Programme approval visit report

Section one

Programme provider name:	University of Plymouth
In partnership with: *(Associated practice learning partners involved in the delivery of the programme)*	Cornwall Partnership NHS Foundation Trust University Hospitals Plymouth NHS Trust Private voluntary and independent health care providers
Programmes reviewed:	Independent and supplementary nurse prescribing V300 ⊠ Community practitioner nurse prescribing V150 ☐ Community practitioner nurse prescribing V100 ☐
Academic level:	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland ☐ Level 5 ⊠ Level 6 ⊠ Level 7 SCQF ☐ Level 8 ☐ Level 9 ☐ Level 10 ☐ Level 11
Title of programme:	Independent and Supplementary Non-Medical Prescribing
Date of approval visit:	19 June 2019
Programme start date: Independent and supplementary nurse prescribing V300	1 September 2019
QA visitor:	Shelley Peacock

Summary of review and findings
The University of Plymouth (UoP) faculty of health and human sciences (the school) has presented the independent and supplementary prescribing (V300) programme for approval against the Nursing and Midwifery Council (NMC) Standards for prescribing programmes (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 V300 programme is a part-time programme over a six-month period.
Documentary analysis and findings at the approval visit demonstrate commitment to partnership working with key stakeholders. There is some evidence of partnership between the UoP and practice learning partners (PLPs) at both an operational and strategic level. There is evidence of effective communication processes between the school and PLPs to ensure all governance is in place for the programme.
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 programme is recommended to the NMC for approval subject to three conditions. The visitor made three recommendations are made.
Updated 29 July 2019
Evidence is provided to meet the conditions. The conditions are met. The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
Recommended outcome to the NMC:	Programme is recommended to the NMC for approval ☐
	Programme is recommended for approval subject to specific conditions being met ☒
	Recommended to refuse approval of the programme ☐
Conditions: *Please identify the standard and requirement the condition relates to*	**Effective partnership working: collaboration, culture, communication and resources** Condition one: To develop an implementation plan to address the roles of service users and carers in the administration, delivery, and assessment of the

under the relevant key risk theme. *Please state if the condition is AEI/education institution in nature or specific to NMC standards.*	programme. (SFNME R1.12, Standards for prescribing programmes (SPP) R 2.1) **Selection, admission and progression** Condition two: To ensure that the application form clearly aligns with the selection and admission criteria ensuring details for the practice supervisor are requested within the application form and applicants are post-registration. (SFNME R2.3; SPP R1.7) **Practice learning** None identified. **Assessment, fitness for practice and award** Condition three: Update the practice assessment document to include details of practice supervisor role, expectations of meetings and contacts (timeline and progress) and documented supervisory contact with the student, practice supervisor, practice assessor and academic assessor. (SFNME R2.4; SSSA R4.1, R4.2, R4.3, R4.4, R7.9, R9.6; SPP R4.1, R4.2) **Education governance: management and quality assurance** None identified.
Date condition(s) to be met:	29 July 2019
Recommendations to enhance the programme delivery:	Recommendation one: To strengthen the partnership working with practice learning partners working in the development, delivery and education of the prescribing programme. Particularly, strengthening the implementation plan relating to supporting practice assessors and supervisors. (SFNME R1.12) Recommendation two: Consider monitoring the incidence of circumstances where practice supervisors and practice assessors are undertaken by the same person and what mitigation applied. (SPP R4.5) Recommendation three: Consider strengthening monitoring of self-directed study days via the online platform. (SPP R2.3)

Focused areas for future monitoring:	Implementation of the Standards for student supervision and assessment in relation to the prescribing programme.
	The implementation of the school's service user strategy and framework.

Programme is recommended for approval subject to specific conditions being met		
Commentary post review of evidence against conditions		
The programme team have provided documentary evidence of an implementation plan for service user and carer involvement in the programme, amended application form for practice supervisor details, assurance applicants are one-year post-registration and updated practice assessment documents. All three conditions are now met.		
AEI Observations	**Observations have been made by the education institution YES ☐ NO ☒**	
Summary of observations made, if applicable		
Final recommendation made to NMC:	Programme is recommended to the NMC for approval	☒
	Recommended to refuse approval of the programme	☐
Date condition(s) met:	29 July 2019	

NMC Programme standards
Please refer to NMC standards reference points

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

Documentary evidence and the approval process confirms effective partnership working between the UoP and key stakeholders. Policies, processes and committees are in place to support a partnership approach to the development and planned delivery of the prescribing programme. The programme team and PLPs are working together to co-create the programme and support the training of practice assessors and practice supervisors. (Recommendation one) (SFNME R1.12)

PLPs confirm they review and feedback on programme material, on the implementation and responsibilities associated with new practice assessor and practice supervisor roles. The programme lead consults with non-medical prescribing leads at six monthly practice placement forum meetings.

Former and current students from the Plymouth and Jersey campuses provide feedback to inform the programme development. Students value the digital support and virtual learning environment. Students report they feel valued, and the school provides opportunities for them to feedback through informal and formal mechanisms. Feedback students give is responded to and actions taken as appropriate. Processes are in place ensuring communication to students about the programme adheres to an agreed standard and quality.

Service users input into the current programme delivery but there is limited evidence of co-production of the programme with service users or their involvement going forward. One service user comments on contact with the programme lead on a one-to-one basis for feedback and going forward for development of the proposed programme. Service users are not involved in assessment process or reviews any programme material. This must be addressed. (Condition one) (SFNME R1.12; SPP R2.1)

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** ☒

There is limited evidence of co-production of the programme with service users or their involvement going forward. This must be addressed. (Condition one) (SFNME R1.12; SPP R 2.1)

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

There is limited evidence of co-production of the programme with service users or their involvement going forward. This must be addressed.

Condition one: To develop an implementation plan to address the roles of service users and carers in the administration, delivery, and assessment of the programme (SFNME R1.12; SPP R2.1).

Post event review

Identify how the condition(s) is met

Condition one:

The programme team has provided an implementation plan for service user and carer involvement in the programme.

Evidence:

School of nursing and midwifery service user and patient and public involvement strategy, July 2019

Framework for service users and lay representatives, July 2019

Condition one is now met.

Date condition(s) met: 29 July 2019	
Revised outcome after condition(s) met	MET ⊠ NOT MET ☐

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)

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YES ☒   **NO** ☐

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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)

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MET ☒   **NOT MET** ☐

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R1.3 is met. There is evidence from the application form demonstrating governance is considered at the admission stage for the programme.

Students and PLPs confirm clinical support, access to protected learning time and employer support is adequate and will allow students to undertake the programme of study. PLPs agree to release students to undertake the prescribing programme and confirm processes are in place to ensure practice supervisors and practice assessors meet SSSA criteria. Practice assessor criteria are detailed in the

application form for the V300 programme and are confirmed by signatories. UoP and PLPs complete educational audits confirming practice learning environments meet SSSA criteria. Students cannot be placed where there is no current valid audit. PLPs monitor and review learning environments with UoP.

- 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** ☒

R1.7 is not met. The programme team and PLPs report on the process for selection of students onto the programme. The application form overall demonstrates governance is considered as part of the admission process and additional self-declaration is requested of self-employed applicants relating to those specific elements of entry criteria normally signed off by a manager and a prescribing lead. The disclosure and barring service (DBS) is in place within the application process. Line managers confirm applicants are capable of safe and effective practice at a level appropriate to the applicant's area of future prescribing practice. However, the application form does not specify applicants must be registered with the NMC for a minimum of one year prior to application for entry to the programme. Practice supervisor's details are not requested in the application form. This must be addressed. (Condition two) (SFNME R2.3; SPP R1.7)

Protected learning time is acknowledged in the application form which includes being released for 26 days academic learning and 12 days learning in practice. PLPs confirm they will support protected learning time.

Proposed transfer of current students to the programme under review

NMC Nursing & Midwifery Council

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

No students will transfer to the proposed programme. The programme team say there are no students with interrupted studies and all existing students will complete their programme before the commencement of the new programme.

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

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YES ☐   NO ☒

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The application form does not specify applicants must be registered with the NMC for a minimum of one year prior to application for entry to the programme. Practice supervisor's details are not requested in the application form. (Condition two) (SFNME R2.3; SPP R1.7)

Outcome

Is the standard met?   MET ☐   NOT MET ☒

The application form does not specify applicants must be registered with the NMC for a minimum of one year prior to application for entry to the programme. Practice supervisor's details are not requested in the application form.

Condition two: To ensure that the application form clearly aligns with the selection and admission criteria ensuring details for the practice supervisor are requested within the application form and applicants are post-registration. (SFNME R2.3; SPP R1.7)

Date: 19 June 2019

Post event review

Identify how the condition(s) is met:

Condition two:

The programme team have provided an amended application form including practice supervisor details and confirmation applicants are at least one-year post-registration.

Evidence:

NMP application form section one

NMP application form section two

NMP application guide

NMP programme specification

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nursing associate education.

Condition two is now met.

Date condition(s) met: 29 July 2019

Revised outcome after condition(s) met: **MET** ☒   **NOT MET** ☐
Condition two is now met.

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** ☒

R2.1 is not met. Documentary evidence and the approval process show service users are used in programme delivery in practice. However, there is no evidence of how service users and carers are involved in the application process co-production or assessment of students in the programme. (Condition one) (SFNME R1.12; SPP R2.1)

- 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 programme team and documentary evidence demonstrate a wide range of learning and teaching strategies are used to support the achievement of the RPS competencies. Module specifications are explicit and use the RPS competency framework for all prescribers. There will be co-teaching with allied health professional students undertaking a similar prescribing programme. Teaching will include key lectures, workshops, simulated case studies, e-Learning activities, online self-directed learning, and learning through practice experiences. (Recommendation three) (SPP R2.3)

All students say they value the support and guidance of the programme team.

- 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** ☒

There is no evidence of how service users and carers are involved in the application process, delivery, co-production or assessment of students in the programme. (Condition one) (SFNME R1.12, SPP R 2.1)

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** ☒

There is no evidence of how service users and carers are involved in the application process, delivery, co-production or assessment of students in the programme.

Condition one: To develop an implementation plan to address the roles of service users and carers in the administration, delivery, and assessment of the programme. (SFNME R1.12, SPP R2.1)

Date: 19 June 2019

Post event review

Identify how the condition(s) is met:

Condition one:

The programme team have provided an implementation plan for service user and carer involvement in the programme.

Evidence:

Nursing & Midwifery Council

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School of nursing and midwifery service user and patient and public involvement strategy, July 2019

Framework for service users and lay representatives, July 2019

Condition one is now met.

| **Date condition(s) met:** 29 July 2019 |

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

Condition one is now met.

| **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. The application form reviews various levels of governance, including the practice assessor, the line manager, and the non-medical prescribing (NMP) lead for PLP organisations. All of these are committed to providing the necessary

time, supervision and learning opportunities for students to achieve the learning outcomes and competencies safely and with appropriate supervision.

UoP and PLPs audit practice learning environments and monitor their quality. Audit processes provide evidence of safe practice placement areas which meet NMC standards. There's a process to withdraw practice learning environments implement action plans and reinstate practice learning areas where student learning is at risk. There are policies in place demonstrating commitment to public protection through the management and escalation of concerns in academic and practice settings. All these measures apply to practice placements of self-employed students.

Documentary evidence and the approval process confirms arrangements to identify and prepare practice assessors and practice supervisors. This ensures students will be supported in practice by suitably qualified and prepared individuals. Documents outline the programme of preparation for practice supervisors and practice assessors to be delivered.

Governance arrangements for practice learning for those who are self-employed is considered. Each applicant will be interviewed individually and supported in identifying an appropriate practice assessor and practice supervisor by the school.

The programme team says local NHS organisations may be in a position to support self-employed students by arranging honorary contracts, practice supervisors and practice assessors.

- 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. Documentary evidence confirms the programme uses a range of technology to support learning and assessment. These are effective and proportionate. This includes use of a simulated learning suite, simulated practice skills labs, and a service-user led session. Students say they have access to the health education cooperative online distance learning package, in addition to the e-Learning platform designated to the prescribing programme.

- Processes are in place to ensure that students work in partnership with the education provider and their practice learning partners to arrange

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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: 19 June 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

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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. Audit processes confirm learning environments meet SSSA. There's meetings with PLPs to monitor and review learning environments involved in the programme. All stakeholders confirm they're aware of the UoP process for escalating concerns. There's support for students in raising concerns and contingency plans to remove students if necessary and place them in suitable learning environments. Review processes ensures support, supervision, learning and assessment arrangements comply with the NMC Standards framework for nursing and midwifery education.

Practice supervisor preparation is being carried out by the university in partnership with PLPs. Larger trusts holding training sessions for their staff to attend. Practice assessor training is solely led by the university and an online package is under development for practice staff to undertake.

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The programme team state the practice assessor will undertake a baseline, midpoint and summative review with the student. The academic assessor and practice assessor will communicate at fixed points. There's no clear discussion on how practice supervisor's will be involved with these reviews. These fixed points are not evident in the PAD. Discussion at the approval event and documentary evidence confirm a nominated academic assessor, identified from the approved education institute (AEI) programme team will support students' theoretical learning and collaborate closely with the nominated practice supervisor and practice assessor in the practice setting to moderate and collate decisions about the students' ability to demonstrate all prescribing proficiencies on the programme. However, it is unclear how and when partnership working between the practice assessor and academic assessors will take place at relevant points in the programme structure and for student progression. This must be addressed. (Condition three) (SFNME R2.4; SSSA R4.1, R4.2, R4.3, R4.4, R7.9, R9.6; SPP R4.1, R4.2)

- 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. Practice supervisors and practice assessors have a half-day and one full day of preparation for the role respectively. The preparation sessions are timetabled and will be delivered in partnership with the AEI and PLPs. Documentary evidence, in the form of a presentation and handbook for practice supervisors and practice assessors details the support processes and the preparation for their roles. The programme team and PLPs confirm these arrangements. However, the practice supervisor role and responsibilities are not identified in practice assessment documentation or how they will work and liaise with students, practice assessors and academic assessors for the supervision and assessment of students. It is not evident in the practice assessment document (PAD) that practice supervisors are given sufficient opportunities to engage and communicate with the practice assessors and academic assessors to enable them to fulfil their role in contributing to decisions for progression. There is limited information on how and when partnership working between the practice assessor and academic assessor will occur. It is not evident in the PAD how and when communication and collaboration will take place at relevant points in programme structure and student progression. (Condition three) (SFNME R2.4; SSSA R4.1, R4.2, R4.3, R4.4 R7.9; SPP R4.1, R4.2)

- Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience (R4.3)

YES ☒   **NO** ☐

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- 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. Appropriate practice assessors are identified by the student's employer as part of the application process. They are registered healthcare professionals and experienced prescribers with suitable equivalent qualifications for the prescribing programme. The AEI checks and confirms practice assessor qualifications. Supported applications are signed by line managers and non-medical prescribing leads within the employing heath care organisation. The programme team confirm there's a system to manage the practice assessor and practice supervisor being the same person. Wherever possible this is avoided, and the university ARC system may be able to identify an alternative practice assessor. The programme team are advised to consider monitoring the incidence of circumstances where practice supervisors and practice assessors are undertaken by the same person and the mitigation which is applied. (Recommendation two) (SPP R4.5)

- 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** ☒

The PAD does not identify the practice supervisor role and involvement in student review or when review occurs. It is unclear how and when the practice assessor and academic assessor collaborate for student review and progression. (Condition three) (SFNME R2.4; SSSA R4.1, R4.2, R4.3, R4.4, R7.9, R9.6; 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** ☒

The PAD does not identify the practice supervisor role and involvement in student review or when review occurs. It is unclear how and when the practice assessor and academic assessor collaborate for student review and progression. (Condition three) (SFNME R2.4; SSSA R4.1, R4.2, R4.3, R4.4, R7.9, R9.6; SPP R4.1, R4.2)

Outcome

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

The PAD does not identify the practice supervisor role and involvement in student review or when review occurs. It is unclear how and when the practice assessor and academic assessor collaborate for student review and progression.

Condition three: Update the practice assessment document to include details of practice supervisor role, expectations of meetings and contacts (timeline and progress) and documented supervisory contact with the student, practice supervisor, practice assessor and academic assessor. (SFNME R2.4; SSSA R4.1, R4.2, R4.3, R4.4, R7.9, R9.6; SPP R4.1, R4.2)

Date: 19 June 2019

Post event review

Identify how the condition(s) is met:

Condition three:

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The programme team has provided evidence of an updated practice assessment document indicating roles for practice supervisor, practice assessor and academic assessor. The PAD includes supervisory contacts, expectations, timelines for documenting student progress.

Evidence:

Amended practice assessment document, July 2019

Programme handbook, July 2019

Condition three is now met.

Date condition(s) met: 29 July 2019	

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

Condition three is 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:

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- 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: 5 July 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	☒	☐
Programme specification(s)	☒	☐
Module descriptors	☒	☐
Student facing documentation including: programme handbook	☒	☐
Student university handbook	☒	☐
Practice assessment documentation	☒	☐
Practice placement handbook	☒	☐
PAD linked to competence outcomes, and mapped against RPS *A Competency Framework for all Prescribers*	☒	☐
Mapping document providing evidence of how the education institution has met the *Standards framework for nursing and midwifery education* (NMC, 2018)	☒	☐
Mapping document providing evidence of how the programme meets the *Standards for prescribing programmes* and RPS *Standards of proficiency for prescribers* (NMC, 2018)	☒	☐
Mapping document providing evidence of how the *Standards for student supervision and assessment* (NMC, 2018) apply to the programme(s)	☒	☐
Curricula vitae for relevant staff	☒	☐
Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website	☒	☐

Written confirmation by the education institution and associated practice learning partners to support the programme intentions.	☒	☐

List additional documentation:

September 2019 prescribing programme timetable, undated

Snapshots of online distance learning activities, undated

System regulator reports:

CQC report for Royal Devon and Exeter hospitals NHS foundation trust, 5 March 2018

CQC report for Royal Cornwall hospitals NHS trust, 14 December 2018

CQC report for Poole hospitals NHS trust, 26 January 2018

CQC report for northern Devon healthcare NHS trust, 5 February 2018

Post visit evidence:

School of nursing and midwifery service user and patient and public involvement strategy, July 2019

Framework for service users and lay representatives, July 2019

NMP application form section one

NMP application form section two

NMP application guide

NMP programme specification

Amended practice assessment document

Programme handbook

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	☒	☐

Senior managers from associated practice learning partners with responsibility for resources for the programme	☒	☐
Programme team/academic assessors	☒	☐
Practice leads/practice supervisors/ practice assessors	☒	☐
Students	☒	☐
If yes, please identify cohort year/programme of study: One x Plymouth prescribing student cohort 2017-18 One x Plymouth prescribing student (via teleconference) cohort 2018-19 Jersey prescribing students x two (via teleconference) cohort 2018-19		
Service users and carers	☒	☐
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)	☐	☒
Library facilities	☐	☒
Technology enhanced learning Virtual learning environment	☐	☒
Educational audit tools/documentation	☐	☒
Practice learning environments	☐	☒
If yes, state where visited/findings		

If you stated no above, please provide the reason and mitigation

Not required as an existing AEI.

Additional comments:

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Issue record			
Final Report			
Author:	Shelley Peacock	Date:	29 July 2019
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Approved by:	Leeann Greer	Date:	12 August 2019
Submitted by:	Lucy Percival	Date:	12 August 2019