

Programme approval visit report

Section one

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| Programme provider name: | Manchester Metropolitan University |
| In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i> | Tameside and Glossop Integrated Care NHS Foundation Trust Bridgewater Community Healthcare NHS Trust Manchester University NHS Foundation Trust Northern Care Alliance NHS Group Pennine Care NHS Foundation Trust The Christie NHS Foundation Trust Stockport NHS Foundation Trust |
| Programmes reviewed: | Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V150 <input type="checkbox"/> Community practitioner nurse prescribing V100 <input checked="" type="checkbox"/> |
| Title of programme(s): | Community Practitioner Nurse Prescribing (V100) Non-Medical Prescribing |
| Academic level: | |
| Independent and supplementary nurse prescribing V300 | England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input checked="" type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11 |
| Community practitioner nurse prescribing V150 | England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11 |
| Community practitioner nurse prescribing V100 | England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input checked="" type="checkbox"/> Level 7 SCQF |

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| | <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11 |
| Date of approval visit: | 7 December 2020 |
| Programme start date: | |
| Independent and supplementary nurse prescribing V300 | <input type="text" value="7 September 2021"/> |
| Community practitioner nurse prescribing V150 | <input type="text" value="N/A"/> |
| Community practitioner nurse prescribing V100 | <input type="text" value="13 September 2021"/> |
| QA visitor: | Registrant Visitor: Nikki Welyczko |

Section two

Summary of review and findings

Manchester Metropolitan University (MMU) is an established approved education institution (AEI); the faculty of health, psychology and social care, (the faculty) department of nursing (the department) present the independent/supplementary prescribing (V300) and the community practitioner nurse prescribing (V100) preparation programmes for Nursing and Midwifery Council (NMC) approval.

The programmes are mapped against the NMC Standards for prescribing programmes (SPP) (NMC, 2018) and Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency framework for all prescribers) (NMC, 2018), the Standards for student supervision and assessment (SSSA) (NMC, 2018) and the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018).

The 30-credit academic level seven V300 is offered as a part-time programme and delivered on three occasions across the academic year in September, January and May. It's offered as a standalone programme, it's an option in the Master of Science advanced clinical practitioner and the postgraduate diploma specialist practitioner qualification district nursing (SPQ DN) programme. There are 26 theory days and 12 days (90 hours) supervised learning in practice. The programme can be accessed by registered allied health professionals (AHPs).

The 10-credit academic level seven V100 is an integrated part of the specialist community public health (SCPHN) programme. There are five theory days and students are required to complete a minimum of 20 hours practice-based learning.

The programmes are delivered using a range of learning and teaching strategies, including blended learning, e-learning, lectures, presentations, directed study, tutorials, independent study and practice learning.

The programmes have been co-produced in partnership with a range of stakeholders, including practice learning partners (PLPs) and students. MMU operates a robust quality management and enhancement education governance framework at strategic and operational level, which students and PLPs contribute to. The framework facilitates effective partnership working at all levels, which is evident at the approval visit. There's evidence of service user and carer (SUC) engagement at department level via the faculty's SUC group, however there's limited evidence of this within the prescribing programmes.

Documentary evidence and the approval visit confirm that arrangements at programme level don't meet the SFNME (NMC, 2018). Arrangements at programme level meet the SSSA (NMC, 2018).

The visit is undertaken remotely during the COVID-19 pandemic.

The programme is recommended to the NMC for approval subject to three joint NMC and university conditions. There's one university condition.

Six recommendations are made. Two are NMC recommendations, three are joint NMC and university recommendations, there's one university recommendation.

Updated 30 December 2020:

MMU has submitted additional and revised documentation that confirms the three joint NMC and university conditions are met. MMU confirm that the university condition is met.

The programme is recommended to the NMC for approval.

| Recommended outcome of the approval panel | |
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| Recommended outcome to the NMC: | <p>Programme is recommended to the NMC for approval <input type="checkbox"/></p> <p>Programme is recommended for approval subject to specific conditions being met <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p> |
| Conditions: | <p>Effective partnership working: collaboration, culture, communication and resources:</p> <p>Condition one: Produce an implementation plan, that ensures sustainable SUC involvement in the design, development, delivery and evaluation of NMC prescribing programmes. (SFNME R1.12) (NMC and university condition)</p> <p>Condition two: Develop a process to ensure that SUCs are engaged in partnership with the recruitment and selection of students undertaking NMC prescribing programmes. (SFNME R2.7) (NMC and university condition)</p> <p>Selection, admission and progression: None identified.</p> <p>Practice learning: None identified.</p> <p>Assessment, fitness for practice and award:</p> |

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| | <p>Condition three: Ensure that student facing documentation informs students that they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice. (SPP R5.4) (NMC and university condition)</p> <p>Education governance: management and quality assurance: Condition four: To meet the conditions of NMC approval, these are to be considered as joint conditions of approval between the NMC and the university's programme enhancement, approval and review. (University condition)</p> |
| <p>Date condition(s) to be met:</p> | <p>5 February 2021</p> |
| <p>Recommendations to enhance the programme delivery:</p> | <p>Recommendation one: Consider documenting a formal process in the eventuality that the same person fulfils the role of practice supervisor and practice assessor. (SSSA R7.10; SPP R4.5)</p> <p>Recommendation two: Add a link to student facing and educator facing documentation to the new north west (NW) raising concerns policy. (SFNME R1.5; SPP R4.1)</p> <p>Recommendation three: Produce a list for prospective applicants to clarify the roles and responsibilities of practice supervisors, practice assessors, academic assessors and designated prescribing practitioners (DPPs). (SFNME R2.4; SSSA R7.11; SPP R1.3) (NMC and university recommendation)</p> <p>Recommendation four: Review ongoing resource requirements, particularly in relation to computer facilities, in light of the projected growth in student numbers. (SFNME R2.14) (NMC and university recommendation)</p> <p>Recommendation five: Consider revising practice assessment documentation to allow academic assessors to transparently and collaboratively record decisions with practice assessors in relation to</p> |

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| | <p>student conduct, proficiency, achievement and recommendations for progression. (SSSA R9.2; SPP R4.1) (NMC and university recommendation)</p> <p>Recommendation six: Review the documentation with reference to spelling, grammar and typographical errors and consistency and accuracy across the documentation. (University recommendation)</p> |
| Focused areas for future monitoring: | Ongoing SUC involvement in NMC approved prescribing programmes. |

| Programme is recommended for approval subject to specific conditions being met | |
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| Commentary post review of evidence against conditions | |
| <p>Additional and revised copies of the programme documentation provide evidence that the conditions are met.</p> <p>An implementation plan demonstrates how SUC involvement will be embedded into the prescribing programme. Condition one is met.</p> <p>A recruitment process plan demonstrates how SUCs will be involved in the recruitment and selection of students undertaking the prescribing programme. Condition two is met.</p> <p>Revised V100 and V300 student handbooks clearly details for students that they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice. Condition three is met.</p> <p>Th university condition is met.</p> | |
| AEI Observations | Observations have been made by the education institution YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| Summary of observations made, if applicable | <p>Page 3 - The V100 is an integrated part of the SCPHN only.</p> <p>Page 14 - Typographical error.</p> <p>Page 17 - The statement that the clinical assessment tool (CAT) is mapped to the RPS competency framework not accurate. The CAT includes the RPS competency framework.</p> |
| Final recommendation made to NMC: | <p>Programme is recommended to the NMC for approval <input checked="" type="checkbox"/></p> <p>Recommended to refuse approval of the programme <input type="checkbox"/></p> |

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| Date condition(s) met: | 30 December 2020 |
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Section three

| NMC Programme standards |
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| <p>Please refer to NMC standards reference points Standards for prescribing programmes (NMC, 2018) Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers) (NMC, 2018) Standards framework for nursing and midwifery education (NMC, 2018) Standards for student supervision and assessment (NMC, 2018) The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates (NMC, 2015 updated 2018) Quality assurance framework for nursing, midwifery and nursing associate education (NMC, 2020) QA Handbook (NMC, 2020)</p> |

| Partnerships |
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| <p>The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.</p> |
| <p>Please refer to the following NMC standards reference points for this section:</p> <p>Standards framework for nursing and midwifery education (NMC, 2018)</p> <p>Standard 1: The learning culture: R1.12 ensure programmes are designed, developed, delivered, evaluated and co-produced with service users and other stakeholders R1.13 work with service providers to demonstrate and promote inter-professional learning and working</p> <p>Standard 2: Educational governance and quality: R2.2 all learning environments optimise safety and quality taking account of the diverse needs of, and working in partnership with, service users, students and all other stakeholders R2.4 comply with NMC Standards for student supervision and assessment R2.5 adopt a partnership approach with shared responsibility for theory and practice supervision, learning and assessment, including clear lines of communication and accountability for the development, delivery, quality assurance and evaluation of their programmes</p> |

R2.6 ensure that recruitment and selection of students is open, fair and transparent and includes measures to understand and address underrepresentation

R2.7 ensure that service users and representatives from relevant stakeholder groups are engaged in partnership in student recruitment and selection

Standard 3: Student empowerment:

R3.3 have opportunities throughout their programme to work with and learn from a range of people in a variety of practice placements, preparing them to provide care to people with diverse needs

R3.16 have opportunities throughout their programme to collaborate and learn with and from other professionals, to learn with and from peers, and to develop supervision and leadership skills

R3.17 receive constructive feedback throughout the programme from stakeholders with experience of the programme to promote and encourage reflective learning

R3.18 have opportunities throughout their programme to give feedback on the quality of all aspects of their support and supervision in both theory and practice.

Standard 4: Educators and assessors:

R4.7 liaise and collaborate with colleagues and partner organisations in their approach to supervision and assessment

R4.9 receive and act upon constructive feedback from students and the people they engage with to enhance the effectiveness of their teaching, supervision and assessment

R4.10 share effective practice and learn from others

Standard 5: Curricula and assessment:

R5.4 curricula are developed and evaluated by suitably experienced and qualified educators and practitioners who are accountable for ensuring that the curriculum incorporates relevant programme outcomes

R5.5 curricula are co-produced with stakeholders who have experience relevant to the programme

R5.14 a range of people including service users contribute to student assessment

[Standards for student supervision and assessment](#) (NMC, 2018)

Standard 1: Organisation of practice learning:

R1.4 there are suitable systems, processes, resources and individuals in place to ensure safe and effective coordination of learning within practice learning environments

R1.7 students are empowered to be proactive and to take responsibility for their learning

R1.8 students have opportunities to learn from a range of relevant people in practice learning environments, including service users, registered and non-registered individuals, and other students as appropriate

Standard 2: Expectations of practice supervisors:

R2.2 there is support and oversight of practice supervision to ensure safe and effective learning

Standard 3: Practice supervisors: role and responsibilities:

R3.3 support and supervise students, providing feedback on their progress towards, and achievement of, proficiencies and skills

Standard 4: Practice supervisors: contribution to assessment and progression:

R4.3 have sufficient opportunities to engage with practice assessors and academic assessors to share relevant observations on the conduct, proficiency and achievement of the students they are supervising

Standard 7: Practice assessors: responsibilities:

R7.9 communication and collaboration between practice and academic assessors is scheduled for relevant points in programme structure and student progression

Standard 9: Academic assessors: responsibilities:

R9.6 communication and collaboration between academic and practice assessors is scheduled for relevant points in programme structure and student progression

Findings against the standard and requirements

Provide an evaluative summary about the effectiveness of the partnerships between the AEI and their practice learning partners, service users, students and any other stakeholders.

Documentary evidence and discussion at the approval visit confirms there's effective partnership working between PLPs, students and MMU in the development of the programme. PLPs tell us that they've contributed to the development of the programme. Students who attended the approval visit tell us that they haven't contributed to programme development. Documentary evidence and feedback from the programme team confirms clear evidence of student involvement in curriculum development. SUCs have had some limited involvement in the curriculum development process.

There's evidence of partnership working at strategic and operational levels. MMU are part of the north west non-medical prescribing (NMP) education group (NWNMPEG) and the NW collaboration. Programme development has been informed by the NWNMPEG. This regional forum for prescribing education providers and other stakeholders discusses issues affecting commissioning, training and ongoing support of NMPs. MMU is part of a NW AEI NMP collaboration. This includes eleven AEIs who work in partnership; an example of this collaborative working is the development of a shared NMP application form.

Documentary evidence and PLPs tell us they've contributed to the implementation of the SSSA. They tell us that they've fully engaged in the consultation and co-

production of the programme. PLPs tell us that there's effective communication with the V100 and V300 programme teams. The criteria for practice assessors and practice supervisors is detailed in the prescribing application form. This process requires confirmation by the supporting PLP organisation and signatories supporting supervision and assessment availability in practice learning environments. This process is also evidenced for non-NHS and self-employed practitioners. PLPs confirm a commitment to release practitioners to prepare them to undertake the role of practice assessors and practice supervisors.

PLPs tell us that they value the period of supervised practice and agree to students spending time with experienced nurse prescribers and medical practitioners who act as practice assessors and practice supervisors. They confirm this enables effective team working. The programme team and PLPs confirm that there's an increase in demand for all prescribing programmes and that cohort sizes are increasing. The programme team tell us that information technology (IT) facilities on campus need to be increased to meet student demand. In light of this projected growth in student numbers, it's recommended that MMU and the programme teams review the ongoing resource, particularly in relation to computer facilities. (Recommendation four)

Students tell us that the programme supports the development and expansion of clinical roles. They confirm they're very satisfied with the delivery and organisation of the programme. Documentary evidence and discussion at the approval visit confirm student feedback has influenced the development of the current programme. Students tell us that their experience of the programme is positive, they're complimentary about the pastoral and academic support received during the programme. Students commend the programme leaders for the support they provide.

Documentary evidence and discussion at the approval visit confirm that there's some SUC involvement in the development of the programme. The inclusion of SUCs in the development of the programme is evident in minutes of some of the curriculum development group meetings. The SUC representative at the approval visit tells us that they've attended one curriculum development meeting. The faculty SUC group is temporarily not operational, SUCs from a focus in involvement company are currently supporting programmes across the faculty. The programme teams tell us that the faculty specific group will be reformed in January 2021. The faculty SUC strategy confirms a commitment to SUC involvement in NMC programmes. SUC feedback is an integral element of the V100 and V300 CAT. Students are required to obtain SUC feedback as part of their practice assessment. The SUC representative at the approval visit tells us that they would welcome more involvement in the V100 and V300 programmes. There's limited evidence of further SUC involvement in the design, development, delivery, and evaluation of the prescribing programmes. (Condition one)

The SUC representative tells us that they're not involved in the recruitment or selection of prescribing applicants. They confirm a willingness to participate in the

recruitment and selection process. There's no documentary evidence of involvement of SUCs in the recruitment and selection process. (Condition two)

A commitment to interprofessional learning is evident within V100 and V300 programme documentation. Students have the opportunity to learn from, with and about other prescribers including pharmacists and a number of AHPs in both theory and practice settings. Students we met at the approval visit describe these opportunities, which include being taught by practitioners from other professions and learning from other students from multi-professional backgrounds.

Assurance is provided that the AEI works in partnership with their practice learning partners, service users, students and all other stakeholders as identified in Gateway 1: [Standards framework for nursing and midwifery education](#)

MET **NOT MET**

Documentary analysis and discussion at the approval visit confirm that there's limited involvement of SUCs within the programmes.

Condition one: Produce an implementation plan, that ensures sustainable SUC involvement in the design, development, delivery and evaluation of NMC prescribing programmes. (SFNME R1.12)

Documentary analysis and discussion at the approval visit confirms that SUCs don't contribute to student recruitment and selection.

Condition two: Develop a process to ensure that SUCs are engaged in partnership with the recruitment and selection of students undertaking NMC prescribing programmes. (SFNME R2.7)

Gateway 2: [Standards for student supervision and assessment](#)

MET **NOT MET**

Post event review

Identify how the condition(s) is met

Condition one: The programme team have developed an implementation plan to demonstrate how SUC involvement will be embedded into the programmes.

Evidence:

Implementation plan, SUCs involvement in the programmes, undated

Condition one is met.

Condition two: The programme team have developed a process to demonstrate how SUCs are involved in the recruitment and selection of students undertaking NMC prescribing programmes.

Evidence:

Recruitment process plan, SUC involvement in recruitment and selection, undated

Condition two is met.

Date condition(s) met: 30 December 2020

Revised outcome after condition(s) met **MET** **NOT MET**

Student journey through the programme

Standard 1: Selection, admission and progression

Approved education institutions, together with practice learning partners, must:

R1.1 ensure that the applicant is a registered nurse (level 1), a registered midwife or a SCPHN before being considered as eligible to apply for entry onto an NMC approved prescribing programme

R1.2 provide opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non- NHS employed registrants) to apply for entry onto an NMC approved prescribing programme

R1.3 confirm that the necessary governance structures are in place (including clinical support, access to protected learning time and employer support where appropriate) to enable students to undertake, and be adequately supported throughout, the programme

R1.4 consider recognition of prior learning that is capable of being mapped to the [RPS Competency Framework for all Prescribers](#)

R1.5 confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme

R1.6 confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas:

R1.6.1 Clinical/health assessment

R1.6.2 Diagnostics/care management

R1.6.3 Planning and evaluation of care

R1.7 ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme

Note: Education institutions and their practice learning partners may propose to transfer current students onto the new programme to meet the [Standards for prescribing programmes](#) and [Standards of proficiency for nurse and midwife prescriber \(adoption of the RPS Competency Framework for all Prescribers\)](#). If so, evidence must be provided to support this proposed transfer as part of the education institution’s mapping process at Gateway 3.

Proposed transfer of current students to the programme under review
Demonstrate a robust process to transfer current students onto the proposed programme to ensure programme learning outcomes and proficiencies meet the [Standards for pre-registration midwifery programmes](#) (NMC, 2019).

Proposed transfer of current students to the [Standards for student supervision and assessment](#) (NMC, 2018).
Demonstrate a robust process to transfer current students onto the [Standards for student supervision and assessment](#) (NMC, 2018).

Findings against the standard and requirements

Evidence provides assurance that the following QA approval criteria are met:

- Evidence of processes to ensure that the applicant is a registered nurse (level 1), a registered midwife or a SCPHN before being considered as eligible to apply for entry onto an NMC approved prescribing programme (R1.1)

YES NO

- Evidence of selection process that demonstrates opportunities that enable all nurse (level 1), midwife or SCPHN registrants (including NHS, self-employed or non-NHS employed registrants) to apply for entry onto an NMC approved prescribing programme. Evidence of this statement in documentation such as: programme specification; module descriptor, marketing material. Evidence of this statement on university web pages (R1.2)

YES NO

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

- Evidence that the necessary governance structures are in place (including clinical support, access to protected learning time and employer support where appropriate) to enable students to undertake, and be adequately supported throughout, the programme (R1.3)

MET NOT MET

R1.3 is met. V100 and V300 programme documentation clearly describes how selection, admission and progression are managed. The entry criteria reflect NMC requirements and are clearly set out in the application form. Applicants, their line managers and nominated practice assessors are required to provide assurance that the necessary governance frameworks are in place to ensure that students are provided with protected learning time and adequate practice supervision. Non-NHS and self-employed applicants must provide additional information on the application form relating to entry criteria that are usually signed off by an NHS manager and NMP lead. This information includes the provision of a minimum of one professional reference from a registrant who has a valid professional regulatory and statutory body qualification. Details of their anticipated prescribing role on completion of the programme, including conditions for which they intend to prescribe and the clinical governance processes that will be employed to support the safety of their prescribing must be provided.

The V300 programme lead is part of the greater Manchester (GM) partnership NMP group and NWNMPEG. These groups oversee governance and quality assurance of NMP provision across the region. The application form includes declarations from managers and NMP leads that applicants will be supported during the programme. Students undertaking the SCPHN and SPQ programme are funded by Health Education England (HEE) and supported through their employing organisations to undertake the programmes. They're interviewed as part of the wider programme recruitment, governance arrangements for practice learning are applied to these programmes. SPQ DN applicants must meet the requirements of the V300 application process.

Students confirm that they're supported by DPPs who are identified as practice assessors in practice assessor and student facing documentation. Some students tell us that at application to the programme, they weren't clear about practice assessor and practice supervisor roles. The programme team are advised to produce a list for prospective applicants to clarify the roles and responsibilities of practice assessors, practice supervisors, academic assessors and DPPs at the point of application to the programmes. (Recommendation three)

Students are assigned an MMU based personal tutor to provide support for theoretical and personal issues that may affect student experience and progress. PLPs and the teaching teams describe how they work in partnership to ensure that V100 and V300 students are appropriately supported and have access to protected learning time. PLPs describe how student line managers and organisational NMP leads work together to identify appropriate practice assessors and practice supervisors. They describe how they are able to respond in partnership to concerns raised by students about protected time. They tell us how the tripartite relationship between practice assessors, practice supervisors and academic assessors operates to ensure this. They describe their confidence in the partnership response to any concerns raised. Students tell us that it can sometimes be challenging to ensure protected learning time but if they have concerns about this, they know how to raise this with both their employer and

MMU. They tell us that whilst they have not needed to raise a concern, they describe examples of when students had done so and that their concerns were responded to appropriately.

Evidence provides assurance that the following QA approval criteria are met:

- Processes are in place to consider recognition of prior learning that is capable of being mapped to the RPS *Competency Framework for all Prescribers* (R1.4)

YES NO
- Processes are in place to confirm on entry that any applicant selected to undertake a prescribing programme has the competence, experience and academic ability to study at the level required for that programme (R1.5)

YES NO
- Processes are in place to confirm that the applicant is capable of safe and effective practice at a level of proficiency appropriate to the programme to be undertaken and their intended area of prescribing practice in the following areas (R1.6):

 - Clinical/health assessment
 - Diagnostics/care management
 - Planning and evaluation

YES NO
- Processes are in place to ensure that applicants for V300 supplementary/independent prescribing programmes have been registered with the NMC for a minimum of one year prior to application for entry onto the programme (R1.7)

YES NO

Proposed transfer of current students to the programme under review

From your documentary analysis and your meeting with students, provide an evaluative summary to confirm how the Standards for prescribing programmes and Standards of proficiency for nurse and midwife prescriber (adoption of the RPS Competency Framework for all Prescribers) will be met through the transfer of existing students onto the proposed programme.

There are no current students transferring to the proposed programmes.

Proposed transfer of current students to the Standards for student supervision and assessment (SSSA) (NMC, 2018).

From your documentary analysis and your meetings at the approval visit confirm if students will be transferring to the SSSA, and if so that they have informed choice and are fully prepared for supervision and assessment.

The programmes have transferred to the SSSA. A major modification to the V300 programme was approved by the NMC on 3 January 2020. The V100 programme

transferred to the SSSA after a major modification to the SPQ DN programme was approved by the NMC on 1 October 2019. The transfer to the SSSA was adopted regionally by AElS across the GM partnership.

Assurance is provided that Gateway 1: [Standards framework for nursing and midwifery education](#) relevant to selection, admission and progression are met

YES NO

Outcome

Is the standard met?

MET NOT MET

Date: 7 December 2020

Post event review

Identify how the condition(s) is met:

N/A

Date condition(s) met:

N/A

Revised outcome after condition(s) met:

MET NOT MET

N/A

Standard 2: Curriculum

Approved educations institutions, together with practice learning partners, must:

R2.1 ensure programmes comply with the NMC *Standards framework for nursing and midwifery education*

R2.2 ensure that all prescribing programmes are designed to fully deliver the competencies set out in the RPS *A Competency Framework for all Prescribers*, as necessary for safe and effective prescribing practice

R2.3 state the learning and teaching strategies that will be used to support achievement of those competencies

R2.4 develop programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice:

R2.4.1 stating the general and professional content necessary to meet the programme outcomes

R2.4.2 stating the prescribing specific content necessary to meet the programme outcomes

R2.4.3 confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing

R2.5 ensure that the curriculum provides a balance of theory and practice learning, using a range of learning and teaching strategies

R2.6 ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language

Findings against the standard and requirements

Evidence provides assurance that the following QA approval criteria are met:

- There is evidence that the programme complies with the NMC Standards framework for nursing and midwifery education (R2.1)

YES NO

- There is evidence that the programme is designed to fully deliver the competencies set out in the RPS *Competency Framework for all Prescribers*, as necessary for safe and effective prescribing practice (R2.2).

YES NO

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

- Evidence of the learning and teaching strategies that will be used to support achievement of those competencies (R2.3)

MET NOT MET

R2.3 is met. V100 and V300 students apply continued professional development across practice learning; they're required to reflect on this in the CAT. The programme unit of learning specifications identify a range of learning and teaching strategies used to support students in achieving the RPS competencies. Achievement of the RPS competencies is evidenced in the CAT. Learning and teaching strategies include blended learning, e-learning, lectures, presentations, directed study, tutorials, and independent study. This is in addition to practice learning. Students have access to the MMU virtual learning environment (VLE) Moodle and to the health and education cooperative (HE coop) e-learning site. The VLE supports the blended learning approach.

Students confirm that teaching and online resources support learning. They tell us about the effective support they receive from the programme teams, they tell us the support from the programme leader and academic staff is excellent and they commend the level of support they receive. They tell us that they have sound learning experience. They confirm that the learning and teaching strategies prepare them effectively for prescribing practice and that there's clear communication between PLPs, the programme team, practice assessors and practice supervisors. The programme team confirm that there's a range of teaching staff from a variety of clinical backgrounds who contribute to the delivery of the programmes. Students have access to a dedicated numeracy support officer who supports them with the numeracy element of the programmes. Students have access to an online interactive numeracy tool supporting further development of numeracy skills. Students tell us that this is useful as they're able to practise numeracy questions in preparation for the summative examination.

Evidence provides assurance that the following QA approval criteria are met:

- Evidence of programme outcomes that inform learning in relation to the formulary relevant to the individual's intended scope of prescribing practice (R2.4):
 - stating the general and professional content necessary to meet the programme outcomes
 - stating the prescribing specific content necessary to meet the programme outcomes
 - confirming that the programme outcomes can be applied to all parts of the NMC register: the four fields of nursing practice (adult, mental health, learning disabilities and children's nursing); midwifery; and specialist community public health nursing

YES NO

- The programme structure demonstrates an equal balance of theory and practice learning. This is detailed in the designated hours in the module descriptors and practice learning allocations. A range of learning and teaching strategies are detailed in the programme specification, programme handbook and module descriptors with theory / practice balance detailed at each part of the programme and at end point. There are appropriate module aims, descriptors and outcomes specified. (R2.5)

YES NO

If relevant to the review

- Evidence to ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language. (R2.6)

YES NO N/A

The programme is delivered in England.

Assurance is provided that Gateway 1: [Standards framework for nursing and midwifery education](#) relevant to curricula and assessment are met

YES NO

Assurance is provided that Gateway 2: [Standards for student supervision and assessment](#) relevant to curricula are met

YES NO

Outcome

Is the standard met?

MET NOT MET

Date: 7 December 2020

Post event review

Identify how the condition(s) is met:

N/A

Date condition(s) met:

N/A

| | | |
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| Revised outcome after condition(s) met: N/A | MET <input type="checkbox"/> | NOT MET <input type="checkbox"/> |
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Standard 3: Practice learning

Approved education institutions must:

R3.1 ensure that suitable and effective arrangements and governance for practice learning are in place for all applicants including arrangements specifically tailored to those applicants who are self-employed

Approved education institutions, together with practice learning partners, must:

R3.2 ensure that practice learning complies with the NMC [Standards for student supervision and assessment](#)

R3.3 ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment

R3.4 ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC [Standards for student supervision and assessment](#)

Findings against the standard and requirements

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

- Evidence to ensure that suitable and effective arrangements and governance for practice learning are in place for all applicants including arrangements specifically tailored to those applicants who are self-employed (R3.1)

MET NOT MET

R3.1 is met. There's evidence that robust governance arrangements are in place for practice learning environments and for all applicants. The majority of students on the programmes are NHS employees. Information provided in the application form for NHS applicants is checked, confirmed and signed by the applicant's manager and organisational NMP lead. Non-NHS and self-employed applicants must complete a separate section of the application form. This ensures that governance arrangements are included and checked at application stage. MMU requires applicants applying as self-employed and independent practitioners to provide evidence of a satisfactory enhanced Disclosure and Barring Service (DBS) check, obtained within three years of the programme start date. All self-employed and non-NHS employees must evidence they meet all the additional application requirements.

Practice learning environments including those which support self-employed and non-NHS students are audited through a process of educational audit. This

ensures the required governance arrangements for practice learning are in place for a safe and quality practice learning experience.

Evidence provides assurance that the following QA approval criteria are met:

- There is evidence that the programme complies with the NMC standards for student supervision and assessment (R3.2)

YES NO

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

- Evidence to ensure technology enhanced and simulation-based learning opportunities are used effectively and proportionately to support learning and assessment (R3.3)

MET NOT MET

R3.3 is met. The programmes are designed with a blended learning approach for the theoretical content. In addition to the VLE Moodle students have access to prescribing specific e-learning via the HE coop. Students use the electronic British National Formulary (BNF) online, and access this during the online pharmacology examination. Students have access to an online numeracy tool specifically designed to support prescribing students. MMU provide students with access to the H5P interactive plug-in linked to Moodle. H5P enables students to view 360-degree videos including a 'walk through' the BNF, quizzes and prescribing specific interactive learning resources. A range of simulation is used including prescribing case studies and patient stories using electronic media. Simulated activities further support the development of skills including prescribing consultation and assessment and prescription writing.

Evidence provides assurance that the following QA approval criteria are met:

- Processes are in place to ensure that students work in partnership with the education provider and their practice learning partners to arrange supervision and assessment that complies with the NMC *Standards for student supervision and assessment* (R3.4)

YES NO

Assurance is provided that Gateway 1: [Standards framework for nursing and midwifery education](#) relevant to practice learning are met

YES NO

Assurance is provided that Gateway 2: [Standards for student supervision and assessment](#) relevant to practice learning are met

| | | |
|--|---|----------------------------------|
| | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> |
| Outcome | | |
| Is the standard met? | MET <input checked="" type="checkbox"/> | NOT MET <input type="checkbox"/> |
| Date: 7 December 2020 | | |
| Post event review | | |
| Identify how the condition(s) is met: N/A | | |
| Date condition(s) met: N/A | | |
| Revised outcome after condition(s) met: | MET <input type="checkbox"/> | NOT MET <input type="checkbox"/> |
| N/A | | |

| |
|---|
| Standard 4: Supervision and assessment |
| <p>Approved education institutions, together with practice learning partners, must:</p> <p>R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC Standards framework for nursing and midwifery education</p> <p>R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC Standards for student supervision and assessment</p> <p>R4.3 appoint a programme leader in accordance with the requirements of the NMC Standards framework for nursing and midwifery education. The programme leader of a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience</p> <p>R4.4 ensure the programme leader works in conjunction with the lead midwife for education (LME) and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes</p> <p>R4.5 ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking</p> <p>R4.5.1 In exceptional circumstances, the same person may fulfil the role of practice supervisor and practice assessor for that part of the programme where the prescribing student is undergoing training in a practice learning setting. In such instances, the student, practice supervisor/assessor and the AEI will need to evidence why it was necessary for the practice supervisor and assessor roles to be carried out by the same person</p> <p>R4.6 ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable equivalent qualifications for the programme the student is undertaking</p> <p>R4.7 provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes</p> <p>R4.8 assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice</p> |

R4.9 ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies. This includes all students:
R4.9.1 successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80 percent), and
R4.9.2 successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100 percent)

Findings against the standards and requirements

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

- There is evidence of how the programme will ensure how support, supervision, learning and assessment provided complies with the NMC [Standards framework for nursing and midwifery education](#) (R4.1)

MET **NOT MET**

R4.1 is met. Documentary evidence details the roles of practice assessors, practice supervisors and academic assessors in supporting supervision, learning and assessment. Effective support by the programme team and PLPs is integral to the V100 and V300 programmes.

A learning contract that details an initial, interim and final review meeting is scheduled and recorded in programme documentation demonstrating when students are expected to meet with practice assessors and practice supervisors. Practice assessors and practice supervisors support students to reflect and comment on their development and self-assessment of learning needs. Practice assessors are responsible for assessing a learning agreement, completion of intended learning outcomes and commenting on progress and performance. The V100 and V300 CAT enables practice supervisors to record observations which contribute to the conduct, proficiency and achievement of the RPS competencies. A written record is made in the CAT of supervisory support given by practice assessors and practice supervisors. Practice assessors undertake the final overall statement of RPS prescribing competence sign off and achievement of 90 practice hours. There's a section in the CAT for academic assessors to confirm achievement of the RPS competencies.

Discussion at the approval visit confirms that nominated academic assessors are MMU V100 and V300 programme team members who also support student theoretical learning. Academic assessors work in partnership with practice assessors and practice supervisors to collate decisions about practice learning progress. The programme team tell us that communication between academic assessors and practice assessors is undertaken outside of the practice

documentation by email or Microsoft forms. Whilst it's clear that academic assessors confirm achievement of the RPS competencies in the CAT it's recommended that the programme team consider revising practice assessment documentation to allow academic assessors to transparently and collaboratively record decisions with practice assessors in relation to student conduct, proficiency, achievement and recommendations for progression. (Recommendation five)

Practice assessors and practice supervisors confirm that they understand the process to raise concerns about student performance; their point of contact are programme leaders. The programme team confirm that any actions or omissions constituting unsafe practice in any assessments will result in a referral.

Documentary analysis and discussion at the approval visit confirm the process for the escalation of concerns from students regarding the practice learning environment. There are robust processes between MMU and PLPs to monitor, report and act on issues raised in practice learning environments. The programme team tell us that this is supported through the recent development of a new NW concerns policy. It's recommended that the programme team add a weblink to the concerns policy in student and practice educator facing documentation. (Recommendation two)

There's a named and appropriately qualified programme leader assigned to the V100 and V300 programmes. Staff curriculum vitae confirm the programme teams have the appropriate NMC registration and prescribing qualifications.

- There is evidence of how the [Standards for student supervision and assessment](#) are applied to the programme. There are processes in place to identify the supervisors and assessors along with how they will be prepared for their roles (R4.2)

MET **NOT MET**

R4.2 is met. Documentary evidence and discussion at the approval visit confirm that there's a GM partnership approach to the adoption of the SSSA. There are processes in place to identify practice assessors, practice supervisors and academic assessors including how they'll be prepared for their roles. The programme team and PLPs confirm they work in partnership to prepare practice assessors and practice supervisors to support and assess V100 and V300 students. They receive a practice assessor and practice supervisor handbook providing information about their role and responsibilities. The programme leaders tell us there's an online resource being developed to further support clinical staff fulfilling the roles.

Appropriately qualified members of the V100 and V300 programme teams undertake the role of academic assessor. There's evidence of a commitment by MMU to support the academic assessor role. There's assurance that MMU have a robust governance framework in place to quality assure practice supervision and assessment.

Evidence provides assurance that the following QA approval criteria are met:

- Evidence of programme leader being a registered healthcare professional with appropriate knowledge, skills and experience (R4.3)
YES NO
- Evidence of the programme leader working in conjunction with the LME and the practice assessor to ensure adequate support for any midwives undertaking prescribing programmes (R4.4)
YES NO

Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance is provided that the QA approval criteria below is met or not met

- Processes are in place to ensure the student is assigned to a practice assessor who is a registered healthcare professional and an experienced prescriber with suitable equivalent qualifications for the programme the student is undertaking (R4.5)
MET NOT MET

R4.5 is met. Documentary analysis and discussion at the approval visit confirm that processes are in place to ensure students are assigned to an appropriate practice assessor who is an experienced prescriber. V100 students are supported by an experienced community nurse prescribing practice assessor. The NW NMP application process includes the SSSA requirements. The supporting application form is completed specifying the requirements of the role of practice assessors. Managers must sign to confirm that they have the support of the employing organisation to act as a practice assessor. The requirements of the role are detailed in the practice assessor and supervisor handbooks.

The programme handbooks detail information to confirm practice assessors and practice supervisors should not be the same person. The programme team tell us that there may be exceptional circumstances in some practice learning environments where the role of practice supervisor and practice assessor would need to be undertaken by the same person. The programme team tell us that this situation has occurred and was managed effectively. It's recommended that the programme teams consider formally documenting the process in the eventuality that the same person fulfils the role of practice assessor and practice supervisor. (Recommendation one)

Evidence provides assurance that the following QA approval criteria are met:

- Processes are in place to ensure the student is assigned to an academic assessor who is a registered healthcare professional with suitable

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| <p>equivalent qualifications for the programme the student is undertaking (R4.6)</p> <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> |
| <ul style="list-style-type: none"> Processes are in place to provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes (R4.7) <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> |
| <ul style="list-style-type: none"> Processes are in place to assess the student's suitability for award based on the successful completion of a period of practice-based learning relevant to their field of prescribing practice (R4.8) <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> |
| <ul style="list-style-type: none"> Processes are in place to ensure that all programme learning outcomes are met, addressing all areas necessary to meet the RPS competencies (R4.9). This includes: <ul style="list-style-type: none"> - successfully passing a pharmacology exam (the pharmacology exam must be passed with a minimum score of 80%), and - successfully passing a numeracy assessment related to prescribing and calculation of medicines (the numeracy assessment must be passed with a score of 100%). <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> |
| <p>Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to supervision and assessment are met</p> <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> |
| <p>Assurance is provided that Gateway 2: Standards for student supervision and assessment relevant to supervision and assessment are met</p> <p style="text-align: right;">YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> |
| <p>Outcome</p> |
| <p>Is the standard met? MET <input checked="" type="checkbox"/> NOT MET <input type="checkbox"/></p> <p>Date: 7 December 2020</p> |
| <p>Post event review</p> |
| <p>Identify how the condition(s) is met: N/A</p> |
| <p>Date condition(s) met: N/A</p> |
| <p>Revised outcome after condition(s) met: MET <input type="checkbox"/> NOT MET <input type="checkbox"/></p> <p>N/A</p> |

Standard 5: Qualification to be awarded

Approved education institutions, together with practice learning partners, must:

R5.1 following successful completion of an NMC approved programme of preparation, confirm that the registered nurse (level 1), midwife or SCPHN is eligible to be recorded as a prescriber, in either or both categories of:

R5.1.1 a community practitioner nurse or midwife prescriber (V100/V150), or

R5.1.2 a nurse or midwife independent/supplementary prescriber (V300)

R5.2 ensure that participation in and successful completion of an NMC approved prescribing programme leads to accreditation at a level equivalent to a bachelor's degree as a minimum award

R5.3 inform the student that the award must be registered with us within five years of successfully completing the programme and if they fail to do so they will have to retake and successfully complete the programme in order to qualify and register their award as a prescriber

R5.4 inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice

Findings against the standards and requirements

Evidence provides assurance that the following QA approval criteria are met:

- Processes are in place to ensure following successful completion of an NMC approved programme of preparation, confirm that the registered nurse (level 1), midwife or SCPHN is eligible to be recorded as a prescriber, in either or both categories of:
 - a community practitioner nurse (or midwife) prescriber (V100/V150), or
 - a nurse or midwife independent/supplementary prescriber (V300) (R5.1)

YES NO

- Evidence to ensure that successful participation in and completion of an NMC approved prescribing programme leads to accreditation at a level equivalent to a bachelor's degree as a minimum award (R5.2)

YES NO

- Processes are in place to inform the student that the award must be registered with the NMC within five years of successfully completing the programme and if they fail to do so they will have to retake and successfully complete the programme in order to qualify and register their award as a prescriber (R5.3)

YES NO

- Processes are in place to inform the student that they may only prescribe once their prescribing qualification has been annotated on the NMC register and they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice (R5.4)

YES NO

R5.4 is not met. The V100 and V300 unit specifications state that students may only prescribe once their prescribing qualification has been annotated on the NMC register. The guides don't inform students that they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice. The programme team must ensure student facing documentation informs students that they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice. (Condition three)

Assurance is provided that the [Standards framework for nursing and midwifery education](#) relevant to the qualification to be awarded are met

YES NO

Student facing documentation doesn't detail for students that they may only prescribe from the formulary they are qualified to prescribe from. They're not informed they must prescribe within competence and scope of practice.

Outcome

Is the standard met?

MET NOT MET

Student facing documentation doesn't detail for students that they may only prescribe from the formulary they are qualified to prescribe from. They're not informed they must prescribe within competence and scope of practice.

Condition three: Ensure that student facing documentation informs students that they may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice. (SPP R5.4)

Date: 7 December 2020

Post event review

Identify how the condition(s) is met:

Condition three: Revised V100 and V300 student handbooks clearly detail that students may only prescribe from the formulary they are qualified to prescribe from and within their competence and scope of practice. Condition three is met.

Evidence:

Revised, V100 student handbook, 2021-2022

Revised, V300 student handbook, 2021-2022

Date condition(s) met: 30 December 2020

Revised outcome after condition(s) met:

MET

NOT MET

Section four

Sources of evidence

The following documentation provided by the AEI/education institution was reviewed by the visitor(s):

| Key documentation | YES | NO |
|--|-------------------------------------|-------------------------------------|
| Programme document, including proposal, rationale and consultation | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Programme specification(s) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Module descriptors | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Student facing documentation including: programme handbook | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Student university handbook | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Practice assessment documentation | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Practice placement handbook | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| PAD linked to competence outcomes, and mapped against RPS <i>A Competency Framework for all Prescribers</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC, 2018) (Gateway 1) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Mapping document providing evidence of how the <i>Standards for student supervision and assessment</i> (NMC, 2018) apply to the programme(s) (Gateway 2) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Mapping document providing evidence of how the programme meets the <i>Standards for prescribing programmes</i> and RPS <i>Standards of proficiency for prescribers</i> (NMC, 2018) (Gateway 3) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Curricula vitae for relevant staff | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Written placement agreements between the education institution and associated practice learning partners to support the programme intentions. | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If you stated no above, please provide the reason and mitigation The AEI consider the prescribing courses to be units as opposed to programmes of study. | | |
| List additional documentation: | | |
| Post visit documentation: Implementation plan, SUCs involvement in the programmes, undated | | |

| |
|---|
| Recruitment process plan, SUC involvement in recruitment and selection, undated Revised, V100 student handbook, 2021-2022 Revised, V300 student handbook, 2021-2022 Minutes of the approval visit, confirmed and signed by the chair, 20 January 2021 Additional comments: None identified. |
|---|

During the event the visitor(s) met the following groups:

| | YES | NO |
|--|-------------------------------------|-------------------------------------|
| Senior managers of the AEI/education institution with responsibility for resources for the programme | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Senior managers from associated practice learning partners with responsibility for resources for the programme | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Programme team/academic assessors | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Practice leads/practice supervisors/ practice assessors | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Students | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If yes, please identify cohort year/programme of study: V300, 2020 x two V300, 2019 x one V100, 2020 x one | | |
| Service users and carers | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If you stated no above, please provide the reason and mitigation MMU is an established AEI, a resource check is not required. | | |
| Additional comments None identified. | | |

The visitor(s) viewed the following areas/facilities during the event:

| | YES | NO |
|---|-------------------------------------|-------------------------------------|
| Specialist teaching accommodation (e.g. clinical skills/simulation suites) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Library facilities | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Technology enhanced learning Virtual learning environment | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Educational audit tools/documentation | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Practice learning environments | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes, state where visited/findings | | |
| If you stated no above, please provide the reason and mitigation This is an established AEI and visits to facilities weren't needed. | | |

Additional comments:
None identified.

Mott MacDonald Group Disclaimer

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We accept no responsibility for the consequences of this document being relied upon by any other party, or being used for any other purpose, or containing any error or omission which is due to an error or omission in data supplied to us by other parties.

Issue record

Final Report

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|---------------|-------------------|-------|------------------|
| Author(s): | Nikki Welyczko | Date: | 8 December 2020 |
| Checked by: | Bernadette Martin | Date: | 22 December 2020 |
| Submitted by: | Lucy Percival | Date: | 17 February 2021 |
| Approved by: | Emiko Hughes | Date: | 17 February 2021 |