



# **Programme Major Modification report**

## Section one

| Programme provider name:   | Coventry University  |  |  |
|--|--|--|--|
| <b>Programmes reviewed:</b><br>This is the NMC programme title(s)  | Independent and supplementary nurse prescribing V300                 |  |  |
|  | Community practitioner nurse prescribing V150                        |  |  |
|  | Community practitioner nurse prescribing V100                        |  |  |
| AEI programme title(s):  |  |  |  |
| Current AEI programme title(s):<br>Please include all currently approved   | Practice Certificate in Independent and<br>Supplementary Prescribing |  |  |
| programme titles   | Community Practitioner Nurse<br>Prescribing                          |  |  |
| Modified AEI programme title(s) if<br>applicable:<br>Please include new title(s) if current AEI<br>programme title(s) are being modified as<br>a result of this modification or add N/A  | N/A  |  |  |
| Additional AEI programme title(s) if<br>applicable:<br>Please include any additional AEI<br>programme title(s) for approval as a<br>result of this modification (for example<br>new routes being added that have a<br>different title to those already approved)<br>or add N/A | N/A  |  |  |
| Academic level of current programme:   |  |  |  |
| Independent and supplementary nurse prescribing V300   | England, Wales, Northern Ireland                                     |  |  |
|  | SCQF   |  |  |





|  | Level 8 Level 9 Level 10   |
|--|--|
|  | Level 11   |
|  | □ N/A  |
|  | England, Wales, Northern Ireland   |
| Community practitioner nurse prescribing             | SCQF   |
| V150   | Level 11   |
|  | □ N/A  |
|  | England, Wales, Northern Ireland   |
| Community practitioner nurse prescribing             | SCQF   |
| V100   | Level 11   |
|  | ⊠ N/A  |
| Academic levels of modified/additional               | programme(s)/route(s):   |
|  | England, Wales, Northern Ireland   |
| Independent and supplementary nurse                  |  |
|  | SCQF   |
| Independent and supplementary nurse prescribing V300 |  |
|  | Level 8 Level 9 Level 10   |
|  | Level 8 Level 9 Level 10     Level 11  |
|  | <ul> <li>Level 8 Level 9 Level 10</li> <li>Level 11</li> <li>N/A</li> </ul> England, Wales, Northern Ireland |





|  | N/A                                 |  |  |
|--|-------------------------------------|--|--|
|  | England, Wales, Northern Ireland    |  |  |
| Community practitioner nurse prescribing   | SCQF                                |  |  |
| V100   | Level 11                            |  |  |
|  | ⊠ N/A                               |  |  |
| Programme approval dates:  |                                     |  |  |
| Date of NMC approval of the<br>programme being modified:<br>This is the approval date under the most<br>recent NMC standards.  | 26 September 2019                   |  |  |
| Date(s) of NMC approval of any modifications since last approval:  | 8 June 2020                         |  |  |
| Programme start dates:   |                                     |  |  |
| Current modification programme start<br>date:<br>Independent and supplementary nurse<br>prescribing V300<br>Community practitioner nurse prescribing<br>V150<br>Community practitioner nurse prescribing<br>V100 | 15 January 2024       N/A       N.A |  |  |
| Date of modification:  | 24 October 2023                     |  |  |
| Type of modification:  | Visit                               |  |  |
| QA visitor:  | Registrant Visitor: Neil Thomas     |  |  |





### Section two

#### Summary of review and findings

Coventry University (CU) is an established Nursing and Midwifery Council (NMC) approved education institution (AEI). The school of nursing, midwifery and health (the school) presents their approved independent/supplementary prescribing (V300) programme for modification.

Approval for the 40-credit V300 programme was granted from 26 September 2019 against the Standards for prescribing programmes (SPP) (NMC 2018, updated 2023) and Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) competency framework for all prescribers) (NMC, 2018). A subsequent modification to the programme to deliver at CU's Dagenham campus was approved by the NMC from 8 June 2020. Confirmation of adoption of the updated RPS competency framework was received via the annual self-report.

The programme is offered at CU campuses at Coventry, Dagenham and Scarborough. There's good evidence of effective communication networks between academic staff delivering the programme and practice learning partners (PLPs) from each of these geographical areas that ensures consistency and comparability of the students' experience across differing practice learning environments.

The V300 programme is offered as a part-time postgraduate and undergraduate programme of study and is taught over two modules each lasting 13 weeks.

The school presents a modification to the approved V300 programme. The purpose of this modification is to amend the module titles, wording and a number of learning outcomes and make changes to the assessment strategy. The school also proposes to add an online delivery version of the programme which will run alongside the face-to-face programme.

The rationale for the proposed modification stems from the feedback CU has received from PLPs and students regarding making the programme more clinically relevant, flexible and more widely available across a range of geographical areas.

CU is committed to providing a culture and environment that's inclusive of all sections of society and individuals. They do this by promoting equality, valuing diversity and communicating the importance of dignity at work and study. Key performance indicators and attainment data support the policies and include equality metrics for staff and students. Key equality, diversity and inclusion (EDI) attainment data, inclusion and diversity metrics are monitored through a CU analytics database. EDI is also embedded in programme delivery through





facilitated learning sessions on culture and diversity which explore cultural perspectives on decision-making from the patient's perspective. CU also have a culturally and professionally diverse programme team.

Documentary evidence and discussion with stakeholders confirm there's a clear rationale for requesting changes to the assessment, mainly the replacement of the objective structured clinical examination (OSCE) in the CU setting with a viva assessment based in clinical practice which makes the assessment more relevant to the student's scope of practice. Also, the proposal to offer an online option for the programme follows engagement and feedback from PLPs including local workforce leaders, current and previous students and people who use services and carers (PUSCs) who suggest that it will provide better access to the programme and will provide a range of additional teaching and learning methods giving choice and options for study. This proposed modification aligns the school's provision of a V300 prescribing programme with similar providers across the AEI sector.

The partnership between CU and PLPs is robust with evidence of active and effective engagement at an operational and strategic level which ensures an appropriate level of governance and regulation. There's a senior-level partnership group in place between the CU and PLPs which ensures clear channels of communication and overarching governance.

This modification visit is undertaken by remote means.

The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) and the Standards for student supervision and assessment (SSSA) (NMC 2018, updated 2023) are met at programme level.

The programme is recommended to the NMC for approval. One NMC recommendation is made.

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





| Conditions:  | Effective partnership working: collaboration,<br>culture, communication and resources:<br>None identified.<br>Selection, admission and progression:<br>None identified.<br>Practice learning:<br>None identified.<br>Assessment, fitness for practice and award:<br>None identified.<br>Education governance: management and quality<br>assurance:<br>None identified. |
|--|--|
| Date condition(s) to be  | N/A  |
| met:   |  |
| met:<br>Recommendations to<br>enhance the programme<br>delivery: | Recommendation one: To monitor and continue to<br>enhance PUSC involvement in future development,<br>delivery and evaluation of the programme. (SFNME<br>R1.12)  |

| Programme is recommended for approval subject to specific conditions being met |                  |             |            |        |
|--|------------------|-------------|------------|--------|
| Commentary post review of evidence against conditions                          |                  |             |            |        |
| N/A  | _                |             |            |        |
| AEI Observations   | Observations hav | e been made | by the edu | cation |
|  | institution      |             | YES        | NO 🖂   |
| Summary of   |                  |             |            |        |
| observations made,   |                  |             |            |        |
| if applicable  |                  |             |            |        |





| Final recommendation      | Programme is recommended to the NMC for approval |  |
|---------------------------|--|--|
| made to NMC:              | Recommended to refuse approval of the programme  |  |
| Date condition(s)<br>met: |  |  |

# Section three

#### **NMC Programme standards**

Please refer to NMC standards reference points

Standards for prescribing programmes (NMC 2018, updated 2023)

<u>Standards of proficiency for nurse and midwife prescriber (adoption of the Royal</u> Pharmaceutical Society (RPS) Competency Framework for all Prescribers)

#### (NMC, 2021)

<u>Standards framework for nursing and midwifery education</u> (NMC 2018, updated 2023)

<u>Standards for student supervision and assessment</u> (NMC 2018, updated 2023) <u>The Code: Professional standards of practice and behaviour for nurses, midwives</u> and nursing associates (NMC, 2015 updated 2018)

Quality assurance framework for nursing, midwifery and nursing associate education (NMC, 2020)

QA Handbook (NMC, 2022)

### Partnerships

The AEI works in partnership with their practice learning partners, people who use services, students and all other stakeholders.

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

<u>Standards framework for nursing and midwifery education (NMC 2018, updated 2023)</u>

#### Standard 1: The learning culture:

- R1.12 ensure programmes are designed, developed, delivered, evaluated and coproduced with people who use services 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 ensure programmes are designed to meet proficiencies and outcomes relevant to the programme
- 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 people who use services 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 people who use services contribute to student assessment

<u>Standards for student supervision and assessment</u> (NMC 2018, updated 2023)

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 users of service, 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 <u>evaluative summary</u> about the effectiveness of the partnerships between the AEI and their practice learning partners, people who use services, students and any other stakeholders.

Programme documentation and the modification visit confirm evidence of effective partnership working between the school and key stakeholders. There's evidence of engagement with PLPs with the prescribing leads reporting that they've been consulted on the proposed changes at a local level and attend regular monthly update meetings. PLPs are very supportive of the proposed online delivery option to maximise the opportunities for their staff to become prescribers. PLPs are also supportive of the modification to the assessment components as the proposed





changes make the students assessment more relevant to their scope of practice. PLPs believe the clinical assessment being undertaken in the clinical setting as a viva instead of a CU based OSCE, will enhance the validity of the assessment as students are assessed by clinical experts from the practice setting. The PLPs also tell us how supportive the programme team are and that they communicate any changes in a timely manner. There's evidence of engagement with PUSCs in the delivery of the programme. The school has a patient and public involvement group that provide training to PUSCs including EDI training. Currently, the PUSCs involved with the prescribing programme are in low numbers, so further recruitment and input is suggested.

Also, the PUSCs available at the time of the visit haven't been asked to be involved with the development of the modified programme but have a wealth of experience around the online learning mode of delivery and appear eager to be involved where possible. (Recommendation one)

Student evaluations and discussions at the visit are very positive and supportive of all the programme modifications including the changes to the assessment and online learning delivery. Many students already undertake elements of online learning and explain that the learning platforms are well structured and easy to navigate resulting in an enjoyable learning experience.

Assurance is provided that the AEI works in partnership with their practice learning partners, people who use services, students and all other stakeholders as identified in Gateway 1: <u>Standards framework for nursing and midwifery education</u> MET NOT MET

Assurance is provided that the AEI works in partnership with their practice learning partners, people who use services, students and all other stakeholders as identified in Gateway 2: <u>Standards for student supervision and assessment</u>

MET

Post event review

Identify how the condition(s) is met

N/A

Date condition(s) met:

N/A

Revised outcome after condition(s) met

MET

NOT MET

N/A





#### Student journey through the programme

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

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

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

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

**Proposed transfer of current students to the programme under review** Demonstrate a robust process to transfer current students onto the proposed programme to ensure programme learning outcomes and proficiencies meet the <u>Standards for prescribing programmes</u> (NMC 2018, updated 2023).

Proposed transfer of current students to the <u>Standards for student</u> <u>supervision and assessment</u> (NMC 2018, updated 2023).





| Demonstrate a robust process to transfer current students onto the <u>Standards fo</u><br><u>student supervision and assessment</u> (NMC 2018, updated 2023).  |  |  |
|--|--|--|
| Findings against the standard and requirements   |  |  |
| Evidence provides assurance that the following QA approval criteria are me   |  |  |
| • 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 [   |  |  |
| <ul> <li>Evidence of selection process that demonstrates opportunities that enable<br/>all nurse (level 1), midwife or SCPHN registrants (including NHS, self-<br/>employed or non-NHS employed registrants) to apply for entry onto an<br/>NMC approved prescribing programme. Evidence of this statement in<br/>documentation such as: programme specification; module descriptor,<br/>marketing material. Evidence of this statement on university web pages</li> </ul> |  |  |
| (R1.2) YES 🖂 NO [  |  |  |
| Provide an <u>evaluative summary</u> from your documentary analysis and<br>evidence AND discussion at the approval visit to demonstrate if assurance i<br>provided that the QA approval criteria below is met or not met   |  |  |
| <ul> <li>Evidence that the necessary governance structures are in place (including<br/>clinical support, access to protected learning time and employer support<br/>where appropriate) to enable students to undertake, and be adequately<br/>supported throughout, the programme (R1.3)</li> </ul>  |  |  |
|  |  |  |
| R1.3 is met. Unchanged through this modification.  |  |  |
| Evidence provides assurance that the following QA approval criteria are me   |  |  |
| <ul> <li>Processes are in place to consider recognition of prior learning that is<br/>capable of being mapped to the RPS Competency Framework for all<br/>Prescribers (R1.4)</li> </ul>  |  |  |
|  |  |  |
| <ul> <li>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)</li> <li>YES NO [</li> </ul>   |  |  |





| <ul> <li>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):         <ul> <li>Clinical/health assessment</li> <li>Diagnostics/care management</li> <li>Planning and evaluation</li> </ul> </li> </ul> |
|---|
|   |
| <ul> <li>Processes are in place to ensure that applicants for V300<br/>supplementary/independent prescribing programmes have been registered<br/>with the NMC for a minimum of one year prior to application for entry onto<br/>the programme (R1.7)</li> </ul>   |
|   |
| 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 documentary analysis indicates that existing students won't be transferred to the modified programme.   |
| Proposed transfer of current students to the <u>Standards for student</u>   |
| supervision and assessment (SSSA) (NMC, 2018).  |
| From your documentary analysis and your meetings at the approval visit confirm if students will be transferring to the SSSA, and if so that they have informed choice and are fully prepared for supervision and assessment.<br>Documentary analysis and discussion at the visit confirms that the SSSA is already implemented in the current programme.  |
| A service and its statistical that Ostanian to Oten dends from any defension and  |
| Assurance is provided that Gateway 1: <u>Standards framework for nursing and</u><br><u>midwifery education</u> relevant to selection, admission and progression are met<br><b>YES</b> NO  |
| Outcome   |
| Is the standard met? MET MET NOT MET  |
| Date: 24 October 2023   |
| Post event review   |
| Identify how the condition(s) is met:   |
|   |





| N/A                                     |       |  |
|---|-------|--|
| Date condition(s) met:                  |       |  |
| N/A                                     |       |  |
| Revised outcome after condition(s) met: | MET 🗌 |  |
| N/A                                     |       |  |

**Standard 2: Curriculum** 

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

- R2.1 ensure programmes comply with the NMC Standards framework for nursing and midwifery education
- R2.2 ensure that all prescribing programmes are designed to fully deliver the competencies set out in the RPS *A Competency Framework for all Prescribers*, as necessary for safe and effective prescribing practice
- R2.3 state the learning and teaching strategies that will be used to support achievement of those competencies
- R2.4 develop programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice:
- R2.4.1 stating the general and professional content necessary to meet the programme outcomes
- R2.4.2 stating the prescribing specific content necessary to meet the programme outcomes
- R2.4.3 confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing
- R2.5 ensure that the curriculum provides a balance of theory and practice learning, using a range of learning and teaching strategies
- R2.6 ensure technology and simulation opportunities are used effectively and proportionately across the curriculum to support supervision, learning and assessment, and
- R2.7 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





NOT MET

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) 

R2.3 is met. Documentary evidence and discussion with the programme team at the visit confirm a robust learning and teaching strategy which is modelled on the previous programme and includes all the same pedagogical strategies. The learning outcomes for the programme are re-developed to align specifically with the RPS competency framework and are mapped to the learning, teaching and assessment strategy.

There are a range of learning methods such as role play, group work and lectures, for which the learning platform Engageli (the name of the online learning platform, not an acronym or abbreviation) is used to incorporate lots of different delivery and learning methods. These include active learning with virtual groups as well as one to one or breakout rooms which provide the opportunity for interprofessional learning spaces. There are also facilities that are used to create peer communities and therefore foster student networking and relationships. As well as synchronous teaching and learning, there's also an asynchronous platform available for catch up of any missed teaching sessions.

A case study discussion (viva) is developed as a summative assessment to replace the CU based OSCE. This helps to provide evidence of competence throughout the consultation and provides more relevance to the students own scope of practice. The proposed changes to learning outcomes enhance their alignment to the RPS competency framework, which has been clearly mapped across the learning, teaching and assessment syllabus.

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

- Evidence of programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice (R2.4):
  - stating the general and professional content necessary to meet the programme outcomes.
  - stating the prescribing specific content necessary to meet the programme outcomes.





confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing. YES 🖂 NO 🗌 The programme structure demonstrates a balance of theory and practice learning. A range of learning and teaching strategies are detailed in the programme specification, programme handbook and module descriptor with theory / practice balance detailed. There are appropriate module aims, descriptors and outcomes specified. (R2.5) 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 and simulation opportunities are used effectively and proportionately across the curriculum to support supervision, learning and assessment. (R2.6) NOT MET R2.6 is met. Through documentary evidence and discussion with the programme team at the visit it's clear that technology and simulation opportunities are fully capitalised both in CU and clinical practice settings. During the visit the programme team confirm the various methods of information technology (IT) used in programme delivery including the online learning platform Engageli. Students confirm use of Engageli which they find to be informative and user friendly. Students who have undertaken the programme in an online learning format (through implementation of the NMC emergency and recovery standards) state that their learning is enhanced by the effective and appropriate use of the IT system. PUSCs also state that the IT systems are user friendly and online learning is used effectively which enables them to maximise their input to CU programmes. On discussion with the programme team, it's clear that they're well prepared to deliver online learning having delivered the programme through the online platform for the past few years. CU provide appropriate training programmes for staff to ensure they're confident in delivering teaching and learning via this method. This is confirmed during discussions at the visit by a new member of teaching staff and their supporting senior managers. Documentary evidence supports the strategic vision of the school to deliver high quality, innovative online learning programmes, with capital investment in teaching and learning technology and the support for workforce developmental needs.

If relevant to the review





| <ul> <li>Evidence to ensure that programmes delivered in Wales comply with any<br/>legislation which supports the use of the Welsh language. (R2.7)</li> </ul> |               |                  |                 |  |
|--|---------------|------------------|-----------------|--|
|  |               | NO 🗌             | / )<br>N/A ⊠    |  |
| The programme is delivered in England only.  |               |                  |                 |  |
| Assurance is provided that Gateway 1: <u>Standards</u>   |               |                  | in <u>g and</u> |  |
| midwifery education relevant to curricula and asse   |               | met<br>YES 🔀     | ΝΟ              |  |
| Assurance is provided that Gateway 2: Standards  | s for student | <u>supervi</u> s | sion and        |  |
| assessment relevant to curricula are met   | ١             | YES 🖂            | ΝΟ              |  |
| Outcome  |               |                  |                 |  |
| Is the standard met?   | MET 🖂         | ] N              | OT MET 🗌        |  |
| Date: 24 October 2023  |               |                  |                 |  |
| Post event review  |               |                  |                 |  |
| Identify how the condition(s) is met:  |               |                  |                 |  |
| N/A  |               |                  |                 |  |
| Date condition(s) met:   |               |                  |                 |  |
| N/A  |               |                  |                 |  |
| Revised outcome after condition(s) met:  | MET           | ] <b>N</b>       |                 |  |
| N/A  |               |                  |                 |  |
|  |               |                  |                 |  |
| Standard 3: Practice learning  |               |                  |                 |  |

## Approved education institutions must:

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

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

R3.2 ensure that practice learning complies with the NMC <u>Standards for student</u> <u>supervision and assessment</u>

R3.3 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 <u>Standards for student supervision and assessment</u>





| Findings against the standard and requirements   |                     |                        |                  |
|--|---------------------|------------------------|------------------|
| Provide an <u>evaluative summary</u> from your documentary analysis and<br>evidence AND discussion at the approval visit to demonstrate if assurance is<br>provided that the QA approval criteria below is met or not met                      |                     |                        |                  |
| • Evidence to ensure that suitable and effective a governance for practice learning are in place for arrangements specifically tailored to those app employed (R3.1).  | or all applicant    | ts includir<br>e self- | C                |
| R3.1 is met. Unchanged through this modification.  |                     |                        |                  |
| Evidence provides assurance that the following Q   | A approval c        | riteria ar             | e met:           |
| <ul> <li>There is evidence that the programme complie student supervision and assessment (R3.2)</li> </ul>   | s with the NM       | C standa               | rds for          |
|  | YES                 |                        | NO 🗌             |
| Evidence provides assurance that the following Q   | A approval c        | riteria ar             | e met:           |
| <ul> <li>Processes are in place to ensure that students work in partnership with the<br/>education provider and their practice learning partners to arrange<br/>supervision and assessment that complies with the NMC Standards for</li> </ul> |                     |                        |                  |
| student supervision and assessment (R3.3)  | YES                 |                        | NO 🗌             |
| Assurance is provided that Gateway 1: <u>Standards fram</u><br><u>midwifery education</u> relevant to practice learning are r  |                     |                        | <u>/</u><br>NO 🗌 |
| Assurance is provided that Gateway 2: <u>Standards for</u><br>assessment relevant to practice learning are met   | <u>student supe</u> | rvision an             | <u>d</u>         |
| g are more presence rearrange are more   | YES                 |                        | NO 🗌             |
| Outcome  |                     |                        |                  |
| Is the standard met?   | MET 🖂               | NOT ME                 | :T 🗌             |
| Date: 24 October 2023  |                     |                        |                  |
| Post event review  |                     |                        |                  |
| Identify how the condition(s) is met:  |                     |                        |                  |
| N/A  |                     |                        |                  |
| Date condition(s) met:   |                     |                        |                  |





# N/A

Revised outcome after condition(s) met:

MET

```
NOT MET
```

N/A

## Standard 4: Supervision and assessment Approved education institutions, together with practice learning partners, must: R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC Standards for student supervision and assessment R4.3 appoint a programme leader in accordance with the requirements of the NMC Standards framework for nursing and midwifery education. The programme leader of a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience R4.4 ensure the programme leader works in conjunction with the lead midwife for education (LME) and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes R4.5 ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking R4.5.1 In exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor for that part of the programme

- 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 constructive feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes
- R4.8 assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice
- R4.9 ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies. This includes all students:
- R4.9.1 successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80 percent), and





R4.9.2 successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100 percent) Findings against the standards and requirements Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met There is evidence of how the programme will ensure how support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education (R4.1) NOT MET R4.1 is met. Documentary evidence and discussion at the visit confirm that all students are allocated an academic assessor who's a member of the programme team and appropriately trained to undertake the role. Discussion with students indicates that support from the programme team is excellent. PLPs confirm that the practice supervisors and practice assessors in clinical practice are well supported by the programme team and there's a clear process in place for meeting with the academic assessor at regular points throughout the programme. It's confirmed during the visit that all staff are familiar with the delivery of online learning as they've been delivering this method of learning and teaching over the past few years. The programme team have developed a robust assessment strategy which is now refined to be more applicable to the students' scope of practice. Assessment is also spread over the duration of the programme to make it more manageable for students. There is evidence of how the <u>Standards for student supervision and</u> 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) NOT MET R4.2 is met. Unchanged through this modification. Evidence provides assurance that the following QA approval criteria are met: Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience in accordance with the requirements of the Standards framework for nursing and midwifery education. (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)<br>YES  |  |  | N/A 🗌  |
| evide  | ide an <u>evaluative summary</u> from your documence AND discussion at the approval visit to ded that the QA approval criteria below is me  | demonstr   | ate if assur   | ance is  |
| •  | Processes are in place to ensure the student is<br>assessor who is a registered healthcare profes<br>prescriber with suitable equivalent qualification<br>student is undertaking. Processes are in place<br>circumstances only, the same person may fulfil<br>supervisor and practice assessor for that part of<br>prescribing student is undergoing training in a p<br>such instances, the student, practice supervisor<br>need to evidence why it was necessary for the<br>assessor roles to be carried out by the same per | sional and<br>s for the p<br>to ensure<br>l the role o<br>of the prog<br>practice le<br>pr/assesso<br>practice s | d an experie<br>programme t<br>that in exce<br>of practice<br>gramme whe<br>earning settir<br>or and the Al<br>supervisor ar | nced<br>he<br>ptional<br>re the<br>ng. In<br>El will<br>nd |
| R4.5 i   | is met. Unchanged throughout this modification.   |  |  |  |
| Evide  | ence provides assurance that the following Q  | A approv   | val criteria a   | re met:  |
| •  | Processes are in place to ensure the student is<br>assessor who is a registered healthcare profes<br>equivalent qualifications for the programme the<br>(R4.6)  | sional wit   | h suitable   |  |
|  | (1(4.0)   | ,  | YES 🖂  | NO   |
| •  | Processes are in place to provide constructive<br>throughout the programme to support their dev<br>meeting the RPS competencies and programm  | elopment<br>ne outcom  | as necessa   | ry for<br>NO 🗌   |
| •  | Processes are in place to assess the student's<br>on the successful completion of a period of pra<br>to their field of prescribing practice (R4.8)  | ctice-base   |  |  |
| •  | Processes are in place to ensure that all progra<br>met, addressing all areas necessary to meet th<br>This includes:  |  | •  |  |





| <ul> <li>successfully passing a pharmacology exam (the pharmacology exam must<br/>be passed with a minimum score of 80%), and</li> <li>successfully passing a numeracy assessment related to prescribing and</li> </ul>  |                |                   |  |
|--|----------------|-------------------|--|
| calculation of medicines (the numeracy asses   | ssment must be | e passed with a   |  |
| score of 100%).  |                | •                 |  |
|  | YES            |                   |  |
| Assurance is provided that Gateway 1: Standards fr   | amework for nu | ursing and        |  |
| midwifery education relevant to supervision and ass  |                |                   |  |
| induitely education referance experiment and ace   | YES            |                   |  |
|  |                |                   |  |
| Assume the second state of the state of the second state of the se |                | and a large stand |  |
| Assurance is provided that Gateway 2: <u>Standards for</u>   |                | rvision and       |  |
| assessment relevant to supervision and assessmer   |                |                   |  |
|  | YES [          | 🛛 NO 🗌            |  |
|  |                |                   |  |
|  |                |                   |  |
| Outcome  |                |                   |  |
| Outcome<br>Is the standard met?  | MET            |                   |  |
|  | MET            |                   |  |
| Is the standard met?   | MET 🔀          | NOT MET           |  |
| Is the standard met?<br>Date: 24 October 2023  | MET 🔀          |                   |  |
| Is the standard met?<br>Date: 24 October 2023<br>Post event review   | MET            |                   |  |
| Is the standard met?<br>Date: 24 October 2023  | MET            |                   |  |
| Is the standard met?<br>Date: 24 October 2023<br>Post event review<br>Identify how the condition(s) is met:  | MET 🔀          | NOT MET 🗌         |  |
| Is the standard met?<br>Date: 24 October 2023<br>Post event review   | MET            | NOT MET 🗌         |  |
| Is the standard met?<br>Date: 24 October 2023<br>Post event review<br>Identify how the condition(s) is met:  | MET            |                   |  |
| Is the standard met?<br>Date: 24 October 2023<br>Post event review<br>Identify how the condition(s) is met:<br>N/A   | MET            |                   |  |
| Is the standard met?<br>Date: 24 October 2023<br>Post event review<br>Identify how the condition(s) is met:  | MET            | NOT MET 🗌         |  |
| Is the standard met?<br>Date: 24 October 2023<br>Post event review<br>Identify how the condition(s) is met:<br>N/A<br>Date condition(s) met:   | MET            | NOT MET 🗌         |  |
| Is the standard met?<br>Date: 24 October 2023<br>Post event review<br>Identify how the condition(s) is met:<br>N/A   | MET            | NOT MET           |  |
| Is the standard met?<br>Date: 24 October 2023<br>Post event review<br>Identify how the condition(s) is met:<br>N/A<br>Date condition(s) met:<br>N/A  |                |                   |  |
| Is the standard met?<br>Date: 24 October 2023<br>Post event review<br>Identify how the condition(s) is met:<br>N/A<br>Date condition(s) met:   | MET 🗌          | NOT MET           |  |
| Is the standard met?<br>Date: 24 October 2023<br>Post event review<br>Identify how the condition(s) is met:<br>N/A<br>Date condition(s) met:<br>N/A  |                |                   |  |
| Is the standard met?<br>Date: 24 October 2023<br>Post event review<br>Identify how the condition(s) is met:<br>N/A<br>Date condition(s) met:<br>N/A  |                |                   |  |

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<br>and register their award as a prescriber<br>R5.4 inform the student that they may only prescribe once their prescribing<br>qualification has been annotated on the NMC register and they may only<br>prescribe from the formulary they are qualified to prescribe from and within<br>their competence and scope of practice   |  |  |  |
|---|--|--|--|
| Findings against the standards and requirements   |  |  |  |
| Evidence provides assurance that the following QA approval criteria are met:  |  |  |  |
| <ul> <li>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:         <ul> <li>a community practitioner nurse (or midwife) prescriber (V100/V150), or</li> <li>a nurse or midwife independent/supplementary prescriber (V300) (R5.1)</li> </ul> </li> </ul> |  |  |  |
| <ul> <li>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)</li> <li>YES X NO </li> </ul>  |  |  |  |
| <ul> <li>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)</li> </ul>   |  |  |  |
| <ul> <li>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)</li> <li>YES X NO X</li> </ul>  |  |  |  |
| Assurance is provided that the <u>Standards framework for nursing and midwifery</u><br><u>education</u> relevant to the qualification to be awarded are met<br>YES NO   |  |  |  |
| Outcome   |  |  |  |
| Is the standard met? MET MET NOT MET  |  |  |  |
| Date: 24 October 2023   |  |  |  |





| Post event review                       |       |         |
|---|-------|---------|
| Identify how the condition(s) is met:   |       |         |
| N/A                                     |       |         |
| Date condition(s) met:                  |       |         |
| N/A                                     |       |         |
| Revised outcome after condition(s) met: | MET 🗌 | NOT MET |
| N/A                                     |       |         |





# Section four

#### Sources of evidence

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

| Key documentation  | YES         | NO |
|--|-------------|----|
| Programme document, including proposal, rationale and consultation   | $\square$   |    |
| Programme specification(s)   | $\boxtimes$ |    |
| Module descriptors   |             |    |
| Student facing documentation including: programme handbook   | $\boxtimes$ |    |
| Student university handbook  | $\boxtimes$ |    |
| Practice assessment documentation  | $\square$   |    |
| Practice placement handbook  | $\square$   |    |
| PAD linked to competence outcomes, and mapped<br>against RPS A Competency Framework for all<br>Prescribers   | $\square$   |    |
| Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC 2018, updated 2023) (Gateway 1)   |             |    |
| Mapping document providing evidence of how the<br>Standards for student supervision and assessment (NMC<br>2018, updated 2023) apply to the programme(s)<br>(Gateway 2)  |             |    |
| Mapping document providing evidence of how the<br>programme meets the <i>Standards for prescribing</i><br><i>programmes</i> and RPS <i>Standards of proficiency for</i><br><i>prescribers</i> (NMC 2018, updated 2023) (Gateway 3) |             |    |
| Curricula vitae for relevant staff   | $\boxtimes$ |    |
| Registered healthcare professionals, experienced<br>prescribers with suitable equivalent qualifications for the<br>programme - registration checked on relevant regulators<br>website  |             |    |
| Written placement agreements between the education<br>institution and associated practice learning partners to<br>support the programme intentions.<br>If you stated no above, please provide the reason and mitig                 | ation:      |    |
|  |             |    |
| List additional documentation:   |             |    |
| None identified.   |             |    |
| Additional comments:<br>None identified.   |             |    |
|  |             |    |





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

|  | YES       | NO |  |
|--|-----------|----|--|
| Senior managers of the AEI/education institution with                      | $\square$ |    |  |
| responsibility for resources for the programme                             |           |    |  |
| Senior managers from associated practice learning                          | $\square$ |    |  |
| partners with responsibility for resources for the                         |           |    |  |
| programme  |           |    |  |
| Programme team/academic assessors  | $\square$ |    |  |
| Practice leads/practice supervisors/ practice assessors                    | $\square$ |    |  |
| Students   | $\square$ |    |  |
| If yes, please identify cohort year/programme of study:                    |           |    |  |
| Three students currently on the September 2023 cohort (on-campus delivery) |           |    |  |
| One student from the January 2023 cohort (online delivery)                 |           |    |  |
| One student from the September 2022 cohort (online delivery)               |           |    |  |
| People who use services and carers   | $\square$ |    |  |
| If you stated no above, please provide the reason and mitigation:          |           |    |  |
|  |           |    |  |
| Additional comments:   |           |    |  |
| None identified.   |           |    |  |

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

|  | YES | NO          |  |
|--|-----|-------------|--|
| Specialist teaching accommodation (e.g. clinical                                 |     | $\bowtie$   |  |
| skills/simulation suites)  |     |             |  |
| Library facilities   |     | $\boxtimes$ |  |
| Technology enhanced learning   |     | $\square$   |  |
| Virtual learning environment   |     |             |  |
| Educational audit tools/documentation  |     | $\square$   |  |
| Practice learning environments   |     | $\boxtimes$ |  |
| If practice learning environments are visited, state where visited/findings:     |     |             |  |
| System regulator reports reviewed for practice learning                          |     |             |  |
| partners   |     |             |  |
| System regulator reports list:   |     |             |  |
| Birmingham Women's and Childrens NHS Foundation Trust, Care Quality              |     |             |  |
| Commission (CQC) inspection report, 3 March 2023                                 |     |             |  |
| Guy's and St Thomas NHS Foundation Trust, CQC inspection report, 23 July         |     |             |  |
| 2019   |     |             |  |
| If you stated no above, please provide the reason and mitigation:                |     |             |  |
| CU is an established AEI and visits to resources aren't required as part of this |     |             |  |
| modification.  |     |             |  |
| Additional comments:   |     |             |  |
| None identified.   |     |             |  |





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| Issue record  |                     |       |                     |
|---------------|---------------------|-------|---------------------|
| Final Report  |                     |       |                     |
| Author(s):    | Neil Thomas         | Date: | 24 October 2023     |
| Checked by:   | Ian Felstead-Watts  | Date: | 10 November<br>2023 |
| Submitted by: | Mubaraq Sanusi      | Date: | 29 November<br>2023 |
| Approved by:  | Natasha<br>Thompson | Date: | 29 November<br>2023 |