

Approval process report

University of Sheffield, Independent prescribing, 2024-25

Executive Summary

This is a report of the process to approve an Independent and Supplementary Prescribing programme at the University of Sheffield. This report captures the process we have undertaken to assess the institution and programme against our standards, to ensure those who complete the proposed programme are fit to practice.

We have

- Reviewed the institution against our institution level standards and found our standards are met in this area
- Reviewed the programme against our programme level standards and found our standards are met in this area following exploration of key themes through quality activities
- Recommended all standards are met, and that the programme should be approved
- Decided that all standards are met, and that the programme is approved

Through this assessment, we have noted:

- The areas we explored focused on:
 - Quality activity 1 Ensuring learning outcomes are appropriately mapped to the Royal Pharmaceutical Society (RPS) competency framework. We noted different documents had different sets of learning outcomes. The education provider updated all documents demonstrating that the programme reflects the standards outlined in the RPS competency framework.
 - Quality activity 2 Ensuring content of the Allied Health Professions Federation (AHPF) Outline Curriculum Framework (OCF) is reflected in the programme, as a key curriculum reference point for the development of HCPC registrants as independent prescribers. We noted there was no evidence that the AHPF OCF had been used to support the delivery or was reflected in the programme curriculum. The education provider submitted evidence which demonstrated the framework is embedded into module materials and handbooks, with learners and practice educators directed to it for clarity on profession-specific prescribing rights and links to relevant professional bodies.
- The programme meets all the relevant HCPC education standards and therefore is approved.

Previous consideration

This is not applicable. The approval process was not referred from another process.

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 should be approved.

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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(s) detailed in this report meet our education standards. The report details the process itself, evidence considered, outcomes and recommendations made regarding the programme(s) 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 on our website.

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:

Nicholas Haddington	Lead visitor, Independent prescribing
Rosie Furner	Lead visitor, Independent prescribing
Temilolu Odunaike	Education Quality Officer

Section 2: Institution-level assessment

The education provider context

The education provider currently delivers nine HCPC-approved programmes across three professions. It is a higher education institution and has been running HCPC approved programmes since 1990. This includes two post-registration programmes for Prescription only medicines (POM) - Sale / Supply (OR) annotations. The majority of their HCPC approved provision sits within the School of Allied Health Professions,

Nursing and Midwifery, Faculty of Health. The new programme will also sit in the School of Allied Health Professions, Nursing and Midwifery. There is one programme in the School of Education and one in the School of Psychology, both in the Faculty of Science.

The education provider engaged with the approval review process in 2023 for the BSc (Hons) Speech and Language Therapy (Degree Apprenticeship) Work based learning (WBL), programme. At the meeting in July 2023 the Education and Training Committee agreed that there was sufficient evidence to demonstrate that our standards were met, and the programme was approved. One area was referred to their next scheduled performance review in 2027/28. The education provider had noted they were developing a degree apprenticeship specific Recognition of prior learning (RPL) process which would be applicable across their provision. Given this was still in the development stage, we considered more information / reflection should be provided about it through their next performance review process in 2027-28 academic year.

The education provider went through their first performance review process in 2022/23 academic year where they received the maximum review period of five years.

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 Appendix 2 of this report.

	Practice area	Delivery level	Approved since	
Pre- registration	Arts therapist	□Undergraduate	⊠Postgraduate	2000
	Orthoptist	⊠Undergraduate	□Postgraduate	1992
	Practitioner psychologist	□Undergraduate	⊠Postgraduate	1990
	Speech and language therapist	⊠Undergraduate	⊠Postgraduate	2003
Post- registration	y prescribing	2023		
registration	Orthoptist Exemptions	2018		

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	242	302	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. We are satisfied that there continues to be adequate resources for all learners and that the institution remains sustainable.
Learner non- continuation	3%	5%	2020-21	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 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 2%. We did not explore this data point through this assessment because this had been previously picked up and explored through a focused review process and we were satisfied that the change is such that can be reviewed through the education provider's next performance review which is scheduled for 2027/28 academic year.
Outcomes for those who complete programmes	92%	95%	2021-22	This data was sourced from summary data. This means the data is the provider-level public data. The data point is above the benchmark, which suggests the provider is performing above sector norms. When compared to the previous year's data point, the education provider's performance has improved by 2%. We did not explore this data point through this assessment because the data showed the education provider is performing well in this area.
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."

				We did not explore this data point through this assessment because the data showed the education provider is performing well in this area.
				This data was sourced at the subject level. This means the data is for HCPC-related subjects.
Learner satisfaction	79.4%	85.7%	2024	The data point above the benchmark, which suggests the provider is performing above sector norms.
				When compared to the previous year's data point, the education provider's performance has improved by 5%.
				We did not explore this data point through this assessment because the data showed the education provider is performing well in this area.
HCPC performance review cycle length	N/A	5 years	2022/23	The education provider went through their first performance review in 2022/23 academic year and received a maximum review period of five years. Their next performance review will be in the year 2027/28.

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.

<u>Admissions</u>

Findings on alignment with existing provision:

• Information for applicants -

- Programme information including additional costs and funding is available on the education provider's website. The education provider noted they are committed to ensuring fair treatment for all learners and applicants.
- Details about the new programme and its admissions processes will be accessible on the School of Allied Health Professions, Nursing and Midwifery website under the Apprenticeship Provision. This includes information on the Registered Degree Nursing Apprenticeship, Trainee Nursing Associate Apprenticeship, and MMedSci Advanced Clinical Practice programmes.
- The Students Admissions Policy and Fitness to Study policy are some of the institutional policies that will apply to the new programme.
- This aligns with our understanding of how the institution works and the education provider has not noted any changes to the new programme.

Assessing English language, character, and health –

 As the new programme is a post-registration annotation, and applicants are already registrants, these policies / processes will not apply to applicants to the new programme. We do not need to consider these through this approval process.

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

- Under the Recognition of prior learning (RPL) policy, the education provider may recognise achievements from other institutions as equivalent to part of the education provider's programme, allowing applicants to join at a later stage. This policy is institution-wide and applies to all relevant programmes. All programmes adhere to these guidelines.
- The education provider explained that their institution's RPL policy states that RPL can only be applied to an entire module, not to individual elements, assessments, or tasks. While it is expected that applicants will bring prior learning, knowledge, and skills to support their achievement in the module, the specific content of the module makes it ineligible for RPL. To ensure appropriate levels of knowledge and understanding, all assessments must be undertaken and successfully completed by the applicant. Therefore, RPL is not permitted as a standalone module.
- However, if the learner is taking the module as part of a larger programme, such as the Advanced Clinical Practitioner programme, RPL could be considered. This is possible if the learner is already on the HCPC Register with independent prescribing rights.

 This is in line with our understanding of how the institution works and no changes will be made to this programme.

Equality, diversity and inclusion –

- There is an Equality, Diversity and Inclusion Policy for learners which helps to ensure that all prospective and current learners are treated equally.
- The education provider welcomes applications from people with disabilities and assesses all applications using standard procedures. Support needs are considered separately, with assessments conducted by the Disability and Dyslexia Support Service to ensure appropriate support is provided.
- The University of Sheffield Equal Opportunities code of practice ensures the education provider adheres to the Equality Act 2010 and other relevant legislation. The code of practice outlines how the education provider will implement these policies. It ensures all practices are fair and compliant with the law.
- The education provider noted they are committed to preventing discrimination and ensuring accessibility for all their facilities and services. Accessibility is a key consideration in all building projects, including innovative efforts to update older buildings. They also noted they are committed to enhancing regional skills through practice-based learning, apprenticeships, and widening participation activities.
- This aligns with our understanding of how the institution runs and the education provider has stated that there will be no change to how the new programme aligns.

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 –
 - As the new programme is a post-registration annotation, and applicants are already registrants, the ability to deliver provision to the expected threshold level of entry to the Register, does not apply to the new programme. We do not need to consider these through this approval process.

Sustainability of provision –

 There is a Student Protection Plan which is approved by the Office for Students (OfS). The Plan outlines measures to protect learners if their studies are at risk and applies to all learners pursuing formal qualifications at the education provider.

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

- The education provider has a Financial Operating Strategy which aims to ensure they achieve a robust, solvent, and sustainable financial position that supports their core activities both in the short and long term. They noted this is achieved through clear financial targets, effective management of opportunities and risks, maintaining high standards of financial probity and accountability, and achieving value for money.
- The education provider noted they have a strong relationship with NHS England which commissions programmes and modules, with contracts in place and regular review meetings held.
- The education provider noted the School of Allied Health Professions, Nursing, and Midwifery has commissions for Continuing Professional Development (CPD) programmes and modules from various local and national Trusts. Some of these include Sheffield Teaching Hospitals NHS Foundation Trust and Sheffield Health and Social Care NHS Foundation Trust. They noted the School has also successfully tendered for its provision to be listed on national procurement portals such as the Salisbury Procurement Framework and the North of England Commercial Procurement Collaborative Framework. Contracts. They are in place with employers nationwide, and programmes are reviewed and updated annually.
- The education provider sets a minimum of 16 learners for a module to be sustainable. The module includes HCPC and Nurses and Midwifery Council (NMC) registrants, ensuring sufficient cohort numbers and promoting interprofessional learning. They noted the module is funded by NHS England, with a consistent clinical need and demand each year.
- In addition, all departments conduct an annual reflection to ensure the viability and proper delivery of programmes. This process involves reviewing both internal feedback, such as learner feedback, and external feedback from sources like external examiners, stakeholders, NSS, and Graduate Outcomes.
- All of these processes will apply to the new programme and the education provider has noted no changes.

• Effective programme delivery -

- All programmes have a clear structure, with a Programme Lead
 responsible for all aspects of programme delivery. Programme Leads
 are supported by Module Leads who oversee specific modules' delivery
 and assessment. The Programme Lead is a member of the
 Departmental Education Committee, which reports to the Departmental
 Executive Team and the Faculty Education Committee.
- The teaching team, including Module Leads, consists of qualified healthcare professionals with current registrations on the relevant parts of the Nursing and Midwifery Council (NMC) and HCPC Registers.
- This aligns with our understanding of how the institution runs and will apply to the new programme in the same way.

• Effective staff management and development –

- All staff are employed by the education provider and adhere to their employment policies. All programmes have a clear structure with each programme having a Programme Lead who has responsibility for all aspects of the delivery of the programme. Programme Leads sit on the relevant Departmental Education Committees. These committees report to the Departmental Executive Teams and the Faculty Education Committees.
- All new lecturing / teaching staff are supported to obtain HEA
 Fellowship at either the Fellow or Senior Fellow level. Other staff are
 encouraged and supported to gain fellowship at the relevant level for
 their role.
- There is a clear line of leadership and management. The Pathway Framework provides clear guidance and information for staff on Teaching and Research, Research Specialist and Teaching Specialist contacts.
- All staff participate in the Staff Review and Development Scheme annually. This involves an annual meeting with their line manager or designated reviewer to reflect on the previous twelve months, explore development opportunities and agree objectives for the coming year ahead.
- The education provider noted they have a range of programmes and learning modules to support staff development, enhance skills and expand working relationships and networks, including their How-To series and Grow Mentoring Programme.
- These are institutional policies and processes that will apply to the new programme in the same way.

• Partnerships, which are managed at the institution level -

- The education provider has a Partnerships and Regional Engagement team responsible for delivering partnerships, knowledge exchange, regional development, and city and public engagement. It consists of the following teams:
 - Knowledge Exchange team
 - Entrepreneurship team
 - Regional Engagement team
 - City and Culture team
 - Public Engagement team
- The education provider noted the new programme has been developed in collaboration with NHS England following the ACP multi-professional practice framework and KSB's advanced practice. They noted the collaboration will continue through regular review cycles with NHS England and stakeholders. The NMP programme is validated by the NMC regulator and undergoes yearly periodic review. The MMedSci Advanced Clinical Practice is accredited by NHSE for the digital badge scheme. It also undergoes yearly accreditation monitoring.

- The education provider noted they are part of the Learning Environments and Assessment Placements (LEAP) programme for the Humber and North Yorkshire region, which aims to create a healthier region. They noted the programme ensures that every learner on a clinical work practice-based learning has the opportunity, support, and infrastructure to thrive in their chosen health or care career.
- This is in alignment with our understanding of how the institution runs.
 The new programme will follow this approach.

Non-alignment requiring further assessment: None.

Quality, monitoring, and evaluation

Findings on alignment with existing provision:

- Academic quality
 - External examiners are appointed at the programme, module, and subject levels. Programme level examiners oversee the entire programme and collaborate with subject level examiners. All programme level external examiners are healthcare registrants in the relevant profession.
 - With the External examiner code of practice, external examiners help to ensure:
 - Programmes of study are delivered to a high standard in terms of aims, content, delivery, and learner progression.
 - Assessment methods are credible, rigorous, equitable, and consistently conducted within relevant regulations and policies.
 - Learner performance and degrees awarded meet national standards and are comparable to those of other UK institutions.
 - Areas of good practice are identified for appropriate dissemination.
 - Examination boards are fairly conducted, and degree award recommendations are confirmed.
 - The education provider noted that all departments go through their annual reflection process. The process has both external and internal purposes. The external purpose is to the ensure the education provider meets regulatory requirements and provides quality assurances for its programmes as specified by the Office for Students (OfS). The internal purpose supports departments in identifying and addressing areas for improvement, promoting good practice, and enhancing the quality of the academic offer beyond mere compliance.
 - Learner feedback is used to enhance programme development. Formal module evaluations occur at the end of each module / semester, with programme-level evaluations conducted annually.
 - All of the above policies and processes align with our understanding of how the institution runs. The education provider has noted the new programme will align with these policies and processes in the same way.

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

- Learners are provided with specific guidance on how to raise concerns in practice-based learning. Each programme includes this information in the Programme Handbook and specific module handbook.
- The education provider noted clear expectations regarding practicebased learning are set and communicated to learners and practice educators through module handbooks.
- Practice learning environments are audited by the department / faculty
 Placements Team before being approved.
- Practice educators must have at least three years of recent clinical prescribing experience in the relevant field. They also need to show support from their employing organisation to supervise, support, and assess prescribing practice. Familiarity with the programme requirements and the applicant's learning outcomes is essential.
- This aligns with our understanding of how the institution runs. The new programme will follow the institution approach as well as programme specific processes.

• Learner involvement -

- Tell US is the education provider's platform for collecting learner feedback on modules and programmes through end-of-module and end-of-programme surveys. It provides quantitative and qualitative reports, data analysis, and reporting mechanisms for module leads, Directors of Education, and Faculty Directors of Education to reflect on modules and programmes. Additionally, it offers an opportunity for all staff to reflect on their teaching practices.
- The education provider collaborates with the Sheffield Students' Union to facilitate Student Voice. Over 1,000 Academic Reps represent learners in their programmes, year groups, and departments. Each department has a Student Voice Committee that reports to the Education Committee, and there are also Student Academic Reps at the faculty level.
- The institutional procedure for approving new programmes or making changes to existing ones requires leaner engagement and feedback.
 This ensures that learner input is considered as a standard part of the process.
- Each health profession programme in the School of Allied Health Professions Nursing and Midwifery has a Student Voice Committee. Additionally, a schoolwide committee exists where Student Academic Reps from various professions discuss school-wide issues.
- All of these align with our understanding of how the institution runs and the new programme will follow this approach.

• Service user and carer involvement -

 The education provider noted they prioritise understanding the needs and experiences of service users by actively involving them in research and teaching. They noted their healthcare programmes emphasise

- patient contact, enabling learners to reflect on their learning through interactions with real patients in primary, secondary, and tertiary care settings.
- Learners on the new programme will engage with service user feedback mechanisms within their employing organisations. They will receive feedback during their clinical learning at work, which will be incorporated into their professional development portfolios and discussed with their practice educators.
- This is in alignment with our understanding of how the institution runs and will apply to the new programme.

Non-alignment requiring further assessment: None.

Learners

Findings on alignment with existing provision:

- Support
 - o Learners have access to a range of support services designed to:
 - Look after their health and wellbeing
 - Enhance their opportunities for success
 - Help them make the most of their time at the education provider
 - Contribute positively to the quality of the learner experience
 - Support recruitment, progression, and retention
 - There are specific services available to learners. Some of these include: Student Mental Health, Counselling and Therapies Service, and Disability and Dyslexia Support Service, University Health Service, Student Administration Service, Student Services Information Desk, Student Experience and Support (SES), and Student Support Committee.
 - All of these services are available to all learners including those on the new programme. Except for the University Health Service, learners can access all these services remotely without needing to visit the education provider campus. For healthcare needs, learners are required to use their local GP services where they reside.
 - Each learner is assigned an academic tutor with whom they have regular contact. They can raise any concerns with their tutor or practice educator, especially if issues arise in practice. Additionally, learners must follow their governing bodies' policies for raising concerns about any witnessed issues in clinical practice.
 - Learners are informed on the need to obtain consent and identify their learning status with service users/patients before any interaction, whether supervised or unsupervised. Consent is also required from external speakers for recording teaching sessions. Educational sessions cover obtaining consent from various service users/patients and the associated legal and ethical principles.
 - The education provider has a 301 Academic Skills Centre that offers a range of support for all learners, working alongside academic

departments and other learner support teams. They provide workshops, 1:1 sessions, and online resources to help learners manage their learning, develop maths and statistics skills, and improve academic skills such as essay writing, exam techniques, and notetaking.

- The Library supports the development of academic skills and digital literacy through its Information and Digital Literacy Framework. It offers a variety of online tutorials that can be integrated into academic programmes and delivered through the Virtual Learning Environment (VLE).
- These are in alignment with our understanding of how the institution runs and will all apply to the new programme.

Ongoing suitability

- The education provider noted they have a responsibility, and in some cases a legal obligation, to ensure that learners are fit to practise in their relevant professions. Academic departments may report concerns about a learner's fitness to practise under the General Regulations. Such concerns will be reported to the Head of Department and may include health conditions, behaviours, or attitudes that could affect the learner's professional fitness.
- For learners with disabling conditions or long-term mental or physical health issues, the education provider provides focused and appropriate support to aid their participation and function. This includes offering reasonable adjustments to ensure equal opportunities for success in all aspects of university life.
- If, despite support, a learner cannot engage, they may be deemed unfit to study, invoking the education provider's Health Requirements Regulation (26).
- Overall, the education provider's policies ensure that all learners, regardless of their health conditions, receive the necessary support to succeed while maintaining the standards required for professional practice.
- This aligns with our understanding of how the institution runs and will apply to the new programme in the same way.

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

- Learners are taught in mixed groups with learners from various health care professions and non-health care programs whenever possible.
- The education provider noted the Non-Medical Prescriber programme already has well-established interprofessional learning between nurses and midwives. They noted including HCPC registrants would further enrich this learning experience and enhance understanding of each other's professional prescribing boundaries.
- This is in alignment with our understanding of how the institution runs.
 The new programme will follow this approach.

Equality, diversity and inclusion –

- The education provider has an Equality, Diversity and Inclusion (EDI) Policy for learners. The policy aims to ensure that all learners and prospective learners are treated equally, regardless of race, colour, nationality, ethnic origin, sex, gender reassignment, sexual orientation, marital or parental status, pregnancy and maternity, age, disability, religion and belief, socio-economic class, or spent criminal convictions.
- The policy is supported by specific policies on personal harassment and the support of learners with disabilities. It reflects and complements the education provider's Equality and Diversity Policy and Code of Practice for Staff and operates within the context of relevant equalities legislation.
- Each department has an EDI Committee that oversees the implementation of EDI policies at department and programme levels.
 These committees report to the departmental Executive Committee and the Faculty EDI Committee and work closely with the departmental Education Committee and Student Academic Representatives.
- The education provider noted their commitment to equality of opportunity and fostering good relations for all learners and prospective learners. The education provider's policy ensures that all learners are treated with dignity and respect, regardless of protected characteristics as defined by the Equality Act 2010.
- This commitment is reflected in all their functions, including access and recruitment, admissions and retention, assessments and progression, provision of learner services and facilities, teaching and learning, curriculum development, quality assurance, research, and community links and partnerships.
- This aligns with our understanding of how the institution runs and will apply to the new programme in the same way.

Non-alignment requiring further assessment: None.

Assessment

Findings on alignment with existing provision:

Objectivity –

- The University of Sheffield assessment guidance provides principles of assessment which must be followed. The overall assessment load is monitored by the Module Lead, adhering to guidance from the Academic Programmes Office regarding assessment length and module credit weightings. Any changes to assessments within a programme must be approved by the departmental Education Committee and reviewed by Academic Programmes and Student Engagement.
- The education provider follows a strict policy on the appointment of external examiners. External examiners contribute to setting assessments, commenting on learner performance, marking, and

- feedback at the module level. They also attend exam boards and provide feedback at the programme level.
- External examiners submit annual reports, which are integral to programme-level, departmental, and faculty review processes, including the Annual Reflection. This ensures continuous improvement and adherence to academic standards.
- For the new programme, assessments follow the requirements established by professional and regulatory bodies. This ensures that registrants can obtain a registerable prescribing qualification with their governing body.
- The above align with our understanding of how the institution runs and will apply to the new programme.

Progression and achievement –

- Learners are informed through their programme handbooks, specifications, and regulations that successful completion of their programme is required for registration.
- For example, to apply for registration with the HCPC as a non-medical prescriber, learners must successfully complete their programme or module as specified by the registration requirements.
- Health care programmes have attendance requirements that exceed the general education provider guidelines. These requirements, along with methods for monitoring attendance, are detailed in each programme, module, and placement handbook. Procedures for recording absences are also provided.
- The general regulations for progression and achievement are outlined in the University Calendar, and health care programmes typically follow these regulations, except for the conceded pass. Learners must pass all modules within their programme to progress.
- This aligns with our understanding of how the institution runs. The education provider has not noted any changes to the new programme.

Appeals –

- Information around appeals and complaints is provided on the education provider's website. Learners can make informal or formal complaints about the delivery or quality of services, teaching, tutorial support, supervisory provision, or other matters related to their programme of study by following the procedures outlined in the programme handbook. Learners can also appeal a recommended grade for any module, degree classification, or examination result through the specified appeals process.
- This is set at the institution level and all programmes must adhere to the education provider's complaints and appeals process. The new programme will align to this process.

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:

- In relation to staffing resources, the education provider noted the established NMC prescriber teaching team will be supplemented by two HCPC prescribers from the Advanced Clinical Practitioner (ACP) teaching team.
- Prescribing education will continue to utilise established university campus teaching rooms and virtual learning environments.
- Current learning materials will be enhanced with HCPC-specific content in line with regulatory body requirements.

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
Independent and Supplementary Prescribing for Allied Health Professionals	PT (Part time)	Independent prescribing	30 learners, 2 cohorts	01/01/2026

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>.

Quality theme 1 – mapping of the learning outcomes to the Royal Pharmaceutical Society (RPS) competency framework

Area for further exploration: The education provider noted that the learning outcomes were mapped against the RPS competency framework for all prescribers. However, the visitors noted there were different sets of learning outcomes described in different documents. For example, we noted the mapping document set out 18 knowledge, and 16 skills, learning outcomes for the programme. However, the Module Descriptor set out eleven knowledge and / or skills learning outcomes and the Student Handbook set out six module learning outcomes. The visitors were unclear how these three different sets of learning outcomes related to each other, and to the RPS competency framework. They were therefore unable to clearly consider how the programme demonstrated the standards outlined in the RPS competency framework.

Quality activities agreed to explore theme further: We explored this by asking for additional evidence and email clarification. We considered this the most appropriate approach to address the issue identified by the visitors.

Outcomes of exploration: The education provider reviewed the different versions of the learning outcomes and decided that the learning outcomes for the programme, will be used were those in the Module Descriptors. All documents were updated including the Student Handbook, the DPP handbook and the mapping of programme learning outcomes against the RPS competencies and the HCPC standards of conduct, performance and ethics. Following receipt of this clarification, the visitors considered the updated documents and determined the programme demonstrated the standards outlined in the RPS competency framework. The visitors determined that the quality had adequately addressed their concerns.

Quality theme 2 – how the content of the AHPF OCF is reflected in the programme

Area for further exploration: The education provider noted the programme had been developed in collaboration, and in line, with the Health Education England (HEE) Advanced Clinical Practitioner ACP multi professional practice framework and Knowledge, Skills and Behaviour (KSB's) advanced practice. In addition, there was evidence the standards of conduct, performance and ethics (SCPEs) and the RPS competency framework for all prescribers had been used to support the design of the programme and support constructive alignment.

However, there was no evidence that the AHPF OCF had been used to support the delivery or was reflected in the programme curriculum. The visitors considered it important for the education provider to have reflected on the OCF and to have included it in their programme planning as it is an important curriculum framework for prescribers. Therefore, the visitors requested to know how the content of the AHPF OCF was reflected in the programme as a key curriculum reference point for the development of HCPC registrants as independent prescribers.

Quality activities agreed to explore theme further: We decided to explore this through email clarification / narrative. We considered this quality activity the most appropriate to address the visitors' concerns.

Outcomes of exploration: The education provider explained that the prescribing curriculum is reviewed annually during the planning phase for the next delivery cycle. We understood that updates from professional bodies are incorporated into teaching materials to ensure alignment with current standards. If a curriculum update occurs mid-cycle and involves changes to prescribing law, these are urgently implemented. The education provider further explained that cases where sessions have already been delivered, learners are signposted to the updates to ensure they remain informed of legal changes.

In relation to embedding the AHPF OCF, we understood the framework is embedded into module materials and handbooks, with learners and practice educators directed to it for clarity on profession-specific prescribing rights and links to relevant professional bodies. The visitors were satisfied that the education provider's response adequately addressed their concerns and were reassured that the programme reflects the philosophy, core values, knowledge and skills of a prescriber in line with all relevant curriculum guidance.

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:

- **SET 1: Level of qualification for entry to the Register** the programme is a post-registration annotation; therefore, this standard is not applicable to the programme.
- SET 2: Programme admissions
 - Applicants are required to have at least three years of post-registration experience in the clinical area where they intend to prescribe and be practising at an advanced clinical level within their scope.
 - A broad range of clinical experience is considered during the admissions process. There is also a range of questions in the approval form requiring applicants to have organisation support in place.
 - Further clarification was sought around the permission for a learner to have aesthetics as their area of practice. The visitors considered this not appropriate as it would not permit the adequate demonstration of the prescribing competencies relating to diagnosis and clinical reasoning. The visitors also noted aesthetics was mentioned in relation to requirements for the Designated Prescribing Practitioner (DPP) / Practice Educator. The education provider clarified that aesthetics related to Nursing and Midwifery Council (NMC) learners and it was removed from the documentation to erase any ambiguity for HCPC applicants and their practice educators.
 - We are satisfied that the selection and entry criteria include appropriate academic and professional entry standards and are clearly stated on the programme application form.
- SET 3: Programme governance, management and leadership
 - Clear information demonstrated evidence of regular and effective collaboration between the education provider and their practice education providers. Practice education providers meet with the education provider at the start of each cohort to discuss the programme. Feedback is regularly sought from supervisors (practice educators) which then feeds into continuous improvement of the programme.
 - Practice education providers are required to confirm, on the applicant's approval form, that there is a clinical need for the learner to undertake the programme. This helps to ensure sustainability for the programme.

- The form must also state that adequate and sufficient practice-based learning and support mechanisms are in place for the learner. The form must be signed by the learner's line manager, confirming that a DPP has been allocated to support the learner in completing 90 hours of supervised prescribing practice. This is how the education provider ensures availability and capacity of practice-based learning.
- Further clarification was sought to understand if learners intending to learn in an organisation in which they are not employed, were able to enrol on the programme. We understood learners must be employed by the organisation they intend to undertake their trainee NMP supervised practice in, to ensure compliance with governance and accountability. This would also ensure the availability and capacity of practice-based learning for all learners.
- Curriculum Vitae (CVs) were provided which spanned several health care professional groups, including paramedics, independent nurse prescribers, Advanced Clinical Practitioners and a specialist advanced independent prescribing pharmacist.
- Further clarification was sought around learner numbers and staff work time equivalent (WTE) to ensure adequate staffing. The education provider confirmed they are anticipating a maximum of 15 (x two cohorts) learners (HCPC registrants) in addition to existing non HCPC registrants. This will give a total estimate of 70 learners. A breakdown of the workload planning for each academic staff per learner was also provided which demonstrated there will be adequate number of staff to support learners and assess their work.
- For example, we noted the HCPC academic marking team will consist
 of two academic independent prescribers (1 WTE) who will have seven
 to eight learners each to support and assess. The visitors considered
 these numbers adequate to deliver the programme effectively.
- The education provider demonstrated that educators have relevant expertise and knowledge. We also noted the education provider was actively expanding staffing to include HCPC registrants to support the new learners.
- Learners and educators can access module resources via the education provider's Virtual Learning Environment (VLE) and Blackboard, once enrolled. Materials include lecture notes, videos, online packages, and an accessibility tool that allows downloads in alternative formats. Taught sessions are recorded using Blackboard Collaborate for online delivery or Echo for face-to-face teaching, enabling learners to revisit content.
- Additionally, learners are enrolled on revision platforms such as Health VLE and SCRIPT. SCRIPT is a national eLearning programme designed to promote safe and effective prescribing and medicines management across various healthcare professions, including doctors, nurses, pharmacists, and paramedics. These are used to complete pre- and post-session learning activities.

- The visitors noted the resource materials made reference to V300 and other nurse-centred language throughout the documentation. Further clarification was sought, and updated documents were received ensuring such terminologies were removed or properly contextualised as they are not relevant nor applicable to HCPC registrants. As the programme is for HCPC registrants updated documents were provided demonstrating appropriate resources to support HCPC learners.
- Through the initial documentary review and quality activity, the visitors were satisfied that all standards within this SET area had been met.

• SET 4: Programme design and delivery -

- Learning outcomes are appropriately mapped to the RPS Competency Framework. As detailed in <u>quality theme 1</u>, we received updated mapping which reassured us that learners will be fit to practise safely and effectively as Independent and Supplementary Prescribers by the time they complete the programme.
- Learning outcomes are mapped to the HCPC Standards of Conduct, Performance and Ethics (SCPEs) 2023 to ensure that learners understand and are able to demonstrate the expected behaviours in the prescribing practice. A review of the learning outcomes as noted in quality theme 1, reassured us professionalism and the SCPEs are adequately covered.
- The education provider noted that the programme learning outcomes, in relation to skills and knowledge are set against the RPS competency framework and HCPC SCPEs. As detailed in <u>quality theme 2</u>, it was clear that the AHPFOCF was also reflected in the programme, as a key curriculum reference point for the development of HCPC registrants as independent prescribers. We also understood how key external curricula were identified and used to inform programme design and delivery to be satisfied that the programme reflects the philosophy, core values, skills and knowledge base of the profession.
- The education provider noted that prescribing sessions are delivered by clinicians actively working in clinical practice alongside academic staff, ensuring the teaching reflects current practice. We understood learners must complete and pass a practice-based e-portfolio aligned with the RPS competency framework, which is assessed by a qualified prescriber to maintain clinical relevance.
- From seeking further clarification, we understood there are governance processes in place for reviewing and updating the programme material to ensure its currency. For example, we understood learner feedback gathered through Tell Us survey helps to identify areas of good learning experience as well as areas for development, which are then used to inform the curriculum and learning materials. We also noted that external examiner feedback on the exam questions is used to ensure currency, relevance and accuracy.
- The programme includes a mandatory twelve days of theory alongside 90 hours of supervised prescribing practice. It also includes 10 days self-directed learning i.e. a total of 22 days theory and 90 hours clinical

prescribing practice. Learners must complete and pass a practice-based e-portfolio, assessed by a qualified prescriber, and mapped to the RPS competency framework. We were satisfied that the construction of the programme, the constructive alignment of the RPS competencies to the learning outcomes and the practice-based nature of learning and assessment demonstrated that theory and practice are well integrated.

- A variety of teaching and learning methods are employed. For example, VLE, lectures, facilitated discussion and debate which are both online and classroom based, tutorials, guided and independent study and reading as some of the learning and teaching methods used to deliver the programme. The visitors determined these are appropriate for the delivery of the learning outcomes.
- Throughout the module, learners are expected to reflect on their development as autonomous independent prescribers. This reflective process is also supported by a prescribing portfolio, which must be completed and submitted as part of the assessment. Learners are required to complete a 3000-word critical reflective assignment which helps to demonstrate their knowledge and understanding of effective prescribing practice as underpinned by the RPS competency framework. The selected topic should directly relate to the learner's development of competence and effectiveness as a prescriber within their clinical area. To support a focused and reflective discussion, learners are required to draw on relevant literature and use a structured reflective model, such as Driscoll's, to guide their writing.
- Evidence-based practice is identified in the learning outcomes and aims of the programme. Further clarification was sought to understand how learners are supported to develop and demonstrate evidence-based practice in the context of being prescribers in training. From seeking further clarification, we understood learners are required, as part of their portfolio, to write four clinical reflections at a Level 7 academic standard and are supported by the current evidence base. The 3000-word academic assignment also helps to critically demonstrate their understanding of the evidence-based effective prescribing practice relevant to their scope of practice.
- Through the initial review and quality activity, the visitors were satisfied that all standards within this SET area had been met.

SET 5: Practice-based learning –

- Learners are required to complete 90 hours of supervised practicebased learning which is evidenced in their NMP e-portfolio. The visitors were satisfied that the period of learning in practice is embedded within the programme, with practice-based supervision from the DPP which demonstrates that practice-based learning is integral to the programme.
- We noted the e-portfolio learning outcomes are based on the RPS competency framework. Learners are encouraged to spend supervision time with a range of professionals to gain broader insights into

- prescribing practice. In particular, nursing and AHP prescribing learners are advised to spend some of this time with a pharmacist. At the final interview, the practice educator must sign off the NMP practice-based learning portfolio to confirm it contains sufficient and appropriate evidence demonstrating achievement of all elements of the ten RPS competency framework. This ensures learners have a range of practice-based learning that supports the achievement of the learning outcomes.
- Regarding the contact time for HCPC registrants, the documentation stated "Nurses 30hours with PA, 60 hours with PS" but these terminologies were unclear. From seeking further clarification, we understood each HCPC registrant NMP learner will spend at least 30 hours with the practice educator who will be their sole assessor. The remaining 60 hours will be spent with the wider prescriber team as discussed with the learner and practice educator during the initial interview within the e-portfolio.
- Practice providers must confirm the suitability and qualifications of practice educators through the approval form and practice learning environment audit. Each learner is assigned a named assessor, supervisor, or educator who meets the experience and training standards outlined in the DPP handbook. If a change in educator occurs during the module, a suitably qualified replacement may be nominated, subject to review and approval by the module lead. The visitors were satisfied that the DPP requirements were assured through the admissions process and that the audit document demonstrated an effective process of ensuring adequate number of appropriately qualified and experienced staff in practice-based learning.
- Experience, knowledge and training requirements for practice educators are clearly set out. We understood practice educators must have at least three years of prescribing experience and work in the same clinical specialism as the learner, with a clear understanding of the DPP role as outlined in the handbook. Their qualifications are verified by the module lead, and they must confirm their suitability on the learner's application form.
- Evidence provided demonstrated regular training for practice educators and there is also provision of annual updates by the module leader at the commencement of the programme. We noted practice educators are required to self-declare about their training. We needed to clarify if such training needed to be evidenced.
- From seeking further clarification, we understood all DPPs (practice educators) are required to show evidence of their DPP training as requested on the approval form. Where a DPP had not undertaken any training, we understood the education provider offers free access to the DPP training as provided by the Health and Education Co-operative before starting the role. There is also a DPP information session facilitated by the programme lead and drop-in sessions throughout the programme.

 The visitors were satisfied that the evidence submitted demonstrated that all standards within this SET area are met.

SET 6: Assessment –

- The assessment is in four parts numeracy exam, pharmacology exam, a 3000-word reflective assignment and assessment of practice as evidenced in the e-portfolio. The e-portfolio is developed throughout the module and showcases the learner's achievement of the learning outcomes through critical reflection and application of theory to practice. Each portfolio is unique to the learner's scope of practice and includes essential elements mapped to the RPS competencies.
- The learning outcomes are mapped to the HCPC standards of conduct, performance and ethics. Feedback and testimonials from various sources are included in the e-portfolio to support the assessment of professional behaviours. Reflective practice within the portfolio helps learners identify their learning needs in relation to their scope of practice.
- A range of assessment methods is used to ensure all learners can demonstrate their full potential. The programme includes two exams with different pass marks - 100% for numeracy and 80% for pharmacology - while the academic assignment requires a 50% pass mark in line with Level 7 standards. The practice-based e-portfolio is assessed on a pass / fail basis, as it evaluates practical application in clinical settings.
- The visitors were satisfied that the standards relating to this SET area are 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.

Recommendations

We include recommendations when standards are met at or just above threshold level, and where there is a risk to that standard being met in the future. They do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

The visitors did not set any recommendations.

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 all standards are met, and therefore the programme should be 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 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
University of Sheffield	CAS-01718- M3D2G7	Nicholas Haddington Rosie Furner	Through this assessment, we have noted: • The areas we explored focused on: • Quality activity 1 - Ensuring learning outcomes are appropriately mapped to the Royal Pharmaceutical Society (RPS) competency framework. We noted different documents had different sets of learning outcomes. The education provider updated all documents demonstrating that the programme reflects the standards outlined in	Education and training delivered by this institution is underpinned by the provision of the following key facilities: • In relation to staffing resources, the education provider noted their established NMC prescriber teaching team will now be supplemented by two HCPC prescribers from the ACP teaching team. • Prescribing education will continue to utilise established university campus teaching rooms and virtual learning environments. • Current learning materials will be enhanced with HCPC-specific content in line with regulatory body requirements.

the RPS competency
framework.
o Quality activity 2 -
Ensuring content of
the Allied Health
Professions
Federation (AHPF)
Outline Curriculum
Framework (OCF) is
reflected in the
programme, as a key
curriculum reference
point for the
development of
HCPC registrants as
independent
prescribers. We
noted there was no
evidence that the
AHPF OCF had been
used to support the
delivery or was
reflected in the
programme
curriculum. The
education provider
submitted evidence
which demonstrated
the framework is
embedded into
module materials
and handbooks, with

Programmes	edu it for prof pres and	ducation	
Programme name		Mode of study	Nature of provision
Independent and Supplementary Prescribing for Allied Health P	PT (Part time)	Taught (HEI)	

Appendix 2 – list of open programmes at this institution

Name	Mode of study	Profession	Modality	Annotation	First intake date
BMed Sci (Hons) Orthoptics	FT (Full time)	Orthoptist		POM - Sale / Supply (OR)	01/09/2017
Doctorate in Clinical Psychology (DclinPsy)	FT (Full time)	Practitioner psychologist	Clinical psychologist		01/01/1990
Doctor of Educational and Child Psychology (DEdCPsy)	FT (Full time)	Practitioner psychologist	Educational psychologist		01/01/2005
BMedSci (Hons) Speech and Language Therapy	FT (Full time)	Speech and language therapist			01/09/2018
MMedSci Speech and Language Therapy	FT (Full time)	Speech and language therapist			01/09/2018
MMedSci Speech and Language Therapy	PT (Part time)	Speech and language therapist			01/09/2021
BSc (Hons) Speech and Language Therapy (Degree Apprenticeship)	WBL (Work based learning)	Speech and language therapist			01/09/2023
MMedSci Vision and Strabismus	DL (Distance learning)			POM - Sale / Supply (OR)	01/09/2018
PG Exemptions Course	DL (Distance learning)			POM - Sale / Supply (OR)	01/09/2018