

Programme approval visit report

Section one

<p>Programme provider name:</p>	<p>London South Bank University</p>
<p>In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i></p>	<p>Barts Health NHS Trust SW London and St Georges NHS Foundaton Trust The Royal Free NHS Foundation Trust South London and Maudsley NHS Trust NELFT includes Redbridge, Havering, Barking & Dagenham and Waltham Forest Oxleas NHS Foundation Trust London North West Healthcare NHS Trust Croydon Health Services NHS Trust Cambridge University Hospitals NHS Foundation Trust Kingston Hospital NHS Trust Guy's and St Thomas' NHS Foundation Trust Chelsea & Westminster Hospital NHS Foundation Trust Great Ormond Street Hospital for Children NHS Trust East Kent Hospitals University NHS Foundation Trust East London NHS Foundation Trust St Georges University Hospitals NHS Foundation Trust Essex Partnership University NHS Foundation Trust (EPUT) St Georges Healthcare NHS Trust</p>

	<p>Barking Havering and Redbridge Hospitals NHS Trust</p> <p>King's College Hospital NHS Foundation Trust</p> <p>North Middlesex University NHS Trust</p> <p>Lewisham & Greenwich NHS Trust</p> <p>Epsom & St Helier NHS Trust</p> <p>Royal National Orthopaedic Hospital NHS Trust</p> <p>Central and North West London NHS Foundation Trust</p> <p>Kings College Hospital NHS Trust</p> <p>Barking Havering and Redbridge Hospitals NHS Trust</p> <p>Royal Brompton & Harefield NHS Foundation Trust</p> <p>Addenbrookes hospital NHS Trust</p> <p>Colchester Hospital University Trust</p> <p>Dartford & Gravesham NHS Trust</p> <p>Kent and Medway NHS Trust</p> <p>Luton & Dunstable NHS Trust</p> <p>Norfolk & Norwich university hospitals Trust</p> <p>The Princess Alexandra Hospital Trust</p> <p>University Hospitals Leicester</p> <p>University Hospitals Southampton NHS Trust</p> <p>West London mental health NHS Trust</p> <p>Imperial College Healthcare NHS Trust</p> <p>North East London Foundation Trust</p> <p>The Royal Marsden NHS Foundation Trust</p> <p>University College London Hospitals NHS Foundation Trust</p> <p>Homerton University Hospitals Trust</p>
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	Basildon & Thurrock University Hospital NHS Trust Private, voluntary and independent health care providers'
Programmes reviewed:	Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V150 <input type="checkbox"/> Community practitioner nurse prescribing V100 <input checked="" type="checkbox"/>
Academic level:	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input checked="" type="checkbox"/> Level 6 <input checked="" type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
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 checked="" type="checkbox"/> Level 6 <input checked="" type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Title of programme(s):	Non-Medical Prescribing (V300) Community practitioner nurse prescribing (V100)
Date of approval visit:	30 May 2019

<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>	<p>16 September 2019</p> <p>N/A</p> <p>16 September 2019</p>
<p>QA visitor:</p>	<p>Bernadette Martin</p>

Section two

Summary of review and findings

London South Bank University (LSBU), school of health and social care (the school) presented the independent and supplementary nurse prescribing (V300) preparation programme and the community practitioner nurse prescribing (V100) for approval. The programmes are clearly mapped against the NMC Standards for prescribing programme (NMC, 2018) and Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency framework for all prescribers (NMC, 2018).

The non-medical prescribing V300 award at academic level six and seven is delivered over 26 weeks. It is accessed by nurses completing the MSc advanced clinical practice (ACP) and specialist practitioner qualification district nursing (SPQ DN) programmes. It can be studied as a standalone programme at academic levels six and seven. V300 is an option for SPQ DN students who must demonstrate they meet the requirements for V100 through a mapping exercise.

The prescribing from the community practitioner formulary V100 award at academic level six and seven is a distinct module which is mandatory and integrated in the specialist practitioner qualification, district nursing (SPQ DN) and an option in the specialist community public health nursing (SCPHN) programme.

Documentary analysis and the approval process demonstrates evidence of partnership working with key stakeholders. The partnership between LSBU and practice learning partners (PLPs) is demonstrated through engagement at an operational and strategic level. There's evidence of communication between the programme development teams delivering the programmes and PLPs to ensure that the student experience is consistent and comparable across practice learning environments.

Issues raised in Care Quality Commission (CQC) quality reports required the attention of LSBU and the associated PLPs to assure the quality of student placements. In all cases there was a triangulated approach including feedback from students and evidence from educational audits had been used to determine suitability of practice learning environments. Where required, action plans have been developed in collaboration with PLPs and are monitored in relation to the achievement of developmental action. The programme team and PLPs tell us that there was no impact on the student learning environment in the programmes being reviewed.

The V300 programme development team are commended by the approval panel for their responsiveness to meet a service request to deliver a specific paediatric prescribing cohort.

The programmes are recommended to the NMC for approval with four conditions. There is one university condition.

One recommendation is made. There are two university recommendations.

Updated 26 June 2019.

Evidence was provided that the changes required to meet the four conditions have been made. The university condition is also met. The conditions are met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	<p>Programme is recommended to the NMC for approval <input type="checkbox"/></p> <p>Programme is recommended for approval subject to specific conditions being met <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p>
<p>Conditions:</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>Effective partnership working: collaboration, culture, communication and resources</p> <p>Condition one: The programme documentation must evidence the role of the lead midwife for education (LME) and detail how they will work in collaboration with students, practice supervisors, assessors and academic assessors. (Standards for prescribing programmes. (SPP) R4.4)</p> <p>Selection, admission and progression</p> <p>None identified</p> <p>Practice learning</p> <p>None identified</p> <p>Assessment, fitness for practice and award</p> <p>None identified</p> <p>Education governance: management and quality assurance</p> <p>Condition two: Make explicit how the governance arrangements are directly and appropriately applied to V300 applicants including self-employed or non-NHS employed registrants at application and in the practice learning environment. (SPP R1.3 and R3.1)</p> <p>Condition three: Make explicit how practice supervisors, assessors and academic assessors will be prepared to support and assess students in the</p>

	<p>practice learning environment. (Standards framework for nursing and midwifery education (SFNME) R2.4; Standards for student supervision and assessment (SSSA) R5.1, R5.2, R8.1, R8.2; SPP R4.1, R4.2)</p> <p>Condition four: Thoroughly review the documentation to provide definitive programme documents that accurately and consistently reflect the practice supervisor, assessor and academic assessor terminology. (SSSA R7.11; SPP R4.2)</p> <p>Condition five: To provide a thorough review of the programme documentation to address typographical errors and inconsistencies and to make corrections as detailed in the approval minutes. (University condition)</p>
Date condition(s) to be met:	27 June 2019
Recommendations to enhance the programme delivery:	<p>Recommendation one: Monitor and continue to enhance the service user and carer involvement in future programme development, recruitment, delivery and assessment of the programme. (SFNME R1.12)</p> <p>Recommendation two: Consider further exploiting technology enhanced learning in promoting collaborative student learning, assessment and feedback. (University)</p> <p>Recommendation three: Explore the options for the development of an E-portfolio. (University)</p>
Focused areas for future monitoring:	Enhancements to service user and carer involvement across the programmes.

Programme is recommended for approval subject to specific conditions being met

Commentary post review of evidence against conditions

Revised documentation provides evidence that the changes required to meet the conditions have been made.

The programme team provided revised documentation which clearly states how the lead midwife for education (LME) is involved in the programmes. Condition one is now met.

Revised documentation clearly details how governance arrangements are applied across the V300 programme. Condition two is now met.

Documentation is presented which details the preparation of practice supervisors, assessors and academic assessors and how they will support students in the practice learning environment. Condition three is now met

The programme team have made amendments to the programme documentation to accurately reflect practice supervisor, assessor and academic assessor terminology. Condition four is now met.

The programme team have reviewed and amended the programme documentation to address typographical errors and inconsistencies as detailed in the approval minutes. Condition five is now met (University condition)

AEI Observations	Observations have been made by the education institution YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Summary of observations made, if applicable	The AEI confirmed the factual accuracy of the report.
Final recommendation made to NMC:	Programme is recommended to the NMC for approval <input checked="" type="checkbox"/> Recommended to refuse approval of the programme <input type="checkbox"/>
Date condition(s) met:	27 June 2019

Section three

NMC Programme standards
<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>

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

We found examples of effective and positive partnership working between LSBU and key stakeholders. The programme teams and representative stakeholders at the approval visit tell us the design and proposed delivery of the V300 and V100 programmes meet the Standards for prescribing programmes (NMC, 2018) and the Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency framework for all prescribers)

(NMC, 2018). The programme teams have multi-professional backgrounds which supports the interprofessional V300 programme.

There's documentary evidence of consultation with external examiners, students, service user and carers and PLPs; this was confirmed at the approval visit. V100 PLPs tell us they have been consulted about the redevelopment of the SPQ DN and the V100. Most V300 PLPs representatives who support the V300 programme tell us that they have been involved in the V300 programme specific consultation. PLPs know about the SSSA (NMC, 2018), the SPP (NMC, 2018) and the Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency framework for all prescribers) (NMC, 2018).

PLPs tell us about the effective partnership with the V300 programme team and their responsiveness to service need. An ACP paediatric V300 programme is delivered to meet the needs of the children's specialist services. The panel commended the programme team on their responsive approach to meeting service need.

Documentary evidence and confirmation at the approval visit confirms the student voice is captured through programme evaluations. The V300 programme evaluations are undertaken at mid-point in the programme, students meet with the programme team; feedback on actions is reported at the annual programme board. An online evaluation is undertaken on completion of the programme.

The V100 programme is evaluated through the respective specialist community programmes; all modules are evaluated and reported in the annual programme monitoring report. This is reported through the LSBU quality assurance process, actions required are implemented and reviewed. There are communication strategies in place to ensure consistency within practice learning environments; student facing documentation details how practice supervisors, assessors and academic assessors will monitor progress and achievement. Students tell us that their respective programme teams listen to their views and address any issues they have appropriately. They confirm that they undertake evaluation and are represented at programme boards. Student representatives are identified through a student election process and attend the respective programme boards.

The school has an active service user and carer (SUC) strategy through the people's academy which has been developed to ensure that people can influence the education of health and social care professionals. There's clear evidence that service users and carers have been included in the development of the programmes. The service user and carer representatives describe their role within the people's academy; how this ensures comprehensiveness for the school to achieve the inclusion, collaboration and participation of service user and carer engagement in all aspects of the school's activity.

One SUC representative explained how they are involved in supporting and increasing the confidence of new members involved in health-related education. The people's academy members are embedded in pre-registration nursing education and the membership is increasing to include other programmes across the school. They tell us that they receive equality and diversity training as part of the people's academy which is a requirement of the membership of the people's academy. One service user is actively involved with the V300 programme and regularly contributes to the programme. They tell us about their contribution to seminars, presentations and the practical assessment which involves for example, service users and carers being prepared for the practical assessment scenarios.

SUCs tell us that the programme team communicate information in a timely manner; they described their role in programme development through consultation

and programme boards. They tell us that they receive feedback on their contribution, and they feel that they are a valued part of the team. They confirm involvement in the development of the V300 programme through attendance at the programme board.

Another SUC representative told us about their involvement in the SPQ DN programme. In terms of the V100 programme they tell us this involvement is more limited however they feel valued and well prepared by the SPQ DN team for the activities they are involved with. They confirm that they have been included in the SPQ DN programme development process and would welcome further inclusion in the programmes for example in student recruitment. Students tell us about how service users and carers are involved in their programmes. The programme team should consider further strategies for enhancing the role of the SUCs particularly in the V100 programme. (Recommendation one)

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

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 not met. The programme team tell us that V300 applicants must have agreed protected learning evidenced in the statement of commitment. Some V300 students tell us that they had issues with achieving protected practice learning time.

The LSBU programme leads who teach on the V100 programme are involved in a strength-based interview model which includes questions set by a SUC representative who works with the programme team.

The programme team are not able to clearly confirm how governance arrangements on application to the programme will be applied for self-employed or non-NHS employed registrants. The programme team must confirm what mechanisms will be operationalised to address this and that learning in practice for all students is comparable. (Condition two) (SPP R1.3 and R3.1)

- 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.

The programme team confirm that no students will transfer to the proposed programmes.

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**

There's no evidence of how governance structures are applied to V300 self-employed or non-NHS employed registrants on application to the programme, and how this is related to all students in the practice learning environment. (Condition two)

Condition two: Make explicit how the governance arrangements are directly and appropriately applied to V300 applicants including self-employed or non-NHS employed registrants on application to the programme and that learning in practice is comparable for all students. (SPP R1.3 and R3.1)

Date: 30 May 2019

Post event review

Identify how the condition(s) is met:

Condition two: The programme team provided revised documentation which clearly details the process for how the governance arrangements are applied to self-employed or non-NHS employed registrants on application to the programme. All practice learning environments must meet the requirements of an educational audit ensuring comparable practice learning for all students.

Condition two is now met.

Evidence:

Revised V300 programme handbook, level six, 2019, undated
 Revised V300 programme handbook, level seven, 2019, undated
 Revised V300 practice assessor's handbook, 2019-2020, undated

Date condition(s) met: 27 June 2019

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

Condition two is now met.

Assurance is provided that the SPP R1.3 and R3.1 are now met

Standard 2: Curriculum

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

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

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

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

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

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

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

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

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

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

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. The V300 and V100 programmes promote personal development; students are encouraged to reflect on their learning, performance and achievement. Within this approach they are encouraged to plan and map their personal educational and career development. Learning and teaching methods include lectures, seminars, self-directed learning and tutorials. The virtual learning environment (VLE) supports access to online resources.

Practice learning is evidenced through a portfolio which is used to support achievement of the RPS (2016) Competency framework for all prescribers.

- 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: 30 May 2019

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 not met. Documentary evidence and discussions at the approval visit confirm that suitable and effective arrangements and governance for practice learning are in place for NHS employed registrant applicants to the programmes. This is assured through effective partnership working between the programme team and PLPs. Prescribing and education leads and managers from stakeholder organisations are involved in the selection process for their organisation. They sign to confirm arrangements are in place for practice learning support, supervision and assessment.

The programme team couldn't clearly confirm how governance arrangements at application and for protected learning time during the programme will be applied for self-employed or non-NHS employed registrants. There must be assurance that comparable governance arrangements are in place. The panel further agreed that these governance mechanisms must be in place and operationalised to ensure protected learning for all students. (Condition two) (SPP R1.3 and R3.1)

Issues were raised in CQC quality reports which required the attention of LSBU and the associated PLPs to assure the quality of practice learning environments. In all cases there was a triangulated approach including feedback from students and evidence from educational audits had been used to determine suitability of practice learning environments. Where required, action plans have been developed in collaboration with PLPs and are monitored to ensure development plans are achieved. Scrutiny of a spreadsheet detailing actions taken appeared to mitigate any risks to students' practice learning; issues have been escalated to the NMC. The programme team and PLPs tell us that there was no impact on the practice learning environment in the programmes.

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

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

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

MET **NOT MET**

R3.3 is met. The VLE is used to support learning; a blending learning approach is used which the programme documentation states will support different learning styles. Online live chats, recorded lectures and ore reading supports a flip classroom approach. Students tell us the resources are good and useful in supported their learning. They did identify some issues with the VLE which they tell us are resolved and did not significantly impact on their learning. Students studying the V300 programme report that they have encountered IT issues which impacted on their early engagement with the programme however when resolved there was no further issues.

Students shared their thoughts on the V300 practice assessment document which they have found challenging as they could not wholly complete this online. There was wider discussion with the practice supervisors and assessors about the challenges of using IT in the practice learning environment. However, they think that an online practice assessment document or e-portfolio would reduce the burden on them and the students.

The approval panel recommended that the programme team further enhance technology to promote and support student learning. (Recommendation two)

The programme team should consider if there are any opportunities to develop an e-portfolio. (Recommendation three)

- 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

The programme team couldn't clearly confirm how governance arrangements on application and for protected learning time during the programme will be applied for self-employed or non-NHS employed registrants. There must be assurance that comparable governance arrangements are in place and operationalised to ensure protected learning for all students. (Condition two)

Condition two: Make explicit how the governance arrangements are directly and appropriately applied to V300 applicants including self-employed or non-NHS employed registrants on application to the programme and that learning in practice is comparable for all students. (SPP R1.3 and R3.1)

Date: 30 May 2019

Post event review

Identify how the condition(s) is met:

Condition two: The programme team provided revised documentation which confirms comparable governance arrangements are in place to ensure comparable protected learning for all students. Protected learning for self-employed or non-NHS employed registrants will be monitored by the academic assessor.

Condition two is now met.

Evidence:

Revised V300 programme handbook, level six, 2019, undated

Revised V300 programme handbook, level seven, 2019, undated

Revised V300 practice assessor's handbook, 2019-2020, undated

Date condition(s) met: 27 June 2019

Revised outcome after condition(s) met:

MET

NOT MET

Condition two is now met.

Assurance is provided that the SPP R1.3 and R3.1 are now met.

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 not met. Educational audits are completed to ensure that appropriate systems and processes are in place to support student learning.

V100 is included in the educational audit for the SPQ DN and SCPHN programmes; this supports the V300 option in the SPQ DN programme. At application to the V300 programme a placement audit must be completed which details the practice learning information to ensure that the placement can support prescribing learners. Practice learning is evaluated. There's communication between the practice assessor and through the programme leaders and academic assessors to identify and address any issues related to practice learning. Students are advised about, and have access to, the procedure for raising a concern in the university and within the practice learning environment. PLPs have processes in place to support students in raising a concern which is confirmed as part of the educational audit.

The V100 documentation states that practice supervisors and assessors will be prepared through attendance at six development days that the university offer. PLPs maintain the practice supervisor and assessor register. The V300 documentation states practice supervisors and assessors will be prepared through an initial discussion and by email, telephone or Facetime.

At the approval visit we found PLPs and the programme team are not able to clearly describe how this preparation for both programmes will be operationalised.

The preparation of the academic assessor for their role in supporting students is also not clear. There must be an implementation plan for how practice supervisors, assessors and academic assessors will be prepared to support students on both programmes. (Condition three)

- 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. There are clear policies and frameworks to support student supervision, learning and assessment. The educational audit process identifies the availability of a nominated person who will actively support students in practice learning. At the approval visit prescribing and educational leads tell us that they undertake the role of ensuring practice support for students on the V300 programme; this is evidenced the statement of commitment which must be completed by them. The V100 process is managed through the wider and SPQ DN

and SCPHN programmes and ensures that prescribing supervision, learning and assessment isn't compromised.

At the approval visit we found no sound evidence of preparation for practice supervisors and assessors for the V100 and V300 programmes. The preparation of the academic assessor for their role in supporting students is also not clear.

There must be an implementation plan for how practice supervisors, assessors and academic assessors will be prepared to support students on both programmes. (Condition three) (SFNME R2.4: SSSA R5.1, R5.2, R8.1, R8.2; SPP R4.1, R4.2)

The programme documentation details the practice supervisor, assessor and academic roles. However, there are inconsistencies across the documents in relation to the accurate use of the titles for practice supervisors, assessors and academic assessors. This must be addressed to reflect the requirements of the SSSA. (Condition four) (SSSA R7.11. SPP R4.2)

- 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

R4.4 is not met. There's no clear indication in the programme documentation about the involvement of the LME. The documentation only makes reference to progression issues will be discussed with the LME. The programme team tell us that the LME will meet with and support midwifery students on the V300 programme. The LME will support the practice assessor if there are any issues identified in the practice learning environment. This will be facilitated through the academic midwifery team who have practice link roles; they will report issues to the LME who will liaise with the practice and academic assessors. The LME was unable to attend the approval visit and was represented by a member of the midwifery academic team who confirmed this would be the process.

The V100 programme documentation doesn't refer to the LME. The programme team and PLPs tell us that midwives don't traditionally access the SPQ DN or SCPHN programmes. The panel agreed that the V100 documentation should clearly state midwives can't access the programmes or refer to the role of the LME in the programme documentation.

The programme documentation must evidence the role of the LME and detail how they will work in collaboration with students, practice supervisors, assessors and academic assessors. (Condition one) (SPP R4.4)

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. Documentary evidence confirms there are guidelines and processes in place to assign each student to a practice assessor who is both a registered healthcare professional and an experienced prescriber. The PLPs and programme team tell us that for V300 students this is confirmed at application; for V100 students this is confirmed through the sponsorship process. There's a clear plan for the management in exceptional circumstances if the same person fulfils the role of practice supervisor and practice assessor. The programme team tell us that this is identified at the point of the student's application and closely monitored by the academic assessor through the V300 practice portfolio and V100 practice assessment document. If there's an exceptional need to change the practice assessor during the programme the programme team would consider each student individually. If a student requires additional time to complete their programme, this is facilitated through the university formal process to enable the student to complete the practice hours in order to ensure a valid assessment of practice. This is closely monitored by the academic assessor and the assessment moderation processes to ensure the student's practice learning and assessment are not affected.

- 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**

There's limited evidence of how practice supervisors, assessors and academic assessors will be prepared for the supervision and assessment of students. (Condition three) (SFNME R2.4: SSSA R5.1, R5.2, R8.1, R8.2; SPP R4.1, R4.2)

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

YES **NO**

We found no sound evidence of preparation for practice supervisors and assessors for the V100 and V300 programmes. The preparation of the academic assessor for their role in supporting students is also not clear.

There must be an implementation plan for how practice supervisors, assessors and academic assessors will be prepared to support students on both programmes. (Condition three) (SFNME R2.4: SSSA R5.1, R5.2, R8.1, R8.2; SPP R4.1, R4.2)

SSSA R7.11 requires the accurate use of the titles for practice supervisors, assessors and academic assessors. (Condition four) (SSSA R7.11. SPP R4.2)

Outcome

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

There is no clear evidence about the involvement of the LME in the V300 programme. (Condition one)

Condition one: The programme documentation must evidence the role of the LME in and detail how they will work in collaboration with students, practice supervisors, assessors and academic assessors. (SPP R4.4)

We found no sound evidence of preparation for practice supervisors and assessors for the V100 and V300 programmes. The preparation of the academic assessor for their role in supporting students is also not clear.

There must be an implementation plan for how practice supervisors, assessors and academic assessors will be prepared to support students on both programmes. (Condition three)

Condition three: Make explicit how practice supervisors, assessors and academic assessors will be prepared to support and assess students in the practice learning environment. (SFNME R2.4: SSSA R5.1, R5.2, R8.1, R8.2; SPP R4.1, R4.2)

Practice supervisor, assessor and academic assessor terminology is not consistent across the documentation. (Condition four)

Condition four: Thoroughly review the documentation to provide definitive programme documents that accurately and consistently reflect the practice supervisor, assessor and academic assessor terminology. (SSSA R7.11. SPP R4.2)

Date: 30 May 2019

Post event review

Identify how the condition(s) is met:

Condition one:

Revised documentation now clearly identifies the LME involvement in the programmes. The V300 assessment guide and practice assessor handbook details the role of the LME for midwifery students. The SPQ DN revalidation, rationale and overview document details the role of the LME for V100 students.

Condition one is now met.

Evidence:

Revised V300 assessment guide, 2019 – 2020, undated

Revised V300 practice assessor's handbook, 2019 -2020, undated

Revised revalidation of an existing programme, rationale and overview, BSc (Hons) district nursing (V100), postgraduate diploma district nursing (V100), June 2019

Condition three: The programme teams presented revised documentation which makes explicit the preparation of practice supervisors, assessors and academic assessors. The V300 module handbooks and SPQ DN portfolio and assessment document detail the preparation and support provided. The revised assessment guide provides further evidence of how practice supervisors and assessors and academic assessors will support practice learning.

Condition three is now met.

Evidence:

Revised V300 programme handbook, level six, 2019, undated

Revised V300 programme handbook, level seven, 2019, undated

Revised V300 assessment guide, 2019 - 2020, undated

Revised postgraduate diploma, BSc (Hons) district nursing portfolio assessment document including practice assessor handbook, September 2019-2020, undated

Condition four: The programme teams have revised the programme documentation which accurately reflects practice supervisor, assessor and academic assessor terminology. All documentation has been reviewed and amended.

Condition four is now met.

Evidence:

Revised V300 programme handbook, level six, 2019, undated

Revised V300 programme handbook, level seven, 2019, undated

Revised V300 assessment guide, 2019 – 2020, undated

Revised V300 practice assessor’s handbook, 2019 -2020, undated

Revised module descriptor prescribing from the community practitioner formulary, V100, undated

Date condition(s) met: 27 June 2019

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: 30 May 2019

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"/>

<p>Written confirmation by the education institution and associated practice learning partners to support the programme intentions.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>List additional documentation:</p> <p>Overview of the programme by the programme team, 30 May 2019</p> <p>CQC reports, various dates</p> <p>NMC, AEI and PLPs annual self-assessment report, 2018-2019</p> <p>Mapping of V300 to V100 Standards for prescribing programmes, undated</p> <p>LSBU, people’s academy handbook, undated</p> <p>LSBU school of health and social care people’s academy, undated</p> <p>LSBU, statement of commitment to undertake the preparation for independent and supplementary prescribing, undated</p> <p>LSBU, non-medical prescribing V300, agreement for supervision with practice assessor, undated</p> <p>LSBU, screenshot, application portal, V300 academic level six, undated</p> <p>LSBU, screenshot, application portal, V300 academic level seven, undated</p> <p>Post event evidence to meet conditions:</p> <p>V300 programme team's response to condition, undated</p> <p>V100 programme team's response to condition, undated</p> <p>Revised V300 programme handbook, level six, 2019, undated</p> <p>Revised V300 programme handbook, level seven, 2019 undated</p> <p>Revised V300 assessment guide, 2019 – 2020, undated</p> <p>Revised V300 practice assessor’s handbook, 2019-2020, undated</p> <p>Revised module descriptor prescribing from the community practitioner formulary, V100, undated</p> <p>Revised revalidation of an existing programme, rationale and overview, BSc (Hons) district nursing (V100), postgraduate diploma district nursing (V100), June 2019</p> <p>Revised postgraduate diploma, BSc (Hons) district nursing portfolio assessment document including practice assessor handbook, September 2019-2020</p>		
<p>If you stated no above, please provide the reason and mitigation</p>		
<p>Additional comments:</p>		

The V300 programme team arranged for the panel to have a telephone meeting with one designated medical practitioner (DMP) however they could not be contacted due to being unavailable at the time arranged.

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: V100 2018-2019 SPQ DN cohort V300 2018-2019 cohort		
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation		
Additional comments		

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	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Virtual learning environment		
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 Not necessary as an established AEI.		
Additional comments:		

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Issue record

Final Report

Author:	Bernadette Martin	Date:	10 June 2019
Checked by:	Judith Porch	Date:	12 August 2019
Approved by:	Leeann Greer	Date:	28 August 2019
Submitted by:	Holly Stallard	Date:	21 August 2019