## Programme approval visit report

### Section one

<table>
<thead>
<tr>
<th>Programme provider name:</th>
<th>University of Portsmouth</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>In partnership with:</strong></td>
<td><strong>Brighton and Sussex University Hospitals NHS Trust</strong></td>
</tr>
<tr>
<td><em>(Associated practice learning partners involved in the delivery of the programme)</em></td>
<td><strong>Solent NHS Trust</strong></td>
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<td></td>
<td><strong>West Sussex Hospitals NHS Trust</strong></td>
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<td></td>
<td><strong>Surrey and Sussex Healthcare NHS Trust</strong></td>
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<td></td>
<td><strong>Hampshire Hospitals NHS Foundation Trust</strong></td>
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<td></td>
<td><strong>University Hospitals Southampton NHS Foundation Trust</strong></td>
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<td></td>
<td><strong>Isle of Wight NHS Trust</strong></td>
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<td></td>
<td><strong>Sussex Community NHS Foundation Trust</strong></td>
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<td></td>
<td><strong>Portsmouth Hospitals NHS Trust</strong></td>
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<td></td>
<td><strong>Sussex Partnership NHS Foundation Trust</strong></td>
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<td><strong>Southern Health NHS Foundation Trust</strong></td>
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<td></td>
<td><strong>Private, voluntary and independent health care providers</strong></td>
</tr>
<tr>
<td><strong>Programmes reviewed:</strong></td>
<td>Independent and supplementary nurse prescribing V300 ☑</td>
</tr>
<tr>
<td></td>
<td>Community practitioner nurse prescribing V150 ☐</td>
</tr>
<tr>
<td></td>
<td>Community practitioner nurse prescribing V100 ☐</td>
</tr>
<tr>
<td>Academic level:</td>
<td>England, Wales, Northern Ireland</td>
</tr>
<tr>
<td>------------------------------</td>
<td>----------------------------------</td>
</tr>
<tr>
<td>Independent and supplementary nurse prescribing V300</td>
<td>Level 5 ☒ Level 6 ☒ Level 7 SCQF Level 8 ☐ Level 9 ☐ Level 10 ☐ Level 11</td>
</tr>
<tr>
<td>Community practitioner nurse prescribing V150</td>
<td>Level 5 ☐ Level 6 ☐ Level 7 SCQF Level 8 ☐ Level 9 ☐ Level 10 ☐ Level 11</td>
</tr>
<tr>
<td>Community practitioner nurse prescribing V100</td>
<td>Level 5 ☐ Level 6 ☐ Level 7 SCQF Level 8 ☐ Level 9 ☐ Level 10 ☐ Level 11</td>
</tr>
<tr>
<td>Title of programme(s):</td>
<td>Non-Medical prescribing for Nurses</td>
</tr>
<tr>
<td>Date of approval visit:</td>
<td>29 April 2019</td>
</tr>
<tr>
<td>Programme start date:</td>
<td></td>
</tr>
<tr>
<td>QA visitor:</td>
<td>Heather Bain</td>
</tr>
</tbody>
</table>
Summary of review and findings

The University of Portsmouth (UoP), school of health sciences and social work (the school) is seeking approval to deliver the independent and supplementary nurse prescribing preparation programme (V300) against the NMC Standards for prescribing programmes (NMC, 2018) and Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) competency framework for all prescribers) (NMC, 2018). This is a new programme to the school. The programme will be offered at academic level six and seven and be delivered part-time over eight months.

Documentary analysis and findings at the approval visit demonstrates a commitment towards partnership working with key stakeholders. There is some evidence of partnership between the UoP and practice learning partners (PLPs) in this new prescribing programme, at both an operational and strategic level. There is evidence of effective communication processes between the school and PLPs to ensure all governance is in place for the programme.

The programme is mapped against the Standards for prescribing programmes (NMC, 2018) and the RPS competency framework for all prescribers.

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 conditions. The visitor made one recommendation.

Updated 6 June 2019

Evidence was provided to meet the two conditions. The conditions and related standards and requirements are now met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel

<table>
<thead>
<tr>
<th>Recommended outcome to the NMC:</th>
<th>Programme is recommended to the NMC for approval ☑</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Programme is recommended for approval subject to specific conditions being met ☒</td>
</tr>
<tr>
<td></td>
<td>Recommended to refuse approval of the programme ☐</td>
</tr>
</tbody>
</table>
### Conditions:

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

<table>
<thead>
<tr>
<th>Condition</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effective partnership working: collaboration, culture, communication and resources</td>
<td>Condition one: UoP must develop an implementation plan to address the role of service users and carers in the ongoing development, delivery, evaluation and co-production of the prescribing programme. (SFNME R1.12, Standards for prescribing programmes (SPP) R2.1)</td>
</tr>
<tr>
<td>Selection, admission and progression</td>
<td>None identified</td>
</tr>
<tr>
<td>Practice learning</td>
<td>None identified</td>
</tr>
<tr>
<td>Assessment, fitness for practice and award</td>
<td>Condition two: UoP must ensure escalating concerns and fitness for practise processes are explicit in student, practice supervisor and practice assessor documentation. (SFNME R2.10)</td>
</tr>
<tr>
<td>Education governance: management and quality assurance</td>
<td>None identified</td>
</tr>
</tbody>
</table>

| Date condition(s) to be met: | 31 May 2019 |

| Recommendations to enhance the programme delivery: | Recommendation one: Strengthen partnership working with practice learning partners in the development, delivery and evaluation of the prescribing programme. (SFNME R1.12) |

<table>
<thead>
<tr>
<th>Focused areas for future monitoring:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Engagement of service users across the programme</td>
</tr>
<tr>
<td>• Student, practice supervisors and practice assessors understanding of the processes to escalate concerns and manage fitness to practise</td>
</tr>
</tbody>
</table>

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

**Commentary post review of evidence against conditions**
6 June 2019

Evidence is provided to meet the two conditions. The conditions and related standards and requirements are now met.

The programme is recommended to the NMC for approval.

<table>
<thead>
<tr>
<th>AEI Observations</th>
<th>Observations have been made by the education institution</th>
<th>YES ☒ NO ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summary of observations made, if applicable</td>
<td>The information is overall correct.</td>
<td></td>
</tr>
<tr>
<td>Final recommendation made to NMC:</td>
<td>Programme is recommended to the NMC for approval ☒</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Recommended to refuse approval of the programme ☐</td>
<td></td>
</tr>
<tr>
<td>Date condition(s) met:</td>
<td>6 June 2019</td>
<td></td>
</tr>
</tbody>
</table>
NMC Programme standards

Please refer to NMC standards reference points

*Standards for prescribing programmes* (NMC, 2018)

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

*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 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

Documentary evidence and the approval process confirm there is effective partnership working between the UoP and key stakeholders. Policies and processes are in place to support a partnership approach to the development and planned delivery of the prescribing programme. The programme team and PLP managers comment on their previous partnership working in relation to pre-registration nursing and how partnerships will develop further to support this new prescribing programme. The development of this programme involves some key
stakeholders from PLPs who have accessed prescribing programmes at other providers previously. Former postgraduate pharmacy students who have undertaken a prescribing programme from the UoP school of pharmacy and biomedical sciences provide feedback to the development team to inform the development of this programme. As a new programme to the school there are no previous prescribing nursing students from the UoP to inform this programme.

The programme leader is a member of the strategic nursing partnership group where this programme is discussed ensuring a partnership approach. The school is involved in the Wessex supervision and assessment task and finish group to ensure a consistent approach to the implementation of the SSSA with PLPs and other approved education institutions (AEIs) in this area for prescribing programmes. There are two recently published documents providing guidance for non-medical prescribers employed in Wessex community trusts and Wessex hospital trusts that the programme team will integrate within the programme. As a new provider to prescribing programmes the team have limited input into such partnership documents to date. PLPs confirm processes will be undertaken to support students onto the programme but they and service users have not had full opportunity to comment and engage with the proposed application form for the programme. (Recommendation one) (SFNME R1.12)

Evidence of partnership working between the UoP and PLPs in managing the educational audits, and for the preparation of practice supervisors and practice assessors to meet the SSSA (NMC, 2018) is evident in documentation and from the approval process. There is a planned joint approach to support practice learning whereby the academic assessor will meet with the practice assessor to discuss and provide feedback on student progress towards achieving the competencies within the RPS (2016) competency framework for all prescribers. Documentary evidence demonstrates a commitment to an inclusive approach to selection of students and programme delivery.

The pre-registration nursing students in attendance comment positively of their experience of the school and the effectiveness of support provided to them from the UoP. They value the digital support and virtual learning environment, which includes the programme handbook as well as learning resources. The students report they feel valued, and the school provides opportunities for them to feedback informally and through formal mechanisms. Any feedback students have provided previously is responded to and actions taken as appropriate. The pharmacy student says some cohorts’ feedback has informed the development of this programme and how the UoP work with PLPs to ensure students are supported to achieve their competencies in practice.

There are active service users available within the school. The programme team say how service users are used to develop scenarios in other programmes. It is reported that further scenarios will be developed and linked to the RPS competency framework for all prescribers. Students say service users are used as part of objective structured clinical examinations in their programme and confirm scenarios are used in the pharmacist’s prescribing programme. Service users say
they are used in other programmes in recruitment and selection, and in learning and teaching. None of the service users in attendance could report on their input into the proposed prescribing 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: Standards framework for nursing and midwifery education

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<tr>
<th>MET</th>
<th>NOT MET</th>
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</table>

There is no explicit evidence of how service users and carers are involved in the co-production of this programme and how they will continue to be involved.

Gateway 2: Standards for student supervision and assessment

<table>
<thead>
<tr>
<th>MET</th>
<th>NOT MET</th>
</tr>
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</table>

If not met, state reason and identify which standard(s) and requirement(s) are not met and the reason for the outcome

There is no explicit evidence of how service users and carers are involved in the co-production of this programme and how they will continue to be involved.

Condition one: The UoP must develop an implementation plan to address the role of service users and carers in the ongoing development, delivery, evaluation and co-production of the prescribing programme. (SFNME R1.12, SPP R2.1)

PLPs and service users say they have not had the opportunity to comment and engage with the proposed application form for the programme.

Recommendation one: Strengthen partnership working with practice learning partners in the development, delivery and evaluation of the prescribing programme. (SFNME R1.12)

**Post event review**

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

Condition one:
A service user and carer strategy is provided that includes an implementation plan specific to this prescribing programme that meets the NMC standards.

Evidence:
Service user and carer strategy, November 2018
Condition one is now met.
Date condition(s) met: 8 June 2019

Revised outcome after condition(s) met

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Condition one is now met.

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**Student journey through the programme**

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

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

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.

<table>
<thead>
<tr>
<th>Findings against the standard and requirements</th>
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</thead>
<tbody>
<tr>
<td><strong>Evidence provides assurance that the following QA approval criteria are met:</strong></td>
</tr>
<tr>
<td>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)</td>
</tr>
<tr>
<td>YES ☑  NO ☐</td>
</tr>
<tr>
<td>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)</td>
</tr>
<tr>
<td>YES ☑  NO ☐</td>
</tr>
<tr>
<td><strong>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</strong></td>
</tr>
<tr>
<td>• 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)</td>
</tr>
<tr>
<td>MET ☑  NOT MET ☐</td>
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</table>

R1.3 is met.

The programme team and the PLPs report on the process for selection of students onto the programme. The application form demonstrates governance is considered as part of the admission process and additional self-declaration is requested of self-employed applicants relating to those specific elements of entry criteria normally signed off by a manager and a prescribing lead. The disclosure and barring service (DBS) is in place in the application process. Line managers confirm applicants are capable of safe and effective practice at a level appropriate to the applicant’s area of future prescribing practice. PLPs require all their staff to have completed a formal physical assessment module prior to accessing the prescribing programme. Self-employed and candidates working in private practice will be required to provide additional evidence in this regard.
Educational audits already in place for pre-registration nursing will be used for existing PLPs and in the first year of the programme a member of the programme team will undertake a practice visit in order to build relationships and to ensure there is support in place explicit to the prescribing programme. For self-employed students a member of the programme team will visit the practice area to undertake an educational audit.

Protected learning time is acknowledged in the application form which includes being released for 26 days academic learning and 12 days learning in practice. PLPs confirm they can support this protected learning time. The application form identifies the practice supervisor and practice assessor.

- Processes are in place to consider recognition of prior learning that is capable of being mapped to the RPS *Competency Framework for all Prescribers* (R1.4)  
  YES [ ]  NO [ ]

- Processes are in place to confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme (R1.5)  
  YES [ ]  NO [ ]

- Processes are in place to confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas (R1.6):
  - Clinical/health assessment
  - Diagnostics/care management
  - Planning and evaluation  
  YES [ ]  NO [ ]

- Processes are in place to ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme (R1.7)  
  YES [ ]  NO [ ]

**Proposed transfer of current students to the programme under review**

*From your documentary analysis and your meeting with students, provide an evaluative summary to confirm how the Standards for prescribing programmes and Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers) will be met through the transfer of existing students onto the proposed programme.*
This is a new programme and there are no existing students to transfer to the programme.

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

<table>
<thead>
<tr>
<th>Outcome</th>
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<tbody>
<tr>
<td>Is the standard met?</td>
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<tr>
<td>Date:</td>
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</tbody>
</table>

### Standard 2: Curriculum

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

- R2.1 ensure programmes comply with the NMC *Standards framework for nursing and midwifery education*
- R2.2 ensure that all prescribing programmes are designed to fully deliver the competencies set out in the RPS *A Competency Framework for all Prescribers*, as necessary for safe and effective prescribing practice
- R2.3 state the learning and teaching strategies that will be used to support achievement of those competencies
- R2.4 develop programme outcomes that inform learning in relation to the formulary relevant to the individual’s intended scope of prescribing practice:
  - R2.4.1 stating the general and professional content necessary to meet the programme outcomes
  - R2.4.2 stating the prescribing specific content necessary to meet the programme outcomes
  - R2.4.3 confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children’s nursing); midwifery; and specialist community public health nursing
- R2.5 ensure that the curriculum provides a balance of theory and practice learning, using a range of learning and teaching strategies
- R2.6 ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language

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

- **There is evidence that the programme complies with the NMC Standards framework for nursing and midwifery education (R2.1)**  
  
  **YES □** **NO □**  
  
  R2.1 is not met.
  
  While it is evident service users are used in student assessment in practice, within the practice documentation there is no explicit evidence of how service users and carers are involved in the co-production of this programme and how they will continue to be involved. (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 □** **NO □**  
  
Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

- **Evidence of the learning and teaching strategies that will be used to support achievement of those competencies (R2.3)**  
  
  **MET □** **NOT MET □**  
  
  R2.3 is met.
  
  Programme documentation details the structure of the V300 programme. The programme is delivered at two academic levels. All students will be taught together but additional tutorials will be delivered at different academic levels. The programme is the equivalent of 26 days attendance and 12 days learning in practice under the supervision of their practice supervisor and practice assessor.

  A variety of learning and teaching approaches are used to meet the needs of all students. There will be co-teaching with pharmacy students undertaking a similar programme. Teaching will include key lectures, workshops, simulated case studies, eLearning activities, self-directed learning, and learning through practice experiences. The programme team report service users will be used to inform case studies in the curriculum. The pharmacy student says how case studies are valued in teaching sessions, and the programme team report this programme will have shared learning with pharmacy students. Service users in attendance are not currently involved in the development and planned delivery of the prescribing programme, but report on their involvement elsewhere in the school.

  The development team report selected learning and teaching strategies will be used to support achievement of the RPS competency framework for all
prescribers. Module specifications are explicit and use the RPS competency framework for all prescribers.

<table>
<thead>
<tr>
<th>Evidence of programme outcomes that inform learning in relation to the formulary relevant to the individual’s intended scope of prescribing practice (R2.4):</th>
</tr>
</thead>
<tbody>
<tr>
<td>- stating the general and professional content necessary to meet the programme outcomes</td>
</tr>
<tr>
<td>- stating the prescribing specific content necessary to meet the programme outcomes</td>
</tr>
<tr>
<td>- 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</td>
</tr>
<tr>
<td>YES ☑</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>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)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES ☑</td>
</tr>
</tbody>
</table>

**If relevant to the review**

<table>
<thead>
<tr>
<th>Evidence to ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language. (R2.6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES ☑</td>
</tr>
</tbody>
</table>

The programme is delivered in England only.

**Gateway 1:** *Standards framework for nursing and midwifery education* relevant to curricula and assessment are met

YES ☑ | NO ☐ | N/A ☑ |

There is no explicit evidence of how service users and carers are involved in the co-production of this programme and how they will continue to be involved. (Condition one) (SFNME R1.12; SPP R2.1)

There is no evidence within student facing documents such as handbooks and the practice supervisor and practice assessor booklet of the escalating concerns and fitness to practice process. (Condition two) (SFNME R2.10)
Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to curricula are met  YES ☑️ NO ☐

<table>
<thead>
<tr>
<th>Outcome</th>
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<tbody>
<tr>
<td>Is the standard met?</td>
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</tbody>
</table>

There is no explicit evidence of how service users and carers are involved in the co-production of this programme and how they will continue to be involved. (Condition one)

Condition one: The UoP must develop an implementation plan to address the role of service users and carers in the ongoing development, delivery, evaluation and co-production of the prescribing programme. (SFNME R1.12, SPP R 2.1)

There is no evidence within student facing documents such as handbooks and the practice supervisor and practice assessor booklet of the escalating concerns and fitness to practice process. (Condition two)

Condition two: The UoP must ensure escalating concerns and fitness for practise processes are explicit in student, practice supervisor and practice assessor documentation. (SFNME R 2.10)

Date: 29 April 2019

Post event review

Identify how the condition(s) is met:

Condition one:
A service user and carer strategy is provided that includes an implementation specific to this prescribing programme that meets the NMC Standards.

Evidence:
Service user and carer strategy, November 2018
Condition one is met.

Condition two:
Documentation is updated to make explicit the escalating concerns and fitness to practise process.

Evidence:
Practice supervisor and practice assessor information booklet (two), February 2019.
Prescribing for nurses: independent and supplementary handbook level seven, September 2019 - 2020
Prescribing for nurses: independent and supplementary handbook level six, September 2019 - 2020
Student concern flow diagram, undated
Condition two is met.

**Date condition(s) met:** 6 June 2019

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

- **MET □**  
- **NOT MET □**

Conditions one and two are now 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 *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*

**Findings against the standard and requirements**

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

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

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

  - **MET □**  
  - **NOT 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 effective partnership working between the teaching team and PLPs. Prescribing leads and PLP managers report how they will be
involved in the selection process for applicants from their organisation. Practice supervisors and practice assessors are identified at the application stage in the application form and are prepared by the UoP for their role. PLPs report they have sufficient prescribers to be practice supervisors and practice assessors. Going forward they will use a database annotated to identify all prescribers, prescribing practice supervisors and practice assessors who are nurses. Initially it is envisaged nurse consultants who are prescribers will be practice supervisors and that it will mainly remain as medical practitioners as practice assessors, but it is likely change over time.

Practice supervisors and practice assessors are all provided with a handbook outlining their roles and responsibilities. An induction day will be held for the practice supervisors and practice assessors. The programme leader recognises not all practice supervisors and practice assessors will always be in a position to attend and reports she will be visiting them in practice to ensure they are fully prepared. The programme leader will undertake the role of the academic assessor and a deputy programme leader will be identified from the programme team who may also undertake the role of academic assessor. UoP prepares academic assessors for their role which is outlined in the practice supervisor and practice assessor handbook and the practice assessment portfolio documentation.

The application form ensures governance arrangements are in place in practice learning environments for all applicants. The programme team report they will undertake a visit in practice to support individual students accessing the programme from the independent healthcare sector (including non NHS and self-employed students) prior to them being admitted on the programme. Students will not be allowed to commence the programme unless these arrangements are verified.

- There is evidence that the programme complies with the NMC standards for student supervision and assessment (R3.2)  
  YES ☑  NO ☐

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

- Evidence to ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment (R3.3)  
  MET ☑  NOT MET ☐

R3.3 is met.

Programme documentation and findings at the approval visit confirm a range of simulation and technology-based strategies are used to supported learning. The virtual learning environment provides a variety of resources such as videos and quizzes that can be used in the prescribing programme. Current students comment positively about the resources available on the virtual learning
environment and these are easily accessible. The simulation suite provides the opportunity for scenarios to be used with service users to practice consultation and health assessment relating to prescribing.

- 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 □ | NO □ |

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

| YES □ | NO □ |

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

| YES □ | NO □ |

**Outcome**

<table>
<thead>
<tr>
<th>Is the standard met?</th>
<th>MET □</th>
<th>NOT MET □</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td>29 April 2019</td>
<td></td>
</tr>
</tbody>
</table>

**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 a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience

- R4.4 ensure the programme leader works in conjunction with the lead midwife for education (LME) and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes
R4.5 ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking

R4.5.1 In exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor for that part of the programme where the prescribing student is undergoing training in a practice learning setting. In such instances, the student, practice supervisor/assessor and the AEI will need to evidence why it was necessary for the practice supervisor and assessor roles to be carried out by the same person

R4.6 ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking

R4.7 provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes

R4.8 assess the student’s suitability for award based on the successful completion of a period of practice based learning relevant to their field of prescribing practice

R4.9 ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies. This includes all students:

R4.9.1 successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), 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%)

Findings against the standards and requirements

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

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

- There is evidence of how the programme will ensure how support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education (R4.1)

R4.1 is met.

Mapping documentation demonstrates how the programme complies with the Standards framework for nursing and midwifery education and the SSSA. At the approval visit PLPs and the programme team tell us how local AEIs work in
partnership to apply the new standards to the programme through a local nursing practice and learning group and the Wessex supervision and assessment task and finish group. The nominated practice supervisor takes responsibility for the day to day supervision of the student and will complete the preliminary, mid-point and final evaluations of progress at the end of the programme. The practice assessor takes responsibility for the final declaration of competence at the end of the programme and will liaise with the academic assessor. Section four of the practice assessment portfolio outlines the tripartite discussions between the student, practice supervisor and practice assessor. The academic assessor will provide support throughout the programme and will liaise with managers, practice supervisors and practice assessors as required. Any breakdown in practice placements will be managed in partnership with PLPs taking the lead as the students are in employment.

The programme team confirm an external examiner will be appointed prior to the start of the programme. This will be the external advisor to the programme approval panel.

- There is evidence of how the Standards for student supervision and assessment are applied to the programme. There are processes in place to identify the supervisors and assessors along with how they will be prepared for their roles (R4.2)

R4.2 is met.

The programme team complete educational audits to ensure effective systems and processes are in place in practice learning environments to support student learning. For the first year of the programme the academic assessor will undertake a visit in practice to ensure there is clear understanding of the new NMC Standards for student supervision and assessment and to further develop relationships with PLPs.

The paper-based practice assessment portfolio, and the guidance in the practice supervisor and practice assessor handbook ensures that support, supervision, learning and assessment provided complies with the NMC Standards for student supervision and assessment. It is explicit that the supervisor and assessor should mainly be different people. PLPs report they envisage no situation where this will be the same person. The practice assessment portfolio outlines the role practice supervisors and practice assessors have in student supervision and assessment. The programme leader confirms a tripartite discussion between the academic assessor, student and practice assessor shall occur at the end of the programme.

The programme team say all practice supervisors and practice assessors will be provided with a handbook. This handbook states roles of all involved to support student supervision and assessment in practice. There are processes for evaluating practice learning throughout the programme and students do this at the end of the programme. The practice assessment portfolio supports communication between the practice assessor and the university.
PLPs demonstrate good understanding of the new NMC standards and provide assurance of adequate practice supervisors and practice assessors to supervise and assess students.

- Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience (R4.3)  
  YES ☑ NO ☐

- Evidence of the programme leader working in conjunction with the LME and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes (R4.4)  
  YES ☐ NO ☑

There is no LME in place as currently the UoP do not deliver education to midwives. The programme team report midwives will be directed to another education provider in the area.

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 ☑ NOT MET ☐

The practice assessor is identified in the admission process and processes are in place to check prescriber qualifications and appropriate experience as a prescriber to support the student. This detail is in the admission form and is checked by the programme leader.

- Processes are in place to ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking (R4.6)  
  YES ☑ NO ☐

- Processes are in place to provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes (R4.7)  
  YES ☑ NO ☐

- Processes are in place to assess the student’s suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice (R4.8)  
  YES ☑ NO ☐
Processes are in place to ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies (R4.9). This includes:
- successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and
- successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100%).

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

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

Outcome

Is the standard met? MET ☒ NOT MET ☐
Date: 29 April 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

### Findings against the standards and requirements

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

- Processes are in place to ensure following successful completion of an NMC approved programme of preparation, confirm that the registered nurse (level 1), midwife or SCPHN is eligible to be recorded as a prescriber, in either or both categories of:
  - a community practitioner nurse (or midwife) prescriber (V100/V150), or
  - a nurse or midwife independent-supplementary prescriber (V300) (R5.1)

  YES ☒ NO ☐

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

  YES ☒ NO ☐

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

  YES ☒ NO ☐

- Processes are in place to inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice (R5.4)

  YES ☒ NO ☐

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

YES ☒ NO ☐
<table>
<thead>
<tr>
<th>Outcome</th>
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<tbody>
<tr>
<td><strong>Is the standard met?</strong></td>
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<tr>
<td><strong>Date:</strong></td>
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</tbody>
</table>
## Sources of evidence

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

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

List additional documentation:
Post visit documentation:
Practice supervisor and practice assessor information booklet (two) dated February 2019
Prescribing for nurses: independent and supplementary handbook level seven, September 2019 - 2020
Prescribing for nurses: independent and supplementary handbook level six, September 2019 - 2020
Student concern flow diagram, undated
Service user and carer strategy, November 2018

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

Additional comments:

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

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior managers of the AEI/education institution with responsibility for resources for the programme</td>
<td>☒</td>
</tr>
<tr>
<td>Senior managers from associated practice learning partners with responsibility for resources for the programme</td>
<td>☒</td>
</tr>
<tr>
<td>Programme team/academic assessors</td>
<td>☒</td>
</tr>
<tr>
<td>Practice leads/practice supervisors/ practice assessors</td>
<td>☒</td>
</tr>
<tr>
<td>Students</td>
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</tbody>
</table>

If yes, please identify cohort year/programme of study:
One student from the school of pharmacy and biomedical sciences who has undertaken a prescribing programme.
Four pre-registration nursing students all second year adult.
**Service users and carers**

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

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

Additional comments

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**The visitor(s) viewed the following areas/facilities during the event:**

<table>
<thead>
<tr>
<th>Area/Facility</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialist teaching accommodation (e.g. clinical skills/simulation suites)</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Library facilities</td>
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<td>X</td>
</tr>
<tr>
<td>Technology enhanced learning</td>
<td></td>
<td>X</td>
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<tr>
<td>Virtual learning environment</td>
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<td>X</td>
</tr>
<tr>
<td>Educational audit tools/documentation</td>
<td></td>
<td>X</td>
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<tr>
<td>Practice learning environments</td>
<td></td>
<td>X</td>
</tr>
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</table>

If yes, state where visited/findings

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

UoP is an established AEI and it was not necessary to visit facilities.

Additional comments:

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

<table>
<thead>
<tr>
<th>Issue record</th>
<th>Final Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Author:</td>
<td>Heather Bain</td>
</tr>
<tr>
<td>Checked by:</td>
<td>Monica Murphy</td>
</tr>
<tr>
<td>Approved by:</td>
<td>Leeann Greer</td>
</tr>
<tr>
<td>Submitted by:</td>
<td>Alex Brooker</td>
</tr>
</tbody>
</table>