**Programme approval visit report**

**Section one**

<table>
<thead>
<tr>
<th>Programme provider name:</th>
<th>Northumbria University</th>
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<tbody>
<tr>
<td><strong>In partnership with:</strong></td>
<td>Newcastle upon Tyne Hospitals NHS Foundation Trst (Community) Northumbria Health Care NHS Foundation Trust (Northumberland Community) South Tyneside NHS Foundation Trust (Sunderland Community) South Tyneside NHS Foundation Trust (Gateshead Community)</td>
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<tr>
<th>Programme(s) reviewed:</th>
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</table>
| Programme: Independent and Supplementary Nurse Prescribing  
Title of programme: Non-Medical Prescribing V300  
Programme start date: 20 January 2020  
Academic level(s):  
England, Wales, Northern Ireland:  
Level 6  
Level 7 |

| Programme: Community Practitioner Nurse Prescribing V100  
Title of programme: Community Practitioner for Nurses and Midwives V100  
Programme start date: 20 January 2020  
Academic level(s):  
England, Wales, Northern Ireland:  
Level 7 |

| Programme: Community practitioner nurse prescribing V150  
Title of programme: Community Practitioner Prescribing for Nurses and Midwives V150  
Programme start date: 20 January 2020  
Academic level(s):  
England, Wales, Northern Ireland:  
Level 6 |
<table>
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<tr>
<th>Level 7</th>
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<tr>
<td><strong>Date of approval</strong></td>
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<td><strong>QA visitor(s):</strong></td>
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## Summary of review and findings

Northumbria University (NU) faculty of health and life sciences, is an established approved educational institution of pre-registration and post registration programmes and have experience in delivering prescribing programmes.

NU is seeking to deliver the non-medical prescribing programme (V300) standalone and community practitioner prescribing for nurses and midwives programmes (V150 and V100) against the NMC (2018) Standards for prescribing programmes (SPP) with adoption of the Royal Pharmaceutical Society (RPS) competence framework for all prescribers. The V300 programme will be delivered at academic level six and seven as a stand alone 40 credit module over a period of six months. The V150 programme will be delivered at academic level six and seven in a stand alone 20 credit module over a period of three to four months. The V100 is integrated in the post graduate specialist practitioner qualification district nurse programme and specialist community public health nursing programme, and will be delivered at academic level seven in a 20 credit module.

Documentary analysis and findings at the approval visit demonstrate commitment towards partnership working with key stakeholders. There’s evidence of partnership between NU and practice learning partners (PLPs) in prescribing programmes at operational and strategic levels. There’s evidence of effective communication processes between NU and PLPs to ensure all governance is in place to deliver the programme. There is some evidence of engagement with service users and carers.

The Standards for prescribing programmes (NMC 2018) and the RPS competency framework for all prescribers are detailed in the documentation and mapped to the programme.

Arrangements at programme level do not meet the Standards for nursing and midwifery education (SFNME). Arrangements at programme level do not meet the Standards for student supervision and assessment (SSSA).

The programme is recommended for approval subject to three NMC conditions. The university made one condition.

6 December 2019

Evidence is provided to meet the three NMC conditions. The conditions and related standards are now met. Evidence is provided for the university condition. The programme is recommended to the NMC for approval.
## Recommended outcome of the approval panel

**Recommended outcome to the NMC:**

Programme is recommended for approval subject to specific conditions being met

<table>
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<th>Conditions:</th>
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**Effective partnership working: collaboration, culture, communication and resources:**

Condition one: Develop an implementation plan for the integration of experts by experience (service users and carers) within module delivery. (SFNME R1.12; SPP R2.1)

**Selection, admission and progression:**

None identified

**Practice learning:**

Condition two: Provide further clarification of the roles and responsibilities of the practice supervisor, practice assessor, and academic assessor. (SFNME R2.4; SSSA R6.7; SPP R4.2)

Condition three: Provide a clear link for to the escalating concerns policy within the documentation. (SFNME R2.10; SPP R2.1, R4.1)

**Assessment, fitness for practice and award:**

None identified

**Education governance: management and quality assurance:**

Condition four: Undertake thorough editorial scrutiny of documentation to correct typographical errors, inconsistencies in terminology and roles, review the research rich learning narrative to differentiate level six and seven modules. (University condition)

**Date condition(s) to be met:**

6 December 2019

**Recommendations to enhance the programme delivery:**

None identified

**Focused areas for future monitoring:**

Use of service users and carers (SUCs) throughout the programme.
| The role and relationships of practice supervisors, practice assessors and academic assessors. | Better, safer care through quality assurance of nursing, midwifery and nursing associate education. |
**Programme is recommended for approval subject to specific conditions being met**

**Commentary post review of evidence against conditions:**
Revised copies of programme documentation provide evidence the three NMC conditions are met. There’s an action plan for service user involvement in the programme, updated documents with links to escalating concerns policy and clarification of practice supervisor, practice assessor and academic assessor roles. Revised programme documentation with corrected typographical and academic level differentiation is provided to meet the university condition. 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>
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<tr>
<td></td>
<td>Yes</td>
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<tr>
<th>Summary of observations made, if applicable</th>
<th>In response to AEI observations concerning the rationale for condition two, the narrative in R4.2 is amended to reflect the role and relationships of the academic assessor.</th>
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<tr>
<th>Final recommendation made to NMC:</th>
<th>Programme is recommended to the NMC for approval</th>
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<th>Date condition(s) met:</th>
<th>6 December 2019</th>
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**Section three**

**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 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

<table>
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<tr>
<th>Findings against the standard and requirements</th>
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Provide an evaluative summary about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders based on QA visitor (s) documentary analysis and discussions at the approval visit, taking into consideration the QA approval criteria.

Documentary evidence and the approval process confirms effective partnership working between NU and key stakeholders including PLPs and students, in the development, delivery and evaluation of the programme at strategic and operational levels. Policies and processes are in place to support a partnership approach in developing and future delivery of the programme. The director of placements has quarterly strategic partnership meetings. The programme team meets regularly with prescribing leads in PLPs. PLPs confirm their close working relationship with NU.

Partnership working between NU and PLPs in managing educational audits and preparing practice supervisors and practice assessors to meet the SSSA is demonstrated in programme documentation and the approval process. The programme team report a planned joint approach to supporting practice learning. The programme team will liaise with the practice assessor to discuss student progress and provide feedback towards achieving competencies.

NU has a faculty strategy outlining cross-department opportunities for involving experts by experience (service users and carers). There’s evidence of engaging SUC in the undergraduate pre-registration nursing programme. However, there’s no evidence of active SUC engagement across prescribing programmes. This must be addressed (condition one) (SFNME R1.12, SPP R2.1). Service users say they made suggestions for future involvement of service users in the programmes.

Current prescribing students are positive about their learning experiences and support provided from NU. Students report they feel valued and NU provides opportunities for them to feedback informally and through formal mechanisms. Student feedback is responded to and appropriate actions taken. Students say how NU works with PLPs to ensure they’re supported to achieve their
‘competencies in practice. Students report no experience of service users’ involvement in the delivery of any face-to-face university taught sessions but service users contribute to their learning in practice.

Documentary evidence demonstrates partnership in selecting students onto programmes. No interviews are carried out by the programme team for the stand alone V300 and V150 students as they are selected onto the programmes by employers. Students on the V100, which is integrated in another programme, are interviewed in collaboration with the university and service users.

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

*Not Met*

There is no evidence of how SUC are involved in the co-production of this programme and how they will continue to be involved in programme delivery.

**Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 2: Standards for student supervision and assessment**

*Met*

**If not met, state reason**

There is no evidence of SUC are involved in the co-production of this programme and how they will continue to be involved in programme delivery.

Condition one: Develop an implementation plan for the integration of experts by experience (service users and carers) within module delivery. (SFNME R1.12; SPP R2.1)

**Post Event Review**

**Identify how the condition is met:**
Condition one: An action plan is developed to demonstrate how SUCs will be integrated in module delivery.

Evidence: Action plan, undated.

Condition one is met.

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

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

*Met*

Condition one is met.

### Student journey through the programme

#### Standard 1 Selection, admission and progression

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

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

R1.2 provide opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non-NHS employed registrants) to apply for entry onto an NMC approved prescribing programme

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

R1.4 consider recognition of prior learning that is capable of being mapped to the
RPS Competency Framework for all Prescribers

R1.5 confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme.

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

R1.6.1 Clinical/health assessment
R1.6.2 Diagnostics/care management
R1.6.3 Planning and evaluation of care

R1.7 ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme.

Note: Education institutions and their practice learning partners may propose to transfer current students onto the new programme to meet the Standards for prescribing programmes and Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers). If so, evidence must be provided to support this proposed transfer as part of the education institution’s mapping process at Gateway 3.

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

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

Yes

Evidence of selection process that demonstrates opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non-NHS employed registrants) to apply for entry onto an NMC approved prescribing programme. Evidence of this statement in documentation such as: programme specification; module descriptor, marketing material. Evidence of this statement on university web pages (R1.2)
Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

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

Met

R1.3 is met. The application form demonstrates governance is considered as part of the admission process. Disclosure and barring service (DBS) checks are in place within the application process which students and PLPs confirm. Line managers confirm applicants meet all NMC requirements and applicants are capable of safe and effective practice at a level appropriate to the applicant’s area of future prescribing practice. The programme team have a shared spreadsheet with NU administrative staff. This ensures all entry criteria are met. Self-employed and candidates working in private practice are identified in the application form and must meet the same criteria. Self-employed students are required to have an alternative to a manager who confirms all requirements are met which is then is verified by the programme team. The faculty has adopted the regional approach to undertaking educational audits in the north east of England. Educational audits are already in place with associated PLPs and address pre-registration nursing and prescribing programmes. This audit process involves a collaborative approach with NU and PLPs, where one year a practice educator facilitator (PEF) or practice placement facilitator (PPF) will undertake the audit and the following year a self-assessment audit will be undertaken by the practice learning area. Any area identifying an action plan following a self-assessment must inform the PEF or PPF who will provide support. Processes allow for suspending or removing practice learning areas until completion of a satisfactory action plan. NU has experience of working with non-NHS employers. There’s a PEF employed by NU specifically to review non-NHS learning environments and provide support to practice supervisors and practice assessors. These areas will have the same audit process as NHS PLPs. Processes for managing causes for concern are in place for all students. Assurance is given that all governance is in place.

PLPs confirm they’ll fully support programme requirements including learning in practice and ensure students are provided with protected learning time. Students confirm they’re well supported by their employers and are released by them to attend taught elements of the programme. They’re provided with protected learning time in practice learning. PLPs will support identifying practice supervisors and practice assessors to support students in the admission process. All practice supervisors and practice assessors will be prescribers for a minimum of one year.
PLPs will determine and allocate practice supervisors and a practice assessor for each student. The application process identifies practice supervisors and the practice assessor to NU. Professional registration of all practice assessors is checked at the admission stage by the programme team.

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

Current students will remain on the previously approved programme and no students will be transferred onto this programme. There are no students on interrupted studies. NU do not have a September 2019 cohort for the V300 and V150 which ensures there’s no students to transfer.

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

Yes

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<thead>
<tr>
<th>Outcome</th>
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<tbody>
<tr>
<td>Is the standard met?</td>
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<tr>
<td>Met</td>
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<tr>
<td>Date: 6 November 2019</td>
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<thead>
<tr>
<th>Post Event Review</th>
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<tbody>
<tr>
<td>Identify how the condition is met:</td>
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<th>Date condition(s) met:</th>
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<td>N/A</td>
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<tr>
<th>Revised outcome after condition(s) met:</th>
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| Standard 2 Curriculum |
Approved education institutions, together with practice learning partners, must:

R2.1 ensure programmes comply with the NMC Standards framework for nursing and midwifery education

R2.2 ensure that all prescribing programmes are designed to fully deliver the competencies set out in the RPS A Competency Framework for all Prescribers, as necessary for safe and effective prescribing practice

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

R2.4 develop programme outcomes that inform learning in relation to the formulary relevant to the individual’s intended scope of prescribing practice:

R2.4.1 stating the general and professional content necessary to meet the programme outcomes

R2.4.2 stating the prescribing specific content necessary to meet the programme outcomes

R2.4.3 confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children’s nursing); midwifery; and specialist community public health nursing

R2.5 ensure that the curriculum provides a balance of theory and practice learning, using a range of learning and teaching strategies

R2.6 ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language

Evidence provides assurance that the following QA approval criteria are met

There is evidence that the programme complies with the NMC Standards framework for nursing and midwifery education (R2.1)

No

R2.1 is not met. There’s a faculty strategy relating to service users but the programme team report service users are not involved in programme development and are not currently used in programme delivery. (Condition one) (SFNME R1.12; SPP R2.1)
Students and PLPs understand and know the escalating concerns process but there’s no link to the escalating concerns policy in any student, practice supervisor and practice assessor documents. (Condition three) (SFNME R 2.10; SPP R2.1, R4.1)

There is evidence that the programme is designed to fully deliver the competencies set out in the RPS Competency Framework for all Prescribers, as necessary for safe and effective prescribing practice (R2.2).

Yes

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

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

Met

R2.3 is met. Programme documentation details the structure of the V300, V150 and V100 programmes. The V300 programme will be delivered at academic level six and seven in a 40 credit module over a period of six months with ten days attendance at the university. The V150 programme will be delivered at academic level six and seven in a 20 credit module over a period of three to four months. The V100 is integrated in the post graduate community nursing specialist programme and will be delivered at academic level seven in a 20 credit module. The V100 and V150 involves five days attendance at the university. For the V300 supervised practice learning will be 78 hours. For the V150 and V100 supervised practice learning will be 65 hours.

The V300 programme is open to nurses, midwives and allied health professionals and there’s opportunity for inter professional learning in the programme. A variety of teaching and learning approaches will be used to meet the needs of all students. Learning and teaching strategies includes interactive lecturers, seminars, practical workshop sessions, e-lecturer, tutor directed learning and self-directed learning. The programme team expect all students to attend taught sessions but recognise on occasions this is not possible and then directed study will be expected. The programme team can monitor student engagement in the virtual learning environment and offer support if there appears to be a lack of engagement. Students are positive about their learning experience in the programme and supporting material on the virtual learning platform. Students confirm there’s support from the programme team and they are always provided with timely feedback. Students will mainly be taught together on the programme with differing academic levels supported by additional tutorials.
The programme team report the 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. The RPS competencies are mapped and assessed in all the practice assessment documentation.

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

This programme is only delivered in England.

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

**No**

There’s a faculty strategy relating to service users but the programme team report service users are not involved in programme development and are not currently used in programme delivery. (Condition one) (SFNME R1.12; SPP R2.1)

Students and PLPs understand and know the escalating concerns process but there’s no link to the escalating concerns policy in any student, practice supervisor and practice assessor documents. (Condition three) (SFNME R2.10; SPP R2.1, R4.1)

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

**Yes**

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<th>Outcome</th>
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<tr>
<td><strong>Is the standard met?</strong></td>
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<tr>
<td><strong>Not Met</strong></td>
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There’s a faculty strategy relating to service users but the programme team report service users are not involved in programme development and are not currently used in programme delivery.

Condition one: Develop an implementation plan for the integration of Experts by Experience (service users and carers) within module delivery. (SFNME R1.12; SPP R2.1)

Students and PLPs understand and know the escalating concerns process but there’s no link to the escalating concerns policy in any student, practice supervisor and practice assessor documents.

Condition three: Provide a clear link for to the escalating concerns policy within the documentation. (SFNME R 2.10; SPP R2.1, R4.1)

**Date: 6 November 2019**
Post Event Review

Identify how the condition is met:

Condition one:
An action plan is developed to demonstrate how SUCs will be integrated within module delivery.

Evidence:
Action plan, undated

Condition one is met.

Condition three:
The programme handbooks and the practice supervisor and practice assessor handbooks are updated providing links to NU raising concerns process and flowchart.

Evidence:
Non-medical prescriber module handbook, undated
Community practitioner module handbook, undated
Practice supervisor and practice assessor handbook, undated

Condition three is met.

Date condition(s) met: 6 December 2019

Revised outcome after condition(s) met:

Met

Conditions one and three are 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

Evidence provides assurance that the following QA approval criteria are met

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

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

Met

R3.1 is met. Documentary evidence and discussions at the approval visit confirm suitable and effective arrangements and governance for practice learning are in place for all applicants. This is assured through partnership working between the programme teaching team, PLPs and the PEF who supports practice learning in non-NHS, private and independent areas. Prescribing leads and PLP managers report how they’ll 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 NU for their role. All are offered to attend a briefing session and are provided with a handbook. The programme team report they will provide any additional support by telephone or a visit to practice if required. PLPs report there are sufficient appropriately experienced and qualified prescribers to be practice supervisors and practice assessors. Students report they’re well supported and get protected time for learning in practice. Practice learning governance arrangements are in place in practice learning environments for all students.

There is evidence that the programme complies with the NMC Standards for student supervision and assessment (R3.2)
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. Programme documentation and findings at the approval visit confirm a range of simulation-based and technology enhanced strategies are used appropriately and proportionately to support learning and assessment and these are integrated throughout the programme. Strategies include online numeracy resources and a mobile phone application (app) to support developing anatomy and physiology knowledge for prescribing. Students say they value the app. Students submit their academic work electronically via Turnitin, an online grading, feedback and plagiarism detection platform. Students have access to simulation facilities at NU to develop clinical examination skills. However, as students are required to have this skill on admission the programme team report student access to simulation facilities are optional. V300 students are encouraged to use simulation-based activities as part of their learning to prepare for their objective structured clinical examination in practice. All programmes use case studies within learning materials. Current students are positive about resources available on the virtual learning environment and say they're easily accessible.

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
<table>
<thead>
<tr>
<th>Outcome</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the standard met?</td>
<td><strong>Met</strong></td>
</tr>
<tr>
<td>Date:</td>
<td><strong>6 November 2019</strong></td>
</tr>
</tbody>
</table>

**Post Event Review**

**Identify how the condition is met:**

**Date condition(s) met:**

N/A

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

N/A

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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 aprescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience

R4.4 ensure the programme leader works in conjunction with the lead midwife for
education (LME) and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes

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

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

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

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

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

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

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

R4.9.2 successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100%).

Evidence provides assurance that the following QA approval criteria are met

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

Not Met

R4.1 is not met. Mapping documentation demonstrates how the programme complies with SFNME. Students and PLPs understand and know the escalating concerns process but there’s no link to the escalating concerns policy in any
student, practice supervisor and practice assessor documents. (Condition three) (SFNME R2.10; SPP R2.1, R4.1)

PLPs tell us how they engage with the programme team to ensure the new standards are applied to the programme. Any breakdown in practice learning placements will be managed in partnership with PLPs taking the lead for students in their employment. The PEF will manage any breakdown in practice learning for self-employed students. If necessary, NU’s director of placements will visit any area to provide additional support.

Educational audits apply to practice learning areas for students on all programmes. The V100 is a module within the specialist practitioner qualification district nurse (SPQ DN) and specialist community public health nursing (SCPHN) programmes. PLPs and students report on their experience of communication between NU and identified assessors in practice for prescribing programmes as part of their SPQ DN or SCPHN programme. All students say they’re supported and guided through the programme by NU. Students tell us they give feedback at university taught days and give feedback on practice learning through a focus group about the new programmes.

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. Educational audits and effective systems are in place to support practice learning. The programme team and the PLPs report on the relationship between practice supervisors and practice assessors but while a good working relationship is clearly evident between the programme team and PLPs there is a lack of clarity as to how the academic assessors will work with these individuals. While documentation makes reference to academic moderators and academic tutors, the term academic assessor is not in any of the student facing document including the practice assessment documentation and handbooks (condition two) (SFNME R2.4; SSSA R6.7; SPP R 4.2). Programme documentation states the practice supervisor and practice assessor should be different people and can only be the same person in exceptional circumstances. If this occurs it must be made clear at the application stage and will be subject to scrutiny by the programme leader.

Practice supervisors and practice assessors are prepared for their roles through a handbook outlining their roles and responsibilities with students. Practice supervisors and practice assessors are invited to a briefing session before the programme commences. This briefing session is mandatory for all practice assessors undertaking this role for the first time. NU provide assurance there are
adequately qualified and prepared academic assessors to support programmes. The academic assessor role is factored into their workload. Academic assessors must hold a relevant professional qualification. NU prepare academic assessors at department level with either a workshop or through an online resource. The academic assessor role is monitored through university appraisal processes. PLPs understand the SSSA and the roles of practice supervisor, practice assessor and academic assessor. They give assurance of adequate practice supervisors and practice assessors to supervise and assess students in practice.

There are opportunities for students to evaluate practice learning throughout the programme on their attendance days at the university. Students report they’re supported and the programme team value their feedback.

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 demonstrates admission processes identify practice supervisors and a practice assessor with relevant qualifications. The programme team confirm they undertake checks on qualifications and experience. Students say they’re supported by a prescriber when they undertake the programme and are supported to achieve relevant competencies. Supervision and assessment will continue in compliance with the SSSA for the programme. In exceptional circumstances when a practice supervisor and practice assessor are the same person the programme team say the academic assessor will have regular contact with the practice assessor and visit in practice.
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

Students and PLPs understand and know the escalating concerns process but there’s no link to the escalating concerns policy in any student, practice supervisor and practice assessor documents. (Condition three) (SFNME R2.10; SPP R2.1,
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**

Programme documentation makes no reference to the academic assessor and how they’ll work with practice supervisors and practice assessors. (Condition two) (SFNME R2.4; SSSA R6.7; SPP R4.2)

**Outcome**

**Is the standard met?**

**Not Met**

Programme documentation makes no reference to the academic assessor and how they’ll work with practice supervisors and practice assessors.

Condition two: Provide further clarification of the roles and responsibilities of the practice supervisor, practice assessor, and academic assessor. (SFNME R2.4; SSSA R6.7; SPP R4.2)

Students and PLPs understand and know the escalating concerns process but there’s no link to the escalating concerns policy in any student, practice supervisor and practice assessor documents.

Condition three: Provide a clear link for to the escalating concerns policy within the documentation. (SFNME R2.10; SPP R2.1, R4.1)

**Date: 6 November 2019**

**Post Event Review**

**Identify how the condition is met:**

Condition two: Programme handbooks and the practice supervisor and practice assessor handbooks are updated to provide clarity on the roles of practice supervisor, practice assessor and academic assessor. Handbooks refer to the academic assessor being responsible for collating and confirming student achievement in proficiencies and programme outcomes for each part of the programme. Links are
provided to the NMC website for further information.

Evidence:
Non-medical prescriber module handbook, undated
Community practitioner module handbook, undated
Practice supervisor and practice assessor handbook, undated
NU practice learning handbook, undated

Condition three:
The programme handbooks and the practice supervisor and practice assessor handbooks are updated providing links to NU raising concerns process and flowchart.

Evidence:
Non-medical prescriber module handbook, undated
Community practitioner module handbook, undated
Practice supervisor and practice assessor handbook, undated

Condition three is met.

Date condition(s) met: 6 December 2019

Revised outcome after condition(s) met:

Met

Conditions two and three are met.

Standard 5 Qualification to be awarded

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

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

R5.1.1 a community practitioner nurse or midwife prescriber (V100/V150), or
R5.1.2 a nurse or midwife independent-supplementary prescriber (V300)
R5.2 ensure that participation in and successful completion of an NMC approved prescribing programme leads to accreditation at a level equivalent to a bachelor’s degree as a minimum award

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

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

---

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

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

- a community practitioner nurse (or midwife) prescriber (V100/V150), or
- a nurse or midwife independent/supplementary prescriber (V300) (R5.1)

Yes

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

Yes

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

Yes

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

Yes

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

Yes

<table>
<thead>
<tr>
<th>Outcome</th>
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<tbody>
<tr>
<td>Is the standard met?</td>
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<tr>
<td>Met</td>
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<tr>
<td>Date: 6 November 2019</td>
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</table>

<table>
<thead>
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<th>Post Event Review</th>
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<tbody>
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<td>Identify how the condition is met:</td>
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<tr>
<td>Date condition(s) met:</td>
</tr>
<tr>
<td>N/A</td>
</tr>
<tr>
<td>Revised outcome after condition(s) met:</td>
</tr>
<tr>
<td>N/A</td>
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</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>
</tbody>
</table>

List additional documentation:

- Statement of compliance with South Tyneside and Sunderland NHS Foundation Trust, 7 October 2019
- Statement of compliance with Newcastle hospital, 19 September 2019
- Statement of compliance with North Tyneside clinical commissioning group, 5 September 2019
- Statement of compliance with Gateside Health NHS Foundation Trust, 19 September 2019
- Statement of compliance with Northumberland, Tyne and Wear NHS Foundation Trust, 8 October 2019

Post visit evidence:
- Action plan, undated
- Non-medical prescriber module handbook, undated
Community practitioner module handbook, undated  
Practice supervisor and practice assessor handbook, undated  
NU practice learning handbook, undated

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

Additional comments:

<table>
<thead>
<tr>
<th>During the visit the visitor(s) met the following groups</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior managers of the AEI/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:

- Service users and carers | Yes |

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

One x V300 student (January 2019 cohort)  
Two x V100 students (September 2018 cohort)  

Additional comments:

<table>
<thead>
<tr>
<th>The visitor(s) viewed the following areas/facilities during the visit:</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>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

NU is an established AEI, viewing facilities not required.

Additional comments:
Mott MacDonald Group Disclaimer

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