

Visitors' report

Name of education provider	University of Liverpool	
Programme name	MSc Non-medical prescribing	
Mode of delivery	Part time	
Relevant entitlement(s)	Independent prescribing	
Date of visit	28 April 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.

This visit was part of a joint event. The Nursing and Midwifery Council also considered their accreditation of the programme. The visit also considered the following programmes – the PGCert Non-medical prescribing and the PGDip Non-medical prescribing. The education provider, the professional body 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. Separate reports exist for the other programmes. As an independent regulatory body, the HCPC's recommended outcome is independent and impartial and based solely on the HCPC's standards for prescribing.

Visit details

Name and role of HCPC visitors	Paul Blakeman (Prescription only medicines – administration) Christine Hirsch (Independent prescriber)
HCPC executive officer (in attendance)	Niall Gooch
Proposed student numbers	25 per cohort, 2 cohorts per year
Proposed start date of programme approval	September 2017
Chair	Denise Prescott (University of Liverpool)
Secretary	Teri Harding (University of Liverpool)
Members of the joint panel	Eleri Mills (Nursing and 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	\boxtimes		
Descriptions of the modules	\boxtimes		
Mapping document providing evidence of how the education provider has met the standards for prescribing for education providers			
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	\boxtimes		
Student handbook			
Curriculum vitae for relevant staff			
External examiners' reports from the last two years			\boxtimes

The HCPC did not review external examiners' reports prior to the visit. There is currently no external examiner as the programme is new.

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			
Programme team	\boxtimes		
Placements providers and educators / mentors			
Students			
Learning resources	\boxtimes		
Specialist teaching accommodation (eg specialist laboratories and teaching rooms)			\boxtimes

The HCPC met with students from the Advanced Practice in Healthcare programme, as the programme seeking approval currently does not have any students enrolled on it.

The HCPC did not meet with placement providers and educators/mentors as the education provider did not arrange a meeting with them.

The HCPC did not see the specialist teaching accommodation as the nature of the post-registration qualification does not require any specialist laboratories or teaching rooms.

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.

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 40 of the standards have been met and that conditions should be set on the remaining ten 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 number of recommendations 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

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 education provider must demonstrate that students will be prepared to reflect on how the HCPC's standards of conduct, performance and ethics affect their prescribing practice.

Reason: From their review of the documentation prior to the visit, the visitors were not able to see where in the curriculum students had an opportunity to reflect on how the applications of the standards of conduct, performance and ethics (SCPEs) may be different in their prescribing practice than in the rest of their work as an HCPC registrant. In discussion with the programme team, the visitors were informed that students did have an opportunity to reflect on this as part of the teaching on the programme, but they were not able to see written evidence of where in the curriculum this took place. Therefore the visitors require the education provider to submit such evidence. In this way they can be confident that students completing the programme will understand how the HCPC SCPEs might affect them differently in their different roles.

D.3 The practice placements must provide a safe and supportive environment.

Condition: The education provider must demonstrate how their process for auditing placements will ensure that placements provide a safe and supportive environment for students.

Reason: The visitors were able to discuss with the programme team how placements would be audited and how they would ensure that the designated medical practitioners (DMPs) were supervising students appropriately. The programme team stated that they were confident that all the DMPs connected with the programme were suitable for the role, for example they required that DMPs were registered with the General Medical Council. However, the visitors were not able to see written evidence of a formal procedure for ensuring a safe and supportive environment on placement, or any information about what the education provider considers as a 'safe and supportive' environment. They therefore require the education provider to demonstrate that they have such a procedure in place, in order that they can be confident that students on placement have a safe and supportive environment.

D.6 The designated medical practitioner must have relevant knowledge, skills and experience.

Condition: The education provider must demonstrate how they will ensure that all designated medical practitioners who are supervising students have relevant knowledge, skills and experience.

Reason: From review of the documents prior to the visit, the visitors were not able to see what procedures were in place for ensuring that all designated medical practitioners (DMPs) had relevant knowledge, skills and experience. In discussions with the programme team the visitors were told that DMPs tended to be experienced and qualified medical professionals who had appropriate experience of supervision and tuition of staff. However, the visitors were not provided with evidence that shows how

the education provider would ensure suitability of DMPs. The visitors therefore require that the education provider submit evidence showing how they collect information about the knowledge, skills and experience of DMPs, and how they decide whether such knowledge, skills and experience are appropriate.

D.7 The designated medical practitioner must undertake appropriate training.

Condition: The education provider must demonstrate how they will ensure that all designated medical practitioners who are supervising students have received appropriate training.

Reason: From review of the documents prior to the visit, the visitors were not able to see what procedures were in place for ensuring that all designated medical practitioners (DMPs) were appropriately trained to supervise and assess students. The documentation stated that all DMPs were invited to a training workshop at the start of the programme, and that those who could not attend were "given an opportunity" to discuss clinical supervision. In discussions with the programme team, the visitors explored what would happen if neither of these pathways proved practical in ensuring appropriate training for DMPs. The visitors were not clear how the education provider would ensure that all DMPs undertook training, what the content of that training would be, or by whom it would be delivered. The visitors note that the HCPC does not have specific requirements for the nature of this training, as long as the visitors are satisfied that it is appropriate (e.g. it need not be classroom-based or run by the education provider). Enabling and encouraging DMPs to undertake training was acknowledged to be difficult, given DMPs' professional commitments. However, it is a requirement of programme approval that DMPs are appropriately trained. The visitors therefore require the education provider to submit evidence of how the appropriate training of DMPs will be ensured.

E.1 The assessment strategy and design must ensure that the student who successfully completes the programme has met the standards for independent and / or supplementary prescribers.

Condition: The education provider must demonstrate how their assessments will ensure that the students are able to meet the following standards for independent and / or supplementary prescribers.

- 1.1 understand pharmacodynamics, pharmacokinetics, pharmacology and therapeutics relevant to prescribing practice.
- 1.2 understand the legal context relevant to supplementary and independent prescribing, including controlled drugs, mixing of medicines, off-label prescribing of medicines and the prescribing of unlicensed medicines.
- 1.3 understand the differences between prescribing mechanisms and supply / administration of medicines.
- 1.4 be able to distinguish between independent and supplementary prescribing mechanisms and how those different mechanisms affect prescribing decisions.
- 2.1 understand the process of clinical decision making as an independent prescriber.
- 2.2 be able to practise autonomously as an independent prescriber.

Reason: The visitors were able to look at the module descriptors, and discuss the content and arrangement of modules with the programme team. From the document review and discussions with the programme team, the visitors were not clear how certain parts of the student portfolio would be assessed, for the standards listed above. They therefore require the education provider to submit evidence showing how the assessment in these areas will ensure that students meet the standards for prescribing.

E.4 Assessment methods must be employed that measure the learning outcomes.

Condition: The education provider must demonstrate that all assessments are clearly and appropriately linked to the learning outcomes, and that the assessment methods used are appropriate.

Reason: From their review of the documentation, the visitors were not able to see how the marking criteria and assessment methods being used in the modules were linked to specific learning outcomes, especially in the objective structured clinical examinations (OSCEs). The programme team gave verbal reassurances in discussions that assessment would be linked to learning outcomes, but the visitors considered that it was necessary for them to see written evidence of how this would be done, in order for them to be satisfied that the standard was met. Therefore the visitors require the education provider to submit evidence showing how each method of assessment used in the programme is linked to a particular learning outcome. In this way they can be confident that all students successfully completing the programme will have demonstrated the skills and knowledge needed to be safe and effective prescribers.

E.5 The measurement of student performance must be objective and ensure safe and effective prescribing practice.

Condition: The education provider must clarify how marking criteria are used in assessments, including in objective structured clinical examinations, to ensure safe and effective prescribing practice.

Reason: From review of the documentation and discussions with the programme team, the visitors were not clear about what marking criteria were being used on the programme. They also considered that more information was needed about what particular clinical skills would be assessed in the objective structured clinical examinations (OSCEs) used on the programme. The documentation did contain a set of general marking guidance for Level 7 programmes, but the visitors were not clear how this general guidance would be applied to the various assessment methods on the programme. Without this information they were unable to be certain how the programme's measurement of student performance would ensure safe and effective prescribing practice. Therefore they require the education provider to submit evidence showing against which criteria student performance is judged in the various assessments.

E.6 There must be effective monitoring and evaluation mechanisms in place to ensure appropriate standards in the assessment.

Condition: The education provider must demonstrate how they will ensure that assessment on placements is conducted to appropriate standards by those who have been appropriately prepared to do so, and how they will ensure that students' placement portfolios are assessed by programme staff.

Reason: In the programme documentation, the education provider stated that "the assessment of practice competence is delegated to suitably qualified practitioners in the workplace" (page 16). The visitors considered that, while designated medical practitioners (DMPs) were qualified to sign off students' practical skills if they were confident a student had mastered that skill, it was not generally appropriate for this assessment task to be delegated to staff who had not been trained as DMPs. The programme team did note that students' practical skills would also be assessed in objective structured clinical examinations (OSCEs). The visitors did not consider that DMPs' signing off particular practical skills needed to be moderated by the programme team. However they did consider that students' overall practice portfolio ought to be assessed by the programme team and not the DMPs. The visitors were not clear from discussions with the programme team that this was planned, and were not able to see written evidence. The visitors therefore require the education provider to submit evidence showing how they will ensure that in the normal course of events it is DMPs who will be undertaking assessment of practice competence, and that students' practice portfolios will be assessed by the programme team.

E.7 Assessment regulations must clearly specify requirements for student progression and achievement within the programme.

Condition: The education provider must clarify what pass marks are in place for the objective structured clinical examinations, and demonstrate how they determine that these pass marks are appropriate.

Reason: From their review of the documentation and discussions with the programme team, the visitors were not clear about what the pass marks were in some of the objective structured clinical examinations (OSCEs). They considered that if it was not clear to students and staff how students could pass OSCEs, this might affect students' ability to progress and achieve within the programme. They also considered that if the pass marks were too low, this might enable students to progress on the programme without having fully demonstrated their ability to prescribe safely and effectively. They therefore require the education provider to submit evidence showing what the pass marks for the OSCEs will be, and how the education provider determined the appropriateness of the pass marks. In this way the visitors will be able to be satisfied that there is clarity about the requirements for progression through the OSCEs, and that the requirements are appropriate.

E.10 Assessment regulations must clearly specify requirements for the appointment of at least one external examiner who must be appropriately experienced and qualified and, unless other arrangements are agreed, be from a relevant part of the HCPC Register.

Condition: The education provider must provide evidence showing that a suitable external examiner will be in place as required.

Reason: From their review of the documentation, the visitors were not able to see evidence that the education provider had clearly specified requirements for the appointment of an external examiner for the programme. They were not able to be certain of what process or criteria would be used to make an appointment. The senior team stated in discussions that there were plans to make an appointment as soon as programme approval had been obtained. However, this standard needs to be met

before approval can be granted. The visitors therefore require the education provider to submit documentary evidence clearly specifying how the appointment of an appropriately qualified and experienced external examiner would be made.

Recommendations

B.2 The programme must be effectively managed.

Recommendation: The education provider should contact the HCPC in the event that they wish to expand the cohort size or admit more than two cohorts of 25 per year.

Reason: The programme documentation stated that the education provider were seeking approval for a maximum cohort size of 25 students, twice a year, and this was confirmed in discussions with the senior management team. However, the senior team also suggested during the meeting that in future they envisaged an expansion in student numbers, or a move to more than two cohorts per year, due to high demand in the region for non-medical prescribers. The visitors would like to remind the education provider that they should contact the HCPC well in advance of making such changes so that the HCPC can decide on the most appropriate process for approving them.

B.6 Subject areas must be taught by staff with relevant specialist expertise and knowledge.

Recommendation: The education provider should continue working towards greater involvement of allied health professionals in the programme.

Reason: The visitors were able to review the CVs of staff involved in the programme and their professional backgrounds, and discuss programme staffing with the programme team. The visitors noted that none of the programme team had a background in an HCPC-regulated health profession, and raised the issue of whether this would have any impact on the experience of students from such professions on the programme. The programme team stated that they were confident that they had enough depth of experience and expertise in prescribing to run an effective programme for all students. They noted that they were trying to identify appropriate people to support HCPC registrants on the programme, for example a physiotherapist who was on the university's Advanced Practitioner programme. They stated that they had considered using the established network of allied health professionals (AHPs) to provide professional support for HCPC registrants on the programme, even if the AHPs were not from prescribing professions. The visitors were satisfied that the standard was met overall, but they recommend that the programme team continue their efforts to increase input into the programme from HCPC-registered professionals.

B.12 There must be a system of academic and pastoral student support in place.

Recommendation: The education provider should ensure that students, especially from allied health professions, are aware of how to access support in balancing their programme commitments with other demands on their time.

Reason: In discussions with the student panel, the visitors were made aware that some students had not always been able to get released from their workplaces to attend learning and teaching activities. For example one student reported that she had not been able to attend some study days. This appeared to be an issue for students from allied health professions (AHPs) rather than for those from a nursing background, as there was not the same level of recognition for AHPs' desire to obtain post-registration qualifications. Although these students were from an Advanced Practitioner programme rather than the Non-medical prescribing (NMP) programme, the visitors considered that

the same issue might affect the NMP programmes. The visitors were satisfied that the student support arrangements for the NMP programmes met the standard, but in light of the above, they recommend that the programme team consider how they might support students with less supportive or less flexible employers.

C.4 The curriculum must remain relevant to current practice.

Recommendation: The education provider should continue to consider how they ensure that the curriculum reflects best practice in non-medical prescribing for allied health professions.

Reason: The visitors noted that the programme team have backgrounds in nursing rather than other health professions (see the Recommendation under B.6 above). They considered that this might affect their ability to ensure that the curriculum is appropriately updated for students from allied health professions (AHPs), who have some different needs from, and will be working in a different context to, nurse prescribers. From discussions with the programme team the visitors were satisfied that the depth of expertise and experience meant that this standard was met overall, and that efforts were being made to obtain input into curriculum development from AHP academics and students. They recommend that these efforts should continue.

Paul Blakeman Christine Hirsch