



### Programme approval visit report

### Section one

| Programme provider name:   | Anglia Ruskin University   |
|--|--|
| In partnership with: (Associated practice learning partners involved in the delivery of the programme) | Barking Havering and Redbridge<br>University Hospitals NHS Trust |
|  | Basildon and Thurrock University Hospital NHS Foundation Trust   |
|  | Bedford Hospital NHS Trust                                       |
|  | Cambridge University Hospitals NHS Foundation Trust              |
|  | Cambridgeshire and Peterborough NHS Foundation Trust             |
|  | Cambridgeshire Community Services NHS Trust                      |
|  | Chelsea and Westminster NHS Foundation Trust                     |
|  | Colchester Hospital University NHS Ft                            |
|  | East and North Hertfordshire NHS<br>Trust                        |
|  | East Suffolk and North Essex Foundation Trust                    |
|  | Essex Partnership University NHS Foundation Trust                |
|  | Guy's and St. Thomas' NHS<br>Foundation Trust                    |
|  | Ipswich Hospital NHS Trust                                       |
|  | Luton and Dunstable University<br>Hospital NHS Foundation Trust  |
|  | Mid Essex Hospital Services NHS<br>Trust                         |
|  | NELFT NHS Foundation Trust                                       |
|  | Norfolk and Norwich University NHS Foundation Trust              |





|                                     | North West Anglia NHS Foundation<br>Trust               |  |
|-------------------------------------|---|--|
|                                     | Northampton General Hospital NHS Foundation Trust       |  |
|                                     | Nottingham University Hospitals NHS Trust               |  |
|                                     | Papworth Hospital NHS Foundation Trust                  |  |
|                                     | Royal Free London NHS Foundation Trust                  |  |
|                                     | Southend University Hospital NHS Foundation Trust       |  |
|                                     | The Princess Alexandra Hospital NHS Trust               |  |
|                                     | The Queen Elizabeth Hospital Foundation Trust           |  |
|                                     | University Hospitals Coventry and Warwick NHS Trust     |  |
|                                     | University Hospitals of Leicester NHS<br>Trust          |  |
|                                     | West Suffolk NHS Foundation Trust                       |  |
|                                     | Private voluntary and independent health care providers |  |
| Programmes reviewed:                | Independent and supplementary nurse prescribing V300    |  |
|                                     | Community practitioner nurse prescribing V150           |  |
|                                     | Community practitioner nurse prescribing V100           |  |
| Academic level:                     |   |  |
|                                     | England, Wales, Northern Ireland                        |  |
|                                     | ☐ Level 5 ☐ Level 6 ☐ Level 7                           |  |
| Independent and supplementary nurse | SCQF  |  |
| prescribing V300                    | Level 8 Level 9 Level 10                                |  |
|                                     | Level 11  |  |





| Community practitioner nurse prescribing V150   | England, Wales, Northern Ireland  Level 5  Level 6  Level 7  SCQF  Level 8  Level 9  Level 10  Level 11  |
|---|--|
| Community practitioner nurse prescribing V100   | England, Wales, Northern Ireland  Level 5  Level 6  Level 7  SCQF  Level 8  Level 9  Level 10  Level 11  |
| Title of programme(s):  | Advanced Non-Medical Prescribing (Level 7) (V300)  Non-medical prescribing (Level 6) (V300)  Community Practitioner Nurse Prescribing  Community Formulary Prescribing |
| Date of approval visit:   | 15 May 2019  |
| Programme start date:  Independent and supplementary nurse prescribing V300  Community practitioner nurse prescribing V150  Community practitioner nurse prescribing V100 | 23 September 2019  23 September 2019  23 September 2019  |
| QA visitor:   | Anne Baileff   |





### Summary of review and findings

Anglia Ruskin University (ARU), faculty of health, education, medicine and social care, school of nursing and midwifery (the school) presented a community practitioner prescriber course (V100 and V150) and an independent and supplementary prescriber preparation programme (V300) for approval. The proposed programmes are offered at academic level six and level seven. The programmes have been co-produced in partnership with a range of stakeholders, including practice learning partners (PLPs) and students.

The university 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 was evident at the approval visit. The prescribing programmes are embedded within this.

There is evidence of service user and carer engagement at school level via the school's patient participatory group, however there is insufficient evidence of this within the prescribing programmes, other than for assessment of practice. Therefore, the specific requirements for service user engagement within the Standards framework for nursing and midwifery education are not met and one condition applies.

Documentary analysis and the outcome of discussions at the approval visit provide confirmation that arrangements at programme level meet the Standards for student supervision and assessment.

The programme is recommended to the NMC for approval with one condition. There is one university condition.

Updated 28 June 2019

Evidence is provided that the changes required to meet the condition have been made. The condition is met.

The programme is recommended to the NMC for approval.

| Recommended outcome of the approval panel |  |             |
|---|--|-------------|
| Recommended outcome                       | Programme is recommended to the NMC for approval                               |             |
| to the NMC:                               | Programme is recommended for approval subject to specific conditions being met | $\boxtimes$ |
|   | Recommended to refuse approval of the programme                                |             |





#### **Conditions:**

Please identify the standard and requirement the condition relates to under the relevant key risk theme.

Please state if the condition is AEI/education institution in nature or specific to NMC standards.

# Effective partnership working: collaboration, culture, communication and resources

Condition one: The programme team must develop a service user and carer strategy and action plan that clearly articulates how service users will be involved in all aspects of programme delivery. The action plan must set out how the strategy will be implemented and the timeframe within which each of the actions will be achieved. (Standards framework for nursing and midwifery education R1.12, R5.5; Standards for prescribing programmes R2.1)

### Selection, admission and progression

None identified

#### **Practice learning**

None identified

#### Assessment, fitness for practice and award

None identified

# Education governance: management and quality assurance

Condition two: Revise the module definition forms (MDFs) to address the outstanding items listed on the technical report and the following additional technical points raised at the meeting:

The number of learning outcomes for a module (maximum of 4 for a 15-credit module)

The word count equivalencies (maximum of 3,000 for a 15-credit module and 6,000 for a 30-credit module)

The number of assessment elements for a module (maximum of 2 elements for a 15-credit module and 3 for a 30-credit module).

If revisions are made to the module learning outcomes, an updated mapping exercise should be submitted to the NMC QA visitor to demonstrate continued alignment with the NMC standards. (university condition)

# Date condition(s) to be met:

13 June 2019





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|--|---|
| Recommendations to enhance the programme delivery: | None identified   |
| Focused areas for future monitoring:               | The involvement of service users and carers in all aspects of programme delivery. |

# Programme is recommended for approval subject to specific conditions being met

### Commentary post review of evidence against conditions

The changes required to meet condition one have been made. ARU has implemented comprehensive service user and carer guidelines to ensure involvement in all aspects of programme delivery. This is supported by a robust action plan that clearly describes how the guidelines are being implemented and this is monitored. Condition one is now met.

The university confirmed condition two is met.

| AEI Observations                            | Observations have been made by the education institution YES ⊠ NO □                               |
|---|---|
| Summary of observations made, if applicable | The university confirmed the factual accuracy of the report.                                      |
| Final recommendation made to NMC:           | Programme is recommended to the NMC for approval  Recommended to refuse approval of the programme |
| Date condition(s) met:                      | 28 June 2019  |





### **NMC Programme standards**

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 and midwives (NMC, 2015)

QA Framework for nursing, midwifery and nursing associate education (NMC, 2018)

QA Handbook (October 2018)

#### **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 coproduced 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 <u>Standards for student supervision and assessment</u>
- 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 based on QA visitor (s) documentary analysis and discussions at the approval visit, taking into consideration the QA approval criteria

There is documentary evidence that the university has used a consultative partnership approach to developing the V100, V150 and V300 prescribing programmes involving PLPs, service users and students. A number of methods have been used to achieve this for each programme, including the creation of a curriculum management team comprising representation from all stakeholders at all levels, additional meetings with the full range of stakeholders, focus groups,



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evaluation of data from student feedback of the current programme and outputs from staff student liaison committees.

The students and PLPs we met at the approval visit confirmed that they have been actively involved in the review and redesign of the prescribing programmes. They each commented that the university is responsive to their feedback and that this has shaped the prescribing programmes. Examples given include the design of the supplementary information form that applicants complete as part of the application process for the V300, and a reduction of face to face teaching in favour of technology enhanced and blended learning using the virtual learning environment (VLE) platform Canvas for all programmes.

The university teaching team told us that the university's patient participatory group has been involved in the early stages of programme development. The services users we met described how they have been given the opportunity to provide feedback on the V100, V150 and V300 programme documentation. They reported that their feedback about the importance of using plain English has resulted in simpler language being used in the practice assessment document. However, they told us that they have not had the opportunity to contribute in any other way to the review and redesign of the V100, V150 and V300 programmes and are not aware of any other service user and carer involvement. While the prescribing teaching team described their plans to include service users in the theory component of the programme, the service users we met were not aware of this and none of them had experience of contributing to the recruitment and selection process and theory component of the current programme. (Condition one) Standards framework for nursing and midwifery education R1.12, R5.5; and, Standards for prescribing programmes R2.1)

The university has a sound quality management and enhancement governance framework in place at university, faculty and school level. All aspects of programme quality are monitored in accordance with this framework. The governance structure includes committees that involve PLPs and student representatives. The university prescribing team and PLPs we met described how they work together to assure the safety and quality of learning environments. Joint activities include educational audits of practice learning areas, participation in an education leads network, and membership of the university's practice education committee which has overall responsibility for the quality assurance of practice learning. The PLPs also described how the university's education champions work closely with them to respond swiftly to any concerns that are raised either by students or practice staff about the quality of the learning experience, including practice supervision and assessment.

There are robust governance policies and procedures in place at university level to ensure that applications to all education provision provided by the university are managed fairly and in accordance with equality, diversity and inclusivity requirements. These standards are reflected in the recruitment and selection process for the V100, V150 and V300 prescribing programmes and are clearly articulated in the programme and module documentation, and on the university web pages. The PLPs we met told us how they have worked in partnership with





the university to agree the application process for the V100, V150 and V300 programmes and how they approve all applications prior to submission.

A commitment to interprofessional learning is evident within the V100, V150, and V300 module and programme information documentation. Students have the opportunity to learn from, with and about other prescribers including pharmacists and a number of allied health professions in both theory and practice settings. The V300 students we met described these opportunities, which include being taught by practitioners from other professions. V100 and V150 students are taught with V300 students for the majority of their programme and have similar interprofessional learning opportunities.

Documentary evidence for the prescribing programmes confirms opportunities are provided for students to both receive and give feedback. The design of the programmes enables students to receive timely formative feedback from academic staff, peers, supervisors and assessors in theory and in practice. Student feedback is encouraged and achieved via formal programme evaluations and membership of a staff student liaison committee; it is clear how this feedback is acted upon. The students we met reported that they are able to feedback on their experience throughout the duration of the programme both face to face and via the VLE. They confirmed the university responds quickly to their feedback and makes changes to teaching and learning activities accordingly, and in a timely way.

Documentary evidence and discussion at the approval visit confirms the implementation of the Standards for student supervision and assessment (SSSA) for the V100, V150 and V300 prescribing programmes. The prescribing teaching team and PLPs described how they are working together to implement the standards.

| Assurance is provided that the AEI works in partnership with their partners, service users, students and all other stakeholders as ide Gateway 1: <u>Standards framework for nursing and midwifery education</u> | entified in |
|--|-------------|
| MET 🖂  | NOT MET     |
| Gateway 2: <u>Standards for student supervision and assessment</u> MET   | NOT MET     |

# If not met, state reason and identify which standard(s) and requirement(s) are not met and the reason for the outcome

The teaching team told us at the approval visit about their plans to include service users and carers in the planning and delivery of the V100, V150 and V300 programmes, current involvement is very limited and service users are unclear of the plans for their involvement. (Condition one)

Condition one: The programme team must develop a service user and carer strategy and action plan that clearly articulates how service users will be involved





in all aspects of programme delivery, including the recruitment and selection process. The action plan must set out how the strategy will be implemented and the timeframe within which each of the actions will be achieved. (Standards framework for nursing and midwifery education R1.12, R5.5; Standards for prescribing programmes R2.1)

#### Post event review

#### Identify how the condition(s) is met

Condition one: ARU has implemented a comprehensive service user and carer guidelines to ensure involvement in all aspects of programme delivery. This includes the underpinning philosophy of involvement, support systems for service users and carers, their training and preparation, and modes of involvement. This is supported by a robust action plan that clearly describes how the guidelines are being implemented, how this is monitored and who is responsible for each action. Condition one is now met.

#### Evidence:

ARU Service user engagement strategy, 13 June 2019

ARU Service user strategy action plan version 2, June 2019

Date condition(s) met: 28 June 2019

Revised outcome after condition(s) met

MET 🖂

NOT MET

Condition one is met.

Assurance is provided that the Standards framework for nursing and midwifery education R1.12, R5.5 are met.

Assurance is provided that the Standards for prescribing programmes R2.1 are 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.

#### 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:



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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)

| METoxtimes | NOT MET |
|------------|---------|
|------------|---------|

R1.3 is met. The V100, V150 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 supplementary information form which is completed as part of the application process. Applicants, their line managers and the nominated practice assessor are required to give assurance that the necessary governance framework is in place to ensure that the student is provided with protected learning time and adequate practice supervision.

Additional support is provided by a nominated individual from the practice setting to address any concerns the student may raise about their practice learning experience. This person may be the placement learning co-ordinator, placement manager, ward manager or service manager. All students are assigned a university personal tutor to provide support for theoretical or personal issues that affect the student's experience and progress.

At the approval visit the PLPs and university teaching team described how they are working together to ensure that V100, V150 and V300 students are properly supported and have access to protected learning time while undertaking the prescribing programmes. The PLPs described how students' line managers and the organisation's non-medical prescribing lead work together to identify appropriate practice supervisors and practice assessors. They also described how they are able to respond to concerns raised by students about adequate protected time in partnership and how the tripartite relationship between practice supervisor, practice assessor and academic assessor will operate to ensure this. Each described that they have confidence that the other responds appropriately to any concerns raised.

The V300 students we met told us that it can sometimes be challenging to ring fence protected learning time but if they have concerns about this, they know how to raise this with both their employer and the university. They told us that although they have not needed to do this, they know of students who had done so and that their concerns were responded to appropriately.





| <ul> <li>Processes are in place to consider recognition<br/>capable of being mapped to the RPS Compete<br/>Prescribers (R1.4)</li> </ul>   |   | rk for all                          |
|--|---|-------------------------------------|
| <ul> <li>Processes are in place to confirm on entry that<br/>undertake a prescribing programme has the co<br/>academic ability to study at the level required for</li> </ul>   | mpetence, exp   | perience and                        |
|  | YES 🛭   | NO 🗌                                |
| <ul> <li>Processes are in place to confirm that the applied effective practice at a level of proficiency appropriate be undertaken and their intended area of presofollowing areas (R1.6):         <ul> <li>Clinical/health assessment</li> <li>Diagnostics/care management</li> </ul> </li> </ul>                                 | priate to the p<br>cribing practice   | rogramme to<br>in the               |
| - Planning and evaluation  | YES [   | ☑ NO ☐                              |
| <ul> <li>Processes are in place to ensure that applicant<br/>supplementary/independent prescribing progra<br/>with the NMC for a minimum of one year prior t<br/>the programme (R1.7)</li> </ul>   | mmes have be  | or entry onto                       |
| Proposed transfer of current students to the progr   | ramme under   | review                              |
| From your documentary analysis and your meeting we evaluative summary to confirm how the Standards for Standards of proficiency for nurse and midwife prescrice Competency Framework for all Prescribers) will be me existing students onto the proposed programme.  Existing students will not be transferring onto the proposed. | prescribing pring | ogrammes and of the RPS transfer of |
| Assurance is provided that Gateway 1: <u>Standards frame</u> <u>midwifery education</u> relevant to selection, admission a   |   |                                     |
|  | YES [   | NO 🗌                                |
| Outcome  |   |                                     |
| Is the standard met?   | MET 🗌   | NOT MET 🖂                           |
| There is no evidence of service user and carer engage programmes including the recruitment and selection p   |   | •                                   |





Condition one: The programme team must develop a service user and carer strategy and action plan that clearly articulates how service users will be involved in all aspects of programme delivery, including the recruitment and selection process. The action plan must set out how the strategy will be implemented and the timeframe within which each of the actions will be achieved. (Standards framework for nursing and midwifery education R1.12, R5.5; Standards for prescribing programmes R2.1)

framework for nursing and midwifery education R1.12, R5.5; Standards for prescribing programmes R2.1) Date: 15 May 2019 Post event review Identify how the condition(s) is met: Condition one: ARU has implemented comprehensive service user and carer guidelines to ensure involvement in all aspects of programme delivery. The supporting action plan clearly describes how a patient and carer participation group is consulted on all aspects of programme delivery. Condition one is now met. Evidence: ARU Service user engagement strategy, 13 June 2019 ARU Service user strategy action plan version 2, June 2019 Date condition(s) met: 28 June 2019 MET 🖂 NOT MET Revised outcome after condition(s) met: Condition one is met. Assurance is provided that the Standards framework for nursing and midwifery education R1.12, R5.5 are met.

#### Standard 2: Curriculum

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

Assurance is provided that the Standards for prescribing programmes R2.1 are

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 

NO 

R2 1 is not met. While the teaching team told us at the approval event about their

R2.1 is not met. While the teaching team told us at the approval event about their plans to include service users and carers in the planning and delivery of the V100, V150 and V300 programmes, current involvement is very limited and service users are unclear of the plans for their involvement. The programme team must address this by clearly articulating a strategy for involving service users and carers in the prescribing programmes and producing a robust action plan that will achieve this. (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



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|--|--|--|---|---|
|  | Evidence of the learning and teaching strategies that achievement of those competencies (R2.3)   | will be  | used to   | support                                       |
|  | MET  | $\boxtimes$  | NOT N   | ИЕТ 🗌   |
| V150 ar collabor virtual le activities sound, construction | met. The teaching and learning activities employed and V300 programmes are clearly described, these in rative and group learning, tutorials, reflection, seminatering environment (VLE) Canvas which contains one of the second practice-based learning. The approaches utilisencourage reflective practice and self-directed learning ctively aligned to the programme learning outcomes accutical Society (RPS) competencies.  | nclude cars, the complimate is a complimate in a complimate in a complimate in a complimate is a complimate in a complimate in a complimate in a complimate is a complimate in | ase stuuse of entary of pedagod are cle                   | dies,<br>the<br>e-<br>ogically<br>early       |
| experier achieve changes                                   | dents we met at the approval visit are very positive ances and the teaching activities that are employed to the programme learning outcomes. They are equal is that have been made to enhance students' experientmes including less face to face teaching and a moreth.  | o enable<br>ly positi<br>ence on   | e them to<br>ve about<br>the                              | to<br>ut the                                  |
| fo   | Evidence of programme outcomes that inform learning formularly relevant to the individual's intended scope R2.4):  stating the general and professional content neces programme outcomes stating the prescribing specific content necessary programme outcomes confirming that the programme outcomes confirming that the programme outcomes can be the NMC register: the four fields of nursing practic health, learning disabilities and children's nursing specialist community public health nursing | of presons of presons of presons of presons of the contract of | cribing point meet the the to all point, mentalifiery; ar | oractice<br>the<br>arts of<br>al              |
| p<br>d<br>te<br>h  | The programme structure demonstrates an equal balaractice learning. This is detailed in the designated hadescriptors and practice learning allocations. A range eaching strategies are detailed in the programme sphandbook and module descriptors with theory / practe each part of the programme and at end point. There aims, descriptors and outcomes specified. (R2.5)  | ours in<br>e of lear<br>pecificat<br>iice bala<br>are app  | the mod<br>rning an<br>ion, pro<br>ance def<br>propriate  | dule<br>ad<br>gramme<br>tailed at<br>e module |
|  |  | YES [  | $\boxtimes$   | NO 📙  |
| If releva  | ant to the review  |  |   |   |
|  | Evidence to ensure that programmes delivered in Wa   |  |   | h any   |





| YES 🗌   | NO □N/A ⊠   |  |
|---|---|--|
| The programme is delivered in England.  |   |  |
| Assurance is provided that Gateway 1: <u>Standards framework for midwifery education</u> relevant to curricula and assessment are r   |   |  |
| Y   | ES NO   |  |
| Assurance is provided that Gateway 2: <u>Standards for student sassessment</u> relevant to curricula are met <b>Y</b>   | supervision and<br>ES ⊠ NO □  |  |
| Outcome   |   |  |
| Is the standard met?  | NOT MET $oxed{oxed}$  |  |
| The teaching team told us at the approval event about their plans to include service users and carers in the planning and delivery of the V100, V150 and V300 programmes, current involvement is very limited and service users are unclear of the plans for their involvement. The programme team must clearly articulate a strategy for involving service users and carers in the prescribing programmes producing a robust action plan to achieve this. (Condition one)        |   |  |
| Condition one: The programme team must develop a service user and carer strategy and action plan that clearly articulates how service users will be involved in all aspects of programme delivery. The action plan must set out how the strategy will be implemented and the timeframe within which each of the actions will be achieved. (Standards framework for nursing and midwifery education R1.12, R5.5; and Standards for prescribing programmes R2.1)  Date: 15 May 2019 |   |  |
| Post event review   |   |  |
| Identify how the condition(s) is met:   |   |  |
| Condition one: ARU's service user and carer guidelines clearly appropriate underpinning philosophy of involvement, and a vari which service users and carers are involved in all aspects of cu delivery. The timeframe within which each aspect will be impler out in a supporting action plan that identifies the individuals rescomponent and how effectiveness will be monitored. Condition Evidence:  | iety of ways in urriculum design and mented is clearly set sponsible for each |  |
| ARU Service user engagement strategy, 13 June 2019  |   |  |
| ARU Service user strategy action plan version 2, June 2019  |   |  |
| Date condition(s) met: 28 June 2019   |   |  |



employed (R3.1).

Better, safer care through quality assurance of nursing, midwifery and nursing associate education.



| Revised outcome after condition(s) met:  | MET oxtimes          | NOT MET [         |
|--|----------------------|-------------------|
| Condition one is met.  |                      |                   |
| Assurance is provided that the Standards framework education R1.12, R5.5 are met.  | ork for nursing a    | and midwifery     |
| Assurance is provided that the Standards for present.  | cribing program      | mes R2.1 are      |
|  |                      |                   |
| Standard 3: Practice learning  |                      |                   |
| Approved education institutions must:  |                      |                   |
| R3.1 ensure that suitable and effective arrangeme learning are in place for all applicants including art to those applicants who are self-employed             |                      |                   |
| Approved education institutions, together with must:   | practice learn       | ing partners,     |
| R3.2 ensure that practice learning complies with the supervision and assessment  | ne NMC <u>Standa</u> | ards for student  |
| R3.3 ensure technology enhanced and simulation used effectively and proportionately to support lea   |                      | • •               |
| R3.4 ensure that students work in partnership with practice learning partners to arrange supervision a with the NMC <u>Standards for student supervision a</u> | and assessmen        | t that complies   |
| Findings against the standard a  | nd requiremen        | ts                |
| Evidence provides assurance that the followin  | g QA approval        | criteria are met: |
| Provide an evaluative summary from your doc<br>evidence AND discussion at the approval visit<br>provided that the QA approval criteria below is                | to demonstrat        | e if assurance is |
| Evidence to ensure that suitable and effecti   | ve arrangemen        | ts and            |

R3.1 is met. Documentary evidence and discussion at the approval visit confirm how the SSSA are being implemented for the V100, V150 and V300 prescribing programmes. The programme team and PLPs are working together to operationalise the standards and prepare practice supervisors and assessors for their roles in supporting V100, V150 and V300 students.

governance for practice learning are in place for all applicants including arrangements specifically tailored to those applicants who are self-

MET 🖂

NOT MET





There is a revised supplementary information form that is completed as part of the application process which requires applicants, their line managers and the nominated practice assessor to give assurance that the necessary governance framework is in place to ensure the student is provided with protected learning time and adequate practice supervision.

The university prescribing team and PLPs described working together to assure the safety and quality of practice learning environments. Joint activities include educational audits of practice learning areas, participation in an education leads network, and membership of the university's practice education committee which

| has overall responsibility for the quality assurance of practice learning. The PLPs also described how the university's education champions work closely with them t respond swiftly to any concerns that are raised either by students or practice staff about the quality of the learning experience, including practice supervision and assessment. The university teaching team described the additional rigour and support that is in place to ensure that the practice learning environment of student who are self-employed is of satisfactory quality and has a robust overarching governance framework in place. |   |
|---|---|
| <ul> <li>There is evidence that the programme complies with the NMC standards for student supervision and assessment (R3.2)</li> <li>YES ∑</li> <li>NO □</li> </ul>   | r |
| Provide an evaluative summary from your documentary analysis and evidence AND discussion at the approval visit to demonstrate if assurance i provided that the QA approval criteria below is met or not met   | S |
| <ul> <li>Evidence to ensure technology enhanced and simulation-based learning<br/>opportunities are used effectively and proportionately to support learning<br/>and assessment (R3.3)</li> </ul>   |   |
| MET ⊠ NOT MET □   |   |
| R3.3 is met. Students access a variety of learning activities such as quizzes, discussion boards and collaborative learning activities via an online VLE 'Canvas' The system is also utilised to provide personalised notifications, contemporaneou feedback, and multimedia content. These activities and resources complement and support the face to face and practice learning activities that are built into the programmes.   |   |
| A demonstration of 'Canvas' and the range of technology enhanced teaching and learning activities that are utilised as part of the prescribing programmes was provided at the approval visit. The students we met are very positive about their experiences of using 'Canvas' as part of the programme.   |   |
| <ul> <li>Processes are in place to ensure that students work in partnership with the<br/>education provider and their practice learning partners to arrange<br/>supervision and assessment that complies with the NMC Standards for</li> </ul>  |   |





| Assurance is provided that Gateway 1: <u>Standards frame</u> <u>midwifery education</u> relevant to practice learning are me |                              |           |
|--|------------------------------|-----------|
| Assurance is provided that Gateway 2: <u>Standards for stanssessment</u> relevant to practice learning are met               | <u>udent superv</u><br>YES ⊠ |           |
| Outcome  |                              |           |
| Is the standard met?  Date: 15 May 2019  | MET 🖂 🔠                      | NOT MET 🗌 |

#### Standard 4: Supervision and assessment

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

- R4.1 ensure that support, supervision, learning and assessment provided complies with the NMC *Standards framework for nursing and midwifery education*
- R4.2 ensure that support, supervision, learning and assessment provided complies with the NMC *Standards for student supervision and assessment*
- R4.3 appoint a programme leader in accordance with the requirements of the NMC <u>Standards framework for nursing and midwifery education</u>. The programme leader of a prescribing programme may be any registered healthcare professional with appropriate knowledge, skills and experience
- 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
- 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
- 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





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%), 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%)

#### Findings against the standards and requirements

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

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  $\boxtimes$  NOT MET  $\square$ 

R4.1 is met. The university provided evidence of the robust governance framework it has in place to oversee and assure the quality of student support, supervision, learning and assessment. The prescribing programmes sit within this framework.

There is documentary evidence from staff curricula vita that a range of suitably qualified staff are responsible for the delivery of the programmes. Academic staff confirmed they are required to engage in a range of continuing professional development activities to ensure that they remain current in both prescribing and higher education practice. At the approval visit the university teaching team described how their scholarship and research is applied to prescribing and the delivery of the V100, V150 and V300 programmes.

The university teaching team also described how the prescribing lead assumes the role of academic assessor for the V100, V150 and V300 programmes and the processes that are in place to enable regular liaison with the lead midwife for education (LME), practice assessors and other key staff. The prescribing lead is the first point of contact for student complaints or any disciplinary matters. They



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are also responsible for evaluating the experience of each student cohort and acting on student feedback.

The PLPs confirmed they work in partnership with the university's education champions to ensure that the support, supervision, learning and assessment provided for students meets NMC Standards framework for nursing and midwifery education.

 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)

| for th  | eir roles (R4.2)  |  |   |   |   |  |
|---|---|--|---|---|---|--|
|   |   |  | M   | IET 🖂   | NOT N   | IET 🗌  |
| the impleme<br>applied to the<br>practice and<br>The program<br>practice sup<br>the V100, V<br>assessor wo<br>approval vis<br>and assessr | Documentary evi- entation of the Sta- le programme. The lacademic assesseme team and PL ervisors and asse- 150 and V300 pro- orkshops and web- it and includes cla- ment of learning was elearning package. | ndards for stonere are processors along with the confirmed essors for the essors for the estate of the confirmed ear learning owhich is done | udent supervisesses in place the how they'll they are wor ir roles in supper preparation and the latter utcomes, apper in stages. The | sion and ase to identify be prepare king togeth porting stundes someone was demonstrate lesses who su | ssessme<br>supervised for the<br>er to predents sto<br>supervise<br>onstrated<br>arning a<br>uccessfu | ent are sors, eir roles. epare udying or and dat the ctivities |
|   | ty has a robust goervision and asse   |  | mework in pla   | ace to qual   | ity assui   | re   |
|   | ence of programm<br>appropriate knowle  |  |   |   | e profes  | sional   |
|   |   |  |   | YES   |   | NO 🗌   |
| the p   | ence of the progra<br>ractice assessor t<br>rtaking prescribing   | o ensure ade   | quate suppor  | •   | idwives   | ME and   |

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)



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|  | MET 🖂   | NOT MET   |
| R4.5 is met. Students are required to identify a nom supplementary information form which forms part of the same form the practice assessor is required to verequirements, have discussed the practice assessor the support of their employer to engage with the role to access the preparation provided. The suitability of arrangements for practice learning are agreed by the education lead and the applicant's line manager. The practice assessor and their registration status is also officer and the programme lead. | the application verify that they or role with the ase, agree to do to the assessore healthcare or the suitability of the assessore suitability of the suitability of | n process. On meet assessor applicant, have he role and also and ganisation's the nominated |
| <ul> <li>Processes are in place to ensure the student<br/>assessor who is a registered healthcare profe</li> </ul>   |   |   |

| acc<br>rrang<br>duca<br>ractio  | pport of their employer to engage with the role, agree less the preparation provided. The suitability of the assignments for practice learning are agreed by the health tion lead and the applicant's line manager. The suitabilities assessor and their registration status is also checked and the programme lead. | essor and<br>care organisatility of the non | tion's<br>ninated |
|---|--|---|-------------------|
| •   | Processes are in place to ensure the student is assignance assessor who is a registered healthcare professional equivalent qualifications for the programme the stude (R4.6)   | with suitable                               |                   |
| •   | Processes are in place to provide feedback to studen<br>programme to support their development as necessar<br>competencies and programme outcomes (R4.7)   | •   |                   |
| •   | Processes are in place to assess the student's suitab<br>on the successful completion of a period of practice-b<br>to their field of prescribing practice (R4.8)   |   |                   |
| •   | Processes are in place to ensure that all programme met, addressing all areas necessary to meet the RPS This includes:   |   |                   |
|   | - successfully passing a pharmacology exam (the phabe passed with a minimum score of 80%), and   | armacology ex                               | am must           |
|   | - successfully passing a numeracy assessment relate calculation of medicines (the numeracy assessment rescore of 100%).  | •   | •                 |
| assurance is provided that Gateway 1: <u>Standards framework for nursing and nidwifery education</u> relevant to supervision and assessment are met |  |   |                   |
|   |  | YES 🖂                                       | NO 🗌              |
|   | ance is provided that Gateway 2: <u>Standards for studer</u> sment_relevant to supervision and assessment are me   |   | <u>and</u>        |

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| Council  | nursing associate education.  | MOTT<br>MACDONALD  |  |  |
|--|---|--------------------|--|--|
|  | YES   | S NO               |  |  |
| Outcome  |   |                    |  |  |
| Is the standard met?   | MET 🖂   | NOT MET            |  |  |
| <b>Date:</b> 15 May 2019   |   |                    |  |  |
|  |   |                    |  |  |
| Standard 5: Qualification to   | be awarded  |                    |  |  |
| Approved education institumust:  | itions, together with practice learr  | ning partners,     |  |  |
| preparation, confirm that the  | mpletion of an NMC approved progra<br>registered nurse (level 1), midwife o<br>rescriber, in either or both categorie | r SCPHN is         |  |  |
| 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 |   |                    |  |  |
| qualification has been annota  | they may only prescribe once their pated on the NMC register and they malified to prescribe from and within           | nay only prescribe |  |  |
| Findings aga   | inst the standards and requireme  | nts                |  |  |
|  |   |                    |  |  |

### **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 | $\boxtimes$     | NO  |   |
|-----|-----------------|-----|---|
|     | $\angle \Delta$ | 110 | ш |





| <ul> <li>Evidence to ensure that successful participation in and completion of an<br/>NMC approved prescribing programme leads to accreditation at a level<br/>equivalent to a bachelor's degree as a minimum award (R5.2)</li> </ul>  |  |  |  |
|--|--|--|--|
|  | YES 🔀  | ☑ NO □   |  |
| <ul> <li>Processes are in place to inform the student that the registered with the NMC within five years of successf programme and if they fail to do so they will have to recomplete the programme in order to qualify and regist prescriber (R5.3)</li> <li>Processes are in place to inform the student that they once their prescribing qualification has been annotated and they may only prescribe from the formulary they prescribe from and within their competence and scope</li> </ul> | ully com<br>etake an<br>ter their<br>YES<br>may on<br>ed on the<br>are quali | pleting the and successfully award as a NO   ally prescribe e NMC register ified to ctice (R5.4) |  |
| Accurance is provided that the Standards framework for nu  | roina one  | d midwifon   |  |
| Assurance is provided that the <u>Standards framework for nursing and midwifery</u> <u>education</u> relevant to the qualification to be awarded are met   |  |  |  |
|  | YES 🔀  | ☑ NO ☑   |  |
| Outcome  |  |  |  |
| Is the standard met?   |  | NOT MET  |  |
| <b>Date:</b> 15 May 2019   |  |  |  |
|  |  |  |  |





#### 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   |             |             |
| Programme specification(s)   |             | $\boxtimes$ |
| Module descriptors   | $\boxtimes$ |             |
| Student facing documentation including: programme handbook   |             |             |
| Student university handbook  | $\boxtimes$ |             |
| Practice assessment documentation  |             |             |
| Practice placement handbook  |             |             |
| PAD linked to competence outcomes, and mapped against RPS A Competency Framework for all Prescribers   |             |             |
| Mapping document providing evidence of how the education institution has met the <i>Standards framework for nursing and midwifery education</i> (NMC, 2018)                        |             |             |
| 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) |             |             |
| Mapping document providing evidence of how the Standards for student supervision and assessment (NMC, 2018) apply to the programme(s)  |             |             |
| Curricula vitae for relevant staff   |             |             |
| Registered healthcare professionals, experienced prescribers with suitable equivalent qualifications for the programme - registration checked on relevant regulators website       |             |             |



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| Written confirmation by the education institution and associated practice learning partners to support the programme intentions.   |  |  |  |
|--|--|--|--|
| List additional documentation:   |  |  |  |
| Supplementary information form   |  |  |  |
| Post event documentation to evidence the condition is met:   |  |  |  |
| ARU Service user engagement strategy, 13 June 2019   |  |  |  |
| ARU Service user strategy action plan version 2, June 2019   |  |  |  |
| If you stated no above, please provide the reason and mitigation  The prescribing programmes are presented as modules within the university.  However, all of the information that would normally be expected in a programme specification are provided in the module definition forms and the programme information document. |  |  |  |
| Additional comments:   |  |  |  |

## 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           |             |    |  |
| Senior managers from associated practice learning partners with responsibility for resources for the programme |             |    |  |
| Programme team/academic assessors  | $\boxtimes$ |    |  |
| Practice leads/practice supervisors/ practice assessors  | $\boxtimes$ |    |  |
| Students   | $\boxtimes$ |    |  |
| If yes, please identify cohort year/programme of study: V300 programme - 2018 and 2019 cohorts                 |             |    |  |
| Service users and carers   |             |    |  |
| If you stated no above, please provide the reason and mitigation   |             |    |  |





Additional comments

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

|   |                                 |                  | YES         | NO          |
|---|---------------------------------|------------------|-------------|-------------|
| Specialist teaching skills/simulation si  | g accommodation (e.g.<br>uites) | clinical         |             |             |
| Library facilities  |                                 |                  |             | $\boxtimes$ |
| Technology enhar  | Technology enhanced learning    |                  |             |             |
| Virtual learning environment  |                                 |                  |             |             |
| Educational audit tools/documentation   |                                 |                  | $\boxtimes$ |             |
| Practice learning environments  |                                 |                  | $\boxtimes$ |             |
| If yes, state where   | e visited/findings              |                  |             |             |
| If you stated no al   | pove, please provide th         | e reason and mit | igation     |             |
| Not relevant for th   | e prescribing programı          | me.              |             |             |
| Additional comments:  |                                 |                  |             |             |
|   |                                 |                  |             |             |
| Mott MacDonald Group Disclaimer   |                                 |                  |             |             |
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| Issue record  |                                 |                  |             |             |
| Final Report  |                                 |                  |             |             |
| Author:   | Anne Baileff                    | Date:            |             | e 2019      |
| Checked by:   | Judith Porch                    | Date:            |             | y 2019      |
| Approved by:  | Leeann Greer                    | Date:            |             | gust 2019   |
| Submitted by:   | Lucy Percival                   | Date:            | 9 Aug       | gust 2019   |