tr>
<th>MET</th>
<th>NOT MET</th>
<th>✗</th>
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Outcome: If not met, state reason and identify which standard(s) and requirement(s) are not met and the reason for the outcome

There is an active service user and carer group within the school that advises on programme development and student learning and teaching. However, we found service users and carers are not included in the planned delivery of the proposed prescribing programme and this must be addressed (Condition one).

Gateway 2: Standards for student supervision and assessment

| MET | NOT MET | ✗ |
There was no evidence or confirmation of a plan to prepare practice supervisors and assessors for their role which must be addressed prior to the programme commencing (Condition two).

**State the condition(s):**

**Condition one**

Produce an operational plan, including narrative, that ensures sustainable service user and carer involvement in the delivery of the V300 programme. (*Standards framework for nursing and midwifery education* R1.12, R2.7, R5.14; *Standards for prescribing programmes* R2.1)

**Condition two**

Provide an implementation plan of practice supervisor and assessor preparation for their role in supporting students on the V300 programme. (*Standards framework for nursing and midwifery education* R2.4, R4.1, *Standards for student supervision and assessment* R5.1, R5.2, R8.1, R8.2, *Standards for prescribing programmes* R.4.1 R4.2)

**Post event review**

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

Condition one: Documentation submitted by the teaching team includes a clear operational plan with timelines to ensure the engagement of service users and carers in the continued development, delivery and review of the V300 programme. Condition one is met.

Condition two: The teaching team has submitted a clear implementation plan for practice supervisor and assessor preparation for their role in supporting students on the V300 programme. The plan provides details around proposed dates and the purpose and content of the training sessions. Condition two is met.

**Evidence:**

- Response from teaching team to conditions, 28 March 2019
- Non-medical prescribing (NMP) service user and carer action plan, to be reviewed August 2019, undated
- Service user and carer strategy 2018-2021, final version November 2018
- Diagrammatic overview of NMP programme analysis of service user group loss of membership/actions identified for strategy review, undated
- NMP service user and carer network, undated
- Service user/carer/relative involvement in practice assessment of NMP student, undated
Better, safer care through quality assurance of nursing, midwifery and nursing associate education.

- Practice assessor and supervisor induction implementation plan from September 2019, undated
- Aims of induction and induction dates for designated medical practitioners (DMPs), practice assessors and practice supervisors, undated
- Induction dates for DMPs, practice assessors and practice supervisors, March-May 2019

**Date conditions met:** 29 March 2019

**Revised outcome after condition(s) met:** Standard is met

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**Student journey through the programme**

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

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

1.1 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

1.2 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

1.3 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

1.4 consider recognition of prior learning that is capable of being mapped to the RPS Competency Framework for all Prescribers

1.5 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
1.6 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:

1.6.1 Clinical/health assessment
1.6.2 Diagnostics/care management
1.6.3 Planning and evaluation of care

1.7 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.

### 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)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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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)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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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)
R1.3 The UoS teaching team told us that each student’s line manager signs their support for the study hours as part of the application process. This is confirmed as protected learning time within the prescribing assessment documentation and in the learning agreement. The academic assessor monitors this with the practice assessor and practice supervisor. If any concerns are raised about protected learning time they are discussed with the practice assessor, line manager and V300 lead. PLPs and the teaching team told us that if protected learning time becomes a matter for concern, a meeting would be arranged with the student’s line manager, academic assessor, practice assessor and/or supervisor and the student. We were told that if the issue is due to unforeseen circumstances such as staff issues within a healthcare service, the university has a formal process to enable the student to have more time to complete their practice learning hours. R1.3 is 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 **YES □ NO □**
  - Diagnostics/care management
  - Planning and evaluation
- Processes are in place to ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme (R1.7) **YES □ 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 UoS teaching team confirm that students already studying on the existing prescribing programme will not transfer to the proposed programme.

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

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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**Outcome:** The standard is met

**Date:** 31 January 2019

## Standard 2: Curriculum

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

2.1 ensure programmes comply with the NMC **Standards framework for nursing and midwifery education**

2.2 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

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

2.4 develop programme outcomes that inform learning in relation to the formulary relevant to the individual’s intended scope of prescribing practice:

2.4.1 stating the general and professional content necessary to meet the programme outcomes

2.4.2 stating the prescribing specific content necessary to meet the programme outcomes

2.4.3 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

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

2.6 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 for education and training (R2.1)  
  YES ☐ NO ☑

There is an active service user and carer group within the school that advises on programme development and student learning and teaching. The teaching team told us that service users and carers originally invited to advise on the development of the prescribing programme were unable to continue due to personal circumstances. At the approval visit we found service users and carers are not involved in the planned delivery of the proposed prescribing programme. This must be addressed (Condition one).

- 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).

  R2.3 The V300 programme uses adult education theories as an over-arching approach to students’ learning. Within this approach, applied teaching methods include for example: key note lectures, workshops, small group work, critical analysis and reflection (individual and group), self-directed learning, problem-based learning, e-learning, action learning sets and learning through practice experiences. These learning and teaching strategies will be used to support achievement of the RPS Competency Framework for all Prescribers. R2.3 is met.

- Evidence of programme outcomes that inform learning in relation to the formulary relevant to the individual’s intended scope of prescribing practice
  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)
### If relevant to the review

- Evidence to ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language. (R2.6)  
  - YES ☑  
  - NO ☐  
  - N/A ☒

The programme is provided 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 ☐

### Commentary

At the approval visit we found service users and carers are not involved in the planned delivery of the proposed prescribing programme. This must be addressed (Condition one).

### Outcome:
The standard is not met  
**Date:** 31 January 2019

### State the reason for the outcome identifying which standard/requirement requires further evidence and state the condition(s):

There is an active service user and carer group within the school that advises on programme development and student learning and teaching. The teaching team told us the service users and carers originally invited to advise on the development of the prescribing programme are unable to continue due to personal circumstances. At the approval visit we found service users and carers are not included in the planned delivery of the proposed prescribing programme. This must be addressed. (Condition one)

Condition one: Produce an operational plan, including narrative, that ensures sustainable service user and carer involvement in the delivery of the V300 programme. (*Standards framework for nursing and midwifery education* R1.12, R2.7, R5.14, *Standards for prescribing programmes* R2.1)

### Post event review

Identify how the condition(s) is met
Condition one: Documentation submitted by the teaching team includes a clear operational plan with timelines to ensure the engagement of service users and carers in the continued development, delivery and review of the V300 programme. Condition one is met.

Evidence:
- Response from teaching team to conditions, 28 March 2019
- Non-medical prescribing (NMP) service user and carer action plan, to be reviewed August 2019, undated
- Service user and carer strategy 2018 - 2021, final version November 2018
- Diagrammatic overview of NMP programme analysis of service user group loss of membership/actions identified for strategy review, undated
- NMP service user and carer network, undated
- Service user/carers/relative involvement in practice assessment of NMP student, undated

Date condition(s): 29 March 2019

Revised outcome after condition(s) met: Standard is met.

Standard 3: Practice learning

Approved education institutions must:
3.1 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:
3.2 ensure that practice learning complies with the NMC Standards for student supervision and assessment
3.3 ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment
3.4 ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC Standards for student supervision and assessment

Findings against the standard and requirements
Evidence provides assurance that the following QA approval criteria are met:

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

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

R3.1 Documentary evidence and discussions at the approval visit confirm suitable and effective arrangements and governance for practice learning are in place for all applicants. This is assured by effective partnership working between the teaching team and PLPs. NMP leads and managers from stakeholder organisations are involved in the selection process for their organisation. They sign to confirm arrangements for practice learning support, supervision and assessment are in place. There is a joint learning agreement for practice learning between the student, academic assessor, practice assessor and practice supervisor.

The UoS teaching team told us about additional supportive arrangements which will be in place to support individual students accessing the programme from the independent healthcare sector (including non-NHS and self-employed students) on either a full-time or part-time basis. R3.1 is 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)

R3.3 All learning and teaching resources are available on the virtual learning environment for students to access and download to support learning and assessment preparation. Students told us that online learning resources are clearly signposted and accessible. They describe the resources as helpful and supportive of flexible learning strategies. During the approval visit we viewed the UoS simulation suite that contains the most recent technological developments. The teaching team told us simulation-based learning within the suite will be utilised
Better, safer care through quality assurance of nursing, midwifery and nursing associate education.

<table>
<thead>
<tr>
<th><strong>Better, safer care through quality assurance of nursing, midwifery and nursing associate education.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>proportionately and effectively to build a student’s communication and physiological health assessment skills, confidence and competence. R3.3 is met.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>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)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to practice learning are met</td>
</tr>
<tr>
<td>Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to practice learning are met</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Outcome:</strong></th>
<th>The standard is met</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Date:</strong></td>
<td>31 January 2019</td>
</tr>
</tbody>
</table>

**Standard 4: Supervision and assessment**

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

4.1 ensure that support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education

4.2 ensure that support, supervision, learning and assessment provided complies with the NMC Standards for student supervision and assessment

4.3 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

4.4 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

4.5 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
4.5.1 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.

4.6 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.

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

4.8 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.

4.9 ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies. This includes all students:

4.9.1 successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and

4.9.2 successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100%).

Findings against the standards and requirements

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

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)

R4.1 The UoS teaching team complete educational audits to ensure that appropriate and effective systems and processes are in place in practice learning environments to support students’ learning. Practice learning is evaluated regularly and there is effective communication between the practice assessor and the university through the programme leader and academic assessors to identify and issues and take forward areas of improvement. Students are advised about, and have access to, the procedure for raising a concern both within the practice and
university learning environments. PLPs have processes in place to support students in raising a concern which is confirmed as part of the educational audit. There is additional support available through a university system ASKUS student service and the students’ union.

At the approval visit we found no evidence or confirmation of a programme of preparation for practice supervisors and assessors for the V300 programme. An implementation plan of practice supervisor and assessor preparation for their role in supporting students on the V300 programme must be provided. R4.1 is not met. (Condition two).

- 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).

R4.2 There are clear policies and frameworks to support student supervision, learning and assessment. The educational audit process identifies the availability of a nominated person who will actively support students in practice learning. We were told the practice education facilitators (PEFs), practice manager and V300 leads are the most appropriate individuals to undertake this role.

Students accessing the programme are from a range of clinical backgrounds. The teaching team are to think about developing an effective preparation strategy for increasing numbers of practice supervisors and assessors from differing clinical backgrounds. (Recommendation one)

At the approval visit we found no evidence or confirmation of a programme of preparation for practice supervisors and assessors for the V300 programme. An implementation plan of practice supervisor and assessor preparation for their role in supporting students on the V300 programme must be provided. R4.2 is not met. (Condition two)

- 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 ☐

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)
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R4.5 Documentary evidence confirms there are guidelines and processes in place to assign each student to a practice assessor who is both a registered healthcare professional and an experienced prescriber. The teaching team and PLPs confirmed this at the approval visit. We were told that, in exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor.

This is identified at the point of the student’s application and is discussed to explore other potential options for a practice supervisor for example, a practice nurse may be supported by an independent nurse prescriber at a different general practice surgery. Where there are no alternatives a plan is put in place between the student, practice assessor and academic assessor through the completion of a learning agreement at the start of the programme. This is closely monitored by the academic assessor and assessment moderation processes to ensure the student’s practice learning and assessment are not compromised. R4.5 is 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 **YES** **NO**
  - 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**
Please provide narrative for any exceptions
We found no evidence or confirmation of a programme of preparation for practice supervisors and assessors for the V300 programme. An implementation plan of practice supervisor and assessor preparation for their role in supporting students on the V300 programme must be provided. R4.1 and R4.2 are not met. (Condition two).

<table>
<thead>
<tr>
<th>Outcome:</th>
<th>The standard is not met</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td>31 January 2019</td>
</tr>
</tbody>
</table>

State reason for the outcome identifying which standard/requirement requires further evidence and state the condition(s)
We found no evidence or confirmation of a programme of preparation for practice supervisors and assessors for the V300 programme. An implementation plan of practice supervisor and assessor preparation for their role in supporting students on the V300 programme must be provided. R4.1 and R4.2 are not met. (Condition two).

Condition two: Provide an implementation plan of practice supervisor and assessor preparation for their role in supporting students on the V300 programme. 
(Standards framework for nursing and midwifery education R4.1; R.4.2. Standards for student supervision and assessment R5.1, R5.2, R8.1, R8.2. Standards for prescribing programmes R.4.1 R4.2)

Post event review
Identify how the condition(s) is met
Condition two: The teaching team has submitted a clear implementation plan for practice supervisor and assessor preparation for their role in supporting students on the V300 programme. The plan provides details around proposed dates and the purpose and content of the training sessions.

Condition two is met.

Evidence:
- Response from teaching team to conditions, 28 March 2019
- Practice assessor and supervisor induction implementation plan from September 2019, undated
- Aims of induction and induction dates for designated medical practitioners (DMPs), practice assessors and practice supervisors, undated
- Induction dates for DMPs, practice assessors and practice supervisors, March - May 2019

Date condition(s) met: 29 March 2019
Revised outcome after condition(s) met: Standard is met

<table>
<thead>
<tr>
<th>Standard 5: Qualification to be awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approved education institutions, together with practice learning partners, must:</td>
</tr>
<tr>
<td>5.1 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:</td>
</tr>
<tr>
<td>5.1.1 a community practitioner nurse or midwife prescriber (V100/V150), or</td>
</tr>
<tr>
<td>5.1.2 a nurse or midwife independent/supplementary prescriber (V300)</td>
</tr>
<tr>
<td>5.2 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</td>
</tr>
<tr>
<td>5.3 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</td>
</tr>
<tr>
<td>5.4 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</td>
</tr>
</tbody>
</table>

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 ☐
In the category of a nurse or midwife independent/supplementary prescriber (V300)

- 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)  
  \[ \text{YES ☑ NO } \]

- 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)  
  \[ \text{YES ☑ NO } \]

- 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)  
  \[ \text{YES ☑ NO } \]

Assurance is provided that the *Standards framework for nursing and midwifery education* relevant to the qualification to be awarded are met  
\[ \text{YES ☑ NO } \]

**Outcome:** The standard is met  
**Date:** 31 January 2019
Section four

Sources of evidence

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

<table>
<thead>
<tr>
<th>Key documentation</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme document, including proposal, rationale and consultation</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Programme specification(s)</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Module descriptors</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Student facing documentation including: programme handbook</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Student university handbook</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Practice assessment documentation</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Practice placement handbook</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>PAD linked to competence outcomes, and mapped against RPS A Competency Framework for all Prescribers</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Mapping document providing evidence of how the education institution has met the Standards framework for nursing and midwifery education (NMC, 2018)</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Mapping document providing evidence of how the programme meets the Standards for prescribing programmes and RPS Standards of proficiency for prescribers (NMC, 2018)</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Mapping document providing evidence of how the Standards for student supervision and assessment (NMC, 2018) apply to the programme(s)</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Curricula vitae for relevant staff</td>
<td>☒</td>
<td>☐</td>
</tr>
</tbody>
</table>
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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</table>

Written confirmation by the education institution and associated practice learning partners to support the programme intentions.

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

List additional documentation:

- Post approval visit:
  - Response from teaching team to conditions, 28 March 2019
  - Non-medical prescribing (NMP) service user and carer action plan, to be reviewed August 2019, undated
  - Service user and carer strategy 2018 - 2021, final version November 2018
  - Diagrammatic overview of NMP programme analysis of service user group loss of membership: actions identified for strategy review, undated
  - NMP service user and carer network, undated
  - Service user /carer/ relative involvement in practice assessment of NMP student, undated
  - Practice assessor and supervisor induction implementation plan from September 2019, undated
  - Aims of induction and induction dates for designated medical practitioners (DMPs), practice assessors and practice supervisors, undated
  - Induction dates for DMPs, practice assessors and practice supervisors, March - May 2019

- If you stated no above, please provide the reason and mitigation

Additional comments:

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

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
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</table>

Senior managers of the AEI/education institution with responsibility for resources for the programme

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>
Better, safer care through quality assurance of nursing, midwifery and nursing associate education.

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:  
2018 cohort  
Service users and carers  
If you stated no above, please provide the reason and mitigation  
Additional comments:

| The visitor(s) viewed the following areas/facilities during the event: |
|---------------------------------|------|-----|
| **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 yes, state where visited/findings:  |  |  |
Better, safer care through quality assurance of nursing, midwifery and nursing associate education.

We visited a recently refurbished simulation suite in the Mary Seacole building (UoS) that will be used as an education resource for students studying the prescribing programme.

If you stated no above, please provide the reason and mitigation
Visit to areas/facilities were not needed for this approval.

Additional comments:

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We accept no responsibility for the consequences of this document being relied upon by any other party, or being used for any other purpose, or containing any error or omission which is due to an error or omission in data supplied to us by other parties.

**Issue record**

**Interim Report**

<table>
<thead>
<tr>
<th>Author:</th>
<th>Kevin Gormley</th>
<th>Date:</th>
<th>17/02/2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Checked by:</td>
<td>Pamela Page</td>
<td>Date:</td>
<td>21/02/2019</td>
</tr>
</tbody>
</table>

**Final Report**

<table>
<thead>
<tr>
<th>Author:</th>
<th>Kevin Gormley</th>
<th>Date:</th>
<th>31/03/2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Checked by:</td>
<td>Pamela Page</td>
<td>Date:</td>
<td>10/04/2019</td>
</tr>
<tr>
<td>Approved by:</td>
<td>Andrea Bacon</td>
<td>Date:</td>
<td>11/04/2019</td>
</tr>
<tr>
<td>Submitted by:</td>
<td>Amy Young</td>
<td>Date:</td>
<td>12/04/2019</td>
</tr>
</tbody>
</table>