

Approval process report

King's College London, Prescribing, 2024-25

Executive Summary

This is a report of the process to approve programmes at King's College London. This report captures the process we have undertaken to assess the institution and programme(s) against our standards, to ensure those who complete the proposed programme(s) are fit to practice.

We have:

- Reviewed the institution against our institution-level standards and found that standards are met in this area.
- Reviewed the programme(s) against our programme level standards and found our standards are met in this
- Recommended that all standards are met, and that the programme should be approved.

Through this assessment, we have noted:

• The programme meets all the relevant HCPC education standards and therefore should be approved.

Previous consideration	N/A
Decision	The Education and Training Committee (Panel) is asked to decide: • whether the programme is approved.
Next steps	Outline next steps / future case work with the provider: • Subject to the Panel's decision, the programme will be approved, ready to start at the proposed January 2026 start date.

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Section 1: About this assessment

About us

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

This is a report on the approval process undertaken by the HCPC to ensure that the programme detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the programme approval / ongoing approval.

Our standards

We approve education providers and programmes that meet our education standards. Individuals who complete approved programmes will meet proficiency standards, which set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Our regulatory approach

We are flexible, intelligent and data-led in our quality assurance of programme clusters and programmes. Through our processes, we:

- enable bespoke, proportionate and effective regulatory engagement with education providers;
- use data and intelligence to enable effective risk-based decision making; and
- engage at the organisation, profession and programme levels to enhance our ability to assess the impact of risks and issues on HCPC standards.

Providers and programmes are <u>approved on an open-ended basis</u>, subject to ongoing monitoring. Programmes we have approved are listed <u>on our website</u>.

The approval process

Institutions and programmes must be approved by us before they can run. The approval process is formed of two stages:

 Stage 1 – we take assurance that institution level standards are met by the institution delivering the proposed programme(s) • Stage 2 – we assess to be assured that programme level standards are met by each proposed programme

Through the approval process, we take assurance in a bespoke and flexible way, meaning that we will assess whether providers and programmes meet standards based on what we see, rather than by a one size fits all approach. Our standards are split along institution and programme level lines, and we take assurance at the provider level wherever possible.

This report focuses on the assessment of the self-reflective portfolio and evidence.

How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint <u>partner visitors</u> to design quality assurance assessments, and assess evidence and information relevant to the assessment. Visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make the decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee takes decisions through different levels depending on the routines and impact of the decision, and where appropriate meets in public. Their decisions are available to view on our website.

The assessment panel for this review

We appointed the following panel members to support this review:

Nick Haddington	Lead visitor, Independent Prescribing		
Rosie Furner	Lead visitor, Independent Prescribing		
Alistair Ward-Boughton- Leigh	Education Quality Officer		

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers 7 HCPC-approved programmes across 3 professions. It is a Higher Education provider and has been running HCPC approved programmes since 1991.

Practice areas delivered by the education provider

The provider is approved to deliver training in the following professional areas. A detailed list of approved programme awards can be found in <u>Appendix 2</u> of this report.

	Practice area	Delivery level	Approved since	
	Dietitian	⊠Undergraduate	⊠Postgraduate	2002
Pre- registration	Physiotherapist	⊠Undergraduate	⊠Postgraduate	1991
	Practitioner psychologist	□Undergraduate	⊠Postgraduate	1992

Institution performance data

Data is embedded into how we understand performance and risk. We capture data points in relation to provider performance, from a range of sources. We compare provider data points to benchmarks, and use this information to inform our risk based decisions about the approval and ongoing approval of institutions and programmes.

This data is for existing provision at the institution, and does not include the proposed programme(s).

Data Point	Bench- mark	Value	Date	Commentary
Learner number capacity	197	197	2024	The benchmark figure is data we have captured from previous interactions with the education provider, such as through initial programme approval, and / or through previous performance review assessments. Resources available for the benchmark number of learners was assessed and accepted through these processes. The value figure is the benchmark figure, plus the number of learners the provider is proposing through the new provision. This includes the inclusion of the proposed

				programme as this programme is aimed at their existing learners not to attract new learners. The visitors considered this as part of their assessment.
Learner non-continuation	7%	14%	2021-22	This data was sourced from a data delivery. This means the data is a bespoke Higher Education Statistics Agency (HESA) data return, filtered bases on HCPC-related subjects The data point is significantly above the benchmark, which suggests the provider is performing below sector norms When compared to the previous year's data point, the education provider's performance has dropped by 7% The visitors considered this as part of their assessment and factored this into their decision for approval.
Outcomes for those who complete programmes	92%	91%	2021-22	This data was sourced from a data. This means the data is a bespoke HESA data return, filtered bases on HCPC-related subjects The data point is below the benchmark, which suggests the provider is performing below sector norms When compared to the previous year's data point, the education provider's performance has dropped by 2% The visitors considered this as part of their assessment and factored this into their decision for approval.

Teaching Excellence Framework (TEF) award	N/A	Silver	2023	The definition of a Silver TEF award is "Provision is of high quality, and significantly and consistently exceeds the baseline quality threshold expected of UK Higher Education." It is important to note that the education provider retained the silver award from their previous assessment.
Learner satisfaction	79.5%	77.6%	2024	This data was sourced at the subject level. This means the data is for HCPC-related subjects. The data point is broadly equal to the benchmark, which suggests the provider's performance in this area is in line with sector norms When compared to the previous year's data point, the education provider's performance has improved by 3% The visitors considered this as part of their assessment and factored this into their decision for approval.
HCPC performance review cycle length		2026-27	2 years	The education provider is next due to go through the performance review process in 2 years in academic year 2026-27. This follows their engagement with the process in 2022-23 there they were granted a 4-year ongoing monitoring period.

We also considered data points / intelligence from others (eg prof bodies, sector bodies that provided support) as follows:

• The HCPC regularly engages with NHS England (NHSE) on a regional basis. From our discussions with the London NHSE team, we have no concerns that would impact the rollout of this programme. The NHSE stated that broadly there is demand for an increased in prescribing programmes in London.

The route through stage 1

Institutions which run HCPC-approved provision have previously demonstrated that they meet institution-level standards. When an existing institution proposes a new programme, we undertake an internal review of whether we need to undertake a full partner-led review against our institution level standards, or whether we can take assurance that the proposed programme(s) aligns with existing provision.

As part of the request to approve the proposed programme(s), the education provider supplied information to show alignment in the following areas.

Admissions

Findings on alignment with existing provision:

- Information for applicants
 - The education provider has explained how their academic board sets their academic regulations under the authority of their institutional council. These regulations govern academic activity and learner conduct. This is set out in their academic manual that is available and applicable to all applicants. The manual is accessible through the education provider's website.
 - The education providers admissions policy is applicable to applicants on all programmes of study. It is written in line with their 2029 strategic plan, and they state it is written in the context of commitments to fair access and learner success. This details how to make an application for a programme, with the University and College's Admission Service (UCAS) being the primary route for undergraduate applications. Applicants will create a 'King's Apply' profile to track the status of their application and receive updates / communications from the education provider. Postgraduate applications are made entirely through the King's Apply system.
 - They have detailed how the manual sets out the expectations of what is required for their applicants. This includes academic entry requirements, which have also been detailed in their online prospectus and external information sources, including UCAS programme entry profiles. These include their typical entry requirements, which include criminal background disclosure and checks, English language requirements, and the need for an appropriate visa where necessary. Specific programme entry requirements are included in a programmes' prospectus. The education provider also provides information on their website on the required tuition fees, application process, recognition of prior learning, funding information and information specific to international applicants.
 - The education provider has also explained how they participate in 'preoffer' open events and taster days virtually and on campus. These are
 attended by staff and current learners and allow applicants to ask
 questions. Here, they can find out about the roles of the professional

- bodies in the programme and beyond, professional / regulatory requirements, and career progression.
- This aligns with how we understand the education provider to operate and run their existing provision.

• Assessing English language, character, and health -

- The education provider has stated that they have established processes in place to assess applicants' English language proficiency, character and health. This means that applicants to their programmes must demonstrate proficiency in English. Nationals from the majority of English-speaking countries who have completed high school education are exempt from these English language tests. Specific English requirements vary by programme and are stated in the programme prospectus. For most programmes, the International England Language Teaching System (IELTS) Band B level (7.0 overall, minimum 6.5 per skill) or equivalent is necessary.
- Those applying for programmes involving "regulated activity" must disclose certain convictions, undergo a Disclosure and Barring Service (DBS) check, and meet Occupational Health requirements. Enrolment and placements in some cases depend on enhanced DBS clearance. Applicants with declared criminal convictions undergo a risk assessment process if an offer is recommended. The risk assessment is reviewed by a criminal record consideration panel, considering academic and non-academic criteria.
- Applicants also submit written statements detailing academic background, relevant experience, skills, healthcare values, and professional scope understanding. Some programmes include interviews reflecting NHS values and assess DClinPsy applicant suitability through references. The education provider reserves the right to reject applicants deemed unsuitable based on their Applicant Misconduct Policy.
- The education provider has also detailed the kind of support available for learners / applicants with disabilities. This is offered through their Disability Support Team, which provides advice and guidance on reasonable adjustments.
- This is in line with how we understand the education provider to operate and run their existing provision.

Prior learning and experience (AP(E)L) –

- The education provider has stated that they recognise diverse prior learning experiences and qualification that applicants may have. This is set out through their Policy on Recognition of Prior Learning (RPL), allowing programme entry or credit for assessed or workplace-acquired learning. RPL must align with the Quality Assurance Agency's (QAA) Frameworks for Higher Education Qualifications (FHEQ), and no more than two-thirds of a programme can be credited through RPL.
- The education provider has discussed how there are also programmespecific differences and approaches. These are set out below:

- Dietetics: RPL applications are rare and rarely approved to ensure all curriculum content is covered.
- Physiotherapy: No RPL or transfers are accepted as all curriculum elements are core.
- DClinPsy Programme: RPL is not allowed; all candidates must complete the full programme, which is not credit-bearing. Prior learning and experience are considered during shortlisting but do not reduce programme requirements. Academic, clinical, and research achievements are assessed.
- This is in line with how we understand the education provider to operate and run their existing provision.

Equality, diversity and inclusion –

- The education provider has stated that they are committed to recruiting learners with the greatest academic ability and potential, irrespective of their social, cultural and economic background. They are committed to equality in education, and applications are considered on their individual merits. They utilise a holistic approach and reviewing all information provided through the application process.
- They have detailed how they are committed to fair, transparent and consistent admissions practices and aim to offer clear advice and guidance to prospective applicants to enable them to make informed choices. They also detailed how their admissions policy is underpinned by their institution-wide Equality, diversity and inclusion (EDI) policy, their disability policy and also adheres to the Equality Act.
- Their Fair Admissions Policy outlines their approach to the assessment of applications and applies to all categories of applicants to accredited undergraduate (UG), Postgraduate taught (PGT) and Postgraduate research (PGR) study. This policy is in line with their Strategic Vision 2029 of 'building a community of learners and their Education Strategy 2017-22 to 'educate to inspire and improve'.
- o In the education provider's equality and diversity policy, they detail their commitment to creating an inclusive environment that promotes equality of opportunity for everyone in their community. It also outlines their commitment to promoting a working environment based on dignity, trust, and respect, one that is free from discrimination, harassment, bullying or victimisation. They have explained how they have an Equality, Diversity & Inclusion department. This department is responsible for providing leadership, direction, expert advice, guidance and support to the institution-wide ED&I strategy and approach.
- This is in line with how we understand the education provider to operate and run their existing provision.

Non-alignment requiring further assessment: None

Management and governance

Findings on alignment with existing provision:

Ability to deliver provision to expected threshold level of entry to the Register¹ –

- The education provider has in place staff and resources and currently delivers a range of approved programmes. This programme is designed to be in addition to and complement existing approved programmes. This programme is not designed to be a direct-entry programme but instead, an optional additional module that shall allow prescribing powers for those already studying an approved programme.
- The education provider is also a well-established education provider that has been running since 1829, with degree-awarding powers since 2007 (previously under the University of London degree awarding powers framework). They are regularly reviewed by the Quality Assurance Agency (QAA) and engage regularly and are Office for Students (OfS) registered. They have engaged in the 2023 Teaching Excellence Framework (TEF) review, gaining a silver award, the second-highest award. This award includes a silver award for learner experience but a gold level for learner outcomes. TEF states that the silver level award means that the learner experience and outcomes at the education provider are typically very high quality.
- We consider the associated standards to be met as this programme / module will be attached to the programmes already approved and delivering to the expected threshold level.

• Sustainability of provision –

- The education provider has set out how they meet the Office for Students' (OfS) ongoing conditions of registration detailed in their Quality Assurance handbook and their Quality Monitoring and Enhancement framework.
- The education provider has also provided information on its Programme Post-Launch Review policy, which ensures that new programmes are sustainable. This policy stipulates that a review is undertaken after three full years of recruitment to confirm that a new programme remains marketable, meets the predicted learner numbers, and continues to meet institutional and faculty-wide strategies.
- They have also reflected on their existing level 7 prescribing programme open to their nursing learners. This programme has proved popular and experienced periods of growth, going from one annual cohort of 30 learners to three annually with 45 learners.
- This is in line with how we understand the education provider to operate and run their existing provision.

Effective programme delivery –

 The education provider has detailed how external processes help to ensure the effective delivery of their programmes. This includes the Office for Students' Ongoing Conditions of Registration, specifically

¹ This is focused on ensuring providers are able to deliver qualifications at or equivalent to the level(s) in SET 1, as required for the profession(s) proposed

regarding Quality and Standards (Conditions B). The Academic Regulations, Quality and Standards team (ARQS), part of the Students & Education Directorate, ensures compliance with these conditions by overseeing the effective delivery of provisions. The ARQS team focuses on compliance, strategy implementation, governance support, policy review, and optimizing processes and systems. They collaborate institution-wide to support the Education Strategy and produce the Quality Assurance Handbook, which outlines the framework for Quality, Monitoring, and Enhancement, including annual monitoring and periodic review.

- The education provider has discussed how the role of External Examiners (EE) are vital to their quality assurance processes. EEs ensure a programme's curriculum, content, and assessments meet regulatory and education providers' standards. Their responsibilities include reviewing examination papers and coursework plans before learner completion, evaluating academic standards against national benchmarks, and suggesting ways to improve delivery and content.
- This is in line with how we understand the education provider to operate and run their existing provision.

• Effective staff management and development –

- The education provider has reflected on the role their internal Human Resources (HR) department plays in providing professional support across the institution. This support affects staff throughout their employment lifecycle, from recruitment to retention, career development and retirement. Specifically, the Occupational Development team within the HR department offers training courses annually to support staff development.
- The education provider has also detailed the work line managers do to support staff wellbeing, development and performance. This includes ensuring and encouraging staff to engage in the support available from HR. Training is available for the development of all managers to enable them to better support their staff.
- The education provider has also referred to their internal 'King's
 Academy' as their centre for staff education and learning development.

 It is comprised of five strategic areas of support:
 - Curriculum & Assessment
 - Professional Development & Recognition
 - Learning Development, Community
 - Network & Dissemination
 - Inquiry, Scholarship, & Research.
- The explained how the centre provides relevant, research-based resources to develop a culture of scholarship of teaching and learning within the King's community of educators. King's Academy programmes and services enable their 'Education Strategy 2029' to shape and transform academic practices and to improve the learning experience.

- Their Centre for Technology Enhanced Learning (CTEL) aims to improve the digital experience for staff and learners by providing pedagogic and technological expertise in learning technologies. CTEL have a university wide remit on innovative, sustainable, and scalable technology to support the learner and staff learning and teaching experience.
- This is in line with how we understand the education provider to operate and run their existing provision.

Partnerships, which are managed at the institution level –

- The education provider has detailed how they provide several academic programmes in collaboration with approved partners and that this is managed at an institutional level. They have stated how their Quality Assurance Handbook outlines the procedures for approving and monitoring such collaborative provisions. Due to the nature of joint deliveries, they have an established multi-layered quality assurance process in place to address the additional risks involved.
- The education provider has detailed how practice-based institutional-level partnerships facilitate learning. This is governed by practice learning agreements, these which ensure effective collaboration between the education provider, its faculty and partners. These agreements are reviewed and approved by the Collaborative Provision Sub-Committee, who is a sub-committee of the College Education Committee (CEC). Agreements with external partners are signed by a senior executive team member of the provider, clearly outlining the roles and responsibilities of each partner.
- This is in line with how we understand the education provider to operate and run their existing provision.

Non-alignment requiring further assessment: None

Quality, monitoring, and evaluation

Findings on alignment with existing provision:

Academic quality –

The education provider Quality Assurance Handbook and an Academic Manual sets out the institutional policy and expectations for the management of educational provision. Their Academic Regulations, Quality and Standards (ARQS) team manages quality assurance matters on behalf of the wider institution. This is both regarding institutional procedures and in liaison with external bodies such as the Office for Students and the Quality Assurance Agency (QAA). This includes externally directed activities such as support for the QAA Quality and Standards review process. Additionally, institutional activities such as programme approval and review, assessment policy and regulatory activity.

- The education provider has stated that a key part of their quality assurance framework is the way programmes and modules are designed, approved and reviewed. This process ensures that they meet the academic standards set by the institutional leadership and external monitoring and regulatory bodies.
- The education provider has also detailed how its Professional, Statutory, and Regulatory Bodies (PSRB) policy outlines the general principles and processes relating to its engagement with PSRBs. This policy applies to the approval and monitoring of its programmes, ensuring compliance with any regulatory quality and standards requirements.
- The education provider has also explained how learner feedback is a key component of programme monitoring and ensuring academic quality. Their Module and Teaching Policy is applicable to all taught modules and requires that standard institutional feedback forms are distributed to all learners enrolled on every occurrence of a module. Data is compiled in a system called Evasys+ and monitored at the faculty level to ensure the quality of teaching delivery meets the required minimum benchmarks. Module Leads are required to develop a 'Closing the Loop' response published to learners. This reflects the themes received in the evaluation feedback and outlines any changes that will be implemented in response.
- This aligns with how we understand the education provider to operate and run their existing provision.

• Practice quality, including the establishment of safe and supporting practice learning environments –

- The education provider has explained how applicants to the Prescribing programme must provide information about their employing organisation, focusing on the practice learning environment for their prescribing practice training. They submit a statement of commitment, signed by the applicant, their line manager, and the organisation's nonmedical prescribing lead.
- The prescribing organisation confirms:
 - Provision of a qualified Designated Prescribing Practitioner (DPP) to supervise and assess the student based on Royal Pharmaceutical Society's prescribing competencies.
 - Release of the applicant for 26 academic learning days and 12 supervised clinical practice days.
 - Necessary clinical governance to support prescribing after qualification.
 - The CQC status, including updates on any changes during the student's programme.
 - Admissions tutors review CQC information before offering a place.
- They have explained how a faculty-prescribing stakeholder group ensures ongoing discussions about creating safe and supportive practice learning environments.

- They also explained how practice partners assess their staff resources and capacity. This ensures a safe and effective practice learning environment, supporting the learner's journey. Collaboration between the programme team, DPP, the line manager, and the organisation's non-medical prescribing (NMP) lead addresses and resolves support and engagement issues. For self-funding or self-employed applicants, their practice learning placement must still confirm that governance requirements are met. In these cases, the NMP lead or an appropriate manager from the practice placement provides the necessary confirmation.
- This is in line with how we understand the education provider to operate and run their existing provision.

Learner involvement –

- The education provider has explained how they have a Community Charter, that was created collaboratively by the education provider and their students' union. This has worked to establish a foundation for a safe and inclusive community where everyone can participate in university life. The education provider has stated they value their partnership with their learners, aiming to provide outstanding education and research. It ensures effective learners participation in committees and groups related to the quality of education and the overall learner experience, giving proper consideration to learner opinions.
- The "Student Voice" encompasses both representative structures and individual feedback opportunities. Multiple channels allow learners to express concerns and enhance their education, including:
 - Representation on departmental and university-level committees (e.g., Department Education Committees, College Education Committees, Academic Board, and Council).
 - Staff-Student Liaison Committees (SSLCs) for open discussions and feedback.
 - Surveys such as modular evaluation and involvement through annual programme reviews.
 - Representation in the prescribing programme stakeholder group.
- These structures are aimed at promoting collaboration, learner engagement, and continuous improvement of the learner experience.
- This is in line with how we understand the education provider to operate and run their existing provision.

• Service user and carer involvement -

The education provider has discussed how service users and carers are involved in their curriculum development. This follows NHS England's (NHSE) Education Quality Framework and HCPC's Standards of Education and Training. They noted that the faculty's service user and carer engagement education strategy integrates the voices of local patients, service users, carers, and public representatives into undergraduate and postgraduate health

- programmes. The education provider has stated their ambition for these shared experiences is to help learners develop into personcentred healthcare professionals.
- The education provider has detailed how patient educators contribute to programme design, delivery, assessments, stakeholder groups, and approval events. Development processes are overseen by the Patient Educator Academic Lead (employed by the education provider), who is supervised by the Head of Clinical Practice / Patient Educator Programme. The education provider has also detailed how the Programme Manager and Patient Educator Programme Officer manage administrative functions. The PE Academic Lead facilitates the faculty-wide policy guidance and monitoring and collaborates with academic staff to engage patient educators. Service users and carers are also part of the prescribing programme stakeholder group.
- This is in line with how we understand the education provider to operate and run their existing provision.

Non-alignment requiring further assessment: None

Learners

Findings on alignment with existing provision:

Support –

- The education provider stated that their priority is to ensure learner well-being through various supportive services. These include Learning Skills Service (KLaSS), which provides e-learning tutorials to enhance study skills, and Academic Skills for Learning. The Counselling and Mental Health Support Service ensures free, confidential mental health support. Their Faculty Assessments Team provides guidance on mitigating circumstances affecting assessments, while the Disability Support Team offers personalized advice and accommodations for learners with disabilities.
- Other support services include the Chaplaincy, Library and Student Services Online that further contribute to learners' holistic and academic development.
- They explained how learners also benefit from personal tutors who serve as trusted guides throughout their academic journey, discussing progress, offering advice, and connecting them to specialized services. Faculty Wellbeing Advisors complement this support, collaborating with various stakeholders to ensure learners' needs are met. For learners requiring immediate intervention, the Student of Concern process facilitates swift referrals to appropriate support services. Furthermore, the education provider encourages extra-curricular engagement and future planning, fostering a well-rounded educational experience through individualised mentoring and workshops.
- They have stated that they are committed to fairness and transparency in handling complaints via their Student Complaints Policy. This policy

outlines a three-stage process addressing grievances related to academic supervision, program delivery, facilities, discrimination, or harassment. With the online 'Report + Support' platform, learners can report concerning behaviour confidentially. For unresolved complaints, learners can seek an independent review by the Office of the Independent Adjudicator, underscoring the institution's dedication to addressing learners concerns with integrity and impartiality.

 This is in line with how we understand the education provider to operate and run their existing provision.

Ongoing suitability –

- The education provider has stated that they are committed to ensuring learners' behaviour, health, and professional conduct do not pose risks to themselves or others. This is outlined in their Academic Regulations 2024-25. These regulations detail learners' rights, responsibilities, and behavioural expectations. Programmes leading to qualifications that are registrable with statutory regulatory bodies are governed by fitness to practise and fitness for registration standards. This ensures that learners and graduates are suitable for their chosen profession and comply with safety and professional standards. The College's Fitness to Practise procedures are detailed in their College Regulations, highlighting the measures to address concerns about learner conduct.
- The education provider has also explained how health profession's regulatory body provides specific guidance on fitness to practise, ensuring learners meet professional and safety standards while studying and upon qualification. Their Fitness to Practise Policy governs responses to concerns about fitness to practise, while the Support for Study Policy addresses concerns about fitness to study. The education provided has explained how these were developed in accordance with equal opportunities legislation. These policies are designed to ensure fair and unbiased evaluations that uphold learners' rights. They explained how investigations generally begin at the Faculty level, possibly involving committees or panels, and may escalate to the College Fitness to Practise Committee for further review if necessary.
- The education provider has stated that their Support for Study Policy emphasizes inclusivity and fairness, ensuring judgments are impartial and free from prejudice based on protected characteristics. It is implemented alongside academic regulations, misconduct proceedings, and fitness to practise policies. Together, these policies create a framework to safeguard the welfare of learners. Additionally, to ensure their readiness for academic and professional success while maintaining compliance with behavioural and professional standards.
- This is in line with how we understand the education provider to operate and run their existing provision.

• Learning with and from other learners and professionals (IPL/E) -

 The education provider has explained how they have an existing prescribing programme delivered by nurses, pharmacists and clinical psychologists and attended by nurses and midwives. They from a variety of healthcare settings across adult, mental health, child and midwifery services. The new programme will run alongside the existing programme, and they will be open to their existing learners on their HCPC-approved programmes. This will allow the existing nursing learners and allied health profession (AHP) learners to learn alongside each other. They explained that this multidisciplinary approach enables learners to gain greater depth in their learning through sharing ideas, perspectives and strengths. This will be enhanced if HCPC registrants are permitted to undertake the prescribing programme.

- The education provider has also described how learners are able to engage with several Interprofessional Learning (IPL) activities including an adherence workshop, consultation activities, MDT working and ethical scenarios. Learners are required to undertake multiprofessional learning in their practice learning environment and evidence how they meet RPS competency 10: Prescribe as part of a team.
- This is in line with how we understand the education provider to operate and run their existing provision.

Equality, diversity and inclusion –

- The education provider has explained how they are dedicated to fostering an inclusive environment that values diversity and promotes equality of opportunity across its community. As outlined in King's Strategic Vision 2029, they emphasise creating a space where everyone feels valued and can thrive. The Equality, Diversity, and Inclusion (EDI) Policy applies to staff, learners, volunteers, affiliated members, and suppliers, ensuring compliance with equality and anti-discrimination laws. The education providers states that they strive to eliminate barriers to participation while celebrating individuality and supporting a sense of belonging. The institution goes beyond legal obligations, recognizing the intersectionality of identities and experiences and committing to creating an environment where differences are valued.
- To uphold its commitments, the education provider has established strong EDI governance led by the EDI committee, its subcommittees, and the Equality, Diversity, and Inclusion Forum, which report to the Senior Management Team. The Strategy, Planning and Analytics (SPA) team provides a Diversity and Inclusion data dashboard, presenting longitudinal insights on demographics and race equality. The education provider has been recognized with a Silver Athena Swan institutional award for its efforts in advancing gender equality, with similar awards at the departmental level for faculties involved in healthcare education. The Faculty of Nursing, Midwifery, and Palliative Care (NMPC) actively addresses local EDI matters through its committee and initiatives like Inclusive Education Student and Staff Partners (IESSP).
- The education provider has detailed how their commitment to inclusion is further demonstrated through regular evaluation and reporting on

EDI progress. These efforts are integral to fostering an extraordinary student experience and supporting staff as an employer of choice. By embedding inclusion into its culture and practices, King's not only meets legal expectations but sets an exemplary standard for valuing diversity in a global context. The institution's policies and actions reflect its vision of building a community where all members can succeed and feel respected.

 This is in line with how we understand the education provider to operate and run their existing provision.

Non-alignment requiring further assessment: None

Assessment

Findings on alignment with existing provision:

- Objectivity
 - The education provider has detailed how their Academic Regulations define the rules and processes governing assessment for taught programmes. These are also complemented by specific module specifications. The section includes details on assessment scheduling, examiner responsibilities, marking criteria, pass marks, mitigating circumstances, and late coursework submissions. These regulations apply to all summative assessments. Additionally, comprehensive policies and processes are outlined, covering the marking framework, plagiarism prevention, feedback guidelines, and the role of Assessment Boards. This, they reflected, ensures consistency and fairness across all assessments.
 - The education provider detailed how their Marking Framework establishes mechanisms for quality and accuracy in assessment marking. Every assignment undergoes evaluation by a first marker, with a second marker reviewing a sample of the scripts alongside the first marker's comments and marks. Marks for each cohort are collaboratively agreed upon by the markers, further subject to external moderation by an appointed External Examiner. These layers of marking and moderation guarantee that assessments meet the highest academic standards.
 - The education provider has stated that implementing these procedures aims to ensure transparency, consistency, and fairness in academic assessment. The processes not only uphold integrity but also maintain high standards across disciplines. Learners can rely on these regulations to understand assessment expectations and the mechanisms in place to ensure their academic journey is safeguarded. The education provider also utilises their External Examiners to ensure the results are meeting or exceeding national benchmarks.
 - This is in line with how we understand the education provider to operate and run their existing provision.

Progression and achievement –

- The education provider has detailed how their Academic Regulations comprehensively outline progression rules for taught programmes, covering reassessment, deferrals, and substitute modules. These rules also specify the conditions for transferring marks or credits. These detail how learners are required to adhere to the Attendance and Engagement Policy outlined in the Academic Regulations, with mandatory attendance requirements clearly stated in module handbooks. High attendance levels are essential for professional programmes, and any lack of engagement or poor attendance is addressed through professionalism policies established by the programmes.
- To progress, learners must successfully complete and have all module components ratified by the Assessment Board. For professional programmes, such as prescribing courses, this includes meeting all theoretical and practical learning requirements, including practice hours and summative assessments. After the results are ratified, the Assessment Team and Module Lead verify the list of successful learners before transferring the data to the relevant Professional Statutory Regulatory Body (PSRB), ensuring compliance with academic and professional standards.
- The education provider has reflected that their aim is for this structured process to ensure fairness, transparency, and accountability in managing progression while supporting learners to meet both academic and professional expectations throughout their studies.
- This is in line with how we understand the education provider to operate and run their existing provision.

Appeals –

- The education provider explained how their academic regulations define their appeals process. They have also explained that this process cannot be used to challenge academic judgment. These regulations detail how learners may appeal under two grounds: (a) evidence of mitigating circumstances impacting assessments that were not disclosed earlier, or (b) significant administrative errors during the assessment process.
- The academic regulations detail how appeals must be made and the timeframe around this. They also explain how appeals consist of two stages: an Assessment Board stage (stage one) and an Appeal Committee stage (stage two). They have reflected on how this structured procedure is designed to reflect their commitment to fairness, providing learners with a thorough and supportive framework to address their concerns.
- This aligns with how we understand the education provider to operate and run their existing provision.

Non-alignment requiring further assessment: None

Outcomes from stage 1

We decided to progress to stage 2 of the process without further review through stage 1, due to the clear alignment of the new provision within existing institutional structures, as noted through the previous section

Education and training delivered by this institution is underpinned by the provision of the following key facilities:

- The education provider has detailed how they have several campuses in central London, offering a wide array of learner services and specialist teaching facilities. These include well-equipped libraries, IT support, dedicated disability services, computer rooms, simulation suites, and teaching spaces. Students also benefit from access to advanced learning tools such as SimConverse and Oxford Medical Services VR scenarios, enhancing the educational experience through immersive simulation technologies.
- The education provider has detailed how they shall ensure that all necessary resources are in place for the programme's start date. This includes the Faculty Senior Strategic Team having already approved the programme and its requirements.
- They detailed how resource planning and allocation are conducted 6–12 months ahead of delivery, and bookings have been made accordingly. They have stated that the module is fully resourced, and any updates, such as changes to the admissions process, will be supported by additional resources, which will be available when recruitment begins in May 2025.

Risks identified which may impact on performance: None

Outstanding issues for follow up: None

Section 3: Programme-level assessment

Programmes considered through this assessment

Programme name	Mode of study	Profession (including modality) / entitlement	Proposed learner number, and frequency	Proposed start date
Prescribing for Healthcare Professionals	PT (Part time)		60 learners, 3 cohorts per year	05/01/2026

Stage 2 assessment - provider submission

The education provider was asked to demonstrate how they meet programme level standards for each programme. They supplied information about how each standard was met, including a rationale and links to supporting information via a mapping document.

Quality themes identified for further exploration

We reviewed the information provided, and worked with the education provider on our understanding of their submission. Based on our understanding, we defined and undertook the following quality assurance activities linked to the quality themes referenced below. This allowed us to consider whether the education provider met our standards.

We have reported on how the provider meets standards, including the areas below, through the <u>Findings section</u>.

Section 4: Findings

This section details the visitors' findings from their review through stage 2, including any requirements set, and a summary of their overall findings.

Conditions

Conditions are requirements that must be met before providers or programmes can be approved. We set conditions when there is an issue with the education provider's approach to meeting a standard. This may mean that we have evidence that standards are not met at this time, or the education provider's planned approach is not suitable.

The visitors were satisfied that no conditions were required to satisfy them that all standards are met. The visitors' findings, including why no conditions were required, are presented below.

Overall findings on how standards are met

This section provides information summarising the visitors' findings against the programme-level standards. The section also includes a summary of risks, further areas to be followed up, and areas of good practice.

Findings of the assessment panel:

- A: Level of qualification for entry to the Register
 - The education provider has detailed how applicants to the Prescribing module must complete an online application via their application portal.

Here they must provide personal details, education history, professional registration information, employment history, a personal statement, and funding confirmation. They are also required to submit a Statement of Commitment and nominate a Practice Educator. To support applicants, a guidance document outlines five key steps in the application process, including securing organisational approval and ensuring name consistency with HCPC registration. Completion of the checklist is strongly advised to avoid delays or rejection due to incomplete submissions.

- They have detailed how academic entry requirements include the ability to study at a postgraduate level, typically demonstrated by holding a bachelor's degree or equivalent. Applicants without traditional qualifications may still be considered if they provide evidence of academic potential through their personal statement, such as recent postgraduate study, publications, or involvement in service development. Programme-specific criteria require employer agreement for supervised practice, confirmation of clinical governance arrangements, current Disclosure and Barring Service (DBS) clearance, and evidence of competence in clinical assessments and care planning. Applicants must also demonstrate ongoing commitment to professional development and reflective practice.
- Through clarification, the education provider detailed that following a review of plans submitted in the Stage 2 application in June 2025, the Faculty has decided to withdraw the Supplementary Prescribing for Healthcare Professionals module. The programme will now focus solely on delivering the Independent and Supplementary Prescribing module to HCPC-regulated professions, including paramedics, physiotherapists, podiatrists / chiropodists, and therapeutic radiographers. Approval is no longer being sought for dieticians and diagnostic radiographers. An updated programme proposal has been submitted, reflecting this change, along with amended supporting documents and a summary of revisions. This was an area the visitors sought to clarify as part of their Stage 2 assessment.
- Following this clarification and the change in the focus of the proposed programme, the visitors were satisfied that all standards in this area are met.

B: Programme governance, management and leadership –

The education provider has detailed how their programme team maintains strong collaboration with practice education partners throughout the module delivery lifecycle. They explained that this includes twice-yearly stakeholder meetings with prescribing education providers involved in both the Independent and Supplementary Prescribing module and the MSc in Advanced Clinical Practice programme. These meetings address shared concerns, support organisations in meeting the education providers' requirements, and explore how learners can demonstrate the RPS Prescribing Competency Framework. They have also detailed how, from January

- 2026, a new Prescribing Module Teaching Group will be introduced, involving Practice Education Partners and Lived Experience Advisors. Additionally, their faculty hosts a quarterly Practice Learning Partnership Committee with broad representation from pre-registration and post-qualification programmes.
- The education provider has stated that collaboration begins at the admissions stage. Here, the programme team verifies organisational support through the Statement of Commitment form and reviews governance arrangements to ensure quality standards. They detailed how Practice Educators (PEs) are vetted via regulatory checks, and where training needs are identified, they are required to complete designated prescribing practitioner training. The admissions tutor provides guidance for accessing this training, which is expected to be completed within the first four weeks of module delivery. A register of completion is maintained to ensure compliance.
- The education provider has detailed how they prepare PEs for module delivery. This includes the PE's receiving a DPP handbook and training guide outlining expectations for learner support and professional conduct. The programme team offers guidance on how prescribing competencies can be met in practice. During module delivery, students and PEs are introduced to their Academic Assessor (AA) early on, who provides ongoing support. A Practice Audit is conducted in week four to confirm adequate resources are in place. If the SCRIPT e-learning system training remains incomplete, learners must find an alternative PE. Optional drop-in sessions are also available to PEs within the first month to address queries and encourage shared learning.
- They have explained how applicants to the prescribing module must submit a Statement of Commitment signed by their line manager and Non-Medical Prescribing Lead (NMPL). This confirms the organisation's ability to support the learner. This includes providing a qualified Practice Educator (PE) to supervise and assess prescribing competencies, releasing the applicant for 26 academic days and 12 supervised clinical days, and ensuring appropriate clinical governance for future prescribing.
- The education provider has explained how the admissions tutor evaluates each application to ensure academic eligibility, professional experience, and adequate organisational support. This includes PE qualifications and governance structures. Offers are only made when both the applicant and their organisation meet all criteria. The programme team monitors student progress and PE engagement, requiring SCRIPT training if a PE training need is identified. Learners must report changes in health or character, and concerns about conduct or practice environments are addressed through established protocols. Reasonable adjustments are managed by the practice organisation and supported by their Disability Support & Inclusion team, which also oversees Personalised Assessment Arrangements.

- The education provider has set out the professionally qualified prescribers with annotations from their respective regulatory bodies and hold postgraduate qualifications in education that forms their academic team. The education provider states that they ensure that all academic staff are supported in achieving Fellowship with Advance HE through their King's Academy. This, they state, fosters excellence in teaching and learning through evidence-informed practice and continuous educational improvement. They explained how their King's Academy collaborates with faculties, staff, learners, and external partners to enhance academic culture through initiatives such as workshops, events, and funding opportunities. Additionally, academic staff participate in annual personal development reviews with their line managers to assess workload, identify CPD needs, and explore growth opportunities, ensuring sustained professional development and capacity planning.
- Through clarification, the education provider has confirmed that they are aiming to recruit between 45 to 60 learners per cohort of the programme. They have determined that this will equate to a staff-to-learner ratio of 1:12 based on 45 learners with 3.6 full time equivalent (FTE) core members of staff and 1:11.5 based on 60 learners based on 5.20 FTE core staff members. They also explained that the faculty-level decision has been made to increase the staffing as discussed as the programme expands. They also supplied information and curriculum vitae of staff involved in the pogramme to confirm their relevant qualifications and experience.
- The visitors found the programme to demonstrate robust collaboration across strategic, governance, and operational levels, supported by a clearly articulated narrative and triangulated with diverse evidence documents. The noted detailed communication with practice education teams, trainees, practice educators, and lived experience volunteers is well-documented, with some materials showing responsive actions based on feedback. Examples of engagement include biannual stakeholder meetings, governance sessions with PE input, onboarding and training support for PEs, structured contact points during module delivery, PE drop-in sessions, and clear processes for raising concerns.
- The visitors therefore considered the relevant standards within this area to be met.

• C: Programme design and delivery -

The education provider has detailed how the proposed programmes learning outcomes (LOs) are designed to align with the HCPC's Standards of Proficiency for Prescribers (SOPs). Furthermoe, one key LO explicitly states that practitioners will prescribe rationally and safely in complex situations using the Royal Pharmaceutical Society (RPS) Competency Framework. This outcome, they state, encapsulates several SCPEs. This includes promoting patient involvement, maintaining accurate records, and accepting accountability for clinical

- decisions. They have also discussed how the curriculum integrates these standards through targeted sessions that cover consultation skills, the legal and ethical aspects of prescribing, multidisciplinary collaboration, and clinical governance.
- The education provider also discussed how these learning outcomes are reinforced through the module's assessment strategy, which includes the Clinical Portfolio, Clinical Governance assignment, and poster presentation. Each assessment is directly mapped to specific SCPEs, ensuring that learners demonstrate competencies such as effective communication, risk management, confidentiality, and professional conduct. This structured approach ensures that both the teaching and evaluation components of the module comprehensively support the development of safe, ethical, and competent prescribers.
- The education provider has stated that the proposed programme is grounded in the principle that healthcare professionals must be equipped to prescribe safely and effectively, ensuring optimal outcomes for patients. The programme is aligned with the Royal Pharmaceutical Society (RPS) competencies and learning outcomes, balancing theory and practice through a structured, stakeholder-informed curriculum. Assessments, they state, are designed to be fair and robust, incorporating observation, self-reflection, and input from multiple contributors to ensure a comprehensive evaluation of learner competence.
- The education provider explained how to maintain high educational standards. The programme is delivered by qualified and experienced academic staff whose credentials are documented in a portfolio of CVs. Staff development is supported through annual performance reviews, equality and diversity training, and dedicated time for scholarly activity. The education provider has discussed how they enforce a clear Fitness to Practise policy, requiring learners to self-declare their fitness and maintain an up-to-date Disclosure and Barring Service (DBS) check, with a dedicated committee addressing any concerns about professional conduct.
- The proposed programme will employ a blended learning model, combining 26 days of theoretical instruction. This will include 11 mandatory university-based days with 12 days (90 hours) of supervised practice learning. Learners, who are already experienced healthcare professionals, develop prescribing competence through a personalised learning contract that outlines their scope of practice and intended formulary. The inclusion of Lived Experience Advisors in the module's development is planned to ensure that the curriculum remains patient-centred, inclusive, and responsive to the diverse needs of service users.
- The education provider has detailed how learner feedback is gathered through module evaluations and stakeholder meetings. Stakeholder meetings also include input from faculty members, Trust partners, learners, prescribing leads, practice educators, and lived experience

- advisors. The education provider has expressed how this plays a vital role in ensuring the curriculum remains current and effective. Furthermore, that these discussions help align the taught material with evolving healthcare practices, professional standards, technological advancements, legal frameworks, and the changing needs of service users.
- The education provider has discussed how in response to shifts in practice, the module has embedded the Sustainability Quality Improvement (SusQI) framework in collaboration with the Centre for Sustainable Healthcare. This, they state, supports learners to integrate planetary health into clinical practice and contribute to NHS England's net-zero goals. Additionally, the King's Academy has led the integration of Artificial Intelligence and Generative AI into education, offering sessions that guide learners in using AI tools responsibly for learning and assessment. These sessions, they discuss, promote digital literacy, academic integrity, and inclusive learning, with real-world applications highlighted through a case study on AI use in clinical documentation by a nurse consultant.
- The education provider has also explained how the programme will use a Clinical Portfolio to assess learners' ability to apply knowledge in practice, specifically addressing parts of the Royal Pharmaceutical Society (RPS) Competency Framework. Over the proposed 90 hours of supervised practice, learners demonstrate competencies through realworld consultation skills, supported by feedback from their Practice Educator and regular progress reviews with academic assessors. The portfolio includes a mock prescription and Clinical Management Plan, ensuring learners integrate taught knowledge with clinical experience.
- They have detailed how assessments will include a two-part unseen exam: a pharmacology test requiring 80% accuracy and a calculation exam demanding a perfect score. Additionally, learners will complete a verbal poster presentation mapped to the RPS framework, exploring organisational and practice-level competencies. The programme's blended learning approach will combine lectures, workshops, simulations, AI tools, and clinical practice. This is planned to ensure that learners develop robust prescribing skills. Case-based discussions and simulated scenarios will further reinforce clinical reasoning and evidence-based decision-making.
- The visitors found the module design was clearly articulated through both narrative and documentary evidence. They noted the nine module-level learning outcomes mapped directly to the behavioural descriptors of the Royal Pharmaceutical Society (RPS) Competency Framework. While the Standards of Proficiency for Prescribers (SCPEs) are reflected within the composite learning outcomes and contextualised in the curriculum. Additionally, that the RPS framework to be well-integrated. They noted how routine feedback from students, trainees, practice educators, and stakeholders supports the ongoing relevance of the module content. Governance processes are in place

to ensure the curriculum remains current and aligned with practice developments. The integration of theory and practice is central to the programme, with assessments and learning methods appropriately designed to support learning outcomes. The module fosters autonomous, reflective, and evidence-based practice, and includes a clearly embedded practice-based learning component with structured assessment, fulfilling key educational standards.

 The visitors therefore considered the relevant standards within this area to be met.

D: Practice-based learning –

- The education provider has stated that practice-based learning is integral to the programme. They have detailed how learners must complete 12 days (90 hours) of practice learning in a relevant healthcare setting to develop prescribing competence aligned with the Royal Pharmaceutical Society (RPS) framework. At their application, learners must declare their scope of practice and intended formulary. This is then further refined at the start of the programme through a personalised learning contract within the Clinical Portfolio. This is a contract, that is agreed upon by the learner and their Practice Educator. It outlines the medications to be prescribed and identifies the specific knowledge and skills the learner needs to acquire in practice.
- The education provider has explained how applicant to the programme must nominate a Practice Educator (PE) who holds a current prescribing qualification and has a minimum of three years' clinical experience in the relevant field. The PE must also be actively engaged in prescribing, regularly consulting with patients and making clinical decisions. The PE must also be trained in supervision and assessment to effectively support the student in achieving the Royal Pharmaceutical Society (RPS) competencies. Alongside this, the Non-Medical Prescribing Lead (NMPL) and line manager must confirm the applicant's eligibility and commit to releasing them for 26 days of academic learning and 12 days of supervised practice.
- They have also explained that learners complete 90 hours of practice learning, with at least 45 hours directly supervised by the PE. At the start of the programme, they define their scope of practice and intended formulary, which is formalised in a learning contract within the Clinical Portfolio. This contract, verified by the PE, outlines the learners' learning needs and medication list, and is reviewed through regular meetings. The Clinical Portfolio includes key assessments such as a mock prescription, clinical management plan, patient feedback, and structured competency evaluations. The PE ultimately confirms whether the student has met all learning outcomes and is competent to prescribe.
- During the admissions process, the Non-Medical Prescribing Lead (NMPL) and line manager confirm organisational support for the applicant via the Statement of Commitment. The Practice Educator (PE) must meet eligibility criteria, including registration as a prescriber

with at least three years of relevant experience, and submit their Personal Identifying Number for verification by the Admissions Tutor. If a training need is identified, the PE is required to complete the SCRIPT Designated Prescribing Practitioner training within the first four weeks, with guidance provided by the module lead. The university also supplies the DPP handbook to outline expectations around engagement, professional conduct, and competency development.

- Throughout the module, the programme team engages with students and PEs at key points, including during the week 4 audit and clinical portfolio assessments. An optional PE drop-in session is offered early in the module to support peer exchange and address queries. The audit, completed collaboratively by the student, PE, and programme team, confirms that the practice setting has the necessary resources to meet learning outcomes. Meetings between the student, PE, and Academic Assessor (AA) are held as needed to monitor progress. If concerns arise regarding student performance or the suitability of the practice environment, resolution procedures are outlined in the DPP handbook.
- The visitors found practice-based learning to be clearly embedded and integral part of the Prescribing module. They found there to be structured assessments ensuring learners meet the required learning outcomes and RPS competencies. This is comprehensively described in the module handbook and mapped to both assessments and the Clinical Portfolio. The programme ensures that competencies are appropriately demonstrated and signed off, with guidance provided through DPP materials and regular review points.
- The visitors noted how Practice Educator (PE) requirements, including professional qualifications, prescribing experience, and supervisory capacity, are thoroughly outlined in the Statement of Commitment, PE agreement form, and supporting documentation. Furthermore, the admissions process includes verification of PE eligibility and training needs, with SCRIPT training offered and monitored as needed. A wide range of resources and guidance is available to support both learners and PEs, including detailed information on the module webpage and application forms.
- The visitors therefore considered the relevant standards within this area to be met.

• E: Assessment -

The education provider has provided a clear assessment strategy, which is linked to the learning outcomes and will ensure learners on the proposed programme meet the standards in the Competency Framework for all Prescribers. They reflect that the programmes emphasise learner accountability through a robust assessment framework that integrates academic and practice-based components. Learners are expected to actively engage in their learning, collaborate with practice supervisors, and uphold professional standards of conduct and ethics.

- Academic assessments include participation in lectures and online learning, development of a Clinical Portfolio, pharmacology and calculations exams, and a poster presentation. Ethical practice is reinforced through the required declaration of AI use in assessments, ensuring transparency and integrity.
- Practice-based assessment involves completing 90 hours in a patient-facing clinical setting, with at least 45 hours supervised and signed off by a Practice Educator. The Clinical Portfolio captures this experience, including feedback, mock prescriptions, and structured evaluations aligned with the RPS competency framework. Students are responsible for attending all study days, and any absences must be addressed through reflective essays. The programme uses diverse assessment methods—such as written exams, practical tasks, and reflective writing—to ensure validity and a comprehensive evaluation of student progress.
- Formative assessments are embedded throughout the module to support student development, including early feedback on learning contracts, mock exams, and poster presentations. These low-stakes opportunities help students understand expectations and refine their skills. King's also conducts an annual review of student performance across modules, analysing metrics such as average marks, pass rates, and demographic indicators. In 2023/24, the prescribing module achieved a 94% pass rate with a median mark of 68%. As part of the TASK initiative, the university has introduced a new assessment framework to enhance feedback quality and ensure alignment with evolving educational standards.
- They noted how the module's assessment strategy is clearly articulated and supported by a range of documentary evidence, demonstrating strong constructive alignment between learning outcomes, the Royal Pharmaceutical Society (RPS) Competency Framework, and module assessments. While the narrative outlines how the Standards of Proficiency for Prescribers (SCPEs) are embedded within the learning outcomes, clarification is needed regarding whether there are two distinct module variants for Independent/Supplementary Prescribing (IP/SP) versus Supplementary Prescribing (SP) only. Overall, the assessment methods are appropriate, varied, and reflective of professional prescribing standards.
- o The visitors considered the relevant standards within this area met.

Risks identified which may impact on performance: None

Section 5: Referrals

This section summarises any areas which require further follow-up through a separate quality assurance process (the approval, focused review, or performance review process).

There were no outstanding issues to be referred to another process.

Section 6: Decision on approval process outcomes

Assessment panel recommendation

Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that the programmes should be approved subject to the conditions being met.

Based on the findings detailed in section 4, the visitors recommend to the Education and Training Committee that:

All standards are met, and therefore the programme is approved

Education and Training Committee decision

Education and Training Committee considered the assessment panel's recommendations and the findings which support these. The education provider was also provided with the opportunity to submit any observation they had on the conclusions reached.

Based on all information presented to them, the Committee decided that:

• The education provider's proposed programme is approved.

Reason for this decision: The Panel accepted the visitor's recommendation that the programme should receive approval.

Appendix 1 – summary report

If the education provider does not provide observations, only this summary report (rather than the whole report) will be provided to the Education and Training Committee (Panel) to enable their decision on approval. The lead visitors confirm this is an accurate summary of their recommendation, and the nature, quality and facilities of the provision.

Education provider	Case reference	Lead visitors	Quality of provision	Facilities provided
King's College London	CAS-01757- M9V7V9	Nick Haddington Rosie Furner	Through this assessment, we have noted: • The programme meets all the relevant HCPC education standards and therefore should be approved.	Outcomes from stage 1 We decided to progress to stage 2 of the process without further review through stage 1, due to the clear alignment of the new provision within existing institutional structures, as noted through the previous section Education and training delivered by this institution is underpinned by the provision of the following key facilities: • The education provider has detailed how they have several campuses in central London, offering a wide array of learner services and specialist teaching facilities. These include well-equipped libraries, IT support, dedicated disability services, computer rooms,

	simulation suites, and teaching spaces. Students also benefit from access to advanced learning tools such as SimConverse and Oxford Medical Services V scenarios, enhancing the educational experience through immersive simulation technologies. The education provider has detailed how they shall ensure that all necessary resources are in place for the programme's start date. This includes the Faculty Senior Strategic Team having already approved the programme and its requirements. They detailed how resource planning and allocation are conducted 6–12 months ahead of delivery, and bookings have been made accordingly. They have stated that the module is fully resourced, and any updates, such as changes to the admissions process, will be supported by additional resources, which
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				will be available when recruitment begins in May 2025.
Programmes				
Programme name			Mode of study	Nature of provision
Prescribing for Heal	thcare Profession	als	PT (Part time)	Taught (HEI)

Appendix 2 – list of open programmes at this institution

Name	Mode of	Profession	Modality	Annotation	First intake
	study				date
BSc (Hons) Nutrition and Dietetics	FT (Full time)	Dietitian			01/09/2002
BSc (Hons) Physiotherapy	FT (Full time)	Physiotherapist			01/09/1991
Doctorate in Clinical Psychology (DClinPSy)	FT (Full time)	Practitioner psychologist	Clinical psycho	ologist	01/09/1992
MSc Dietetics	FT (Full time)	Dietitian			01/09/2003
MSc Physiotherapy (Pre-registration)	FT (Full time)	Physiotherapist			01/09/2002
Pg Dip Dietetics	FT (Full time)	Dietitian			01/09/2003