

**Programme approval visit report**

**Section one**

<p><b>Programme provider name:</b></p>	<p>University of Lincoln</p>
<p><b>In partnership with:</b> <i>(Associated practice learning partners involved in the delivery of the programme)</i></p>	<p>United Lincolnshire Hospital Trust Lincoln GP Out of Hours Service Oakwood GP Surgery The Heath GP Surgery Lincolnshire Community Health Services NHS Trust Nottinghamshire Healthcare NHS Trust Lincolnshire Partnership NHS Foundation Trust NHS Commissioned St Barnabas Hospice Lincolnshire Beacon Medical Practice Bretton Medical Practice Caistor Health Centre Hawthorn Medical Practice Horncastle Medical Group James Street Family Practice Nottinghamshire Healthcare NHS Foundation Trust Old Leake Medical Centre The Wolds Practice Thistle Moor Medical Centre Alford Group of Doctors Larwood Health Partnership Lincolnshire Community Health Services Oakham Medical Practice Sleaford Medical Group South Axholme Practice St Peter's Hill Surgery Stickney Surgery The New Queen Street GP Surgery Washingborough Family Practice</p>
<p><b>Programme(s) reviewed:</b></p> <p>Programme: Independent and Supplementary Nurse Prescribing Title of programme: Independent/supplementary prescriber preparation programme Programme start date: 13 January 2020</p>	

Academic level(s): England, Wales, Northern Ireland: Level 6 Level 7	
<b>Date of approval</b>	14 October 2019
<b>QA visitor(s):</b>	Registrant Visitor: Bernadette Martin

**Section two**

**Summary of review and findings**

The University of Lincoln (UoL) is an approved education institution (AEI). UoL school of health and social care (the school) presented the independent and supplementary nurse and midwife prescribing (V300) preparation programme for approval. The programme is clearly 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 non-medical prescribing V300 award at academic level six and seven is delivered over 26 weeks. It is accessed at academic level seven by students completing the MSc advanced clinical practice (ACP) programme. It can be studied as a standalone programme at academic levels six and seven.

The partnership between UoL and associated practice learning partners (PLPs) is robust, with evidence of active and effective engagement at an operational and strategic level. There's evidence of effective communication networks between the programme team delivering the programme and PLPs to ensure consistency and comparability of student experience across a range of practice learning environments.

Issues raised in Care Quality Commission (CQC) quality reports required the attention of the school and the associated PLPs to assure the quality of student placements. Action plans created in partnership demonstrate strategic assessment of the risk to students' practice learning. Actions taken and a monitoring strategy to prevent future risk is documented.

Arrangements at programme level do not meet the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018).

The Standards for student supervision and assessment (SSSA) (NMC, 2018) are met at programme level.

The programme is recommended to the NMC for approval subject to one condition. There is one university condition.

Updated 18 November 2019

Evidence is provided to meet the NMC condition. The panel confirmed the university condition has been met. The conditions and related standards are now met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
<b>Recommended outcome to the NMC:</b>	Programme is recommended for approval subject to specific conditions being met
<p><b>Conditions:</b></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><b>Effective partnership working: collaboration, culture, communication and resources:</b></p> <p>None identified</p> <p><b>Selection, admission and progression:</b></p> <p>None identified</p> <p><b>Practice learning:</b></p> <p>None identified</p> <p><b>Assessment, fitness for practice and award:</b></p> <p>Condition one: The programme documentation must clearly detail how the assessment methods within the programme address how the learning outcomes are being tested; the programme team must review the terminology within the learning outcomes to ensure that they are specific, measurable and achievable. (SFNME R2.2; SPP R4.9)</p> <p><b>Education governance: management and quality assurance:</b></p> <p>Condition two: The programme team must review the documentation to confirm it meets university requirements; they must:</p> <p>Ensure that the relevant university programme specifications and module templates are adopted. Update the reading lists in line with the library Talis Aspire system.</p> <p>Ensure that all programme variations meet university regulations and have appropriate and agreed university approval.</p> <p>Ensure that the proposed module name changes receive appropriate university approval.</p> <p>Review the assessment map to ensure that</p>

	assessments are appropriately placed and that they are accurately allocated in line with the university assessment weeks. (University condition)
<b>Date condition(s) to be met:</b>	11 November 2019
<b>Recommendations to enhance the programme delivery:</b>	None identified
<b>Focused areas for future monitoring:</b>	None identified

Programme is recommended for approval subject to specific conditions being met	
<p><b>Commentary post review of evidence against conditions:</b></p> <p>Revised copies of the programme documentation provide evidence that the NMC condition is met.</p> <p>Programme specifications include mapping of how assessments methods meet the programme learning outcomes. The learning outcomes have been revised and are now specific and can be measured to demonstrate achievement. Condition one is now met.</p> <p>The university condition is confirmed as met. The SFNME and the SPP are now met.</p>	
<b>AEI Observations</b>	<p><b>Observations have been made by the education institution</b></p> <p>Yes</p>
<b>Summary of observations made, if applicable</b>	The university confirms the factual accuracy of the report.
<b>Final recommendation made to NMC:</b>	Programme is recommended to the NMC for approval
<b>Date condition(s) met:</b>	18 November 2019

### 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>

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 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 effective and robust partnership working between UoL and key stakeholders. The programme team and representative stakeholders at the approval visit say the design and proposed delivery of the programme meets the SPP (NMC, 2018) and the Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency framework for all prescribers) (NMC, 2018). The programme team include registered nurses with NMC prescribing and teaching qualifications and a pharmacist. This is evidenced in the programme documentation.

There's documentary evidence of consultation with students, service users and carers and PLPs; this is confirmed at the approval visit. PLP representatives tell us that they're been actively involved in the programme consultation. They tell us they're fully aware of the SFNME (NMC, 2018), the SSSA (NMC, 2018), the SPP (NMC, 2018) and the Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency framework for all prescribers) (NMC, 2018).

PLPs tell us about the effective partnership with the programme team; they commend the programme team which further confirms a sound partnership.

They tell us about the speed networking events which have been initiated by the programme leader. This has provided an opportunity to meet students and service users and carers to share experiences; they describe how this has enabled reflection on areas of good practice and the opportunity to consider some of the challenges associated with prescribing.

Students and service user and carers confirm their attendance at the speed networking events. All stakeholders tell us about the excellent partnership working with the programme team. One service manager tells us about how responsive the programme team are in supporting organisational workforce planning and how important prescribing is to advanced nursing practice. They are confident in the programme team who they tell us provide a commendable prescribing programme.

Documentary evidence and the approval visit confirms the student voice is captured through programme evaluation. The practice assessment documentation (PAD) facilitates ongoing evaluation; students tell us they feel well supported to share their views and that programme teams act upon any issues through the programme student representative. Formal evaluations are undertaken, the outcome of any actions is reported through the university quality assurance process where actions required are implemented and reviewed. Students tell us they are exceptionally well supported by the programme team and in particular the programme leader

There's a comprehensive programme of consultation with service users and carers as members of the School Together Group, they describe their involvement in the development, delivery and evaluation of the programme. They confirm they receive training and preparation for their roles which includes equality and diversity training. They tell us about their contribution to the application process as part of the application review panels; they are fully integrated into the prescribing programme and feel they are part of the programme team. They receive feedback on their contribution through attendance at the programme management meetings.

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

***Met***

**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**

**Post Event Review**

**Identify how the condition is met:**

**Date condition(s) met:**

N/A

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

N/A

### 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)**

**Met**

R1.3 is met. There's a robust and collaborative approach to the application process. An application form is used to provide information about the suitability of registrants to undertake the programme. Applicants must have employer support; clinical managers sign to confirm clinical competence and that practice learning will be protected. There must be confirmation that a practice assessor is identified and that they meet the requirements of the SSSA. Organisational non-medical prescribing (NMP) leads sign to confirm governance arrangements are in place. NMP leads and service managers tell us about the process of selection before an application to the programme is agreed. There must be evidence of a clinical need for prescribing and be identified as a requirement of a registrant's professional development.

Applicants must complete a checklist to confirm they meet NMC and university entry requirements. All applications are reviewed and agreed by a selection panel comprising of a member of the programme team, service users and carers and PLP representatives.

They confirm applicants who meet the requirements are then invited to attend a numeracy assessment. The Health Education England (HEE) standardised numeracy assessment tool process (SN@P) is utilised to assess numerical skills; this must be passed at 80 percent.

Self-employed and non-NHS employed registrant applications must meet all entry requirements. They must be working and learning in a practice learning environment which is registered with a systems regulator and have a satisfactory educational audit.

The educational audit process confirms learning environments meet the SSSA and SFNME. PLPs are responsible for reporting changes such as concerns identified by systems regulators which mean students can be removed and reallocated. Practice placement areas without a satisfactory audit aren't used.

Students tell us employers and practice assessors support their application evidenced by completion of the application checklist form. This ensures support for

protected practice learning, confirmation of clinical suitability to enter the programme and a satisfactory disclosure and barring service (DBS) check.

**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 team confirm that no students will transfer to the proposed programmes. There are no students on interruption from their studies or returning to the programme.

**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?**

*Met*

**Date: 14 October 2019**

**Post Event Review**

**Identify how the condition is met:**

**Date condition(s) met:**

*N/A*

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

*N/A*

**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 their learning. Teaching and learning methods include lectures, seminars, self-directed learning and tutorials. The virtual learning environment (VLE) supports a blended learning approach with access to online resources. Students confirm teaching and online resources support their learning. They tell us about the effective support they receive from the programme team; they appreciate the level of personal and academic support. Students also value the responsiveness of the programme team; they tell us they receive prompt replies to questions. The programme administrator further supports any non-academic questions. The students describe the importance of being able to ask general questions about the management of their programme. They tell us the learning and teaching strategy prepares them effectively for prescribing practice and that there is clear communication between PLPs and the programme team which supports a sound learning experience.

Practice learning is evidenced through a PAD which is used to support achievement of the RPS competency framework for all prescribers.

**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 delivered in England.

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: 14 October 2019

### 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)**

**Met**

R3.1 is met. Documentary evidence and discussions at the approval visit confirm suitable and effective arrangements and governance for practice learning are in place for all applicants. This is assured by comprehensive and effective partnership working between the programme team and PLPs. NMP leads and managers from stakeholder organisations are involved in the selection process for their organisation. They confirm a process that is robust and it's clear they are fully engaged in ensuring only the most appropriate applicants are supported to undertake the programme.

For applicants who are self-employed or non-NHS employed registrants there's further enhanced scrutiny in respect of governance arrangements at practice level. They complete the application form and are required to include additional criteria, including, for example, there must be a suitable systems regulator report in place and an educational audit undertaken by the programme team in the practice learning environment. Evidence of indemnity insurance and the practice supervisor and practice assessor must undertake preparation for the supervision and assessment of the student who they must confirm will have protected learning time. This will be actively monitored by the programme leader.

The programme team tell us about additional supportive arrangements which will be in place for these students. This will include regular contact with students and practice assessors to ensure practice learning remains protected. One PLP tells us that their organisation will support appropriate independent practitioners to access supervised practice learning opportunities through an honorary contact. They explained how this is achieved through a governance process which is continually monitored.

An issue raised in a CQC quality report which required the attention of UoL was confirmed as no longer being used a practice learning environment. The programme team tell us that there was no impact on the programme. Documentary evidence confirms the practice learning environment is no longer used for student practice learning.

**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 for students to access and download to support learning and assessment preparation. Students tell us online learning resources are signposted and accessible. They describe the resources as excellent and supportive; they can access resources which promote flexible learning. They can book online tutorials and have access to a health and education co-operative website developed specifically to support prescribing education. They describe how the site helps them to prepare for future theory lessons and how a self-test facility is good for revision.

The VLE provides access to discussion between students; they tell us about how having the student representative available through the VLE facilitates peer support. They confirm they have access to SN@P and describe how it is used to further support the development of numeracy skills.

The PAD requires students to undertake prescribing specific assessment skills which are assessed by the practice assessor. They develop prescription writing skills in practice and are required to produce prescriptions as essential evidence. Supplementary prescribing learning is evidenced by the production of a clinical management plan within the PAD.

Service user and carer feedback is an essential element of evidence within the PAD. The programme leader tells us about how service user and carer feedback is collected in practice. The team have adopted the approach developed by the collaborative regional pan Midlands, Yorkshire and east practice learning group (MYEPLG). The service user and carer representatives confirm there's a focus on their feedback in the 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: 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?**

*Met*

**Date:** 14 October 2019

**Post Event Review**

**Identify how the condition is met:**

**Date condition(s) met:**

*N/A*

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

*N/A*

**Standard 4 Supervision and assessment**

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

R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education

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

R4.3 appoint a programme leader in accordance with the requirements of the NMC Standards framework for nursing and midwifery education. The programme leader

of 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)**

**Met**

R4.1 is met. Educational audits are completed to ensure appropriate systems and processes are in place to support student learning. On application to the programme a practice placement educational audit must be in place; if it's not for non-NHS employed or self-employed applicants a member of the programme team will undertake this. Practice learning is evaluated, students confirm providing formal and informal feedback on practice learning. There's evidence of sound communication between the practice assessor and academic assessors to identify and address any issues related to practice learning. Students are advised about, and have access to, the procedure for raising a concern in the university and in the practice learning environment. PLPs have processes in place to support students in raising a concern which is confirmed as part of the educational audit. They describe the effective communication with the programme team; the speed networking events are identified as an excellent opportunity to share experiences of prescribing preparation and practice.

Students confirm they feel very confident to discuss any concerns in the first instance with their practice assessor or programme leader. They commend the programme leader for the attention paid to any issues they may have, and they describe the invaluable level of pastoral support provided. Programme documentation confirms practice supervisors and practice assessors attend regular management meetings with the programme team.

**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 within the application and educational audit processes and discussion at the approval visit confirms the processes that are in place to identify practice supervisors, practice assessors and academic assessors and how they will be prepared for their roles. There is a stakeholder and UoL partnership preparation strategy for all NMC programmes. Specific prescribing practice supervisor and practice assessor preparation includes access to a podcast, and they are given an electronic copy of the PAD. Designated medical practitioners (DMPs) tell us that they are well prepared for their roles and that they are aware of the new NMC roles for practice supervision and assessment. One DMP describes how they will support non-medical prescribers who undertake the role in the proposed programme. This was clarified by the programme team and PLPs, who describe their roles within a train the trainer approach. Some PLPs confirm that they will be undertaking the practice supervisor and practice assessor roles for future students on the proposed programme; they acknowledge the importance of preparation.



**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 there are guidelines and processes in place to assign each student to a practice assessor who is both a registered healthcare professional and an experienced prescriber. The PLPs and programme team tell us this is confirmed at application; PLPs describe robust workforce planning arrangements. There's a clear plan for the management in exceptional circumstances if the same person fulfils the role of practice supervisor and practice assessor. The programme team tell us this is identified at the point of application and closely monitored by the academic assessor.

**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. Evidence of progression and achievement is recorded in the PAD where students provide evidence of meeting the RPS competencies. The practice assessor is responsible for monitoring student progress towards achievement. Practice supervisors are identified; they supervise and support learning. There are three formative meetings; which must be recorded and a final summative meeting at the end of the programme. Practice assessors and practice supervisors meet as required to monitor and record progress. The academic assessor must sign to confirm agreement with the practice assessor that the student has achieved the RPS competencies. The lead midwife for education (LME) must confirm that there's been a discussion with the practice assessor and academic assessor in relation to midwifery student achievement. A pharmacology examination and numeracy assessment meet the requirements of the programme.

Whilst the assessment strategy's suitable to meet the RPS competencies the programme documentation doesn't clearly address how the assessment methods meet the learning outcomes. There's limited differentiation across the academic level learning outcomes. This must be addressed to ensure the assessments test the learning outcomes. to meet NMC and university requirements. (Condition one) (SFNME R2.2; SPP R4.9)

**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 clear evidence that the learning outcomes address the assessment requirements. (Condition one) (SFNME R2.2; SPP R4.9)

**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***

The programme team must review the learning outcomes to ensure they address the assessment requirements and they must be specific, measurable and achievable.

Condition one: The programme documentation must clearly detail how the assessment methods within the programme address how the learning outcomes are being tested; the programme team must review the terminology within the learning outcomes to ensure that they are specific, measurable and achievable. (SFNME R2.2; SPP R4.9)

**Date: 14 October 2019**

**Post Event Review**

**Identify how the condition is met:**

Condition one: The programme team have provided detailed programme specifications which include mapping of how assessment methods meet the programme learning outcomes. They have reviewed, revised and presented learning outcomes which are specific and can be measured to demonstrate achievement. Condition one is now met.

**Evidence:**

Revised, programme specification, academic level six, 11 November 2019  
 Revised, programme specification, academic level seven, 11 November 2019  
 Revised, module specifications, academic level six, 11 November 2019  
 Revised, module specifications, academic level seven, 11 November 2019

UoL, variation changes to regulations, prescribing preparation programmes, 31 October 2019  
UoL, major change form, prescribing preparation programmes, 6 November 2019

**Date condition(s) met:** 18 November 2019

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

***Met***

Condition one is now met.

Assurance is provided that the SFNME R2.2 and SPP R4.9 are now 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: 14 October 2019**

**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):

<b>Key documentation</b>	<b>Yes/No</b>
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
List additional documentation:	
Post conditions Revised, programme specification, academic level six, 11 November 2019 Revised, programme specification, academic level seven, 11 November 2019 Revised, module specifications, academic level six, 11 November 2019 Revised, module specifications, academic level seven, 11 November 2019 UoL, variation changes to regulations, prescribing preparation programmes, 31 October 2019 UoL, major change form, prescribing preparation programmes, 6 November 2019	
If you stated no above, please provide the reason and mitigation	
Additional comments:	

<b>During the visit the visitor(s) met the following groups</b>	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:  Two x 2018-2019 cohort Two x 2017-2018 cohort	
Service users and carers	Yes
If you stated no above, please provide the reason and mitigation	
Additional comments:  The LME was not able to attend the event due to unforeseen circumstances.	

<b>The visitor(s) viewed the following areas/facilities during the visit:</b>	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	
Additional comments:  List additional documentation: Presentation by the programme team, 14 October 2019 NMC, AEI and PLPs annual self-assessment report, 2018-2019	

**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	Bernadette Martin	Date	24 October 2019
Checked by	Judith Porch	Date	12 December 2019
Submitted by	Leeann Greer	Date	16 December 2019
Approved by	Andrea Bacon	Date	19 December 2019