

**Programme approval visit report**

**Section one**

<b>Programme provider name:</b>	University of Manchester
<b>In partnership with:</b> <i>(Associated practice learning partners involved in the delivery of the programme)</i>	<p>Aintree University Hospital NHS Foundation Trust</p> <p>Bradford Teaching Hospitals NHS Foundation Trust</p> <p>Mid and South Essex NHS Foundation Trust</p> <p>Imperial College Healthcare NHS Trust</p> <p>Liverpool Clinical Commissioning group (CCG)</p> <p>Liverpool University Hospitals NHS Foundation Trust</p> <p>NHS Blackburn with Darwen CCG</p> <p>NHS East Lancashire CCG</p> <p>NHS Haringey CCG</p> <p>NHS Islington CCG</p> <p>NHS Liverpool CCG</p> <p>NHS Medway CCG</p> <p>NHS Northumberland CCG</p> <p>NHS Sandwell and West Birmingham CCG</p> <p>NHS South Tees CCG</p> <p>NHS Stockport CCG</p> <p>Northern Care Alliance NHS Group</p> <p>Nottingham City CCG</p> <p>Royal Brompton and Harefield NHS Foundation Trust</p> <p>St Helen's and Knowsley Hospitals Trust</p> <p>University Hospitals Birmingham NHS Foundation Trust</p> <p>Wrightington Wigan and Leigh NHS Foundation Trust</p>

	Private, voluntary and independent healthcare providers
<b>Programmes reviewed:</b>	<p>Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/></p> <p>Community practitioner nurse prescribing V150 <input type="checkbox"/></p> <p>Community practitioner nurse prescribing V100 <input type="checkbox"/></p>
<b>Academic level:</b>	
Independent and supplementary nurse prescribing V300	<p>England, Wales, Northern Ireland</p> <p><input type="checkbox"/> Level 5    <input type="checkbox"/> Level 6    <input checked="" type="checkbox"/> Level 7</p> <p>SCQF</p> <p><input type="checkbox"/> Level 8    <input type="checkbox"/> Level 9    <input type="checkbox"/> Level 10</p> <p><input type="checkbox"/> Level 11</p>
Community practitioner nurse prescribing V150	<p>England, Wales, Northern Ireland</p> <p><input type="checkbox"/> Level 5    <input type="checkbox"/> Level 6    <input type="checkbox"/> Level 7</p> <p>SCQF</p> <p><input type="checkbox"/> Level 8    <input type="checkbox"/> Level 9    <input type="checkbox"/> Level 10</p> <p><input type="checkbox"/> Level 11</p>
Community practitioner nurse prescribing V100	<p>England, Wales, Northern Ireland</p> <p><input type="checkbox"/> Level 5    <input type="checkbox"/> Level 6    <input type="checkbox"/> Level 7</p> <p>SCQF</p> <p><input type="checkbox"/> Level 8    <input type="checkbox"/> Level 9    <input type="checkbox"/> Level 10</p> <p><input type="checkbox"/> Level 11</p>
<b>Title of programme(s):</b>	Independent Prescribing
<b>Date of approval visit:</b>	28 October 2020

<p>Programme start date:</p> <p>Independent and supplementary nurse prescribing V300</p> <p>Community practitioner nurse prescribing V150</p> <p>Community practitioner nurse prescribing V100</p>	<table border="1"> <tr> <td data-bbox="683 371 948 427">2 March 2021</td> </tr> <tr> <td data-bbox="683 456 948 512">N/A</td> </tr> <tr> <td data-bbox="683 542 948 598">N/A</td> </tr> </table>	2 March 2021	N/A	N/A
2 March 2021				
N/A				
N/A				
<p><b>QA visitor:</b></p>	<p>Dr Heather Bain</p>			

**Section two**

**Summary of review and findings**

University of Manchester (UoM), School of Health Sciences and the Faculty of Biology, Medicine and Health is an established approved educational institution (AEI); presenting the independent prescribing programme (V300).

The V300 independent prescribing programme for nurses and midwives is delivered at academic level seven as a stand-alone 30 credit module over four months. Students can undertake the programme within MSc advanced clinical practice programme.

Documentary analysis and findings at the approval visit demonstrate a commitment to effective communication and partnership working approach with all key stakeholders. There's evidence of engagement with practice learning partners (PLPs) at both operational and strategic level. There is evidence of effective communication processes between the school and PLPs to ensure all governance is in place to deliver the programme. There is evidence of students, service users and carers being involved in the development of the programme.

The programmes are mapped against the NMC Standards for prescribing programmes (SPP) (NMC, 2018) and Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS, 2016) competency framework for all prescribers) (NMC, 2018).

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

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

The programme is recommended for approval subject to one NMC condition. One NMC and one university recommendations are made.

Updated 25 November 2020:

Evidence is provided to meet the NMC condition. The programme is recommended to the NMC for approval.

**Recommended outcome of the approval panel**

<b>Recommended outcome to the NMC:</b>	Programme is recommended to the NMC for approval <input type="checkbox"/>
	Programme is recommended for approval subject to specific conditions being met <input checked="" type="checkbox"/>
	Recommended to refuse approval of the programme <input type="checkbox"/>

<p><b>Conditions:</b></p> <p><i>Please identify the standard and requirement the condition relates to under the relevant key risk theme.</i></p> <p><i>Please state if the condition is AEI/education institution in nature or specific to NMC standards.</i></p>	<p><b>Effective partnership working: collaboration, culture, communication and resources</b></p> <p>Condition one: Review all documentation to clarify the role, responsibilities and relationships between practice supervisor, practice assessor and academic assessor. (SSSA R6.6; SPP R4.2)</p> <p><b>Selection, admission and progression</b></p> <p>None identified.</p> <p><b>Practice learning</b></p> <p>None identified.</p> <p><b>Assessment, fitness for practice and award</b></p> <p>None identified.</p> <p><b>Education governance: management and quality assurance</b></p> <p>None identified.</p>
<p><b>Date condition(s) to be met:</b></p>	<p>25 November 2020</p>
<p><b>Recommendations to enhance the programme delivery:</b></p>	<p>Recommendation one: Continue to develop partnership working with service users and carers in the development, delivery and evaluation of the prescribing programme. (SFNME R1.12; SPP R2.1)</p> <p>Recommendation two: To introduce periodic face-to-face and online sessions in preference to email exchanges to address issues. (University recommendation)</p>
<p><b>Focused areas for future monitoring:</b></p>	<ul style="list-style-type: none"> <li>• Engagement of service users and carers across the programme</li> <li>• The role and relationship of practice supervisor, practice assessor and academic assessors.</li> </ul>

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

**Commentary post review of evidence against conditions**

UoM submitted evidence to demonstrate the condition is met.

The reflective practice portfolio, the student handbook and the assessment strategy have been updated to clarify the role, responsibilities and relationships between practice supervisor, practice assessor and academic assessor.

Condition one is met.

The SSSA are met.

<b>AEI Observations</b>	<b>Observations have been made by the education institution</b> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<b>Summary of observations made, if applicable</b>	
<b>Final recommendation made to NMC:</b>	Programme is recommended to the NMC for approval <input checked="" type="checkbox"/> Recommended to refuse approval of the programme <input type="checkbox"/>
<b>Date condition(s) met:</b>	25 November 2020

**Section three**

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

<b>Partnerships</b>
<p>The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.</p>
<p><b>Please refer to the following NMC standards reference points for this section:</b></p> <p><u><i>Standards framework for nursing and midwifery education</i></u> (NMC, 2018)</p> <p><b>Standard 1: The learning culture:</b></p> <p>R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders</p> <p>R1.13 work with service providers to demonstrate and promote inter-professional learning and working</p> <p><b>Standard 2: Educational governance and quality:</b></p> <p>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</p> <p>R2.4 comply with NMC <u><i>Standards for student supervision and assessment</i></u></p> <p>R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of</p>

communication and accountability for the development, delivery, quality assurance and evaluation of their programmes

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

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

**Standard 3: Student empowerment:**

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

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

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

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

**Standard 4: Educators and assessors:**

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

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

R4.10 share effective practice and learn from others

**Standard 5: Curricula and assessment:**

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

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

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

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

**Standard 1: Organisation of practice learning:**



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

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

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

**Standard 2: Expectations of practice supervisors:**

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

**Standard 3: Practice supervisors: role and responsibilities:**

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

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

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

**Standard 7: Practice assessors: responsibilities:**

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

**Standard 9: Academic assessors: responsibilities:**

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

**Findings against the standard and requirements**

**Provide an evaluative summary about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders based on QA visitor (s) documentary analysis and discussions at the approval visit, taking into consideration the QA approval criteria**

Documentary evidence and the approval process confirms there's effective partnership working between UoM and key stakeholders including PLPs, service users and carers and students, in the development, delivery and evaluation of the programmes at strategic and operational levels. Policies and processes are in place to support the development and future delivery of the programme. The programme leader attends the regional meetings of the north west non-medical prescribing education group (NWNMPEG) which provides a regional forum for all

stakeholders to discuss shared issues. This collaboration has led to a standardisation in the consistent approach to the adoption of the SSSA applied to prescribing programmes and the agreement of the 90 hours practice based learning across the region. There is also a Greater Manchester non-medical prescribing subgroup of which the programme leader is a member. The head of school tells us they are involved in strategic educational groups with PLPs.

Programme board meetings support the operational aspects of the programmes. PLPs tell us the programme teams meet with them regularly, mainly through the NWNMPEG. They confirm attendance at regular stakeholder programme development meetings and tell us there's effective partnership working across the prescribing programme.

There's evidence of partnership working between UoM and PLPs in managing the practice learning environment. Documentary evidence and the approval process confirms there's preparation of practice supervisors and practice assessors to meet the SSSA. The programme teams tell us there's a planned approach to support practice learning. There's a learning environment audit form that's used across the region.

UoM have established working relationships with service users and carers through a divisional public and patient advisory board, a Greater Manchester network run by the UoM pharmacy and optometry division. Two of the members are involved in the prescribing programme board and told us how they met with previous student of the programme to reflect on the design of the programme and inform future discussions about their involvement across the programme. The programme team have plans to use service users in the recruitment process and the service users in attendance told us that they had been involved in the discussions around this and will be reviewing personal statements of future applicants. The service users and carers confirm they are prepared for the role and receive equality and diversity training.

Service users and carers tell us they've not directly contributed to the prescribing programmes as yet but suggested how they could be in the future. V300 Students tell us service users and carers did share real life experiences related to history taking during the programme, but it was not a large part of the programme. The programme teams tell us that currently actors are used within the objective structured clinical examinations (OSCEs), and service users and carers will be further involved within the teaching particularly around consultation and assessment in the future. Evidence of the involvement of service users and carers in the assessment of students is recorded in the practice assessment document. Service users and carers provide feedback about students' performance in practice. Practice supervisors and practice assessors use this feedback to inform formative and summative assessments of practice.

Service users and carers tell us they would welcome more involvement in the prescribing programmes. (Recommendation one)

Students tell us their learning experience is positive and they receive effective support from the programme team who provide timely feedback. Students tell us the programme is intense, but the content supports them to achieve the learning

outcomes. The students confirm they receive protected learning time. Documentary evidence confirms student contribution to the development of the proposed programme. The students in attendance tell us they had had no direct involvement in the programme development.

Students tell us they have the opportunity to feedback informally, on the virtual learning environment (VLE) platform in the discussion forms, and formal evaluation mechanisms are in place. There are opportunities for students to evaluate practice learning throughout the programme and on their taught attendance days.

Documentary evidence and the approval process confirms student feedback and any concerns are responded to appropriately by the programme team and any actions taken reported back to the students. Students tell us UoM work with PLPs to ensure they are supported and achieve their competencies in the practice learning environment. Students tell us that their feedback is valued.

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**

Gateway 2: Standards for student supervision and assessment

**MET**  **NOT MET**

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

**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.

### 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. UoM have adopted an application process in collaboration with the NWNMPEG. This application form along with an associated nomination pack demonstrates governance is in place for the programme. The applicants are selected and supported by their employers. A telephone interview is also carried out by a member of the programme team on receipt of the application form, of which the questions have been informed by service users and cares. Students and PLPs confirm disclosure and barring service (DBS) checks are in place within the application process. Line managers, prescribing and professional leads tell us they must confirm support is in place for students and that all applicants must meet NMC requirements. Self-employed and non-NHS applicants are identified in the admission process and must fully meet the admission criteria. Self-employed applicants are required to self-declare they have an enhanced DBS in place within the last three years and provide a copy of the disclosure certificate within the application process. Self-employed applicants must include two references in addition to the standard application documents.

Educational audits are undertaken using a regional approach involving practice education facilitators and university link lecturers. Audits are in place with associated PLPs that address prescribing programme requirements. All practice placements areas are required to have been inspected by the Care Quality Commission (CQC). This enables self-employed registrants to apply but also ensures a level of governance is in place. If there's no audit in place the programme leader will identify this from the admission process and a university

link lecturer will undertake an audit in line with the UoM process This involves checking systems regular reports, indemnity arrangements and health and safety arrangements in the practice learning environment.

Processes for managing causes for concern are in place for students, practice supervisors and practice assessors. Students and PLPs confirm they know the process to raise concerns and that it's detailed in the student course handbook, which is aimed at students, with a separate section included for practice supervisors and practice assessors.

PLPs confirm they're fully involved in the admission process and support programme requirements including learning in practice. They ensure students are provided with protected learning time. Students confirm they are well supported by their employers and are released to attend the taught elements of the programmes. Students tell us practice learning is protected. Practice supervisors and practice assessors are identified within the admission process. Practice assessors are required to have three years recent prescribing experience in a relevant area of practice. The practice supervisor for all programmes must be a qualified prescriber with experience in a relevant area of practice. The professional registration of all practice supervisors and practice assessors is checked at the admission stage by the programme team. A short-listing template document documents all checks have taken place.

- Processes are in place to consider recognition of prior learning that is capable of being mapped to the RPS *Competency Framework for all Prescribers* (R1.4) **YES**  **NO**
- Processes are in place to confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme (R1.5) **YES**  **NO**
- Processes are in place to confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas (R1.6):

  - Clinical/health assessment
  - Diagnostics/care management
  - Planning and evaluation

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

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

*From your documentary analysis and your meeting with students, provide an evaluative summary to confirm how the Standards for prescribing programmes and Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers) will be met through the transfer of existing students onto the proposed programme.*

Students on the prescribing programme will complete the current programmes. No student are transferring onto the new programme.

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

YES  NO

**Outcome**

**Is the standard met?**

MET  NOT MET

**Date:** 28 October 2020

**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 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 evidence and the approval process confirms teaching and learning strategies support achievement of the RPS competencies in the programme. Student facing documentation details the structure of the programme. A blended learning approach includes classroom teaching and online guided and independent learning. Practice learning requires 90 hours and is supported by practice supervisors and practice assessors. Programme outcomes are mapped against the RPS competency framework. Students are assessed against these in the practice assessment document.

A variety of teaching and learning methods are used to address the learning needs of students. The VLE platform, Blackboard allows the students an opportunity to explore the literature and includes learning objects and prompt questions that are linked to the RPS competencies. Face-to-face learning takes the form of lectures and tutorials. There are also practice demonstrations allowing the students to develop interpersonal interaction through their involvement with actors. The programme emphasises pharmacology for students to apply to their specialist areas of practice and they are taught alongside pharmacy students. Students tell us their learning experiences are positive and the program prepares them for prescribing practice. Students confirm they receive support from the programme team, who communicate effectively with PLPs, practice supervisors and practice assessors.

The programme team tell us that students are expected to attend all taught sessions. Online engagement is monitored and if there are any issues PLPs are informed by the programme team. PLPs confirm they support the delivery methods used.

- 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 programme is delivered in England.

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

YES  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: 28 October 2020

**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

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

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

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

**MET**  **NOT MET**

R3.1 is met. Documentary evidence and the approval visit confirm suitable and effective arrangements and governance are in place for all applicants including those who are self-employed. This is assured by effective partnership working between the programme team and PLPs. Prescribing leads and PLPs confirm their involvement in the selection process for applicants from their organisation.

Practice supervisors and practice assessors are identified at the application stage and are prepared for their role by UoM. An online resource has recently been developed by the Health Education Co-operative (a social enterprise formed from five of the original north west AEs that offered prescribing courses) to prepare practice assessors and practice supervisors and use the completion of this resource as confirmation of eligibility to undertake the role. Conscious of the diverse experiences of people in these roles and the fact that they will supervise trainee prescribers at different AEs over the course of academic years, NWNMPEG members have agreed that the completion certificate will be accepted for up to two years.

This preparation will be supplemented by programme-specific information and the course handbook. The programme specific information is in the form of a screencast with a transcribed copy of the presentation which allow practice supervisors and practice assessors flexibility as to when they access this resource. The programme team tell us they will engage with the practice supervisors and practice assessors to assure their understanding of role, responsibilities and communication pathways as required and will email from time-to-time. If required,

a practice learning environment visit will be undertaken. Students and PLPs tell us practice learning is supported and protected, and the robust approach to ensuring practice assessors and practice supervisors are well prepared is valued.

The admission process ensures governance is in place for self-employed students and the programme team will scrutinise the evidence including a personal statement, two references, a self-declaration of the NMC requirements being met, and the practice assessor confirms the learning environment is suitable. This process includes addressing questions related to health and safety policies, environments being CQC registered providers, and the commitment by the practice assessor and practice supervisor who have sufficient time to support a safe learning culture and adherence to governance.

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

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

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

**MET**  **NOT MET**

R3.3 is met. Programme documentation and the approval visit confirm a range of simulation-based and technology enhanced strategies are used appropriately to support learning and assessment and these are integrated throughout the programme. Full use is made of a flexible skills suite that allows adaption for lectures and tutorials and a clinical skills laboratory that is used for OSCEs using actors to support consultation and history taking.

Strategies include the use of recorded lectures, collaborate classrooms, and flipped classroom principles, discussion forums. pharmacology and drug calculation workshops. Currently there is a pilot using a package to develop individual learning objects that students can access on and off campus to provide more interactive learning. There are online resources available and students confirm their positivity about the learning resources and told us the activities allowed a deeper learning approach not a surface approach.

- 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:** 28 October 2020

**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%), and

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

### Findings against the standards and requirements

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

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

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

**MET**  **NOT MET**

R4.1 is met. The programme team are established and appropriately qualified to deliver the programmes. PLPs tell us they engage with the programme teams to ensure the SFNME are applied to the programmes. Any breakdowns in practice learning environments are managed jointly by UoM and PLPs. If required,

academic assessors will visit practice learning environments for additional support and undertake tripartite meetings with students and practice assessors.

The student course handbook outlines the process for escalating concerns and key contacts including the academic assessor details. The learning in practice requires students to sign a learning agreement that includes setting dates to review their progress. This encourages them to feedback any issues identified in the practice learning environment to practice assessors and if required academic assessors.

- 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 not met. Educational audits and admission processes are in place to support practice learning and ensure that practice supervisors and practice assessors are identified at admission.

The programme team tell us about the roles and relationship between the practice supervisors, the practice assessors and the academic assessors which overall complies with the SSSA. The admission form verifies the practice assessor will work in partnership with the nominated practice assessor to evaluate and recommend the student for progression. However, the student course handbook which includes a subsection for practice supervisors and practice assessors, and the practice assessment document does not refer to the academic assessor role and how they will work in partnership to support the student's learning in practice. Initial, midway and final progress meetings are documented within the practice assessment document but there is no place for the academic assessor involvement to be recorded or to have a final competency sign off. (Condition one)

Documentary evidence and the approval process confirms there's a comprehensive practice assessors and practice supervisors prescribing specific preparation package. This requires all new practice assessors and practice supervisors to undertake an online preparation course. All practice assessors and practice supervisors are required to engage with prescribing programme updates. PLPs tell us they fully support the preparation and confirm the team give good support. It is explicit in all the documentation that the practice supervisor and practice assessor are different people and the document does not allow any exceptional circumstances for them to be the same person.

The head of school confirms assurance that there are adequate academic assessors with relevant experience and professional background to support the

programme. The role is resourced in line with workload allocations. Academic assessors must hold a relevant professional qualification and been prepared for their role within staff development processes. PLPs tell us there are adequate practice supervisors and practice assessors to support learning in practice.

- 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**
- 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

The roles, responsibilities and relationships of the practice supervisor, practice assessor and academic assessor are not explicit within the documentation. (Condition one)

**Outcome**

**Is the standard met?** MET  NOT MET

The roles, responsibilities and relationships of the practice supervisor, practice assessor and academic assessor are not explicit within the documentation.

Condition one: Review all documentation to clarify the role, responsibilities and relationships between practice supervisor, practice assessor and academic assessor. (SSSA R6.6; SPP R4.2)

**Date: 28 October 2010**

**Post event review**

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

The reflective practice portfolio, the student handbook and the assessment strategy have been updated to clarify the role, responsibilities and relationships between practice supervisor, practice assessor and academic assessor.

Evidence:

Reflective practice portfolio templates, undated

Assessment strategy, 2020-2021, undated

Student handbook, 2021, undated

Condition one is met.

**Date condition(s) met:** 25 November 2020

**Revised outcome after condition(s) met:** MET  NOT MET

**Standard 5: Qualification to be awarded**

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

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

R5.1.1 a community practitioner nurse or midwife prescriber (V100/V150), or

R5.1.2 a nurse or midwife independent/supplementary prescriber (V300)

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

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

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

**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:** 28 October 2020

**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

**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)	<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)	<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)	<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 confirmation by the education institution and associated practice learning partners to support the programme intentions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>List additional documentation:</p> <p>CQC reports:</p> <p>Pennine Care NHS Foundation Trust CQC report, January 2019</p> <p>Tameside and Glossop Integrated Care NHS Foundation Trust, April 2019</p> <p>Post visit documentation to meet conditions:</p> <p>Revised reflective practice portfolio templates, undated</p> <p>Revised assessment strategy, 2020-2021, undated</p> <p>Revised student handbook 2021, undated</p>		
If you stated no above, please provide the reason and mitigation		
<p>Additional comments:</p> <p>None identified.</p>		

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

	<b>YES</b>	<b>NO</b>
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"/>
<p>If yes, please identify cohort year/programme of study:</p> <p>March 2020 x two V300</p>		
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 UoM is an established AEI and it was not necessary to visit facilities.		
Additional comments: None identified.		

**Mott MacDonald Group Disclaimer**

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We accept no responsibility for the consequences of this document being relied upon by any other party, or being used for any other purpose, or containing any error or omission which is due to an error or omission in data supplied to us by other parties.

<b>Issue record</b>			
<b>Final Report</b>			
Author:	Heather Bain	Date:	25 November 2020
Checked by:	Pamela Page	Date:	27 November 2020
Approved by:	Lucy Percival	Date:	9 December 2020
Submitted by:	Leeann Greer	Date:	10 December 2020