

**Programme approval visit report**

**Section one**

<b>Programme provider name:</b>	University of Bolton
<b>In partnership with:</b> <i>(Associated practice learning partners involved in the delivery of the programme)</i>	Lancashire Teaching Hospitals NHS Trust Bolton NHS Foundation Trust Pennine Acute Hospitals NHS Trust - Now part of Northern Care Alliance Pennine Care NHS Foundation Trust Salford Royal NHS Foundation Trust, Part of Northern Care Alliance Wigan Wrightington and Leigh NHS Foundation Trust Manchester University NHS Foundation Trust Greater Manchester Mental Health NHS Foundation Trust
<b>Programmes reviewed:</b>	Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V150 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V100 <input checked="" type="checkbox"/>
<b>Academic level:</b>	
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 checked="" 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 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>Title of programme(s):</b>	AdvDip(CPD) Non Medical Independent and Supplementary Prescribing for Nurses and Midwives AdvDip(CPD) Advanced Professional Development – Nurse Prescribing without a Specialist Practitioner Qualification V150 Community Nurse Prescribing (V100)
<b>Date of approval visit:</b>	3 July 2019
Programme start date: Independent and supplementary nurse prescribing V300 Community practitioner nurse prescribing V150 Community practitioner nurse prescribing V100	<div style="border: 1px solid black; padding: 2px; width: fit-content; margin-bottom: 5px;">23 September 2019</div> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin-bottom: 5px;">23 September 2019</div> <div style="border: 1px solid black; padding: 2px; width: fit-content;">16 September 2019</div>
<b>QA visitor:</b>	Bernadette Martin

**Section two**

**Summary of review and findings**

The University of Bolton (UoB), faculty of health and wellbeing (the faculty) presented the independent and supplementary nurse prescribing (V300) preparation programme and the community practitioner nurse prescribing (V100 and V150) 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 students completing the MSc advanced clinical practice (ACP) programme. It can be studied as a standalone programme at academic levels six and seven. Prescribing from the community practitioner formulary V100 award at academic level six is a distinct module which is mandatory and integrated in the specialist practitioner qualification, district nursing (SPQ DN) and integrated in the specialist community public health nursing (SCPHN) programmes. The prescribing from the community practitioner formulary V150 is a standalone award at academic level six.

The BSc (Hons) and postgraduate diploma SPQ DN and SCPHN programmes proposal is to adopt the Standards for student supervision and assessment (SSSA, 2018) there are no further modifications to these programmes.

Documentary analysis and the approval process demonstrates evidence of partnership working with key stakeholders. The partnership between UoB 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 student experience is consistent and comparable across practice learning environments.

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

The programmes are recommended to the NMC for approval subject to three conditions. There are two university conditions. The visitor made two recommendations

Updated 31 July 2019

Evidence is provided to meet the three conditions and the university conditions. All conditions are met. The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
<p><b>Recommended outcome to the NMC:</b></p>	<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><b>Conditions:</b></p> <p><i>Please identify the standard and requirement the condition relates to under the relevant key risk theme.</i></p> <p><i>Please state if the condition is AEI/education institution in nature or specific to NMC standards.</i></p>	<p><b>Effective partnership working: collaboration, culture, communication and resources</b></p> <p>None identified</p> <p><b>Selection, admission and progression</b></p> <p>Condition four: The programme specifications must clearly state how the entry numeracy test will be applied across all applicants. (university condition)</p> <p><b>Practice learning</b></p> <p>None identified</p> <p><b>Assessment, fitness for practice and award</b></p> <p>Condition one: The V150 and V100 students must undertake a robust numeracy assessment within a controlled environment with a pass mark of 100 percent. (SFNME R2.1; Standards for prescribing programmes (SPP) R4.9)</p> <p><b>Education governance: management and quality assurance</b></p> <p>Condition two: The V300 and V150 practice portfolios must be amended to explicitly detail the involvement of the academic assessor in the assessment of practice. (SFNME R2.4; SSSA R9.4; SPP R4.2)</p> <p>Condition three: Thoroughly review the documentation to provide definitive programme documents that accurately and consistently detail the role of the practice supervisor, practice assessor and academic assessor. (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 identified by the approval panel including references to inter alia key information sets data, assessment regulations and remove the information related to the recruitment of international students. (university condition)</p>

<b>Date condition(s) to be met:</b>	31 July 2019
<b>Recommendations to enhance the programme delivery:</b>	<p>Recommendation one: Monitor and continue to enhance the service user and carer involvement in future development, recruitment, delivery and assessment of the programmes. (SFNME R1.12)</p> <p>Recommendation two: The faculty management team continue to proactively monitor and review the resources available to continue to effectively deliver the programmes. (SFNME R2.14; SPP R4.2)</p>
<b>Focused areas for future monitoring:</b>	<p>Enhancements to service user and carer involvement across the programmes.</p> <p>Monitor resources are in place to continue to effectively deliver the programmes.</p>

<b>Programme is recommended for approval subject to specific conditions being met</b>	
<b>Commentary post review of evidence against conditions</b>	
<p>The V150 and V100 programme teams have included a numeracy assessment which is undertaken in controlled examination conditions; the pass mark is 100 percent. This provides evidence condition one is met.</p> <p>The V300 and V100 practice portfolios now accurately and consistently detail the role of the academic assessor in the assessment of practice. This provides evidence condition two is met.</p> <p>The programme teams have reviewed and amended all documentation to ensure practice supervisor, assessor and academic assessor roles are clearly and consistently detailed. This provides evidence changes required to meet condition three are 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>	31 July 2019

**Section three**

**NMC Programme standards**

Please refer to NMC standards reference points

*Standards for prescribing programmes* (NMC, 2018)

*Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers)*  
(NMC, 2018)

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

*Standards for student supervision and assessment* (NMC, 2018)

The Code: Professional standards of practice and behaviour for nurses and midwives (NMC, 2015)

QA Framework for nursing, midwifery and nursing associate education (NMC, 2018)

QA Handbook (October 2018)

**Partnerships**

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

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

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

**Standard 1: The learning culture:**

R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders

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

**Standard 2: Educational governance and quality:**

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

R2.4 comply with NMC *Standards for student supervision and assessment*

R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of

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

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

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

**Standard 3: Student empowerment:**

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

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

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

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

**Standard 4: Educators and assessors:**

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

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

R4.10 share effective practice and learn from others

**Standard 5: Curricula and assessment:**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**Findings against the standard and requirements**

**Provide an 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**

There's effective and positive partnership working between UoB and key stakeholders. The programme teams and representative stakeholders at the approval visit say the design and proposed delivery of the V300, V150 and V100 programmes meet the Standards for prescribing programmes (NMC, 2018) and the Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency framework for all prescribers) (NMC, 2018). Documentary evidence and confirmation at the approval visit confirms that the proposed change to the

specialist community programmes is the adoption of the SSSA (NMC, 2018). The programme teams say the programmes continue to meet and deliver the Standards for SPQ DN (NMC, 2001) and SCPHN (NMC, 2004).

The programme teams include registered nurses with relevant field specific and NMC prescribing qualifications and a pharmacist. The programme team tell us the V300 programme is further supported by practising multi-professional prescribers who contribute to teaching and assessment activities enhancing collaboration across the interprofessional V300 programme. There's documentary evidence of consultation with students, service user and carers and PLPs; this is confirmed at the approval visit. V100 PLPs tell us they're consulted about the redevelopment of the V100 and the transfer of the SPQ DN and SCPHN programmes to the SSSA (NMC.2018).

Most V300 and V150 PLPs representatives who support the programmes tell us that they're involved in the V300 and V150 programme specific consultation. They tell us they're aware of or 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 programme teams; they describe the regional collaborative partnership which further confirms sound partnerships.

Documentary evidence and the approval visit confirms the student voice is captured through programme evaluations. The programmes' practice portfolios facilitate ongoing evaluation; students from all programmes tell us they feel well supported to share their views and that programme teams act upon any issues. Formal evaluations are undertaken at the end of V300 and V150 programmes, the outcome of any actions is reported at the annual programme board. The V100 programme is evaluated through the respective specialist community programmes; all modules are evaluated and reported through the annual programme monitoring reports. This is reported through the university quality assurance process where actions required are implemented and reviewed.

There are communication strategies in place to ensure consistency within practice learning environments; programme documentation details how practice supervisors, practice assessors and academic assessors will monitor progress and achievement. Students confirm they undertake evaluation and are represented at programme boards. Students tell us they are exceptionally well supported by their respective programme teams.

The school has an established service user and carer strategy. There's clear evidence that service users and carers are included in the development of the programmes. The service user and carer representatives describe their role within the respective programmes. One service user and carer representative explained how they're involved in the development of service user and carer handbook. They receive training and preparation for their roles which includes equality and diversity training. There's evidence that the V100 programme actively includes service user and carers across the specialist community programmes. They confirm their contribution to interviews, examination invigilation and feedback in the practice portfolio. Their inclusion in the V300 and V150 is limited however they recently met

with programmes teams to explore future involvement in the programmes and welcome the opportunity to contribute to programmes which directly impact on patient safety. (Recommendation one) (SFNME R1.12)

Service users and carers tell us community specialist programme teams communicate information in a timely manner; they described their role in programme development through consultation and programme boards. They tell us they receive feedback on their contribution.

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 met. Across the north west region there's a nomination application form which is a collaborative approach to standardise applications across approved education institutions (AEIs) and NHS trusts and PLP organisations across the region. The nomination form is used to provide information on application about support mechanisms and protected learning time for students accessing the programme. Applicants must have employer support to undertake the programmes; clinical managers sign to confirm practice learning time will be protected. These arrangements are reviewed and agreed by the programme lead and the PLP non-medical prescribing lead (NMP). The NMP lead confirms applicants complete an online numeracy assessment as required by their employing organisation.

Applicants to the SPQ DN and SCPHN programmes are interviewed by their employer organisations; the online numeracy test is undertaken as part of the interview process.

The programme team tell us all applicants undertake the numeracy assessment and pass at 100 percent which is a requirement of the north west nomination form. PLPs and students confirm this process; they tell us there's an online numeracy test however some PLPs are not clear about the pass mark for the test. It is identified there are different approaches to this across organisations some tell us the pass rate is 80 percent. PLPs who're involved in the north west regional strategy group confirm they'll review this inconsistency.

Students tell us employers and practice assessors support their application evidenced by completion of the nomination form. This ensures support for protected practice learning, confirmation of clinical suitability to enter the programme and satisfactory disclosure and barring service (DBS) checking. UoB uses the north west learning environment educational audit tool to assess the effectiveness and safety of practice learning environments. All are subject to this educational audit process and are completed in partnership with PLPs and UoB. The audit process confirms learning environments meet SSSA and SFNME. PLPs are responsible for reporting changes such as concerns identified by systems regulators which mean students can be removed and reallocated. Practice placement areas without a satisfactory audit aren't used.

- 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; no students are interrupted from studies or returning to the programme.

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

YES  NO

**Outcome**

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

**Date:** 3 July 2019

**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. Students apply continued professional development across practice learning; they're encouraged to develop networks to support and reflect on their learning. Teaching and learning methods include lectures, seminars, self-directed learning and tutorials. The virtual learning environment (VLE) supports a blended learning approach with access to online resources. Students confirm teaching and online resources support their learning. One student reports an initial issue with access to the VLE which was resolved and didn't impact on their learning. Students value the responsiveness of the programme teams; they tell us they receive prompt replies to questions. They feel the learning and teaching strategy prepares them for prescribing practice.

Practice learning for all programmes is evidenced through a practice 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: 3 July 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 met. Documentary evidence and discussions at the approval visit confirm suitable and effective arrangements and governance for practice learning are in place for all applicants. This is assured by effective partnership working between the programme team and PLPs. NMP leads and managers from stakeholder organisations are involved in the selection process for their organisation. They confirm by signing the regional NMP nomination form that arrangements for practice learning support, supervision and assessment are in place.

For V300 applicants who are self-employed or non-NHS employed registrants there's further enhanced scrutiny in respect of governance arrangements at practice level. They complete the north west nomination form with additional criteria, including for example an educational audit undertaken by the programme lead in the practice learning environment. They must provide evidence of indemnity insurance and the practice supervisor and practice assessor must undertake face to face preparation for student supervision and assessment. Confirmation of protected learning time is provided at this point. Arrangements will be actively monitored by the programme lead.

The programme team tell us about additional supportive arrangements which will be in place for these students. This will include regular contact with students and practice assessors to ensure practice learning remains protected.

- 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. All learning and teaching resources are available on the VLE for students to access and download to support learning and assessment preparation. Students tell us online learning resources are signposted and accessible. They describe the resources as helpful and supportive of flexible learning strategies. The programme team describe how the health education England (HEE) standardised numeracy assessment tool process (SN@P) is used to further support the development of numeracy skills. They tell us students will have access to an online clinical skills forum which will support learning specific to prescribing practice.

Simulated prescription writing scenarios are used across the V100, V150 and V300 programmes. Practice portfolios require students to further develop prescription writing skills in practice through producing prescriptions as essential

portfolio evidence. V300 students have a timetabled simulated clinical management plan seminar and prescribing assessment skills development to prepare them for the object structured clinical examination in practice by their practice assessor.

Students undertake a range of activities in the practice portfolio which requires them to use online resources to evidence learning in practice.

- Processes are in place to ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC *Standards for student supervision and assessment* (R3.4) **YES**  **NO**

Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to practice learning are met **YES**  **NO**

Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to practice learning are met **YES**  **NO**

**Outcome**

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

**Date:** 3 July 2019

**Standard 4: Supervision and assessment**

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

R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC [Standards framework for nursing and midwifery education](#)

R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC *Standards for student supervision and assessment*

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

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

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

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

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

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

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

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

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

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

### Findings against the standards and requirements

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

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

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

**MET**  **NOT MET**

R4.1 is met. Regional educational audits are completed to ensure 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. At application to the V300 and V150 programmes a practice placement audit must be in place; if

it's not for non-NHS employed or self-employed applicants a member of the programme team will undertake this.

Practice learning is evaluated; students confirm providing formal and informal feedback on practice learning. 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 in 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. Students confirm they feel confident to discuss any concerns in the first instance with their practice assessor or programme lead.

The SPQDN and SCPHN programme documentation confirms practice supervisors and practice assessors attend meetings with the programme team on four occasions across the year. Practice assessors tell us that V100 is actively discussed as part of the meetings. PLPs maintain the practice supervisor and assessor register.

- 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 support students in the practice learning environment. At the approval visit NMP leads and senior managers tell us they undertake the role of ensuring practice support for students on the V300 and V150 programmes; this is evidenced by the nomination form which must be completed by them. The V100 process is managed through the wider SPQ DN and SCPHN programmes and ensures that prescribing supervision, learning and assessment isn't compromised.

There's a range of methods demonstrating how practice supervisors and assessors are being prepared for their roles. The faculty have developed factsheets for PLPs which detail how they will support preparation for all NMC programmes. The programme team tell us they're developing online materials to further enhance practice assessor information sites. Experienced prescribers who are approved by their employing organisations will be required to attend a prescribing preparation workshop before they can support students. Practice assessors and practice supervisors who will be supporting students undertaking the SPQ DN and SCPHN programmes and V100 tell us that they're working with the programme teams to prepare for the new programme. They tell us they feel prepared for their roles within SSSA. PLPs tell us about the greater Manchester strategic approach which has identified practice supervisors and assessors including those identified for all prescribing, SPQ DN and SCPHN programmes.

The programme team described the preparation of the academic assessors and how the faculty support the role. The faculty dean describes how the senior management team monitor the capacity of the academic teams to resource the programmes. In light of the increasing demand for the V300 programme, resources are continually monitored. (Recommendation two) (SFNME R2.14; SPP R4.2)

The V300 and V150 practice portfolios don't include evidence of how the academic assessor is involved in the practice assessment. This must be revised to include how the academic assessor contributes to the process. (Condition two) (SFNME R2.4; SSSA R9.4; SPP R4.2)

The programme documentation details the practice supervisor, practice assessor and academic roles. However, there's inconsistencies across the documents in relation to the accurate use of titles for practice supervisors, practice assessors and academic assessors. This must be addressed to reflect the requirements of the SSSA. (Condition three) (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

**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 for V300 and V150 students this is confirmed in the nomination form. This is confirmed for V100 students 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 this is identified at the point of application and closely monitored by the academic assessor.

- 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**

R4.9 is not met. V100, V150 and V300 students provide evidence of meeting RPS (2016) competencies in a practice portfolio. The practice assessor is responsible for monitoring student progress towards achievement. Practice supervisors are identified; they supervise and support learning. There are three formal meetings; initial, mid-point and at the end of the programme. Practice assessors and practice supervisors meet as required to monitor and record progress. The academic assessor will attend the final meeting; this may be face to face, or in a virtual format. The academic assessor will attend any meeting at the request of either the student or the practice assessor. Evidence of progression and achievement is recorded in the practice portfolio.

All students undertake a pharmacology exam which must be passed at 80 percent; V300 students undertake the 100 percent numeracy as part of this examination. V100 students complete three drug calculation scenario questions; V150 students complete six questions contained within the respective practice portfolios both must be passed at 100 percent. These questions must be submitted at the end of the programmes when students complete their practice portfolio. The rationale for this approach is students have undertaken a numeracy assessment at application. This approach isn't robust; the assessment isn't undertaken in an examination situation. The programme team couldn't provide a sound justification for the variation in numeracy assessment across the programmes. The programme teams

must develop a robust strategy to manage the V100 and V150 numeracy assessment. (Condition one) (SFNME R2.1; SPP R4.9)

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

YES  NO

There's no clear evidence of how the academic assessor is involved in practice assessment. (Condition two) (SFNME 2.4; SSSA R9.4; SPP R4.2)

There's no sound justification for variation in numeracy assessment across the programmes. (Condition one) (SFNME R2.1; SPP R2.1)

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

YES  NO

There's limited evidence of the role of academic assessor in the practice assessment documentation for the V300 and V150 programmes. The practice portfolios for both programmes must be revised to explicitly detail their roles within practice assessment. (Condition two) (SFNME 2.4; SSSA R9.4; SPP R4.2)

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

**Outcome**

**Is the standard met?**

MET  NOT MET

The V100 and V150 numeracy assessment strategy must be confirmed to assure a sound assessment strategy is in place.

Condition one: The V150 and V100 students must undertake a robust numeracy assessment within a controlled environment with a pass mark of 100 percent. (SFNME R2.1; SPP R4.9)

There's no clear evidence of how the academic assessor is involved in practice assessment.

Condition two: The V300 and V150 practice portfolios must be amended to explicitly detail the involvement of the academic assessor in the assessment of practice. (SFNME 2.4; SSSA R9.4; SPP R4.2)

SSSA requires accurate use of titles for practice supervisors, practice assessors and academic assessors.

Condition three: Thoroughly review the documentation to provide definitive programme documents that accurately and consistently detail the role of the practice supervisor, assessor and academic assessor. (SSSA R7.11; SPP R4.2)

**Date:** 3 July 2019

**Post event review**

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

There's no clear evidence of how the academic assessor is involved in practice assessment. (Condition two) (SFNME 2.4; SSSA R9.4; SPP R4.2)

There's no sound justification for variation in numeracy assessment across the programmes. (Condition one) (SFNME R2.1; SPP R2.1)

**Date condition(s) met:** 31 July 2019

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

Standards framework for nursing and midwifery education R2.1, R2.4 are now met.

Standards for student supervision and assessment R9.4, R7.11 are now met.

Standards for prescribing programmes R4.9, R4.2 are now 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:** 3 July 2019

**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)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the programme meets the <i>Standards for prescribing programmes</i> and RPS <i>Standards of proficiency for prescribers</i> (NMC, 2018)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mapping document providing evidence of how the <i>Standards for student supervision and assessment</i> (NMC, 2018) apply to the programme(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Curricula vitae for relevant staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Written confirmation by the education institution and associated practice learning partners to support the programme intentions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>List additional documentation:</p> <p>Presentation by the programme team, 3 July 2019.</p> <p>NMC, approved education institution (AEI) and PLPs annual self-assessment report, 2018-2019.</p> <p>North west universities, non-medical prescribing collaboration, application form, undated.</p> <p>Post visit evidence:</p> <p>Revised nurse prescribing without a specialist practitioner qualification (V150) module guide, 2019-2020</p> <p>Revised nurse prescribing without a specialist practitioner qualification (V150) module specification, 2019-2020</p> <p>Revised community nurse prescribing (V100), module guide, 2019-2020</p> <p>Revised community nurse prescribing (V100), module specification, 2019-2020</p> <p>Revised non-medical independent and supplementary prescribing, portfolio of evidence, undated</p> <p>Revised nurse prescribing without a specialist practitioner qualification (V150), portfolio of evidence, 2019-2020</p> <p>Revised non-medical prescribing practice assessor and supervisor handbook, 2019-2020</p> <p>Revised nurse prescribing without a specialist practitioner qualification (V150), practice assessor, practice supervisor handbook, 2019</p> <p>Revised greater Manchester practice education group, a handbook for practice supervisors and assessors (nursing), undated</p> <p>Revised BSc (Hons) community specialist practice, district nursing, programme handbook, 2019-2020</p> <p>Revised postgraduate diploma, community specialist practice, district nursing, programme handbook, 2019-2020</p> <p>Revised BSc (Hons) specialist community public health nursing, health visiting, programme handbook. 2019-2020</p> <p>Revised BSc (Hons) specialist community public health nursing, health visiting, programme handbook. 2019-2020</p>		
If you stated no above, please provide the reason and mitigation		

Additional comments:
----------------------

**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: Two x V100 2018-2019 SCPHN and SPQ DN cohort One x V150 2018-2019 cohort One x V300 2018-2019 cohort One x V300 2017-2018 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 programme team tell us despite efforts no designated medical practitioner (DMP) and practice assessors were available to attend the approval event.		

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

	YES	NO
--	-----	----

Specialist teaching accommodation (e.g. clinical skills/simulation suites)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Library facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Technology enhanced learning Virtual learning environment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Educational audit tools/documentation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Practice learning environments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, state where visited/findings		
If you stated no above, please provide the reason and mitigation Not necessary as an established AEI		
Additional comments:		

**Mott MacDonald Group Disclaimer**

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

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:	Bernadette Martin	Date:	30 July 2019
Checked by:	Monica Murphy	Date:	15 August 2019
Approved by:	Andrea Bacon	Date:	27 August 2019
Submitted by:	Lucy Percival	Date:	27 August 2019