



# **Nursing and Midwifery Council Quality Assurance Review**

## **Programme Approval Report for:**

**Prescribing qualifications leading to:**

**Independent and Supplementary Nurse Prescribing  
Aston University**

**March 2025**

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## Key institutional and programme details

<b>Name and location of Approved Education Institution (AEI)</b>	Aston University Aston Street Birmingham B4 7ET England
<b>AEI/EI Institution Identifier [UKPRN]</b>	10007759
<b>Name and location of academic delivery partner(s) if not the AEI/EI noted above</b>	Not applicable
<b>Name of new employer partners for apprenticeships</b>	N/A: this is not an apprenticeship route
<b>Approval type</b>	Programme approval

Name of programme					
NMC Programme Title	AEI/EI Module Title and number of credits	Academic level	AEI/EI Programme Title (in full)	Full-time	Part-time
Independent and Supplementary Nurse Prescribing	Practice Certificate in Independent and Supplementary Prescribing  45 credits	England, Wales, Northern Ireland <input type="checkbox"/> Level 6 <input checked="" type="checkbox"/> Level 7	N/A	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Interim awards available (only required if leading to NMC registration)</b> There are no interim awards for this qualification that lead to NMC registration					
<b>Proposed programme start date</b>	1 September 2025				
<b>Standard(s) under assessment</b>	<input type="checkbox"/> Part 2: Standards for student supervision and assessment <input checked="" type="checkbox"/> Part 3: Standards for prescribing programmes  Note that the AEI has taken an institutional approach to Part 2: Standards for student supervision and assessment and therefore compliance with Part 2 has been confirmed through a previous review.				
<b>Date of visit</b>	20 March 2025 – online visit				
<b>Visitor team</b>	Registrant Visitors: Mr Scott Warren Lay Visitor: Ms Cheryl Dunn				

## Executive summary

Quality Assurance Reviews (QARs) are undertaken for the specific purpose of making recommendations to the Nursing and Midwifery Council (NMC) in relation to the approval (or otherwise) of the above-named programme(s) or in relation to the approval (or otherwise) of major modifications to the above-named programme(s). Reviews follow the Gateway approach to programme approvals and major modifications, as outlined in QAA Guidance for Approved Education Institutions and Education Institutions on NMC Quality Assurance Reviews.

Reviews involve a period of desk-based analysis with the opportunity for NMC visitors to request further information, evidence or clarification and a conjoint visit with the Approved Education Institution (AEI) or Education Institution (EI) programme approval panel. All evidence submitted by the AEI or EI is reviewed by the visitors.

Visits enable both the NMC visitors and the AEI or EI programme approval panel to gather further evidence and clarifications to inform their judgements and make recommendations about the AEI or EI ability to meet the NMC standards. Visits will normally include meetings with a range of stakeholders such as students, people who use services and carers, employers, practice learning partners, the programme team and senior managers.

For programme approvals, all standards within Part 3: Standards for prescribing programmes are reported upon. For major modifications, only those Part 3 standards impacted by the modification are reported upon. The visitor team confirmed with the AEI/EI which Part 3 standards are in scope for a major modification.

Following a review, a draft report is shared with the AEI or EI for the purposes of confirming factual accuracy before the report is finalised.

The conjoint visit with Aston University's approval panel took place on 20 March 2025.

### Context for the review

The review is for the approval of the Independent and Supplementary Nurse Prescribing qualification (V300) course in line with Part 3: Standards for prescribing programmes (2018 updated 2024). Aston University's (AU) title for this programme is Practice Certificate in Independent and Supplementary Prescribing. The programme is planned to be offered part-time and is a stand-alone qualification.

A range of stakeholders have been consulted as part of the development of the programme. Consultation has involved discussions with NHS Trusts, primary care providers and regulatory representatives about workforce needs, prescribing competency expectations, the provision of Practice Assessor (PA) and Practice Supervisor (PS) support and practice learning opportunities. People who use services and carers (PSCs) have been consulted with regard to their expectations from independent prescribers, their perspectives on effective prescribing communication and patient expectations of prescribers in different healthcare settings. Students have provided input on their experiences and preferences of learning and assessment, and feedback on proposed teaching strategies, accessibility and flexibility considerations for part-time students.

Arrangements are in place to involve stakeholders in the ongoing delivery and review of the programme. There are processes to enable students to provide feedback on their programme and to engage in quality enhancement. AU holds an annual prescribing conference for practice learning partners, PAs/PSs and students, which includes an opportunity for collaborative working, programme evaluation and exploring enhancement

opportunities. AU confirmed that it will involve PSCs in workshop activities to strengthen patient involvement and person-centred practice in the programme. AU is a member of the West Midlands Regional Non-Medical Prescribing Forum which is due to be re-launched in April 2025 after a short period of inactivity and is intended to provide regional overview and key stakeholder input to share best practice.

During the approval visit, the visitor team met with senior staff and members of the programme team, PAs and PSs, representatives from the practice learning partners (PLPs), and PSCs including two representatives from Friends 2 Friends which is a community group of people with learning disabilities and autism. As this is the first NMC post-registration programme that AU has offered, the visitor team was unable to meet with existing students. However, the visitor team was able to meet with students from the Pharmacist Independent Prescribing Certificate programme.

The **final recommendation** made by the visitor team to the NMC, following consideration of AU's response to any conditions required by the approval panel, is as follows:

**Programme is recommended to the NMC for approval.** The programme meets all standards and requirements and enables students to achieve stated NMC standards of proficiency and learning outcomes for theory and practice.

The findings of the NMC visitor team's review are explained in more detail in the following sections. This includes a summary of any conditions of approval and confirmation of whether these have been satisfactorily addressed.

## Conditions and recommendations

The **provisional judgement** of the visitor team following the visit and prior to the consideration of the AU response to any conditions was as follows:

**Programme is recommended to the NMC for approval after conditions are met to ensure the programme meets all standards and requirements and enables students to achieve stated NMC standards of proficiency and learning outcomes for theory and practice.**

### Conditions

Conditions				
No.	Condition details	Specific standard(s) not met	NMC only/ Joint	AEI/EI only
C1	Provide revised student and practice assessor/supervisor handbooks specifically for NMC-registered students in order to clarify, define and differentiate the roles and responsibilities of the PA, the PS and the AA and how they align to the key progression assessment points of the programme, and provide a mechanism, such as a flow-chart, to capture how the team will ensure compliance with PA and PS training, and maintain the register of PAs and PSs.	3.2; 4.2	NMC only	
Date for all conditions to be met to meet intended delivery date		1 May 2025		

Joint conditions relate to both NMC Standards and the AU's programme approval outcomes. All conditions must be met for a programme to be recommended to the NMC for final approval.

### Recommendations for enhancement

Recommendations				
No.	Recommendation	Specific standard(s)	NMC only/ Joint	AEI/EI only
R1	Strengthen arrangements to formalise the principal strategic-level partnerships to ensure suitable and effective arrangements and governance for the programme.	1.3; 3.1	NMC only	

Recommendations are to be addressed and reported in the annual self-assessment report.

## Response to conditions

Response to conditions		
No.	Condition details	Findings
C1	Provide revised student and practice assessor/supervisor handbooks specifically for NMC-registered students in order to clarify, define and differentiate the roles and responsibilities of the PA, the PS and the AA and how they align to the key progression assessment points of the programme, and provide a mechanism, such as a flow-chart, to capture how the team will ensure compliance with PA and PS training, and maintain the register of PAs and PSs.	<p>AU has submitted a revised practice assessor handbook, and a student handbook specifically for NMC-registered students, which contain terminology consistent with the NMC Standards for student supervision and assessment. The roles of PA, PS and AA are now explicitly defined, with an explanation of how each role aligns with key assessment and progression points. The handbooks outline the programme structure, key portfolio components, assessment schedule and key assessment and progression points. There is clear information regarding how a student, PS or PA may raise concerns with the prescribing programme team.</p> <p>AU has also submitted a flow-chart which demonstrates how it will ensure compliance with PA and PS training requirements and maintain the register of PAs and PSs. The flow-chart clearly defines AU's understanding of the role of the PA, PS and AA, and how the roles work collaboratively to assess student progression. The flow-chart outlines the steps in place to identify and verify the eligibility of PAs and PSs, and ensure that PA and PS preparation is completed, as well as arrangements for ongoing monitoring of the effectiveness of PAs and PSs, engagement in ongoing professional development, and termly audits by the programme director of the PA/PS register.</p> <p>The visitor team therefore considers that for Condition C1, Aston University has fully addressed the requirements of the condition and Standards 3.2 and 4.2 are met.</p>

The visitor team reviewed in full the response(s) and evidence from Aston University to the conditions set. The findings of the visitor team with regard to responses to individual conditions are recorded in the main body of this report.

The visitor team considers that all conditions listed above have been satisfactorily addressed resulting in the team being able to confirm that all required NMC standards are met.

The **final recommendation** made by the visitor team to the NMC, following consideration of Aston University's response to any conditions set, is therefore as follows:

All conditions relating to this programme have been addressed and **the programme is recommended to the NMC for approval**. The programme meets all standards and requirements and enables students to achieve stated NMC standards of proficiency and learning outcomes for theory and practice.

## Explanation of findings for Part 3

### 1: Selection, admission and progression

Approved education institutions, together with practice learning partners, must:		Met	Not Met	Met after conditions	Not applicable
1.1	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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2	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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3	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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.4	Consider recognition of prior learning that is capable of being mapped to the RPS Competency Framework for all Prescribers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.5	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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.6	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:  1.6.1 Clinical/health assessment  1.6.2 Diagnostics/care management  1.6.3 Planning and evaluation of care.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.7	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Findings

1. The visitor team considered a range of documentary evidence for this standard, including AU's general academic and assessment regulations, admissions policies and procedures, the student programme handbook, induction materials, the module specification and the practice assessment document. The visitor team also met with members of the AU academic programme team, strategic senior PLPs, PSs and

PAs, PSCs, and students linked to the existing Pharmacist Prescribing programmes, during the online visit.

2. In considering Standards 1.1, 1.2, 1.5 and 1.7, the visitor team reviewed AU's admissions policy, application form and verification checklist and Aston's equality, diversity and inclusion policies and found that there are detailed and systematic selection and admissions processes in place to ensure that all applicants are appropriately registered and have the required experience to enter the programme. Roles and responsibilities in the selection and admission of students, and principles for selecting applicants are clearly articulated. The documentary evidence demonstrates that the admissions criteria for the programme are appropriate. The programme application form clearly states that applicants for V300 must be a registered nurse (level 1), a registered midwife or a SCPHN (Standard 1.1), have the competence, experience and academic ability to study at the level required for that programme (Standard 1.5) and must have been registered with the NMC for a minimum of one year (Standard 1.7). The operational details of the admissions process demonstrate that there is a clear admissions process in place, which enables applicants to provide the relevant information regarding their eligibility, including academic qualifications, clinical experience and NMC registration, and for organisational confirmation and oversight to ensure that on entry to the programme applicants fully meet the entry requirements and are deemed fit to undertake the course. Scrutiny of applications is undertaken by the Postgraduate Admissions Team and Programme Director. During the online visit, the programme team clearly articulated the application and selection process for the programme, noting that in addition to considering the applicant's formal qualifications and registration status, other aspects of the applicant's experience would be reviewed, including, for example, their continuing professional development experience if the candidate has been out of study for some time.
3. In considering Standard 1.6, the visitor team found that arrangements are in place during the admissions process to confirm that the applicant is capable of safe and effective practice at the appropriate level of proficiency in their intended area of prescribing practice. This is because when completing the programme application form applicants are required to provide supporting evidence that they have completed a health/clinical assessment course (or specialist equivalent) which has prepared them in clinical/health assessment, diagnostics/care management and planning and evaluation of care. If they have, then details of the course must be provided and this confirmed by an assessing professional colleague. If they have not, the applicant is asked if they have been deemed competent by an appropriate professional colleague, in clinical/health assessment, diagnostics/care management and planning and evaluation of care prior to being put forward for this course. In both cases, the professional colleague must confirm that the applicant is competent in clinical/health assessment, diagnostics/care management and planning and evaluation of care, and is a suitable candidate for prescribing. Verification of the applicant's evidence of capability is through the University Postgraduate Admission's team and the Programme Leader and recorded in the Applicant Checklist and Verification template.
4. In considering Standard 1.3, the visitor team considered documentary evidence linked to the governance structures in place to support students, and discussed these with key stakeholders at the online visit. Programme documentation confirms that there are arrangements in place to enable students to undertake and be supported throughout the programme, including a personal academic tutor system and access to AU's student services, such as counselling and mental health support, study skills and time management workshops, disability and learning support services for

students requiring reasonable adjustments. Student learning and progress is monitored through the use of an electronic portfolio platform to record clinical supervision logs, prescribing reflections, and competency sign-offs, scheduled midpoint and final review meetings with the PA, Academic Tutor, and Programme Director, and oversight by the Programme Team, Practice Learning Committee, and Board of Examiners. Assurance is sought during the admissions process that students will be supported by their employers to allow them to complete the required number of supervised practice hours and fulfil AU's attendance requirements through the completion of a regionally agreed prescribing application form (RPAF) which requires line-manager agreement for the applicant to be released for all face-to-face/online study days with the required additional hours of learning in practice. The PA and PS also complete and sign a declaration in the RPAF confirming their commitment to support the student in the clinical environment.

5. During the review, the visitor team sought clarification of whether there were formal arrangements, such as memoranda of agreement or similar, in place between AU and PLPs to support governance and oversight of employer support of student learning and progress on the programme. At the online visit the programme team explained that it had developed a template for a memorandum of understanding to establish the expectations and commitments between AU and the employing organisation regarding the support and protected learning time for students. This has been distributed for feedback response but was not being used at present and no decision had yet been taken about its use. In the meeting with Strategic Senior Practice Learning Partners/Managers the visitor team was told that that while arrangements to support the clinical hours and wider support arrangements for prescribing students were mature and long-standing, these were not formalised through memoranda of understanding or similar. On the basis of the evidence the visitor team formed the view that there is an opportunity to strengthen the governance structures and oversight of employer support of student learning and progress on the programme which led to **recommendation (R1)** in relation to Standard 1.3 (and 3.1) to strengthen arrangements to formalise the principal strategic-level partnerships to ensure suitable and effective arrangements and governance for the programme.
6. In considering Standard 1.4, the visitor team reviewed AU's credit and qualifications framework and general regulations and information relating to the arrangements for the recognition of prior learning (RPL). The regulations indicate that both certificated and experiential prior learning may be considered via a process of assessment to determine if the learning is suitable for recognition. Each application for RPL is assessed on a case-by case basis through student submission of an application form and supporting evidence and review by an RPL panel, as well as further approval from an external examiner. For NMC-approved programmes, RPL may not exceed 50%. There is no opportunity to apply for RPL for the final assessments, and the required numeracy/pharmacology examinations and 90 hours of practice elements apply to all students irrespective of prior learning or academic credit. AU recognises that students with V100/V150 prescribing qualifications may be exempt from some teaching and learning time.
7. Based on the information made available, the visitor team considers that AU has in place the appropriate arrangements for Standard 1: Selection, admission and progression to enable the NMC standards to be met.

## 2: Curriculum

Approved education institutions, together with practice learning partners, must:		Met	Not Met	Met after conditions	Not applicable
2.1	Ensure that programmes comply with the NMC Standards framework for nursing and midwifery education.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.2	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.3	State the learning and teaching strategies that will be used to support achievement of those competencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4	Develop programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice:  2.4.1 stating the general and professional content necessary to meet the programme outcomes  2.4.2 stating the prescribing specific content necessary to meet the programme outcomes  2.4.3 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.5	Ensure that the curriculum provides a balance of theory and practice learning, using a range of learning and teaching strategies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.6	Ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.7	Ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

## Findings

8. The visitor team considered a range of evidence for this standard including the AU regulations for the programme, the module specification, student and programme handbooks, staff CVs, examples of meeting minutes demonstrating the involvement of stakeholders, including students and PSCs, and documents describing arrangements for student representation and feedback. The visitor team also met with the AU programme team, strategic senior PLPs, PSs and PAs, PSCs, and students linked to the existing Pharmacist Prescribing programmes, during the online visit.
9. In considering whether the programmes will comply with the NMC Standards framework for nursing and midwifery education (Standard 2.1), the visitor team was assured from documentary evidence of staff CVs and meetings with the programme team and students during the visit that there is adequate programme team staffing and that staff have appropriate academic, clinical and relevant industry experience.

Academic regulations which reflect the specific requirements of the Independent Prescribing (V300) Programme in such areas as admissions and assessment are in place. These programme-specific requirements sit within AU's established overarching framework for admissions, assessments, progression, and awards across all its programmes at undergraduate and postgraduate levels. A fitness to practise policy is in place to investigate and action concerns about professional practice issues.

10. The visitor team saw evidence that there are organisational level processes in place to engage with PLPs, and a robust quality assurance process in place to ensure compliance with standards. Meeting minutes demonstrate AU consultation with PLPs on the development of the programme, and programme documents contain details of arrangements for internal moderator and external examiner review of student assessment. Additionally, at the visit the programme team outlined that it holds an annual prescribing conference for PLPs, PAs/PSs and students, this includes an opportunity for collaborative working, programme evaluation and exploring enhancement opportunities. This feeds into an annual programme evaluation report. The visitor team also noted the relaunch of the West Midlands regional prescribing forum intended to provide regional overview and key stakeholder input. PAs, PSs and PLPs who met the visitor team during the visit were all able to articulate their understanding of the escalation process and identify key programme team contacts.
11. There is evidence providing assurance of coherent arrangements for student engagement, including details of a course representative system, staff-student consultative meetings, student participation in programme committees, and feedback through module evaluation and participation in discussion forums hosted on the virtual learning environment. Students on the currently running Pharmacist Prescribing programme confirmed during the visit that they feel engaged in their programme development and that AU is responsive to their feedback. At the visit, members of the programme team outlined ways in which the processes for student engagement and feedback have been designed to ensure that students who are already employed professionals can participate, including the use of digital technology to facilitate meetings and communication, the creation of protected slots within teaching timetables for module evaluation, and using timetabled study days to include 'you said/we did' sessions.
12. There is evidence in meeting minutes that students and other stakeholders (see below) have been involved in consultation meetings during the development of the Independent Prescribing (V300) programme.
13. In considering Standards 2.2 and 2.3, the visitor team looked at how the programme has been designed and developed. Programme documentation, including the module specification, practice document and student handbook demonstrate alignment with the Royal Pharmaceutical Society (RPS) Prescribing Competency Framework for all Prescribers. There is extensive evidence in meeting minutes that AU has actively engaged with key stakeholders including the Community Trust, prescribers, NHS trusts, primary care representatives, external experts, practice partners, PSCs and student representatives to design the programme. During the online visit, the visitor team met with practice partners and PSC group representatives who were able to discuss their current input into the Pharmacist Prescribing programme and identified opportunities to contribute to the proposed prescribing programme.
14. Teaching and learning strategies are stated in the module specification and student handbook (Standard 2.3). These documents show that a variety of teaching and

learning methods are employed which align to the RPS Prescribing Competency Framework for all Prescribers to support learning and professional development within the programme to enable the student to achieve the required proficiencies. Additionally, the documentary evidence demonstrates that there is a clear process for supporting learners who have additional learning needs and for supporting students in practice who are not meeting the required level of proficiency or failing to engage. During the online visit, students on the existing Pharmacist Prescribing programme demonstrated a good understanding of how to seek additional support and reasonable adjustments and were able to provide examples of how the teaching team had been responsive to individual needs. Students also commented positively on the blended learning approach, with an appreciation for both campus-based and virtual learning activities, which were considered to be proportionate and necessary for professional development. During the visit, PAs and PSs discussed with the visitor team how they would work with AU to support a student failing to progress using the process for escalation.

15. In considering Standard 2.4, the visitor team found that the evidence clearly demonstrates that the curriculum and assessment strategies are mapped to the RPS competency framework and that programme outcomes have been developed with key stakeholders that can be applied to all fields of nursing practice and SCPHN roles.
16. In considering Standards 2.5 and 2.6, the visitor team considered the module specification which confirms that total learning hours on the programme are 450 and the programme uses a blend of asynchronous and synchronous learning methods and a requirement of 90 hours of supervised prescribing practice to achieve a balance of theory and practice. As noted above, the programme was designed in collaboration with a range of stakeholders, including the Non-Medical Prescribing Regional Committee to ensure comparability with other non-medical prescribing (NMP) programmes and to ensure a comparable number of practice supervision hours across the region. The nurse independent prescribing programme will align to this assessment requirement.
17. During the visit, the programme team confirmed that some simulated practice is used to support consultation, communication and decision making. AU maintains an active register of faculty who undertake regular simulation activity and professional development to support this. The visitor team established that any simulation activity is used as an enhancement on the programme and does not contribute to the 90 practice learning hours. Based on the documentary evidence and evidence from the online visit, the visitor team formed the view that technology is used effectively and proportionately on the programme.
18. Standard 2.7 is not applicable because the programme will not be delivered in Wales.
19. Based on the information made available, the visitor team considers that AU has in place the appropriate arrangements for Standard 2: Curriculum to enable the NMC standards to be met.

### 3: Practice learning

Approved education institutions, together with practice learning partners, must:		Met	Not met	Met after conditions	Not applicable
3.1	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.2	Ensure that practice learning complies with the NMC Standards for student supervision and assessment.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.3	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 Standards for student supervision and assessment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Practice learning requirements and simulated learning hours

The practice learning requirements include the completion of 12 clinical practice learning days, or 90 hours of prescribing related practice. This is evidenced by a clinical hours log (confirmed by the PA) and uploaded to an electronic portfolio.

At the visit, the programme team told the visitor team that one of the campus-based taught days included practice simulation (approximately six hours of content). However, simulated practice learning is used as an enhancement and is not included in the 90 hours of prescribing related practice hours.

#### Findings

20. The visitor team considered a range of evidence for this standard including application documents, the module specification, staff and student handbooks, programme policies, documents relating to student support, and stakeholder meeting minutes. The visitor team also met during the online visit with the AU academic programme team, strategic senior PLPs, PSs and PAs, PSCs, and students linked to the existing Pharmacist Prescribing programmes.
21. In considering Standard 3.1, the visitor team saw evidence of collaborative working with the Non-Medical Prescribing Regional Committee and other stakeholders to ensure that suitable and effective arrangements and governance for practice learning are in place for all applicants. There is a robust process in place to ensure suitable applicants are enrolled, the application process is explicit in confirming the support of a PA and PS, and this must be confirmed by the line manager/NMP lead. There is an additional requirement for self-employed applicants to provide proof of indemnity insurance, good health and good character as confirmed by a senior professional colleague and a suitable clinical practice area (which is subject to the AU placement audit process). The visitor team was told during the review that the West Midlands Non-Medical Prescribing Regional Committee is due to be relaunched after a period of inactivity in April 2025 with among its stated purpose an intention to provide a platform to share best practices and support quality assurance processes for non-medical prescribing activities.

22. As discussed in more detail in relation to Standard 1.3, the visitor team identified an opportunity to strengthen governance for practice learning which led to the identification of **recommendation (R1)** in relation to Standard 3.1 to strengthen arrangements to formalise the principal strategic-level partnerships to ensure suitable and effective arrangements and governance for the programme.
23. In considering Standard 3.2, the visitor team noted that the programme application process requires the details of the nominated PA and PS to be included on the student application form. The professional status and registration details of these individuals are checked for eligibility by the programme leader. Additionally, PAs and PSs are required to declare that they meet the NMC Standards for student supervision and assessment, have the necessary prior learning and experience and to confirm their agreement to undertake the Aston E-learning package to prepare them for their role and to engage in ongoing development. The practice supervisor and practice assessor handbook clearly defines the role of the PA and PS and offers guidance on the role boundaries and expectations, including preparation for the role(s), and support networks, with key contacts. The expectation of role collaboration between PS, PA and the AA is described, with reference to the practice assessment document (PAD). There are also dedicated sections of the handbook outlining the process steps to take in the case of a student failing to progress and/or achieve the required proficiencies and the tripartite approach to address this.
24. The visitor team met with PA and PS representatives at the online visit to discuss their role. However, the meeting did not provide assurance to the visitor team that the PA and PS representatives fully understood the differentiation between the two roles nor how they interacted with the AA role on the proposed Independent and Supplementary Nurse Prescribing programme. In addition, the terminology DPP (Designated Prescribing Practitioner), which is not aligned with NMC SSSA models of supervision, and PA were used interchangeably by the PAs and PSs during the discussion and there was inconsistency regarding who had attended the PA/PS training. During a later clarification meeting with the programme team, the visitor team again found that the terms DPP and PA were used interchangeably. From the meetings, the visitor team could not be certain that the NMC supervision structure of PA, PS and AA is fully understood and embedded in the proposed programme. Additionally, the visitor team noted that the Trainee Prescribing Student (TPS) handbook uses the terms 'Practice Assessor' and 'Designated Prescribing Practitioner' interchangeably and does not recognise or define the role of the PS. Given AU's intention to teach students on the Independent and Supplementary Nurse Prescribing programme jointly with Pharmacist programme students there is a risk of role confusion, and potentially a risk to student supervision and progression. This has led to the identification of **condition (C1)** in relation to Standard 3.2 (and 4.2) that AU provide revised student and practice assessor/supervisor handbooks specifically for NMC-registered students in order to clarify, define and differentiate the roles and responsibilities of the PA, the PS and the AA and how they align to the key progression assessment points of the programme, and provide a mechanism, such as a flow-chart, to capture how the programme team will ensure compliance with PA and PS training, and maintain the register of PAs and PSs.
25. In considering Standard 3.3, the visitor team noted that programme documentation demonstrates a clear process for providing key achievement milestones and role definitions for the PA, PS and AA. The evidence also indicates that a suitable student progress monitoring framework is in place, with a nominated programme director for overall responsibility and quality assurance monitored via AU processes and external examiner review.

26. Based on the information made available, the visitor team considers that AU has in place the appropriate arrangements for Standard 3: Practice learning to enable the NMC standards to be met, subject to meeting condition (C1).

## 4: Supervision and assessment

Approved education institutions, together with practice learning partners, must:		Met	Not met	Met after conditions	Not applicable
4.1	Ensure that support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.2	Ensure that support, supervision, learning and assessment provided complies with the NMC Standards for student supervision and assessment.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.3	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.4	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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.5	<p>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.</p> <p>4.5.1 In exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor for that part of the programme where the prescribing student is undergoing training in a practice learning setting. In such instances, the student, practice supervisor/assessor and the AEI will need to evidence why it was necessary for the practice supervisor and assessor roles to be carried out by the same person</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.6	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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.7	Provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.8	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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.9	<p>Ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies. This includes all students:</p> <p>4.9.1 successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

27. The visitor team considered a range of evidence for this standard including policies relating to admissions, student conduct and fitness to practise, the module specification, and programme handbooks for students and PSs/PAs. The visitor team also met with the AU academic programme team, strategic senior PLPs, PSs and PAs, PSCs, and students linked to the existing Pharmacist Prescribing programmes during the online visit.
28. In considering Standard 4.1, the visitor team found evidence that there is a robust application process, with confirmation of support for practice learning. AU policies are in place to establish expected boundaries of student conduct, extending to fitness to practise guidance for students on health-related courses, and appropriate organisational quality assurance, external examiner and practice placement audit processes also in place. The RPAF document and the PAD confirm that prescribing students are required to critically reflect upon their practice and that prescribing consultations form part of both the formative and summative assessed components of the practice portfolio. At the visit, students on the current Pharmacist Prescribing programme confirmed that they felt well supported by the programme team, PSs and PAs, and that practice learning is evaluated.
29. Evidence in meeting minutes and AU's consultation and timeline planning document confirm extensive stakeholder engagement undertaken in the development of the Independent Prescribing (V300) Programme including the AU academic team, Community Trust, prescribers, PSCs, the NMC Regulatory Advisor, NHS trusts, primary care representatives, student representatives, external experts, employers and practice partners.
30. In considering Standard 4.2, the visitor team noted that the revised practice supervisor and practice assessor handbook submitted in response to the visitor team's request for clarification of the role definitions of PS and PA for NMC-regulated prescribing programmes appropriately defines the roles, role boundaries and supervision expectation of PA and PS roles. The professional status and registration details of PAs and PSs are checked for eligibility by the programme leader during the student application and admissions process, and PAs and PSs are required to demonstrate that they have the necessary prior learning and experience and will undertake the AU E-learning package to prepare them for their role and to engage in ongoing development.
31. However, as discussed in more detail in Standard 3.2, the visitor team was not assured during meetings with PAs and PSs and the programme team that the differentiation between the two roles or how they interacted with the AA role was fully understood and embedded, with a potential risk for student supervision, learning and assessment on the programme. As a consequence the visitor team identified **condition (C1)** in relation to Standard 4.2 (and 3.2) for AU to provide revised student and practice assessor/supervisor handbooks specifically for NMC-registered students in order to clarify, define and differentiate the roles and responsibilities of the PA, the PS and the AA and how they align to the key progression assessment points of the programme, and provide a mechanism, such as a flow-chart, to capture how the

team will ensure compliance with PA and PS training, and maintain the register of PAs and PSs.

32. In considering Standard 4.3, the visitor team noted that AU has appointed a suitably qualified programme leader who is a registered nurse with extensive experience and is a registered independent nurse prescriber. The programme lead is supported in the delivery of the prescribing programme by a team of pharmacist and nurse academics, all of whom hold the independent prescribing qualification.
33. Standard 4.4 is not applicable because during the course of the review AU confirmed to the visitor team that it does not intend to open the programme to midwives.
34. In considering Standard 4.5, the visitor team noted that the process to ensure that the student is assigned a suitable PA is embedded in the application process. Meeting this requirement will be demonstrated on the regionally agreed RPAF which is reviewed and confirmed by the applicant line manager, NMP lead and the prescribing programme lead. The programme lead will check the relevant professional register to ensure that the PA is a qualified prescriber.
35. AU has a process for the application of exceptional circumstances, when the same person may fulfil the role of PS and PA for a part of the programme where the prescribing student is undergoing training in a practice learning setting (4.5.1). This process includes putting in place additional measures such as meetings between the programme director and the PLP to ensure progression milestones were being met and there were no concerns of inequity of assessment, and regular student check-ins. The PAD would also be subject to independent review by a second academic, and external review to ensure fairness of assessment. AU states it would be standard practice to share any occurrence of this exceptional circumstance with the programme external examiner, and to escalate any issues via the University practice learning committee for quality assurance oversight.
36. In considering Standard 4.6, the visitor team was told by AU that the allocation of AAs is coordinated by the prescribing programme team and that all students will be assigned a tutor with an NMC-recorded prescribing qualification (or equivalent). The academic staff CVs reviewed by the visitor team confirm that suitably qualified AAs are in place to support the students on this programme.
37. Arrangements for the provision of constructive feedback to students (Standard 4.7) are clearly set out in the programme documents, with opportunities for both formative and summative feedback throughout the programme.
38. In considering Standard 4.8, the visitor team noted that students are required to complete 90 hours of practice-based learning relevant to their field of prescribing practice. Processes are in place to assess a student's suitability for award based on the successful completion of the practice-based learning. Royal Pharmaceutical Society Prescribing Competency Framework domains and competencies are embedded in the PAD. AAs within the prescribing team are required to complete AA preparation utilising the Pan Midlands, Yorkshire and East of England Practice Learning Approach to the NMC (2018) Part 2: Standards for Student Supervision and Assessment. The marking and moderation of PADs is also subject to scrutiny by the external examiners appointed for the prescribing programmes.
39. In considering Standard 4.9, the visitor team noted that the module specification and the student programme handbook explicitly reflect the requirements of the standard in relation to the learning outcomes and assessment. Appropriate minimum pass

thresholds are clearly stated and assessment regulations state that students must pass all elements in order to pass the programme. Additionally, it is made clear that any behaviour, action, omission or recommendation that indicates unsafe practice (resulting in potential patient harm) constitutes an automatic programme fail.

40. Based on the information made available, the visitor team considers that AU has in place the appropriate arrangements for Standard 4: Supervision and assessment to enable the NMC standards to be met, subject to meeting condition (C1).

## 5: Qualification to be awarded

Approved education institutions, together with practice learning partners, must:		Met	Not met	Met after conditions	Not applicable
5.1	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:  5.1.1 a community practitioner nurse or midwife prescriber (V100/V150), or  5.1.2 a nurse or midwife independent/supplementary prescriber (V300)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.2	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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.3	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.4	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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Findings

41. The visitor team considered a range of evidence in relation to Standard 5, including the module specification and programme documentation, AU's academic regulations and regulations for the conduct of examination boards, the programme application form and student induction materials.
42. In considering Standards 5.1 and 5.2, the visitor team found that AU's general academic regulations, processes and systems for the award of credit and qualifications, coupled with those specific to the nurse independent prescribing programme, will enable AU to confirm that the Registered Nurse (level 1), Midwife or SCPHN is eligible to be recorded as a nurse independent/supplementary prescriber (V300) following successful completion of the programme. The award comprises 45 credits. The learning outcomes detailed in the module specification accord with the descriptor for a higher education qualification at Level 7 on the UK framework for higher education qualifications in England, Wales and Northern Ireland, with total learning hours noted as 450 which is appropriate for the level of credit.
43. In considering Standards 5.3 and 5.4 the visitor team reviewed evidence that confirms students are informed in a variety of ways that the award must be registered with the NMC within five years of successfully completing the programme and that they may only prescribe once their prescribing qualification has been annotated on the NMC register and may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice during the application process. Information to students is provided through completion of the

programme application form, at induction and through information contained in course documentation such as the PAD.

44. Based on the information made available, the visitor team considers that AU has in place the appropriate arrangements in relation to Standard 5: Qualification to be awarded to enable the NMC standards to be met.

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