

Programme Audit/Major Modification report

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| Programme provider: | Liverpool, University of |
| In partnership with: (Associated practice placement providers involved in the delivery of the programme) | <p>Clatterbridge Cancer Centre Clatterbridge Hospital Liverpool Enhanced Training Practice Liverpool Heart and Chest Hospital Liverpool Women's Hospital Marie Curie Hospice Mersey Care NHS Blood Transplant Service North West Boroughs Healthcare NHS Foundation Trust Royal Liverpool and Broadgreen University Hospitals Trust/ Broadgreen Hospital Royal Liverpool and Broadgreen University Hospitals Trust/ Royal Liverpool University Hospital St Helens & Knowsley Hospitals/ St Helens Hospital St Helens & Knowsley Hospitals/ Whiston Hospital University Hospital Aintree The Walton Centre Willowbrook Hospice Wirral Enhanced Training Practice Wirral University Teaching Hospital Foundation Trust</p> |
| Date of review: | 31 July 2019 |
| Type of Modification | Desktop |
| Provision reviewed: | Registered Nurse - Adult |
| Title of current programme: | Bachelor of Nursing (Hons) - Adult |

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| Title of modified programme if changed: | |
| Academic level of current programme: | <p>England, Wales, Northern Ireland</p> <p><input type="checkbox"/> Level 5 <input checked="" type="checkbox"/> Level 6 <input type="checkbox"/> Level 7</p> <p>SCQF</p> <p><input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10</p> <p><input type="checkbox"/> Level 11</p> |
| Academic level of modified programme if changed: | <p>England, Wales, Northern Ireland</p> <p><input type="checkbox"/> Level 5 <input type="checkbox"/> Level 6 <input type="checkbox"/> Level 7</p> <p>SCQF</p> <p><input type="checkbox"/> Level 8 <input type="checkbox"/> Level 9 <input type="checkbox"/> Level 10</p> <p><input type="checkbox"/> Level 11</p> |
| Reviewer: | Mrs Karen Hibbert |

| Outcome of Approval Panel Meeting | |
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| Outcome: | Recommended for approval |
| Conditions and NMC standard(s)/requirement(s) they relate to: | <p>Resources None identified</p> <p>Admission and progression None identified</p> <p>Practice learning None identified</p> <p>Fitness for practice None identified</p> <p>Quality assurance None identified</p> |
| Date conditions to be met: | |
| Recommendations and NMC standard(s)/requirement(s) they relate to: Note: recommendations will be assessed through the AEI annual self-assessment report | None identified |
| Date conditions met: | |
| Programme start date: | 23 Sep 2019 |

Summary

Summary of modification request

The University of Liverpool (UoL) department of nursing within the school of health sciences has a pre-registration nursing Bachelor of Nursing (Hons) (adult) programme approved by the Nursing and Midwifery Council (NMC) in December 2011. The programme is approved against the Standards for pre-registration nursing education (NMC, 2010).

The UoL, an established approved education institution (AEI), presented a major modification to the programme to transfer students from the Standards to support learning and assessment in practice (SLAiP) (NMC, 2008) to the Standards for student supervision and assessment (SSSA) (NMC, 2018) from September 2019.

The UoL is a member of the north west practice education group (NWPEG) which is a collaborative group of representatives from AEIs and practice learning partners (PLPs) across the north west of England. NWPEG aims to ensure a joint approach to support, supervision and assessment of student nurses, especially in practice learning environments which are shared by more than one AEI.

A rationale for the modification is clearly presented and there is documentary evidence of partnership agreements with PLPs who support the transfer to the SSSA.

There is clear documentary evidence of how practice supervisors, practice assessors and academic assessors will be prepared, and allocated to support, supervise and assess students.

Documentary evidence and a teleconference with the AEI provides assurance of effective partnership working, and involvement of key stakeholders including PLPs, students and service users in the proposed transfer to the SSSA. (NMC, 2018)

The major modification to the programme is recommended to the NMC for approval.

Feedback from key stakeholders

Presenting Team

Desktop review: Teleconference with the QA visitor and UoL head of nursing on 31 July 2019.

Mentors, sign-off mentors, practice teachers and employers

Not applicable - Desktop review.

Students

Not applicable - Desktop review.

Service users and carers

Not applicable - Desktop review.

Examples of notable and innovative practice and standards they relate to

None identified

Potential risks to compliance of education standards and standards they relate to

None identified

Potential risks to the student learning environment and standards they relate to

None identified

Any other risks to public protection

None identified

Areas for future monitoring

The implementation and monitoring of the SSSA.

Outcome recommendation

The modification to the programme is recommended to the NMC for approval.

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| NMC Standards |
| Please refer to the Standards for pre-registration nursing education (NMC, 2010), Advice and supporting information for implementing NMC standards for pre-registration nursing education . |

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| Competencies for entry to the register | |
| Domain: Professional values | |
| Generic standard for competence | |
| Field standard for competence | |
| Competencies 1-9 | |
| What we found: | |
| Unchanged since original approval in December 2011. | |
| Outcome: | Standard met |
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| Date standards met: | |
| Revised outcome: | |
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| Domain: Communication and interpersonal skills |
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| Generic standard for competence | |
| Field standard for competence | |
| Competencies 1-8 | |
| What we found: | |
| Unchanged since original approval in December 2011. | |
| Outcome: | Standard met |
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| Date standards met: | |
| Revised outcome: | |
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| Domain: Nursing practice and decision making | |
| Generic standard for competence | |
| Field standard for competence | |
| Competencies 1-10 | |
| What we found: | |
| Unchanged since original approval in December 2011. | |
| Outcome: | Standard met |
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| Date standards met: | |
| Revised outcome: | |

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| Domain: Leadership, management and team working | |
| Generic standard for competence | |
| Field standard for competence | |
| Competencies 1-7 | |
| What we found: | |
| Unchanged since original approval in December 2011. | |
| Outcome: | Standard met |
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| Date standards met: | |
| Revised outcome: | |
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| Standards for education |
| Standard 1: Safeguarding the public – Nursing and midwifery education must be consistent with The Code: Professional standards of practice and behaviour for nurses and midwives (NMC, 2015) |
| R1.1 Approved Education Institutions (AEIs) must be accountable for the programme. |
| R1.2 Programme providers must make the needs of service users their first priority. |
| R1.3 Programme providers must have clear processes in place to deal with any |

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| <p>concerns about the safety of service users.</p> <p>R1.4 Programme providers must have effective policies and procedures on fitness to practise.</p> | |
| <p>What we found:</p> | |
| <p>R1.1-R1.4 Unchanged since original approval in December 2011.</p> | |
| <p>Outcome:</p> | <p>Standard met</p> |
| <p> </p> | |
| <p>Date standards met:</p> | <p> </p> |
| <p>Revised outcome:</p> | <p> </p> |
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| <p>Standard 2: Equality and diversity – Nursing and midwifery education must address key aspects of equality and diversity and comply with current legislation</p> | |
| <p>R2.1 Programme providers must ensure that information about programmes is clear and easily obtainable, and gives sufficient information to allow an applicant to make an informed choice.</p> <p>R2.2 Programme providers must ensure that programmes comply with current equality and diversity legislation, including making reasonable adjustments without compromising safety.</p> <p>R2.3 Programme providers must have clear policies, guidance and action plans that recognise and respond to the benefits of diversity, promote equality and address discrimination and harassment.</p> | |
| <p>What we found:</p> | |
| <p>R2.1-R2.3 Unchanged since original approval in December 2011.</p> | |

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| Outcome: | Standard met |
| Date standards met: | |
| Revised outcome: | |
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Standard 3: Selection, admission, progression and completion – Processes for selection, admission, progression and completion must be open and fair

R3.1 AEs must ensure that selection and admission criteria include evidence of a good command of written and spoken English, including reading and comprehension. For programmes delivered in Wales, selection and admission criteria must include evidence of a good command of written and spoken English or Welsh, including reading and comprehension.

R3.2 AEs must ensure that selection and admission criteria include evidence of capacity to develop numeracy skills sufficient to meet the competencies required by the programme.

R3.3 AEs must specify appropriate academic and professional entry requirements.

R3.4 AEs must ensure that students meet NMC requirements for good health and good character.

R3.5 Programme providers must ensure that programmes include opportunities for accreditation of prior learning (APL).

R3.6 AEs must ensure that the selection process provides an opportunity for face-to-face engagement between applicants and selectors.

R3.7 AEs must ensure that the selection process includes representatives from practice learning providers.

R3.8 Programme providers must ensure that selection is conducted by people who have been trained in the principles of selection, anti-discriminatory behaviour and equal opportunities.

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| <p>R3.9 Programme providers must have processes to manage interruptions to programmes.</p> <p>R3.10 AEs must make explicit any arrangements for student progression.</p> <p>R3.11 AEs must have processes in place to confirm achievement of all programme requirements.</p> <p>R3.12 AEs must inform students when they complete a programme that they have five years in which to register or record a qualification leading to a mark on the NMC register.</p> <p>R3.13 AEs must ensure that students comply with NMC requirements for good health and good character at completion.</p> | |
| What we found: | |
| <p>R3.1-R3.8 Unchanged since the original approval in December 2011.</p> <p>R3.9 The process remains the same. Students returning from an interruption to their studies will transfer to the SSSA.</p> <p>R3.10-R3.13 Unchanged since the original approval in December 2011.</p> | |
| Outcome: | Standard met |
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| Date standards met: | |
| Revised outcome: | |
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Standard 4: Support of students and educators – Programme providers must support students to achieve the programme outcomes, and support educators to meet their own professional development needs

R4.1 Programme providers must ensure that programmes include an induction period during which the requirements of the curriculum are explained.

R4.2 Programme providers must ensure that students are allocated to an identified mentor, practice teacher or supervisor during practice learning.

R4.3 Programme providers must ensure that those who supervise students in practice are properly prepared and supported in that role.

R4.4 AEIs must ensure that support facilities, including learning support, are available to all enrolled students.

R4.5 Programme providers must give students access to pastoral support, occupational health facilities and disability specialists.

R4.6 Programme providers must ensure that learning time is protected as specified.

R4.7 Programme providers must provide nurse and midwife teachers with time for professional development to enable them to remain up to date in their field of practice.

What we found:

R4.1 Unchanged from the original approval in December 2011.

R4.2 Documentary evidence confirms that the AEI and PLPs will ensure that students will be allocated identified practice supervisors, practice assessors and academic assessors during practice learning from September 2019 to meet the SSSA.

There is a clear implementation plan to prepare staff for the new roles and evidence of partnership agreements between the AEI and PLPs.

Documentary evidence confirms the changes to student supervision and assessment are clearly outlined within student facing documentation, specifically the practice assessment record (PAR) and student handbook.

The head of nursing confirms that practice supervisors and practice assessors will be allocated by the PLPs via the ward managers. This will be overseen by the practice education facilitators (PEFs). Practice supervisors and practice assessors must complete the appropriate learning materials and the appropriate checklist; this will be logged and only suitably prepared staff will be allocated to the roles.

Documentary evidence confirms university nursing lecturers will fulfil the role of

academic assessor, and students will not have the same academic assessor for consecutive years. Academic assessors will be allocated by the director of studies and will be prepared for the role by the AEI.

R4.3 A collaborative approach for the preparation and ongoing support for the new roles of practice supervisor, practice assessor and academic assessor are clearly evidenced and meet the SSSA requirements. Training materials have been developed in collaboration with PLPs and the AEI through the NWPEG to ensure equity and consistency of training across the PLPs.

Self-declaration forms will be completed by practice supervisors, practice assessors and academic assessors to confirm they have received the appropriate preparation and they have the required qualifications for the role.

Each student will have designated support whilst on placement, practice supervisors, a practice assessor, link lecturer, and academic advisor. The link lecturer will be an academic who links with a particular PLP. They will work closely with the PEFs who manage student placements to maintain partnership working with the PLPs. All students will be allocated an academic advisor when they commence the programme and will meet with them at least once a semester. The academic advisor is allocated for the full programme of study and works with the student to achieve their academic potential, supporting the student and signposting support as needed.

Academic assessors will be allocated a number of students every year and these will change every year. These lecturers/academic assessors will work with the practice assessors to ensure fair, comprehensive assessment of practice learning.

There is documentary evidence which confirms effective partnership working between the AEI and PLPs including partnership working to prepare staff for the roles to meet the SSSA.

R4.4-R4.7 Unchanged from the original approval in December 2011.

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| Outcome: | Standard met |
| Date standards met: | |
| Revised outcome: | |
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| Standard 5: Structure, design and delivery of programme – The programme must be structured, designed and delivered to meet NMC standards and requirements | |
| R5.1 AEs must ensure that programme development and delivery involves key stakeholders. | |
| R5.2 AEs must specify the required hours, days or weeks of learning. | |
| R5.3 Programme providers must clearly set out the structure of the programme. | |
| R5.4 Programme providers must state what teaching and learning methods will be used to support achievement of outcomes. | |
| R5.5 Programme providers must ensure that learning opportunities are offered at an appropriate academic level using evidence-based sources. | |
| R5.6 Programme providers must specify essential content of the programme. | |
| R5.7 Programme providers must ensure that students have the opportunity to learn with, and from, other health and social care professionals. | |
| What we found: | |
| R5.1-R5.7 Unchanged since original approval in December 2011. | |
| Outcome: | Standard met |
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| Date standards met: | |
| Revised outcome: | |
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Standard 6: Practice learning opportunities must be safe, effective, integral to the programme and appropriate to programme outcomes

R6.1 AEs must provide students and those supporting practice learning with information that includes dates, outcomes to be achieved, and assessment documents for each period of practice learning.

R6.2 Programme providers must ensure that mentors and practice teachers meet the relevant requirements within the *Standards to support learning and assessment in practice* (NMC 2008).

R6.3 Programme providers must ensure that local registers of mentors and practice teachers are maintained according to *Standards to support learning and assessment in practice* (NMC 2008), including sign-off status of mentors, record of updates and date for triennial review.

R6.4 Programme providers must use objective criteria and processes for approving new practice learning environments, and audit them at least every two years.

R6.5 Programme providers must ensure that students have access to a range of practice learning opportunities sufficient to meet programme outcomes.

What we found:

R6.1 Documentary evidence confirms the assessment of students' proficiency and competence, EU directives and essential skills clusters (ESCs) (NMC, 2010) are all recorded in the practice assessment record (PAR). These aspects of the programme are not changing, as the programme is still mapped against the Standards for pre-registration nursing education (NMC, 2010). However, who is eligible to contribute to the assessment of practice has changed in line with the new SSSA roles of practice supervisor, practice assessor and academic assessor. The PAR is updated to reflect these changes.

Documentary evidence and discussions during the teleconference indicate the AEs and PLPs have processes in place to ensure the SSSA is met. The PEFs work closely with the PLP's practice learning areas to ensure suitably prepared practice supervisors, and practice assessors.

The checklists and preparation completed by the practice assessors and academic assessors clearly indicate the need for due regard for these roles.

R6.2-R6.3 Unchanged since original approval in December 2011.

R6.4 Documentary evidence and discussion with the head of nursing give assurance that monitoring of the effectiveness of the practice learning environment continues to be undertaken in partnership with PLPs. The educational audit tool has been revised

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| to ensure compliance with the SSSA. | |
| R6.5 Unchanged since original approval in December 2011. | |
| Outcome: | Standard met |
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| Date standards met: | |
| Revised outcome: | |
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| Standard 7: Outcomes – The programme outcomes must ensure that NMC standards for competence are met and that students are fit for practice and fit for award on completion | |
| R7.1 Programme providers must ensure that the programme outcomes enable students to achieve the NMC standards for competence and that they are fit for practice and fit for award on completion. | |
| R7.2 AEs must make explicit requirements for the conferment of academic awards where applicable. | |
| What we found: | |
| R7.1-R7.2 Unchanged since original approval in December 2011. | |
| Outcome: | Standard met |
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| Date standards met: | |
| Revised outcome: | |
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| Standard 8: Assessment – Programme outcomes must be tested using valid and reliable assessment methods | |
| R8.1 Programme providers must ensure that a variety of assessments are used to test the acquisition of approved outcomes, with reasonable adjustments for students with a disability. | |
| R8.2 Programme providers must ensure that assessment processes enable students to demonstrate fitness for practice and fitness for award. | |
| R8.3 AEs must appoint external examiner(s) who can demonstrate currency in education and practice with due regard and engage with assessment of both theory and practice. | |
| What we found: | |
| R8.1-R8.3 Unchanged since the original approval, as the programme is still mapped against the Standards for the pre-registration nursing education (NMC, 2010). However, who is eligible to contribute to the assessment of practice has changed in line with the new SSSA roles of practice supervisor, practice assessor and academic assessor. The practice assessment record (PAR) is updated to reflect these changes. | |
| Outcome: | Standard met |
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| Date standards met: | |
| Revised outcome: | |
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| Standard 9: Resources – The educational facilities in academic and practice settings must support delivery of the approved programme |
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| R9.1 AEs must ensure that the programme leader is a nurse or midwife with a teacher qualification recorded on the NMC register. | |
| R9.2 AEs must ensure that teachers have appropriate qualifications and experience for their roles. | |
| R9.3 Programme providers must ensure that sufficient staff are allocated to deliver the programme effectively. | |
| R9.4 Students must have access to appropriate learning approaches in a variety of formats on all sites. | |
| What we found: | |
| R9.1-R9.4 Unchanged since original approval in December 2011. | |
| Outcome: | Standard met |
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| Date standards met: | |
| Revised outcome: | |
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| Standard 10: Quality assurance – Programme providers must use effective quality assurance processes in which findings lead to quality enhancement | |
| R10.1 Programme providers' quality assurance processes must be aligned with the programme specification, programme evaluation and enhancement. | |
| R10.2 AEs must demonstrate that they use effective quality assurance processes including conjoint programme approval, approval of minor or major modifications, endorsement and annual monitoring. | |
| R10.3 Programme providers must allow the NMC and its agents access to monitor programmes. | |
| What we found: | |

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| R10.1-R10.3 Unchanged since original approval in December 2011. | |
| Outcome: | Standard met |
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| Date standards met: | |
| Revised outcome: | |
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| <u>NMC Circular 03/2011</u> - Resources to support programme intentions | |
| Programme providers must provide evidence at programme approval that resources are currently available to support programme intentions. | |
| What we found: | |
| Documentary evidence demonstrates suitable systems, processes, resources and individuals are in place to ensure safe and effective coordination of learning within the practice learning environments. (SSSA R1.4) | |
| The AEI has partnership agreements with the PLPs clearly outlining their commitment to provide resources and practice learning experiences for students. This commitment includes the allocation of suitably prepared practice supervisors and practice assessors. Assurance is provided that resources are in place for the implementation of the SSSA. | |
| Outcome: | Standard met |
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| Date standards met: | |
| Revised outcome: | |
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Evidence and references list

Academic assessor pan assessment, undated
UoL academic assessor preparation, undated
Academic assessor self-declaration form, undated
Academic assessor template v3, undated
Aintree principles for practice learning, undated
Assessor handbook, undated
Cheshire and Merseyside consortium curriculum and development meeting, 3 June 2019
Cheshire and Merseyside cross AEIs meeting, 24 June 2019
Cheshire and Merseyside PEF network response, June 2019
Curriculum planning HCP stakeholder summary, undated
Curriculum planning meeting minutes, 13 June, 26 June 2019
Learning outcomes for understanding professional supervision of learners in practice, undated
Learning outcomes understanding professional assessment of learners in practice, undated
New NMC standards checklist V2 pan guidance, undated
NMC key changes flyer pan guidance, undated
NMC new standards presentation for practice SSSSA updates pan materials, undated
NMC student and learner support in practice pan guidance, undated
NMC Supervision assessment practice organisation checklist, undated
NWPEG notes, 21 May 2019
UoL Nursing handbook 2019-20, undated
UoL BN rationale for programme modification to SSSA, undated
Outline of link lecturer role, undated
Overview of SSSA implementation document, undated
Practice assessment record and evaluation (PARE) SSSA guidance for practice staff, undated

Partnership agreement signed.pdf (discussed with head of nursing 31 July 2019)
 BN Nursing programme management meeting minutes, 1 July 2019
 Practice assessor pan teaching material, undated
 Practice assessor role description, undated
 Practice assessor self-declaration form pan assessment, undated
 Practice supervisor handbook pan teaching material, undated
 Practice supervisor role description, undated
 Practice supervisor self-declaration pan assessment, undated
 UoL RNA major modification transfer to SSSA, undated
 Royal Liverpool University Hospital Trust agenda, 12 July 2019
 Service user engagement meeting, 16 May 2019
 Service user meeting, 20 June 2019
 SSSA revised year one PAR (adult), version one, 14 June 2019
 UoL student alumni meeting notes, 30 April 2019
 Student support in practice from 2019, undated
 Transition to new NMC assessor and supervisor roles pan guidance, undated
 UoL Academic assessor allocation plan, undated
 Year two and year three addendum nursing handbook 2019-20, undated

| Personnel supporting programme approval | |
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| Members of Approval Panel | |
| Not applicable - Desktop review. | |
| Programme Presenters | |
| The NMC QA visitor had a teleconference with the UoL head of nursing on 31 July 2019. | |
| Were any service providers visited? | |
| <i>Not applicable – Desktop review.</i> | |
| Meetings with others | |
| Mentors / sign-off mentors | |

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| Practice teachers | |
| Service users / Carers | |
| Practice Education Facilitator | |
| Director / manager nursing | |
| Director / manager midwifery | |
| Education commissioners or equivalent | |
| Designated Medical Practitioners | |
| Other (please specify) | |

If there were no representatives present during the approval event please state why:

Not applicable - Desktop review.

Meetings with students

| Nursing | | | | | |
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| Adult | | Year 1 | Year 2 | Year 3 | Year 4 |
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| Mental Health | | Year 1 | Year 2 | Year 3 | Year 4 |
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| Children's | | Year 1 | Year 2 | Year 3 | Year 4 |
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| Learning Disabilities | | Year 1 | Year 2 | Year 3 | Year 4 |
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| Midwifery (3 year) | | Year 1 | Year 2 | Year 3 | |
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| Midwifery (18 month) | Year 1 | Year 2 | | | |
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| SCPHN | HV | SN | OH | FHN | RPHN |
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| Learning and Assessment in Practice | Mentor | | Practice Teacher | Teacher | |
| | | | | | |
| Nurse Prescribing | V100 | | V150 | V300 | |
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| Specialist Practice | Adult | | Mental Health | Children's | |
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| | Learning Disability | | General Practice Nursing | Community Mental Health Nursing | |
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| | Community Learning Disabilities Nursing | | Community Children's Nursing | District Nursing | |
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Additional evidence viewed

Email from St Helens and Knowsley confirming the actions taken to prepare for SSSA, July 2019

Email from the chairs of the Cheshire and Merseyside PEF network stating preparation for the SSSA, July 2019

Accessed the practice assessment record and evaluation website, contains information on practice support, assessment and progression, 29 July 2019

Mott MacDonald Group Disclaimer

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Issue record

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|--------------|----------------|-------|-------------|
| Author: | Karen Hibbert | Date: | 10 Aug 2019 |
| Checked by: | Judith Porch | Date: | 14 Aug 2019 |
| Approved by: | Helen Shapcott | Date: | 15 Aug 2019 |
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