

**Programme approval visit report**

**Section one**

<b>Programme provider name:</b>	University of Winchester
<b>Programmes reviewed:</b>	Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V150 <input type="checkbox"/> Community practitioner nurse prescribing V100 <input type="checkbox"/>
<b>Title of programme(s):</b>	Independent and Supplementary Prescribing
<b>Academic level:</b>	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input 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
Community practitioner nurse prescribing V150	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input 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
Community practitioner nurse prescribing V100	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input 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
<b>Date of approval visit:</b>	18 November 2021

<p><b>Programme start date:</b></p> <p>Independent and supplementary nurse prescribing V300</p> <p>Community practitioner nurse prescribing V150</p> <p>Community practitioner nurse prescribing V100</p>	<p><input type="text" value="22 February 2022"/></p> <p><input type="text"/></p> <p><input type="text"/></p>
<p><b>QA visitor:</b></p>	<p>Registrant Visitor: Rose Havelock.</p>

**Section two**

**Summary of review and findings**

The University of Winchester (the university) is an approved education institution (AEI). The independent and supplementary prescribing programme (V300) is presented for approval by the School of health and care professions, situated in the Faculty of health and wellbeing. The programme is offered at academic level seven and leads to 30 academic credits. The programme is offered as a stand-alone module or as a core module on the MSc advanced clinical practice.

The proposed V300 programme is mapped to the Standards of proficiency for nurse and midwife prescribers (adoption of the Royal Pharmaceutical Society's (RPS) competency framework for all prescribers) (RPS, 2021) and the Standards for prescribing programmes (SPP) Nursing and Midwifery Council (NMC, 2018). This new provision is proposed to start on the 22 February 2022. The programme is delivered part-time over 26 weeks. Two cohorts a year are planned.

The approval visit is undertaken face to face, at the University of Winchester campus.

The university doesn't offer undergraduate midwifery education, consequently the programme isn't open to midwifery applicants.

Documentary analysis and discussion at the approval visit provide assurance that there's effective working relationships between the programme team, practice learning partners (PLPs) and service users (SU). There are appropriate and effective strategic and operational policies and processes in place to ensure programme governance.

The programme is designed to meet the proficiencies and outcomes of the RPS competency framework for all prescribers and the SPP. The reflective practice portfolio is mapped to the RPS competency framework.

The school has a well-established strategy to work collaboratively with SU and this is embedded at programme level.

The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) isn't met at programme level as a condition applies.

The Standards for student supervision and assessment (SSSA) (NMC, 2018) isn't met at programme level as conditions apply.

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

Update 8 December 2021:

Evidence is provided that meets the conditions set.  
The programme is recommended to the NMC for approval.

**Recommended outcome of the approval panel**

**Recommended outcome to the NMC:**

- Programme is recommended to the NMC for approval
- Programme is recommended for approval subject to specific conditions being met
- Recommended to refuse approval of the programme

**Conditions:**

**Effective partnership working: collaboration, culture, communication and resources:**

None identified.

**Selection, admission and progression:**

Condition one: Provide confirmation of the revised summative assessment strategy in relation to the RPS competencies and case study elements. (SFNME R3.2; SPP R4.1)

**Practice learning:**

Condition two: Demonstrate the mechanisms to document relevant observations on the conduct, proficiency and achievement of prescribing students between practice assessors and practice supervisors within the practice portfolio. (SSSA R4.3, R7.2; SPP R4.2)

Condition three: The role of the practice supervisor must be made clear in programme documentation. This should be addressed in the designated prescribing practitioner (DPP) handbook (section five) and the student handbook (page six). (SSSA R2.7; SPP R4.2)

Condition four: Provide an implementation plan for the preparation and ongoing support for practice

	<p>assessors and practice supervisors for prescribing students. (SSSA R3.5, R8.1, R8.4; SPP R4.2)</p> <p>Condition five: The programme team must ensure the term mentor is removed from the practice portfolio (version 2 November 2021). (SFNME R3.8; SPP R4.1)</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>Condition six: All NMC conditions must be met before the University of Winchester can validate this module/course. (University condition)</p>
<p><b>Date condition(s) to be met:</b></p>	<p>13 December 2021</p>
<p><b>Recommendations to enhance the programme delivery:</b></p>	<p>Recommendation one: Consider a system of monitoring engagement of practice assessor and practice supervision preparation and ongoing support for the prescribing programme. (SSSA R3.5, R8.1, R8.4)</p> <p>Recommendation two: We recommend that you consider the use of the pre-populated canvas template for programme pages. You can book a 1-1 tutorial with canvas to obtain the template and adapt it for your specific use. (University recommendation)</p> <p>Recommendation three: We recommend that you consider providing a space on the student application form for a SU to add a supporting statement. (University recommendation)</p> <p>Recommendation four: We recommend that you consider retaining paper-based sign-off for practice supervisors and assessors, as your current students resoundingly stated that this was their preferred process for expediting sign-off. (University recommendation)</p>

<b>Focused areas for future monitoring:</b>	None identified.

<b>Programme is recommended for approval subject to specific conditions being met</b>
<p><b>Commentary post review of evidence against conditions:</b></p> <p>The programme team has provided confirmation of the revised summative assessment strategy. The summative assessment in practice has been amended to provide a formative assessment to support the overall achievement of the RPS competencies. Programme documentation is updated to reflect this revised assessment strategy.</p> <p>Condition one is now met.</p> <p>The programme team has provided a reviewed and updated practice portfolio. The portfolio provides the mechanism to document relevant observations on the conduct proficiency and achievement of the prescribing students between the practice supervisor and the practice assessor.</p> <p>Condition two is now met.</p> <p>The programme team has provided a revised DPP handbook and a student handbook which makes clear the role of the practice supervisor.</p> <p>Condition three is now met.</p> <p>The programme team has provided an implementation plan for the preparation and support of practice assessors and practice supervisors. Dates have been identified for the delivery of update sessions and the programme team have implemented a process of monitoring the uptake of the update sessions.</p> <p>Condition four is now met.</p> <p>The programme team has removed the term mentor from the practice portfolio.</p> <p>Condition five is now met.</p>

<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>	8 December 2021

### Section three

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

Partnerships
<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><a href="#">Standards framework for nursing and midwifery education</a> (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>

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 analysis and discussion at the approval visit provides evidence of effective partnership working with PLPs, SU and students. The university holds collaborative strategic meetings such as the non-medical prescribing partnership group which provides a forum for discussion and development of programme issues between all stakeholders.

The recruitment and selection of applicants to the programme is a conjoint approach with PLPs and is paper based. The process for recruitment and selection

is supported by a standard operating procedure, which provides assurance that due diligence is applied to the review of applications. Line managers or non-medical prescribing leads endorse the application, providing assurance of organisational support. Applicants are required to identify their practice assessor and practice supervisor who complete the application form stating their suitability for the role. Documentary analysis and discussion at the approval visit provide assurance there's effective arrangements in place for governance of self-employed applications. Arrangements include the review of applications from self-employed candidates, followed by interviews and educational audit as necessary.

Arrangements for applicants who propose that the same person act as a practice assessor and practice supervisor, are reviewed on a case-by-case basis by the programme leader and are expected to be exceptional. In order for SU participation to be extended to the recruitment and selection process the programme team confirms the intention for SU to review the application form.

Discussion at the approval visit confirms PLP involvement, in the design and development of the non-medical prescribing programme with local non-medical prescribing leads and colleagues from Health Education England acting as a critical friend in the curriculum development process. PLPs tell us that the programme team offer an open access approach to discuss queries with a collaborative approach to quality and governance process.

The non-medical prescribing is the first post-registration offer in the School of health and wellbeing. As this is new provision, we're unable to meet with post-registration students but met undergraduate nursing students. They tell us that there's effective and supportive partnership working. Students tell us they feel empowered in an adult learning environment.

The facilities and learning environment are suitable for their purpose. Individual learning and pastoral needs are planned for and students are signposted to appropriate resources and support services.

Discussion at the approval visit and documentary analysis confirms that there's enough resource in place for programme delivery with an appropriately qualified and registered programme lead, and educators who are prescribing practitioners.

Documentary analysis supports the observation that the programme team and school, place value on inter-professional education and provide a strategy to achieve this aim. Students who will join the programme work in diverse environments across primary and secondary care services, independent and self-employed settings. There's evidence that inter-professional working will be supported as applicants are drawn from allied health professions as well as nursing. A strength of the programme is the opportunities for interdisciplinary working and learning afforded by being situated in the School for health and wellbeing and the range of professional backgrounds of the programme team.

A co-productive approach is evident throughout the design and development of the programme. The lived experience voice informs the programme content and plans for delivery. Principles of inclusivity and diversity are clearly embedded within the processes of the school and reflected in the relationships between the programme team and SU representatives. The university's stakeholder and SU involvement strategy (2018-2021) identifies a ladder of involvement to measure the extent of this partnership. The recent appointment of a lecturer in nursing (lived experience) demonstrates good practice in this regard and provides assurance that there's commitment to future SU inclusion. SU tell us that their voice is heard, respected and responded to in the school. Students will receive feedback in their practice portfolio from SU and there's plans for SU to contribute to teaching sessions on the programme timetable.

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

**MET**  **NOT MET**

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

**MET**  **NOT MET**

**Post event review**

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

N/A

**Date condition(s) met:**

N/A

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

**MET**  **NOT MET**

N/A

**Student journey through the programme**

**Standard 1: Selection, admission and progression**

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

- R1.1 ensure that the applicant is a registered nurse (level 1), a registered midwife or a SCPHN before being considered as eligible to apply for entry onto an NMC approved prescribing programme
- R1.2 provide opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non- NHS employed registrants) to apply for entry onto an NMC approved prescribing programme
- R1.3 confirm that the necessary governance structures are in place (including clinical support, access to protected learning time and employer support where appropriate) to enable students to undertake, and be adequately supported throughout, the programme
- R1.4 consider recognition of prior learning that is capable of being mapped to the [RPS Competency Framework for all Prescribers](#)
- R1.5 confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme
- R1.6 confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas:
- R1.6.1 Clinical/health assessment
- R1.6.2 Diagnostics/care management
- R1.6.3 Planning and evaluation of care
- R1.7 ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme

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

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

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

**Proposed transfer of current students to the [Standards for student supervision and assessment](#) (NMC, 2018).**

Demonstrate a robust process to transfer current students onto the [Standards for student supervision and assessment](#) (NMC, 2018).

**Findings against the standard and requirements**

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

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

YES  NO

- 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 evidence and discussion at the approval visit provides assurance that there's the necessary oversight to the recruitment and selection process and to ensure employer support. Employer support is evident at the point of application, as line managers or non-medical prescribing leads countersign the application form. The application form requires a signed declaration from the practice assessor and practice supervisor to confirm their support and resources to support the applicant. The programme team review the applications and there's a standard operating procedure in place to ensure appropriate checks and balances take place, such as checking the registration of applicants and proposed practice assessors and practice supervisors.

**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
  - 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  N/A

**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.*

Discussion at the approval visit confirms that there are no students transferring to the proposed programme. This programme is new provision.

**Proposed transfer of current students to the [Standards for student supervision and assessment \(SSSA\) \(NMC, 2018\)](#).**

**From your documentary analysis and your meetings at the approval visit confirm if students will be transferring to the SSSA, and if so that they have informed choice and are fully prepared for supervision and assessment.**

Discussion at the approval visit confirms that there are no students transferring to the SSSA. This programme is new provision.

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:** 18 November 2021

**Post event review**

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

N/A

**Date condition(s) met:**

N/A

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

N/A

**Standard 2: Curriculum**

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

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

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

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

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

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

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

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

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

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

**Findings against the standard and requirements**

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

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

YES  NO

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

YES  NO

**Provide an 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. A blended learning strategy is proposed which combines face to face teaching with materials accessible on the university's virtual learning environment (VLE) portal Canvas. The university is well served with digital technology tools to support accessibility. There's a dedicated team to enhance technology and enhanced learning who offer ongoing training and support for teaching staff. There's a well-equipped clinical skills suite and a range of consulting rooms for simulated practice. Theory and practice learning is balanced throughout the programme with 10 face to face days and 90 hours of clinical practice required.

**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**



<ul style="list-style-type: none"> <li>Evidence to ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language. (R2.6)</li> </ul> <p style="text-align: right;">YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/></p> <p>The programme will be delivered in England.</p>
<p>Assurance is provided that Gateway 1: <a href="#">Standards framework for nursing and midwifery education</a> relevant to curricula and assessment are met</p> <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p>Assurance is provided that Gateway 2: <a href="#">Standards for student supervision and assessment</a> relevant to curricula are met</p> <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p>
<p><b>Outcome</b></p> <p>Is the standard met? <span style="float: right;">MET <input checked="" type="checkbox"/> NOT MET <input type="checkbox"/></span></p> <p>Date: 18 November 2021</p> <p><b>Post event review</b></p> <p>Identify how the condition(s) is met:</p> <p>N/A</p> <p>Date condition(s) met:</p> <p>N/A</p> <p>Revised outcome after condition(s) met: <span style="float: right;">MET <input type="checkbox"/> NOT MET <input type="checkbox"/></span></p> <p>N/A</p>

<p><b>Standard 3: Practice learning</b></p> <p><b>Approved education institutions must:</b></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><b>Approved education institutions, together with practice learning partners, must:</b></p> <p>R3.2 ensure that practice learning complies with the NMC <a href="#">Standards for student supervision and assessment</a></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 <a href="#">Standards for student supervision and assessment</a></p> <p style="text-align: center;"><b>Findings against the standard and requirements</b></p>
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**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. The process for recruitment and selection is supported by a standard operating procedure, which provides assurance that due diligence is applied to the review of applications. Line managers or non-medical prescribing leads endorse the application, providing assurance of organisational support. Applicants are required to identify their practice assessor and practice supervisor who complete the application form stating their suitability for the role. Documentary analysis and discussion at the approval visit provide assurance, that there's effective arrangements in place for governance of self-employed applications and practice learning. Arrangements include the review of applications from self-employed candidates, followed by interviews and educational audit as necessary.

**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. Discussion at the approval visit and documentary analysis provides assurance that learning is enhanced with technology effectively. Teaching materials are accessible on the university's VLE portal Canvas. The university is well served with digital technology tools to support accessibility and there's a dedicated team to enhance technology enhanced learning who offer ongoing training and support for teaching staff. There's a well-equipped clinical skills suite. Students access tutorial support via digital routes. SafeMedicate is used for medicines training.

**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

YES  NO

**Outcome**

Is the standard met? MET  NOT MET

Date: 18 November 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 not met. Documentary analysis and discussion at the approval visit indicates that the implementation of a summative assessment in practice might provide a challenge to operationalise. The programme team propose a summative assessment of practice but haven't detailed the mechanism by which retrieval would occur in the case of student failure, or how practice assessors would be prepared to undertake the summative assessment including mechanisms for moderation. (Condition one)

We found the nomenclature in use is inconsistent across the programme documentation and ambiguous in places. The use of the term mentor in the practice portfolio refers to a role identified in the Standards for learning and assessment in practice (SLAiP standards) (2010). These standards no longer apply. (Condition five)

- 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. Documentary analysis and discussion at the approval visit provides evidence that there's a regional approach to preparing practice assessors and practice supervisors in relation to the SSSA, but this is largely focussed on undergraduate pre-registration provision, where the practice assessors will be registered nurses. In non-medical prescribing, practice assessors are likely to be drawn from a wider professional group and may not be able to access the current provision. At the approval visit we find that some PLPs aren't able to articulate clearly how they understand the application of the SSSA in relation to the non-medical prescribing. An implementation plan of ongoing support will assist in this regard. (Condition four)

We find a lack of clarity in programme documentation about the different roles involved in the SSSA and how they apply in a non-medical prescribing context as there isn't reference to the practice supervisor in relation to the practice assessment process. (Condition three)

In the practice portfolio there's no facility for the practice supervisor to record their observations and discussion with the practice assessor or student. (Condition two)

**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**  **N/A**

There is no lead midwife for education in place as currently the university do not deliver education to midwives. The programme team report midwives will be directed to another education provider in the area.

**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 required to provide details of the practice assessor in the application process. The programme team verify suitability and willingness of the nominated person to undertake the role of practice assessor and the practice assessor completes the application form to say they'll act in this role.

**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

Documentary analysis and discussion at the approval visit indicates that the implementation of a summative assessment in practice might provide a challenge to operationalise. The programme team propose a summative assessment of practice but haven't detailed the mechanism by which retrieval would occur in the case of student failure; how practice assessors would be prepared to undertake the summative assessment nor any mechanisms for moderation. (Condition one)

We found the nomenclature in use is inconsistent across the programme documentation and ambiguous in places. The use of the term mentor in the practice portfolio refers to a role identified in the SLAiP standards. These standards no longer apply. (Condition five)

Assurance is provided that Gateway 2: [Standards for student supervision and assessment](#) relevant to supervision and assessment are met

YES  NO

At the approval visit we find that some PLPs aren't able to articulate clearly how they understand the application of the SSSA, in relation to the non-medical prescribing and an implementation plan of ongoing support will assist in this regard. (Condition four) (Recommendation one)

We find a lack of clarity in programme documentation about the different roles involved in the SSSA and how they apply in a non-medical prescribing context. As there isn't reference to the practice supervisor in relation to the practice assessment process. (Condition three)

In the practice portfolio there's no facility for the practice supervisor to record their observations and discussion with the practice assessor or student. (Condition two)

**Outcome**

**Is the standard met?**

MET  NOT MET

The programme team propose a summative assessment of practice but haven't detailed the mechanism by which retrieval would occur in the case of student failure; how practice assessors would be prepared to undertake the summative assessment nor any mechanisms for moderation.

Condition one: Provide confirmation of the revised summative assessment strategy in relation to the RPS competencies and case study elements. (SFNME R3.2; SPP R4.1)

In the practice portfolio there's no facility for the practice supervisor to record their observations and discussion with the practice assessor or student.

Condition two: Demonstrate the mechanisms to document relevant observations on the conduct, proficiency and achievement of prescribing students between practice assessors and practice supervisors within the practice portfolio. (SSSA R4.3, R7.2; SPP R4.2)

We find a lack of clarity in programme documentation about the different roles involved in the SSSA and how they apply in a non-medical prescribing context, as there isn't reference to the practice supervisor in relation to the practice assessment process.

Condition three: The role of the practice supervisor must be made clear in programme documentation. This should be addressed in the DPP handbook (section five) and the student handbook (page six). (SSSA R2.7; SPP R4.2)

At the approval visit we find that some PLPs aren't able to articulate clearly how they understand the application of the SSSA in relation to the non-medical prescribing and an implementation plan of ongoing support will assist in this regard.

Condition four: Provide an implementation plan for the preparation and ongoing support for practice assessors and practice supervisors for prescribing students. (SSSA R3.5, R8.1, R8.4; SPP R4.2)

The use of the term mentor in the practice portfolio refers to a role identified in the SLAiP standards. These standards no longer apply.

Condition five: The programme team must ensure the term mentor is removed from the practice portfolio (version 2 November 2021). (SFNME R3.8; SPP R4.1)

**Date:** 18 November 2021

#### **Post event review**

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

The programme team has provided confirmation of the revised summative assessment strategy. The summative assessment in practice has been amended to provide a formative assessment to support the overall achievement of RPS competencies. Programme documentation is updated to reflect this revised assessment strategy.

Condition one is now met.



The programme team has provided a reviewed and updated practice portfolio. The portfolio now provides the mechanism to document relevant observations on the conduct proficiency and achievement of the prescribing students between the practice supervisor and the practice assessor.

Condition two is now met.

The programme team has provided a revised DPP handbook and student handbook which makes clear the role of the practice supervisor.

Condition three is now met.

The programme team has provided an implementation plan for the preparation and support of practice assessors and practice supervisors. Dates have been identified for the delivery of update sessions and the programme team have implemented a process of monitoring the uptake of the update sessions.

Condition four is now met.

The programme team has removed the term mentor from the practice portfolio.

Condition five is now met.

**Date condition(s) met:** 8 December 2021

**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: 18 November 2021

**Post event review**

<b>Identify how the condition(s) is met:</b>	
N/A	
<b>Date condition(s) met:</b>	
N/A	
<b>Revised outcome after condition(s) met:</b>	<b>MET</b> <input type="checkbox"/> <b>NOT MET</b> <input type="checkbox"/>
N/A	

**Section four**

**Sources of evidence**

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

<b>Key documentation</b>	<b>YES</b>	<b>NO</b>
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: One first year mental health student Two first year adult nursing students One second year adult nursing student One third year adult nursing student.		
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 checked="" type="checkbox"/>	<input type="checkbox"/>
Library facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Technology enhanced learning Virtual learning environment	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Educational audit tools/documentation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Practice learning environments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If practice learning environments are visited, state where visited/findings:		
If you stated no above, please provide the reason and mitigation: Educational audit tools viewed prior to visit. The university is an established provider of undergraduate nursing, PLP visits are not required for post registration provision.		
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.

**Issue record**

**Final Report**

Author(s):	Rose Havelock	Date:	18 November 2021
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Submitted by:	Shahzaib Ghafoor	Date:	20 December 2021
Approved by:	Leeann Greer	Date:	21 December 2021