

Programme approval visit report

Section one

Programme provider name:	University of Suffolk
In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i>	East Suffolk and North Essex NHS Foundation Trust West Suffolk Hospital NHS Foundation Trust Norfolk and Suffolk NHS Foundation Trust NHS Ipswich and East Suffolk CCG NHS Norfolk and Waveney CCG Private, voluntary and independent health care providers
Programmes reviewed:	Independent and supplementary nurse prescribing V300 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V150 <input checked="" type="checkbox"/> Community practitioner nurse prescribing V100 <input checked="" type="checkbox"/>
Title of programme(s):	Non-medical independent and supplementary prescribing (V300) Community practitioner nurse prescribing (V150) Community practitioner nurse prescribing (V100)
Academic level:	
Independent and supplementary nurse prescribing V300	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input checked="" 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 checked="" 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

<p>Community practitioner nurse prescribing V100</p>	<p>England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7</p> <p>SCQF <input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11</p>
<p>Date of approval visit:</p>	<p>8 September 2020</p>
<p>Programme start date:</p> <p>Independent and supplementary nurse prescribing V300</p> <p>Community practitioner nurse prescribing V150</p> <p>Community practitioner nurse prescribing V100</p>	<p><input type="text" value="7 January 2021"/></p> <p><input type="text" value="7 January 2021"/></p> <p><input type="text" value="7 January 2021"/></p>
<p>QA visitor:</p>	<p>Registrant Visitor: Dianne Bowskill</p>

Section two

Summary of review and findings

The University of Suffolk (the university) is an approved education institution (AEI). The school of health sciences (the school) is experienced in delivering prescribing programmes. The school presents the independent and supplementary nurse prescribing (V300) and the community practitioner prescribing (V100 and V150) preparation programmes for 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, 2016) competency framework for all prescribers) (NMC, 2018).

The V100 programme is a non-accredited academic level six optional module. It's undertaken by health visiting and school nursing students studying the postgraduate specialist community public health nursing (SCPHN) programme.

The V150 programme is a stand-alone module at academic level six. It's delivered once a year over 12 weeks. Learning is shared with students undertaking the V300 programme.

The V300 programme is a stand-alone module delivered at academic levels six and seven. It's delivered twice a year, over 26 weeks with a practice learning requirement of 78 hours. The academic level seven module is integrated in the postgraduate specialist practitioner qualification district nursing (SPQ DN) programme. It's accessed by students undertaking the MSc advanced healthcare practice. The academic level six module is integrated in the BSc (Hons) SPQ DN programme.

Documentary evidence and the approval visit confirms there's effective partnership working between the school and practice learning partners (PLPs). There's evidence of strategic and operational partnership with PLPs who've engaged in the development of the programmes. This collaborative approach includes the development of practice assessor and practice supervisor preparation.

The V300 programme team have adopted the designated prescribing practitioner (DPP) (RPS, 2019) title. Programme documentation clearly demonstrates that the roles and responsibilities of the DPP reflect those of practice assessors and practice supervisors. V100 and V150 students are supervised and assessed by practice assessors and practice supervisors.

Documentary evidence, PLPs and the programme team confirm there's a partnership approach to the management of risk associated with adverse system regulator reports including reports from the Care Quality Commission. Practice learning environments are subject to educational audit to ensure a safe quality learning experience.

The school have a strategic plan to enhance the involvement of service users and carers across health-related programmes. There's limited evidence of service user involvement in the co-production and delivery of the prescribing programmes.

Arrangements at programme level don't meet the Standards framework for nursing and midwifery education (SFNME) (NMC, 2018). Arrangements at programme level meet Standards for student supervision and assessment (SSSA) (NMC, 2018).

The visit is undertaken remotely due to the COVID-19 pandemic.

The programmes are recommended for approval subject to three NMC conditions and one university condition. There's one NMC recommendation.

Updated 11 October 2020:

The university has provided documentation to meet the three NMC conditions. They confirm the university condition is met.

All conditions are met.

The programme is recommended to the NMC for approval.

Recommended outcome of the approval panel	
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: Provide an implementation plan that demonstrates how service users will be involved in the co-production, development, delivery and evaluation of the programmes. (SFNME R1.12, SPP R2.1)</p> <p>Selection, admission and progression:</p>

	<p>Condition two: Provide V100, V150 and V300 programme recognition of prior learning (RPL) mapping documentation that is capable of being mapped to learning outcomes and the RPS competency framework for all prescribers. (SFNME R2.8, SPP R1.4)</p> <p>Practice learning: None identified</p> <p>Assessment, fitness for practice and award: Condition three: Provide community practitioner prescribing V100 assessment documentation that states the pharmacology examination must be passed with a minimum score of 80 percent and that the numeracy examination must be passed at 100 percent. (SFNME R2.1, SPP R4.9)</p> <p>Education governance: management and quality assurance: Condition four: To amend documentation to review and revisit the documents for typographical errors including tone of voice. Across all programmes to revisit the use of percentage weightings for assessment components that are pass/fail. To make explicit which regulations apply to which programme or level of study. (University condition)</p>
Date condition(s) to be met:	6 October 2020
Recommendations to enhance the programme delivery:	Recommendation one: To consider in the V300 programme and the V150 programme the rationale for the requirement for 40 percent practice learning time with the practice assessor. (SSSA R7.3, SPP R4.5)
Focused areas for future monitoring:	None identified

Programme is recommended for approval subject to specific conditions being met
<p>Commentary post review of evidence against conditions Additional and revised copies of the programme documentation provide evidence the conditions are met.</p>

An implementation plan details how service users will be involved in the co-production, development, delivery and evaluation of the programmes. Condition one is met.

Revised programme documentation includes a clear process detailing how RPL can be directly applied to the prescribing programmes. Condition two is met.

The revised V100 programme handbook confirms the pharmacology examination must be passed with a minimum score of 80 percent and that the numeracy examination must be passed at 100 percent. Condition three is met.

The university has confirmed that the university condition is met.

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	The AEI confirm the accuracy of the programme approval report.
Final recommendation made to NMC:	Programme is recommended to the NMC for approval <input checked="" type="checkbox"/> Recommended to refuse approval of the programme <input type="checkbox"/>
Date condition(s) met:	11 October 2020

Section three

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

Partnerships
The AEI works in partnership with their practice learning partners, service users, students and all other stakeholders.
Please refer to the following NMC standards reference points for this section:

[Standards framework for nursing and midwifery education](#) (NMC, 2018)

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

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

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 with stakeholders confirms effective partnership working with the programme teams in the development of the proposed programmes. PLPs tell us they have a collegiate relationship with the

programme teams and are assured their comments and preferences are represented in the proposed curriculum. There's evidence of a joint approach to the preparation of practice supervisors and practice assessors. This is evidenced in a model of joint working that ensures practice assessors and practice supervisors are prepared for and supported to undertake their roles. The DPP title is used in the V300 programme. Student and practice assessor facing documentation clearly detail the DPP roles and responsibilities which reflect the requirements of the SSSA. V150 and V100 programme documentation confirms students are supported by practice assessors and practice supervisors. The roles and responsibilities for supervision and assessment are clearly documented.

Documentary evidence and the approval visit confirms that the programme teams are experienced with relevant prescribing qualifications and clinical experience across all fields of nursing practice. The dean and head of school confirm the programme teams are supported in their academic assessor roles by the school academic lead for practice education. They tell us there's sufficient resources within the programme teams to support the academic assessor role. The curriculum is designed to support inter-professional learning using a blended approach to support students to take responsibility for their learning. Students confirm there are sufficient academic resources which are provided in a timely manner. V300 students commend the use of clinical case studies to support their learning.

The school service user and carer strategy confirms a commitment to the involvement of service users in NMC programmes across the school. A service user representative confirms there's service user involvement in curriculum development, teaching and assessment across other programmes in the school. Whilst there's some documentary evidence of service user agreement for the proposal to undertake the V300 objective structured clinical examination (OSCE) assessment in the practice learning environment, service users couldn't confirm involvement in the co-production, development, delivery and evaluation of the prescribing programmes. (Condition one)

PLPs, students and a designated medical practitioner (DMP) representative confirm they've influenced proposed programme changes. They describe the consultation in relation to the proposal to undertake the OSCE assessment in the practice learning environment. They tell us they support the proposal and confirm that practice assessors are responsible for ensuring service users provide feedback on student performance in the OSCE. There's documentary evidence of student involvement in the development of the programmes. Student representatives tell us they provide feedback in programme evaluations that have informed and reflect proposed changes.

A programme representative is nominated by fellow students for each of the three programmes. As part of the university student voice process student representatives attend course committee meetings to provide feedback to the programme teams. Ongoing and end of programme evaluation is the primary

method of student feedback to the prescribing team. Feedback and action taken is reported in annual programme reports and shared with PLPs at an education partnership forum.

Students tell us that they receive constructive and timely feedback on their progress in the academic and practice learning environment. Students commend the programme teams for the level of support provided for the duration of their studies. Students and student facing documentation provide assurance that they know how to raise and escalate concerns. One student describes how a concern they raised was appropriately actioned during their supervised practice learning. V100, V150 and V300 practice assessor and practice supervisor facing documentation details how concerns are raised and addressed. Practice assessors confirm awareness of the process for raising a concern.

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**

There's no clear evidence of the involvement of service users in the co-production, development, delivery and evaluation of the prescribing programmes.

Condition one: Provide an implementation plan that demonstrates how service users will be involved in the co-production, development, delivery and evaluation of the programmes. (SFNME R1.12, SPP R2.1)

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

MET **NOT MET**

Post event review

Identify how the condition(s) is met

Condition one: An implementation plan clearly details how service users will be involved in the co-production, development, delivery and evaluation of the programmes. This includes how service users will contribute to the curriculum and their direct involvement in assessments including moderation of practice assessment. Service users will have the opportunity to identify areas of good practice and provide feedback to the programme leads and students on the V100, V150 and V300 programmes.

Evidence:

Implementation plan, service user involvement in the non-medical prescribing programmes, undated

Condition one is met.

Date condition(s) met: 11 October 2020

Revised outcome after condition(s) met

MET

NOT MET

Condition one is 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. Applicants to all programmes must secure evidence of employer support at application. Students undertaking the V100 or V300 awards in their respective SCPHN, SPQ DN and MSc advanced healthcare practice programmes must have employer agreement and complete an application form. PLPs confirm line managers must sign applications to confirm practice learning time is protected and that there's a service need for prescribing within the applicant's role.

Documentary evidence and discussion with PLPs and students confirm applicants

are supported by appropriately qualified and prepared practice assessors and practice supervisors. Students tell us practice learning is protected.

Self-employed and non-NHS employed applicants must meet the requirements of the V300 application process and are required to complete an additional governance declaration. They must provide evidence of the governance structures supporting their prescribing practice. This includes that there's indemnity in place for their employment status and confirmation of how their learning will be supported and protected. An offer of a place on the V300 programme for self-employed or non-NHS employed applicants is dependent on the outcome of a meeting between a member of the programme team, the student and the practice assessor. All applications are scrutinised by the programme leader.

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

R1.4 is not met. There's evidence of a university RPL process. The V300 programme handbook details the RPL process. RPL claims are subject to external examiner review. Students confirm this information is available to them. It's not clear how existing V100 and V150 prescribers can RPL into the V300 programme. There's no evidence of how RPL is being mapped to the RPS competency framework for all prescribers in the V100, V150 or V300 programmes. The programme lead confirms the RPL process isn't mapped to the V100, V150 and V300 programme learning outcomes or the RPS competency framework for all prescribers. (Condition two)

- 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.*

Students on all prescribing programmes will complete their current programmes. Students who interrupt will continue on their current programme. Current V300 students will retain the DMP practice assessor.

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 programme lead confirms current students will not transfer to the SSSA.

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

YES NO

There's no evidence of how RPL is being mapped to the RPS competency framework for all prescribers. The RPL process isn't mapped to the V100, V150 and V300 programme learning outcomes or the RPS competency framework for all prescribers. (Condition two)

Outcome

Is the standard met? MET NOT MET

There's no evidence of how RPL is being mapped to the RPS competency framework for all prescribers. The RPL process isn't mapped to the V100, V150 and V300 programme learning outcomes or the RPS competency framework for all prescribers.

Condition two: Provide V100, V150 and V300 programme RPL mapping documentation that is capable of being mapped to learning outcomes and the RPS competency framework for all prescribers. (SFNME R2.8, SPP R1.4)

Date: 8 September 2020

Post event review

Identify how the condition(s) is met:

Condition two: The revised V300 programme handbook includes a RPL mapping tool which details how V100, V150 and V300 learning outcomes are mapped to the RPS competency framework.

Evidence:
Revised, V300 programme handbook, 2020-2021

Condition two is met.

Date condition(s) met: 11 October 2020

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

Condition two is met.

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

R2.1 is not met. There's documentary evidence of a school service user and carer strategy. Service users tell us they contribute to the development, teaching and assessment across other programmes in the school, however they're not directly involved in the prescribing programmes. (Condition one)

- 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. Documentary evidence and discussion at the approval visit confirms that the V100, V150 and V300 programmes use a blended learning model approach. The university teaching, learning and assessment strategy supports this model and aims to support students to be active and independent learners. The three programmes use lead lectures and case studies with student led and group discussion. Using case studies, all students are able to practice prescription writing and V300 students are able to practice writing clinical management plans. Prescribing consultation and medicines optimisation skills taught in theory are practised during the practice learning hours under supervision.

Students undertaking the V150 share elements of learning with V300 students. Legal and ethical prescribing, introduction to pharmacology and adverse drug reactions are examples of V150 and V300 shared learning. Each programme has a practice assessment document (PAD) which provides information about practice learning and clearly identifies points of formative assessment that enable students to develop their learning towards achievement of the programme outcomes. All students are required to apply learning to prescribing practice in their practice learning environment. Student facing documents detail the requirements for practice supervisors to observe patient assessments and provide feedback to V100 and V150 students. V300 students are required to complete an OSCE assessed consultation of a prescribing patient consultation as a formative and summative assessment. Students tell us this approach helps them to develop their prescribing consultation skills. The DMP representative confirms this assessment approach supports sound learning.

Teaching and learning strategies utilise electronic learning facilities. Students describe their positive experiences using interactive learning tools including Kahoot. They tell us that using this audience response technology improves their understanding of pharmacology. Students commend the use of prescribing case studies and case discussion which support the application of theoretical learning to prescribing in the practice learning environment. V100 students undertake a written prescribing case study. The study is submitted as evidence to demonstrate achievement of RPS competencies alongside the PAD and is assessed by the practice assessor and academic assessor.

The assessment of practice requires all students to demonstrate achievement of the RPS competencies. V300 students tell us they find the current word count requirement for the summative written work to evidence achievement of each RPS competency challenging. They confirm the programme team have listened to this concern and welcome the word count reduction in the proposed programme. Strengthening practice assessment in the proposed programme requires students to submit two reflections to support the evidence of achievement of RPS competencies. These are submitted in the PAD. Practice learning hours are recorded in each programme specific PAD and are confirmed by the practice assessor at the final assessment of practice. Evidence of achievement of the RPS competencies is confirmed and recorded by the practice assessor and agreed by the academic assessor in all programmes. PADs are subject to the school internal moderation process prior to review by the programme external examiner.

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

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

YES NO

There's no clear evidence of the involvement of service users in the co-production, development, delivery and evaluation of the prescribing programmes. (Condition one)

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

There's no clear evidence of the involvement of service users in the co-production, development, delivery and evaluation of the prescribing programmes.

Condition one: Provide an implementation plan that demonstrates how service users will be involved in the co-production, development, delivery and evaluation of the programme. (SFNME R1.12, SPP R2.1)

Date: 8 September 2020

Post event review

Identify how the condition(s) is met:

Condition one: An implementation plan clearly details how service users will be involved in the co-production, development, delivery and evaluation of the programmes. This includes how service users will contribute to the curriculum and their direct involvement in assessments, including moderation of practice assessment. Service users will have the opportunity to identify areas of good practice and provide feedback to the programme leads and students on the V100, V150 and V300 programmes.

Evidence:

Implementation plan, service user involvement in the non-medical prescribing programmes, undated

Condition one is met.

Date condition(s) met: 11 October 2020

Revised outcome after condition(s) met:

MET NOT MET

Condition one is met.

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. Documentary evidence and discussion at the approval visit confirm suitable and effective arrangements and governance for practice learning are in place for all applicants, including those who are non-NHS employed and self-employed. This is assured by effective partnership working between the V300, V150 and V100 programme lead, teaching teams and PLPs. PLPs tell us they work productively with the school to ensure the quality and safety of all practice learning areas. A co-produced school and PLP practice learning environment educational audit is undertaken by PLPs and school staff every two years.

Self-employed and non-NHS applicants' practice learning environments must demonstrate they meet the requirements of the educational audit process. This includes a visit to the practice learning environment by a member of the V300 programme team to ensure governance arrangements for practice learning are in place. The programme lead confirms the educational audit status of practice learning environments is reviewed as part of the application process.

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. Technology enhanced learning is embedded within the virtual learning environment (VLE), Brightspace, which provides a range of resources to support student learning. The university has transitioned from the VLE platform Blackboard to Brightspace in the current academic year. One student tells us there's support provided for the transition to Brightspace.

The programme lead describes the support students on all the prescribing programmes receive to ensure they're familiar with and can use the digital health technologies that support medicines management and prescribing practice. Students tell us they use a variety of digital resources to support their learning including the British National Formulary (BNF) online, the electronic medicines compendium and the BNF app. Students tell us they are well supported to use these resources. They commend the programme team for their use of technology enhanced learning which students say enhances their learning.

All students have the opportunity to participate in simulation-based learning in their practice learning environment. Students practice the clinical and prescribing assessment skills required to ensure they can prescribe safely. The development of these skills is supported and supervised by practice supervisors and practice assessors. Students and the DMP representative tell us simulation supports prescribing learning. Formative feedback on the development of prescribing skills is ongoing for all prescribing students within the practice learning hours. Practice assessors provide V100 and V150 students with feedback on their development at weekly intervals; this is recorded in the PAD. V300 practice assessors provide student formative feedback on their progress on a minimum of three points in the programme. These formative assessments are recorded by the practice assessor in the student PAD.

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 <i>Standards for student supervision and assessment</i> (R3.4)	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to practice learning are met	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
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: 8 September 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</p>

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

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

R4.7 provide feedback to students throughout the programme to support their development as necessary for meeting the RPS competencies and programme outcomes

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

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 and discussion at the approval visit confirm educational audits of all practice learning environments are undertaken to ensure appropriate systems and processes are in place to support safe practice learning. On application to the programmes there must be a satisfactory audit of the practice learning environment. The programme team undertake an educational audit for those non-NHS practice learning environments which don't have an existing audit in place. Where an audit doesn't meet the required standard, the applicant isn't offered a place on the programme.

Documentary evidence confirms there's communication between practice assessors and academic assessors to identify and address any issues related to practice learning. Students are advised about and have access to the processes for raising concerns in the university and the practice learning environment. Students tell us they know how to raise a concern; this is detailed in the

programme handbook and the programme team advise them about this during contact days in the university. One student describes how a concern they had in the practice learning environment was appropriately addressed and resolved. Student and practice assessor facing documentation clearly details the process for raising concerns. The DMP representative confirms this information is available to them in the practice assessor handbook.

- 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. There's evidence of a partnership approach with PLPs to the implementation and operationalising of the SSSA. The application process ensures appropriate practice assessors and practice supervisors are identified. Practice assessors must confirm they meet the requirements to undertake the assessment role. Documentary evidence is supported by the DMP representative and three future practice assessors who tell us the university offers opportunities to prepare for the role. Existing V150 and V300 practice assessors attend a transition to the role and curriculum information workshop. Practice assessors who have not previously undertaken the role must complete a specific practice supervision course. V100 practice assessors and practice supervisors have specific prescribing preparation as part of the preparation for the SCPHN programme. The programme lead confirms practice assessors for self-employed and non-NHS employees must attend a preparation workshop as a requirement of admission to the programme. Students and practice assessors are further supported by a follow-up face-to face practice tripartite visit by a member of the programme team.

Practice assessors and students confirm V150 and V300 preparation arrangements are made in partnership with PLPs and clearly set out in programme documentation. The DMP representative tells us they are adequately prepared for the role. The practice assessor documentation is provided in advance of the programme start date and provides them with appropriate information about their role. Students tell us practice assessors are well prepared for the role.

Academic assessors are required to complete preparation for their role. Each student is also allocated a personal tutor; students commend the level of pastoral support they receive during the programme.

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 evidence confirms there are processes in place to assign each student to a practice assessor who is both a registered healthcare professional and experienced prescriber. PLPs confirm there's a partnership approach with the programme team to ensure appropriate practice assessors who meet the requirements of the programme are identified. The programme documentation confirms the practice assessor and practice supervisor are not the same person. There's a suitable plan in place for the management in exceptional circumstances if the same person fulfils the role of practice assessor and practice supervisor.

The V300 and V150 programmes require students to spend 40 percent of their learning in the practice learning environment working directly with their practice assessor. The DMP and past students tell us that, while they achieved this requirement, it was challenging. The programme team are advised to consider the impact of this on students and practice assessors. (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 equivalent qualifications for the programme the student is undertaking (R4.6)

YES NO

- 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)

YES NO

- 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)

YES NO

- 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:
 - 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%).

YES NO

R4.9 is not met. V100, V150 and V300 students provide evidence of meeting the RPS competencies in the PAD. The practice assessor is responsible for monitoring student progression towards achievement. Practice supervisors are responsible for supervising and supporting learning.

All prescribing students meet with practice supervisors and practice assessors. V100 and V150 students have an initial meeting to discuss student self-assessment, agree learning outcomes and consider how these will be achieved. This is recorded in the PAD. Progress is monitored and supervised hours are recorded as formative feedback in the PAD. Students and practice assessors agree the date for the final assessment of achievement of the RPS competencies.

V300 students are required to meet formally with practice assessors to review progress on three occasions. An initial meeting requires students, practice assessors and practice supervisors to discuss student self-review and set learning objectives. The mid-point meeting provides the opportunity for a review of progress and if necessary, revise learning outcomes and learning activities. A final meeting requires practice assessors to undertake an assessment of and confirm the achievement of the RPS competencies. This is confirmed by the academic assessor and recorded in the PAD. Programme specific student and practice assessor facing documents detail the frequency of communication between practice supervisors and assessor supervisors and academic assessors. The DMP representative confirms the process works well in the practice learning environment. Practice assessors tell us the models of supervision in the V100, V150 and V300 programmes are appropriate to support students to achieve the RPS competencies for all prescribers.

All students undertake a pharmacology examination which must be passed at 80 percent; the numeracy element must be passed at 100 percent. This information is clearly detailed in the V150 and V300 programme handbooks. The V100 programme handbook does not detail for students the requirements of this examination. (Condition three)

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

YES NO

The V100 programme handbook does not detail for students the requirements of the pharmacology and numeracy examination. (Condition three)

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

YES NO

Outcome

Is the standard met?

MET NOT MET

The V100 programme handbook does not detail for students the requirements of the pharmacology and numeracy examination.

Condition three: Provide community practitioner prescribing V100 assessment documentation that states the pharmacology examination must be passed with a minimum score of 80 percent and that the numeracy examination must be passed at 100 percent. (SFNME R2.1, SPP R4.9)

Date: 8 September 2020

Post event review

Identify how the condition(s) is met:

Condition three: The revised V100 programme handbook confirms the pharmacology examination must be passed with a minimum score of 80 percent and that the numeracy examination must be passed at 100 percent.

Evidence:

Revised, V100 programme handbook, September 2020

Condition three is met.

Date condition(s) met: 11 October 2020

Revised outcome after condition(s) met:

MET NOT MET

Condition three is met.

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

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

YES NO

Outcome

Is the standard met? MET NOT MET

Date: 8 September 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

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 checked="" type="checkbox"/>	<input 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		
List additional documentation:		
Post visit documentation: Revised, V300 programme handbook, 2020-2021 Revised, V150 programme handbook, September 2020		

Revised, V100 programme handbook, September 2020 Revised, V300 designated prescribing practitioner handbook and practice assessment document, September 2020 Implementation plan, service user involvement, September 2020 Conditions response grid, non-medical prescribing, undated
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 checked="" type="checkbox"/>	<input 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 2018-2019 x one V300 2019-2020 x one		
Service users and carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you stated no above, please provide the reason and mitigation		
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 type="checkbox"/>	<input checked="" 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

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Issue record

Final Report

Author(s):	Dianne Bowskill	Date:	15 September 2020
Checked by:	Bernadette Martin	Date:	19 October 2020
Submitted by:	Amy Young	Date:	22 October 2020
Approved by:	Emiko Hughes	Date:	23 October 2020