

Programme approval visit report

Section one

<p>Programme provider name:</p>	<p>University of South Wales</p>
<p>In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i></p>	<p>Cwm Taf University Health Board (UHB) - @HomeService Community Resources Team Newport Community Resource Team Blaenau Gwent Community Resource Team Caerphilly Community Resource Team Chepstow Community Resource Team Torfaen Dewi Sant Hospital (District Nurses) District Nurse (Ashgrove and Ynysybwl Surgery) Ferndale Community Health Centre Garth View Surgery Oaklands Surgery Pontnewydd Medical Centre Primary Care Nursing (Cwm Taff LHB) Talbot Green Health Clinic Treharris Primary Care Centre Ysbyty Cwm Cynon (Community Nursing) Ysbyty George Thomas (District Nurses) Aneurin Bevan UHB - Complex Care Team District Nurse (Welshpool) District Nurse (Bridgend East) District Nurse (Blaenau Gwent) District Nurse (Caerphilly) District Nurse (Monmouthshire) District Nurse (Newport) District Nurse (Torfaen) District Nurse (Builth Wells) District Nurse (Crickhowell) District Nurse (Haygarth/Talgarth) District Nurse (Llandrindod Wells/Rhayder) District Nurse (Llanfair Caerinion) District Nurse (Ystradgynlais) District Nurse (Cowbridge) District Nurse (Hirwaun) District Nurse (Kier Hardie Health Park) District Nurse (Pontcae Surgery based at Kier Hardie Health Park) Crickhowell Community Practice Health Visitor (Bridgend Flying Start) Health Visitor (Bridgend) Health Visitor (Blaenau Gwent)</p>

	<p>Health Visitor (Caerphilly) Health Visitor (Cwmbran) Health Visitor (Monmouthshire) Health Visitor (Newport) Health Visitor (Brecon) Health Visitor (Ystradgynlais) Health Visitor (Cynon Valley Flying Start) Health Visitor (Lower Cynon Valley Generic) Health Visitor (Lower Rhondda Generic) Health Visitor (Lower Taff Ely Generic) Health Visitor (Merthyr Tydfil Flying Start) Health Visitor (Merthyr Tydfil Generic) Health Visitor (Pontypridd Area Generic) Health Visitor (Rhondda Flying Start) Health Visitor (Taff Ely Flying Start) Health Visitor (Upper Cynon Valley Generic) Health Visitor (Upper Rhondda Generic) Health Visitor (Upper Taff Ely Generic) Primary, secondary and tertiary care services - Cardiff and Vale UHB, Velindre NHS Trust, Cwm Taf Morgannwg UHB, Powys Teaching Health Board, Aneurin Bevan UHB, Hywel Dda UHB, Swansea Bay UHB</p>
<p>Programme(s) reviewed:</p> <p>Programme: Independent and Supplementary Nurse Prescribing Title of programme: Independent Prescribing (V300) Programme start date: 21 September 2020</p> <p>Academic level(s): England, Wales, Northern Ireland: Level 7</p> <p>Programme: Community Practitioner Nurse Prescribing V100 Title of programme: Community Practitioner Nurse Prescribing (V100) Programme start date: 21 September 2020</p> <p>Academic level(s): England, Wales, Northern Ireland: Level 6 Level 7</p>	

Date of approval	2 March 2020
QA visitor(s):	Registrant Visitor: Hilary Field

Section two

Summary of review and findings

The University of South Wales (USW) is an established approved education institution (AEI). The USW faculty of life sciences and education and school of care sciences (the school) present the independent and supplementary prescribing (V300) programme and the community practitioner nurse prescribing (V100) programme for NMC approval.

The programmes are mapped against the NMC Standards for prescribing programmes (SPP) (NMC, 2018) and Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS, 2016) competency framework for all prescribers) (NMC, 2018). The independent prescribing V300 is a multi-professional award at academic level seven and is delivered over 26 weeks. It's accessed by students completing the postgraduate certificate in independent prescribing practice award and the MSc advanced clinical practitioner and MSc professional practice awards, it can be studied as a standalone programme

The V100 community practitioner nurse or midwife prescriber award is a discrete programme at academic levels six and seven. It's delivered as part of the BSc (Hons) and MSc specialist practitioner qualification, district nursing (SPQ DN) and the BSc (Hons), postgraduate diploma and MSc health visiting specialist community public health nursing (SCPHN) programmes.

Documentary analysis and the approval process demonstrates evidence of partnership working with a range of stakeholders. There's evidence of effective communication networks between programme teams delivering the programmes and practice learning partners (PLPs) to ensure consistency and comparability of student experience across a range of practice learning environments.

Arrangements at programme level don't meet the Standards framework for nursing and midwifery education (SFNME), (NMC, 2018) as conditions are applied. The Standards for student supervision and assessment (SSSA), (NMC, 2018) are met at programme level.

The programmes are recommended for approval subject to three NMC conditions. There are two university conditions. One NMC recommendation and one university recommendation are made.

Updated 30 March 2020:

USW has provided documentation to meet the NMC and university conditions. All conditions are met. The programmes are recommended to the NMC for approval.

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	Programme is recommended for approval subject to specific conditions being met
<p>Conditions:</p> <p><i>Please identify the standard and requirement the condition relates to under the relevant key risk theme.</i></p> <p><i>Please state if the condition is AEI/education institution in nature or specific to NMC standards.</i></p>	<p>Effective partnership working: collaboration, culture, communication and resources:</p> <p>Condition one: The programme teams are required to provide an implementation plan for service user and carer involvement for recruitment, development, delivery, evaluation and co-production of the programmes. (SFNME R1.12, R2.7)</p> <p>Selection, admission and progression:</p> <p>Condition two: The university must provide documentation to formally audit independent and self-employed practice learning environments used in the programme and outline arrangements for reallocating students in the event of practice learning breakdown. (SPP R1.3, R3.1, R4.1)</p> <p>Practice learning:</p> <p>None identified</p> <p>Assessment, fitness for practice and award:</p> <p>None identified</p> <p>Education governance: management and quality assurance:</p> <p>Condition three: The university must formalise arrangements and ensure access to practice learning assessment by the external examiner in relation to the assessed clinical examination. (SFNME R2.20; SPP R4.9)</p> <p>Condition four: To fully clarify the roles of the practice supervisor, practice assessor and academic assessor within the documentation, making explicit the student support systems in place for the multiple settings and range of students. (University condition)</p> <p>Condition five: To detail the blended learning used within the programmes and ensuring this is</p>

	appropriately documented in the learning and teaching methods and student handbooks. (University condition)
Date condition(s) to be met:	30 March 2020
Recommendations to enhance the programme delivery:	<p>Recommendation one: The programme teams are recommended to strengthen student involvement in co-producing the programmes. (SFNME R1.12)</p> <p>Recommendation two: To raise the profile of the fitness to practise and raising concerns processes within the programmes. (University recommendation)</p>
Focused areas for future monitoring:	None identified

Programme is recommended for approval subject to specific conditions being met

Commentary post review of evidence against conditions:

Revised copies of the programme documentation provide evidence that the conditions are met.

The revised programme documentation clearly identifies service user and carer involvement in the recruitment, delivery, evaluation and co-production of the programmes.

Condition one is met.

The revised programme documentation details the process for auditing placements for the independent and self-employed student. The process of reallocating students in the event of placement breakdown is documented.

Condition two is met.

The revised programme documentation confirms a formal process is in place to ensure the external examiner can observe the assessed clinical examinations in the practice learning environment.

Condition three is met.

The revised programme documentation further details the roles of the practice supervisor, practice assessor and academic assessor.

University condition four is met.

The revised programme documentation clearly details how blended learning is used in the programme.

University condition five is met.

The programmes are recommended for approval.

AEI Observations

Observations have been made by the education institution

Yes

Summary of observations made, if applicable	The report is amended to reflect the title of the Faculty of Life Sciences and Education and School of Care Sciences rather than School of Life Sciences. The V100 relates to the SCPHN programme for health visiting as USW offers a school nursing SCPHN pathway which does not have the V100 integrated.
Final recommendation made to NMC:	Programme is recommended to the NMC for approval
Date condition(s) met:	30 March 2020

Section three

NMC Programme standards
<p>Please refer to NMC standards reference points</p> <p><u><i>Standards for prescribing programmes (NMC, 2018)</i></u></p> <p><u><i>Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers) (NMC, 2018)</i></u></p> <p><u><i>Standards framework for nursing and midwifery education (NMC, 2018)</i></u></p> <p><u><i>Standards for student supervision and assessment (NMC, 2018)</i></u></p> <p><u><i>The Code: Professional standards of practice and behaviour for nurses and midwives (NMC, 2015)</i></u></p> <p><u>QA framework for nursing, midwifery and nursing associate education (NMC, 2018)</u></p> <p><u>QA Handbook (October 2018)</u></p>

Partnerships

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

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

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

Standard 1: The learning culture:

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

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

Standard 2: Educational governance and quality:

R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders

R2.4 comply with NMC Standards for student supervision and assessment

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

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

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

Standard 3: Student empowerment:

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

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

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

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

Standard 4: Educators and assessors:

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

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

R4.10 share effective practice and learn from others

Standard 5: Curricula and assessment:

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

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

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

Standards for student supervision and assessment (NMC, 2018)

Standard 1: Organisation of practice learning:

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

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

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

Standard 2: Expectations of practice supervisors:

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

Standard 3: Practice supervisors: role and responsibilities:

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

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

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

Standard 7: Practice assessors: responsibilities:

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

Standard 9: Academic assessors: responsibilities:

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

Findings against the standard and requirements

Provide an evaluative summary about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders based on QA visitor (s) documentary analysis and discussions at the approval visit, taking into consideration the QA approval criteria

There's evidence of effective partnership working between USW and key stakeholders. Students and PLPs confirm their involvement in the development and co-production of the programmes. Documentary evidence and the approval visit confirm the adoption of an all Wales strategic approach to the operationalisation and implementation of the SFNME and SSSA across NMC programmes in Wales. Programme teams and PLPs confirm the all Wales strategy supports local partnership working to assure the safety and quality of practice learning environments.

An all Wales approach has informed the development of the programmes and there's evidence of partnership working between USW and PLPs to meet the requirements for the SPP and the Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency framework for all prescribers).

Students confirm their involvement in the development of the programmes, they tell us their opinions are listened to and acted upon. Students tell us they didn't attend formal consultation meetings. The programme teams may wish to consider how formal student involvement in future programme developments can be further strengthened. (Recommendation one)

Documentary evidence and the approval visit confirms there's university quality assurance processes in place. There's formal student programme and practice placement evaluation which inform future programme management. Students tell us their experience of the programmes is positive with the opportunity to provide feedback to programme teams.

Students undertaking the V300 programme tell us there's shared learning with allied health professionals. They tell us this inter-professional learning experience provides exposure to alternative prescribing perspectives.

There's documentary evidence of a robust service user and carer strategy. The programme teams tell us service users and carers are involved in the development and delivery of the programmes. Service users and carers provide feedback on practice learning performance in the practice portfolio. Service user and carer representatives tell us they're involved in teaching V300 students. They confirm involvement in the interview process for the SPQ DN and SCPHN programmes and access equality and diversity training. There's limited evidence of service user and carer involvement in the development of the proposed programmes and how they will be involved in the V100 and V300 programmes. (Condition one)

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

Not Met

There's limited evidence of service user and carer involvement in the development of the proposed programmes and how they will be involved in the programmes.

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

If not met, state reason

There's limited evidence of service user and carer involvement in the development of the proposed programmes and how they will be involved in the programmes.

Condition one: The programme teams are required to provide an implementation plan for service user and carer involvement for recruitment, development, delivery, evaluation and co-production of the programmes. (SFNME R1.12, R2.7)

Post Event Review

Identify how the condition is met:

Condition one: USW has provided revised documentation which clearly identifies how service users and carers will be involved in the recruitment, development, delivery, evaluation and co-production of the programmes.

Evidence:

Service user and carer involvement implementation plan, 3 March 2020

Condition one is met.

Date condition(s) met: 30 March 2020

Revised outcome after condition(s) met:

Met

Condition one is 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.

Evidence provides assurance that the following QA approval criteria are met

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

Yes

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

Yes

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)

Not Met

R1.3 is not met. Documentary evidence and the approval process confirm robust governance structures are in place to support applicants undertaking the programmes. V300 applicants must have employer support to undertake the programme; managers confirm practice learning time will be protected. PLPs

confirm applicants must have the necessary skills to undertake the programme. A practice assessor must be identified at application, they must confirm they prescribe in the same field of practice as the applicant and have experience supervising and assessing students.

Applicants to the SPQ DN and SCPHN programmes are interviewed by their employer organisations. Service users and carers, PLPs and the programme team interview applicants; they must meet the requirements for access to the V100 programme including identification of V100 prescribing practice assessor. They must demonstrate they are capable of safe and effective practice.

Entry to the programmes is dependent on a satisfactory disclosure and barring service check (DBS) and a declaration of good health and good character.

The application process ensures that all applicants must meet NMC and university entry requirements. Students tell us employers support their application evidenced by completion of the application form. This ensures support for protected learning time and confirmation of clinical suitability to undertake the programmes.

The AEI uses an all Wales educational audit tool to assess the effectiveness and safety of practice learning environments. All are subject to this educational audit process and are completed in partnership with PLPs and the AEI. The audit process confirms learning environments meet the SSSA and the SFNME. There's no evidence of the educational audit process or mechanisms for ensuring that independent practice learning environments support V300 self-employed and non-NHS students. The programme team must ensure educational audit of all practice learning environments is undertaken and there are effective support arrangements in place for self-employed and non-NHS students. (Condition two)

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

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

Processes are in place to confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas (R1.6):

-Clinical/health assessment

-Diagnostics/care management

-Planning and evaluation

Yes

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

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 programme teams confirm no students will transfer to the SSSA or the SPP and Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers).

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

Yes

Outcome

Is the standard met?

Not Met

There's no evidence of the educational audit process or mechanisms for ensuring independent practice learning environments support V300 self-employed and non-NHS students.

Condition two: The university must provide documentation to formally audit independent and self-employed practice learning environments used in the programme and outline arrangements for reallocating students in the event of

practice learning breakdown. (SPP R1.3, R3.1, R4.1)

Date: 2 March 2020

Post Event Review

Identify how the condition is met:

Condition two: USW has provided revised audit documentation which clearly details the process for auditing independent and self-employed practice learning environments. The process of reallocating students in the event of placement breakdown is clearly detailed.

Evidence:

Practice learning environment audit for the independent and supplementary prescribing programme, undated
Process for the reallocation and approval of new practice learning environments or new practice supervisor, practice assessor and designated prescribing practitioner, undated

Condition two is met.

Date condition(s) met: 30 March 2020

Revised outcome after condition(s) met:

Met

Condition two is now met.

Standard 2 Curriculum

Approved education 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

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

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

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

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

Met

R2.3 is met. Students apply continued professional development across practice

learning; they're required to reflect on this and evidence achievement of the RPS competency framework for all prescribers in a practice portfolio. The practice portfolio ensures effective communication between the practice assessor, practice supervisor and academic assessor. Students tell us they receive feedback on progression towards achievement of the RPS competencies.

The programmes promote active and independent learning through blended learning approaches. Learning and teaching methods include lectures, seminars, self-directed learning and individual tutorials. The virtual learning environment (VLE) supports access to online resources, pre-sessional work is undertaken online, lectures are recorded, and students have direct online access to programme teams. A clinical simulation centre supports the development of prescribing specific clinical assessment skills and numeracy skills.

Students confirm teaching and online resources support their learning and there's effective personal and academic support from responsive programme teams. Students tell us there's effective communication between PLPs and programme teams ensuring a supportive learning experience that prepares them effectively for prescribing practice.

Documentary evidence and the approval process confirm service users and carers contribute to the delivery of the programmes. Students tell us service users and carers provide feedback in the practice learning environment through the practice portfolio. Service user and carer representatives confirm their involvement in the programmes; they support the development of assessment skills and confirm service user and carer feedback on learning in practice is included in the practice portfolio.

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

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

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

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

Yes

The programme structure demonstrates an equal balance of theory and practice learning. This is detailed in the designated hours in the module

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

Yes

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

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

Yes

Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to curricula and assessment are met

Yes

Outcome

Is the standard met?

Met

Date: 2 March 2020

Post Event Review

Identify how the condition is met:

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

N/A

Standard 3 Practice learning

Approved education institutions must:

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

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

R3.2 ensure that practice learning complies with the NMC Standards for student supervision and assessment

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

R3.4 ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC Standards for student supervision and assessment

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).

Not Met

R3.1 is not met. There's documentary evidence of a robust admissions process ensuring self-employed applicants can access the V300 programme. Self-employed and non-NHS applicants must evidence they meet all the entry requirements and there must be a suitable educational audit in place. They must provide a professional reference from an experienced prescriber to confirm suitability for a prescribing role.

Students undertaking the V100 programme are NHS employees who are supported by their employers. The robust application and selection process ensure governance arrangements meet the requirements for the SPQ DN, SCPHN and V100 programmes.

Documentary evidence and the approval process confirm there's effective arrangements and governance for practice learning in place for NHS employed registrant applicants. This is assured through effective partnership working between programme teams and PLPs. An all Wales educational audit process assures suitable and effective practice learning arrangements and governance are in place. This process ensures practice learning environments are monitored every two years with an annual review. If there's any changes to an environment due to for example service reconfiguration, student evaluation, escalation of concerns or systems regulator reports that indicate improvements are required the learning environment is reassessed. There's no evidence of the educational audit process or mechanisms for ensuring independent practice learning environments support V300 self-employed and non-NHS students. The programme team must ensure educational audit of all practice learning environments is undertaken and there are effective support arrangements in place for self-employed and non-NHS students. (Condition two)

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

Yes

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

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

Met

R3.3 is met. All learning and teaching resources are available on the VLE to support learning and assessment preparation. Students tell us online learning resources are clearly signposted. Students describe the resources as supportive and flexible learning strategies.

Students on both programmes simulate assessment skills. V100 students practice simulated client assessment skills focused on prescribing scenarios and prescription writing. V300 students practice physical assessment skills across a range of simulated practice environments in the USW clinical simulation centre. Students develop existing numeracy skills which supports preparation for assessment.

The practice portfolio is the mechanism for supporting the progression of prescribing assessment skills in practice learning. Service users' and carers' feedback on student performance is recorded in the practice portfolio. Students tell

us these learning opportunities support practice learning.

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

Yes

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

Yes

Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to practice learning are met

Yes

Outcome

Is the standard met?

Not Met

There's no evidence of the educational audit process or mechanisms for ensuring independent practice learning environments support V300 self-employed and non-NHS students.

Condition two: The university must provide documentation to formally audit independent and self-employed practice learning environments used in the programme and outline arrangements for reallocating students in the event of practice learning breakdown. (SPP R1.3, R3.1, R4.1)

Date: 2 March 2020

Post Event Review

Identify how the condition is met:

Condition two: USW has provided revised audit documentation which clearly details the process for auditing independent and self-employed practice learning environments. The process of reallocating students in the event of placement breakdown is clearly detailed.

Evidence:

Practice learning environment audit for the independent and supplementary prescribing programme, undated
Process for the reallocation and approval of new practice learning environments or new practice supervisor, practice assessor and designated prescribing practitioner, undated

Condition two is met.

Date condition(s) met: 30 March 2020

Revised outcome after condition(s) met:

Met

Condition two is 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 Standards framework for nursing and midwifery education. The programme leader of aprescribing 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%), 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%).

Evidence provides assurance that the following QA approval criteria are 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)

Not Met

R4.1 is not met. There's evidence of communication between the practice assessor and academic assessor to identify and address any concerns related to student progression or the practice learning environment these are recorded in the practice portfolio. The assessment of practice is clearly detailed in the practice portfolio with clear evidence of how achievement is recorded and confirmed by the practice assessor and the academic assessor.

An all Wales approach ensures there's effective governance frameworks in place to assure quality student support, supervision, learning and assessment. Students confirm practice learning is evaluated. There's evidence of effective communication between the practice assessor and academic assessor to identify and address issues related to practice learning. Students are advised about, and

have access to, the procedure for raising a concern in the university and the practice learning environment. Students tell us there's effective communication with programme teams.

Documentary evidence and the approval process confirm an all Wales educational audit is completed to ensure appropriate systems and processes are in place to support student learning. There's no evidence of the educational audit process or mechanisms for ensuring independent practice learning environments support practice learning for V300 self-employed and non-NHS students. The programme team must ensure educational audit of all practice learning environments is undertaken and there are effective support arrangements in place for self-employed and non-NHS students. (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)

Met

R4.2 is met. Documentary evidence and the approval visit confirm the strategic and standardised approach adopted by the all Wales approach to the operationalisation of the SSSA across all NMC programmes in Wales. The national approach is implemented to prepare registrants for practice assessor and practice supervisor roles. Programme teams and PLPs confirm there's a partnership approach to prepare practice assessors and practice supervisors specifically for the assessment and supervision of students undertaking the programmes. PLPs tell us they have undertaken preparation for the roles and recognise the importance of this. PLPs tell us V100 practice assessors and practice supervisors attend an annual conference focusing on, for example, prescribing decision making and implementing the SSSA within their practice.

The programme teams have multi-professional backgrounds which supports inter-professional learning. They include registered nurses with relevant filed specific and NMC prescribing qualifications and pharmacists. Programme teams tell us they're required to engage in a range of continuing professional development activities which ensure they maintain currency in prescribing practice. The senior school team tell us how the development and allocation of the academic assessor role will be supported. They confirm preparation for the role is being undertaken across the school; additional existing academic staff who have appropriate professional and clinical expertise will support the academic assessor role. This expertise will include the requirement that they hold an NMC prescribing qualification.

Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience (R4.3)

Yes

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

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

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

Met

R4.5 is met. Documentary evidence confirms processes are in place to assign a practice assessor who is both a registered healthcare professional and experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking. The nominated V300 practice assessor must be identified at application. They must confirm they meet the practice assessor requirements; the programme lead verifies the registration status and suitability of the practice assessor.

This is confirmed for V100 students through the SPQ DN and SCPHN application process. Students are allocated an experienced practice assessor who is a community practitioner nurse prescriber.

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

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

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

Processes are in place to ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies (R4.9). This includes:

- **successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and**
- **successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100%)**

No

R4.9 is not met. Documentary evidence and the approval process confirm assessment strategies are appropriate to ensure students can meet the RPS competencies. There's insufficient evidence of robust independent scrutiny of the assessed clinical examination undertaken in practice. Programme teams must formalise arrangements to ensure the programmes external examiner has the opportunity to review this assessment strategy in the practice learning environment. (Condition three)

Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to supervision and assessment are met Please provide narrative for any exceptions

No

There's no evidence of the educational audit process or mechanisms for ensuring independent practice learning environments support V300 self-employed and non-NHS students.

There's insufficient evidence of robust independent scrutiny of the assessed clinical examination undertaken in practice. Programme teams must formalise arrangements to ensure the programme external examiner has the opportunity to review this assessment strategy in the practice learning environment.

Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to supervision and assessment are met Please provide narrative for any exceptions

Yes

Outcome

Is the standard met?

Not Met

There's no evidence of the educational audit process or mechanisms for ensuring independent practice learning environments support V300 self-employed and non-NHS students.

Condition two: The university must provide documentation to formally audit independent and self-employed practice learning environments used in the programme and outline arrangements for reallocating students in the event of practice learning breakdown. (SPP R1.3, R3.1, R4.1)

There's insufficient evidence of robust independent scrutiny of the assessed clinical examination undertaken in practice. The programme teams must formalise arrangements to ensure the programme external examiner has the opportunity to review this assessment strategy in the practice learning environment.

Condition three: The university must formalise arrangements and ensure access to practice learning assessment by the external examiner in relation to the assessed clinical examination. (SFNME R2.20; SPP R4.9)

Date: 2 March 2020

Post Event Review

Identify how the condition is met:

Condition two: USW has provided revised audit documentation which clearly details the process for auditing independent and self-employed practice learning environments. The process of reallocating students in the event of placement breakdown is clearly detailed.

Evidence:

Practice learning environment audit for the independent and supplementary prescribing programme, undated

Process for the reallocation and approval of new practice learning environments or new practice supervisor, practice assessor and designated prescribing practitioner, undated

Condition two is met.

Condition three: USW has provided revised documentation which confirms a formal process is in place to ensure the external examiner can observe the assessed clinical examinations in the practice learning environment.

Evidence:

Revised, postgraduate certificate in prescribing practice, programme handbook 2019-2020, undated

Revised, independent prescribing student handbook, undated

Revised, V100 community practitioner nurse or midwife prescriber programme document, undated

Revised, validation documentation, postgraduate certificate in independent prescribing practice, undated

Condition three is met.

Date condition(s) met: 30 March 2020

Revised outcome after condition(s) met:

Met

Conditions two and three are met.

Standard 5 Qualification to be awarded

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

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

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

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

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

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

R5.4 inform the student that they may only prescribe once their prescribing

qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice

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

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

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

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

Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met

Yes

Outcome

Is the standard met?

Met

Date: 2 March 2020

Post Event Review

Identify how the condition is met:

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

N/A

Section four

Source of evidence

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

Key documentation	Yes/No
Programme document, including proposal, rationale and consultation	Yes
Programme specification(s)	Yes
Module descriptors	Yes
Student facing documentation including: programme handbook	Yes
Student university handbook	Yes
Practice assessment documentation	Yes
Practice placement handbook	Yes
PAD linked to competence outcomes, and mapped against RPS A Competency Framework for all Prescribers	Yes
Mapping document providing evidence of how the education institution has met the Standards framework for nursing and midwifery education (NMC, 2018)	Yes
Mapping document providing evidence of how the programme meets the Standards for prescribing programmes and RPS Standards of proficiency for prescribers (NMC, 2018)	Yes
Mapping document providing evidence of how the Standards for student supervision and assessment (NMC, 2018) apply to the programme(s)	Yes
Curricula vitae for relevant staff	Yes
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website	Yes
Written confirmation by the education institution and associated practice learning partners to support the programme intentions	Yes
<p>List additional documentation:</p> <p>Presentation by the programme team, 2 March 2020</p> <p>Prescribing timetable, undated</p> <p>USW, V300 application form, undated</p> <p>Cwm Taff Morgannwg UHB, minutes, undated</p> <p>Report, listening to women and families about maternity care in Cwm Taf, undated</p> <p>Healthcare inspectorate Wales (HIW) reports, various dates</p> <p>NMC, AEI and PLPs annual self-assessment report, 2018-2019</p> <p>Post visit documentation:</p> <p>Service user and carer involvement implementation plan, 3 March 2020</p> <p>Practice learning environment audit for the independent and supplementary prescribing programme, undated</p> <p>Process for the reallocation and approval of new practice learning environments or</p>	

<p>new practice supervisor, practice assessor and designated prescribing practitioner, undated</p> <p>Revised, postgraduate certificate in prescribing practice, programme handbook 2019-2020, undated</p> <p>Revised, independent prescribing student handbook, undated</p> <p>Revised, V100 community practitioner nurse or midwife prescriber programme document, undated</p> <p>Revised, validation documentation, postgraduate certificate in independent prescribing practice, undated</p> <p>Response to conditions, undated</p>
If you stated no above, please provide the reason and mitigation
Additional comments:

During the visit the visitor(s) met the following groups	Yes/No
Senior managers of the AEI/education institution with responsibility for resources for the programme	Yes
Senior managers from associated practice learning partners with responsibility for resources for the programme	Yes
Programme team/academic assessors	Yes
Practice leads/practice supervisors/ practice assessors	Yes
Students	Yes
If yes, please identify cohort year/programme of study: V100 – five current, one alumnus V300 - one current, three alumni	
Service users and carers	Yes
If you stated no above, please provide the reason and mitigation	
Additional comments:	

The visitor(s) viewed the following areas/facilities during the visit:	Yes/No
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	No
Library facilities	No
Technology enhanced learning / virtual learning environment	No
Educational audit tools/documentation	No
Practice learning environments	No
If yes, state where visited/findings:	

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

Review of facilities not required for this visit.

Additional comments:

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Issue record

Final Report

Author	Hilary Field	Date	9 March 2020
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Submitted by	Amy Young	Date	14 April 2020
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