



Programme approval visit report

Section one

Programme provider name:	University of Gloucestershire		
In partnership with: (Associated practice learning	A variety of independent settings including aesthetics practices, particularly for the non- medical prescribing (NMP) programme		
partners involved in the delivery of the	National Star College		
programme)	Barchester Carehomes		
	Lillian Faithful Homes		
	Gloucestershire Care Services NHS Trust		
	Worcestershire Health and Care NHS Trust		
	Isaac Maddox House		
	Shrub Hill Road		
	Church Street Practice		
	North Bristol NHS Trust		
	Nuffield Health Cheltenham		
	The Dean Neurological Centre		
	Winfield Hospital/Ramsay Health		
	Gloucestershire Hospitals NHS Foundation Trust		
	2Together NHS Foundation Trust		
Programmes reviewed: Independent/Supplementary Nursing Prescribing (V300) Title of programme: Certificate in Professional Studies in Independent and Supplementary Prescribing Date of approval visit: 16 July 2019 Programme start date: 26 March 2020			
Academic level: England, Wales, Northern Ireland: Level 7: Yes			
QA visitor(s):	Registrant Visitor: Shelley Peacock		





Summary of review and findings

The University of Gloucestershire (UoG) faculty of health and human sciences has presented the independent and supplementary prescribing (ISP) (V300) programme for approval against the Nursing and Midwifery Council (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). The ISP V300 programme is a part-time programme over a six-month period for NMC registered nurses. The UoG is an NMC approved education institution (AEI).

The approval visit was a conjoint approval event with the Health Care Professions Council (HCPC) and the AEI.

Documentary analysis and findings at the approval visit demonstrate commitment to partnership working with key stakeholders. There is evidence of effective partnership between the UoG and practice learning partners (PLPs) at both an operational and strategic level.

Arrangements at programme level do not meet the Standards framework for nursing and midwifery education (SFNME).

Arrangements at programme level meet the Standards for student supervision and assessment (SSSA).

The programme is recommended to the NMC for approval subject to two NMC conditions and seven university conditions. Two NMC recommendations are made.

Updated 16 September 2019:

UoG submitted revised documentation which evidences the changes required to meet the two NMC conditions. UoG confirm that the university's seven 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 for approval subject to specific conditions being met	
	Effective partnership working: collaboration, culture, communication and resources:	





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.

Condition one: To develop an implementation plan to ensure the prescribing programme is designed, delivered, evaluated and co-produced with service users. (SFNME R1.12, SPP R2.1)

Selection, admission and progression:

Condition two: To ensure that applicants have access to protected learning time, and employer support (where appropriate) to enable students to undertake and be adequately supported throughout the prescribing programme. (SFNME R2.3, SPP R1.3)

Practice learning:

None identified

Assessment, fitness for practice and award:

None identified

Education governance: management and quality assurance:

Condition three: Submission of the programme approval form and a course assessment strategy. (University condition)

Condition four: Ensure the consistency of titles – different variations used throughout documentation and handbook. (University condition)

Condition five: Learning outcome seven – Need to change wording/tense. (University condition)

Condition six: Inconsistency of hours on programme specification and page seven of the validation document. (University condition)

Condition seven: Formatting of the practice assessment document. (University condition)

Condition eight: Include greater detail in the learning and teaching strategy – Problem based/case based, user of service users etc. (University condition)

Condition nine: Page five Validation documents check line two for typographical errors. (University condition)

Nursing & Midwifery Council	Better, safer care through quality assurance of nursing, midwifery and nursing associate education.	
Date condition(s) to be met:	3 September 2019	
Recommendations to enhance the programme delivery:	Recommendation one: Consider strengthening monitoring of self-directed study days via the online platform. (SPP R2.3)	
	Recommendation two: Consider strengthening the implementation plan to support practice assessors and practice supervisors. (SSSA R5.1, R8.2, R8.3)	
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:

The UoG has provided evidence to meet the NMC conditions.

The programme team have provided documentary evidence of revised strategy for service users and carers. Condition one is now met.

The programme information for applicants and recruitment and selection documentation have been amended. Condition two is now met.

The seven conditions set by the UoG are now met.

The SFNME is now met. The Standards for prescribing programmes are now met.

AEI Observations	Observations have been made by the education institution Yes
Summary of observations made, if applicable	We confirm that we agree with the report and have responded to all conditions and recommendations. Documents can be found in the document depository.
Final recommendation made to NMC:	Programme is recommended to the NMC for approval
Date condition(s) met:	3 September 2019

Section three

NMC Programme standards

Please refer to NMC standards reference points

Standards for prescribing programmes (NMC, 2018)

<u>Standards of proficiency for nurse and midwife prescriber (adoption of the Royal</u> <u>Pharmaceutical Society (RPS) Competency Framework for all Prescribers) (NMC,</u> <u>2018)</u>

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





Standards for student supervision and assessment (NMC, 2018)

The Code: Professional standards of practice and behaviour for nurses and midwives (NMC, 2015)

QA framework for nursing, midwifery and nursing associate education (NMC, 2018)

QA Handbook (October 2018)

Partnerships

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

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

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

Standard 1: The learning culture:

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

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

Standard 2: Educational governance and quality:

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

R2.4 comply with NMC <u>Standards for student supervision and assessment</u> R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes

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

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

Standard 3: Student empowerment:



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

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

R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning R3.18 have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice

Standard 4: Educators and assessors:

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

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

R4.10 share effective practice and learn from others

Standard 5: Curricula and assessment:

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

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

R5.14 a range of people including service users contribute to student assessment Standards for student supervision and assessment (NMC, 2018)

Standard 1: Organisation of practice learning:

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

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

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

Standard 2: Expectations of practice supervisors:

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

Standard 3: Practice supervisors: role and responsibilities:

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

Standard 4: Practice supervisors: contribution to assessment and





progression:

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

Standard 7: Practice assessors: responsibilities:

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

Standard 9: Academic assessors: responsibilities:

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

Findings against the standard and requirements

Provide an 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

Documentary evidence and the approval process confirms effective partnership working between the UoG and practice learning partners (PLPs), students and service users and carers.

Policies, processes and committees are in place to support a partnership approach to the development and planned delivery of the prescribing programme. The programme team and PLPs are working together to co-create the programme and support the training of practice assessors and supervisors, although the latter aspect could be strengthened. (Recommendation two) (SSSA R5.1, R8.2, R8.3)

The PLPs confirmed that they had reviewed and fed back on programme material. PLPs and the AEI are working in partnership to implement the SSSA. PLPs told us they understand their responsibilities associated with the new practice assessor and practice supervisor roles.

PLPs told us they provide protected learning time for students undertake the prescribing programme. PLPs have worked in partnership with the AEI to ensure that processes are in place for practice supervisors and practice assessors to meet the SSSA criteria. The practice assessor criteria are detailed in the application form for the V300 programme, and are confirmed by signatories.

UoG and PLPs adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability which is evident in the practice assessment document.





Students 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. Student feedback will be documented in the practice assessment document.

Communication and collaboration between academic and practice assessors is scheduled for relevant points in programme structure. Scheduled timelines are evident in the practice assessment document.

The panel met with two students, a current NMP student and a second year undergraduate pre-registration nursing student. Both agreed that the support they received from the academic teams is very effective.

Students report they feel valued by UoG, and the school provides opportunities for them to feedback informally and through formal mechanisms. The NMP student had, as yet, not had the opportunity to feedback formally about the programme but confirmed that they could give informal feedback directly to the programme team or via the university's online feedback system known as SIMON.

The panel met with three service users. They confirmed that they had been provided with a copy of the programme documentation and that they felt the paperwork showed a well-designed programme. They had received plenty of time to be able to review the documentation and the programme team had encouraged them to submit their thoughts and comments. The service users are supportive of the programme documentation.

The service users confirmed to the panel that they are involved with students on health programmes during induction week, acting as patients and being part of interview panels for student recruitment. However, they have limited input into this programme. This must be addressed. (Condition one) (SFNME R1.12; SPP R 2.1)

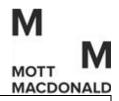
Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 1: <u>Standards framework for nursing and midwifery</u> education

Not Met

There is limited evidence of co-production of the programme with service users or their involvement going forward. This must be addressed.

Condition one: To develop an implementation plan to ensure the prescribing programme is designed, delivered, evaluated and co-produced with service users. (SFNME R1.12, SPP R2.1)





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: <u>Standards for student supervision and assessment</u>

Met

If not met, state reason

There is limited evidence of co-production of the programme with service users or their involvement going forward. This must be addressed.

Condition one: To develop an implementation plan to ensure the prescribing programme is designed, delivered, evaluated and co-produced with service users. (SFNME R1.12, SPP R2.1)

Post Event Review

Identify how the condition is met:

Condition one: The programme team have provided documentary evidence of a revised strategy for service users and carers. This document now clearly outlines how service users and carers are involved in the design, delivery, evaluation and co-produced of the prescribing programme.

The programme specification has been updated and includes service users and carers in the teaching strategy.

SFNME R1.12 and SPP R2.1 are now met.

Evidence: Strategy for service users and carers, undated Programme specification, July 2019

Date condition(s) met: 3 September 2019

Revised outcome after condition(s) met:

Met

Condition one is now met. The SFNME R1.12 is met. The SPP R2.1 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 programmesand 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, selfemployed or non-NHS employed registrants) to apply for entry onto an NMC approved prescribing programme. Evidence of this statement in documentation such as: programme specification; module descriptor, marketing material. Evidence of this statement on university web pages (R1.2)

Yes

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. There is evidence from the application form demonstrating governance is considered at the admission stage for the programme.

Students and PLPs confirm clinical support, access to protected learning time and employer support is adequate and will allow students to undertake the programme of study. However, the number of days stated on the application form is 15 days; this does not include the 11 days of online guided independent study sessions that student are required to complete. The application form should include the number of independent online study sessions. (Condition two) (SFNME R2.3, SPP R1.3)

Employers agree to provide protected learning time for students to undertake the prescribing programme and confirm processes are in place to ensure practice supervisors and practice assessors meet SSSA criteria. Practice assessor criteria are detailed in the application form for the V300 programme, and are confirmed by





signatories. UoG and PLPs complete educational audits confirming practice learning environments meet SSSA criteria. Governance is in place to ensure that students cannot be placed where there is no current valid audit. PLPs monitor and review learning environments with UoG.

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 <u>Standards for prescribing</u> <u>programmes</u> 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

All existing students will complete their programme before the commencement of the new programme. There will be no transfer of existing students onto the proposed programme.

Assurance is provided that Gateway 1: Standards framework for nursing and





midwifery education relevant to selection, admission and progression are met

No

The application form does not state the total number of days that the student will require protected learning time. (Condition two) (SFNME R2.3, SPP R1.3)

Outcome

Is the standard met?

Not Met

The application form does not state the amount of protected learning time required by the student to complete the programme.

Condition two: To ensure that applicants have access to protected learning time, and employer support (where appropriate) to enable students to undertake and be adequately supported throughout the prescribing programme. (SFNME R2.3, SPP R1.3)

Date: 16 July 2019

Post Event Review

Identify how the condition is met:

Condition two: The 'information for applicants' document and the updated recruitment and selection ISP document now state; 15 face-to-face clinical teaching/exam sessions each lasting 6.5 hours = 97.5 hours, a minimum of 90 hours in clinical placement and 112.5 hours of self-directed learning, supported by workbooks, online lecture material and e-learning exercises. This information provides assurance of access to protected learning time.

Condition two is now met.

SFNME R2.3 and SPP R1.3 are now met.

Evidence:

Information for applicants document, undated Procedure for recruitment and selection ISP document, September 2019

Date condition(s) met: 3 September 2019

Revised outcome after condition(s) met:

Met





Condition two is now met. The SFNME R2.3 is met. The SPP R1.3 is 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)

No

R2.1 is not met. Documentary evidence and the approval process show service users have been involved in reviewing the paperwork for the educational delivery of this programme. However, there is limited evidence of how service users and carers are involved in the application process or assessment of students on the programme. (Condition one) (SFNME R1.12; SPP R2.1)

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

The programme team and documentary evidence demonstrate a wide range of learning and teaching strategies. These are used to support the achievement of the RPS competencies. Module specifications are explicit and apply the RPS competency framework for all prescribers. There will be co-teaching with allied health professional students undertaking a similar prescribing programme. Teaching will include key lectures, workshops, simulated case studies, eLearning activities, online self-directed learning, and learning through practice experiences. (Recommendation one) (SPP R2.3)

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)

N/A

The programme is taught in England.

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

No

There is limited evidence of how service users and carers are involved in the application process, delivery, co-production or assessment of students in the programme. (Condition one) (SFNME R1.12; SPP R2.1)

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

Yes

Outcome

Is the standard met?

Not Met

There is limited evidence of how service users and carers are involved in the application process, delivery, co-production or assessment of students in the programme.

Condition one: To develop an implementation plan to ensure the prescribing programme is designed, delivered, evaluated and co-produced with service users. (SFNME R1.12, SPP R2.1)

Date: 16 July 2019





Post Event Review

Identify how the condition is met:

Condition one: The programme team have provided documentary evidence of a revised strategy for service users and carers. This document now clearly outlines how service users and carers are involved in the design, delivery, evaluation and co-produced of the prescribing programme.

The programme specification has been updated and includes service users and carers in the teaching strategy.

Condition one is now met.

SFNME R1.12 and SPP R2.1 are now met.

Evidence:

Strategy for service users and carers, undated Programme specification, July 2019

Date condition(s) met: 3 September 2019

Revised outcome after condition(s) met:

Met

Condition one is met. SFNME R1.12 is now met. SPP R2.1 is met.

Standard 3 Practice learning

Approved education institutions must:

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

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

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





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

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

Evidence provides assurance that the following QA approval criteria are 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). Note: If issues of concern have been identified by system regulators regarding practice learning environments which are to be used for this programme include an overview of the partnership approach between the AEI/education institution and their practice learning partners to manage and mitigate any risks to student learning.

Met

R3.1 is met. The application form reviews various levels of governance, including the practice assessor, the line manager, and the NMP lead for PLP organisations. All of these are committed to providing the necessary time, supervision and learning opportunities for students to achieve the learning outcomes and competencies safely and with appropriate supervision. UoG and PLPs audit practice learning environments and monitor their quality.

Audit processes provide evidence of safe practice placement environments which meet NMC standards. There's a process to withdraw practice learning environments, implement action plans and reinstate practice learning areas where student learning is at risk. There are policies in place demonstrating commitment to public protection through the management and escalation of concerns in academic and practice settings. All these measures apply to practice placements for self-employed students.

Documentary evidence and the approval process confirm arrangements to identify and prepare practice assessors and practice supervisors. This ensures students will be supported in practice by suitably qualified and prepared individuals. Documents outline the programme of preparation for practice supervisors and practice assessors to be delivered. The support of practice assessors and practice supervisors could be strengthened. (Recommendation two) (SSSA R5.1, R8.2, R8.3)

Governance arrangements for practice learning for those who are self-employed is considered. Each applicant will be interviewed individually and supported in identifying an appropriate practice assessor and practice supervisor by the UoG.





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. Documentary evidence confirms the programme uses a range of technology to support learning and assessment. These are effective and proportionate. This includes use of a simulated learning suite and simulated practice skills labs. Students say they have access to the health education cooperative online distance learning package, in addition to the e-learning platform designated to the prescribing programme.

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: <u>Standards framework for nursing and</u> <u>midwifery education</u> relevant to practice learning are met

Yes

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

Yes

Outcome

Is the standard met?

Met

Date: 16 July 2019

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 <u>Standards framework for nursing and midwifery education</u>

R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC Standards for student supervision and assessment

R4.3 appoint a programme leader in accordance with the requirements of the NMC <u>Standards framework for nursing and midwifery education</u>. The programme leader of 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 theprogramme 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)

Met

R4.1 is met. Audit processes confirm learning environments meet SSSA. There are meetings with PLPs to monitor and review learning environments involved in the programme. All stakeholders confirm they're aware of UoG's process for escalating concerns. There's support for students in raising concerns and contingency plans to remove students if necessary and place them in suitable learning environments. Review processes ensure support, supervision, learning and assessment arrangements comply with the NMC SFNME.

The programme team states the practice assessor will undertake a baseline, midpoint and summative review with the student. The academic assessor and practice assessor will communicate at fixed points. Discussion at the approval visit and documentary evidence confirm a nominated academic assessor, identified from the AEI programme team will support students' theoretical learning and collaborate closely with the nominated practice supervisor and practice assessor in the practice setting to moderate and collate decisions about the students' ability to demonstrate all prescribing proficiencies on the programme.

PLPs hold a database of all students who had applied for the programme. PLPs work closely with the programme lead for the NMP to ensure all students have an identified practice supervisor and practice assessor.

The practice educators confirm that they carry out generic planning in collaboration with UoG.

With the introduction of the new role of practice assessor and practice supervisor, the practice educators confirm that they are implementing the necessary training for each role.

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. PLPs hold a database of all students who have applied for the





programme and have worked closely with the programme lead for the NMP to ensure all students have an identified practice supervisor and practice assessor who is a registered healthcare professional and an experienced prescriber.

Practice supervisors' and practice assessors' preparation is being developed in collaboration with UoG and provided by the PLPs.

A handbook for practice supervisors and practice assessors details the processes and the preparation for their roles. The programme team and PLPs confirm these arrangements.

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)

No

R4.4 is not met. This is not applicable as the programme will be open to nurses only.

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

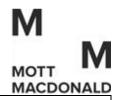
Processes are in place to ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking (R4.5)

Met

R4.5 is met. Appropriate practice assessors are identified by the student's employer as part of the application process. They are registered healthcare professionals and experienced prescribers with suitable equivalent qualifications for the prescribing programme. The AEI checks and confirms practice assessor qualifications. Supported applications are signed by line managers and NMP leads within the employing heath care organisation. The programme team confirm that the ARC database practice placement system will be used to record the practice assessor and practice supervisor details.

Wherever possible, incidences where the practice assessor and the practice supervisor are undertaken by the same person will be avoided. The university ARC system may be able to identify an alternative practice assessor. The ARC database will collect data in order to monitor the incidence of circumstances where practice supervisors and practice assessors are undertaken by the same person





and what mitigation is applied.

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%)

Yes

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

Yes

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

Yes

Outcome

Is the standard met?

Met





Date: 16 July 2019

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

Nursing & Midwifery Council	Better, safer care through quality assurance of nursing, midwifery and nursing associate education.	M MOTT MACDONALD
	g programme leads to accreditation degree as a minimum award (R5.2)	at a level
		Yes
registered with the NMC w programme and if they fai	inform the student that the award m vithin five years of successfully com I to do so they will have to retake ar in order to qualify and register their	pleting the d successfully
p		Yes
once their prescribing qua and they may only prescri	inform the student that they may on alification has been annotated on th be from the formulary they are qual their competence and scope of pra	e NMC register ified to
•	at the <u>Standards framework for nurs</u> /ant to the qualification to be award	
Outcome		
Is the standard met?		Met
Date: 16 July 2019		





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	Yes
consultation	
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
List additional documentation:	
Exceptional reporting log 2018/19	
There have been no exceptional reports for practice placements f last 12 months.	or this AEI in the
Post approval visit documentary evidence to meet conditions: Course assessment strategy, ISP final version, undated Course portal summary course group, 2017/18 Course portal summary, 2017/18 CPS ISP validation sign-off 2018-19, 29 August 2019 External examiner report, 10 July 2019 Exemplar module evaluation form, 2018 Framework for aesthetic practitioners, undated	





Information for applicants, undated ISP course handbook final version, 2019/2020 ISP practice supervision handbook final version, 2019/2020 ISP student period of learning in practice handbook, undated ISP validation document final version, 2019/2020 Management and monitoring mechanisms for attendance and learning, August 2019 Module descriptor ISP final version, undated NMP student feedback for course, undated Financial information ISP, 3 September 2019 PLP designated prescribing practitioners handbook, undated Procedure for recruitment and selection ISP, September 2019 Programme monitoring, August 2019 Programme specification ISP final version, July 2019 Response to internal and professional regulatory and statutory body conditions, 16 August 2019 Strategy for service user and carer involvement in programme design and delivery ISP, undated 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	Yes
responsibility for resources for the programme	
Senior managers from associated practice learning partners	Yes
with responsibility for resources for the programme	
Programme team/academic assessors	Yes
Practice leads/practice supervisors/ practice assessors	Yes
Students	Yes
If yes, please identify cohort year/programme of study: One current non-medical prescribing student attended the appl	
If yes, please identify cohort year/programme of study: One current non-medical prescribing student attended the approvement of the approval visit. Service users and carers	
If yes, please identify cohort year/programme of study: One current non-medical prescribing student attended the app One adult nursing student attended the approval visit.	roval visit. Yes

Nursing & Midwifery

Better, safer care through quality assurance of nursing, midwifery and nursing associate education.



	MACDONALD
The visitor(s) viewed the following areas/facilities during	Yes/No
the visit:	
Specialist teaching accommodation (e.g. clinical skills/simulation	Yes
suites)	
Library facilities	Yes
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 Not required as an existing AEI delivering NMC programmes.

Additional comments:

Mott MacDonald Group Disclaimer

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

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

Issue record			
Final Report			
Author	Shelley Peacock	Date	15 August 2019
Checked by	Pamela Page	Date	27 September 2019
Approved by	Leeann Greer	Date	4 October 2019
Submitted by	Amy Young	Date	7 October 2019