

Visitors' report

Name of education provider	Buckinghamshire New University
Programme name	Postgraduate Certificate Non-Medical Prescribing
Mode of delivery	Part time
Relevant entitlements	Supplementary prescribing Independent prescribing
Date of visit	15 March 2017

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Executive summary

The Health and Care Professions Council (HCPC) approve educational programmes in the UK which health and care professionals must complete before they can apply to be registered with us. We are a statutory regulator and our main aim is to protect the public. We currently regulate 16 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using a protected title must be registered with us. The HCPC keep a register of health and care professionals who meet our standards for their training, professional skills, behaviour and health.

As well as approving educational programmes for people who want to join the Register, the HCPC also approve a small number of programmes for those already on the Register. The post-registration programmes we currently approve include supplementary prescribing programmes (for chiropodists / podiatrists, dietitians, radiographers and physiotherapists) and independent prescribing programmes (for chiropodists / podiatrists, physiotherapists, and therapeutic radiographers).

The visitors' report which follows outlines the recommended outcome made by the visitors on the approval of the programme. This recommended outcome was accepted by the Education and Training Committee (Committee) on 24 August 2017. At the Committee meeting on 24 August 2017, the programme was approved. This means that the education provider has met the conditions outlined in this report and that the programme meets our standards for prescribing for education providers and ensures that those who complete it meet our standards for prescribing for all prescribers and independent prescribers. The programme is now granted open ended approval, subject to satisfactory monitoring.

Introduction

The HCPC visited the programme at the education provider as it was a new programme which was seeking HCPC approval for the first time. This visit assessed the programme against our standards for prescribing for education providers and ensures that those who complete it meet our standards for prescribing for all prescribers and independent prescribers.

This visit was part of a joint event. The education provider validated the programme and the regulatory bodies considered their accreditation of the programme. The visit also considered a post graduate certificate in non-medical prescribing programme. The education provider, the regulatory bodies and the HCPC formed a joint panel, with an independent chair and secretary, supplied by the education provider. Whilst the joint panel participated in collaborative scrutiny of all the programmes and dialogue throughout the visit; this report covers the HCPC's recommendations on this programme only. A separate report exists for the other programme. As an independent regulatory body, the HCPC's recommended outcome is independent and impartial and based solely on the HCPC's standards for prescribing. Separate reports, produced by the education provider and the regulatory bodies, outline their decisions on the programmes' status.

Name and role of HCPC visitors	Nicholas Haddington (Independent prescriber) James Pickard (Chiropodist / podiatrist)			
HCPC executive officer (in attendance)	Tamara Wasylec			
Proposed student numbers	25 per cohort, 2 cohorts per year			
Proposed start date of programme approval	September 2017			
Chair	Phil Wood (Buckinghamshire New University)			
Secretary	Shabana Hussain (Buckinghamshire New University)			
Members of the joint panel	Elli Smith (Internal Panel Member) Lisa Ooi (Internal Panel Member) Ohio Orumen (Internal Panel Member) Jeanette Hocking (Internal Panel Member) Katherine Hardware (External Panel Member) Haifa Lyster (External Panel Member) Andy Husband (General Pharmaceutical Council) Chris Langley (General Pharmaceutical Council) Philippa Mc Simpson (General Pharmaceutical Council)			

Visit details

Brian Furman (General Pharmaceutical Council)
Joanne Pike (Nursing & Midwifery Council)

Sources of evidence

Prior to the visit the HCPC reviewed the documentation detailed below, sent by the education provider:

	Yes	No	N/A
Programme specification			
Descriptions of the modules	\square		
Mapping document providing evidence of how the education provider has met the standards for prescribing for education providers	\square		
Mapping document providing evidence of how the education provider has met the standards for prescribing for all prescribers and / or independent prescribers			
Practice placement handbook	\square		
Student handbook			
Curriculum vitae for relevant staff			
External examiners' reports from the last two years	\square		

During the visit the HCPC saw the following groups or facilities:

	Yes	No	N/A
Senior managers of the education provider with responsibility for resources for the programme	\boxtimes		
Programme team	\square		
Placements providers and educators / mentors	\square		
Students	\square		
Learning resources	\square		
Specialist teaching accommodation (eg specialist laboratories and teaching rooms)	\boxtimes		

The HCPC met with students from the Independent and Supplementary nurse prescribing programme as the programme seeking approval currently does not have any students enrolled on it.

Recommended outcome

To recommend a programme for approval, the visitors must be assured that the programme meets all of our standards for prescribing for education providers and ensures that those who complete it meet our standards for prescribing for all prescribers and independent prescribers.

The visitors agreed to recommend to the Education and Training Committee that a number of conditions are set on the programme, all of which must be met before the programme can be approved.

The visitors agreed that 43 of the standards have been met and that conditions should be set on the remaining seven standards.

Conditions are requirements that the education provider must meet before the programme can be approved. Conditions are set when certain standards for prescribing have not been met or there is insufficient evidence of the standard being met.

The visitors have also made a recommendation for the programme.

Recommendations are observations on the programme or education provider which do not need to be met before the programme can be approved. Recommendations are made to encourage further enhancements to the programme, normally when it is felt that the particular standard for prescribing has been met at, or just above the threshold level.

Conditions

A.1 The admissions procedures must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.

Condition: The education provider must revise the programme documentation to clearly articulate the information applicants require to make an informed choice about whether to take up an offer of a place on the programme and where applicants can access this information, prior to applying.

Reason: To demonstrate how this standard is met the visitors were directed to the marketing material, programme specification and application form, however, the marketing material was not submitted as evidence. The programme team stated that the information would be made available to applicants prior to applying via the programme's web page, however, the visitors were not provided with any evidence to demonstrate how this would be presented to applicants and the information that would be included. The visitors note that without seeing how applicants can access the information they require to make an informed choice about whether to take up a place on this programme prior to applying they cannot be certain that this standard is met. From a review of the programme documentation the visitors understood that applicants have the opportunity to study the programme at level 6 (Graduate certificate nonmedical prescribing) or level 7, (Post graduate certificate non-medical prescribing). In discussion with the students, the students stated that they could not apply to the level 7 programme if they had not previously completed a level 6 gualification. However, in discussion with the programme team, the visitors heard that the programme would consider students who have not studied at level 6 previously but had recent experience of studying at level 7. Due to the inconsistency in the information provided, the visitors could not see how the applicant is given the information they require to make an informed choice about whether to take up an offer of a place on a programme. Therefore, the visitors require further evidence to demonstrate the level of study required, the prerequisites for study on the programme and how this is clearly communicated to applicants, prior to applying.

A.3 The admissions procedures must apply selection and entry criteria, including accreditation of prior (experiential) learning and other inclusion mechanisms.

Condition: The programme team must provide further evidence as to the selection and entry criteria, including their policy on the accreditation of prior (experiential) learning for this programme, how it is applied and how this is communicated to applicants and students

Reason: From a review of the programme documentation the visitors understood that applicants have the opportunity to study the programme at level 6 or level 7. In discussion with the students, the students stated that an entry requirement for studying the level 7 programme is that students must have completed a level 6 qualification previously. However, in discussion with the programme team, the visitors heard that the programme would consider students who have not studied at level 6 previously but had recent experience of studying at level 7. The programme team further explained that they would apply the university policy regarding AP(E)L. However, the visitors did not see evidence as to how the AP(E)L policy would be applied on the programme at level 7.

As such the visitors were unclear on the policy around APEL for this course and how it will be applied. The visitors require further evidence to demonstrate their selection and entry criteria, including their policy on the accreditation of prior (experiential) learning for this programme, how it will be applied and how it will be communicated to applicants and students.

B.8 The resources to support student learning in all settings must be effectively used.

Condition: The programme team must revisit the programme documentation to ensure the terminology in use is correct and reflective of the programme and the current landscape of statutory regulation and the HCPC.

Reason: From a review of the context document on page 15 the visitors noted a reference to 'accreditation' by the HCPC. However, the HCPC approves programmes rather than accredits them. Additionally, on page 15 of the portfolio documents a clinical competency is repeated so both competency 10 and 11 are the same. The visitors therefore require the documentation to be revised to remove all instances of incorrect terminology and inaccurate information about the programme to ensure that the resources to support student learning in all settings are effectively used.

B.8 The resources to support student learning in all settings must be effectively used.

Condition: The education provider must submit evidence to demonstrate that any significant changes made as a response to the internal validation event have been mitigated against, so the way the programme meets the standards for prescribing is not significantly impacted.

Reason: Through discussion at the visit, and from the final conclusions of the internal validation panel it was clear that revisions will be made to the assessment strategy to meet conditions set by the joint panel. The visitors considered the programme documentation provided prior to the visit. To ensure the programme meets this standard the visitors need to review any significant changes made due to the education provider's response to the internal validation event. To evidence that this condition is met, the education provider may wish to provide the programme documentation that has been revised, or provide an overview of their response to the internal validation event.

C.5 The curriculum must make sure that students understand the implications of the HCPC's standards of conduct, performance and ethics on their prescribing practice.

Condition: The visitors require further evidence to demonstrate how the curriculum ensures that students understand the implications of the HCPC's standards of conduct, performance and ethics on their prescribing practice.

Reason: From a review of the programme documentation the visitors could not see where in the curriculum the students learn about the implications of the HCPC's standards of conduct, performance and ethics (SCPEs) on their prescribing practice or how the education provider ensures student understanding. In discussions with the programme team, the staff assured the visitors that the SCPEs were embedded in the

learning and assessment on the programme. As such, the visitors require evidence to clarify where in the curriculum the students learn about the implications of the SCPEs on prescribing practice and by what means the education provider assess this learning.

D.9 There must be regular and effective collaboration between the education provider and the practice placement provider.

Condition: The programme team must provide further evidence of regular and effective collaboration between the education provider and designated medical professionals.

Reason: From a review of the designated medical practitioners (DMP) handbook, the visitors noted, on page 2, that DMPs are responsible for monitoring a student's progress. On page 8 of the DMP handbook, it states that a DMP is required to meet with their student for an initial, intermediate and final interview to discuss their progress on placement. At the visit, the education provider stated that it is incumbent on the DMP to notify the education provider of any concerns they might have regarding a student's progress as a result of these meetings. From the documentation provided and in discussions with the programme team and designated medical practitioners (DMPs). the visitors were made aware that communication between the DMPs and education providers was informal and based on the nature of their good relationships with the DMPs. However the visitors could not see, from the evidence provided, the systems in place to maintain regular, formal and effective collaboration with DMPs. Therefore, the visitors were unable to determine from the evidence and discussions how the education provider will ensure they have regular and effective collaboration with the DMPs, particularly in relation to how a student's progress is monitored, and consequently how this standard is met. The visitors require further evidence to show this standard is met. This standard is linked to the following standard on practice placement.

D.10 Students and designated medical practitioners must be fully prepared for the practice placement environment, which will include being given information about:

- the learning outcomes to be achieved;
- the timings and the duration of the experience and associated records to be maintained;
- expectations of professional conduct;
- the professional standards which students must meet;
- the assessment procedures including the implications of, and any action to be taken in the case of, failure to progress; and
- communication and lines of responsibility.

Condition: The programme team must provide further information as to how the education provider ensures designated medical practitioners are fully prepared for placements.

Reason: From the documentation, the visitors noted that designated medical practitioners (DMP) are able to access resources on the Blackboard Virtual Learning Environment (VLE) regarding their role in relation to the programme. However, in discussions with the DMPs the visitors noted that they had not been given access to this and that they received a booklet instead. The programme team confirmed that the VLE does not yet contain that information and DMPs are therefore not given access. From a review of the designated medical practitioners (DMP) handbook the visitors noted, on page 2, that DMPs are responsible for monitoring a student's progress.

page 8 of the DMP handbook, it states that DMPs are required to meet with their students for an initial, intermediate and final interview to discuss their progress on placement. At the visit, the education provider stated that it is incumbent on the DMP to notify the education provider of any concerns they might have regarding a student's progress on placement. However, from the evidence provided it was not clear how the education provider about a student's progress on placement. As such the visitors could not see how DMPs are fully prepared for placements on the programme in relation to an understanding of communication and lines of responsibility, student progression and any other information which they are currently unable to access on VLE. Consequently, the visitors require further evidence to demonstrate how DMPs are fully prepared for placement to student progression and lines of responsibility as well as the assessment procedures relating to student progression.

Recommendations

B.8 The resources to support student learning in all settings must be effectively used.

Recommendation: The education provider should consider reviewing how they utilise the virtual learning environment (VLE) to support student learning.

Reason: At the visit, the visitors saw a demonstration of the Virtual Learning Environment (VLE) Blackboard. The programme team mentioned that the blog and forum sections were not utilised by the students as they preferred to use the WhatsApp application to discuss learning issues, instead. The students confirmed that they do not use the VLE to communicate with each other about their learning on the programme. The students also stated that the way in which tutors use the VLE was not consistent across the programme team and this made it difficult for them to know where to access the information they require. As such, the education provider should consider reviewing how the VLE is used to support students learning particularly as the students spend a considerable time accessing learning from a remote setting. This should enable the education provider to ensure the VLE is effectively used.

> Nicholas Haddington James Pickard