

## Programme Specification

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[UG Programme Directory](#)

[PG Programme Directory](#)

### Section 1 – regulatory details

1.1	Awarding body	Wrexham University
1.2	Teaching institution	Wrexham University
1.3	Final award and programme title (Welsh and English)	Post Graduate Certificate Emergency Practitioner
1.4	Exit awards and titles	N/A
1.5	Credit requirements	60 credits
1.6	Intake points	December
1.7	Mode of study	Part time
1.8	Length of delivery	One year
1.9	Location of delivery	Plas Coch Campus, Wrexham
1.10	Language of delivery	English
1.11	Faculty	Faculty of Social and Life Sciences (FSLs)
1.12	Subject area	Nursing
1.13	HECoS Code	100260
1.14	Suitable for tier 4 international students?	No
1.15	Is DBS check required on entry?	No
1.16	Professional, Statutory or Regulatory Body (PSRB) accreditation	No PSRB
1.17	Welsh Medium Provision	<p>The programmes will be delivered through the medium of English. Students are entitled to submit assessments in the medium of Welsh.</p> <p><b>Welsh Language/Welsh landscape considerations</b> The Welsh Language standards, issued by the Welsh Language Commissioner (2019), will be carefully considered throughout the programme. Additionally, they will be approved by the University Welsh Language Champion to ensure equity throughout.</p>

		<p>Many of our students will be working in Wales, with support from practitioners from the Health Boards/Trusts, thereby benefitting from Welsh vocational opportunities.</p> <p>We will ensure that Welsh speaking staff on the post-graduate team are available to act as personal tutors as requested. This enables us to support Welsh speaking students in their first language.</p> <p>Teaching of simulation-based education may also, with notice, have a Welsh speaker available. The simulation uniforms clearly identify those instructors who are Welsh speakers.</p>
1.18	External reference points	<ul style="list-style-type: none"> <li>QAA 2020 Masters Degree Characteristics Statements</li> <li>QAA (2014) UK Quality Code for Higher Education (Part A: Setting and Maintaining Academic Standards – The Framework for Higher Education Qualifications of UK Degree-Awarding Bodies)</li> </ul>
1.19	Derogation to Academic Regulations	N/A
1.20	Foundation Year route	N/A.
1.21	Placement / Work based learning	Yes. The emergency practitioner trainees organise their own placements and WU provide mentor guidance.
1.22	Length and level of the placement	<p>Students are required to carry out 180 hours of clinical practice over three modules:</p> <ol style="list-style-type: none"> <li>1. NHS7D9- 10-week module – 60 hours clinical practice</li> <li>2. NHS7D1-10-week module – 60 hours clinical practice</li> <li>3. NHS7B6- 10-week module – 60 hours clinical practice</li> </ol>
1.23	Collaborative arrangement	N/A

## Section 2 – programme details

### 2.1 Aims of the programme

The overall aim of the programme is to prepare the emergency practitioner for their autonomous role in their chosen setting in the Emergency Department, Minor Injuries Unit, Urgent Care Centre or within the ambulance service. The programme will prepare the practitioner to develop professional practice, to ensure service improvement and innovation and to develop the practitioner's competence and confidence to deliver autonomous care to both minor injury and illness presentations in a variety of settings. The definition of an emergency practitioner is a registered Health Care Professional who has undertaken specific additional training to assess, diagnose and prescribe treatment for patients who present with minor injuries and or illness. (Royal College of Nursing 2017)

The United Kingdom Urgent and Emergency care settings have had emergency practitioners since the 1980's, but there has been a lack of consensus regarding their educational support (Bagley 2018). The programme aims to standardise the education with contemporary health care provision in mind.

The Welsh government have asked all the health boards to embed the Six Goals of Urgent and Emergency care (2021) and the emergency practitioner will play a part in this. It sets out expectations for health, social care, independent and third sector partners for the delivery of the right care, in the right place, first time for physical and mental health.

The six goals for urgent and emergency care are

- Co-ordination planning and support for populations at greater risk of needing urgent or emergency care
- Home first approach and reduce the risk of readmission
- Signposting people with urgent care needs to the right place, first time
- Optimal hospital care and discharge practice from the point of admission
- Rapid response in a physical or mental health crisis
- Clinically safe alternatives to admission to hospital.

To drive this positive change in emergency and urgent care, there requires a focused and strategic approach to developing the services, standardising the services, knowledge sharing, collaborating, and providing effective leadership.

A key part of this is the education and training of the autonomous emergency practitioners to be able to take on the patients, who will be redirected from the emergency departments to the clinically safe alternative.

Please see the full document below in a hyperlink:

<https://gov.wales/six-goals-urgent-and-emergency-care-policy-handbook-2021-2026>

## 2.2 Programme structure and diagram, including delivery schedule

Level	Module Code	Module Title	Credit Value	Core/ Option	Delivery	Year of Study (PT only)
Level 7	NHS7D9	Emergency Practitioner Professional Practice and Service Improvement	20	Core	Long thin module over all three semesters	Year 1
Level 7	NHS7D1	Minor Injuries Assessment and Management	20	Core	Sem 2	Year 1
Level 7	NHS7B6	Minor illness Assessment and Management	20	Core	Sem 3	Year 1

2.3 Programme Learning Outcomes										
No.	Learning Outcome	K	I	S	P	PG Cert (L7)				Optional Ref (PSRB standards)
1	Demonstrate a systematic understanding of biological, physiological, psychological, sociological and socio-political knowledge to justify and underpin autonomous emergency practice. In the biological sciences as it pertains to human physiology and pathophysiology in order to enable them to initially assess and manage a range of conditions; .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; of theories pertaining to decision making in professional practice; of the theory and practice of health promotion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	Utilise a comprehensive knowledge and understanding of techniques applicable to research, of research planning, execution and reporting and autonomous emergency practice scholarship to investigate clinical practice; demonstrating a critical awareness of current problems and/or new insights informed by the current evidence base, practice experience and scholarly enquiry	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	Synthesise and apply knowledge to solve practice problems and to form safe and effective solutions within the emergency care setting. Evaluate and critique methodologies, propose, develop and implement new areas of enquiry in an aspect of the emergency practitioner.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	Evaluate and critique methodologies, propose, develop and implement new areas of enquiry in an aspect of the emergency practitioner	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Deal with 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.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

6	Demonstrate self-direction and originality in tackling and solving problems	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7	Analyse critically the theoretical, research and practice underpinnings of emergency nursing as a means of developing their professional knowledge and understanding, and developing new skills to a higher level	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8	Demonstrate competence in the skills required to carry out an initial assessment and carry out technical procedures required in the treatment of patients/clients in the emergency setting.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9	Demonstrate a high level of inter-personal communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10	Demonstrate the research skills to propose and execute a systematic process of enquiry into an area of the emergency practitioner	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11	Exercise initiative and personal responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12	Communicate with others in a clear and articulate manner, both verbally and in writing and use appropriate academic conventions in the production and presentation of work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13	Exercise a reflexive capacity by the recognition of 'self' and 'others' in considering issues in emergency nursing, Demonstrate effective reflective practice skills within a professional /research setting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14	Demonstrate independent learning ability required for continuing professional development within emergency care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15	Make decisions using available evidence and be able to provide a sound rationale for those decisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## 2.4 Learning and teaching strategy

The learning and teaching strategy for the programme has been developed with relevant QAA subject benchmark statements, WGU's Strategy for Supporting Student Learning and Achievement (SSSLA), and the Active Learning Framework (ALF). The SSSLA sets out the intentions, ambitions, and implementation plan in relation to the University's approach to teaching, learning and the development of the academic portfolio. The learning and teaching strategy will recognise, reward, and further support the development of great teaching. The aim is to balance high challenge, with commensurate support for our students, providing a truly blended learning experience. The learning and teaching strategy aims to foster a student centred, creative approach, which will enhance the capabilities and employability of practitioners. As students taking this programme will be registered health care professionals, it is essential that the approach to learning and teaching used throughout reflects and builds upon students' prior learning and clinical experience. It will continue to build on knowledge gained by these emergency practitioners and because of the strong practice element in the programme, they must be able to provide evidence of competence in practice, be able to teach others, contribute to the innovation and research agenda within the rapidly evolving healthcare context.

The spiral curriculum will build on knowledge previously gained, whilst simultaneously building the student's confidence and competence, the spiral curriculum affords the opportunity to revisit prior learning and to develop this in increasingly complex contexts. This design affords an opportunity to revisit and consolidate learning to the benefit of the student (Coelho and Moles, 2016) and works well where there needs to be integration of different theoretical foundations into practice. The spiral curriculum will weave through all practice throughout the programme, re-visiting content to ensure the student gains more detailed knowledge and understanding of topics with the opportunity to explore application with more complexity each time. This has the benefits of reinforcing information over the period of the curriculum and use prior knowledge to inform future learning rather than starting anew in each module.

According to Van Manen (1990) theory must be assimilated to inform practice; thus, reflection on practice and integration of new knowledge throughout the programme is imperative. The curriculum is planned in order to operationalise this model, with the added advantage that, as described by Woodward (2019) "In medically related education, a spiral curriculum that repeatedly exposes the students to some of the same concepts in different thematic contexts, is likely to enhance learning and the connection between different facets of the same problem" (page 19). Modo and Kinchin (2011) and Masters and Gibbs' (2007) work investigates the utility of a spiral curriculum in interdisciplinary education and online learning, both areas of vital importance to meet the needs of today's NHS. The students on the Post Graduate Certificate Emergency Practitioner, come with some prior beliefs and assumptions about that practice. Through a process of raising awareness of the student's epistemic beliefs it is common for the student to begin to question their abilities as the programme progresses, raising what is referred to by Krewer et al (2020) as epistemic doubt. This doubt arises when individuals are confronted with information contradicting their prior assumptions; by encouraging epistemic volition to question these assumptions, the student

becomes aware of their current beliefs, stays aware of their doubts, reflects upon them and devises aims/goals in place to come to a resolution strategy to address their doubt, this ideally results in a change towards advanced beliefs (Kerwer et al 2020). The spiral curriculum will serve to enhance this epistemic change by giving the student opportunity to revisit prior learning and to develop this for a new context, whilst aiding the opportunity for a resolution strategy.

The first module will introduce the emergency practitioner to the concepts of professional practice and how to make a service change in practice and will build further on the spiral model and deepen their theory to practice and ask them with their new knowledge to look at what does good quality emergency care look like and how will they bring about a service change. The student's focus is on enhancing their professional practice and quality improvement, utilising the skills learned in practice and developing the learning from previous modules, in order to consolidate their practice. The spiral curriculum will be woven through to explore the main themes of what good emergency practitioner practice looks like and delivered over the three semesters in seminar format. Nestled in will be the injuries and illness modules delivered as cross cutting themes.

### **Learning and teaching methods**

A learning blend of campus and online delivery will be adopted. Advance HE (2019) refers to blended learning as: The balance between the classroom elements and digitally enabled activities. The flexibility inherent in this form of delivery enables teachers to rethink where and how they focus learning activity and students to develop self-directed learning skills and digital literacies. Students will be in both classroom-based lectures and on-line delivery, using flipped classrooms, scale up, discussions, seminars, workshops, tutorial sessions, together with case-based learning and simulation-based education.

### **Simulation Based Education**

Simulation based education (SBE) is a technique, to replace or amplify real life scenarios with guided experiences that evoke or replicate, substantial aspects of the clinical environment in a fully interactive manner. It has been endorsed as the new paradigm shift in healthcare education, to create an environment in which all aspects of practice can be critically reviewed against theoretical application (Purva & Nicklin 2018).

In the first two modules with a practice element, an experiential strategy, including observation and supervision is used to meet the module outcomes and practice competencies. SBE is a large part of the teaching strategy, and this will help the students to practice new clinical skills, enhance practice, acquire skills and improve decision-making, in a safe educational environment and alongside their support networks of clinical mentors in clinical practice. The simulation will be both in face-to-face teaching environments on campus, in simulation suites and captured in the on-line classroom and virtual learning environments with technologies that will support the Active Learning Framework.

### **Active Learning Framework (ALF)**

Synchronous and asynchronous teaching both online and on campus, within our active learning framework will be essential to our blended learning approach. The students will be expected to access the many resources in an asynchronous way, to complement their learning journey and their personal and employment circumstances. A key component of online learning and effective pedagogy is the construction of a community of enquiry (Garrison et al., 1999). The community of enquiry model supports a social constructivist approach and attempts to create an effective learning experience, through the adoption of the three interdependent elements – social, cognitive, and teaching presence. Critical thinking and a social presence will start in the classroom or simulation suite and continue in the discussion groups. The programme team will facilitate and direct the course of study to build the community of enquiry. The Moodle café/discussion forums, case study groups, evidence-based practice discussion groups (to support the golden thread of research), will be used for an active learning experience, which will be supported through reading, watching and discussions, whilst ensuring the students through the programme, revisit their prior learning and develop this new context to reflect the spiral curriculum.

### **Learning Activities**

It is important from the start of the programme and each subsequent module undertaken, that the expectations of both the students and staff facilitating the module are clear from the outset. The Moodle virtual learning environment (VLE) will be utilized to clearly structure the learning episode, with the learning outcomes evident and expectations clear from the outset. The purpose of all materials and activities will be made clear with the use of focused signposting, and care will be taken to ensure that all activities, that the students are requested to undertake contribute to the current learning journey and are linked to the module learning outcomes. Any recorded sessions will be made available on the VLE for all students. This will ensure that students are able to revisit content to enhance learning and understanding and ensure equity of access to the overall learning experience.

### **Tutorials and Supervision**

Personal and module tutorials and dissertation supervision will take place on a face-to-face and/or online basis. Suitable platforms will be used to facilitate contact between staff and students, where students or staff are unable to physically attend the University. Tutorials and supervision will be an important aspect of the programme to facilitate student engagement, progress, and feeding forward into the subsequent modules. The expectations regarding this will be made clear to students during the induction.

### **Personalised Support**

Clinical mentors will support students in practice, assessing relevant student competencies, providing evidence of supervision and discussion within the portfolio. Supervisors in practice will sign that a student has achieved the relevant competencies/outcomes identified in the portfolio from a practice perspective or a rationale if not achieved. Support will be available with the personal tutor in university to provide pastoral care, while wider support networks in university such as learning support tutors and other services such as counselling and chaplains are also available to meet students' individual needs.



## 2.5 Assessment strategy

### **Innovative Assessment**

Over the course of the programme, students will develop a comprehensive portfolio, which will comprise of developments in competency and confidence to work in an autonomous role.

### **Formative Assessment**

Formative feedback is provided on all modules through sampling the 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 Objective Structured Clinical Examination (OSCE) practice assessment, Clinical mentors will be expected to provide regular feedback on their student's progress and discuss with the Module Leader at the earliest opportunity, if a student is not making good progress. A tripartite action plan will be made between the clinical mentor, student and Module leader. Formative feedback dates are also 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 or verbal commentary and this will normally be at least 3 weeks before submission. Work submitted for formative feedback in the week prior to the summative submission date will no longer be reviewed due to its probable near completeness.

### **Summative Assessment**

The summative assessment strategy provides a variety of assessment methods 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 and outcomes commensurate with the award. The assessment strategy is student centred, with assessments designed so that students can select, a relevant practice focus. Assessment has also been designed to ensure that students have a feasible but relevant workload, with connections drawn between theory and practice throughout each module. 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, to give them the maximum time to complete the assessment task. Theoretical assignments and portfolios will be marked against level 7 assessment criteria. Feedback on summative work is provided through Moodle three weeks following the hand in date.

### Disclaimer

Throughout quality assurance processes we have ensured that this programme engages with and is aligned to:

- Academic Regulations
- The University Skills Framework
- Welsh Language Policy
- Equality and Diversity Policy
- The Student Union offers support for students

### Section 3 – Programme set up (office use only)

3.1	Framework	FRAME064 – DEC – Postgraduate Certificate – 1 Yea – Wrexham – 60 Credits – Part-Time – 20 Core Credits
3.2	Board dates (progression)	September
3.3	Cost centre	GANG Nursing
3.4	Course type (HESA)	N/A
3.5	Fee model	Other TBC
3.6	In-year resits	Yes
3.7	Are any modules taught over either multiple periods or across the HESA year (defined as running 1st August - 31st July)	Yes
3.8	Progression points	N/A
3.9	Semesters per intake	3
3.10	Semesters per progression point	N/A
3.11	Start and end dates	Other December
3.12	Student funding model	
3.13	Does the Suitability for Practice Procedure apply to the programme?	Yes
3.14	Programme Leader	Gilly Scott
3.15	Date of Approval	Validation Event: 02.08.2022 Academic Board: 08.08.2022
3.16	Date and type of Revision	October 2025: Change to intake point from September to December.