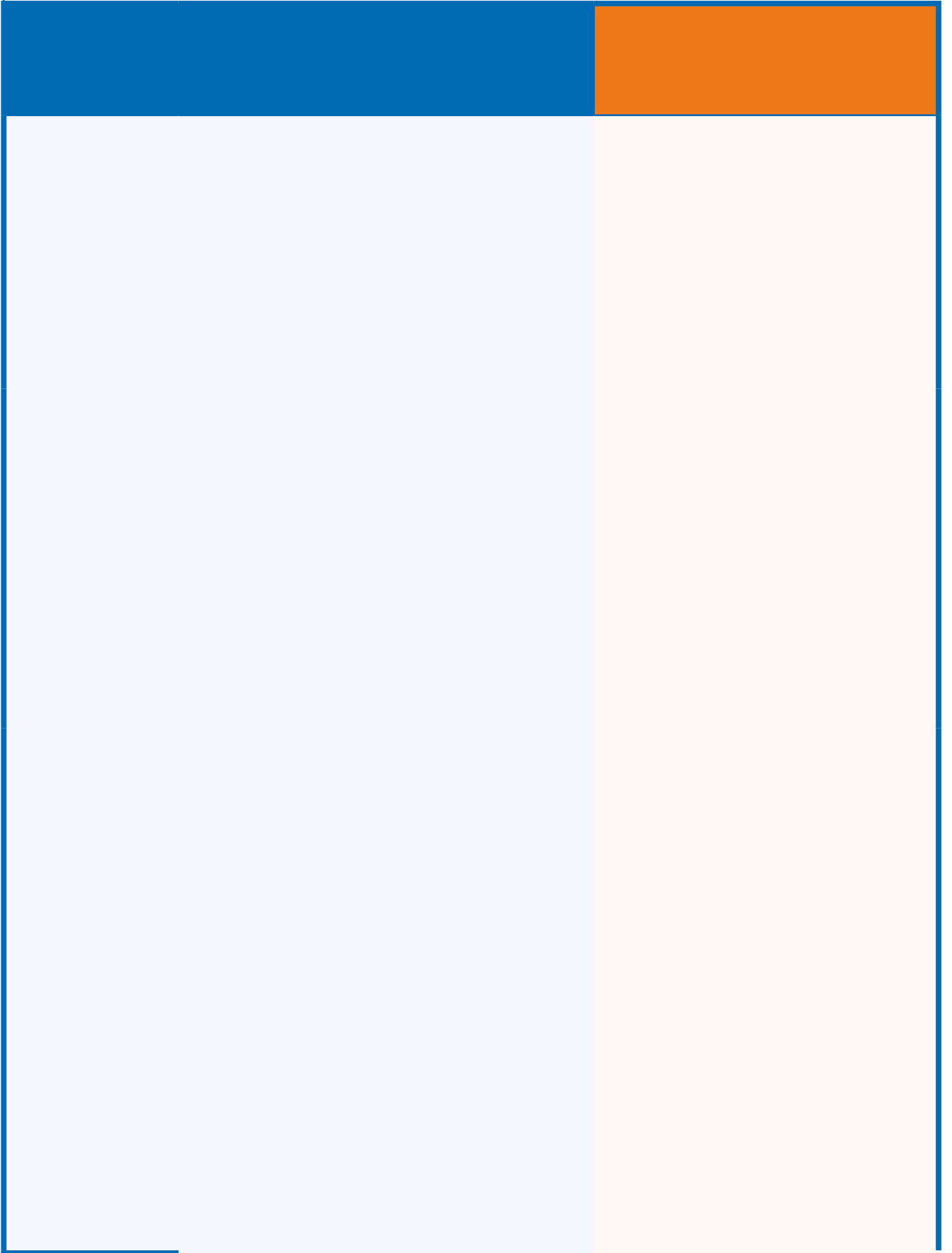


# Quality assurance checklist for medicines training processes in adult community settings

NICE recommendation	Describe the ways our current practice/processes work in line with the NICE recommendation
<p>1.11.1 (continued)</p> <p>...</p>	
<p>1.11.1 (continued)</p> <p>...</p>	



Can evidence be provided to demonstrate the practice/process that is described above?

Reflect on the answers.

D  
NICE

Name of community setting / provider (and branch if applicable):

Name of staff member completing the checklist:

Job title of staff member completing the checklist:

Date(s) checklist was completed: