Programme Major Modification report

Section one

Programme provider name:	University of Greenwich
In partnership with: *(Associated practice learning partners involved in the delivery of the programme)*	Sussex Community NHS Foundation Trust Oxleas NHS Foundation Trust Kent Community Health NHS Foundation Trust Whittington Health NHS Trust Homerton University Hospital NHS Trust Lewisham and Greenwich NHS Trust East London NHS Foundation Trust Central London Community Healthcare Trust Guy's and St Thomas' NHS Foundation Trust Croydon Healthcare Services NHS Trust Medway Community Healthcare CIC North East London NHS Foundation Trust Private, voluntary and independent health care providers
Programmes reviewed:	Independent and supplementary nurse prescribing V300 ☐ Community practitioner nurse prescribing V150 ☒ Community practitioner nurse prescribing V100 ☒

Title of current programme(s):	V150 Prescribing from the Nurse Prescribers' Formulary for Community Practitioners V100 Prescribing from the Nurse Prescribers' Formulary for Community Practitioners
Title of modified programme(s) if changed:	N/A

Academic level of current programme:	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland ☐ Level 5 ☐ Level 6 ☐ Level 7 SCQF ☐ Level 8 ☐ Level 9 ☐ Level 10 ☐ Level 11
Community practitioner nurse prescribing V150	England, Wales, Northern Ireland ☐ Level 5 ☒ Level 6 ☐ Level 7 SCQF ☐ Level 8 ☐ Level 9 ☐ Level 10 ☐ Level 11
Community practitioner nurse prescribing V100	England, Wales, Northern Ireland ☐ Level 5 ☒ Level 6 ☒ Level 7 SCQF ☐ Level 8 ☐ Level 9 ☐ Level 10 ☐ Level 11

Academic level of modified programme if changed:	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland ☐ Level 5 ☐ Level 6 ☐ Level 7 SCQF ☐ Level 8 ☐ Level 9 ☐ Level 10 ☐ Level 11 ☒ N/A
Community practitioner nurse prescribing V150	England, Wales, Northern Ireland ☐ Level 5 ☐ Level 6 ☐ Level 7

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	SCQF ☐ Level 8 ☐ Level 9 ☐ Level 10 ☐ Level 11 ☒ N/A
Community practitioner nurse prescribing V100	England, Wales, Northern Ireland ☐ Level 5 ☒ Level 6 ☐ Level 7 SCQF ☐ Level 8 ☐ Level 9 ☐ Level 10 ☐ Level 11 ☐ N/A
Programme start date: Independent and supplementary nurse prescribing V300 Community practitioner nurse prescribing V150 Community practitioner nurse prescribing V100	 N/A 4 May 2021 4 May 2021
Date of approval:	15 January 2021
Type of Modification:	Desktop
QA visitor:	Registrant Visitor: Heather Bain

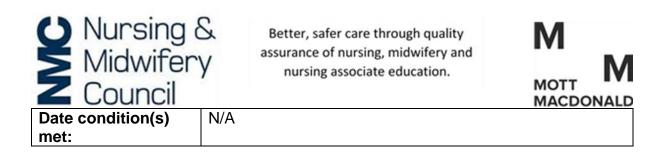| Summary of review and findings |
|---|
| The University of Greenwich (UoG) present a major modification to the community practitioner nurse prescribing (V100 and V150) programmes. The independent and supplementary prescribing (V300) programme is in approval since 1 August 2019.

The major modification by documentary review is to ensure the V100 and V150 prescribing awards meet the Standards for prescribing programmes (SPP) (Nursing and Midwifery Council (NMC), 2018) and the Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS), 2016) competency framework for all prescribers) (NMC, 2018). The programme is mapped against the SPP and RPS competency framework.

The V150 is a 15-credit academic level six programme. It's undertaken as a part-time stand-alone award as part of continuing professional development for appropriately qualified nurses and midwives. The V100 is a 10-credit academic level six discrete programme that's integrated across the full-time specialist practitioner district nursing (SPQ DN) programme. It's a part-time optional additional 10-credit module in the specialist community public health nurses (SCPHN) programme. V100 was previously approved at academic level seven; the programme team confirm the proposed V100 will be delivered at academic level six only.

Arrangements at programme level meet the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018).

Arrangements at programme level meet the Standards for student supervision and assessment (SSSA) (NMC, 2018).

The major modification to the programme is recommended for approval to the NMC. |

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	Programme is recommended to the NMC for approval ☒ Programme is recommended for approval subject to specific conditions being met ☐ Recommended to refuse approval of the programme ☐

Conditions:	**Effective partnership working: collaboration, culture, communication and resources:**
	None identified.
	Selection, admission and progression:
	None identified.
	Practice learning:
	None identified.
	Assessment, fitness for practice and award:
	None identified.
	Education governance: management and quality assurance:
	None identified.
Date condition(s) to be met:	N/A
Recommendations to enhance the programme delivery:	None identified.
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 N/A	
AEI Observations	Observations have been made by the education institution **YES** ☒ **NO** ☐
Summary of observations made, if applicable	The UoG confirm the accuracy of the report.
Final recommendation made to NMC:	Programme is recommended to the NMC for approval ☐ Recommended to refuse approval of the programme ☐

Date condition(s) met:	N/A

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 Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates* (NMC, 2015 updated 2018) *Quality assurance framework for nursing, midwifery and nursing associate education* (NMC, 2020) *QA Handbook* (NMC, 2020)

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

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

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

Standard 1: The learning culture:
R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders
R1.13 work with service providers to demonstrate and promote inter-professional learning and working

Standard 2: Educational governance and quality:
R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders
R2.4 comply with NMC *Standards for student supervision and assessment*
R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes

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

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

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

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

R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning

R3.18 have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice.

Standard 4: Educators and assessors:
R4.7 liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment

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

R4.10 share effective practice and learn from others

Standard 5: Curricula and assessment:
R5.4 curricula are developed and evaluated by suitably experienced and qualified educators and practitioners who are accountable for ensuring that the curriculum incorporates relevant programme outcomes

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

R5.14 a range of people including service users contribute to student assessment

Standards for student supervision and assessment (NMC, 2018)

Standard 1: Organisation of practice learning:
R1.4 there are suitable systems, processes, resources and individuals in place to ensure safe and effective coordination of learning within practice learning environments

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

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

Standard 2: Expectations of practice supervisors:

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

Standard 3: Practice supervisors: role and responsibilities:
R3.3 support and supervise students, providing feedback on their progress towards, and achievement of, proficiencies and skills

Standard 4: Practice supervisors: contribution to assessment and progression:
R4.3 have sufficient opportunities to engage with practice assessors and academic assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising

Standard 7: Practice assessors: responsibilities:
R7.9 communication and collaboration between practice and academic assessors is scheduled for relevant points in programme structure and student progression

Standard 9: Academic assessors: responsibilities:
R9.6 communication and collaboration between academic and practice assessors is scheduled for relevant points in programme structure and student progression

Findings against the standard and requirements

Provide an <u>evaluative summary</u> about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders.

Documentary evidence and discussion with the programme team confirm there's effective partnership working between UoG and key stakeholders. The programme team present evidence of consultation with students, practice learning partners (PLPs) and service users and carers (SUCs).

There's evidence of a faculty SUC involvement strategy, and the involvement of SUCs in development of the programmes is evidenced in programme committee minutes. The programme team describe how SUCs contribute to the development of videos and case studies within teaching materials. SUC involvement is evident in the practice learning environment; they provide feedback in the V100 and V150 practice competency documents.

There's a faculty practice-based learning strategy for NMC approved programmes that demonstrates a partnership approach between UoG and PLPs to manage and mitigate any risks in practice. Programme handbooks outline the process for raising concerns.

The programme team are suitably qualified to deliver the programmes. They have a range of clinical specialities and are registered with the NMC with SPQ DN,

SCPHN and V100 prescribing qualifications. Pharmacists support the delivery of the programmes.

Documentary evidence confirms that student feedback is formally undertaken through module evaluations; this contributes to continuous review and development of the programmes. V100 student feedback is provided and considered at SPQ DN and SCPHN programme committee meetings three times a year; PLPs and students attend the meetings.

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 1: *Standards framework for nursing and midwifery education* **MET** ☒ **NOT 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** ☒ **NOT MET** ☐	

Post event review
Identify how the condition(s) is met N/A
Date condition(s) met: N/A
Revised outcome after condition(s) met   **MET** ☐   **NOT MET** ☐ N/A

Student journey through the programme
Standard 1: Selection, admission and progression
Approved education institutions, together with practice learning partners, must: R1.1 ensure that the applicant is a registered nurse (level 1), a registered midwife or a SCPHN before being considered as eligible to apply for entry onto an NMC approved prescribing programme R1.2 provide opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non- NHS employed registrants) to apply for entry onto an NMC approved prescribing programme

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

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

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

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

R1.6.1 Clinical/health assessment

R1.6.2 Diagnostics/care management

R1.6.3 Planning and evaluation of care

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

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

Proposed transfer of current students to the programme under review
Demonstrate a robust process to transfer current students onto the proposed programme to ensure programme learning outcomes and proficiencies meet the Standards for pre-registration midwifery programmes (NMC, 2019).

Proposed transfer of current students to the *Standards for student supervision and assessment* (NMC, 2018).
Demonstrate a robust process to transfer current students onto the *Standards for student supervision and assessment* (NMC, 2018).

Findings against the standard and requirements

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 ☒   **NO** ☐

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- 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 ☒   NO ☐

Provide an <u>evaluative summary</u> 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)
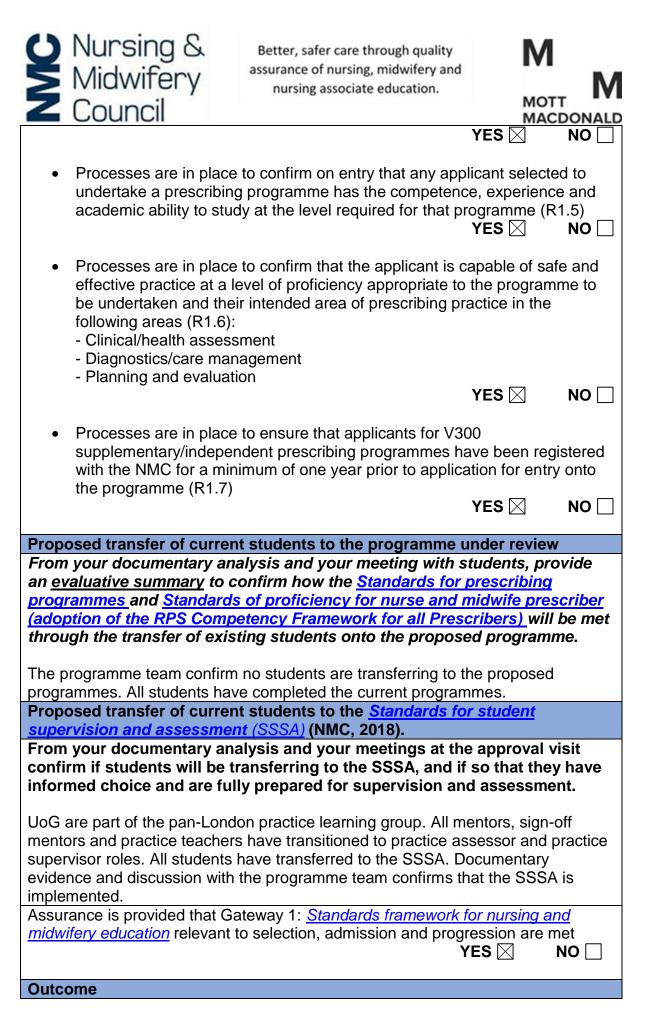
MET ☒   NOT MET ☐

R1.3 is met. Documentary evidence demonstrates that necessary governance structures are in place to enable students to undertake the programmes. The prescribing agreement form details the requirement for support and protected learning time. PLPs sign the agreement form as part of the admission process. The agreement form requires managers to confirm that a current disclosure and barring service check is in place. Self-employed and non-NHS applicants can apply to undertake the V150 programme. They must evidence they meet the approved application process for self-employed and non-NHS applicants that ensures governance arrangements are in place in the practice learning environment. This process is checked by the programme leader. The programme team confirm they work in partnership with PLPs in terms of recruitment. V100 students are interviewed as part of the SPQ DN or SCPHN programmes. V150 applications are scrutinised by the programme team.

All practice learning environments are required to have a satisfactory educational audit in place. The prescribing agreement forms are checked on admission to ensure that a current educational audit is in place. Documentary evidence confirms processes are in place to suspend practice learning environments if required.

All students must complete a self-declaration of good health and character at the start and the end of the V100 and V150 programmes. This is sent as an electronic survey which is tracked by the programme team to ensure completion.

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

- 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)

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

YES ☒   **NO** ☐

- Processes are in place to confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas (R1.6):
  - Clinical/health assessment
  - Diagnostics/care management
  - Planning and evaluation

YES ☒   **NO** ☐

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

YES ☒   **NO** ☐

Proposed transfer of current students to the programme under review
From your documentary analysis and your meeting with students, provide an <u>evaluative summary</u> to confirm how the <u>Standards for prescribing programmes</u> and <u>Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers)</u> will be met through the transfer of existing students onto the proposed programme.   The programme team confirm no students are transferring to the proposed programmes. All students have completed the current programmes.

Proposed transfer of current students to the _Standards for student supervision and assessment (SSSA)_ (NMC, 2018).
From your documentary analysis and your meetings at the approval visit confirm if students will be transferring to the SSSA, and if so that they have informed choice and are fully prepared for supervision and assessment.   UoG are part of the pan-London practice learning group. All mentors, sign-off mentors and practice teachers have transitioned to practice assessor and practice supervisor roles. All students have transferred to the SSSA. Documentary evidence and discussion with the programme team confirms that the SSSA is implemented.
Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to selection, admission and progression are met   **YES** ☒   **NO** ☐
Outcome

Is the standard met?	MET ☒	NOT MET ☐

Date: 15 January 2021

Post event review
Identify how the condition(s) is met: N/A
Date condition(s) met: N/A
Revised outcome after condition(s) met: MET ☐   NOT MET ☐   N/A

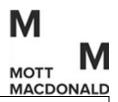| Standard 2: Curriculum |
|---|
| **Approved educations institutions, together with practice learning partners, must:**

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

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

YES ☒   **NO** ☐

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

YES ☒   **NO** ☐

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

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

MET ☒   **NOT MET** ☐

R2.3 is met. Documentary evidence confirms a range of learning and teaching strategies to support the achievement of the RPS competencies. V150 is delivered over 10 face to face study days. V100 students undertake six face to face study days. V100 and V150 students share learning in the pharmacological theory sessions. There's a practice learning requirement of 75 hours supported by practice assessors and practice supervisors.

Programme documentation is explicit and is aligned to the RPS competency framework for all prescribers (RPS, 2016). Learning and teaching strategies include a blended-learning approach with directed and self-directed study supported by e-learning on the Moodle virtual learning environment (VLE). E-learning includes access to the standardised numeracy assessment tool process (SN@P) that's used to support the development of numeracy skills. Learning and teaching strategies include lectures, group discussions, flipped classroom approaches, simulation scenarios and problem-solving group work. Students are assessed against the RPS competencies in a practice competency document. Achievement of the RPS competencies is verified by practice assessors in agreement with academic assessors.

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

- 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 ☒   **NO** ☐

- 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 ☒   **NO** ☐

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)

YES ☐   **NO** ☐   **N/A** ☒

The programmes are delivered in England.

Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to curricula and assessment are met **YES** ☒ **NO** ☐	
Assurance is provided that Gateway 2: *Standards for student supervision and assessment* relevant to curricula are met **YES** ☒ **NO** ☐	

Outcome		
Is the standard met?	**MET** ☒	**NOT MET** ☐
Date: 15 January 2021		
Post event review		
Identify how the condition(s) is met: N/A		
Date condition(s) met: N/A		
Revised outcome after condition(s) met:	**MET** ☐	**NOT 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*

Findings against the standard and requirements

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

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

MET ☒   **NOT MET** ☐

R3.1 is met. Unchanged since original approval on 1 August 2019.

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

- There is evidence that the programme complies with the NMC standards for student supervision and assessment (R3.2)

YES ☒   **NO** ☐

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

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

MET ☒   **NOT MET** ☐

R3.3 is met. Documentary evidence confirms there's effective and proportionate use of simulation-based learning and technology. The VLE Moodle is used as a platform for learning and teaching activities and resources. This includes quizzes,

links to key interactive sites including Mentimeter and access to Microsoft Teams to support online additional discussion with academic assessors and link lecturers. Simulation activities include prescribing assessment skills development and prescription writing in both directed activities and the practice learning environment.

Evidence provides assurance that the following QA approval criteria are met:
• Processes are in place to ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC *Standards for student supervision and assessment* (R3.4) **YES** ☒   **NO** ☐
Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to practice learning are met **YES** ☒   **NO** ☐   Assurance is provided that Gateway 2: *Standards for student supervision and assessment* relevant to practice learning are met **YES** ☒   **NO** ☐

Outcome
Is the standard met?   **MET** ☒   **NOT MET** ☐   **Date:** 15 January 2021
Post event review
Identify how the condition(s) is met: N/A
Date condition(s) met: N/A
Revised outcome after condition(s) met: **MET** ☐   **NOT MET** ☐   N/A

Standard 4: Supervision and assessment
Approved education institutions, together with practice learning partners, must: R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC *Standards framework for nursing and midwifery education*   R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC *Standards for student supervision and assessment*

R4.3 appoint a programme leader in accordance with the requirements of the NMC *Standards framework for nursing and midwifery education.* The programme leader of a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience

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

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

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

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

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

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

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

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

Findings against the standards and requirements

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

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

  MET ☒   **NOT MET** ☐

R4.1 is met. Programme mapping documentation demonstrates how the programme complies with the SFNME. The programme team are appropriately qualified to deliver the programmes.

Academic assessors make contact with practice assessors and practice supervisors at least twice during the programmes. This information is clearly detailed in both the practice assessor and practice supervisor handbooks and the practice competency documents. There's evidence of communication between academic assessors, practice assessors and practice supervisors. There's a formative tripartite discussion normally at week three of the programme and at the end of the programme. If required, academic assessors visit practice learning environments to provide additional support at a further tripartite meeting.

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

MET ☒   **NOT MET** ☐

R4.2 is met. Educational audits ensure that effective systems are in place to support learning in practice. Practice assessors and practice supervisors are identified as a requirement of the application process. The programme team check that identified practice assessors and practice supervisors have a prescribing qualification. SCPHN V100 students may have a different practice assessor and practice supervisor if their SCPHN programme practice assessor and practice supervisor are not active prescribers. If this occurs, there's a clearly documented process in place for the two practice assessors to communicate.

Practice assessors and practice supervisors are prepared for their roles through joint update sessions between UoG and PLPs. All practice assessors and practice supervisors are issued with a guidance handbook and are invited to attend prescribing specific preparation prior to the commencement of the programmes. The practice competency document includes evidence of how practice assessors, practice supervisors and academic assessors work together to support students to meet the RPS competencies.

Academic assessors are current programme staff who have been prepared for the role by UoG. The V150 academic assessor is the programme leader. V100 academic assessors are link lecturers within the SPQ DN and SCPHN programme teams. This approach ensures continuity and support for students in the practice learning environment. The V100 and V150 programme teams are supported by academic staff with prescribing qualifications, including the V300 programme team.

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

- Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience (R4.3)

YES ☒   **NO** ☐

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

- Evidence of the programme leader working in conjunction with the LME and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes (R4.4)

  YES ☒   **NO** ☐

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

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

  MET ☒   **NOT MET** ☐

R4.5 is met. All students are assigned a practice assessor who is a registered healthcare professional with suitable prescribing experience, as evidenced in the prescribing agreement form at the point of application to the programmes.

It's explicit in the programme documentation, in the admissions process and the practice competency document that practice assessors and practice supervisors should not be the same person. The process for managing any exceptional circumstances is clearly detailed.

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

- Processes are in place to ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking (R4.6)

  YES ☒   **NO** ☐

- Processes are in place to provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes (R4.7)

  YES ☒   **NO** ☐

- Processes are in place to assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice (R4.8)

  YES ☒   **NO** ☐

- Processes are in place to ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies (R4.9). This includes:
  - successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and

- successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100%).   **YES** ☒   **NO** ☐
Assurance is provided that Gateway 1: *Standards framework for nursing and midwifery education* relevant to supervision and assessment are met   **YES** ☒   **NO** ☐   Assurance is provided that Gateway 2: *Standards for student supervision and assessment* relevant to supervision and assessment are met   **YES** ☒   **NO** ☐

Outcome
Is the standard met?   **MET** ☒   **NOT MET** ☐   **Date:** 15 January 2021

Post event review
Identify how the condition(s) is met: N/A
Date condition(s) met: N/A
Revised outcome after condition(s) met: **MET** ☐   **NOT MET** ☐   N/A

Standard 5: Qualification to be awarded
Approved education institutions, together with practice learning partners, must: R5.1 following successful completion of an NMC approved programme of preparation, confirm that the registered nurse (level 1), midwife or SCPHN is eligible to be recorded as a prescriber, in either or both categories of: R5.1.1 a community practitioner nurse or midwife prescriber (V100/V150), or   R5.1.2 a nurse or midwife independent/supplementary prescriber (V300)   R5.2 ensure that participation in and successful completion of an NMC approved prescribing programme leads to accreditation at a level equivalent to a bachelor's degree as a minimum award   R5.3 inform the student that the award must be registered with us within five years of successfully completing the programme and if they fail to do so they will have to

retake and successfully complete the programme in order to qualify and register their award as a prescriber

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

Findings against the standards and requirements

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

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

  YES ☒   **NO** ☐

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

  YES ☒   **NO** ☐

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

  YES ☒   **NO** ☐

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

  YES ☒   **NO** ☐

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

YES ☒   **NO** ☐

Outcome		
Is the standard met?	**MET** ☒	**NOT MET** ☐
Date: 15 January 2021		
Post event review		

Identify how the condition(s) is met:
N/A

Date condition(s) met:
N/A

Revised outcome after condition(s) met:	MET ☐	NOT MET ☐
N/A		

Sources of evidence

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

Key documentation	YES	NO
Programme document, including proposal, rationale and consultation	☒	☐
Programme specification(s)	☒	☐
Module descriptors	☒	☐
Student facing documentation including: programme handbook	☒	☐
Student university handbook	☒	☐
Practice assessment documentation	☒	☐
Practice placement handbook	☒	☐
PAD linked to competence outcomes, and mapped against RPS *A Competency Framework for all Prescribers*	☒	☐
Mapping document providing evidence of how the education institution has met the *Standards framework for nursing and midwifery education* (NMC, 2018) (Gateway 1)	☒	☐
Mapping document providing evidence of how the *Standards for student supervision and assessment* (NMC, 2018) apply to the programme(s) (Gateway 2)	☒	☐
Mapping document providing evidence of how the programme meets the *Standards for prescribing programmes* and RPS *Standards of proficiency for prescribers* (NMC, 2018) (Gateway 3)	☒	☐
Curricula vitae for relevant staff	☒	☐
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website	☒	☐
Written placement agreements between the education institution and associated practice learning partners to support the programme intentions.	☒	☐
If you stated no above, please provide the reason and mitigation		
List additional documentation: Virtual meeting with the programme team, 15 January 2021		
Additional comments: None identified.		

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

	YES	NO
Senior managers of the AEI/education institution with responsibility for resources for the programme	☐	☒
Senior managers from associated practice learning partners with responsibility for resources for the programme	☐	☒
Programme team/academic assessors	☒	☐
Practice leads/practice supervisors/ practice assessors	☐	☒
Students	☐	☒
If yes, please identify cohort year/programme of study:		
Service users and carers	☐	☒
If you stated no above, please provide the reason and mitigation Not applicable - major modification desktop review.		
Additional comments None identified.		

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

	YES	NO
Specialist teaching accommodation (e.g. clinical skills/simulation suites)	☐	☒
Library facilities	☐	☒
Technology enhanced learning Virtual learning environment	☐	☒
Educational audit tools/documentation	☐	☒
Practice learning environments	☐	☒
If yes, state where visited/findings		
If you stated no above, please provide the reason and mitigation Not applicable – major modification desktop review.		
Additional comments: None identified.		

Mott MacDonald Group Disclaimer

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

Issue record			
Final Report			
Author(s):	Heather Bain	Date:	23 January 2021
Checked by:	Bernadette Martin	Date:	27 January 2021
Submitted by:	Amy Young	Date:	22 February 2021
Approved by:	Leeann Greer	Date:	22 February 2021