

Programme approval visit report

Section one

Programme provider name:	Edge Hill University
In partnership with: <i>(Associated practice learning partners involved in the delivery of the programme)</i>	Bridgewater Community Healthcare NHS Foundation Trust Liverpool Heart and Chest Hospital NHS Foundation Trust Liverpool Women's Hospital NHS Foundation Trust Mersey Care NHS Foundation Trust NHS West Lancashire Clinical Commissioning Group (CCG) North West Boroughs Healthcare NHS Foundation Trust Southport and Ormskirk Hospital NHS Trust Royal Liverpool and Broadgreen University Hospitals NHS Trust St Helens and Knowsley Teaching Hospitals NHS Trust The Walton Centre NHS Foundation Trust Warrington and Halton Teaching Hospitals NHS Foundation Trust Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust
Programmes reviewed:	Independent and supplementary nurse prescribing <input checked="" type="checkbox"/> Community practitioner nurse prescribing V150 <input type="checkbox"/> Community practitioner nurse prescribing V100 <input type="checkbox"/>
Title of programme(s):	Non-medical prescribing
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 type="checkbox"/> Level 6 <input type="checkbox"/> Level 7 SCQF

	<input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10 <input type="checkbox"/> Level 11
Community practitioner nurse prescribing V100	England, Wales, Northern Ireland <input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input 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
Date of approval visit:	16 February 2021
Programme start date:	
Independent and supplementary nurse prescribing V300	<input type="text" value="11 May 2021"/>
Community practitioner nurse prescribing V150	<input type="text" value="N/A"/>
Community practitioner nurse prescribing V100	<input type="text" value="N/A"/>
QA visitor:	Registrant Visitor: Rose Havelock

Section two

Summary of review and findings

Edge Hill University (the university) is an approved education institution (AEI) and is an established provider of non-medical prescribing (NMP) education.

The proposed programme presented for approval is delivered by the centre for multi-professional postgraduate clinical education, in the faculty of health social care and medicine. The programme is offered at academic level six and level seven and leads to 40 academic credits.

The programme can be taken as a stand-alone module or an optional module on the following courses:

- MSc Advanced clinical practice,
- MSc Advanced fertility practice,
- MSc Integrated palliative and end of life care,
- MSc Clinical professional practice.

The proposed V300 programme is mapped to the Standards of proficiency for nurse and midwife prescribers (adoption of the Royal Pharmaceutical Society's (RPS) competency framework for all prescribers) (RPS, 2016) and the Standards for prescribing programmes (SPP) (NMC, 2018). The programme is proposed to start on 11 May 2021. The programme is delivered part-time over 26 weeks. Arrangements are in place for the supervision of midwifery prescribing students with the lead midwife for education (LME).

A strong feature of the programme is the co-production with practice learning partners (PLPs) and a consistent approach to the management of NMP in the region.

Strategic and operational meeting structures ensure that there's co-production with PLPs and clear processes to ensure effective programme governance. Partnership arrangements have led to the development of a shared educational facility at the Alder Hey Institute in the Park. The Alder Hey site provides a multi-professional learning environment which has dedicated rooms in a shared facility. Existing university governance processes and arrangements apply to the delivery of programmes at Alder Hey. Programme academic staff will be situated on the Alder Hey site for the duration of each cohort to ensure accessibility for students. Students continue to have access to student services and facilities at the Ormskirk campus.

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

Documentary analysis and discussion at the visit provides assurance that there's service user engagement in the department as a whole, but at a programme level

this needs to be strengthened. The Standards framework for nursing and midwifery education (SFNME) (NMC, 2018) isn't met at programme level as a condition applies.

From documentary analysis and discussion at the approval visit we find that a regional approach is taken to prepare PLPs for the implementation of the Standards for student supervision and assessment (SSSA) (NMC, 2018). Practice assessors and practice supervisors at the visit didn't provide assurance that the implementation of the SSSA is clear to them. The roles, responsibilities and relationships between the practice assessor, practice supervisor and academic assessor are not clear in the practice assessment documentation. The SSSA isn't met at programme level as two conditions apply.

The programme is recommended for approval subject to three NMC conditions and two university conditions. One NMC recommendation is made.

Updated 16 March 2021:

Evidence is provided that the changes required to meet the three NMC conditions have been made. The AEI has confirmed the two university 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 three: Demonstrate how service users are involved in the design, development, recruitment, delivery and evaluation of the prescribing programme. (SFNME R1.12; SPP R2.1)</p> <p>Selection, admission and progression:</p> <p>None identified.</p> <p>Practice learning:</p>

	<p>Condition one: Review all programme documentation to clarify the role, responsibilities and relationships between practice supervisor, practice assessor and academic assessor. (SSSA R4.3, R6.7; SPP R4.2)</p> <p>Condition two: The programme team and PLPs must strengthen awareness of the SSSA and the requirement for practice assessors, practice supervisors and designated prescribing practitioners (DPPs) to complete adequate preparation for their role. (SSSA R5.1, R8.2; SPP R4.2)</p> <p>Assessment, fitness for practice and award:</p> <p>None identified.</p> <p>Education governance: management and quality assurance:</p> <p>Condition four: Review the approach to formative assessment and consider removal of terms relating to 'objective structured clinical examination' (OSCE) and 'moderation' within the documentation, to clarify the developmental purpose of this in students' learning. (University condition)</p> <p>Condition five: Ensure terminology relating to NMC Standards, practice assessment documentation and references is correct throughout the documentation. (University condition)</p>
<p>Date condition(s) to be met:</p>	<p>16 March 2021</p>
<p>Recommendations to enhance the programme delivery:</p>	<p>Recommendation one: Consider developing a process that enhances the student awareness of the facility to have their prior learning recognised. (SFMME R2.8; SPP R1.4)</p>
<p>Focused areas for future monitoring:</p>	<p>None identified.</p>

<p>Programme is recommended for approval subject to specific conditions being met</p>
<p>Commentary post review of evidence against conditions</p>

The programme team has provided evidence that provides clarity for students and PLPs about the roles, relationships and responsibilities between practice assessor, practice supervisor and practice assessor. Condition one is now met.

The programme team has provided evidence that provides assurance that DPPs, practice assessors and practice supervisors will be adequately prepared. Condition two is now met.

The programme team has provided evidence of how service users are involved in the design, development, recruitment, delivery and evaluation of the prescribing programme. Condition three is now met.

The SFNME is now met.
The SSSA are now met.
The SPP are now met.

The AEI confirms that the university conditions are met.

AEI Observations	Observations have been made by the education institution YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Summary of observations made, if applicable	
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:	16 March 2021

Section three

NMC Programme standards
<p>Please refer to NMC standards reference points Standards for prescribing programmes (NMC, 2018) Standards of proficiency for nurse and midwife prescriber (adoption of the Royal Pharmaceutical Society (RPS) Competency Framework for all Prescribers) (NMC, 2018) Standards framework for nursing and midwifery education (NMC, 2018) Standards for student supervision and assessment (NMC, 2018) The Code: Professional standards of practice and behaviour for nurses and midwives (NMC, 2015 updated 2018) QA Framework for nursing, midwifery and nursing associate education (NMC, 2018) 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 analysis and discussion at the visit provides evidence of working partnerships with PLPs, service users and carers (SUCs) and students. However, our discussions at the visit indicate that elements of partnership working with PLPs and SUCs need strengthening to be fully effective.

Partnerships at a strategic regional level are effective and provide assurance that governance structures are in place.

The programme team have provided documentary evidence of collaboration between multi-professional groups and they're active in the north west NMP education group (NWNMPEG) which provides a network for local NMP leads from university and practice settings. This regional network developed a standardised application form which provides a conjoint recruitment approach between PLPs and the university. Applicants are required to identify their practice assessor and practice supervisor who complete the application form stating their suitability for the role. Line managers or prescribing leads endorse the application, providing assurance of organisational support. While it is evident that there is a partnership approach to recruitment and selection between the PLPs and the university, service user involvement is not evident in this process. (Condition three)

Strategic relationships are well established between the university and the PLPs, for example the university has worked with Alder Hey Children's Hospital to develop new learning and teaching facilities on the hospital site, which support livestream teaching and clinical skills. With dedicated teaching rooms, a clinical simulation/skills room and information technology (IT)/study stations the new facilities provide a hub where students can network with professionals from other disciplines and universities.

At a programme level, partnership working is established between the programme team and PLPs. PLPs tell us that there's well established and supportive engagement between themselves and the programme team and that the quality of students completing the programme enhance the workforce locally. There's effective partnerships with regional groups and universities. PLPs and Health Education England (HEE) representatives meet regularly, providing strategic oversight of practice environments. A regional approach is taken to developing resources to support NMP through the health and education co-operative, a resource developed with other universities and commissioned by HEE.

We met with two medical colleagues previously working as designated medical practitioners (DMPs) and they're aware of the programme competencies and have experience of assessing students in practice. DMPs commented on the good working relationships with the programme team but aren't familiar with the requirements of the SSSA and hadn't engaged with the e-learning module

available from the health and education co-operative (for the preparation of practice assessors and practice supervisors). The programme team tell us that engagement of DMPs in locally delivered preparation is difficult to achieve, which led to a regional approach to the preparation of practice assessors and practice supervisors. The programme team tell us that practice assessors and practice supervisors self-declare on the application form that they're adequately prepared for the role. We find that the SSSA isn't reflected in the practice assessment documentation and PLPs aren't fully prepared to implement the SSSA. The practice assessment documentation requires further development to show the application of the SSSA. (Condition one and condition two)

The university has a SUC strategy and there's a service user group which meet twice yearly. Documentary analysis and discussion at the visit assures us that consultation with service users took place, and we met one service user who had made comments on the proposals for the programme. The service user noted they weren't aware of the removal of the OSCE component of assessment, which removes the opportunity for service users to be involved in the delivery of the programme. While service users are keen to be included, there's no evidence that they'll be involved in the delivery of the proposed programme.

We find that there's no evidence of service user involvement in the recruitment and selection of students because the programme team don't interview applicants. The programme team explain that this is due to the regional approach to the recruitment of NMP students, however PLPs at a strategic level explained that this didn't preclude the university from applying its own admission procedures. Service users were satisfied that their voice is sought, listened and responded to in the wider faculty context but the programme team need to demonstrate how service user involvement is embedded at programme level. (Condition three).

We met with current and former students and discussion at the visit assures us that the students feel supported and engaged in their learning. There's an active staff student consultation forum each term and students attend programme boards. Student partnerships with the programme team are effective and have influenced programme development, for example the removal of the OSCE assessment was consulted upon with students from level six and level seven programmes. Students tell us that they feel their voice is heard and responded to. They describe positive relationships with supportive academic staff. There's arrangements in place for students to feedback both formally and informally and students describe an inclusive learning culture. Students tell us that the programme prepares them for prescribing practice. Documentary analysis and discussion with the programme team provides assurance that there's suitable systems and processes to ensure safe and effective learning. Strategies are in place to support students, particularly with online learning and equipment loans.

Students are drawn from and learn in a variety of settings and contexts and work with a diverse population. Documentary analysis and discussion at the visit provides assurance that there's suitable facilities available and there's a strong

supportive culture which engages students. Investment in new facilities at Alder Hey also provide multi-professional networking opportunities and complement the facilities at Ormskirk campus.

Documentary analysis and discussion at the visit confirms that there's sufficient resources in place for programme delivery.

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**

Whilst a well- established service user group in the faculty is evident, we find that at programme level service user co-production needs to be developed, particularly in regard to programme delivery and the recruitment and selection processes. A condition applies:

Condition three: Demonstrate how service users are involved in the design development recruitment, delivery and evaluation of the prescribing programme. (SFNME R1.12; SPP R2.1)

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

MET **NOT MET**

Whilst a regional approach to the preparation of the practice assessors and practice supervisors has been developed, the medical colleagues that we met weren't familiar with the SSSA. In addition, the programme documentation doesn't fully articulate the roles and responsibilities involved. Two conditions are applied:

Condition one: Review all programme documentation to clarify the role, responsibilities and relationships between practice supervisor, practice assessor and academic assessor. (SSSA R4.3, R6.7; SPP R4.2)

Condition two: The programme team and PLPs must strengthen awareness of the SSSA and the requirement for practice assessors, practice supervisors and DPPs to complete adequate preparation for their role. (SSSA R5.1, R8.2; SPP R4.2)

Post event review

Identify how the condition(s) is met

Condition one: The programme team has provided a range of updated programme documentation including DPP handbook, student NMP programme handbook, postgraduate (NMP) handbook and updated practice assessment documentation on the PebblePad platform. These documents clearly articulate the roles, responsibilities and relationships between practice assessor, practice supervisor

and academic assessor. These amended documents now provide the facility for contact meetings and communication between all parties.

Condition one is now met.

Evidence:

Edge Hill University NMC NMP CPD3904 DPP handbook, undated
Edge Hill University NMC NMP CPD4904 DPP handbook, undated
Edge Hill University NMC NMP NUR3904 student handbook, May 2021, undated
Edge Hill University NMC NMP NUR4904 student handbook, May 2021, undated
Edge Hill University NMC Part B document, undated
Edge Hill University NMC NMP programme handbook, 2020-21, undated
PebblePad version three, undated

Condition two: The programme team has provided evidence of an updated north west (NW) NMP application form which now has a link within it enabling self-registration for practice assessors and practice supervisors to register for the regional e-resource for preparation. The academic assessor will now discuss this with the practice assessor and practice supervisor to ensure their awareness. The facility also exists for the academic assessor to document in the PebblePad that this resource has been accessed by the practice supervisor and practice assessor. The programme team will now provide a synchronous session for practice assessors and practice supervisors to build a community of practice support network, with role specific sessions.

Condition two is now met.

Evidence:

Appendix II NW independent supplementary prescribing application form, undated
Appendix IV DPP leaflet HEE NW trusts, undated
Edge Hill University NMC NMP CPD3904 DPP handbook, undated
Edge Hill University NMC NMP CPD4904 DPP handbook, undated
Edge Hill University NMC Part B document, undated
PebblePad version three, undated.

Condition three: The programme team has provided evidence of increased engagement with the faculty SUC group. There is a plan to engage SUCs in reviewing on an annual basis individual application forms and personal statements, to ensure that applicants address the requirement to describe how they work in partnership with service users. Members of the SUC forum agree to provide interactive teaching sessions and to develop a video-cast and other online resources for teaching. The practice assessment documentation now includes the facility for students to obtain and document feedback from service users. Members of the SUC forum are invited to programme management meetings. A review at the regional NW NMP leads group has developed a plan to review SUC involvement in internal NHS trust recruitment processes for NMP applicants.

Condition three is now met.

Evidence:

Appendix I consultation with SUC, 2 July 2020
Appendix II NW independent supplementary prescribing application form, undated
Appendix III Edge Hill University SUC forum meeting notes, 28 January 2021
Edge Hill University NMC Part B document, undated
PebblePad version three, undated

Date condition(s) met: 16 March 2021

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

Student journey through the programme

Standard 1: Selection, admission and progression

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

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

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

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

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

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

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

R1.6.1 Clinical/health assessment

R1.6.2 Diagnostics/care management

R1.6.3 Planning and evaluation of care

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

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

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

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

Findings against the standard and requirements

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

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

YES NO

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

YES NO

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

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

MET NOT MET

R1.3 is met. Documentary evidence and discussion at the visit confirm that there's a governance structure in place for students to be adequately supported throughout their study on the V300 programme. A regionally developed application form provides assurance that there's a process in place to identify suitable candidates in collaboration with PLPs, and the programme lead checks their status on the NMC register. The practice supervisor, practice assessor, line manager and NMP lead complete the application form providing assurance that necessary governance arrangements are in place.

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

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

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

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

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

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

YES NO

Proposed transfer of current students to the programme under review

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

Discussion at the approval visit confirms that there are no students transferring to the proposed programme or the SSSA.

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.	
Discussion at the approval visit confirms that there's no students transferring to the proposed programme. Assurance is given that current students will complete their studies on the current approved programme.	
Assurance is provided that Gateway 1: Standards framework for nursing and midwifery education relevant to selection, admission and progression 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: 16 February 2021	
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 2: Curriculum
Approved educations institutions, together with practice learning partners, must:
R2.1 ensure programmes comply with the NMC <i>Standards framework for nursing and midwifery education</i>
R2.2 ensure that all prescribing programmes are designed to fully deliver the competencies set out in the RPS <i>A Competency Framework for all Prescribers</i> , 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. Whilst a well-established service user group in the faculty is evident, we find that at programme level service user co-production needs to be developed, particularly in regard to programme delivery and the recruitment and selection processes. (Condition three)

- 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. Discussion at the visit and documentary analysis assures us that the programme team employ a range of strategies to support the teaching and learning of students in their achievement of their competencies. A blended approach to learning with asynchronous and synchronous sessions and peer group learning through Blackboard Collaborate is provided. E-learning script modules provide supplementary material. Practice learning of 12 days enhances theory to practice integration, and this is further developed with a prescribing based case study. Teaching quality is assured and underpinned by the quality management processes in the faculty, including student evaluation and external examiner review. The programme requires 12 days protected learning time in practice settings.

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

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

YES NO

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

YES NO

If relevant to the review

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

YES NO N/A

The programme is delivered in England.

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

YES NO

Whilst a well-established service user group in the faculty is evident, we find that at programme level service user co-production needs to be developed, particularly in regard to programme delivery and the recruitment and selection processes. (Condition three)

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

Whilst a well-established service user group in the faculty is evident, we find that at programme level service user co-production needs to be developed, particularly in regard to programme delivery and the recruitment and selection processes.

Condition three: Demonstrate how service users are involved in the design, development, recruitment, delivery and evaluation of the prescribing programme. (SFNME R1.12; SPP R2.1)

Date: 16 February 2021

Post event review

Identify how the condition(s) is met:

Condition three: The programme team has provided evidence of increased engagement with the faculty SUC group. There is a plan to engage SUCs in reviewing on an annual basis individual application forms and personal statements, to ensure that applicants address the requirement to describe how they work in partnership with service users. Members of the SUC forum agree to provide interactive teaching sessions and to develop a video-cast and other online resources for teaching. The practice assessment documentation now includes the facility for students to obtain and document feedback from service users. Members of the SUC forum are invited to programme management meetings. A review at the regional NW NMP leads group has developed a plan to review SUC involvement in internal NHS trust recruitment processes for NMP applicants.

Condition three is now met.

Evidence:

Appendix I consultation with SUC, 2 July 2020
Appendix II NW independent supplementary prescribing application form, undated
Appendix III Edge Hill University SUC forum meeting notes, 28 January 2021
Edge Hill University NMC Part B document, undated
PebblePad version 3, undated

Date condition(s) met: 16 March 2021

Revised outcome after condition(s) met: MET NOT 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. Discussion with the team and PLPs and documentary analysis provides assurance that there's suitable and effective governance arrangement in place. There's a range of checks and balances embedded within partnership arrangements; learning environments are audited using the NW learning environment audit tool which encompasses areas of learning environment and culture, educational governance and leadership, supporting and empowering learners, supporting and empowering educators, developing and implementing curricula and assessments and developing a sustainable workforce.

Arrangements to assure the suitability of learning environments for self-employed or independent organisations include the requirement for the applicant to provide Care Quality Commission reports and to self-declare the suitability of their arrangements. The programme team tell us they'll undertake audit of the self-employed applicant's learning environment.

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

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

YES **NO**

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

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

MET **NOT MET**

R3.3 is met. The programme team provide a blended learning approach for students. IT and simulation/skills rooms (at Alder Hey and Ormskirk) provide the facility of technology enhanced learning. Comparable facilities are available to students at both sites. A virtual learning environment including Blackboard Collaborate is used to engage students and an e-learning package of supplementary material is available. Arrangements are in place to offer asynchronous and synchronous lectures, seminars and workshops.

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

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

YES **NO**

R3.4 is met. Students are required to identify their practice supervisor and practice assessor at the application stage and those individuals confirm their suitability to undertake the role. Academic assessors schedule regular contact with students during the programme, and discussion at the visit provides assurance of established working relationships necessary for such partnership working. The partnership approach to recruitment and selection ensures that applicants from the NHS have the support of their employer to undertake the course. Self-employed candidates are subject to the same requirements to identify a suitable practice assessor and practice supervisor.

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

YES **NO**

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

YES **NO**

Outcome

Is the standard met? **MET** **NOT MET**

Date: 16 February 2021

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

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 [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

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 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. Mapping documentation demonstrates how the programmes comply with the SFNME. Documentary analysis and discussion at the approval visit confirm that the learning culture is supportive and inclusive and is supported by an equality and diversity strategy. Sufficient resources are in place to provide safe and effective learning environments. Students tell us that the programme team are supportive and offer appropriate tutorial and pastoral support. Documentary analysis and discussion with students confirm that the programme team act upon feedback.

- 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 not met. Documentary analysis and discussion at the approval visit indicates that some further preparation is required to ensure clarity of the roles and processes required to embed the SSSA at programme level. Practice assessors and practice supervisors tell us that they're not familiar with the details of the SSSA and how it applies to the prescribing programme. While PLPs are experienced assessors (previously working as DMPs) further clarity in the programme documentation will support the implementation of the SSSA. (Condition two).

The DPP handbook explains the role of practice assessor and practice supervisor, but we find that the practice assessment documentation in particular requires development to facilitate the feedback process between practice supervisor, practice assessor and academic assessor. (Condition one)

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. The applicant is responsible for identifying a potential practice assessor. The identified practice assessor completes the application form indicating their willingness and suitability to undertake the role. This is confirmed by the line manager or NMP lead. Primarily the practice assessor role will be undertaken by former DMPs. At the visit we met practice assessors who had suitable experience and hold appropriate qualifications.

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

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

YES NO

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

YES NO

Whilst a regional approach to the preparation of the practice assessors and practice supervisors has been developed, the medical colleagues that we met weren't familiar with the SSSA. In addition, the programme documentation doesn't fully articulate the roles and responsibilities involved. (Condition one and condition two)

Outcome

Is the standard met?

MET NOT MET

Whilst a regional approach to the preparation of the practice assessors and practice supervisors has been developed, the medical colleagues that we met weren't familiar with the SSSA. In addition, the programme documentation doesn't fully articulate the roles and responsibilities involved.

Condition one: Review all programme documentation to clarify the role, responsibilities and relationships between practice supervisor, practice assessor and academic assessor. (SSSA R4.3, R6.7; SPP R4.2)

Condition two: The programme team and PLPs must strengthen awareness of the SSSA and the requirement for practice assessors, practice supervisors and DPPs to complete adequate preparation for their role. (SSSA R5.1, R8.2; SPP R4.2)

Date: 16 February 2021

Post event review

Identify how the condition(s) is met:

Condition one: The programme team has provided a range of updated programme documentation including DPP handbook, student NMP programme handbook, postgraduate (NMP) handbook and updated practice assessment documentation on the PebblePad platform. These documents clearly articulate the roles, responsibilities and relationships between practice assessor, practice supervisor and academic assessor. These amended documents now provide the facility for contact meetings and communication between all parties.

Condition one is now met.

Evidence:

Edge Hill University NMC NMP CPD3904 DPP handbook, undated
 Edge Hill University NMC NMP CPD 4904 DPP handbook, undated
 Edge Hill University NMC NMP NUR3904 student handbook, May 2021, undated
 Edge Hill University NMC NMP NUR4904 student handbook, May 2021, undated
 Edge Hill University NMC Part B document, undated
 Edge Hill University NMC NMP programme handbook, 2020-21, undated
 PebblePad version three, undated

Condition two: The programme team has provided evidence of an updated NW NMP application form, which now has a link within it enabling self-registration for practice assessors and practice supervisors to register for the regional e-resource for preparation.. The academic assessor will now discuss this with the practice assessor and practice supervisor to ensure their awareness. The facility also exists for the academic assessor to document in the PebblePad that this resource has been accessed by the practice supervisor and practice assessor. The programme team will now provide a synchronous session for practice assessors and practice supervisors to build a community of practice support network, with role specific sessions.

Condition two is now met.

Evidence:

Appendix II NW independent supplementary prescribing application form, undated
 Appendix IV DPP leaflet HEE NW trusts, undated
 Edge Hill University NMC NMP CPD3904 DPP handbook, undated
 Edge Hill University NMP CPD4904 DPP handbook, undated
 Edge Hill University Part B document, undated
 PebblePad version three, undated

Date condition(s) met: 16 March 2021

Revised outcome after condition(s) met: MET NOT 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 <input checked="" type="checkbox"/>	NOT MET <input type="checkbox"/>
Date: 16 February 2021		
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		

Section four

Sources of evidence

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

Key documentation	YES	NO
Programme document, including proposal, rationale and consultation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Programme specification(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Module descriptors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student facing documentation including: programme handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student university handbook	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Practice assessment documentation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practice placement handbook	<input type="checkbox"/>	<input checked="" 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"/>
<p>If you stated no above, please provide the reason and mitigation There's no specific student university handbook. The student programme handbook included information about university regulations.</p> <p>There's no practice placement handbook for this programme. Programme documentation includes a DPP/practice assessor and practice supervisor handbook and a practice assessment document.</p>		

List additional documentation:

Post condition documentation:

Edge Hill University NMC NMP CPD3904 DPP handbook, undated
Edge Hill University NMP CPD4904 DPP handbook, undated
Edge Hill University NMP NUR3904 student handbook, May 2021, undated
Edge Hill University NMP NUR4904 student handbook, May 2021, undated
Edge Hill University NMC Part B document, undated
Edge Hill University NMC NMP programme handbook, 2020-21, undated
PebblePad version three, undated
Appendix I consultation with SUC, 2 July 2020
Appendix II NW independent supplementary prescribing application form, undated
Appendix III Edge Hill University SUC forum meeting notes, 28 January 2021
Appendix IV DPP leaflet HEE NW trusts, 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: Two students from January 2020, one student from October 2020, one alumnus from September 2019		
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 checked="" type="checkbox"/>	<input 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 The visit is conducted remotely due to the COVID-19 pandemic. The university is an established AEI.		
Additional comments: A livestream video was undertaken with a member of the programme team walking through the facilities at Alder Hey. Classrooms and IT/study stations were seen, which were equipped with suitable facilities.		

Mott MacDonald Group Disclaimer

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Issue record

Final Report

Author(s):	Rose Havelock	Date:	26 February 2021
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