Programme approval visit report

Section one

<table>
<thead>
<tr>
<th>Programme provider name:</th>
<th>University of Surrey</th>
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</table>
| In partnership with:    | Surrey and Sussex Healthcare NHS Trust  
| (Associated practice learning partners involved in the delivery of the programme) | South East Coast Ambulance NHS Trust  
|                          | Southern Health NHS Foundation Trust  
|                          | First Community Health and Care |

Programme(s) reviewed:

Programme: Independent and Supplementary Nurse Prescribing  
Title of programme: Independent Supplementary Prescribing  
Programme start date: 5 January 2020

Academic level(s):  
England, Wales, Northern Ireland:  
Level 6  
Level 7

Date of approval | 29 October 2019

QA visitor(s): Registrant Visitor: Bernadette Martin
Summary of review and findings

The University of Surrey (UoS) is an established approved education institution (AEI). UoS school of health sciences (the school) present the independent/supplementary prescribing (V300) preparation programme for NMC approval. The title of the programme has changed to remove the nursing only focus; the new title independent/supplementary prescribing is in line with the addition of allied health professionals who will undertake the programme from January 2020.

The programme is 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 V300 award at academic level six and seven is delivered over 26 weeks. It’s 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 documentary analysis and findings at the approval visit demonstrate a commitment toward partnership working with key stakeholders. There’s evidence of effective working between UoS and practice learning partners (PLPs). Communication networks between the programme team and PLPs assure consistency and comparability of student experience across a range of practice learning environments. There’s evidence of engagement with PLPs, students and service users and carers in the development of the programme.

Arrangements at programme level don’t meet the Standards framework for nursing and midwifery education (SFNME) and the Standards for student supervision and assessment (SSSA) as conditions apply.

The programme is recommended for approval subject to three conditions and one university condition. Two recommendations are made.

Updated 19 November 2019

Evidence is provided to meet the three NMC conditions. 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**

<table>
<thead>
<tr>
<th>Recommended outcome to the NMC:</th>
<th>Programme is recommended for approval subject to specific conditions being met</th>
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</thead>
<tbody>
<tr>
<td><strong>Conditions:</strong></td>
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<tr>
<td>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.</td>
<td></td>
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<tr>
<td>Effective partnership working: collaboration, culture, communication and resources:</td>
<td>None identified</td>
</tr>
<tr>
<td>Selection, admission and progression:</td>
<td>None identified</td>
</tr>
<tr>
<td>Practice learning:</td>
<td>None identified</td>
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<tr>
<td>Assessment, fitness for practice and award:</td>
<td>None identified</td>
</tr>
<tr>
<td>Education governance: management and quality assurance:</td>
<td>Condition one: Make explicit how the governance arrangements are directly and appropriately applied to self-employed and non-NHS employed registrants. (SPP R1.3 and R3.1)</td>
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<tr>
<td></td>
<td>Condition two: Make explicit how practice supervisors, assessors and academic assessors will be prepared to support and assess students in the practice learning environment. (SFNME R2.4; SSSA R5.1, R5.2, R8.1, R8.2, R10.1, R10.2; SPP R4.1 and R4.2)</td>
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<td>Condition three: Thoroughly review the documentation to provide definitive programme documents that accurately and consistently reflect the practice supervisor, assessor and academic assessor terminology. (SSSA R7.11; SPP R4.2)</td>
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<td>Condition four: To review all student facing literature to ensure that the differentiation between academic levels six and seven is explicit. (University condition)</td>
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<tr>
<td><strong>Date condition(s) to be met:</strong></td>
<td>19 November 2019</td>
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### Recommendations to enhance the programme delivery:

| Recommendation one: The programme team should consider further involvement of the service users and carers in the programme and associated training. (SFNME R1.12) |
| Recommendation two: Consider using the e-learning preparing to prescribe toolkit to support the application process. (SPP R3.3) |

### Focused areas for future monitoring:

| None identified |
Programme is recommended for approval subject to specific conditions being met

Commentary post review of evidence against conditions:

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

Revised documentation clearly details how governance arrangements are applied across the V300 programme.

Condition one is now met.

Documentation is presented which details the preparation of practice supervisors, assessors and academic assessors and how they will support students in the practice learning environment.

Condition two is now met

The programme team have made amendments to the programme documentation to accurately reflect practice supervisor, assessor and academic assessor terminology.

Condition three is now met.

The SFNME is now met.
The SSSA is now met.
The SPP is now met.

<table>
<thead>
<tr>
<th>AEI Observations</th>
<th>Observations have been made by the education institution</th>
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<tbody>
<tr>
<td></td>
<td>No</td>
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<table>
<thead>
<tr>
<th>Summary of observations made, if applicable</th>
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<tr>
<th>Final recommendation made to NMC:</th>
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<tr>
<td>Programme is recommended to the NMC for approval</td>
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<table>
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<tr>
<th>Date condition(s) met:</th>
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<tr>
<td>19 November 2019</td>
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### 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.

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**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.*

We found examples of effective and positive partnership working between UoS and key stakeholders. The programme teams and representative stakeholders at the approval visit tell us the design and proposed delivery of the V300 programmes meet the SPP and the Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) competency framework for all prescribers) (NMC, 2018).

The programme teams have multi-professional backgrounds which support the interprofessional V300 programme. There’s documentary evidence of consultation with external examiners, students, service user and carers and PLPs; confirmed at the approval visit.
PLPs tell us about the partnership with the programme team; they confirm robust communication channels which ensures a receptive approach by the programme team in supporting service need. PLPs confirm their involvement in the development of the prescribing programme. Documentary analysis confirms a commitment by PLPs to practice learning. A stakeholder steering group work in partnership with the school including the prescribing programme team to ensure that there’s a strategic approach to the implementation of the SSSA across all NMC programmes. Discussion with service managers we met who included one non-medical prescribing lead and a general practitioner confirm this commitment to ensure the practice learning environment remains fit for purpose.

Documentary evidence and confirmation at the approval visit confirms the student voice is captured through programme evaluations; students tell us they can share their views and are confident that the programme team will listen to them. 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 confirm that they’re well supported on the programme and they describe how the programme has enabled them to develop their advanced practice.

The programme team describe how service users and carers contribute to the programme; they comment on student performance in the practice portfolio. The service user and carer representatives and students confirm their involvement in networking focus group events where they met together to review the delivery of the programme. The forum has been used to discuss changes to the programme. The service user and carer representatives confirm their attendance at the forum. They tell us they are exclusively involved in the prescribing programme and share their experiences of medicines and prescribing with students in the classroom setting. They have confidence in the students who they speak with as future prescribers; they feel well supported by the programme team and receive guidance and feedback. They tell us they’re satisfied with their involvement; they would however welcome further involvement if asked by the programme team.

Service users and carers, we met tell us they do not receive equality and diversity training; a member of the school confirmed that as they are not involved in interviewing or the assessment of students, this is not required by the school. The service user and carer representatives are receptive to more participation in the programme; this should be reviewed, and potential training considered to enhance their contribution. (Recommendation one) (SFNME R1.12)

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:

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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.

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Evidence provides assurance that the following QA approval criteria are met

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

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

Yes

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

Evidence that the necessary governance structures are in place (including clinical support, access to protected learning time and employer support where appropriate) to enable students to undertake, and be adequately supported throughout, the programme (R1.3)

Not Met

R1.3 is not met. The programme team tell us that each applicant’s line manager signs to confirm their support for the study hours as part of the application process. PLPs confirm all applications are scrutinised to ensure that the applicant meets the requirements of the programme and that there’s an identified clinical need for prescribing within their role. One service manager describes how decisions are made by the applicant’s manager and the organisational education lead when supporting employees to undertake the programme. Applicants must confirm their intention to prescribe once they’ve qualified.

Students tell us employers and practice assessors support their application, they confirm that they must have a satisfactory disclosure and barring service (DBS) check. Two students who are currently undertaking the MSc advanced clinical practice programme and will be undertaking the proposed V300 programme in January 2020 tell us about their positive communication with the programme team in terms of their pending applications. They confirm the process for application with their employers and the university to date.

PLPs and the programme team tell us that if protected learning time becomes an issue this will be discussed with the manager, academic assessor, practice assessor and the student. Support mechanisms are in place to support students both in the university and in the practice learning environment. The programme team confirmed that if a student interrupted on the programme, arrangements would be made for the practice assessor to confirm that competence had been
maintained. PLPs confirm if additional time in the practice learning environment is required this will be supported.

The application process requires evidence of a suitable learning environment educational audit which ensures that there’s processes in place to ensure the practice learning environment is suitable and supports students. The programme team tell us they will undertake educational audits for non-NHS practice learning environments.

The programme documentation doesn’t clearly detail how the process for ensuring protected time is managed for those who are self-employed and non-NHS employed. A student representative who recently completed the programme and who is self-employed tells us they can’t confirm what additional arrangements were required when applying to the programme.

There’s no clear evidence of how governance structures will be applied to self-employed or non-NHS employed registrants on application to the programme.

(Condition one) (SPP R1.3 and R3.1)

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 no students are transferring to the new programme.

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

Yes

<table>
<thead>
<tr>
<th>Outcome</th>
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<tbody>
<tr>
<td>Is the standard met?</td>
</tr>
<tr>
<td>Not Met</td>
</tr>
<tr>
<td>SPP R1.3 is not met. There’s no clear evidence of how governance structures will be applied to self-employed or non-NHS employed registrants on application to the programme. (Condition one)</td>
</tr>
<tr>
<td>Condition one: Make explicit how the governance arrangements are directly and appropriately applied to self-employed and non-NHS employed registrants. (SPP R1.3 and R3.1)</td>
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<td>Date: 29 October 2019</td>
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Post Event Review

Identify how the condition is met:

Condition one: The programme team provided revised documentation which clearly details the process for how the governance arrangements are applied to self-employed or non-NHS employed registrants on application to the programme. The process for auditing non-NHS practice learning environments is now clearly detailed.

SPP R1.3 is now met.

Condition one is now met.

Evidence:
Revised, application form, independent/supplementary prescribing (V300), non-NHS employed and self-employed, November 2019
Revised, application form, independent/supplementary prescribing (V300), NHS employees, November 2019
Revised, independent sector single organisation placement audit, undated
Revised, preparation of independent/supplementary prescribing (V300), practice supervisors and assessors pack, undated
Meeting minutes, south central area placement partnership, 23 May 2019
Terms of reference, south central area placement partnership, July 2019

Date condition(s) met: 19 November 2019

Revised outcome after condition(s) met:

Met

Condition one is now met.

SPP R1.3 and R3.1 are now met.

Standard 2 Curriculum

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

R2.1 ensure programmes comply with the NMC Standards framework for nursing
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. The programme promotes professional and personal development; students are encouraged to reflect on their learning, performance and achievement within the practice portfolio. Learning and teaching methods include lectures, seminars, self-directed learning and tutorials. The virtual learning environment supports access to online resources; the programme team have developed an online prescribing toolkit which they tell us will be used as a formative learning strategy.

Practice learning is evidenced through a portfolio which is used to support achievement of the RPS (2016) 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

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<tr>
<th>Outcome</th>
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<tbody>
<tr>
<td>Is the standard met?</td>
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<tr>
<td><strong>Met</strong></td>
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<tr>
<td>Date: <strong>29 October 2019</strong></td>
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</table>

**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

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

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

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

**Not Met**

R3.1 is not met. Documentary evidence and discussions at the approval visit confirm that suitable and effective arrangements and governance for practice learning are in place for NHS employed registrant applicants. This is assured through effective partnership working between the programme team and PLPs. Prescribing leads and managers from stakeholder organisations are involved in the selection process for their organisation. They sign to confirm arrangements are in place for practice learning support, supervision and assessment.

The programme team couldn’t clearly confirm how governance arrangements at application and for protected learning time during the programme will be applied
for self-employed or non-NHS employed registrants. There must be assurance that comparable governance arrangements are in place to ensure protected learning for all students. (Condition one) (SPP R1.3 and R3.1)

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. The programme team have developed an e-learning toolkit which is prescribing specific and includes learning materials which enable students to further enhance their learning. The toolkit includes numeracy formative testing; students will undertake formative assessments which supports preparation of the summative numeracy examination. The approval panel agree this development is a sound learning strategy which the programme team could consider utilising to further enhance for example the application process. (Recommendation two) (SPP R3.3)

The practice portfolio is used to develop and evidence proficiency in prescribing. Students simulate consultation skills which prepares them for their summative objective structured clinical examination (OSCE). They practice prescription writing skills and develop clinical management plans.

Students tell us learning and teaching resources are robust and fully support their learning. They confirm service user and carers provide feedback to their practice assessor on their performance in the OSCE. They value the inclusion of service user and carer involvement in the classroom.

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

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

Yes

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

Yes

Outcome

Is the standard met?

**Not Met**

SPP R3.1 is not met.
The programme team couldn’t clearly confirm how governance arrangements at application and for protected learning time during the programme will be applied for self-employed or non-NHS employed registrants. There must be assurance that comparable governance arrangements are in place to ensure protected learning for all students. (Condition one)

Condition one: Make explicit how the governance arrangements are directly and appropriately applied to self-employed and non-NHS employed registrants. (SPP R1.3 and R3.1)

**Date: 29 October 2019**

Post Event Review

**Identify how the condition is met:**

Condition one: The programme team provided revised documentation which clearly details the process for how the governance arrangements are applied to self-employed or non-NHS employed registrants on application to the programme. The process for auditing non-NHS practice learning environments is now clearly detailed.
SPP R3.1 is now met.

Condition one is now met.

Evidence:
Revised, application form, independent/supplementary prescribing (V300), non-NHS employed and self-employed, November 2019
Revised, application form, independent/supplementary prescribing (V300), NHS employees, November 2019
Revised, independent sector single organisation placement audit, undated
Revised, preparation of independent/supplementary prescribing (V300), practice supervisors and assessors pack, undated
Meeting minutes, south central area placement partnership, 23 May 2019
Terms of reference, south central area placement partnership, July 2019

Date condition(s) met: 19 November 2019

Revised outcome after condition(s) met:

Met

Condition one is now met.

SPP R3.1 and R1.3 are now met.

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**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 an 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%).

Evidence provides assurance that the following QA approval criteria are met

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

Not Met

R4.1 is not met. Educational audits are completed to ensure that appropriate...
systems and processes are in place to support student learning. At application, a practice learning environment audit must be completed which details the practice learning information to ensure that the learning environment can support prescribing learners.

Practice learning is evaluated. There’s communication between the practice supervisor, assessor and the academic assessor to identify and address any issues related to practice learning. Students are advised about, and have access to, the procedures for raising a concern in the university and within the practice learning environment. Students tell us they’re aware of the processes for reporting concerns in either setting.

The programme team tell us they intend to use a buddy system which includes experienced practice assessors supporting new assessors. They describe several strategies including a targeted workshop which can be recorded for those assessors who can’t attend. At the approval visit we found PLPs and practice assessors and supervisors weren’t fully aware of preparation plans and weren’t able to describe how this will be operationalised. The preparation of the practice supervisor and academic assessor for their roles in supporting and assessing students also isn’t clear.

The preparation of the practice supervisor, assessor and academic assessor isn’t clear. There must be an implementation plan for how practice supervisors, assessors and academic assessors will be prepared to support students. (Condition two)

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

Not Met

R4.2 is not met. There’s clear policies and frameworks to support student supervision, learning and assessment. There’s evidence of a strategic approach with stakeholders to ensure the implementation of the SSSA is robust across all NMC programmes. The programme team tell us that preparation will be targeted for practice supervisors and assessors and academic assessors. However the programme documentation doesn’t clearly detail how they will be prepared to supervise and assess students on the programme. The practice assessor part of the application form provides examples of preparation; it states the practice assessor should identify their interest in undertaking preparation. There’s no indication of preparation for practice supervisors.

Whilst the PLPs are fully aware of SSSA they couldn’t clearly articulate how prescribing specific preparation would be operationalised. A designated medical
practitioner (DMP) tells us about the support offered by the programme team however they confirm that they’d not undertaken formal preparation and weren’t aware of preparation for the role.

At the approval visit we found no sound evidence of preparation for practice supervisors and assessors; the preparation of the academic assessor for their role in supporting students isn’t clear.

There’s no implementation plan for how practice supervisors, assessors and academic assessors will be prepared to support students. (Condition two) (SFNME R2.4: SSSA R5.1, R5.2, R8.1, R8.2, R10.1, 10.2; SPP R4.1, R4.2)

The programme documentation details the practice supervisor, assessor and academic roles. However, there are inconsistencies across the documents in relation to the accurate use of the titles for practice supervisors, assessors and academic assessors. (Condition three) (SSSA R7.11; SPP R4.2)

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’s 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 in the application form. 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%)

Yes

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
SFNME R2.4 requires that the programme complies with the requirements of the SSSA. However, there’s limited evidence of how practice supervisors, assessors and academic assessors will be prepared to support students. (Condition two) (SFNME R2.4: SSSA R5.1, R5.2, R8.1, R8.2, R10.1, R10.2; SPP R4.1, R4.2)

**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**

**No**

SSSA R5.1, R5.2, R8.1, R8.2, R10.1, R10.2, detail the preparation requirements for practice supervisors and practice assessors. We found no sound evidence of the preparation for practice supervisors, assessors and academic assessors for their role in supporting students. (Condition two) (SFNME R2.4: SSSA R5.1, R5.2, R8.1, R8.2, R10.1, R10.2; SPP R4.1, R4.2)

SSSA R7.11 requires the accurate use of titles for practice supervisors, assessors and academic assessor. (Condition three) (SSSA R7.11; SPP R4.2)

<table>
<thead>
<tr>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Is the standard met?</strong></td>
</tr>
<tr>
<td><strong>Not Met</strong></td>
</tr>
<tr>
<td>SPP R4.1 and R4.2 are not met.</td>
</tr>
<tr>
<td>There’s no implementation plan for how practice supervisors, assessors and academic assessors will be prepared to support students which doesn’t meet SFNME R2.4 and the following SSSA requirement R5.1, R5.2, R8.1, R8.2, R10.1, R10.2.</td>
</tr>
<tr>
<td>Condition two: Make explicit how practice supervisors, assessors and academic assessors will be prepared to support and assess students in the practice learning environment. (SFNME R2.4; SSSA R5.1, R5.2, R8.1, R8.2, R10.1, R10.2; SPP R4.1, R4.2)</td>
</tr>
</tbody>
</table>
programme documents that accurately and consistently reflect the practice supervisor, assessor and academic assessor terminology. (SSSA R7.11; SPP R4.2)

Date: 29 October 2019

Post Event Review

Identify how the condition is met:

Condition two: The programme teams presented revised documentation which makes explicit the preparation of practice supervisors, assessors and academic assessors. The preparation of V300 practice supervisors and assessors pack detail the preparation and support provided. A PowerPoint presentation which supports the practice supervisor and assessor preparation briefing session details the roles and responsibilities of the practice supervisor, assessor. The revised academic level six and seven portfolio of practice evidence documents and the revised application form provides further evidence of how practice supervisors and assessors are prepared and will support practice learning.

SPP R4.1 and R4.2 are now met.

Assurance is provided SFNME R2.4; SSSA R5.1, R5.2, R8.1, R8.2, R10.1 and R10.2 are met.

Condition two is now met.

Evidence:
Revised, application form, independent-supplementary prescribing (V300), non-NHS employed and self-employed, November 2019
Revised, application form, independent-supplementary prescribing (V300), NHS employees, November 2019
Revised, preparation of independent-supplementary prescribing (V300), practice supervisors and assessors pack, undated
Revised, portfolio of practice evidence, level six, undated
Revised, portfolio of practice evidence, level seven, undated
PowerPoint presentation, practice supervisor and assessor briefing, undated

Condition three: The programme team has revised the programme documentation which accurately reflects practice supervisor, practice assessor and academic assessor terminology. All documentation has been reviewed and amended.

SPP R4.2 is now met.

Assurance is provided SSSA R7.11 is met.
Condition three is now met.

Evidence:
Revised, application form, independent/supplementary prescribing (V300), non-NHS employed and self-employed, November 2019
Revised, application form, independent/supplementary prescribing (V300), NHS employees, November 2019
Revised, preparation of independent/supplementary prescribing (V300), practice supervisors and assessors pack, undated
Revised, portfolio of practice evidence, level six, undated
Revised, portfolio of practice evidence, level seven, undated
Revised, module guide, independent/supplementary prescribing (V300), academic level six, undated
Revised, module guide, independent/supplementary prescribing (V300), academic level seven, undated
Revised, module descriptor, independent/supplementary prescribing (V300), academic level six, undated
Revised, module descriptor, independent/supplementary prescribing (V300), academic level seven, undated
Revised, flyer, independent/supplementary prescribing (V300), academic level six, undated
Revised, flyer, independent/supplementary prescribing (V300), academic level seven, undated

**Date condition(s) met:** 19 November 2019

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

*Met*

Condition two is now met.

SPP R4.1 and R4.2 are now met.

Assurance is provided that SFNME R2.4; SSSA R5.1, R5.2, R8.1, R8.2, R10.1 and R10.2 are met.

Condition three is now met.

SPP R4.2 is now met.

Assurance is provided that the SSSA R7.11 is 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: 29 October 2019

Post Event Review

Identify how the condition is met:

Date condition(s) met:

N/A
<table>
<thead>
<tr>
<th>Revised outcome after condition(s) met:</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>
Source 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/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme document, including proposal, rationale and consultation</td>
<td>Yes</td>
</tr>
<tr>
<td>Programme specification(s)</td>
<td>Yes</td>
</tr>
<tr>
<td>Module descriptors</td>
<td>Yes</td>
</tr>
<tr>
<td>Student facing documentation including: programme handbook</td>
<td>Yes</td>
</tr>
<tr>
<td>Student university handbook</td>
<td>Yes</td>
</tr>
<tr>
<td>Practice assessment documentation</td>
<td>Yes</td>
</tr>
<tr>
<td>Practice placement handbook</td>
<td>Yes</td>
</tr>
<tr>
<td>PAD linked to competence outcomes, and mapped against RPS A Competency Framework for all Prescribers</td>
<td>Yes</td>
</tr>
<tr>
<td>Mapping document providing evidence of how the education institution has met the Standards framework for nursing and midwifery education (NMC, 2018)</td>
<td>Yes</td>
</tr>
<tr>
<td>Mapping document providing evidence of how the programme meets the Standards for prescribing programmes and RPS Standards of proficiency for prescribers (NMC, 2018)</td>
<td>Yes</td>
</tr>
<tr>
<td>Mapping document providing evidence of how the Standards for student supervision and assessment (NMC, 2018) apply to the programme(s)</td>
<td>Yes</td>
</tr>
<tr>
<td>Curricula vitae for relevant staff</td>
<td>Yes</td>
</tr>
<tr>
<td>Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website</td>
<td>Yes</td>
</tr>
<tr>
<td>Written confirmation by the education institution and associated practice learning partners to support the programme intentions</td>
<td>Yes</td>
</tr>
<tr>
<td>List additional documentation:</td>
<td></td>
</tr>
<tr>
<td>Overview of the programme by the programme team, 29 October 2019</td>
<td></td>
</tr>
<tr>
<td>NMC, AEI and PLPs annual self-assessment report, 2018-2019</td>
<td></td>
</tr>
<tr>
<td>Post visit documentation:</td>
<td></td>
</tr>
<tr>
<td>Revised, application form, independent/supplementary prescribing (V300), non-NHS employed and self-employed, November 2019</td>
<td></td>
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<tr>
<td>Revised, application form, independent/supplementary prescribing (V300), NHS employees, November 2019</td>
<td></td>
</tr>
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<td>Revised, preparation of independent/supplementary prescribing (V300), practice supervisors and assessors pack, undated</td>
<td></td>
</tr>
<tr>
<td>Revised, portfolio of practice evidence, level six, undated</td>
<td></td>
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<tr>
<td>Revised, portfolio of practice evidence, level seven, undated</td>
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<tr>
<td>Revised, module guide, independent/supplementary prescribing (V300), academic</td>
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</tbody>
</table>
During the visit the visitor(s) met the following groups

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

If yes, please identify cohort year/programme of study:
- 2017-2018 cohort
- 2018-2019 cohort
- MSc ACP students who will be undertaking the programme in January 2020

Service users and carers | Yes |

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

Additional comments:

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

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

If yes, state where visited/findings:

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

Not necessary as the university is an established AEI.

Additional comments:

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**Issue record**

**Final Report**

<table>
<thead>
<tr>
<th>Author</th>
<th>Bernadette Martin</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Checked by</td>
<td>Bernadette Wallis</td>
<td>22 November 2019</td>
</tr>
<tr>
<td>Submitted by</td>
<td>Lucy Percival</td>
<td>3 December 2019</td>
</tr>
<tr>
<td>Approved by</td>
<td>Leeann Greer</td>
<td>4 December 2019</td>
</tr>
</tbody>
</table>