

Programme approval visit report

Section one

Programme provider name:	Wrexham Glyndwr University
In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i>	Betsi Cadwaladr University Health Board The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust Powys Teaching Health Board Private, voluntary and independent health care providers Education and social care providers
Programmes reviewed:	Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V150 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V100 <input checked="" type="checkbox"/>
Title of programme(s):	Independent and supplementary prescribing for nurses (V300) Community nurse prescribing (V150) Community nurse prescribing (V100)
Academic level:	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input checked="" type="checkbox"/> Level 6 <input checked="" type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11

<p>Community practitioner nurse prescribing V150</p>	<p>England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7</p> <p>SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11</p>
<p>Community practitioner nurse prescribing V100</p>	<p>England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7</p> <p>SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11</p>
<p>Date of approval visit:</p>	<p>20 January 2021</p>
<p>Programme start date:</p> <p>Independent and supplementary nurse prescribing V300 Community practitioner nurse prescribing V150 Community practitioner nurse prescribing V100</p>	<p><input type="text" value="13 September 2021"/></p> <p><input type="text" value="13 September 2021"/></p> <p><input type="text" value="13 September 2021"/></p>
<p>QA visitor:</p>	<p>Registrant Visitor: Rose Havelock</p>

Section two

Summary of review and findings

Wrexham Glyndwr University (the university) is an approved education institution (AEI). A non-medical prescribing programme has been delivered by the university since 2004. The university presents three routes for approval within a non-medical prescribing programme. The proposed programme is mapped to the Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society's (RPS) competency framework for all prescribers (RPS, 2016) and the Standards for prescribing programmes (SPP) (NMC, 2018).

The programme is proposed to start on 13 September 2021. The independent and supplementary prescribing for nurses (V300) route is delivered at level six and seven, part-time over 26 weeks. The community nurse prescribing (V150) route is delivered at level six, part-time over 26 weeks. The community nurse prescribing (V100) route is delivered at level six, full-time or part-time within the specialist community public health nurse programme and part time within the community specialist practice programme.

Documentary analysis and discussion at the approval visit provides assurance that partnerships between the university, practice learning partners (PLPs), students and service users are well established, ongoing and effective. Documentary analysis and discussion at the visit provides assurance that the programme is co-produced and all stakeholders confirm that their feedback is sought, listened and responded to. There are clear processes to ensure effective programme governance and quality. The programme team collaborate at a national and regional level with PLPs. Students tell us that the programme team provide a supportive environment for learning. Service users tell us that they're involved in the design, delivery, evaluation and review of the programme and feel that their contribution is valued and respected.

A regional approach has been taken to prepare practice assessors and practice supervisors for implementation of the Standards for student supervision and assessment (SSSA) (NMC, 2018). This has been complemented by the use of technology-based training implemented locally.

The university doesn't offer pre-registration midwifery education but visiting arrangements are in place for a lead midwife for education (LME) from another AEI to support any midwife prescribing students.

Appropriate arrangements are in place for welsh speakers and there's a translation service available. The programme lead is a fluent welsh speaker and provides tutorials in welsh on request.

The approval visit is undertaken remotely due to the COVID-19 pandemic.

The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) is met at programme level. The SSSA is met at programme level.

The programme is recommended for approval. There are no conditions or recommendations.

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	<p>Programme is recommended to the NMC for approval <input checked="" type="checkbox"/></p> <p>Programme is recommended for approval subject to specific conditions being met <input type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
Conditions:	<p>Effective partnership working: collaboration, culture, communication and resources: None identified.</p> <p>Selection, admission and progression: None identified.</p> <p>Practice learning: None identified.</p> <p>Assessment, fitness for practice and award: None identified.</p> <p>Education governance: management and quality assurance: None identified.</p>
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	
AEI Observations	Observations have been made by the education institution YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Summary of observations made, if applicable	
Final recommendation made to NMC:	Programme is recommended to the NMC for approval <input type="checkbox"/> Recommended to refuse approval of the programme <input type="checkbox"/>
Date condition(s) met:	

Section three

NMC Programme standards
<p>Please refer to NMC standards reference points</p> <p>Standards for prescribing programmes (NMC, 2018)</p> <p>Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers) (NMC, 2018)</p> <p>Standards framework for nursing and midwifery education (NMC, 2018)</p> <p>Standards for student supervision and assessment (NMC, 2018)</p> <p>The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates (NMC, 2015 updated 2018)</p> <p>Quality assurance framework for nursing, midwifery and nursing associate education (NMC, 2020)</p> <p>QA Handbook (NMC, 2020)</p>

Partnerships
The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.
<p>Please refer to the following NMC standards reference points for this section:</p> <p>Standards framework for nursing and midwifery education (NMC, 2018)</p> <p>Standard 1: The learning culture:</p> <p>R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders</p>

R1.13 work with service providers to demonstrate and promote inter-professional learning and working

Standard 2: Educational governance and quality:

R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders

R2.4 comply with NMC [Standards for student supervision and assessment](#)

R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes

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

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

Standard 3: Student empowerment:

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

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

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

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

Standard 4: Educators and assessors:

R4.7 liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment

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

R4.10 share effective practice and learn from others

Standard 5: Curricula and assessment:

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

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

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

[Standards for student supervision and assessment](#) (NMC, 2018)

Standard 1: Organisation of practice learning:

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

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

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

Standard 2: Expectations of practice supervisors:

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

Standard 3: Practice supervisors: role and responsibilities:

R3.3 support and supervise students, providing feedback on their progress towards, and achievement of, proficiencies and skills

Standard 4: Practice supervisors: contribution to assessment and progression:

R4.3 have sufficient opportunities to engage with practice assessors and academic assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising

Standard 7: Practice assessors: responsibilities:

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

Standard 9: Academic assessors: responsibilities:

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

Findings against the standard and requirements

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

Documentary evidence and discussion at the approval visit provides assurance of effective partnership working with PLPs, service users and students.

Written evidence and discussion with practice managers confirms that the university holds collaborative strategic meetings with PLPs to develop and review programme content. PLPs tell us there's effective dialogue with the programme team regarding the development of the curriculum and regular post registration contract meetings which enables review and evaluation of provision. PLPs take

part in the recruitment and selection process. There's evidence of national and regional partnership working, for example, in the development of the arrangements for the preparation of practice assessors and practice supervisors.

Partnerships with students are effective and students tell us that their feedback is sought, listened and responded to. Students take part in curriculum development. Students tell us that their comments informed changes to the practice assessment document (PAD). Documentary analysis and discussion at the visit provides us with assurance that students have opportunities to work with and learn from a wide range of people including other professional disciplines. Pharmacists, nurses and allied health professionals are taught together on the V300 programme which provides a basis for inter-disciplinary discussion and learning. All students learn in practice settings where there's opportunity for inter-disciplinary learning. Practice documentation and discussion at the visit assures us that students have the opportunity to receive constructive feedback from service users, practice assessors, practice supervisors and academic assessors.

A strong feature of the programme is the ongoing and effective partnership working with the service user and carer group "Outside-In". Service users and carers tell us that they work together with the programme team and devised a question for the interview process. Going forward there's a plan for service users to be involved in interviews. Service users contribute to the delivery of the programme and use virtual technology to do so. Service users tell us that it's reassuring that students are taught to consider service user and carer needs. Service users highlight that they'd won an award for contribution to inspiring the health workforce.

Documentary analysis and discussion at the visit with the programme team, PLPs and students assures us that there's suitable systems and processes in place which ensure safe and effective learning. Processes are clearly set out in the PAD to help students and clinical staff to raise concerns. The programme documentation describes and students confirm that there's a supportive culture which facilitates their learning. The programme validation document describes a blended approach to delivery which uses experiential processes in practice, including discussion, observation and reflection. Discussions with PLPs confirm these learning strategies. Asynchronous and synchronous learning is in place to support student learning. Students confirm a partnership approach with the programme team in terms of their contribution to programme development and evaluation. Practice assessors and practice supervisors confirm close partnership working, for example, in relation to regular meetings with the academic assessor to review student progress and regular practice update meetings. The university has an active learning framework to support student learning. Students tell us that there's suitable arrangements in place such as provision of amanuensis, to meet specific learning needs.

A clear and fair process for recruitment and selection is evident and PLPs are involved in the interview process. There's evidence of partnership working, as

applicants are required to identify their practice assessor and practice supervisor who complete the application form with the applicant. Applications are signed by line managers who confirm agreement to provide protected learning time and supernumerary status for applicants. Arrangements for applicants who propose that the same person act as practice assessor and practice supervisor are reviewed on a case-by-case basis by the programme lead and are expected to be exceptional.

Employer partnerships and collaborative arrangements are robust with members of the programme team attending bi-monthly regional advanced practitioner working groups. The programme lead attends a task and finish group - a partnership group within the local health board and AEs which works to implement NMC education standards.

A clear partnership approach between the programme team and PLPs exists and the programme team actively liaise and collaborate in regional networks related to non-medical prescribing education. At programme level documentary analysis and discussions at the approval visit provides assurance that a partnership approach exists between the programme team and practice assessors and practice supervisors, with shared responsibility for theory and practice learning, supervision and assessment. Practice assessors and practice supervisors tell us the programme team are responsive, supportive and provide regular opportunities for updates.

While a national approach supports the implementation of the SSSA, we found additional local arrangements to be thorough, with PLPs supportive and engaged. A Once for Wales (2019) practice supervisor and assessor guide informs the preparation of practice assessors and practice supervisors, who describe clear lines of communication and support from the programme team. Practice assessors and practice supervisors from medical and nursing backgrounds tell us that the programme team support their preparation for the implementation of the SSSA.

Governance and quality are safeguarded as the programme teamwork within usual university processes and an external examiner who's an expert in prescribing reviews programme content. Observed structured clinical examinations (OSCEs) take place with practice supervisors and practice assessors in the clinical environment. Academic staff undertake to moderate 20 percent of student assessments which take place in the practice setting.

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 <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>
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 <input type="checkbox"/>	NOT MET <input type="checkbox"/>
	N/A	

Student journey through the programme
Standard 1: Selection, admission and progression
<p>Approved education institutions, together with practice learning partners, must:</p> <p>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</p> <p>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</p> <p>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</p> <p>R1.4 consider recognition of prior learning that is capable of being mapped to the RPS Competency Framework for all Prescribers</p> <p>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</p> <p>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:</p> <p>R1.6.1 Clinical/health assessment</p> <p>R1.6.2 Diagnostics/care management</p> <p>R1.6.3 Planning and evaluation of care</p> <p>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</p>

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
- 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 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 NOT MET

R1.3 is met. Documentary analysis and discussion with the programme team, PLPs and students confirm that there's a governance structure in place for students to be adequately supported throughout their study on the V100, V150 and V300 routes. The application process is robust. We found evidence of a recruitment and selection process which confirms the suitability of applicants and the programme lead checks their status on the NMC register. The practice supervisor and practice assessor as well as the line manager are required to make a signed declaration supporting the time required to complete the programme. All applicants are required to provide an enhanced disclosure and barring service declaration.

Arrangements for self-employed applicants are in place including checking of Health Education and Improvement Wales (HEIW) or Care Quality Commission (CQC) reports and a requirement that a self-employed applicant provides two references, one clinical and one professional to confirm their clinical and learning arrangements. During the interview the self-employed candidate is required to show evidence of how they audit their practice. The programme team make a judgement regarding the suitability of the learning environment based on the documentation provided by the applicant and following discussion with them. The programme team tell us that they don't expect to have self-employed candidates admitted to the programme because of the demand for commissioned places. However, the arrangements at the selection and recruitment stage provide assurance that should a self-employed candidate apply there are sufficient checks in place to assure of the quality of the learning environment.

Educational audit is undertaken by PLPs. Practice assessors and practice supervisors undertake an additional short version of the educational audit process at the point of application. These arrangements provide assurance that practice learning environments meet required standards.

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)

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

YES NO
- Processes are in place to confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas (R1.6):

 - Clinical/health assessment

<ul style="list-style-type: none"> - Diagnostics/care management - Planning and evaluation 		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<ul style="list-style-type: none"> 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 <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Proposed transfer of current students to the programme under review			
<p><i>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.</i></p> <p>There are no plans for current students to transfer to the new programme.</p>			
Proposed transfer of current students to the <u>Standards for student supervision and assessment (SSSA)</u> (NMC, 2018).			
<p>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.</p> <p>Current students won't transfer to the SSSA. The handbook details information for students who suspend their studies and plan to return when the SSSA will apply to their programme.</p>			
<p>Assurance is provided that Gateway 1: <u>Standards framework for nursing and midwifery education</u> relevant to selection, admission and progression are met</p>			
		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Outcome			
Is the standard met?		MET <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>
Date: 20 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 <input type="checkbox"/>	NOT MET <input type="checkbox"/>
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 evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

- Evidence of the learning and teaching strategies that will be used to support achievement of those competencies (R2.3) **MET** **NOT MET**

R2.3 is met. Documentary analysis and discussion at the approval visit provides assurance that there are appropriate learning and teaching strategies in place for students to meet the RPS competencies. Examples of learning and teaching strategies include experiential learning in practice, interactive lectures and discussions, asynchronous recorded lectures via the panopto platform, the use of the virtual learning environment (moodle) and MS Teams. The university articulate an accessible teaching strategy to support this blended approach in the active learning framework.

Competencies are embedded throughout programme documentation, with programme outcomes closely aligned and mapped to them. Indicative content in module descriptors outline the appropriate theory required. Students have formative and summative opportunities for OSCEs which take place in practice and relate directly to the RPS competencies. Students demonstrate their critical reflection on theory and practice in the PAD which provides a reflective learning log, learning contracts and identifies the RPS outcomes.

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

Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to curricula and assessment are met		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to curricula are met		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Outcome			
Is the standard met?		MET <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>
Date: 20 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: N/A		MET <input type="checkbox"/>	NOT MET <input type="checkbox"/>

Standard 3: Practice learning
<p>Approved education institutions must:</p> <p>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</p> <p>Approved education institutions, together with practice learning partners, must:</p> <p>R3.2 ensure that practice learning complies with the NMC Standards for student supervision and assessment</p> <p>R3.3 ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment</p> <p>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</p>
Findings against the standard and requirements
<p>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</p>

- 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. Discussion at the approval visit and documentary analysis provide assurance that suitable and effective arrangements and governance for practice learning are in place for all students. Students tell us that the application process is seamless and easy to navigate.

Discussion at the visit with PLPs confirms that effective governance arrangements for practice learning are in place. The programme is subject to the usual university governance processes and scrutiny by a subject specialist external examiner who provides an annual report. The external examiner reports that they've sight of examples of practice learning records and written examinations. The programme team use qualitative data from the student evaluations to inform the annual stakeholder meeting which includes representatives from PLPs, students and services users.

PLPs tell us that there are clear lines of communication with the programme team and despite current challenges of the pandemic they continue to support protected learning time for students. Governance arrangements include educational audit of the learning environment, formal preparation of practice assessors and practice supervisors and regular discussion between academic assessor, student and practice assessors. Records are kept by PLPs of training undertaken by practice assessors and practice supervisors to ensure that staff who are engaged in practice assessment and practice supervision have undertaken the appropriate preparation. Strategic arrangements are in place in relation to the quality assurance of practice learning and these include an annual review process with HEIW and an annual stakeholder meeting with PLPs, service users and students.

Self-employed applicants are required to show evidence of their governance arrangements, complete an educational audit in their practice learning environment, evidence their organisational structure and provide regulatory reports if inspected. The self-employed applicant is also required to provide two independent professional and clinical referees who have knowledge of the applicant's clinical situation and provide confirmation of the arrangements in place. A proportion of all student assessments are moderated by the programme team including those students who've had the same individual as practice supervisor and practice assessor.

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

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

MET **NOT MET**

R3.3 is met. The programme offers a blended learning approach which includes proportionate and effective use of technology and effective use of simulation-based learning. A virtual learning environment is provided for students to access learning materials. Lectures are asynchronous and synchronous and currently delivered online. Practice assessors and practice supervisors tell us that online consultations are used when face-to-face access to patients is limited. The university also provide a simulation skills laboratory for students to revisit patient assessment skills. Students tell us that these approaches to learning support their experience of managing work and study pressures.

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

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

MET **NOT MET**

R4.1 is met. Mapping documentation demonstrates how the programme complies with the SFNME.

Documentary evidence and discussion at the visit provides assurance that the learning culture supports the safety of staff, students and the public. Students, practice assessors and practice supervisors understand the process to raise and escalate concerns that might arise in practice. The programme team includes experienced educators in the field of non-medical prescribing and act as academic assessors. They work closely with practice supervisors, practice assessors and students and all parties understand their roles. Our discussions provide assurance that there's partnership working between academic assessors, practice assessors and practice supervisors to support, assess and confirm student learning. The PAD provides the vehicle for sharing evidence and making decisions on student assessment and progression. This provides assurance that students work to achieve the required proficiencies and programme outcomes.

Students tell us that their individual learning needs are met through reasonable adjustments and that there's a strong ethos of support at the university. A pastoral system exists which students welcome and feel is of value, providing one-to-one support and opportunity to reflect on their practice and learning.

A national approach articulated in the Once for Wales (2019) guide provides evidence that a collaborative agreement across PLPs informs the implementation of the SSSA. Local arrangements complement this approach with training being provided virtually via padlet, the use of which maintains an accurate record for the programme team to monitor uptake of training.

- 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. Documentary analysis and discussion at the approval visit provides assurance that the SSSA is applied to the programme. The SSSA is clearly embedded within the programme documentation and students and PLPs understand its application.

The applicant identifies the practice assessor and practice supervisor at the application stage. Practice assessors and practice supervisors tell us that they're prepared for the implementation of the SSSA through either a full day of training if new to the role or a half day update. Additionally, there are three meetings a year for practice assessors and practice supervisors to meet the programme team and discuss practice learning.

Practice assessors and practice supervisors tell us of their involvement in formative and summative assessment and describe suitable and safe processes to assess proficiency, through simulation, observation and reflective discussion. Practice documentation provides a clear process for all parties to follow and supports timely review of progress for students.

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

- 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. The applicant is responsible for identifying a suitable colleague to undertake the roles of practice assessor and practice supervisor. The proposed practice assessor and practice supervisor complete part of the application form providing assurance of their suitability and qualifications. The programme team verify the suitability of the practice assessor and practice supervisor, checking the relevant professional register. Local agreement has been reached that PLP staff must have three years of experience of prescribing before they're permitted to undertake the role of practice assessor and practice supervisor. PLPs welcome the opportunity for nurses who prescribe to develop roles as practice assessor and practice supervisors.

Arrangements are in place in the exceptional circumstance that the same person is proposed to act as both practice assessor and practice supervisor. This includes

discussion at interview to ascertain and agree the rationale for this and more frequent meetings with the academic assessor.

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: 20 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: N/A	MET <input type="checkbox"/>	NOT MET <input type="checkbox"/>

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**

<ul style="list-style-type: none"> 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) 	<p>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p>
<ul style="list-style-type: none"> 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) 	<p>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p>
<p>Assurance is provided that the Standards framework for nursing and midwifery education relevant to the qualification to be awarded are met</p>	<p>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p>
<p>Outcome</p>	
<p>Is the standard met?</p>	<p>MET <input checked="" type="checkbox"/> NOT MET <input type="checkbox"/></p>
<p>Date: 20 January 2021</p>	
<p>Post event review</p>	
<p>Identify how the condition(s) is met: N/A</p>	
<p>Date condition(s) met: N/A</p>	
<p>Revised outcome after condition(s) met:</p>	<p>MET <input type="checkbox"/> NOT MET <input type="checkbox"/></p>
<p>N/A</p>	

Section four

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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme specification(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Module descriptors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student facing documentation including: programme handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student university handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice assessment documentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice placement handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PAD linked to competence outcomes, and mapped against RPS <i>A Competency Framework for all Prescribers</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC, 2018) (Gateway 1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the <i>Standards for student supervision and assessment</i> (NMC, 2018) apply to the programme(s) (Gateway 2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the programme meets the <i>Standards for prescribing programmes</i> and RPS <i>Standards of proficiency for prescribers</i> (NMC, 2018) (Gateway 3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Curricula vitae for relevant staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Written placement agreements between the education institution and associated practice learning partners to support the programme intentions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation		
List additional documentation: None identified.		
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senior managers from associated practice learning partners with responsibility for resources for the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme team/academic assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice leads/practice supervisors/ practice assessors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Students	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, please identify cohort year/programme of study: Three advanced clinical practice students 2019/20 Eight non-medical prescribing students 2019/20		
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation		
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)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Library facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Technology enhanced learning Virtual learning environment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Educational audit tools/documentation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Practice learning environments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, state where visited/findings		
If you stated no above, please provide the reason and mitigation The university is an established AEI and visits to facilities weren't required.		
Additional comments: None identified.		

Mott MacDonald Group Disclaimer

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Issue record

Final Report

Author(s):	Rose Havelock	Date:	25 January 2021
Checked by:	Ian Felstead-Watts	Date:	1 February 2021
Submitted by:	Lucy Percival	Date:	3 February 2021
Approved by:	Leeann Greer	Date:	4 March 2021