

KEY PROGRAMME INFORMATION

| Originating institution(s) Bournemouth University | | Faculty responsible for the programme Faculty of Health and Social Sciences | | | |
|--|----------------------------------|---|---------------------|--|--|
| Apprenticeship Standard Enhanced Clinical Practitioner STO | 895 | Assessment Plan STO895 Assessment Plan | | | |
| End Point Assessment type Non-integrated 1) Quality Improvement Proposal Report 2) Professional discussion underpinned by portfolio | Main training p Bournemouth U | · | | | |
| Apprenticeship model Non-integrated level 6 higher appre | nticeship delivered | d with a BU level 6 Grad | duate Certificate. | | |
| Final award(s), title(s) and credit Level 6- Graduate Certificate in Enh | nanced Clinical Pra | actitioner (60 credits ove | er three units) | | |
| Intermediate award(s), title(s) and | d credits | | | | |
| UCAS Programme Code(s) | HECoS (Higher | Education | LARS (Learning Aims | | |

Classification of Subjects) Code

and balanced or major/minor load.

Reference) code

631

External reference points

(where applicable and if known)

IfATE standards

N/A

Enhanced clinical practitioner / Institute for Apprenticeships and Technical Education

Not Available

HEE summary of principles

Testing accessibility document (skillsforhealth.org.uk)

DoH Advanced Level Nursing Position Statement dh_121738.pdf (publishing.service.gov.uk)

Professional, Statutory and Regulatory Body (PSRB) links

No PSRB links to programme, though note IfATE requirements of commencement

Locations of off-the-job training delivery

Bournemouth Lansdown Campus

Bournemouth Yeovil

Mode(s) of delivery

Remotely at learners' discretion

Experiential learning organised between learner and clinical mentor

| Full time (apprenticeship) | English |
|---|--|
| Typical duration PGT October start (18 months) PGT April start (18 months) | |
| Date of first intake October 2023 | Expected start dates Up to three intakes per year commencing October 2023 |
| Maximum apprentice numbers 120 learners divided into a maximum of 40 lea maximum figure is shared with the PG Cert Er | arners per intake, over three intakes per year. Please note, this nhanced Clinical Practitioner programme. |

Language of delivery

| Partner(s) | Partnership model |
|------------|-------------------|
| N/A | N/A |

Programme Specification – Section 1

Date of this Programme Specification

May 2023

Version number 1.0-1024

Approval, review or modification reference numbers E222316, approved 31/05/23

Author

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Programme Specification - Section 1

PROGRAMME STRUCTURE

Programme Award and Title: Graduate Certificate in Enhanced Clinical Practitioner

Level 6

Learners are required to complete all units of the programme. No option units are linked to the programme. Please note Unit 3- Leadership and Change in Enhanced Practice will launch in year 1 but straddle into year 2

| , | | | | | | | | |
|---|-----------------|----|----------------|----------------------------------|------------------------|------------------------|-----|--------------------------------------|
| Unit Name | Core/ Option | | | Expected Contact hours per | Unit Version No. | HECoS Code (plus | | |
| | | | Exam 1 | Exam 2 | Cwk 1 | unit | | balanced or major/ minor load) |
| * Unit 1 Enhanced Assessment Skills for Clinical Practice | Core | 20 | Pass / Fail | Pass / Fail | 100% | 30 | 1.1 | 100246 100258 |
| Unit 2 Clinical Reasoning and Decision Making in Enhanced Clinical Practice | Core | 20 | | | 100% | 30 | 1.0 | 100258 100270 |
| Unit 3 Leadership and Change in Enhanced Clinical Practice | Core | 20 | 100% | | Pass / Fail | 40 | 1.0 | 100088 100813 |

Exit qualification: Graduate Certificate in Enhanced Clinical Practitioner

Please note, units with * are already approved and delivered by FHSS

Though specific assessment of EPA will remain separate from programme assessment, successful completion of EPA portfolio will be a requirement of Unit 3. This is to ensure completion of apprenticeship process.

Apprentices who successfully complete the End Point Assessment are eligible for the award of the apprenticeship, whether or not they pass the credit bearing units listed above. In this instance they will receive the award of the IfATE apprenticeship, but not the additionally added credit bearing qualification.

AIMS OF THE DOCUMENT

The aims of this document are to:

- define the structure of the programme;
- specify the programme award titles;
- articulate how the programme will enable apprentices to demonstrate the Knowledge, Skills and Behaviours of the apprenticeship standard;
- identify programme and level learning outcomes;
- articulate the regulations governing the awards defined within the document.

AIMS OF THE PROGRAMME

This programme aims to develop analytical, innovative, and knowledgeable graduates, who:

- are able to work to an enhanced level of practice within a defined area of expertise
- can utilise enhanced assessment skill and clinical judgement within their specific field
- are able to manage a discreet aspect of a patients care; devising, actioning and evaluating complex care plans
- contribute effectively to the holistic journey of a patient through the wider healthcare setting, assuming an important role in the multi-disciplinary care offered
- contribute to the evolution of their clinical environment through education of themselves and others, supplying clinical leadership and effecting service improvement

The programme aligns with the Institute for Apprenticeships & Technical Education (IfATE) 'Enhanced Clinical Practitioner' apprenticeship (ST0895) approved for delivery in 2021. This programme both offers a development route for new and existing specialist practitioners, but also an opportunity for service providers to delineate between Enhanced and Advanced clinical practice. This also aligns with declared NHS workforce planning.

Enhanced Clinical Practitioner program is intended to be applicable and accessible to a diverse range of vocations. Examples of professionals in enhanced roles that would benefit from the programme include (but are not limited to) the following:

- Clinical professionals working with children and young people
- Clinical professionals working in the field of mental health
- Clinicians working with addiction and substance misuse services
- Clinicians working in an expanded role with people with learning disabilities
- Expanded roles in paramedical sciences
- Expanded roles in Primary care services
- Expanded roles in physiotherapy
- Expanded roles in pharmacology

The programme can be completed at both level 6 or level 7, reflecting the variable requirements of the target vocational environments. Successful completion of level 6 study can be awarded as Graduate Certificate in Enhanced Clinical Practitioner or may contribute credits to a BSc.

Graduates of the programme at level 6 will have a clear academic progression route to the existing MSc Advanced Clinical Practice Apprenticeship. This synergises well with BU fusion strategy and with declared intentions of DoH. Practitioners following this trajectory could include Advanced Clinical Practitioners, Nurse and Allied Health Practitioner Consultants and Specialist Interventionists. Please note, due to the flexible nature of emergent healthcare, these examples represent only a small selection of potential clinical advancement trajectories. For those learners choosing to pursue a managerial progression route, Bournemouth University's Senior Leadership Apprenticeship offers opportunities for advancement.

ALIGNMENT WITH THE UNIVERSITY'S STRATEGIC PLAN

The programme is informed by and aligned with BU 2025 strategic plan and fusion agenda. Information about BU vision, values and strategic plan can be found here (<u>BU2025</u>: <u>our vision</u>, <u>values and strategic plan</u> | Bournemouth University).

Values

Striving to excel within a defined clinical field lies at the heart of the Enhanced Clinical Practitioner programme. Learners will be guided on how to achieve this and challenged to reach their potential. Sustaining this level of excellence after conclusion of the programme lies at the core of the syllabus. It is envisioned that graduates will become ambassadors for BU's commitment to supporting and sustaining clinical excellence

The Enhanced Practitioner programme focuses on giving learners a firm understanding of the assessment and diagnostic process. This knowledge can be employed to widely varying areas of speciality within healthcare. Sharing experiences of assessment and management of patients from the full spectrum of healthcare will form a cornerstone of the programme. The programme will be valuable to nurses and allied health professionals. Representing this diversity within the learning space will benefit all who contribute to the course.

Learners on the Enhanced Clinical Practitioner programme will be empowered to become agents of change within their clinical environment. They will explore topics of advocacy, leadership, and service improvement throughout the programme, becoming dynamic and effective experts within their clinical field.

The programme will focus on collaborate learning, encouraged through topical debate. In the clinical space and in the learning environment, learners will be challenged to consider their evolving role as educators and role-models.

Fusion Learning

The Enhanced Clinical Practitioner programme will be delivered in a dynamic fashion. Learners will be encouraged to share their personalised experience of enhanced practice and reflecting on how the experience of other learners influences their own practice. The learning environment will constitute a safe space to explore concepts of assessment, diagnostics, and clinical management. A portfolio of learning approaches will be utilised through employment of simulation, case review, sharing of experiences and planning for service improvement. Formative assessment will feature as a tool for insight throughout. Summative assessments will be linked to learning objectives in a transparent and applicable fashion.

The essential role of mentors in the clinical environment will be supported and empowered through the apprenticeship framework. Mentors and learners will be aided in applying theoretical concepts to the clinical space, with guidance available for clinical partners in maximising placement learning.

Strategic Goals

The Enhanced Clinical Practitioner programme will position mentors, learners and educators as partners in learning, with support for all parties to ensure effective collaboration. In this way, BU will be positioned well at the heart of an Enhanced Clinical Practice network, encouraging collaboration throughout the programme duration, this will contribute to promoting BU as a partner of choice for apprenticeship based clinical programmes in the region.

LEARNING HOURS AND ASSESSMENT

Apprentices will usually be taught by a combination of senior academic staff with others who have relevant expertise including – where appropriate according to the content of the unit – academic staff, qualified professional practitioners, demonstrators/technicians and research apprentices.

Programme Specification - Section 2

Bournemouth University taught programmes are composed of units of study, which are assigned a credit value indicating the amount of learning undertaken. The minimum credit value of a unit is normally 20 credits, above which credit values normally increase at 20-point intervals. 20 credits is the equivalent of 200 study hours required of the apprentice, including lectures, seminars, assessment and independent study. 20 University credits are equivalent to 10 European Credit Transfer System (ECTS) credits.

The assessment workload for a unit should consider the total time devoted to study, including the assessment workload (i.e., formative and summative assessment) and the taught elements and independent study workload (i.e., lectures, seminars, preparatory work, practical activities, reading and critical reflection and learning in practice). Learners attending the programme will be required to hold a permanent employment in an appropriate clinical area. This will be defined as an area able to support the learner with exposure to learning opportunities within a defined clinical field and are able to, with agreement by their employer, support the learner and nominated mentor in the learning process. The mentor may be clinician of appropriate knowledge and ability within the practice area. A qualification in mentorship or supervision would be desirable; active engagement with the learner in their practice learning throughout the programme is a required element of the programme.

Assessment per 20 credit unit should normally consist of 3,000 words or equivalent. Dissertations and Level 6 and 7 Final Projects are distinct from other assessment types. The word count for these assignments is 5,000 words per 20 credits, recognising that undertaking an in-depth piece of original research as the capstone to a degree is pedagogically sound. In order to capture the range of skills required of an Enhanced Clinical Practitioner, alternative assessment methods will be also employed, both in formative and summative assessment. Where employed these will be relative and reflective of taught content. These will include Observed Structured Clinical Examination (OSCE), case study presentation and pitch-and-sell. Each alternate examination structure will conform with equivalency to written examination.

APPRENTICESHIP KNOWLEDGE, SKILLS AND BEHAVIOURS

The knowledge, skills and behaviours (KSBs) of the apprenticeship standard are evaluated and assessed at the final level of the apprenticeship (e.g., level 5, 6 or 7 depending on the apprenticeship standard). This applies to all judgements made on the KSBs from the skills-scan at the start of the apprenticeship to the end point assessment.

| Knowledge | Off-the-job training | Programme ILOs | On-the-job training |
|--|--|--------------------|---------------------|
| Tools and techniques used to | Unit 1- Enhanced Assessment Skills for | A5, A7, A8 | 20% |
| systematically search, select and | Clinical Practice 40% | B1 | |
| present evidence | | C5 | |
| | Unit 3- Leadership and Change in Enhanced | D4, D5, D7 | |
| Tachniques to critically appraise | Clinical Practice 40% Unit 2- Clinical Reasoning and Decision | A5, A7, A8 | 30% |
| Techniques to critically appraise evidence such as local and | Making in Enhanced Clinical Practice 40% | A5, A7, A6 B1 | 30% |
| national quality standards and | Making in Enhanced Clinical Fractice 40 /6 | C5 | |
| frameworks and ways to relate | Unit 3- Leadership and Change in Enhanced | D4, D5, D7 | |
| this to own practice | Clinical Practice 30% | 54, 56, 51 | |
| and to own produce | | | |
| Requirements of their on-going | Unit 1- Enhanced Assessment Skills for | A2, A7, A8 | 60% |
| professional registration and code | Clinical Practice 40% | B4, B5 | |
| of conduct in relation to their | | C6, C7 | |
| scope of practice such as when | | D3, D5, D6 | |
| and how to escalate or refer in line | | | |
| with defined scope of practice | | | |
| How to appraise the relevance of | Unit 1- Enhanced Assessment Skills for | A5, A7, A8 | 40% |
| available tools and techniques to | Clinical Practice 30% | B1 | |
| the clinical situation and own | Linit 2. Clinical Bassaning and Basisian | C5 | |
| scope of practice | Unit 2- Clinical Reasoning and Decision | D4, D5, D7 | |
| Legislation, clinical frameworks, | Making in Enhanced Clinical Practice 30% Unit 2- Clinical Reasoning and Decision | A4, A7, A8 | 30% |
| contemporaneous evidence- | Making in Enhanced Clinical Practice 40% | B4, B5 | 30 % |
| based practice guidelines, | Waking in Emilanced Climical Fractice 4070 | C5, C7 | |
| outcomes from clinical audit and | Unit 3- Leadership and Change in Enhanced | D5, D6 | |
| algorithms to support decision | Clinical Practice 30% | , | |
| making | | | |
| Anatomy and physiology and | Unit 1- Enhanced Assessment Skills for | A1, A3, A4, A6 | 40% |
| pathophysiology to support | Clinical Practice 2 0 % | B1, B2, B3, B6 | |
| complex holistic patient | | C1, C2, C3, C4 | |
| assessment including the | Unit 2- Clinical Reasoning and Decision | D1, D2 | |
| underlying psychological, social | Making in Enhanced Clinical Practice 40% | | |
| and long-term impact of illness | | | |

| Knowledge | Off-the-job training | Programme ILOs | On-the-job training |
|-------------------------------------|--|----------------|---------------------|
| Tools and techniques to critically | Unit 2- Clinical Reasoning and Decision | A5, A7, A8 | 50% |
| evaluate clinical information to | Making in Enhanced Clinical Practice 50% | B1 | |
| inform decision making and care | | C5 | |
| management planning | | D5, D7 | |
| Underpinning anatomy and | Unit 1- Enhanced Assessment Skills for | A1, A3, A4, A6 | 40% |
| complex applied physiology, | Clinical Practice 40% | B1, B2, B3, B6 | |
| disease, toxicities, treatments and | | C1, C2, C3, C4 | |
| interventions which guide the | Unit 2- Clinical Reasoning and Decision | D1, D2 | |
| selection of specialist diagnostics | Making in Enhanced Clinical Practice 20% | | |
| Methods to support complex | Unit 1- Enhanced Assessment Skills for | A5, A7, A8 | 40% |
| intervention decision making | Clinical Practice 20% | B1 | |
| aligned to national and | | C5 | |
| international guidelines | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 40% | D4, D5, D7 | |
| Principles and theories of co- | Unit 2- Clinical Reasoning and Decision | A2, A4, A5, A6 | 30% |
| production, health coaching, peer | Making in Enhanced Clinical Practice 40% | B2, B4, B6 | |
| support and self-management | | C2, C3 | |
| used to build knowledge, skills | Unit 3- Leadership and Change in Enhanced | D1, D2, D4 | |
| and confidence to enable patient | Clinical Practice 30% | | |
| self-management | | | |
| Diverse sources of information | Unit 1- Enhanced Assessment Skills for | A1, A3, A4, A6 | 40% |
| and evidence to underpin decision | Clinical Practice 2 0 % | B1, B2, B3, B6 | |
| making and techniques to | | C1, C2, C3, C4 | |
| interpret and assimilate a diverse | Unit 2- Clinical Reasoning and Decision | D1, D2 | |
| range of information and evidence | Making in Enhanced Clinical Practice 40% | | |
| Principles and theories of | Unit 3- Leadership and Change in Enhanced | A7 | 60% |
| coaching used in supporting | Clinical Practice 40% | B4, B5 | |
| others in complex clinical decision | | C3, C4, C5, C7 | |
| making and care delivery | | D3, D5, D6, D7 | |
| Principles and theories of | Unit 3- Leadership and Change in Enhanced | A7 | 25% |
| leadership and role modelling | Clinical Practice 75 % | B4, B5 | |
| | | C3, C4, C5, C7 | |
| | | D3, D5, D6, D7 | |
| Tools and procedures for | Unit 3- Leadership and Change in Enhanced | A7 | 25% |
| conducting a training needs | Clinical Practice 75 % | B4, B5 | |
| analysis | | C4, C5, C7 | |
| | | D3, D5, D6, D7 | |
| Teaching, learning and | Unit 3- Leadership and Change in Enhanced | A7 | 25% |
| assessment theories, techniques, | Clinical Practice 75 % | B4, B5 | |
| innovations and models relevant | | C3, C4, C5, C7 | |
| to the educational activity | | D3, D5, D6, D7 | |

| Knowledge | Off-the-job training | Programme ILOs | On-the-job training |
|---|--|------------------------------|---------------------|
| including ways to facilitate a | | | · |
| positive learning environment | | | |
| Models, tools and frameworks for | Unit 1- Enhanced Assessment Skills for | A7 | 40% |
| receiving and providing | Clinical Practice 20% | B4, B5 | |
| constructive feedback | | C4, C5, C7 | |
| | Unit 3- Leadership and Change in Enhanced | D3, D5, D6, D7 | |
| | Clinical Practice 40% | | |
| Principles of different | Unit 2- Clinical Reasoning and Decision | A5, A7, A8 | 60% |
| communication strategies and | Making in Enhanced Clinical Practice 40% | B1 | |
| theories, communication modes | | C5 | |
| (written, digital, verbal, non- | | D4, D5, D7 | |
| verbal) and clinical communication | | | |
| tools Models and theories for | Unit 2. Clinical Researing and Decision | A2 A4 A5 AC | 400/ |
| negotiating and mediating, such | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 60 % | A2, A4, A5, A6 B2, B4, B6 | 40% |
| as de-escalation and diffusing | Waking in Enhanced Clinical Practice 60% | C2, C3 | |
| strategies | | D1, D2, D4 | |
| Communication strategies and | Unit 1- Enhanced Assessment Skills for | A1, A3, A4, A6 | 30% |
| tools used to share complex | Clinical Practice 20% | B1, B2, B3, B6 | 30 70 |
| information with different | Omnodi i radioo 2070 | C1, C2, C3, C4 | |
| audiences and individuals | Unit 2- Clinical Reasoning and Decision | D1, D2 | |
| | Making in Enhanced Clinical Practice 20% | , | |
| | 3 | | |
| | Unit 3- Leadership and Change in Enhanced | | |
| | Clinical Practice 30% | | |
| Principles of change management | Unit 3- Leadership and Change in Enhanced | A7, A8 | 40% |
| and co-production to support | Clinical Practice 60% | B4, B5, B6 | |
| clinical innovation in the | | C5, C6, C7 | |
| workplace | | D5, D6, D7 | |
| Local and national approaches | Unit 3- Leadership and Change in Enhanced | A7, A8 | 25% |
| and planning processes to support | Clinical Practice 75 % | B4, B5, B6 | |
| quality improvement | | C5, C6, C7 | |
| | | D5, D6, D7 | |
| Service evaluation, research and | Unit 3- Leadership and Change in Enhanced | A7 | 30% |
| audit techniques to support quality | Clinical Practice 70% | B4, B5 | |
| improvement processes within | | C3, C4, C5, C7 | |
| area of enhanced clinical practice | Unit 1. Enhanced Appropriate Chille for | D3, D5, D6, D7 | 900/ |
| The role and impact of reflection | Unit 1- Enhanced Assessment Skills for | A2, A7, A8 | 80% |
| in improving clinical practice and best-practice methods for clinical | Clinical Practice 20% | B4, B5 C6, C7 | |
| supervision | | D3, D5, D6 | |
| auper vialuit | | D3, D3, D0 | |

| Knowledge | Off-the-job training | Programme ILOs | On-the-job training |
|--|---|--|---------------------|
| Signs and pathophysiology of deterioration or distress in mental, physical, cognitive and behavioural health in own scope of practice | Unit 1- Enhanced Assessment Skills for Clinical Practice 30% Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 30% | A1, A3, A4, A6 B1, B2, B3, B6 C1, C2, C3, C4 D1, D2 | 40% |
| Protocols and systems used to plan, prioritise and direct resources within area of enhanced clinical practice and how to escalate to and engage others when working at the boundaries of scope of practice | Unit 1- Enhanced Assessment Skills for Clinical Practice 20% Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 40% | A5, A7, A8 B1 C5 D4, D5, D7 | 40% |
| Evidence-based strategies to manage clinical risk in enhanced clinical practice | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 50% | A5, A7, A8 B1 C5 D4, D5, D7 | 50% |
| Principles of psychological well- being, the importance of maintaining own and others well- being and counselling techniques used within own scope of practice | Unit 3- Leadership and Change in Enhanced Clinical Practice 20% | A7 B4, B5 C3, C4, C5, C7 D3, D5, D6, D7 | 80% |
| Employer policy and procedures for resource management and reporting | Unit 3- Leadership and Change in Enhanced Clinical Practice 70% | A7, A8 B4, B5, B6 C5, C6, C7 D5, D6, D7 | 30% |
| Strategies to plan and prioritise resources and manage immediate and longer-term service requirements | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 20% Unit 3- Leadership and Change in Enhanced Clinical Practice 30% | A7, A8 B4, B5, B6 C5, C6, C7 D5, D6, D7 | 50% |
| Local, regional, and national strategic priorities for patient populations within area of specialist practice | Unit 3- Leadership and Change in Enhanced Clinical Practice 50% | A7, A8 B4, B5, B6 C3, C4, C5, C6, C7 D3, D5, D6, D7 | 50% |
| Principles of mentoring and preceptorship and how these differ from counselling, coaching and teaching | Unit 3- Leadership and Change in Enhanced Clinical Practice 30% | A7 B4, B5 C3, C4, C5, C7 D3, D5, D6, D7 | 70% |
| Local appraisal policy and systems and own responsibility in relation to appraisal of others | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 10% | A2, A7, A8 B4, B5 C6, C7 D3, D5, D6 | 60% |

| Knowledge | Off-the-job training | Programme ILOs | On-the-job training |
|-----------|---|----------------|---------------------|
| | Unit 3- Leadership and Change in Enhanced | | |
| | Clinical Practice 30% | | |

| Skills | Off-the-job training | Programme ILOs | On-the-job training |
|--|--|--|---------------------|
| Conduct systematic literature | Unit 1- Enhanced Assessment Skills for | A5, A7, A8 | 20% |
| searches to source evidence to | Clinical Practice 40% | B1 C5 | |
| inform enhanced clinical practice | Unit 3- Leadership and Change in Enhanced Clinical Practice 40% | D4, D5, D7 | |
| Critically appraise evidence and use findings to plan and provide enhanced patient-centred clinical care | Unit 1- Enhanced Assessment Skills for Clinical Practice 30% Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 40% | A1, A3, A4, A6 B1, B2, B3, B6 C1, C2, C3, C4 D1, D2 | 30% |
| Provide enhanced clinical care in line with professional registration, code of conduct and defined scope of practice, being responsible and accountable for own decisions, actions and omissions | Unit 1- Enhanced Assessment Skills for Clinical Practice 10% Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 40% | A2, A7, A8 B4, B5 C6, C7 D3, D5, D6 | 50% |
| Select available tools, technologies and techniques needed to perform complex and holistic assessments | Unit 1- Enhanced Assessment Skills for Clinical Practice 50% | A2, A4, A5, A6 B2, B4, B6 C2, C3 D1, D2, D4 | 50% |
| Assimilate, synthesise and apply complex information to promote and advocate best interests of others, upholding the principles of safeguarding and evidence-based practice | Unit 1- Enhanced Assessment Skills for Clinical Practice 10% Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 40% | A2, A4, A5, A6, A7, A8 B2, B4, B6 C2, C3 D1, D2, D4 | 50% |
| Undertake holistic patient-centred assessments using available tools, technologies and techniques | Unit 1- Enhanced Assessment Skills for Clinical Practice 30% Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 30% | A2, A4, A5, A6 B2, B4, B6 C2, C3 D1, D2, D4 | 40% |
| Analyse the data arising from the assessment process to inform clinical decision-making | Unit 1- Enhanced Assessment Skills for Clinical Practice 20% | A1, A3, A4, A6 B1, B2, B3, B6 C1, C2, C3, C4 D1, D2 | 50% |

| Skills | Off-the-job training | Programme ILOs | On-the-job training |
|---|---|--|---------------------|
| | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 30% | | |
| Identify, request and interpret specialist diagnostics within own scope of practice to inform the delivery and management of specialist care for patients and families | Unit 1- Enhanced Assessment Skills for Clinical Practice 30% Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 30% | A1, A3, A4, A6 B1, B2, B3, B6 C1, C2, C3, C4 D1, D2 | 40% |
| Develop, implement and evaluate an enhanced care management plan which may include interventions and referral to other members of the multidisciplinary team or other agencies | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 50% | A2, A4, A5, A6 B2, B4, B6 C2, C3 D1, D2, D4 | 50% |
| Prepare and support patients and families to manage their own health and care as independently as possible | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 40% Unit 3- Leadership and Change in Enhanced Clinical Practice 10% | A2, A4, A5, A6 B2, B4, B6 C2, C3 D1, D2, D4 | 50% |
| Interpret, assimilate and draw conclusions using diverse sources of information and evidence to inform clinical reasoning | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 50% | A5, A7, A8 B1 C5 D4, D5, D7 | 50% |
| Direct others to sources of information and evidence, coaching and supporting them in applying information and evidence in complex clinical decision making | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 40% Unit 3- Leadership and Change in Enhanced Clinical Practice 10% | A7 B4, B5 C3, C4, C5, C7 D3, D5, D6, D7 | 50% |
| Provide leadership within scope of own role and positive rolemodelling for others in the multidisciplinary team | Unit 3- Leadership and Change in Enhanced Clinical Practice 50% | A7 B4, B5 C3, C4, C5, C7 D3, D5, D6, D7 | 50% |
| Identify training and education needs of others in the workplace | Unit 3- Leadership and Change in Enhanced Clinical Practice 40% | A7 B4, B5 C3, C4, C5, C7 D3, D5, D6, D7 | 60% |
| Plan and facilitate the delivery of practice-based education, training and assessment activities | Unit 3- Leadership and Change in Enhanced Clinical Practice 40% | A2, A7, A8 B4, B5 C6, C7 D3, D5, D6 | 60% |

| Skills | Off-the-job training | Programme ILOs | On-the-job training |
|---|--|--|---------------------|
| Evaluate the effectiveness of training and education activities | Unit 3- Leadership and Change in Enhanced Clinical Practice 40% | A2, A7, A8 B4, B5 C6, C7 D3, D5, D6 | 60% |
| Use communication strategies suitable for a variety of situations including sensitive and distressing topics | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 40% Unit 3- Leadership and Change in Enhanced Clinical Practice 20% | A2, A4, A5, A6 B2, B4, B6 C2, C3 D1, D2, D4 | 40% |
| Use strategies to manage conflict and challenge | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 30% Unit 3- Leadership and Change in Enhanced Clinical Practice 20% | A7 B4, B5 C3, C4, C5, C7 D3, D5, D6, D7 | 50% |
| Discuss complex information with patients, their families, the multi-disciplinary team and other agencies | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 50% | A1, A3, A4, A6 B1, B2, B3, B6 C1, C2, C3, C4 D1, D2 | 50% |
| Challenge ineffective systems and processes and support others to identify the need for change within their area of enhanced clinical practice | Unit 3- Leadership and Change in Enhanced Clinical Practice 50% | A7, A8 B4, B5, B6 C5, C6, C7 D5, D6, D7 | 50% |
| Contribute to quality improvement plans and strategies to support a culture of continuous quality improvement within area of enhanced clinical practice | Unit 3- Leadership and Change in Enhanced Clinical Practice 70% | A7, A8 B4, B5, B6 C5, C6, C7 D5, D6, D7 | 30% |
| Participate in quality improvement activities, such as audit, service evaluations and research projects within area of enhanced clinical practice | Unit 3- Leadership and Change in Enhanced Clinical Practice 60% | A7, A8 B4, B5, B6 C5, C6, C7 D5, D6, D7 | 40% |
| Reflect on own and others' practice using clinical supervision processes | Unit 1- Enhanced Assessment Skills for Clinical Practice 20% Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 30% | A2, A7, A8 B4, B5 C6, C7 D3, D5, D6 | 50% |
| Identify and act on evidence of unexpected change or patient deterioration within own scope of practice | Unit 1- Enhanced Assessment Skills for Clinical Practice 20% | A1, A3, A4, A6 B1, B2, B3, B6 C1, C2, C3, C4 D1, D2 | 50% |

| Skills | Off-the-job training | Programme ILOs | On-the-job training |
|--|--|--|---------------------|
| | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 30% | | |
| Manage self and others in unpredictable and complex environments, instigating clinical interventions where protocols may not be available | Unit 1- Enhanced Assessment Skills for Clinical Practice 20% Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 30% | A1, A3, A4, A6 B1, B2, B3, B6 C1, C2, C3, C4 D1, D2 | 50% |
| Identify and manage risk to patient safety and others in an unpredictable and complex environment | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 50% | A5, A7, A8 B1 C5 D4, D5, D7 | 50% |
| Counsel patients, family, carers and others to manage psychological well-being of self and others | Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 40% | A2, A4, A5, A6 B2, B4, B6 C2, C3 D1, D2, D4 | 60% |
| Contribute to efficient resource management within the workplace | Unit 3- Leadership and Change in Enhanced Clinical Practice 50% | A7, A8 B4, B5, B6 C5, C6, C7 D5, D6, D7 | 50% |
| Plan, prioritise and deliver enhanced clinical care within a defined resource | Unit 1- Enhanced Assessment Skills for Clinical Practice 20% Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 20% | A7 B4, B5 C3, C4, C5, C7 D3, D5, D6, D7 | 60% |
| Contribute to the drafting of business cases or project proposals | Unit 3- Leadership and Change in Enhanced Clinical Practice 80% | A7, A8 B4, B5, B6 C5, C6, C7 D5, D6, D7 | 20% |
| Provide mentorship, opportunity for peer-learning and constructive feedback to guide, support, motivate and develop others in the multidisciplinary team | Unit 3- Leadership and Change in Enhanced Clinical Practice 50% | A7, A8 B4, B5, B6 C5, C6, C7 D5, D6, D7 | 50% |
| Contribute to the appraisal of individuals in the multidisciplinary team | Unit 3- Leadership and Change in Enhanced Clinical Practice 50% | A2, A7, A8 B4, B5 C6, C7 D3, D5, D6 | 50% |

| Behaviours | Off-the-job training | Programme ILOs | On-the-job training |
|--|--|--|---------------------|
| Treat people with dignity, respecting individual's diversity, beliefs, culture, needs, values, privacy and preferences | Unit 1- Enhanced Assessment Skills for Clinical Practice 20% Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 20% Unit 3- Leadership and Change in Enhanced | A2, A4, A5, A6 B2, B4, B6 C2, C3 D1, D2, D4 | 40% |
| Show respect and empathy for those you work with | Clinical Practice 20% Unit 1- Enhanced Assessment Skills for Clinical Practice 20% Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 20% | A2, A7, A8 B4, B5 C6, C7 D3, D5, D6 | 40% |
| Be adaptable, reliable and consistent | Unit 3- Leadership and Change in Enhanced Clinical Practice 20% Unit 1- Enhanced Assessment Skills for Clinical Practice 20% Unit 2- Clinical Reasoning and Decision Making in Enhanced Clinical Practice 20% Unit 3- Leadership and Change in Enhanced Clinical Practice 20% | A7 B4, B5 C3, C4, C5, C7 D3, D5, D6, D7 | 40% |

ENGLISH, MATHS AND BRITISH VALUES

| Unit | English | Maths | British values |
|--|---|---|---|
| Enhanced Assessment in Clinical | Introduction to use of clinically focused | Use of clinical scoring tools in the | Exploration of diverse baseline of |
| Practice | language in descriptors of conditions and | categorisation of patient condition or disease severity | health in the general population and |
| | symptoms. Introduction to the relation | accommodation of this to ensure equal | |
| | between language and accuracy in | access to reliable health assessment | |
| | definition and communication | | |
| Clinical Reasoning and Decision Making in Enhanced Clinical Practice | Discussion of the need to translate language to ensued understanding of complicated concepts by patients. Further exploration of communication methods to avoid error | Use of different values in the examination of clinical data and its application to the diagnostic process | Exploration of the concept of autonomy and personal agency in therapeutic direction |
| Leadership and Change in | Exploring the role of language in the | Exploring the role of resource management, | Discussing how to design service |
| Enhanced Clinical Practice | motivation of individuals and organisations | including time and budget, in rationalising | provision to avoid disenfranchisement |
| | to elicit change. The use of language in | change in the clinical environment | of client groups |
| | building a compelling argument | | |

SAFEGUARDING, PREVENT AND CAREERS SUPPORT

| Unit | Safeguarding | Prevent | Careers support |
|---------------------------------|---|--|--|
| Enhanced Assessment in Clinical | Safeguarding as a foundational concept is | N/A | Taught content is contextualised in the |
| Practice | introduced as part of assessing mental | | sense of the new opportunities and risks |
| | wellbeing. Concepts of categorising and | | that are available to them through |
| | acting on data that informs a patients sate of | | autonomous assessment. Career |
| | wellness are taught | | development is supported with access |
| | | | sessions from CareersBU |
| Clinical Reasoning and Decision | An emphasis is placed on concepts of holistic | As part of accurate history taking, learners | Consideration is paid to the wight of |
| Making in Enhanced Clinical | therapeutic response and patient centred | will explore biases in themselves and their | responsibility that comes with becoming an |
| Practice | care in clinical consultation. Active listening | patients, and how to act in the patients' | independent diagnostician and director of |
| | and patient advocacy are central to the | interest and when there is a responsibility | therapy. Content is explored in how to |
| | clinical reasoning model being taught | to the community | ensure safety while improving diagnostic |
| | | | and therapeutic ability. Career |
| | | | development is supported with access |
| Landarabia and Obanas in | Ocatont considers subjects control | NI/A | sessions from CareersBU |
| Leadership and Change in | Content considers subjects such as | N/A | Skills in regard to project management and |
| Enhanced Clinical Practice | enfranchisement of patients in service | | managing change in the clinical |
| | improvement | | environment are central to the unit. The |
| | | | applicability of this knowledge to future |
| | | | careers will be emphasised throughout. |
| | | | Career development is supported with |
| | | | access sessions from CareersBU |

INDICATIVE TIMELINE FOR DEMONSTRATING KNOWLEDGE, SKILLS AND BEHAVIOURS

This is an indicative timeline of when apprentices might typically be able to demonstrate each element of the Knowledge, Skills and Behaviours described in the apprenticeship standard. This is intended only as a guideline – the actual timeline will vary for each apprentice, based on prior learning and individual rates of progress.

Mapping KSB development in ECP is problematic due to the diverse nature of apprentices expected and their differing clinical environments. This is recognised in the Apprenticeship Standard. The following should only be considered a suggested indicator and not specific milestones.

| Week1 | Week 2 | Week 3 | Week 4 |
|-------------------------------------|---|---|---|
| | | | |
| | | | |
| | K4, K5, K6, S4, S5, S6 | | |
| | | K1, K2, K3, S1, S2, S3 | |
| | | | K7, K8, K10, K11, S7, S8, S9, S10, S11 |
| | | | |
| K24, K25, K26, S24, S25, S26 | | | |
| | K17, K18, K19, K27, S17, S18, S19, S27 | | |
| | | | |
| | | | K20, K21, K22, S20, S21, S22 |
| | | | |
| | | | |
| K14, K15, K16, S14, S15, S16 | | | |
| | | | |
| K14, K15, K16, S14, S15, S16 Week1 | Week 2 | Week 3 | Week 4 |
| | Week 2 K28, K29, K30, S28, S29, S30 | | Week 4 |
| | | Week 3 K9, K12, K13, S12, S13 | |
| Week1 | | | Week 4 K23, K31, K32, S23, S31, S32 |
| | | | |
| Week1 | | | |
| | Week1 K24, K25, K26, S24, S25, S26 | K4, K5, K6, S4, S5, S6 K24, K25, K26, S24, S25, S26 K17, K18, K19, K27, S17, S18, | K4, K5, K6, S4, S5, S6 K1, K2, K3, S1, S2, S3 K24, K25, K26, S24, S25, S26 K17, K18, K19, K27, S17, S18, |

10 11 12

Year 1

INTENDED LEARNING OUTCOMES - AND HOW THE PROGRAMME ENABLES APPRENTICES TO ACHIEVE AND DEMONSTRATE THE INTENDED LEARNING OUTCOMES

INTENDED PROGRAMME OUTCOMES

| This | Subject knowledge and understanding programme provides opportunities for learners to elop and demonstrate knowledge and understanding of: | The following learning and teaching and assessment strategies and methods enable learners to achieve and to demonstrate the programme learning outcomes: | | | | | | |
|----------------------------|---|--|--|--|--|--|--|--|
| A2 A3 A4 A5 A6 | Competence in patient assessment and consultation, within a defined scope of practice; Contribution to MDT intervention in urgent or emergency situations within the clinical space; Demonstrate an enhanced knowledge of anatomy and physiology within a defined scope of practice; The role of the enhanced clinician in forming and delivering meaningful holistic plans of care and patient centred care; Formation of ongoing treatment goals and alignment to evidence-based practice in the clinical space; Empathy and the representation of patient choice within the diagnostic process; Understanding of leadership and change management theory, promoting a culture of being an accountable professional; Understanding of service improvement within a defined scope of healthcare, and their role in its success. | Learning and teaching strategies and methods (referring to numbered Intended Learning Outcomes): Iectures (A1 to A8); seminars (A1, A4, A5, A6); directed reading (A1, A2, A3, A7, A8); use of the VLE (A1, A2, A3); placement (A1 to A8); workshops (A1, A3, A4, A5, A6); asynchronous preparatory exercises (A1 to A8); self-directed inquiry (A7, A8). Assessment strategies and methods (referring to numbered Intended Learning Outcomes): OSCE (A1, A2, A3); coursework essay (A1, A2, A3, A7, A8); case study (A4, A5, A6); pitch-and-sell (A7, A8); portfolio of work based learning (A1 to A8). | | | | | | |
| B: I | ntellectual skills | The following learning and teaching and | | | | | | |
| This | programme provides opportunities for learners to: | assessment strategies and methods enable learners to achieve and to demonstrate the programme outcomes: | | | | | | |
| B1 | Employ data in the diagnostic process; | Learning and teaching strategies and methods (referring to numbered Intended Learning Outcomes): | | | | | | |

- **B2** Understand how to form a meaningful clinical management plan;
- **B3** Understand and employ patient-centered care in condition management and intervention;
- **B4** Understand the role of ECP as a role-model to the clinical team:
- **B5** Engage in improvement initiatives in the clinical environment and contribute to developing a culture of excellence;
- **B6** Contribute to the wider healthcare team in unpredictable and unplanned events, caring for the wellbeing of patients and participants.

- lectures (B1 to B6);
- seminars (B2, B3);
- directed reading (B1 to B6);
- use of the VLE (B5, B6);
- workshops (B1, B2, B3, B4);
- asynchronous preparatory exercises (B1 to B6);
- placement (B1 to B6).

Assessment strategies and methods (referring to numbered Intended Learning Outcomes):

- OSCE (B1);
- coursework essay (B1, B2, B5, B6);
- case study (B2, B3, B4, B6);
- pitch-and-sell (B4, B5);
- portfolio of work-based learning (B1 to B6).

C: Practical skills

This programme provides opportunities for learners to:

- The following learning and teaching and assessment strategies and methods enable learners to achieve and to demonstrate the programme learning outcomes:
- **C1** Understand the role of different assessment methods in diagnostic reasoning;
- C2 Understand the role of clinical and management reasoning in building patient-centered relationships;
- **C3** Contribute to the Multi-disciplinary team as part of coordinated clinical intervention;
- **C4** Discern and employ different interventions dependent on clinical and situational need;
- **C5** Contribute to an environment of expertise and evidence-based practice in the clinical space;
- **C6** Demonstrate understanding of change management within a defined area of practice;

- Learning and teaching strategies and methods (referring to numbered Intended Learning Outcomes):
- lectures (C1 to C7);
- seminars (C2, C3);
- asynchronous preparatory exercises (C1 to C7);
- workshops (C1, C2, C3, C4);
- use of the VLE (C1, C3, C4);
- group exercises (C5, C6, C7).

C7 Understanding the role of culture and organizational structure in managing change within the clinical space.

Assessment strategies and methods (referring to numbered Intended Learning Outcomes):

- OSCE (C1, C3, C4);
- coursework essay (C1, C2, C4, C6);
- case study (C2, C4, C5);
- pitch-and-sell (C6, C7);
- portfolio of work-based learning (C1 to C7).

D: Transferable skills

This programme provides opportunities for learners to:

The following learning and teaching and assessment strategies and methods enable learners to achieve and to demonstrate the programme learning outcomes:

- **D1** Understand the role of assessment in diagnostic reasoning;
- **D2** Demonstrate patient advocacy in the role of Enhanced Clinical Practice:
- **D3** Understand the role of continued professional development in Enhanced Clinical Practice;
- **D4** Contribute to the planning, delivery, monitoring and evaluation of intervention care within a wider episode of care:
- **D5** Contribute to and encourage a culture of improvement and education, acting as an expert resource within their organisation and other agencies
- **D6** Engage in effective self-reflection in the evaluation and improvement of ability and impact within healthcare;
- **D7** Define, implement, and complete successful management of change, with regard to employment and leadership of personnel.

Learning and teaching strategies and methods (referring to numbered Intended Learning Outcomes):

- lectures (D1 to D7);
- seminars (D2, D4, D6);
- workshops (D1, D2, D3, D4, D6);
- asynchronous preparatory exercises (D1 to D7);
- use of the VLE (D1, D3, D6);
- directed reading (D1 to D7);
- group work (D3, D4, D5, D7).

Assessment strategies and methods (referring to numbered Intended Learning Outcomes):

- OSCE (D1, D3, D4, D5);
- coursework essay (D1, D3, D4, D7);
- case study (D2 TO D6);
- pitch-and-sell (D6, D7);
- portfolio of work-based learning (D1 to D7).

Programme Skills Matrix

| Units | | Programme Intended Learning Outcomes | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------|---|--------------------------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| | | A1 | A2 | АЗ | A4 | A5 | A6 | Α7 | A8 | B1 | B2 | В3 | В4 | B5 | В6 | C1 | C2 | СЗ | C4 | C5 | C6 | C7 | D1 | D2 | D3 | D4 | D5 | D6 | D7 |
| | Enhanced Assessment Skills for Clinical Practice | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| _evel | Clinical Reasoning and Decision Making in Enhanced Clinical Practice | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 | Leadership and Change in Enhanced Clinical Practice | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

ADMISSION REGULATIONS

The admission regulations for this programme are contained in the University's **Admissions Policy: Apprenticeships**.

Bournemouth University Apprenticeship Board and Admissions Group are currently exploring a institutional approach to admission requirements for apprenticeships, so please be aware that the following is a proposal based on current understanding and may alter to align with future unified application criteria.

In order to commence on the programme, in line with modern Apprenticeship requirements, learners place of work must be in a stable clinical environment suitable to the requirements of the role and conducive to acting in the capacity of Enhanced Clinical Practice. They must also have a nominated mentor experienced in clinical assessment, diagnostics, and management. They must be willing to commit to the facilitation of work-based learning. Examples of appropriate mentor include, but are not limited to, Advanced Clinical Practitioner, Enhanced Clinical Practitioner or Specialist nurse/practitioner, though note this is not an exhaustive list. The mentor must be experienced and currently practicing within the same specialty that the learner intends to practice. If the mentor is changed during the course of the programme learners are required to consult programme lead to review proposed replacement mentor. The learner must also have agreement from their employer that they are willing to support their study throughout the length of the programme and any related End Point Assessment process. In addition to above apprenticeship requirements, learners must hold a professional registration with a recognised healthcare regulatory body.

Learners must also provide evidence of qualification at Level 2 in English and Maths to commence the programme. English and maths training cannot be counted towards off-the-job training hours, although can be funded as part of an apprenticeship. This is a requirement of commencement of End Point Assessment for the IfATE apprenticeship.

In addition, to commence study on the Enhanced Clinical Practice programme at level 6, learners must possess evidence of achievement at level 5 study in an appropriate healthcare field. This could include awards such as DipHE, foundation degree or Advanced Diploma.

When linked to an apprenticeship, learners must engage in an assessment of existing ability in relation to learning objectives identified by that related apprenticeship, referred to as KSBs (Knowledge, Skills and Behaviours). The learner must produce this as part of the application process and before admission to the programme. This initial skills assessment will form the basis of the ongoing skills scan which will be revisited regularly by tripartite members as the programme progresses. Learners commencing the programme with mastery of identified KSBs will have this represented in a proportionate reduction in fees. It is not possible to identify elements of directly delivered learning to excuse them from. Interconnection of KSBs mean that multiple competencies will be applied to each session and unit of study. Where learners already demonstrate mastery of a KSB, off-job training requirements will reflect this proportionately.

In regards to RPL credit allowances, this is impacted by the Apprenticeship Standard minimum length of study. The university standard processes will be applied in application of prior learning for one unit of study. RPL of two or more units would reduce length of study below the minimum prescribed length of one year and learners who exceed this volume of prior learning are therefore not eligible for the apprenticeship. Please note that assessment of RPEL and RPL will be conducted between programme leader and applicant separately. As prior learning may have been conducted without consideration to KSBs, it must not be assumed that RPL and RPEL are equivalent. In these cases, learners would receive guidance and education to achieve specific KSBs linked to RPL units where they are yet to achieve mastery.

PROGRESSION ROUTES

Graduates of the programme at level 6 would satisfy the academic requirements of application for the existing MSc Apprenticeship in Advanced Clinical Practice. This would allow continuation of study at

BU and satisfy DoH progression intentions for ECPs. This synergises well with BU fusion strategy. Additionally, this aligns with the progression route identified by IfATE.

In order to take advantage of exciting new approaches to learning and teaching, as well as developments in industry, the current, approved Articulation/Recognition/Progression route(s) for this programme may be subject to change. Where this happens learners will be informed and supported by the faculty as early as possible.

Recognition arrangements provide formally approved entry or progression routes through which apprentices are eligible to apply for a place on a programme leading to a BU award. Recognition does not guarantee entry onto the BU receiving programme only eligibility to apply. In some cases, additional entry criteria such as a Merit classification from the feeder programme may also apply. Please see the recognition register for a full list of approved Recognition arrangements and agreed entry criteria.

ASSESSMENT REGULATIONS

The regulations for this programme are the University's Standard Postgraduate / Assessment Regulations.

OFF-THE-JOB TRAINING DELIVERY

Off-job training will be delivered by day release. This will be a combination of scheduled taught content via defined units and guidance on application of knowledge in the clinical space. The programme will be 68 weeks in length, learners working 30 hours per week or more who have no RPL of KSB will be expected to complete 380 hours of off-job training. Direct delivery of learning equates to 100 hours, with 280 hours attributed to self-directed study. This will include preparatory study for taught session and linked assessments. Additionally, it will be employed in learning towards application of KSBs in the clinical space, and curation of a portfolio of evidence required as part of the End Point Assessment process. Learners will be guided to satisfying this requirement through a multifocal approach. It is the learner's responsibility to record and maintain evidence of off-job training hours completed. Apprentices will be supported in this through apprenticeship compliance software named BUD. At defined milestones each learners logged hours will be compared to the expected amount by that point of the programme. Those learners not achieving this expected amount will be contacted and supported. A portfolio of exercises linked to preparation or follow-on from taught content will be curated, each with an expected amount of hours to complete. Templates for documenting and exploring experiential learning opportunities will be available to each learner Off-job training will be scrutinised by Tripartite at regular intervals. English and maths training cannot be counted towards off-the-job training hours, although can be funded as part of an apprenticeship.

Embedded throughout off-job training delivery will be British Values. These will be contextualised to delivered content or to application of self-undertaken learning exercises. Contextual features will demonstrate their relevance to indicative learning and the programme intent. By presenting them in a prominent fashion, it is intended that these values will have an expanded value when discussed in Tripartites, drawing a link between theory and practice.

Learners will be familiar with the concept of safeguarding and PREVENT through their clinical roles. Safeguarding will remain a prominent feature throughout the length of the programme. Learners will be made aware of support available to them through the University. All features of support available to the student body will be at their disposal. These resources will be clearly signposted and referred to by the faculty. In addition to these we will embed two taught sessions delivered by the student wellbeing and safeguarding team at BU to support apprentices understanding of safeguarding and prevent procedures as an apprentice, and how it might apply in their practice.

Session one will cover a basic awareness and understanding of Safeguarding in HE including the difference between Safeguarding and Wellbeing and how and when to escalate.

Safeguarding session two - brief recap of session one and then focus on risk perception and vicarious trauma. Sessions include references to clinical settings and how responses might differ.

Safeguarding as concept will feature in the delivered learning of each unit. Learners will be guided to reflect upon their role in safeguarding others and also guided to apply these concepts to themselves to empower them to engage with available services.

Learners will be introduced to End Point Assessment (EPA) intentions, and by association Gateway requirements, from the commencement of the programme. This will be revised at regular points during each unit to consider how learned concepts and achieved KSBs contribute to the EPA and how to apply them in preparation for the EPA following trigger of Gateway. EPa will also be discussed during Tripartites in order to ensure learneres are best prepared for the assessment and how they can satisfy its requirements in their specific clinical field. They will be encouraged to gain support from their personal tutor and peers on application of learning to satisfy the assessment brief. Resources from the End Point Assessment Organisation (EPAO) will also be made available, through agreement with the EPAO, for learners to familiarise themselves with process and expectation.

CAREERS SUPPORT

Application of practical knowledge is a cornerstone principle in programme design in the Enhanced Clinical Practice programme. Apprentices will be encouraged at all times to implement skills learnt into their clinical practice and reflect on their effect. The concept of service development and career development are embedded principals in the third unit of study, where learners will be encouraged to consider their development after conclusion of the programme. In addition to these processes, CareerBU have committed to hosting workshops supporting career progression, which will be available to apprentices on the programme.

APPROVED SUB-CONTRACTORS

Not applicable.