

PART TWO PROGRAMME SPECIFICATION

1	Awarding body	Glyndŵr University
2	Teaching institution	Glyndŵr University
3	Award title	MSc Advanced Clinical Practice
4	Final awards available	MSc Advanced Clinical Practice MSc Advanced Clinical Practice (Therapies) Post Graduate Diploma Clinical Practice Post Graduate Diploma Clinical Practice (Therapies) Post Graduate Certificate Clinical Practice Post Graduate Certificate Clinical Practice (Therapies)
5	Professional, Statutory or Regulatory Body (PSRB) accreditation	The PSRB requirements associated with this award are related to non-medical prescribing modules and to the Learning and Teaching in Practice and Mentorship in Practice Modules. These have undergone separate approval events with the Nursing and Midwifery Council (NMC), while the prescribing modules have undergone approval events with the NMC, the General Pharmaceutical Council (GPhC) and with The Health and Care Professions Council (HCPC). Module outcomes were mapped to the specific PSRB requirement. For this reason, PSRB mapping for Non-Medical Prescribing, Learning and Teaching in Practice and Mentorship in Practice Modules has not been included in this document.
	Please list any PSRBs associated with the proposal	NMC, GPhC and HCPC as noted above
	Accreditation available	V300 Non-Medical Prescribing Learning and Teaching in Practice Mentorship in Practice Module
	Please add details of any conditions that may affect accreditation (eg is it dependent on choices made by a student?)	Students must undertake a Non-medical prescribing, Learning and Teaching in Practice or Mentorship in Practice module in order to obtain accreditation.
6	JACS3 code	B700
7	UCAS code	NA
8	Relevant QAA subject benchmark statement/s	There is no nursing, pharmacy or allied health professional Subject Benchmark Statement relevant to these Masters levels programmes. Students have met Subject Benchmark requirements on qualification/registration in their professional fields. The programme is mapped to QAA FHEQ (2014) and core module outcomes are mapped to award outcomes.
9	Other external and internal reference points used to inform the programme outcomes	The NLIAH (2010) Pillars of Advanced Practice are key to the development and structure of the course. The document is implemented throughout Wales, and there has been a recent drive to ensure that all universities in the Principality are embedding

the pillars of advanced practice in the Master's course. The learning outcomes are designed to allow the students to progress in each of the pillars of practice and modules are aligned with the pillars. Students may choose to take optional modules in order to develop their competence in one particular pillar. Decisions to do so must be underpinned by strong rationale and with reference to their role in practice.

- | | | |
|----|--------------------------|---------|
| 10 | Mode of study | |
| | Part time and full time | |
| 11 | Language of study | English |

12 Criteria for admission to the programme

Guidance - Entry requirements are in accordance with the University's admissions policy <http://www.glyndwr.ac.uk/en/media/Media,49536,en.pdf>

Standard entry criteria

UK entry qualification

Applicants for postgraduate degrees require a minimum of 2:2 class undergraduate degree

International entry qualification

- *Qualifications outlined on the National Academic Recognition and Information Centre (NARIC) as equivalent to the above UK entry qualification.*

Programme specific requirements

In addition, because of the requirement for practice-based learning, all students should be working in a role which requires them to meet the learning outcomes of the programme. i.e. in a position which requires a level of autonomy, or in a role working towards this.

This programme is viewed as a tripartite commitment between the HEI, the service employer, and the advanced practitioner/student. To that effect, employers are asked to commit to ensuring protected practice time, and identification of a Designated Supervising Medical Practitioner (DSMP) or clinical mentor to assess learning outcomes in practice prior to admission to the programme. Strengthening the selection process, interviews are carried out jointly with a senior lead practitioner from the local NHS/Welsh Ambulance Service providers.

The nominated DSMP/clinical mentor must be 'approved' i.e. have undertaken the supervisor's half-day programme to prepare him/her to provide the student with supervision, support and to assess competence in practice. This includes shadowing/mentoring opportunities and the opportunity to engage in discussions around assessment issues with other DSMP's/clinical mentors. Each DSMP/clinical mentor will be given a handbook explaining their role and the assessment process.

Non-standard entry criteria
(e.g. industry experience)

To be accepted on to the programme candidates must:

- Hold current registration with a professional statutory body pertaining to their area of advanced practice AND
- Hold a degree in a discipline cognate to their professional qualification or hold a non-graduate qualification which the university has deemed to be of satisfactory standard for the purpose of postgraduate admission. Candidates without a full honours degree at 2:2 and above will be required to submit a 1,500-word essay on a topic chosen by the admissions team as part of the induction process. This will be assessed using the level 6 academic criteria (Appendix I) and must demonstrate achievement at 50% or above for successful admission to the programme. Alternatively, recent successful completion of an appropriate level 6 module such as Research Methods, Non-Medical Prescribing at level 6 or Preparing for Master's Level Study will allow admission to the programme, subject to programme team agreement. AND

Have a minimum of two years' full time equivalent post-registration clinical experience (NB Some further PSRB conditions require three years' experience – see Appendices II and III for admissions criteria for Learning and Teaching in Practice And Mentorship in Practice Modules). AND

- Be employed in a clinical role with a high level of autonomy *or* be able to secure a placement to the above for a minimum of two days per week *or* be in a Trainee Advanced Practitioner role. AND
- Have a Designated Supervising Medical Practitioner (DSMP) (for those students undertaking Non-Medical Prescribing and Clinical Assessment in Advanced Practice modules) and have mentorship support during their practice

placement from their employing organisation AND

- Obtain a satisfactory DBS certificate.

NB If undertaking Non-Medical Prescribing, further admissions criteria apply which will supersede those above (see Appendix II). If undertaking Mentorship in practice or Learning and Teaching in practice, students must satisfy the pre-requisites for these modules (see Appendix III). Students without a first degree who are accepted to the programme will be able to take a Non-Medical Prescribing module (where eligible) but may only take this at level 6 (in accordance with PSRB requirements).

NB. The programme allows admission to students who fulfil non-traditional entry criteria. This is noted as appropriate, however, the competitive nature of the public funding available for the full time route (interviews), and the intensity of the route means that we need to consider all candidates carefully. Thus, students with no recent academic study will be encouraged to undertake a level six module prior to applying for the route.

13 Recognition of Prior (Experiential) Learning

Programme specific requirements

For those students who have undertaken Non-Medical Prescribing, either at level 6 or with a different credit size, a 20 credit negotiated module at level 6 and 7 has been made an option. (Students may take 2 negotiated modules within the programme, but only one of these can be at level 6). This could allow candidates to RPL 20 level 6 or 40 level 7 credits from Non-Medical Prescribing programmes into the award. This was specifically requested by our stakeholder group in an earlier iteration of the programme, and remains valuable. Equally, however, candidates who already have the Glyndŵr Certificate may prefer not to RPL their Non-Medical Prescribing programme in order to take advantage of other option modules on the programme.

14 Aims of the programme

In the absence of professional regulation of advanced practice roles, the importance of providing a systematic educational and academic framework to support the development of individuals in advanced practice roles remains paramount. In Wales, the National Leadership and Innovation Agency for Healthcare (NLIAH, 2010) Framework for Advanced Nursing, Midwifery and Allied Health Professional Practice in Wales provides guidance for education providers and advanced practitioners, their managers and employers, and this framework guides the curriculum.

The aim of the programme is therefore to support advanced practitioners in a range of clinical roles, to enable their development towards autonomous decision-makers in line with this Framework and its definition of advanced practice:

“Within Wales advanced practice is to be defined as: A role, requiring a registered practitioner to have acquired an expert knowledge base, complex decision-making skills and clinical competencies for expanded scope of practice, the characteristics of which are shaped by the context in which the individual practices. Demonstrable, relevant Masters level education is recommended for entry level” (page 21, NLIAH, 2010). As such, the programme curriculum aims will apply to all elements of the four pillars of advanced practice (management and leadership, education, research and advanced clinical practice), while also addressing the underpinning principles of the role of an advanced practitioner. These are; autonomous practice, critical thinking, high levels of decision making and problem solving, values based care, and improving practice. The pillars and principles will be visible throughout the curriculum, and will be tested in the module assessments.

The overall aims of the Masters award are to enable experienced professionals:

- To develop a systematic and critical knowledge and understanding of their specialist field of practice
- To develop a critical awareness of current problems, gaining new insights at the forefront of their area of advanced care practice that enable further strategic development of practice and practice knowledge
- To enable practitioners to inform, enhance and develop their competency within their field of practice
- To demonstrate advanced scholarship in their subject area through the planning and execution of level 7 enquiry.

15 Distinctive features of the programme

The distinctive features of the programme are its 600 practice hours and its focus on the four pillars of advanced practice. This means that the programme produces practitioners who are able to think at a high level in practice, but who also underpin their practice with a high level of scholarship. The programme therefore provides a first-class opportunity for post-registration learning in practice. Students will be supported by a medical or clinical mentor over the one or two taught years, a value-added feature of the advanced clinical practice course that is not available in a traditional master's course. Further, the development of a practice portfolio over the taught elements of the programme demonstrate the student's capacity to function at an autonomous level in practice, while also illustrating the ability to consider the complex needs of their patients/clients. This again is generally not a feature of a traditional master's course, and allows students to review and apply enhanced knowledge in practice as part of

their clinical roles. In order to facilitate this, applicants to the advanced clinical practice course will be required to have a responsible role in practice and to either be working as an autonomous practitioner, or to be able to secure a trainee advanced practitioner role. The programme team work in partnership with the University Health Board and Wales Ambulance Service Trust to select candidates appropriate for this course interviewing applicants.

16 Programme structure narrative

The programme meets the Glyndŵr regulations for taught Masters degrees and is studied either part time or full time. Part one (120 credits) is taught over one or two academic years, while part two (the dissertation element) comprises 60 credits and takes the form of a dissertation over up to one academic year, and is studied following completion of the taught element and following progression at the September award board. Students wishing to undertake taught modules over a longer period than two academic years should submit a learning contract to the programme leader and this should be discussed and agreed. This should occur in exceptional circumstances only, for example: newly diagnosed learning differences, or circumstances making release from the workplace to attend modules difficult. It should be noted that the registration period for the programme is a maximum of 5 years from the commencement of the programme as per university regulations.

Because of the nature and demands of these programmes, modules will be delivered on one or two days a week over a three-semester calendar year to ease student workload and to facilitate release from practice. The semester in which a module is to be offered is indicated on the module specification. Any students undertaking non-medical prescribing will also follow an extended academic year. For example, the non-medical prescribing modules run concurrently over semesters two and three i.e. January – July. The rationale for this is to comply with PRSB requirements relating to the length of study and attendance required for the professional award. In addition, as this is an optional module, it gives the maximum number of students from all eligible programmes access to it, as core modules tend to be delivered in semester 1.

The practice element

The programme structure is based upon a 50% theory and 50% practice divide in programme hours. This is on the understanding that the student will spend 600 hours over part 1 of the programme learning in their work setting. The modules which include the practice hours as an assessed component are *Assessment and Intervention*, *Clinical Evaluation* and *Clinical Pharmacology for Advanced Practice* for the Therapies route; *Clinical Assessment in Advanced Practice*, *Clinical Pharmacology for Advanced Practice* and *Non-Medical Prescribing* for the generic route and *Advancing Clinical Practice* for all routes. Optional modules *Clinical Diagnostics*, *Chronic Disease Management*, *Learning and Teaching in Practice*, *Mentorship in Practice* and the *Negotiated Module in Advancing Clinical Practice* also carry clinical hours. The modules *Advancing Clinical Practice* and *Clinical Evaluation* are delivered over two semesters to enable practitioners to maximise opportunities for critical reflection and work based learning. This helps students to meet the 50% in practice requirement and to inform the submission of their completed Advanced Clinical Practice portfolio. [Click here to enter text.](#)

Assessment of practice learning through a portfolio of evidence allows the student to demonstrate their progression in practice. It also assesses their ability as advanced practitioners as they are assessed in practice by their mentors as well as having the reflective element marked by the academic team. The model of portfolio used is important and Endacott et al.'s (2004) study helpfully suggests that a 'cake mix' model

is an effective model for use in a competency based programme, as in this model, evidence from theory and practice are integrated and assessed together. This is achieved through an overarching written evaluation, narrative or reflection that aims to demonstrate the integration of student's cognitive, critical and analytical skills with practice, by cross referencing and interlinking their writing with the evidence of learning outcomes and competence presented in the portfolio.

Fig 1: The Cake Mix model (Endacott et al., 2004)



Within the redesigned portfolio the student will present evidence to meet both the module learning outcomes and the practice competencies of the Advanced Practice Framework. Learning outcomes are achieved through the presentation of critically reflective or evaluative written work that draws on and is cross referenced to the evidence in the portfolio gathered to demonstrate achievement of the practice competencies.

To enable this process further, the portfolio is not placed in each module as this was found to be too difficult for the students when situated in the theoretical modules such as research methods, but has been divided between practice based modules. The objective, however, is to facilitate students to integrate theory drawn from across the programme of study with the development of practice competency. Within these modules, the Portfolio becomes 100% of the assessment strategy. In each portfolio there is a weighted written task that asks students to narrate and cross reference the evidence in the portfolio to demonstrate achievement of the learning outcomes.

The demonstration of cross referencing between written work, learning outcomes, evidence and practice competency will also enhance the triangulation of evidence in the portfolio – this is important as it ensures ‘completeness’ of portfolio evidence (Endacott et al., 2004). As part of this ‘completeness’ students must cross reference to relevant evidence of either direct observation and/or if more appropriate, to supervisory discussion, for their practice competencies. This is because the most important aspect of competence assessment is direct observation, accompanied by discussion and supervision (Storey, 2002). This aims to overcome previous external examiners concern that students can pass the portfolio theoretically without being competent in the role. To avoid over assessment, however, it is stressed that individual pieces of evidence (i.e. an observation) may contribute to demonstrating achievement of a number of learning and practice outcomes. The portfolio will be marked for academic level, using the academic marking criteria for level 7.

Exit Awards

Having studied 60 credits, students may exit with a Postgraduate Certificate having studied *Clinical Assessment in Advanced Practice* and *non-medical prescribing* OR *Clinical Assessment in Advanced Practice, Clinical Pharmacology for Advanced Practice* and an *negotiated/optional module (for non-prescribing practitioners)* for the advanced clinical practice generic route; *assessment and intervention, clinical evaluation* and either *Clinical Pharmacology for Advanced Practice* or a *negotiated/optional module* for the therapies route.

Students wishing to exit with a Postgraduate Diploma will have studied 120 credits. All students will have studied *Research Methods* and *Advancing Clinical Practice* plus either a negotiated module or an optional module. In this way, students will have a structured approach that meets their professional needs, but which allows shared learning across disciplines to take place. As the students are practitioners working in a multi-professional environment in clinical practice, this framework of common elements with the opportunity for optional modules builds on multi-professional learning, but promotes the development of the students' professional practice within their own speciality.

Following completion of the taught element and progression having been conferred at the September award board, students will study the dissertation module. This is a module that is core to all health Masters programmes and which allows a variety of approaches to the final project. Within the advanced practice curriculum, it is expected that students will direct their enquiry to a topic important to them as practitioners, and to which they will bring a level of enquiry that demonstrates, and is related to, their position as an advanced practitioner.

17 Programme structure diagram

Post-Graduate Certificate in Clinical Practice/ Post-Graduate Certificate in Clinical Practice (Therapies) (Part Time)

	Trimester 1	Trimester 2	Trimester 3
MSc ACP OR	Clinical Assessment (Core) 20 credit	V300 (Option) 40 credit	
MSc ACP OR	Clinical Assessment (Core) 20 credit	Pharmacology (Option) 20 credit	Negotiated/option 20 credit
MSc ACP (Therapies)	Assessment and Intervention in Allied Health (Core) 20 credit	Clinical Evaluation in Allied Health (Core) 20 credit	
		Negotiated/option 20 credit in trimester 2 OR 3	Negotiated/option 20 credit in trimester 2 OR 3

Post-Graduate Certificate in Clinical Practice

The table above demonstrates the relationship between the core and optional modules in year one. If students take Non-Medical Prescribing (40 credits) they will not take another optional module, but if students choose not to take prescribing, they may choose two 20 credit modules over trimesters two and three.

Post-Graduate Certificate in Clinical Practice (Therapies)

The table demonstrates that the core modules run across all three trimesters for therapies students, with the optional modules available in trimesters two and three and a negotiated module available as an option in trimester one.

Post-Graduate Diploma in Clinical Practice/ Post-Graduate Diploma in Clinical Practice (Therapies) (Part Time)

	Trimester 1	Trimester 2	Trimester 3
MSc ACP	Advancing Clinical Practice (Core) 20 credits		Negotiated/option 20 credits in trimester 2 OR 3
	Research Methods (Core) 20 credits	Negotiated/option 20 credits in trimester 2 OR 3	
MSc ACP (Therapies)	Advancing Clinical Practice (Core) 20		Negotiated/option 20 credits in trimester 2 OR 3
	Research Methods (Core) 20 credits	Negotiated/option 20 credits in trimester 2 OR 3	

In the above table, all students will take Research Methods in trimester one and will begin Advancing Clinical Practice. Advancing Clinical Practice will continue throughout trimester two with one optional or negotiated module available in either trimester two or three.

No part time student would be *expected* to take more than 60 credits in any academic year, with the exception of students who need to undertake a further 20 credit level 7 module where they have undertaken non-medical prescribing at level six.

Post-Graduate Diploma in Clinical Practice (Full Time) *Indicative timetable*

Over ONE academic Year	Indicative day of delivery – NB – please check with programme team as this may be subject to change	Trimester 1	Trimester 2	Trimester 3
	Monday	Practice		
	Tuesday	Clinical Assessment 20 credits	Pharmacology 20 credits	Clinical Diagnostics 20 credits
	Wednesday	Advancing Clinical Practice 20 credits		Chronic Disease management 20 credits
		Research Methods 20 credits		
	Thursday	Practice		
Friday	Study			

MSc Advanced Clinical Practice/ MSc Advanced Clinical Practice (Therapies) Dissertation year

MSc ACP	Dissertation 60 credits (Core)
MSc ACP (Therapies)	Dissertation 60 credits (Core)

As shown above, all students will undertake the dissertation module. Students will be expected to continue their dissertation studies once the taught element has been completed. Students will be given instruction and support in their dissertation proposal and will then receive one to one tutorials with their nominated dissertation supervisor. For students who have undertaken the full time post graduate diploma, submission of dissertations will be the third week of January following progression to dissertation at the September board. This enables fulfilment of requirements of the partner organisation.

In the two taught years presented in the tables above, where there are optional/negotiated modules listed, students will be able to choose from the available options below. Students are advised to discuss this with either Helen Carey or Joanne Pike as appropriate.

Optional 20 credit modules

- Chronic disease management
- Clinical diagnostics
- Clinical pharmacology for advanced practice
- Health promotion
- Leading through caring within organisations
- Learning and teaching in practice
- Mentorship in the practice
- Negotiated module in advancing clinical practice
- Minor illness assessment and management
- Narratives: argument and accountability
- Principles of public health
- Transforming health service delivery through effective leadership
- Negotiated module in enhancing professional practice (level 6)

Optional 40 credit modules

- Supplementary prescribing for Allied health professionals at level 7
- Independent prescribing for pharmacists
- Independent/supplementary prescribing for nurses (V300) at level 7
- Independent/supplementary prescribing for Allied health professionals at 7
- Minor injury assessment and Management

18 Intended learning outcomes of the programme

The overall aims of the Masters award are to enable experienced professionals:

- to develop a systematic and critical knowledge and understanding of their specialist field of practice
- to develop a critical awareness of current problems, gaining new insights at the forefront of their area of advanced practice that enable further strategic development of practice and practice knowledge
- to enable practitioners to inform, enhance and develop their competency within their field of practice
- to demonstrate advanced scholarship in their subject area through the planning and execution of level 7 enquiry

MSc Advanced Clinical Practice Programme Learning Outcomes

Knowledge and understanding	
Level 7	
A1	Demonstrate a systematic understanding of biological, physiological, psychological, sociological and socio-political knowledge to justify and underpin advanced clinical practice. For example: 1. In the biological sciences as it pertains to human physiology and pathophysiology in order to enable them to assess, diagnose and manage a range of conditions; 2. of theories drawn from the behavioural and social sciences that will enable them to understand and care effectively, ethically and sensitively with patients from diverse cultural and socio-economic backgrounds; 3. of theories pertaining to leadership and decision making in professional practice; 4. of the theory and practice of health promotion.
A2	Utilise a comprehensive knowledge and understanding of techniques applicable to research, of research planning, execution and reporting and advanced scholarship to investigate advanced clinical practice; demonstrating a critical awareness of current problems and/or new insights informed by the current evidence base, practice experience and scholarly enquiry.
A3	Synthesise and apply knowledge to solve complex practice problems and to form safe and effective solutions within an area of advanced clinical practice.
A4	Evaluate and critique methodologies, propose, develop and implement new areas of enquiry in an aspect of advanced clinical practice.

Intellectual skills	
Level 7	
B1	Deal with complex issues both systematically and creatively, make sound judgements, possibly in the absence of complete data, and communicate their conclusions clearly to professional and non- professional individuals/groups.
B2	Demonstrate self-direction and originality in tackling and solving problems together with the ability to act autonomously in leading and managing care in their area of advanced practice.

Intellectual skills	
	Level 7
B3	Analyse critically the theoretical, research and practice underpinnings of advanced clinical practice as a means of developing their professional knowledge and understanding, and developing new skills to a high level.

Subject skills	
	Level 7
C1	Demonstrate competence in the skills required to carry out a comprehensive clinical examination/assessment and carry out technical procedures required in the diagnosis or treatment of patients/clients within their field of practice where necessary.
C2	Demonstrate a high level of consultation and inter-personal communication skills, leading others in advancing an area of advanced clinical practice.
C3	Demonstrate the research skills to propose and execute a systematic process of enquiry into an area of advanced clinical practice.

Subject skills	
	Level 7
D1	Exercise initiative and personal responsibility.
D2	Make decisions in complex and unpredictable situations.
D3	Demonstrate independent learning ability required for continuing professional development.

The overall aims of the Postgraduate Diploma are to enable experienced professionals:

- to develop a systematic and critical knowledge and understanding of their specialist field of practice
- to develop a critical awareness of current problems, gaining new insights at the forefront of their area of advanced practice that enable further strategic development of practice and practice knowledge
- to enable practitioners to inform, enhance and develop their competency within their field of practice.

Post Graduate Diploma Learning Outcomes

Knowledge and understanding	
	Level 7
A1	Demonstrate a systematic understanding of the biological, physiological, psychological, sociological and socio-political knowledge to justify and underpin advanced clinical practice. For example: 1. In the biological sciences as it pertains to human physiology and pathophysiology in order to enable them to assess, diagnose and manage a range of conditions; 2. of theories drawn from the behavioural and social sciences that will enable them to understand and care effectively, ethically and sensitively with patients from diverse cultural and socio-economic backgrounds; 3. Of theories pertaining to leadership and decision making in professional practice; 4. of the theory and practice of health promotion.
A2	Utilise a comprehensive knowledge and understanding of techniques applicable to research, of research planning and advanced scholarship, demonstrating a critical awareness of current problems and/or new insights informed by the current evidence base and practice experience.
A3	Synthesise and apply knowledge to solve complex practice problems and to form safe and effective solutions within an area of advanced clinical practice.
A4	Evaluate and critique methodologies, proposing new areas of enquiry in an aspect of advanced clinical practice.

Intellectual skills	
	Level 7
B1	Deal with complex issues systematically in order to make sound judgements, possibly in the absence of complete data, and communicate their conclusions clearly to professional and non- professional individuals/groups.
B2	Demonstrate self-direction in tackling and solving problems together with the ability to act autonomously in leading and managing care in their area of advanced practice.
B3	Analyse critically the theoretical, research and practice underpinnings of advanced clinical practice as a means of developing their professional knowledge and understanding, and developing new skills to a high level.

Subject skills	
	Level 7
C1	Demonstrate competence in the skills required to carry out a comprehensive clinical examination/assessment and carry out technical procedures required in the diagnosis or treatment of patients/clients within their field of practice where necessary.
C2	Demonstrate a high level of consultation and inter-personal communication skills in a variety of settings, leading others in an area of advanced clinical practice.

Subject skills	
	Level 7
D1	Exercise initiative and personal responsibility.
D2	Make decisions in complex and unpredictable situations.
D3	Demonstrate independent learning ability required for continuing professional development.

The overall aims of the Postgraduate Certificate are to enable experienced professionals

- to develop a systematic and critical knowledge and understanding of their specialist field of practice
- to enable practitioners to inform, enhance and develop their competency within their field of practice

Postgraduate certificate in Clinical Practice Programme Learning Outcomes

Knowledge and understanding	
	Level 7
A1	Demonstrate a systematic understanding of the biological, physiological, psychological, sociological and socio-political knowledge used to justify and underpin advancing clinical practice. For example: 1. In the biological sciences as it pertains to human physiology and pathophysiology in order to enable them to assess, diagnose and manage a range of conditions; 2. Of theories drawn from the behavioural and social sciences that will enable them to understand and care effectively, ethically and sensitively with patients from diverse cultural and socio-economic backgrounds.
A2	Demonstrate a critical awareness of current problems and/or new insights in clinical practice informed by the current evidence base and practice experience.
A3	Synthesise and apply knowledge to solve practice problems and to form safe solutions within an area of clinical practice.
A4	Begin to critically evaluate the evidence base that justifies and supports decisions in clinical practice.

Intellectual skills	
	Level 7
B1	Deal with issues systematically and make safe, sound judgements, referring appropriately and communicating their conclusions clearly to other professionals and to patients and clients, their families and carers.
B2	Begin to demonstrate self-direction in tackling and solving more complex clinical problems.

Intellectual skills	
	Level 7
B3	Analyse critically the theoretical, research underpinnings of their clinical practice as a means of developing their professional knowledge and understanding, and developing new clinical skills.

Subject skills	
	Level 7
C1	Demonstrate competence in the skills required to carry out a comprehensive clinical examination/assessment and carry out technical procedures required in the diagnosis or treatment of patients/clients within their field of practice where necessary.
C2	Demonstrate a high level of consultation and inter-personal communication skills in a variety of settings.

Subject skills	
	Level 7
D1	Begin to exercise initiative and personal responsibility in more complex situations.
D2	Demonstrate independent learning ability required for continuing professional development.

MSc Advanced Clinical Practice (Therapies) Programme Learning Outcomes

Knowledge and understanding	
	Level 7
A1	Demonstrate the application of concepts of clinical reasoning, reflection and client centred practice in areas of assessment, intervention and outcome measurement for their specific allied health profession.
A2	Utilise a comprehensive knowledge and understanding of techniques applicable to research, of research planning, execution and reporting and advanced scholarship to investigate advanced clinical practice; demonstrating a critical awareness of current problems and/or new insights informed by the current evidence base, practice experience and scholarly enquiry.
A3	Synthesise and apply knowledge to solve complex practice problems and to form safe and effective solutions within an area of advanced clinical practice.
A4	Evaluate and critique methodologies, propose, develop and implement new areas of enquiry in an aspect of advanced clinical practice.

Intellectual skills	
	Level 7
B1	Deal with complex issues both systematically and creatively, make sound judgements, possibly in the absence of complete data, and communicate their conclusions clearly to professional and non- professional individuals/groups.
B2	Demonstrate self-direction and originality in tackling and solving problems together with the ability to act autonomously in leading and managing care in their area of advanced practice.
B3	Analyse critically the theoretical, research and practice underpinnings of advanced practice as a means of developing their professional knowledge and understanding, and developing new skills to a high level.

Subject skills	
	Level 7
C1	Demonstrate competence in the skills required to carry out a comprehensive client-centred assessment and carry out technical procedures required in the assessment, intervention and outcome measurement for patients/clients within their field of practice where necessary.
C2	Demonstrate a high level of consultation and inter-personal communication skills, leading others in advancing an area of advanced clinical practice.
C3	Demonstrate the research skills to propose and execute a systematic process of enquiry into an area of advanced clinical practice.

Subject skills	
	Level 7
D1	Exercise initiative and personal responsibility.
D2	Make decisions in complex and unpredictable situations.
D3	Demonstrate independent learning ability required for continuing professional development.

The overall aims of the Postgraduate Diploma are to enable experienced professionals:

- to develop a systematic and critical knowledge and understanding of their specialist field of practice
- to develop a critical awareness of current problems, gaining new insights at the forefront of their area of advanced practice that enable further strategic development of practice and practice knowledge
- to enable practitioners to inform, enhance and develop their competency within their field of practice

Post Graduate Diploma (Therapies) Learning Outcomes

Knowledge and understanding	
	Level 7
A1	Demonstrate the application of concepts of clinical reasoning, reflection and client centred practice in areas of assessment, intervention and outcome measurement for their specific allied health profession.
A2	Utilise a comprehensive knowledge and understanding of techniques applicable to research, of research planning and advanced scholarship, demonstrating a critical awareness of current problems and/or new insights informed by the current evidence base and practice experience.
A3	Synthesise and apply knowledge to solve complex practice problems and to form safe and effective solutions within an area of advanced practice.
A4	Evaluate and critique methodologies, proposing new areas of enquiry in an aspect of advanced practice.

Intellectual skills	
	Level 7
B1	Deal with complex issues systematically in order to make sound judgements, possibly in the absence of complete data, and communicate their conclusions clearly to professional and non- professional individuals/groups.
B2	Demonstrate self-direction in tackling and solving problems together with the ability to act autonomously in leading and managing care in their area of advanced practice.
B3	Analyse critically the theoretical, research and practice underpinnings of advanced professional allied health practice as a means of developing their professional knowledge and understanding, and developing new skills to a high level.

Subject skills	
	Level 7
C1	Demonstrate competence in the skills required to carry out a comprehensive client-centred assessment and carry out technical procedures required in the assessment, intervention and outcome measurement for patients/clients within their field of practice where necessary.
C2	Demonstrate a high level of consultation and inter-personal communication skills in a variety of settings, leading others in an area of advanced practice.

Subject skills	
	Level 7
D1	Exercise initiative and personal responsibility.
D2	Make decisions in complex and unpredictable situations.
D3	Demonstrate independent learning ability required for continuing professional development.

The overall aims of the Postgraduate Certificate are to enable experienced professionals:

- to develop a systematic and critical knowledge and understanding of their specialist field of practice
- to enable practitioners to inform, enhance and develop their competency within their field of practice

Postgraduate certificate in Clinical Practice (Therapies) Programme Learning Outcomes

Knowledge and understanding	
	Level 7
A1	Demonstrate the application of concepts of clinical reasoning, reflection and client centred practice in areas of assessment, intervention and outcome measurement for their specific allied health profession.
A2	Demonstrate a critical awareness of current problems and/or new insights in clinical practice informed by the current evidence base and practice experience.
A3	Synthesise and apply knowledge to solve practice problems and to form safe and effective solutions within an area of clinical practice.
A4	Begin to evaluate critically the evidence base that justifies and supports decisions in clinical practice.

Intellectual skills	
	Level 7
B1	Deal with issues systematically and make safe, sound judgements, referring appropriately and communicating their conclusions clearly to other professionals and to patients and clients, their families and carers.
B2	Demonstrate self-direction in tackling and solving more complex clinical problems.
B3	Analyse critically the theoretical, research underpinnings of their practice as a means of developing their professional knowledge and understanding, and developing new clinical skills.

Subject skills	
	Level 7
C1	Demonstrate competence in the skills required to carry out a comprehensive client-centred assessment and carry out technical procedures required in the assessment, intervention and outcome measurement for patients/clients within their field of practice where necessary.
C2	Demonstrate a high level of consultation and inter-personal communication skills in a variety of settings.

Subject skills	
	Level 7
D1	Begin to exercise initiative and personal responsibility in more complex situations.
D2	Demonstrate independent learning ability required for continuing professional development.

19 Curriculum matrix

To demonstrate how the overall programme outcomes are achieved and where skills are developed and assessed within individual modules.

MSc Advanced Clinical Practice

<i>Module Title</i>	<i>Core or option?</i>	<i>A1</i>	<i>A2</i>	<i>A3</i>	<i>A4</i>	<i>B1</i>	<i>B2</i>	<i>B3</i>	<i>C1</i>	<i>C2</i>	<i>C3</i>	<i>D1</i>	<i>D2</i>	<i>D3</i>
Clinical Assessment in Advanced Practice	Core	■	■	■	■	■	■	□ ■	■	■	□	■	■	
Research Methods	Core	□	■	■	■	□	■	■	□	□	■	□	□	■
Advancing Clinical Practice	Core	■	□	■	■	■	■	■	□	■	■	■	■	■
Dissertation	Core	■	■	■	■	■	■	■			■	■	■	■

Post Graduate Diploma Clinical Practice

<i>Module Title</i>	<i>Core or option?</i>	<i>A1</i>	<i>A2</i>	<i>A3</i>	<i>A4</i>	<i>B1</i>	<i>B2</i>	<i>B3</i>	<i>C1</i>	<i>C2</i>	<i>D1</i>	<i>D2</i>	<i>D3</i>
Clinical Assessment in Advanced Practice	Core	■	□ ■	■	□ ■	■	■	□ ■	■	■	■	■	
Research Methods	Core	□	■	■	■	□	■	■	□		□	□	■
Advancing Clinical Practice	Core	■	□	■	■	■	■	■	□	■	■	■	■

Post Graduate Certificate Clinical Practice

<i>Module Title</i>	<i>Core or option?</i>	<i>A1</i>	<i>A2</i>	<i>A3</i>	<i>A4</i>	<i>B1</i>	<i>B2</i>	<i>B3</i>	<i>C1</i>	<i>C2</i>	<i>D1</i>	<i>D2</i>
Clinical Assessment in Advanced Practice	Core	■	■	■	■	■	■	■	■	■	■	■

MSc Advanced Clinical Practice (Therapies)

<i>Module Title</i>	<i>Core or option?</i>	<i>A1</i>	<i>A2</i>	<i>A3</i>	<i>A4</i>	<i>B1</i>	<i>B2</i>	<i>B3</i>	<i>C1</i>	<i>C2</i>	<i>C3</i>	<i>D1</i>	<i>D2</i>	<i>D3</i>
Assessment and intervention	Core	■	■	■	□ ■	■	■	□ ■	■	■	□	■	■	
Clinical Evaluation	Core	■	■	■	□ ■	■	■	□ ■	■	■	□	■	■	
Advancing Clinical Practice	Core	■	□	■	■	■	■	■	□	■	■	■	■	■
Research Methods	Core	□	■	■	■	□	■	■	□	□	■	□	□	■
Dissertation	Core	■	■	■	■	■	■	■			■	■	■	■

Post Graduate Diploma Clinical Practice (Therapies)

<i>Module Title</i>	<i>Core or option?</i>	<i>A1</i>	<i>A2</i>	<i>A3</i>	<i>A4</i>	<i>B1</i>	<i>B2</i>	<i>B3</i>	<i>C1</i>	<i>C2</i>	<i>D1</i>	<i>D2</i>	<i>D3</i>
Assessment and intervention	Core	■	■ □	■	□ ■	■	■	■ □	■	■	■	■	
Clinical Evaluation	Core	■	□ ■	■	□ ■	■	■	■ □	■	■	■	■	
Research Methods	Core	□	■	■	■	□	■	■	□		□	□	■
Advancing Clinical Practice	Core	■ □	□	■	■	■	■	■	□	■	■	■	■

Post Graduate Certificate Clinical Practice (Therapies)

<i>Module Title</i>	<i>Core or option?</i>	<i>A1</i>	<i>A2</i>	<i>A3</i>	<i>A4</i>	<i>B1</i>	<i>B2</i>	<i>B3</i>	<i>C1</i>	<i>C2</i>	<i>D1</i>	<i>D2</i>
Assessment and intervention	Core	■	■	■	■	■	■	■	■	■	■	■
Clinical Evaluation	Core	■	■	■	■	■	■	■	■	■	■	■

20 Learning and teaching strategy

The learning, teaching and assessment strategy aims to foster a student centred, creative approach to learning and teaching, which will enhance the capabilities and employability of practitioners. As students taking either of these two programmes will be qualified and experienced practitioners it is essential that the approach to learning and teaching used throughout reflects and builds upon students' prior learning and clinical experience. To this end a variety of learning and teaching methods are used in modules. These include classroom-based lectures, discussions, seminars, workshops, and tutorial sessions, together with case-based learning supported by internet-based resources. The facilitation of learning within the subject area is therefore grounded in philosophies of student-centred, andragogic principles of teaching and learning (Knowles, 1980). There is a wealth of experience within the Institute of Health, Medicine and Society of delivery through partnership with workplace mentors and Designated Supervising Medical Practitioners (DSMPs), on-line tutoring, work-based learning, assessment by portfolio, and, the more standard, face-to-face teaching.

Case and problem centred learning is an important part of the learning and teaching strategy. Case-based learning focuses on the building of knowledge, analysis and evaluation of situations and by involving students in striving to resolve questions that have no single right answer enables achievement of programme outcomes related to complex problem solving. Course participants will be enabled to develop these critical and problem-solving skills by engaging in facilitated group work/ discussion. These strategies give students the opportunity to share the wide range of perspectives gained through independent learning and practice enabling them to critically explore and evaluate shared problems. Small group activity and discussion allows opportunity to focus on real time practice problems and helps develop the ability to relate these to relevant theory, legal and policy frameworks, ethics and values in order to help integrate this learning into practice. Group activities will be facilitated within the university environment, but can also be supported by via Moodle VLE.

In modules with a practice element, an experiential strategy, including observation and supervision is used to meet the module outcomes and practice competencies. Simulation facilities enhance practice skills acquisition and assessment and decision-making skills.

Negotiated Learning – Management of Negotiated Modules

A four-step process has been in place for some time and has proved effective in assuring the quality of negotiated learning.

Step 1: The need to develop a learning contract or learning package specification within the framework of negotiated modules is initially discussed with the Module Leader, who is also the Programme Leader. At this point the viability and the most cost-effective means of meeting the need are reviewed.

Step 2: Once the development of the learning package is agreed in principle, the Programme Leader brings the proposal to the first available Team Meeting (of which he/she is a member) where any resource implications are discussed.

Step 3: Following agreement by the team, the learning package specification/timetable is put together with the service provider commissioning the package. At the next monthly Programme Team Meeting (PTM), the learning package is discussed to ensure its academic soundness and coherence with the overall programme outcomes.

Step 4: Following discussion at the Programme Team Meeting, the changes recommended, if any, by this 'panel' are then implemented by the Programme Leader.

Individual learning contracts are developed with the student and the Programme Leader. These are then scrutinised as in Steps 3 and 4 and the learning contract printed and stored in the student record.

21 Work based/placement learning statement

Where assessment of practice-based learning is required, formal arrangements for ensuring quality are in place. These are:

- a. Educational audit of the placement to ensure the environment is appropriate to the student's learning needs;
- b. Formal preparation of DSMP's and clinical mentors for mentoring and assessing students;
- c. Annual updates of clinical mentors and DSMP's;
- d. Written information for both students and clinical mentors which give clear guidance about the practice requirements of the module;
- e. Visits by the module leader to the placement to discuss the progress of students with the student and his/her DSMP or clinical mentor.

The quality of the student's practice-based learning is evaluated at the end of the learning experience. External examiners are encouraged to visit practice placements as appropriate.

Students will be facilitated both from within classroom activities and through engagement with their DSMP/Clinical Mentor to construct learning from practice experience. In this way learning emerges from and is integrated back into practice, enabling it to be of the highest relevance to the student.

When students enrol for relevant modules, they will be provided with a portfolio document for that module which is centred round the module outcomes, and practice competencies. This will be an important developmental tool in guiding learning towards the achievement of learning outcomes and competencies, providing a framework with which students can be facilitated to monitor and evaluate their development throughout the programme. This approach is consistent with the programmes use of adult and experiential learning theory and philosophy (Klenowski, 2002) and enables an effective means of integrating theory and practice.

Designated Supervising Medical Practitioners (DSMP's) or clinical mentors will support students in practice (see individual modules for practice hours required) assessing relevant student competencies, providing evidence of supervision and discussion within the portfolio. DSMP's/mentors will sign that a student has achieved the relevant competencies/outcomes identified in the portfolio from a practice perspective.

Criteria for becoming a Designated Supervising Medical Practitioner (Clinical Assessment in Advanced Practice Module and Non-Medical Prescribing Modules)

The DSMP must be a registered medical practitioner who:

- Has normally had at least three years' recent clinical experience for a group of patient/clients in the relevant field of practice
- Is within a GP practice and is either vocationally trained or is in possession of a certificate of equivalent experience from the Joint Committee for Post-Graduate Training in General Practice Certificate or is a specialist registrar, clinical assistant or a consultant within a NHS Trust or other NHS employer
- Has the support of the employing organisation or GP practice to act as the DSMP who will provide supervision, support and opportunities to develop competence in prescribing practice
- Has some experience or training in teaching and/or supervising in practice (for example, teaching and assessing medical students, teaching other healthcare students)
- Normally works with the trainee. If this is not possible (such as in practitioner – led services or community pharmacy), arrangements can be agreed for another doctor to take on the role of the DSMP, provided the above criteria are met and the learning in practice relates to the clinical area in which the trainee will ultimately be carrying out their role.

Klenowski, V. (2002) *Developing Portfolios for Learning and Assessment, Process and Principles*. London: Routledge

22 Welsh medium provision

The programmes will be delivered through the medium of English, but tutorials can be provided through the medium of Welsh.

Students are entitled to submit assessments in the medium of Welsh. Where a need for Welsh medium assessment has been identified and no appropriate Welsh speaking tutor/assessor is available, the written assessment will be translated into English. This translation will be conducted by University qualified translators.

For those students who wish to learn Welsh or to improve their Welsh, there are a range of courses available, with subject-specific courses available for those studying health-related subjects. Further, the Second Language Learning Centre can help those whose first language is not English. These services are found on Moodle.

23 Assessment strategy

Formative Assessment

Formative feedback is provided on all modules through sampling student's formative academic writing and through group feedback on progress. Students who are struggling to achieve academic level, particularly those lacking study skills will be referred to study skills tutors or the wider student support services. Where students are undertaking practice based learning, portfolio development and OSCE practice assessment, DSMP's and Clinical mentors will be expected to provide regular feedback on students' progress and identify to the Route/Module Leader at the earliest opportunity if a student is not making good progress. A tripartite action plan will be made between DSMP/Clinical mentor, student and Module or Route Leader. Formative feedback dates are applied to all practice assessments to ensure that all students have maximum support and opportunity to meet the assessment criteria. Feedback is provided on draft work in the form of written commentary and this will normally be at least 3 weeks before submission. Work submitted for feedback in the two weeks prior to summative feedback will no longer be reviewed due to its probable near completeness.

Summative Assessment

The summative assessment strategy provides a variety of assessment methods in order to enable the demonstration of programme outcomes, including knowledge and understanding, intellectual and subject specific skills and transferable professional development. As identified in module specifications, assessment methods demonstrate achievement of module learning outcomes commensurate with the award outcomes. The assessment strategy is student centred, with assessments designed so that students can select a relevant practice focus within their assessment. Assessment has also been designed to ensure that students have a feasible but relevant workload, with connections drawn between the theoretical and practice throughout each module. In order to ensure equity and fairness, all assessments, including observations of practice are criterion referenced. Students will be provided with their assessment brief at the beginning of the module in order to give them the maximum time to complete the assessment task. Theoretical assignments and portfolios will be marked against level 6 or level 7 assessment criteria as demanded by the level of module. Feedback on summative work is provided through Moodle three weeks following the hand in date.

Any work which breaches confidentiality will be referred. Confidentiality applies to any situation where evidence or information, not already in the public domain, with regard to persons or places has been identified. All module and programme outcomes are assessed. University assessment regulations apply except where derogation has been sought and approved. There are normally two attempts at any assessment in both theoretical and practice elements. Please see the assessment schedule for details of the assessment approaches on each programme.

Assessment Schedule MSc Advanced Clinical Practice

Module code & title: Core Modules	Assessment type and weighting	Assessment loading	Indicative submission date
NHS777 Clinical Assessment in Advanced Practice Trimester 1	Portfolio 100% OSCE Pass/Refer 60 hours of practice	3,000 words	Week 26 Trimester 1
NHS744 Research Methods Trimester 1	Essay 100%	4,000 words	Week 26 Trimester 1
NHS780 Advancing Clinical Practice Trimesters 1, 2	Portfolio 60% Presentation 40% A total of 600 hours of practice over two taught years	3-4,000 words 27pprox.. 20 minutes	Week 43 Trimester 2
NHS703 Dissertation	Dissertation 100%	Max 15,000 words	Week 28, 45 or 53 (dependent on methodology)

Module code & title: Optional modules for both routes	Assessment type and weighting	Assessment loading	Indicative submission date
NHS782 Clinical Pharmacology for Advanced Practice Trimester 2	Portfolio 70% Written examination 30% 60 hours of practice	3,500 words 1 hour	Week 46 Trimester 3
NHS755 Health Promotion Trimester 2	Essay 60% Group project 40%	3,000 words 20 minutes	Week 43 Trimester 2
NHS756 Principles of Public Health	Group Project 30% Report 70%	2,000 words 3,000 words	Week 43 Trimester 2
NHS753 Leading through caring within organisations	Essay 70% Reflective Practice 30%	3,000 words 1,500 words	Week 43 Trimester 2
NHS754 Transforming Health Service Delivery through Effective Leadership	Essay 80% Presentation 20%	3,000 words 20 minutes	Week 43 Trimester 2
NHS759 Learning and Teaching in Practice	Presentation 30% Portfolio 70% 120 hours of practice	20 minutes 3,500 words	Week 43 Trimester 2
NHS760 Mentorship in practice	Portfolio 100% 32.5 hours of practice	4,000 words	Week 43 Trimester 2
NHS758 Clinical Diagnostics Trimester 3	OSCE Exam 100% 60 hours of practice	30 minutes 1 hour	Week 50 Trimester 3
NHS781 Chronic Disease Management Trimester 3	Case Study 100% 60 hours of practice	4,000 words	Week 50 Trimester 3

NHS726 Negotiated Module in Advancing Clinical Practice	Negotiated learning contract 100% Up to 60 hours of practice	4,500 words	Week 43 Trimester 2 or Week 50 Trimester 3
NHS783 Negotiated Module in Advancing Practice (Therapies)	Negotiated learning contract 100% Up to 60 hours of practice	4,500 words	Week 43 Trimester 2 or Week 50 Trimester 3
NHS784 Narratives: Argument and accountability	Essay 100%	5,000 words	
NHS736/770/775/HLT704 Non-Medical Prescribing modules Trimester 2 & 3	Portfolio 20% Reflective Practice 40% Clinical Management Plan 40% OSCE Pass/Refer Unseen examination Pass/Refer Between 78 and 90 hours of practice dependent on route	1,500 words 2,500 words 2,500 words	Week 50 Trimester 3
NHS654 Negotiated module in Enhancing Professional Practice (Level 6)	Negotiated learning	100%	Week 43 Trimester 2 or Week 50 Trimester 3
Minor Illness Assessment and Management	Assignment Poster		Week 37
Minor Injuries Assessment and Management	OSCE Assignment		Week 48 Week 50

Assessment Schedule MSc Advanced Clinical Practice (Therapies)

** Note: optional modules as above **

Module code & title	Assessment type and weighting	Assessment loading	Indicative submission date
NHS778 Assessment and Intervention in Allied Health Trimester 1	Presentation 50% Case Study 50% 60 hours of practice	30 mins 3,000 words	Week 26 Trimester 1
NHS779 Clinical Evaluation in Allied Health Trimesters 2 & 3	Essay 100% 60 hours of practice	4,000 words	Week 52 Trimester 3
NHS744 Research Methods Trimester 1	Essay 100%	4,000 words	Week 26 Trimester 1
NHS780 Advancing Clinical Practice Trimesters 1, 2	Portfolio 60% Presentation 40%	3-4,000 words approx. 20 minutes	Week 43 Trimester 2

	A total of 600 hours of practice over two taught years		
NHS703 Dissertation Trimesters 1, 2 & 3	Dissertation 100%	Max 15,000 words	Week 53 Trimester 3

24 Assessment regulations

Regulations for Taught Masters Degrees (incorporating International Pre-Masters Programme)

Derogations

Derogations currently exist within the non-medical prescribing programmes, which have been previously validated. No change to these derogations is sought.

In addition:

Any work submitted, however competent from an academic viewpoint, which omits or includes information which would indicate unsafe practice by the student or in any way breaches confidentiality will be deemed a 'refer'. Students who fail to demonstrate competence or endanger patients by acts or omissions in practice may be subject to Glyndŵr University's Suitability for Practice Procedures as well as any invoked by their employer. Any decision to invoke the Suitability for Practice Procedures will be taken by the Programme Leader in consultation with the Associate Dean following discussion with the student, Practice Mentor/DSMP and the Service Manager.

There will be no condonement allowed for any assessment, thus all elements of a module must be passed.

Non-credit bearing assessment

None

Borderline classifications (for undergraduate programmes only)

NA

Restrictions for trailing modules (for taught masters programmes only)

Any modules carrying clinical hours cannot not be trailed to the dissertation year. This is because the practice element of the course is substantial and is assessed. Modules carrying a practice element are: Clinical Assessment in Advanced Practice, Advancing Clinical Practice, Clinical Pharmacology for Advanced Practice, Assessment and Intervention, Clinical Evaluation, Clinical Diagnostics, Chronic Disease Management, Learning and Teaching in Practice, Mentorship in Practice and the Negotiated Module in Advancing Clinical Practice/ Negotiated Module in Advancing Clinical Practice (therapies) module.

25 Programme Management

Programme leader

Dr Joanne Pike Advanced Clinical Practice
Helen Carey Advanced Clinical Practice (Therapies)

Programme team

Liz Cade
Yolanda Evans
Gilly Scott
Dr Nikki Lloyd Jones
Rhiannon MacPherson
Eleri Mills

Bethan Owen-Booth
Tracy Ross
Edna Astbury-Ward

Quality Management

The existing Institutional structures for monitoring quality are well established and offer a satisfactory framework for academic management. The current system offers a management structure for the programmes which consists of:

University Level

- Standards and Quality Committee
- Student and Programmes Centre (responsible for tracking students and student outcomes)

Subject Level

- Subject Meetings (Monthly)
- Subject AMR Meetings (bi-annual)
- Academic Faculty Boards (three times per year)

Programme Level

- Programme Team Meetings
- Assessment Boards
- Annual Monitoring Report

The system of programme management and accountability operates principally at subject level. At the University level the Student and Programmes Centre deals with student enrolment and tracking. The management and oversight of the quality of programmes are the remit of the Programme Leader who is accountable, in turn, to the Associate Dean. Monitoring and development of programmes is addressed by programme and assessment boards.

The Programme Team will meet on a regular basis as a means of quality assuring the programme. The Programme Team Meeting will be chaired by the Programme Leader and attended by all module leaders and lecturers. This will report to the Subject Team meetings.

Academic Faculty Boards review retention and student satisfaction and experience, implementing actions and review and rationalise the curriculum for the enhancement of the quality of learning opportunities for students. In addition, they aim to develop and implement local learning, teaching and assessment plans aligned with the University learning, teaching and assessment strategy and make recommendations for future curriculum development and on-going rationalisation of the curriculum. Finally, the Academic Faculty Boards will consider academic developments, including new programme proposals and amendments to programmes, and collaborative activity across the Faculty ensuring that research and scholarship underpins curriculum delivery across the Faculty.

The Programme Leader convenes a Staff Student Consultative Committee (SSCC) once a semester to allow student representatives to raise issues of quality; this feeds into the programme team meeting. Students on these programmes have a Student Representative for each cohort who is invited to attend the SSCC meetings held each trimester. Because the students are part time and in full time jobs, these meetings have been poorly attended, but as it is important to receive feedback from the students, an on-line questionnaire has been developed. Each student rep is asked to collate responses from the group once per semester, and to feed this through to the programme lead.

Each year an annual report (AMR), which reflects monitoring activities and evaluations of all stakeholders, will be submitted by the Programme Leader, in consultation with all Module Leaders. This is discussed at a specially convened Subject Meeting. Any resource implications or unresolved quality issues are referred to the Associate Dean. Copies of the AMR and the Subject Meeting minutes are then forwarded to the Student and Programmes Centre. In semester two, the Programme team produce a response to the action plans presented at the AMR and this is presented to the Subject team before being sent to the Quality Officer.

Student views are also obtained by the use of module evaluation forms. Given the complexity of maintaining quality on this programme, it is recognised that regular student feedback is essential and has been rolled out centrally. Collated feedback will be available to Programme Leaders through the annual monitoring process. This is open to all Glyndŵr University students, across all programmes and delivery sites. Every student will be invited to complete a standardised on-line questionnaire asking for their feedback on the modules they have studied this year. The questionnaire will be processed using a company called QDP, and outcomes will be made available through the annual monitoring and review process.

The Programme Leader meets students formally with students three times yearly and informally at students' requests. The team operate an 'open-door' policy which has been found valuable by the students.

The Programme team developing this proposal have strong links with external representatives of local services including health, government and education. The course has been designed with their particular comments and experience in mind. Many of the Subject staff on the Programme Team have extensive and on-going, current experience of professional practice.

Practice Quality Assurance

Assuring the quality of student learning in practice based learning modules is given high priority within the subject. The Faculty of Social and Life Sciences is very experienced in the monitoring of the quality of clinical placements. Monitoring of the quality of practice learning has been a requirement of PSRBs for many years. The standards used more than meet the expectations described in the QAA Quality Code (2015).

For modules leading to professional qualifications, quality monitoring, in relation to the individual student experience, commences before the programme begins. When a student applies for the programme, discussion takes place about the learning opportunities and supervisory arrangements in the clinical placement. The identification of an appropriate supervisor is a clearly stated entry requirement. At the commencement of the course, the Clinical Mentor/Manager is required to develop and complete a placement audit document. On the first visit by the Personal Tutor to the practice placement, the audit is discussed including whether any additional learning experiences are required. The ongoing quality of the placement is monitored during the visits to practice by the Personal Tutor and the quality of the learning experience through the tripartite arrangement of student, Medical Supervisor/Clinical Mentor and Personal Tutor.

Research and scholarship activity

All lecturers on the programmes hold professional qualifications in both their area of practice with many holding an additional professional recordable or registerable qualification relevant to the subject area in which they teach. All either hold or are working towards a Fellowship of the Higher Education Academy and a professionally recognised teaching qualification. Eleri Mills, for example, is currently involved as an External Examiner for non-medical prescribing programmes and Specialist Community Public Health Nursing programmes respectively. Dr Joanne Pike and Eleri Mills undertake monitoring and review and approval activities on behalf of their Professional Statutory and Regulatory Body (PSRB) the Nursing and Midwifery Council (NMC) – activities which allow them to observe, and ‘bring home’ good practice from across the United Kingdom. Joanne Pike and Eleri Mills have been involved in All-Wales review of the Advanced Practice Framework and have been part of a task and finish group on Advanced Practice to make recommendations to the Health Minister. Both are members of the Betsi Cadwaladr University Health Board Advanced Practice Education Group and work and liaise closely with managers, DSMPs and clinical mentors throughout the North Wales Region (BCUHB, Powys Health Board and Wales Ambulance Service Trust). Dr Nikki Lloyd-Jones is researching clinical decision-making in Unscheduled Care, while Joanne Pike is currently evaluating student perceptions of competence development throughout the three years of the course – studies which will inform the curriculum. Dr Nikki Lloyd-Jones is establishing her profile as an expert in the area of ethics of decision-making and her research interest is reflected in her teaching practice and again informs the curriculum.

26 Learning support

Institutional level support for students

The University has a range of departments that offer the support for students as:

- Library & IT Resources
- Language classes and support
- Inclusion services
- Careers Centre and Job Shop
- Chaplaincy
- Counselling & Wellbeing
- Student Funding and Welfare

- International Welfare
- Student and Programmes Centre
- Glyndŵr Students' Union

Faculty support for students

Every student is allocated a Personal Tutor in the first weeks of the programme. The Personal Tutor is someone students can contact to discuss any problems of a non-academic nature. These may relate to their clinical practice placement or personal problems that may affect the student's academic performance. Students will be allocated to tutors according to programme, for example, a therapies student will be allocated to a member of the Occupational Therapy team.

Another forum for discussion is the Staff Student Consultative Committee. Student representatives, who are elected by the students, meet lecturing staff on the programme once a trimester to exchange ideas about the programme. This allows students to communicate their shared concerns in an informal manner, and for the staff to react and respond speedily to address their concerns.

Programme specific support for students

Students on the programme will receive the following forms of student support and guidance:

Admissions. All students on the programme will have the opportunity to discuss their application with staff, and receive appropriate advice and guidance prior to admission. This will include a review of expectations of the programme and clarification of workload and requirements.

The Programme Team are very experienced in supporting post registration students who may be mature individuals with family and other responsibilities and commitments. Wherever possible the Programme Team offer an 'open door' policy in order to deal with any issues on the days when students are in University. Tutorial support may be arranged as part of a workplace visit. When students experience difficulty in meeting assessment deadlines due to these responsibilities, every consideration is given to ensure that an extension is available and students are advised to utilise the extenuating circumstances process if a longer period of mitigation is required. Students may also suspend studies where personal circumstances prevail.

Induction:

The Programme Team lead an induction week for all new students on the programme, where students are introduced to the Programme, provided with Placement information, updated on academic writing skills and introduced to the IT resources in the University, including the Moodle site. Students have an introductory session to the Library and are able to follow this up with one to one tutorials as required.

Statement of Learning resources:

There is a wealth of experience both within the Faculty, and the wider University, of delivery through partnership, working with employers, workplace teachers and mentors, blended and work-based learning, assessment by portfolio, and classroom teaching. As this proposal builds on existing provision, little is needed in the way of additional learning resources except those identified to accommodate anticipated increased numbers of students which will, of course, bring extra income. The skills lab is set up to support practical learning of clinical skills and is a very useful on-site resource. Academic and administrative staff are already in post and funding is provided through current Welsh Government contracts, self-funding and Health Board funded places. Practice placements already exist to support students on the current programmes. Where expansion of identified placements is necessary for increased student numbers, these will be audited to assure the learning opportunities.

Good library, IT and classroom facilities on campus are already accessible to support the current programmes. As these programmes are building on well-established courses there is a comprehensive library stock already, including periodicals, which have been added to as new publications become available. Part of the programme development process has been to identify and budget for additional library resources and this has been done. The introduction of the new courses will trigger a further review, evaluation and updating, where necessary, of current library stocks and other resources.

Additionally, as students are drawn from a wide area across North and Mid Wales, the links between the Faculty and NHS Local Health Boards or Trusts enable students to have local access to libraries and IT resources. The courses are supported by Moodle VLE with all programme materials being added to the programme site at appropriate times. Students have access to clinical skills and simulation labs which are situated on the main Wrexham campus.

27 Equality and Diversity

Glyndŵr University is committed to providing access to all students and promotes equal opportunities in compliance with the Equality Act 2010 legislation. This programme complies fully with the University's policy on Equality and Diversity, ensuring that everyone who has the potential to achieve in higher education is given the chance to do so.

APPENDIX I
Marking Criteria for Masters Written Work

This applies to Modules with a 40% pass mark

Descriptors	Mark	Classification
Outstanding: Outstanding work showing evidence of independent critical thought and reflection which is, perhaps, of a quality suitable for publication because of its clear and concise presentation. It will show complete command of the subject, considerable originality and a developed understanding of the topic being discussed. A mark of above 90% may be given to work which shows considerable originality and a high level of critical judgement.	80-100%	P A S S
Distinctive: Work in this range will show a significant degree of critical thought, flair and independence, together with sound factual knowledge, directly related to the requirements of the assignment. There should be evidence for wide reading. The structure of the essay should be excellent, with very good organisation of ideas, supporting introduction and conclusions. Work towards the bottom of the range (70-74%) may show evidence for first-class work that is not quite sustained throughout the assignment, minor factual errors or odd passages which do not quite work.	70 -79%	P A S S
Excellent: Work in this range should be essentially sound and convincing, with evidence of very good understanding and solid critical thought. There should be clear evidence for independence of thought and originality of approach. Students should show a thorough understanding of the subject and a broad-based knowledge with an ability to use comparable material. Examples and supporting evidence should be used appropriately. The structure of the work should be sound, with good organisation of ideas, supporting introduction and conclusions.	66-69%	P A S S
Very good pass: Work of this standard should be competent and methodical indicating a clear understanding of the issues in hand and an ability to engage with the controversial aspects. The use of comparative material may be more limited, but examples and supporting evidence should be present. The work will be less accomplished than those in the above category and display less originality in approach. The structure of the assignment should be broadly sound, with good organisation of ideas, supporting introduction and conclusions. All the main points should have been covered, although a few minor issues may have been omitted or glossed over. The writing should be mainly clear of major grammatical errors.	60-64%	P A S S
Good pass: Pieces of work will show some limitations in coverage, and some errors in fact or credible interpretation. There will be a tendency to accept given ideas uncritically and describe rather than analyze. Some more original sections may not quite come off, leading to a few debatable points. All the main points should have been covered, although minor issues may have been omitted or glossed over. The text should be free of major grammatical or other errors.	55-59%	P A S S
Reasonable pass: Work will be solid and competent, show a general understanding of the question/problem, with evidence for a sufficient amount of reading. However, arguments may show a lack of clarity and focus. Obvious points will have been covered, but the subtleties will have been missed. There may be minor factual errors, and shortcomings in terms of coverage, reading, organisation and limited evidence of critical thought. The text will be clear, but may be flawed by grammatical errors that nevertheless do not obscure the meaning.	50-54%	P A S S
Adequate pass:	46 - 50%	P A S S

<p>Answers will show a sufficient understanding of the limitations of the evidence being presented but restricted understanding of the wider context. There will be a tendency to accept received opinions or interpretations or accepted practice with sufficient, but very limited critical and independent thought. Answers will be distinguished from the above by their poor organization reflecting slightly muddled thought.</p>		
<p>Bare Masters pass Work is likely to show limited reading and whole sections may not be wholly pertinent to the question and arguments may show some bias. There will be a poor understanding of context. There may be some factual errors. Significant grammatical errors or structural problems may mar the text, leaving the reader to interpret the sense of the argument.</p>	<p>40 - 45%</p>	<p>P A S S</p>
<p>Refer: Work shows a limited understanding of the essential literature; answers may include much irrelevant material with significant inaccuracies. Work will tend not to be focused on the question/topic or very general. Evidence is likely to be weak and limited, with limited evidence for reading on the subject. Arguments may be poorly organized and difficult to follow and not supported by relevant examples. There will be little evidence of critical thought and the text may be marred by poor English and spelling. Pieces of work towards the bottom end of the scale (0-20%) will show minimal evidence of reading, largely erroneous or irrelevant material and significant problems with grammar and spelling.</p>	<p>- 40 %</p>	<p>R E F E R</p>

Marking Criteria for Level 6 Written Work

Class	%	Criteria
1st A	80-100	Outstanding/Exceptional to Unique Work shows breadth and depth of knowledge & understanding, insight, originality, individual point of view, clarity of arguments, no errors or omissions. Work is enlightening, innovative, analytical, critical, and evaluative, and there is evidence of extensive reading. There are negligible errors in academic writing style (spelling, punctuation, grammar, sentence construction, referencing).
	70-79	Excellent. In <i>most</i> areas, the qualities required for the classification above are displayed. There may be <i>some</i> minor inaccuracies/omissions.
2.1 B	60-69	Good to Very Good. Work is above average in understanding of concepts; content is appropriate and accurate; some insight and originality is shown; some ability to synthesize, analyse and evaluate information is demonstrated; a wide range of sources are used and properly referenced. However, the work is not as strongly original or distinctly individual as a first class piece of work, and there may be some omissions, or irrelevancies. There are no significant errors in academic writing style, and structure is good.
2.11 C	50-59	Average to Fairly Good: on the whole the work is factually correct, includes relevant material, shows a strong grasp of knowledge, and is fairly analytical. The information is fairly well structured, clearly written and organised, and reading material is appropriate, although the range of sources used may be narrow. There are no <i>serious</i> inaccuracies or omissions. However, there is a lack of original thought, work is largely descriptive and superficial, and there is little synthesis, application or evaluation. The work should not contain a large number of errors in terms of grammar, spelling and sentence construction.
3 rd D	40-49	Satisfactory. The work contains basic subject matter/information, shows a reasonable level of understanding, is suitably organised, and there is some evidence of reading. Omissions and irrelevancies should not seriously detract from the quality of the work. However, the work may: be incomplete, illogical, confused, and poorly structured; include inaccuracies, irrelevancies, omissions and inadequate examples. The work is usually descriptive, insufficiently analytical , with some misunderstanding of key concepts . Information is poorly supported by the literature. Presentation and writing style are poor, with meaning sometimes impeded by ungrammatical sentence construction.
Refer	35-39	Marginal Refer: Some understanding in parts with cursory coverage of basic material; but weak; poorly presented without development of arguments; bare minimum of reading; serious omissions and factual errors; no originality; little or no synthesis; poor referencing and writing style.
	30-34	Refer: minimal knowledge of subject, but some appropriate material; mainly irrelevant; flawed; no argument or analysis; little factual information; some serious errors, omissions, irrelevancies; poorly organised; meaning impeded through poor grammar etc., research barely relevant and poor referencing. This mark can be combined with other elements of assessment (where appropriate) to give a pass, if overall average is 40% or above.
	0-29	Clear Refer: unsatisfactory overall; weak; irrelevant material; minimal factual content; little relevance to question; very little material of any value; little or no referencing; unacceptable writing style, flawed with errors in grammar, which impede meaning.

APPENDIX II

Non-Medical Prescribing Qualification Admissions Criteria

A

Independent Prescribing for Nurses and Pharmacists

A1 Nurses, midwives or specialist community public health nurses

- i. Students must hold effective registration with the NMC
AND
- ii. Meet the additional professional requirements for becoming a nurse prescriber (ref: <http://www.nmc-uk.org/aFrameDisplay.aspx?DocumentID=1645>).
AND
- iii. Must provide written confirmation from their employer that they are competent to take a history, undertake a clinical assessment and diagnose in their current area of practice.
AND
- iv. Have current registration or become registered with the Independent Safeguarding Authority (ISA).

A2 Pharmacists

- i. The programme is open to practising members of the Royal Pharmaceutical Society of Great Britain and the Pharmaceutical Society of Northern Ireland
AND
- ii. Entrants must have at least two years patient oriented clinical experience following their pre-registration year
AND
- iii. Entrants must have written endorsement from their employer or sponsoring organisation that they have up to date clinical, pharmacological and pharmaceutical knowledge relevant to their intended area of practice
AND
- iv. Have current registration or become registered with the Independent Safeguarding Authority (ISA).

B

Supplementary Prescribing for Allied Health Professions

- i. Be currently registered with the Health Professions Council as either a physiotherapist or a podiatrist/chiropract or a radiographer(diagnostic or therapeutic)
AND
- ii. Be professionally practising in an environment where there is an identified need for the individual to regularly use supplementary prescribing.
AND
- iii. Normally have 3 years of clinical experience since registration.
AND
- iv. Have confirmation from his/her clinical manager that he/she is competent to take a history, undertake a clinical assessment and diagnose in their area of speciality.
AND
- v. Have current registration or become registered with the Independent Safeguarding Authority (ISA).

Appendix III

Admissions Criteria for the Learning and Teaching in Practice Module

NMC registrants undertaking NMC (2008) Stage 3 Practice Teacher standards must satisfy the following specific entry requirements for this module:

- i) Be currently registered in the same part of the NMC register and field of specialist practice as the student(s) they are to assess
- ii) Have developed own knowledge, skills and competence beyond registration and obtained either SCPHN or SPQ qualification as relevant
- iii) Worked for at least two years in current field of Specialist practice
- iv) Provide a self-declaration of health and character

Provide employers confirmation of current CRB/ DBS, health and character.

Admissions Criteria for the Mentorship Module

Current registration with NMC for at least one year and evidence of developing knowledge, skills and competence beyond registration

Access to an NMC student in practice with due regard to registration and field of practice and a current supervising mentor