

## HCPC approval process report

Education provider	Bangor University
Name of programme(s)	PGDip Physiotherapy, Full time
Approval visit date	18-19 July 2019
Case reference	CAS-14503-S3F5D5

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### Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

## Section 1: Our regulatory approach

### Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Janet Lawrence	Physiotherapist
Joanna Jackson	Physiotherapist
Manoj Mistry	Lay
Patrick Armsby	HCPC executive

### Other groups involved in the approval visit

There were other groups in attendance at the approval visit as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Myfanwy Davies	Independent Chair (supplied by the education provider)	Bangor University – Head of the Quality Assurance & Validation Unit
Wendy Williams	Internal Panel Member	Bangor University – Quality Assurance & Validation Unit
Karen Chidley	Internal Panel Member	Bangor University – Quality Assurance & Validation Unit

Gavin Lawrence	Internal Panel Member	Bangor University – Senior Lecturer, School of Sport, Health & Exercise Science
Errol Grant	Internal Panel Member	Bangor University– Student Reviewer, Business School
Nina Paterson	Chartered Society of Physiotherapy (CSP) Panel Member	CSP – Head of Learning and Development
Alexandra Hough	Chartered Society of Physiotherapy (CSP) Panel Member	CSP – Professional Advisor
Graham Copnell	Chartered Society of Physiotherapy (CSP) Panel Member	CSP – Education Representative

## Section 2: Programme details

Programme name	PGDip Physiotherapy
Mode of study	FT (Full time)
Profession	Physiotherapist
First intake	01 October 2019
Maximum learner cohort	Up to 15
Intakes per year	1
Assessment reference	APP02090

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involves consideration of documentary evidence and an onsite approval visit, to consider whether the programme meet our standards for the first time.

The first intake date in the table above is based on the visit request form. However, there was conflicting information about the start date within the documentation. Therefore, it may be subject to change.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted
Completed education standards mapping document	Yes
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes
Descriptions of how the programme delivers and assesses learning	Yes

Proficiency standards mapping	Yes
Information provided to applicants and learners	Yes
Information for those involved with practice-based learning	Yes
Information that shows how staff resources are sufficient for the delivery of the programme	Yes

We also usually ask to meet the following groups at approval visits, although there may be some circumstances where meeting certain groups is not needed. In the table below, we have noted which groups we met, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	Yes	As this is a new programme, the panel met with a learner from PGDip Adult Nursing and three learners from Advanced Clinical Practice.
Service users and carers (and / or their representatives)	Yes	
Facilities and resources	Yes	
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 26 September 2019.

#### **2.1 The admissions process must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.**

**Condition:** The education provider must show that the information provided for this programme, allows applicants to make an informed choice about whether to take up a place on the programme.

**Reason:** Prior to the visit, the education provider guided the visitors to the Physiotherapy PGDip webpage to highlight the admissions information available for potential applicants. The visitors noted that the webpage was not complete and some information had been omitted such as an outline of the programme, information about funding and additional costs. The visitors were told in the programme team meeting, more information would be uploaded for potential applicants such as information about additional costs and the differing funding routes within the programme. Specifically, the details regarding commissioned and privately funded places. As the visitors were not able to view the content for this further information, they could not judge whether applicants will have the appropriate information to make an informed choice, about whether to take up an offer on the programme. Therefore the education provider must provide evidence to show that applicants will be provided with all appropriate details before they make the decision to take up a place on the programme.

### **3.1 The programme must be sustainable and fit for purpose.**

**Condition:** The education provider must show the programme is sustainable and fit for purpose.

**Reason:** To evidence this standard, the education provider provided a link to the internal quality audit page on the Bangor University website. The visitors were able to see that the university has processes in place to ensure the ongoing quality of the programme, but could not see that how audits that take place every 6 years ensure that the programme is sustainable or fit for purpose. At the visit, the visitors queried how the education provider was going to ensure there is sufficient resources, staffing and commitment from partners to make the programme sustainable. The education provider told the visitors that they were in the preliminary stages of hiring new members of teaching staff. The visitors noted that at the time of the visit there were insufficient staff numbers and a lack of physical resources for the programme. They also provided a list of equipment that had been requested for the programme. The visitors could not confirm that this equipment would be provided or if the request had been successful. Without appropriate resources in place, the visitors noted that insufficient support will be available for the programme. Therefore, the visitors were not certain that the programme is currently sustainable. This standard is about making sure that there is a future for the programme that is currently secure and is supported by all stakeholders involved. The education provider must show that the programme will be appropriately resourced in order for it to be delivered effectively.

The visitors also raised questions about the programme being fit for purpose. The visitors found the standard of proficiency (SOPs) mapping to be generic and were not able to determine whether the module content would ensure that the SOPs were being appropriately covered. This is covered in further detail in the condition for standard 4.1. As they were not clear about the modular content covering the SOPs, they could not confirm that the programme is currently fit for purpose.

### **3.5 There must be regular and effective collaboration between the education provider and practice education providers.**

**Condition:** The education provider must demonstrate how there will be regular and effective collaboration between the education provider and practice education providers.

**Reason:** Prior to the visit, the education provider stated in the SETs mapping document that there were regular meetings between the “education provider and practice education providers”. The name or details of the practice education providers were not disclosed, in the evidence provided. The education provider also provided minutes from the Practice Education Quality Assurance Group Minutes for visitors, before the visit. However, these minutes made no mention of physiotherapy or the start of the PGDip programme. From this information, the visitors could not confirm that there was regular and effective collaboration between the education provider and practice educators.

At the visit, the visitors asked about the nature of the collaboration between the relevant partners and the education provider. The senior team, programme team and practice educators confirmed there had been contact between the practice educators and education provider but they did not confirm the frequency or how regularly the meetings took place between the two parties. Due to this the visitors could not determine if this practice reflected there was effective collaboration between the two groups. By ‘regular’ collaboration we mean that the arrangements for working with others must reflect a partnership and ongoing relationship, not joint work and co-operation that only happens around the time the programme is approved or being monitored, or when specific issues arise with practice-based learning. For the visitors to consider this standard to be met they would need to see how the education provider and practice education providers will work in partnership to ensure ongoing quality and effectiveness.

### **3.6 There must be an effective process in place to ensure the availability and capacity of practice-based learning for all learners.**

**Condition:** The education provider must demonstrate there is an effective process in place to ensure the availability and capacity of practice-based learning for all learners.

**Reason:** To evidence this standard the education provider stated in the SETs mapping document that Bangor university has a “high level understanding” with the local health board. At the visit, the nature of this collaboration was discussed. The visitors were told there had been meetings with potential partners to discuss placement capacity. It was also disclosed to the visitors that the meetings with partners were irregular and there was not a specific plan for the regularity of conducting these meetings. Furthermore, the visitors were not able to view any formalisation of practice-based learning capacity so were unable to confirm that the current process is effective at ensuring that all learners will have access to practice-based learning that meets their learning needs.

### **3.9 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.**

**Condition:** The education provider must show there is an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

**Reason:** To evidence this standard the education provider made a statement in the SETs mapping document that the “university [wide] staff/student ratio” would ensure there were sufficient staff to deliver the programme. The visitors were not provided with the university staff/student ratio and noted from staff curriculum vitae’s (CVs), that there was currently only one physiotherapy specific member of the teaching staff. At the visit the visitors raised questions about recruitment strategies and the progress for recruiting new members of staff. The senior team confirmed they were at the interview stage for the recruitment of a programme leader, and they had plans to advertise for two

additional members of staff for the teaching team. The senior team and programme team also told the visitors that the new members of the teaching staff would have a cardio-vascular and respiratory systems speciality and the other would have neuromuscular speciality to compliment the current member of staff, who has a musculoskeletal background. The visitors noted that this plan would provide sufficient numbers of profession specific staff for the programme. However, the process for employing these new members of staff is in the very early stages and the visitors were not provided with specific detail of required qualifications and experience for this recruitment process. Therefore, the visitors were not able to judge that the new members of staff will be appropriately qualified and experienced nor were they able to confirm there would be an adequate number of staff in place to deliver the programme effectively.

### **3.10 Subject areas must be delivered by educators with relevant specialist knowledge and expertise.**

**Condition:** The education provider must demonstrate that subject areas will be delivered by educators with relevant specialist knowledge and expertise.

**Reason:** To evidence this standard, the education provider stated in the SETs mapping document that the programme teaching team will be made of a range of “clinical specialisms such as Musculoskeletal (MSK), Neurological and Cardiorespiratory”. Upon a review of the staff CVs, the visitors noted that the teaching staff only contained one qualified physiotherapist. At the visit, the visitors raised questions about recruitment strategies and the progress for new members of staff. The senior team confirmed they were at the interview stage for the recruitment of a programme leader and they had plans to advertise for two additional members of staff for the teaching team. The senior team and programme team also told the visitors that the new members of the teaching staff would have a cardio-vascular and respiratory systems speciality and the other would have neuromuscular speciality to compliment the current member of staff who has a musculoskeletal background. However, the process for employing these new members of staff is in the very early stages and the visitors were not provided with details of their qualifications or experience. From the documentation provided and discussions held at the visit, the visitors could not judge the knowledge and expertise of all the educators in the process of being recruited. The education provider was not able to confirm which parts of the programme would be delivered by these members of staff. Therefore, the visitors cannot confirm how the staff will be deployed in the programme to ensure that educators have the necessary knowledge and expertise to deliver their parts of the programme effectively. The education provider must provide evidence demonstrating the education and qualifications of the staff to be recruited, and how their expertise will be relevant to this programme so the visitors could judge if this standard has been met.

### **3.12 The resources to support learning in all settings must be effective and appropriate to the delivery of the programme, and must be accessible to all learners and educators.**

**Condition:** The education provider must ensure there are appropriate physical resources and contemporary reading lists available for learners to ensure effective delivery of the programme.

Additionally, the education provider must also ensure that all relevant programme documentation is updated with correct and accurate information. Including information that is reflective of the language associated with statutory regulation and the HCPC.

**Reason:** To evidence this standard prior to the visit, the education provider provided a link to the student services webpage on the Bangor University website. The visitors were able to see a range of support services available to learners but could not see the teaching resources specific to the programme that are available. This standard is about how the education provider ensures that programme resources are readily available to learners and educators and are used effectively to support the required learning and teaching activities of the programme. On the facilities and resources tour during the visit, the visitors were shown some equipment that would be used in the rehabilitation part of the programme. The visitors then requested to see an equipment list to assess the resources available for learners. The list provided to the visitors was a request for equipment to be provided for this programme. As there was no confirmation on whether the request for the list of equipment will be granted and when any equipment purchased will be made available, the visitors could not confirm that the current resources are readily available for the effective and appropriate delivery of the programme. Upon review of the module descriptors, the visitors noted that they did not include a reading list. The visitors queried this with the senior team and were then provided with more up to date module descriptors with the same module content, but with reading lists added. The visitors noted that a lot of the reading materials were out of date and queried the programme team about why they had not sourced the contemporary editions of the books for learners. The programme team then stated that the more up to date version of the reading list would be provided for learners on the virtual learning environment (Blackboard). The visitors were unable to access Blackboard so could not determine that the reading list ensured learners were exposed to contemporary physiotherapy practice that would ensure they meet the demands of current physiotherapy practice. The visitors noted that providing books that might be out of date would not be effective or appropriate in terms of delivering the programme. The education provider must ensure that all teaching materials available to learners are up to date to allow for meeting the SOPs and meeting the demands of contemporary practice.

The visitors also noted some inaccuracies in the documentation provided for learners. Firstly, in the practice learning handbook on page 42, the education provider has stated that “the very nature of this physiotherapy programme is such that successful completion allows mandatory HCPC registration and a license to practice”. The visitors noted that this statement is incorrect and should read that completion of an approved programme leads to eligibility to apply for registration with the HCPC. Furthermore, the reading lists provided to the visitors made reference to the Health Professions Council (2008) standards of Performance, Conduct and Ethics, rather than the up to date Standards of Conduct Performance and Ethics (SCPEs) from the HCPC. Finally, along with the examples of changes given above, the education provider indicated on the visit there would be changes made to the practice learning handbook, module descriptors and student handbook. These changes will be linked to but not limited to; interprofessional learning, information for applicants, assessment and module content. The visitors must therefore judge that the changes made provide correct information to support learning in all settings and are effective and appropriate for the delivery of the programme.

### **3.16 There must be thorough and effective processes in place for ensuring the ongoing suitability of learners' conduct, character and health.**

**Condition:** The education provider must show a thorough and effective process in place for ensuring the ongoing suitability of learners' conduct, character and health, specifically for this proposed programme.

**Reason:** To evidence this standard in the documentary submission, the education provider highlighted section 1.25 in the student handbook and the institutional student charter. Additionally, the education provider had stated that a document called the student agreement would be tabled at the approval event. Section 1.25 in the student handbook outlines that learners must adhere to institutional regulations and highlights the areas that could cause a breach of conduct. The visitors noted that this did not give an overview of the process for ensuring the ongoing conduct for learners. The education provider also provided a web link to the University student charter. This gave an overview of expectations for all learners across Bangor University. From the information provided prior to the visit, the visitors could determine that learners would be subject to adhering to the institution standards of conduct, but could not see how it was monitored or how the education provider ensured the ongoing suitability of learners' conduct, character and health. The student agreement document was not tabled at the event so visitors were unable to make a judgment if there was a thorough and effective process for ensuring the ongoing suitability of learners' conduct, character and health.

### **4.1 The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register.**

**Condition:** The education provider must show that the learning outcomes and module content ensure that learners are able to meet the standards of proficiency (SOPs) for physiotherapists.

**Reason:** To evidence this standard the education provider directed the visitors to review section 9 in the programme specification and the SOPs mapping document. The SOPs mapping document guided visitors to review the module descriptors provided. Firstly, when the visitors reviewed the module descriptors the education provider had stated that "the module may include" before detailing module content. At the visit, the visitors were told that programmes must prefix all module content with "may" to meet internal procedures. As there was further discussion around the module content, the visitors understood there would be changes to the content. Therefore, visitors would need to see finalised rather than provisional learning outcomes and module content in order to judge that learners are meeting the SOPs.

The visitors also had queries about the learning outcomes and module content, and how they effectively ensured that learners met the SOPs. The visitors found the SOPs mapping to be quite broad and not explicit in mapping the SOPs to module content and learning outcomes. In the programme team meeting the visitors raised an example to understand how the module content had been created. The visitors enquired about the teaching of ergonomics (SOP 13.7) and where in the programme this would be delivered. The visitors were then told it would be in all modules and would run throughout the programme. However, upon a review of all module content there is no mention of ergonomics in any of the modules. The visitors do not expect all individual SOPs to be mapped to individual learning outcomes and noted that module NHS 4448

includes a learning outcome related to human movement which could include ergonomics. However, as this was not clear to the visitors, they could not make a judgement regarding the content of the programme having any relevance to ergonomics.

More broadly to the above example, the visitors need to see explicitly that all the SOPs will be appropriately covered in the module content. As stated the above is an example brought up to the programme team to highlight how the visitors could not see specific SOPs mapped to relevant module content. The education provider must therefore evidence that all SOPs are being covered in learning outcomes or module content.

#### **4.3 The programme must reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance.**

**Condition:** The education provider must demonstrate that the programme reflects the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance.

**Reason:** To evidence this standard prior to the visit, the education provider highlighted the programme philosophy section in the programme specification. While this section gave an overview of the philosophy and core values of the profession, the visitors could not discern how the programme was reflecting the skills and knowledge base of physiotherapy. Upon review of the other documents provided as part of the submission, the visitors found the SOPs mapping to be quite broad and not explicit in mapping the SOPs to module content and learning outcomes. The SOPs set out the requirements for safe and effective practice for physiotherapists, without them being clearly mapped the visitors cannot confirm that the programme is reflective of the skills and knowledge base required for safe and effective practice as a physiotherapist.

This was raised by the visitors in the programme team meeting, specifically citing the area of neurology, also referred to as neuromuscular systems. The visitors were unable to see a mention of this area of practice within the module content and queried what the approach would be for this programme. The programme team responded by explaining the philosophy of the teaching and how they would ensure evidence based practice. However, the programme team were unable to confirm in what module(s) this teaching would occur. The visitors were therefore noted that there was the potential for this area of study to be omitted and thus a key area of knowledge would be missing for learners. The visitors must be certain that learners are being taught all relevant subject areas within physiotherapy. The education provider must show evidence demonstrating the programme is reflecting the philosophy core values, skills and knowledge base to ensure safe and effective practice.

#### **4.4 The curriculum must remain relevant to current practice.**

**Condition:** The education provider must show how they will ensure the programme remains relevant to current practice in the future.

**Reason:** To evidence this standard the education provider highlighted the programme specification to show the “current regulations and standards that guide current practice in physiotherapy”. Upon reviewing the programme specification the visitors could see that the programme had been mapped against the Quality Assurance Agency for Higher Education (QAA) Code for Higher Education (2018), QAA Benchmark Statement for

Physiotherapy (2017) and the HCPC SOPs. While the visitors could see how the programme had drawn on contemporary standards for physiotherapy this standard is about how the programme takes account of and reflects current practice on an ongoing basis, so that it remains relevant and effective in preparing learners for practice. At the visit, the visitors questioned the education provider how they intended to review the programme and ensure it was relevant. The programme team responded by stating there would be an annual review of the programme in which the team would review the curriculum. However, the programme team did not confirm how they would ensure the programme would stay relevant to current practice. The visitors were therefore unable to confirm that the curriculum would consistently be relevant to current practice.

#### **4.5 Integration of theory and practice must be central to the programme.**

**Condition:** The education provider must ensure that theory and practice are effectively integrated to ensure learners are prepared and competent for practice

**Reason:** To evidence this standard prior to the visit the education provider guided the visitors to view their “spiral curriculum model” as a way of showing how they will integrate the theoretical and practical parts of the programme. While the visitors understood the theoretical concept of the spiral model, the information provided did not provide specifics about how the education provider will ensure that learners are able to apply their knowledge in the practice environment. Upon further assessment of the documentation, the visitors noted in the SOPs mapping document that the education provider has mapped many of the SOPs to the practice learning handbook and indicated in the meeting that much of the learning would be reinforced on placement. However, the visitors were not told what the education provider meant by ‘reinforcement’ or how they would ensure that this would take place. When the visitors queried the mechanism to ensure this, the education provider indicated they are in the process of auditing placement sites. However, the visitors could not see the audits and so could not determine if they would ensure the integration of theory and practice. The education provider must demonstrate they are effectively managing what is covered by learners in the practice-based learning setting to ensure that theory and practice are integrated effectively.

#### **4.6 The learning and teaching methods used must be appropriate to the effective delivery of the learning outcomes.**

**Condition:** The education provider must show that the teaching methods used are appropriate to the effective delivery of the learning outcomes.

**Reason:** To evidence this standard the education provider highlighted the spiral curriculum diagram and explanation to show that this standard is met. The visitors were unsure of the learning and teaching methods from this, but were able to review the module descriptors that provided an outline for the teaching methods being used. At the visit, the visitors were provided with different descriptors of the modules after inquiring about the reading lists. Within these they noted that the teaching methods were different to the module descriptors originally provided. As the visitors were provided with conflicting information and the education provider indicated there would be changes to the learning outcomes, the visitors could not judge that the teaching methods are appropriate to the effective delivery of the learning outcomes.

#### **4.9 The programme must ensure that learners are able to learn with, and from, professionals and learners in other relevant professions.**

**Condition:** The education provider must articulate what interprofessional learning there will be on the programme, and how they will ensure that learners will learn with, and from professionals in other relevant professions.

**Reason:** To evidence this standard prior to the visit the education provider highlighted two modules, NHS 4380 and NHS 4250, which would include interprofessional education. Upon reviewing the module guides the visitors could not see activities that could be considered interprofessional learning. The module content made reference to understanding other professional's view and understanding interdisciplinary teams but did not confirm that learners are able to learn with, and from, professionals and learners in other relevant professions. The education provider also stated that there would be "ample opportunity" for learners to learn with a range of health and social care professionals during practice-based learning. While there may be the opportunity, the visitors could not confirm that the programme was ensuring that learners were all exposed to these opportunities and so could not confirm the standard is met. At the visit the visitors were told that the programme would aim to involve guest lecturers and learners from the nursing and radiography programmes at Bangor University. The visitors enquired where in the programme this would be included and they were told it would happen in the module titled Leadership in context NHS 4380. The visitors had conflicting information about the content of this module and they could not be certain that the programme was ensuring that learners are able to learn with, and from, professionals and learners in other relevant professions.

#### **4.10 The programme must include effective processes for obtaining appropriate consent from service users and learners.**

**Condition:** The education provider must show there is an effective process for obtaining appropriate consent from service users and learners.

**Reason:** To evidence this standard in the documentary submission the education provider directed visitors to a module specification for module NHS 4447. The education provider added that this teaching on consent would be consolidated during practice placement. However, this standard is related to the practicalities rather than the theory of consent. Upon viewing the module descriptors the visitors noted there was not a specific inclusion of consent in the module. Furthermore, there was no clear mechanism to show how it was being consolidated during practice placement. During the programme team meeting the visitors were told again that consent would be introduced in the early stages of the teaching and carried through the programme. The visitors could not see any processes for obtaining consent from learners or service users and so were unable to confirm that this standard has been met. The education must show its process for obtaining appropriate consent from service users and learners.

#### **5.2 The structure, duration and range of practice-based learning must support the achievement of the learning outcomes and the standards of proficiency.**

**Condition:** The education provider must ensure that the range of practice-based learning supports the achievement of the learning outcome and the standards of proficiency (SOPs) for physiotherapists for all learners.

**Reason:** To evidence this standard prior to the visit the education provider stated in the SETs mapping document that the programme “utilizes a range of clinical areas” and guided visitors to review the practice placement handbook as evidence of this. Upon a review of the practice placement handbook the visitors were able to see a draft structure of the programme that highlighted four practice-based learning blocks. Upon further assessment of the practice placement handbook the visitors could not determine that the education provider was ensuring that learners would be guaranteed the appropriate range of placements. The education provider provided information about the areas of focus that learners could cover on placements but did not confirm how they would ensure learners would cover these areas. At the visit, the question was raised about the mechanisms in place from the education provider to ensure the range of placements would be available for all learners. While the education provider outlined many potential areas of placement, the education provider did not outline an effective process to ensure that all learners are covering the appropriate areas of physiotherapy to meet all the SOPs. The education provider must ensure that learners have access to appropriate range of practice-based learning experiences which reflect the nature of modern practice and the range of practice setting of the profession they are preparing to enter.

#### **5.5 There must be an adequate number of appropriately qualified and experienced staff involved in practice-based learning.**

**Condition:** The education provider must show there are an adequate number of appropriately qualified and experienced staff involved in practice-based learning.

**Reason:** To evidence this standard prior to the visit the education provider stated in the SETs mapping document that a member of the physiotherapy team, called the physiotherapy liaison lecturer, has been nominated to ensure that all placement educators are appropriately qualified and prepared. The practice placement handbook described the physiotherapy liaison lecturer’s role as being the main point of contact between the placement and the physiotherapy programme. The description did not state that the physiotherapy liaison lecturer had responsibilities that related to ensuring appropriately qualified and experienced staff are involved in practice-based learning. Furthermore, the visitors were not able to determine if there was a member of staff in this role currently.

The visitors were also not provided with details of the placement sites or the number of practice educators that would be involved in relation to the number of learners at each site. Therefore the visitors were unable to determine there would be an adequate number of appropriately qualified and experienced staff involved in practice-based learning from the documentation. At the visit, the programme team confirmed that all practice placements would be audited to ensure they would be appropriate and safe for learners. The visitors understood that this would involve ensuring an adequate number of appropriately qualified and experienced staff involved in practice-based learning. However, it was not discussed in the meetings what the exact number, in relation to learners, of practice educators the education provider was intending. Without specific information about the practice-based learning sites, the visitors were unable to judge that there is an adequate number of appropriately qualified and experienced staff involved in practice-based learning.

## **5.7 Practice educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.**

**Condition:** The education provider must show how practice educators will undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.

**Reason:** To evidence this standard in the SETs mapping document, the education provider stated that the physiotherapy liaison lecturer will be responsible for "training and preparation of all placement educators". The statement did not highlight the nature of this training or its frequency and so the visitors were unable to judge that it was appropriate for learner's needs and the delivery of the learning outcomes. Upon further review of the documents the visitors noted in the practice learning handbook that all practice educators would be "validated" by Bangor University. The visitors were not clear what this validation entailed so could not judge it would ensure that practice educators are appropriately prepared to support learners. At the visit, the programme team confirmed that practice educators would be trained. However, the visitors were not given explicit details about the nature or frequency of the training for practice educators so they were unable to judge that this standard was met. Therefore, the education provider must show how practice educators will undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.

## **6.1 The assessment strategy and design must ensure that those who successfully complete the programme meet the standards of proficiency for the relevant part of the Register.**

**Condition:** The education provider must demonstrate how the assessments of learning outcomes ensure that those who successfully complete the programme meet the standards of proficiency (SOPs) for physiotherapists.

**Reason:** To evidence this standard the education provider highlighted the programme specification and a document titled Post Graduate Diploma Physiotherapy Appendix 1 to evidence this standard. Upon reviewing these documents the visitors were able to view a list of assessments and the module title they corresponded to, from this information the visitors were unable to determine this standard had been met. Upon reviewing the module descriptors the visitors had queries about the learning outcomes and module content and how they effectively ensured that learners met the standards of proficiency, as detailed for SET 4.1. The visitors found the SOPs mapping to be quite broad and not explicit in mapping the SOPs to module content and learning outcomes. The visitors raised an example to understand the rationale for the assessment strategy around the assessment of manual handling. The visitors first queried where this would be covered in the programme. The education provider responded by stating that it would be covered in the module entitled 'Applied functional anatomy' (NHS 4448). The visitors then queried the examination strategy for this module as it included a 3 hour examination and a 15 minute presentation on a learners chosen subject. The visitors raised to the education provider that they could not understand how a written exam would include assessment of these handling skills that are commonly assessed practically. The education provider then indicated there could be changes to the assessment strategy alongside changes to module content. The visitors would need to review these changes to ensure that any new content or learning outcomes are

appropriately assessed to ensure learners are meeting the SOPs. Therefore, the education provider must submit further information that shows how assessments will ensure that learners are able to meet the SOPs to determine whether this standard is met.

### **6.3 Assessments must provide an objective, fair and reliable measure of learners' progression and achievement.**

**Condition:** The education provider must show they ensure that assessments provide an objective, fair and reliable measure of learners' ability to meet the SOPs and be considered fit to practice upon successful completion of the programme.

**Reason:** Prior to the visit the education provider highlighted the assessment methods throughout the modules and appendix 1 to evidence this standard. However at the visit the education provider has indicated there will likely be changes made to the content for the programme and consequentially the assessment strategy. The standard is about making sure that assessments are effective at deciding whether a learner is fit to practice by the end of the programme. The visitors will need to reassess any changes to ensure that the assessments provide an objective, fair and reliable measure of learners' progression and achievement.

### **6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes.**

**Condition:** The education provider must demonstrate how assessment methods used are appropriate to, and effective at, measuring the learning outcomes.

**Reason:** Prior to the visit the education provider highlighted the assessments throughout the modules are mapped to the learning outcomes for the programme. The visitors were able to see that the learning outcomes were being assessed but, as detailed in standard 4.1, were not clear how these learning outcomes are mapped to the SOPs. Therefore the visitors could not confirm that standard 6.5 had been met. At the visit the visitors raised an example to understand the rationale for the assessment strategy around the assessment of manual handling. The visitors first queried where this would be covered in the programme. The education provider responded by stating that it would be covered in the module entitled Applied Functional Anatomy (NHS 4448). The visitors then queried the examination strategy for this module as it included a 3 hour examination and a 15 minute presentation on a learners chosen subject. The visitors raised to the education provider that they could not understand how practice manual handling skills could be effectively assessed without observation of practice. The education provider then indicated there could be changes to the assessment strategy alongside changes to module content. The visitors would need to review these changes to ensure that any new content or learning outcomes are matched with an assessment strategy that is appropriate at measuring the learning outcomes. Therefore, the education provider must submit further evidence demonstrating that assessment methods will measure the learning outcomes appropriately and effectively.

## HCPC approval process report

Education provider	University of Gloucestershire
Name of programme(s)	Independent Non-medical Prescriber, Part time
Approval visit date	16-17 July 2019
Case reference	CAS-14440-K4T1Z5

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### Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards for prescribing (for education providers) (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

## Section 1: Our regulatory approach

### Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Alaster Rutherford	Independent Prescribing
Nicola Carey	Independent Prescribing
Rabie Sultan	HCPC executive

### Other groups involved in the approval visit

There were other groups in attendance at the approval visit as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Andrea Chalk	Independent chair (supplied by the education provider)	University of Gloucestershire
Debbie Jones	Secretary (supplied by the education provider)	University of Gloucestershire
Shelly Peacock	External Panel member	Nursing and Midwifery Council
Sam Barry Wilson	Internal panel member	University of Gloucestershire

Bettie Heckford	Internal panel member	University of Gloucestershire
Janie Cowmeadow	Internal panel member	University of Gloucestershire

## Section 2: Programme details

Programme name	Independent Non-medical Prescriber
Mode of study	PT (Part time)
Entitlement	Supplementary Prescribing, Independent Prescribing
First intake	01 March 2020
Maximum learner cohort	Up to 30
Intakes per year	2
Assessment reference	APP02088

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involves consideration of documentary evidence and an onsite approval visit, to consider whether the programme meet our standards for the first time.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted
Completed education standards mapping document	Yes
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes
Descriptions of how the programme delivers and assesses learning	Yes
Proficiency standards mapping	Yes
Information provided to applicants and learners	Yes
Information for those involved with practice-based learning	Yes
Information that shows how staff resources are sufficient for the delivery of the programme	Yes

We also usually ask to meet the following groups at approval visits, although there may be some circumstances where meeting certain groups is not needed. In the table below, we have noted which groups we met, along with reasons for not meeting certain groups (where applicable):

<b>Group</b>	<b>Met</b>
Learners	Yes
Service users and carers	Yes
Facilities and resources	Yes
Senior staff	Yes
Practice educators	Yes
Programme team	Yes

## Section 4: Outcome from first review

### **Recommendation of the visitors**

In considering the evidence provided by the education provider as part of the initial submission and at the approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### **Conditions**

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 09 September 2019.

#### **A.1 The admissions procedures must give both the applicant and education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.**

**Reason:** For this evidence, the visitors were directed to the programme specification, course handbook and website link regarding admissions. From reviewing the evidence, the visitors noted there were generic university wide policies regarding admissions, but could not see any information regarding the admissions process and what content will be available to the potential applicants, regarding this programme. Additionally, the application form provided as evidence for this standard at the visit contained the entry requirements, but did not clearly specify what are the HCPC requirements, to be able to enrol onto this programme. As the content regarding the admissions procedure was not available for review, the visitors were unable to determine if this standard has been met. Therefore, the education provider must provide information that will be made available to applicants regarding the admissions process, sufficient for learners to make an informed decision about whether to take up an offer of a place on the programme

#### **B.2 The programme must be effectively managed.**

#### **B.3 The programme must have regular monitoring and evaluation systems in place.**

**Condition:** The education provider must provide further information to demonstrate there are effective monitoring mechanisms in place, to ensure the programme will be managed effectively

**Reason:** The education provider had referenced the course handbook, staff curriculum vitae and programme specification, as evidence for this standard. From reviewing the documentation, the visitors noted information regarding the education provider's generic policies such as academic and assessment regulations. However, the visitors could not find much information regarding what monitoring and evaluation systems were in place to ensure effective management of the programme. At the visit, it was mentioned by the programme team that there were university wide internal monitoring processes in place, which is fed back into all the programmes. This helps each programme to be evaluated by the respective programme teams. As the visitors did not see any evidence of such processes, as would have been provided for the existing NMC-approved prescribing course, within the documentation and how it was fed back into the programmes, they could not determine if the standards have been met. Therefore, the education provider must demonstrate how and what processes are in place to monitor and evaluate systems in place, how regular it is and how this helps to effectively manage the programme. Additionally, the education provider must submit external examiner reports that were referenced in the mapping document, but were not submitted as part of the initial submission.

**B.14 Throughout the course of the programme, the education provider must have identified where attendance is mandatory and must have associated monitoring mechanisms in place.**

**Condition:** The education provider must demonstrate that there is an effective system in place to monitor attendance of learners on the programmes.

**Reason:** From reviewing the documentation provided, the visitors noted there is a 100 percent attendance requirement for this programme. At the visit, the programme team spoke about a new electronic system 'Learning Analytics Check in system', will be in place from September 2019 to monitor learners' attendance. The visitors noted the new application form that was provided at the visit, stating learning for this programme will be a blended approach that will involve 15 contact days teaching at the University and 10 days of learning to be completed online. While it was clear to the visitors how attendance gets monitored when learners will attend lectures at the University, there was a lack of information regarding how the attendance for 10 days online learning when the learner is not present physically on campus, will be monitored. The programme team did state that learners will have to log in online from their own chosen location, to complete the 10 days of online learning. However, the visitors could not determine what system or process will be in place to monitor the attendance for those 10 days of online learning. Additionally, it was not clear how the education provider will ensure that actual learning is taking place online, and what action or follow up actions will be taken should the learner fail to engage. Therefore, the education provider must demonstrate how the attendance will be monitored for the online learning, and how will this be communicated to all learners.

**B.15 Service users and carers must be involved in the programme.**

**Condition:** The education provider must ensure that service users and carers are involved in the programme.

**Reason:** From a review of the documentation provided for this standard, the visitors could not see any information regarding how the education provider involved service users and carers in the programme. The service users and carers mentioned at the visit they were shown a presentation regarding the proposed programme by the education provider, and informed that they will be asked to get involved in this programme at some point. The service users and carers did mention how they have contributed to other existing programmes by proofreading documents and having sessions with learners but not specifically to the prescribing module. During the programme team meeting, it was mentioned there is a strategy in place to involve service users and carers in this programme, but is yet to be finalised. As there was insufficient information as to how service users and carers will be involved in the programme, the visitors could not determine if this standard has been met. Involvement of service users and carers only in the delivery of teaching sessions is inadequate to meet this standard. The visitors therefore require the education provider to provide evidence demonstrating how service users and carers will be involved in the programme and their strategy for supporting the continued involvement of service users and carers in the programme.

**C.1 The learning outcomes must ensure that those who successfully complete the programme meet the standards for independent and / or supplementary prescribers.**

**Condition:** The education provider must revise their documentations to clearly specify that registrants who complete the programme will be able to meet the standards for independent and supplementary prescribers

**Reason:** The documentation provided prior to the visit included a course handbook and programme specification, giving information about how registrants who successfully complete the programme meet the HCPC standards for supplementary and independent prescribers. However, the visitors noted inaccuracies regarding the standards for this profession. For example, programme specification page one point nine states 'Health and Care Professions Council registration as an Independent Non-Medical prescriber' is not fully correct. Registrants who successfully complete this programme should be able to meet the standards for Independent and Supplementary Prescribing. Current HCPC standards do not permit registration only as an Independent prescriber. Due to this, the visitors felt it is necessary to amend the documentations where necessary, to ensure information regarding supplementary prescribing is also included. Therefore, the education provider must revise their documentation to ensure the words 'and supplementary' are added, to ensure this standard is met.

**D.4 The education provider must maintain a thorough and effective system for approving and monitoring all practice placements.**

**Condition:** The education provider must demonstrate that there is an effective system in place for approving and ensuring the quality of practice-based learning.

**Reason:** The education provider had referenced the independent and supplementary learning environment profile document, for this standard. From reviewing this document, the visitors noted this was a form which included a checklist for supporting learners and filling out any action plans for any identified issues in the practice-based learning. There was also an ISP Practice Supervision handbook referenced for this standard, but was missing as part of the submission, therefore the visitors were unable to view the content

of this document. From the limited information provided, the visitors were unable to determine how the education provider approves and ensures the quality of practice-based learning. The visitors noted there is a partnership with the local secondary care and mental health NHS trusts who provide practice based learning to some learners, but due to lack of information regarding how approval and monitoring takes place, they were unable to determine if this standard has been met. Specifically the concern is for HCPC registrants employed by any organisation with which there is no formal liaison process, for example paramedics employed in General practice or Out-of-hours services. Therefore, the visitors require further evidence of the process demonstrating how approval and monitoring of quality of practice-based learning takes place.

**D.5 There must be an adequate number of appropriately qualified, experienced and, where required, registered staff in the practice placements.**

**D.6 The designated medical practitioner must have relevant knowledge, skills and experience.**

**D.7 The designated medical practitioner must undertake appropriate training.**

**D.8 The designated medical practitioner must be appropriately registered.**

**Condition:** The education provider must demonstrate how they ensure there are adequate practice educators, who are appropriately qualified and experienced; and what training will be provided to the designated medical practitioner

**Reason:** From reviewing the relevant pages of the course handbook as referenced in the mapping document, the visitors noted it contained a module descriptor and information regarding reassessment and module specific assessment regulations. Additionally, the ISP Practice Supervision Handbook was also referenced in the mapping document, but not provided as part of the submission. Due to lack of information, the visitors were unable to make a judgement regarding registered staff in the practice placements, in addition to what relevant knowledge, skills and experience a designated medical practitioner (DMP) must have. The visitors could also not see any information regarding whether the DMP must be appropriately registered and how and what appropriate training DMPs are required to undertake.

At the visit, the visitors were provided with an application form, which mentioned a practice supervisor and practice assessor's agreement on page seven, which had a few tick boxes to be filled out by the DMP. The visitors noted this page did not specify the criteria required to be a DMP for this programme; however, there was mention of criteria for the DMP as set out by the Royal Pharmaceutical Society's Practice Competency Framework (RPS CF). It was noted at the visit that the new RPS CF standards for assessor's and supervisors have not yet been published. The visitors recognised that this posed a problem for the education provider and accepted that the documentation could be clearly marked "draft" with explicit confirmation that it would be finalised when the standards are published by the RPS in November 2019. Therefore, the visitors could not determine if these standards have been met.

Therefore, the education provider must demonstrate how it will ensure that there will be adequate numbers of appropriately qualified and experienced registered practice placement staff for HCPC registrants enrolling for this programme. The evidence must show what relevant knowledge, skills and experience-registered staff in the practice placements will possess. Additionally, the education provider must clarify the different registration, training and monitoring processes for DMPs, assessors and supervisors.

## HCPC approval process report

Education provider	Nottingham Trent University
Name of programme(s)	BA (Hons) Social Work (Degree Apprenticeship), Full time
Approval visit date	11-12 July 2019
Case reference	CAS-14472-N3B8C2

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### Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

## Section 1: Our regulatory approach

### Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Mohammed Jeewa	Lay
David Childs	Social worker
Robert Goemans	Social worker
John Archibald	HCPC executive

### Other groups involved in the approval visit

There were other groups in attendance at the approval visit as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Gareth Williams	Independent chair (supplied by the education provider)	Nottingham Trent University
Rebecca Hannania	Secretary (supplied by the education provider)	Nottingham Trent University
Beverley Topham	Secretary (supplied by the education provider)	Nottingham Trent University

## Section 2: Programme details

Programme name	BA (Hons) Social Work (Degree Apprenticeship)
Mode of study	FT (Full time)
Profession	Social worker in England
Proposed first intake	01 October 2019
Maximum learner cohort	Up to 17
Intakes per year	1
Assessment reference	APP02085

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involves consideration of documentary evidence and an onsite approval visit, to consider whether the programme meet our standards for the first time.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted	Comments
Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Yes	
Proficiency standards mapping	Yes	
Information provided to applicants and learners	Yes	
Information for those involved with practice-based learning	Yes	
Information that shows how staff resources are sufficient for the delivery of the programme	Yes	
Internal quality monitoring documentation	No	The programme is new and not currently running.

We also usually ask to meet the following groups at approval visits, although there may be some circumstances where meeting certain groups is not needed. In the table below, we have noted which groups we met, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	Yes	The programme is not approved and has not run, so we met with learners from the MA Social Work and BA (Hons) Social Work programmes.
Service users and carers (and / or their representatives)	Yes	
Facilities and resources	Yes	
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 23 August 2019.

#### **2.1 The admissions process must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.**

**Condition:** The education provider must provide appropriate, clear and consistent information for applicants so they are able to make an informed choice about whether to take up an offer of a place on the programme.

**Reason:** From their review of the programme documentation, the visitors considered some of the information available to applicants was not clear. For example, reference was made in the course handbook to learners being 'eligible to register' on successful completion of the programme, rather than graduates being 'eligible to apply for registration'. The visitors were also made aware of the Development and Approval Group (DAG) document and the course handbook. The visitors noted the DAG document was a document for internal validation, and the course handbook was a document for those learners studying on a different programme. In the meeting with the programme team, the visitors were informed there was currently no information on the website of the education provider but that the information was ready to go live. The

visitors noted that they had not seen accurate and clear information aimed at applicants about the programme to enable them to make an informed choice about taking up a place on the programme. Therefore, the visitors require the education provider to review all relevant materials to ensure that accurate and complete information about the programme is provided to applicants which gives them the information they need to make a fully-informed decision about taking up a place on the programme.

## **2.2 The selection and entry criteria must include appropriate academic and professional entry standards.**

**Condition:** The education provider must clearly articulate the selection and entry criteria for the programme and make sure it includes the appropriate academic and professional entry standards.

**Reason:** To evidence this standard, the visitors were made aware of the Development and Approval Group (DAG) document and the course handbook. The visitors were informed during the programme team meeting that there are two stages of the admissions process, and employer partners of the programme set the criteria for stage one of this process. The visitors had not seen this as part of the information provided to applicants. In the senior team and programme team meetings, the visitors were made aware that different tenders from employer partners may have different selection and entry criteria. The visitors considered there to be a lack of clarity about the selection and entry criteria. The visitors therefore require further information about the academic and professional entry standards to ensure they are appropriate to the level and content of the programme, and which ensures learners are able to meet our standards for registration once they have completed the programme.

## **2.4 The admissions process must assess the suitability of applicants, including criminal conviction checks.**

**Condition:** The education provider must demonstrate how they will ensure all applicants have undergone a criminal conviction check and clarify the process when making a decision about an applicant's character.

**Reason:** To evidence this standard, the visitors were made aware of the Development and Approval Group (DAG) document and the course handbook. The visitors were aware the course handbook stated that any declarations and disclosures of offences are discussed with a HR manager from Nottinghamshire County Council and a senior manager from Nottingham City Council. The visitors were aware this is the case for applicants employed by partners external to both Nottinghamshire County Council and Nottingham City Council. The visitors considered there to be a lack of clarity on the process in relation to external partners who have oversight of information about criminal conviction checks. The visitors therefore require further information about the process to make sure applicants are of appropriate character to train to be a health and care professional and to interact safely with service users and carers.

## **2.6 There must be an appropriate and effective process for assessing applicants' prior learning and experience.**

**Condition:** The education provider must provide further information about how they assess applicant's previous learning and experience, and how they assess other programmes or training routes.

**Reason:** From a review of the documentation, the visitors noted that full time learners are able to transfer credit from other social work programmes only, including where they have met the appropriate learning outcomes from completing the same type of modules. The visitors were also made aware in the programme team meeting that the education provider has a policy for assessing applicants' prior learning and experience. However, the visitors had not seen evidence of this policy. The visitors therefore require further information about how the education provider makes sure they consider any previous learning and experience an applicant has as part of the admissions process in an appropriate and effective way.

### **3.1 The programme must be sustainable and fit for purpose.**

**Condition:** The education provider must demonstrate that employers are committed to supporting the programme to ensure that it is sustainable.

**Reason:** From their review of the documentation, the visitors were made aware that the programme has been developed at the request of partners from Nottingham, Nottinghamshire, Derby and Derbyshire. The visitors were informed the education provider's target audiences are local authorities, third sector and public-sector organisations in the region. In the meeting with the senior team, the visitors were made aware the education provider had conducted four stakeholder meetings with these partners since December 2017. The education provider stated they had also received a tender from Derbyshire County Council, which they were hoping to respond to. In the meeting with practice educators, the visitors were made aware employers from the public sector had expressed strong interest in the proposed programme. However, the visitors did not receive evidence there was clear support for the programme beyond these discussions, which would demonstrate appropriate support for the programme from employers. The visitors were unclear about the commitment of partners whose co-operation was essential for the success of the programme. The visitors considered there to be a lack of evidence of further commitment from employers. The visitors were therefore unable to determine whether the programme was secure and is supported by all stakeholders involved. The visitors require further documentary evidence which demonstrates that employers are committed to employing learners and providing resources to the programme, and that the programme will be sustainable as a result.

### **3.2 The programme must be effectively managed.**

**Condition:** The education provider must clarify the lines of responsibility for the programme to ensure there is effective management.

**Reason:** From a review of the documentation, the visitors were directed to the curriculum vitae for the programme team. The visitors noted the staff identified were appropriately qualified and experienced. During the visit, the visitors were made aware there are numerous roles relating to the management of the programme. In the meeting with the senior team, the visitors were informed the education provider could not at that point give details about how governance arrangements would work and that a collaborative document would be produced giving clear information about the lines of ownership and responsibility within the programme. From these conversations and from the documentation, the visitors were unsure of how the various partners will work and liaise together, and of their roles within the programme to ensure the programme will be effectively managed. The visitors therefore require clarification as to who is responsible

for the coordination of the programme to ensure there is effective management and clear responsibility for the programme.

**3.3 The education provider must ensure that the person holding overall professional responsibility for the programme is appropriately qualified and experienced and, unless other arrangements are appropriate, on the relevant part of the Register.**

**Condition:** The education provider must demonstrate how the process for identifying and appointing an appropriately qualified and experienced person to hold overall professional responsibility for the programme is appropriate.

**Reason:** From a review of the documentation, the visitors were directed to the curriculum vitae of the principal lecturer and the acting head of department to evidence this standard. From the information provided, the visitors were aware of the individuals who have overall professional responsibility of the programme. However, the visitors did not receive information which demonstrates how the education provider identifies a suitable person and, if it becomes necessary, a suitable replacement. As such the visitors require the education provider to demonstrate they have an effective process in place to ensure that the person with overall professional responsibility for the programme is appropriately qualified and experienced and, unless other arrangements are appropriate, on the relevant part of the Register.

**3.6 There must be an effective process in place to ensure the availability and capacity of practice-based learning for all learners.**

**Condition:** The education provider must provide further information about the process in place to ensure all learners on the programme have access to practice-based learning, which meets their learning needs.

**Reason:** From a review of the documentation, the visitors were informed the practice assurance committee looks at the availability of practice-based learning and that it meets once a year. During the visit, the visitors were made aware the education provider allocates practice-based learning to learners. However, in the meeting with practice educators, the visitors were informed the education provider was not involved with the process. Therefore, the visitors were unclear who has the responsibility for allocating practice-based learning. The visitors could not be sure how the education provider ensures that all learners on the programme have access to practice-based learning. The visitors therefore require further information about who has responsibility for ensuring practice-based learning is available for all learners.

**3.7 Service users and carers must be involved in the programme.**

**Condition:** The education provider must demonstrate how service users and carers will be involved throughout the programme.

**Reason:** From a review of the documentation, the visitors were made aware of Services for Empowerment and Advocacy, a service user group who undertake work across Nottinghamshire, Derbyshire and Lincolnshire, including work in partnership with the education provider. During the meeting with service users and carers, the visitors were made aware that service user and carers had not had any involvement with the proposed programme to this point. From the meeting, the visitors were informed that

service users and carers had been shown an outline of the programme. The visitors were also informed that service users did not know how they would be involved in the proposed programme. The visitors considered service users and carers had not yet contributed to this programme. The visitors require the education provider to provide information as to the aspects of the programme where service users and carers are involved, and how will they be supported in their involvement. The education provider should also demonstrate how the involvement is appropriate to the programme and how it will contribute to the governance and continuous improvement the programme.

### **3.8 Learners must be involved in the programme.**

**Condition:** The education provider must demonstrate how learners' involvement will contribute to the ongoing quality and effectiveness of the programme.

**Reason:** In the documentation provided as evidence for this standard, the visitors were made aware that learners were involved as representatives on course committee meetings and will be asked to give feedback for each module studied. In the meeting with learners, the visitors were made aware learners had been consulted on the degree apprenticeship programme specifically only prior to the meeting. The visitors were unclear whether learners had been fully consulted about the proposed programme. The visitors were unclear how learner involvement would work in practice, considering their attendance of one day a week at the education provider and how this involvement means learners will contribute to the ongoing quality and effectiveness of the programme. The visitors therefore considered there to be a lack of clarity about the consideration in regards to the engagement and involvement of learners on the proposed programme. The visitors require further evidence about how learners are asked for, allowed and encouraged to be involved, and how that has contributed to the quality, effectiveness and improvement of the programme.

### **3.13 There must be effective and accessible arrangements in place to support the wellbeing and learning needs of learners in all settings.**

**Condition:** The education provider must clarify how they will ensure that there will be effective and accessible arrangements in place to support the wellbeing and learning needs of learners in employment and practice-based learning.

**Reason:** In their evidence provided for this standard, the education provider directed the visitors to information provided to learners about wellbeing and learning needs support that would be available. The information for learners about services available at the education provider was appropriate. During the visit, the visitors were made aware the education provider was unsure of how they gave support to learners in employment or practice-based learning settings. Therefore, the visitors were not clear how the education provider would ensure that learners in the workplace or practice-based learning had access to effective support for their wellbeing and learning needs. The visitors could not be sure that all learners on the programme would have appropriate access to wellbeing and learning needs support. The visitors require further evidence relating to how the education provider will ensure that all learners have access to resources to support their wellbeing and learning needs while in on the programme.

### **4.9 The programme must ensure that learners are able to learn with, and from, professionals and learners in other relevant professions.**

**Condition:** The education provider must demonstrate how they will ensure that learners are able to learn with, and from, professionals and learners in other relevant professions.

**Reason:** From their review of the documentation, the visitors were made aware that learners undertake interprofessional education (IPE) while on practice-based learning and during one module. During the meeting with the programme team, the visitors were made aware the education provider had intentions of learning with and from paramedics, nurses, police and psychologists. However, the visitors considered there to be no detail about how exactly IPE would work, and it was not clear what kind of activities or events would be used to deliver appropriate IPE. It was also not clear how the education provider had designed IPE to make it as relevant as possible for learners, or how they had determined which were the most appropriate other professions to involve. The visitors therefore require further evidence showing how learners will be enabled to learn with, and from, professionals and learners in other relevant professions.

#### **4.10 The programme must include effective processes for obtaining appropriate consent from service users and learners.**

**Condition:** The education provider must demonstrate that they have effective processes in place for obtaining appropriate consent from service users and learners.

**Reason:** From the evidence provided, the visitors were aware that the education provider used a form which asked learners to confirm that the service user or carer has been asked for and given permission for the observation to go ahead. In the meeting with learners, the visitors were made aware there is an informal process to obtain their consent in situations such as role play. In the meeting with service users and carers, the visitors were made aware that although service users could choose not to undertake an exercise, there were no formal arrangements in place. The visitors were therefore not able to view clear evidence of how service users give consent when interacting with learners and how learners give consent when taking part in teaching where they take the part of service users themselves. The visitors require further information on how both learners and service users give appropriate consent where necessary.

#### **4.11 The education provider must identify and communicate to learners the parts of the programme where attendance is mandatory, and must have associated monitoring processes in place.**

**Condition:** The education provider must demonstrate how they will ensure that learners understand the attendance requirements of the programmes and how attendance is monitored.

**Reason:** In the evidence provided for this standard, the visitors were made aware that attendance of all parts of the programme is mandatory. The visitors were informed learners not able to attend parts of the programme had to contact the course administrator. In the programme team meeting, the visitors were informed there were different ways for learners to ensure they caught up with any learning they may have missed. However, the visitors had not seen evidence of how the education provider clearly communicates to learners how to make up for any learning they may have been unable to attend. Additionally, during the programme team meeting, the visitors were made aware the education provider will monitor learner attendance through the use of

the IT system Pebble Pad. However, the visitors were unclear how this will be undertaken. The visitors therefore require further evidence showing how learners will be made fully aware of the attendance requirements for the programmes and how attendance is monitored.

#### **5.5 There must be an adequate number of appropriately qualified and experienced staff involved in practice-based learning.**

**Condition:** The education provider must demonstrate how they will ensure an adequate number of appropriately qualified and experienced staff in practice-based learning.

**Reason:** In their evidence for this standard, the education provider referred to the roles involved in practice-based learning such as the practice educator and work-based supervisor. During the meeting with practice educators, the visitors were made aware there were several roles working within practice-based learning, including mentor, line manager, practice educators, senior practitioner and tutor. In the meeting with the programme team, the visitors were informed mentors would be involved when the learner is in employment, and would not necessarily be a social worker. The visitors were therefore unclear about which job roles are going to be working within practice-based learning. The visitors require further evidence demonstrating that the education provider can ensure that there is enough support for learners to take part in safe and effective practice-based learning.

#### **5.6 Practice educators must have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, must be on the relevant part of the Register.**

**Condition:** The education provider must provide further information about how they make sure practice educators have the necessary knowledge, skills and experience to be able to support safe and effective learning.

**Reason:** In their evidence for this standard, the education provider referred to the roles involved in practice-based learning such as the practice educator and work-based supervisor. During the meeting with practice educators, the visitors were made aware there were several roles working within practice-based learning, including mentor, line manager, practice educators, senior practitioner and tutor. In the meeting with the programme team, the visitors were informed mentors would be involved when the learner is in employment, and would not necessarily be a social worker. The visitors were unclear about which roles are going to be working within practice-based learning and so were unable to consider whether they have the necessary knowledge, skills and experience. The visitors require further evidence demonstrating how the education provider makes sure that those responsible for a learner's education during their practice-based learning are suitable and so able to support safe and effective practice-based learning in relation to the learning outcomes of the programme.

#### **5.7 Practice educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.**

**Condition:** The education provider must provide further evidence to show how practice educators undertake regular training so they can support learning and assess learners effectively.

**Reason:** In their evidence for this standard, the education provider referred to the roles involved in practice-based learning such as the practice educator and work-based supervisor. During the meeting with practice educators, the visitors were made aware there were several roles working within practice-based learning, including mentor, line manager, practice educators, senior practitioner and tutor. In the meeting with the programme team, the visitors were informed mentors would be involved when the learner is in employment, and would not necessarily be a social worker. The visitors were also informed the education provider will be offering training for mentors, who are not necessarily a social worker. The visitors were unclear on the training offered to the other roles based in practice-based learning so all are adequately prepared to support learning and assess learners effectively. The visitors require further evidence demonstrating how the education provider makes sure all practice educators are trained and receive refresher training and support, including aspects specific to the programme, delivering the learning outcomes and individual needs of learners.

### **5.8 Learners and practice educators must have the information they need in a timely manner in order to be prepared for practice-based learning.**

**Condition:** The education provider must provide further evidence about the information they provide to those practice educators engaged in practice-based learning.

**Reason:** In their evidence for this standard, the education provider referred to the roles involved in practice-based learning such as the practice educator and work-based supervisor. During the meeting with practice educators, the visitors were made aware there were several roles working within practice-based learning, including mentor, line manager, practice educators, senior practitioner and tutor. In the meeting with the programme team, the visitors were informed mentors would be involved when the learner is in employment, and would not necessarily be a social worker. The visitors were unclear about which roles are going to be working within practice-based learning. The visitors were also unclear about what information was given to those in practice education so they understood their roles and what is expected and required for the practice-based learning to be safe and effective. The visitors therefore require further evidence about how the education provider communicates clear expectations regarding practice-based learning to practice educators.

### **6.5 The assessment methods used must be appropriate to, and effective at, measuring the learning outcomes.**

**Condition:** The education provider must show how the assessment methods are appropriate to and effective at measuring the learning outcomes.

**Reason:** From reviewing the module descriptors as part of the evidence provided for this standard, the visitors were unable to find full details about the assessment methods. They noted that for the assessments, there was insufficient information about the word count or length of assessment. For example, for module 'Social Policy and Law for Social Workers' at level 4, the visitors were made aware learners were assessed through an exam and a report, with both assessments having 50 per cent weighting. However, the visitors were unclear as to the length and word count respectively of the assessment and so were unsure whether the assessment methods are appropriate in measuring the learning outcomes. The visitors therefore require

further information about the assessments to ensure the learning outcomes of the programme and consequently the SOPs have been met.

**6.7 The education provider must ensure that at least one external examiner for the programme is appropriately qualified and experienced and, unless other arrangements are appropriate, on the relevant part of the Register.**

**Condition:** The education provider must provide further information about the recruitment of an external examiner for the programme.

**Reason:** From a review of the documentation, the visitors were informed there were two external examiners. However, the visitors were not clear from the documentation and discussions at the visit what the process was for appointing external examiners to make sure at least one has professional experience and qualifications relevant to the programme. The visitors could not determine the policies and processes to ensure a suitable external examiner is appointed and, if necessary, replaced. The visitors require further evidence about the appointment process and requirements for the role, including information about how it is ensured external examiners from a different professional background are suitable.

## HCPC approval process report

Education provider	University of Salford
Name of programme(s)	BSc (Hons) Biomedical Science (Pathology lab based), PT (Part time)
Approval visit date	02–03 July 2019
Case reference	CAS-14414-K4B0V6

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### Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as ‘our standards’). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

## Section 1: Our regulatory approach

### Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Diane Whitlock	Lay
Peter Abel	Biomedical scientist
Robert Keeble	Biomedical scientist
Temilolu Odunaike	HCPC executive
Tracey Samuel-Smith	HCPC executive (observer)

### Other groups involved in the approval visit

There were other groups in attendance at the approval visit as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Richard Armitage	Independent chair (supplied by the education provider)	University of Salford
Caroline Davies	Secretary (supplied by the education provider)	University of Salford
Jocelyn Pryce	Deputy Head of Education	Professional body Institute of Biomedical Sciences (IBMS)

Betty Kyle	Professional Representative	Professional body - IBMS
Gillian Jaggard	Academic representative	Professional body - IBMS

## Section 2: Programme details

Programme name	BSc (Hons) Biomedical Science (Pathology lab based)
Mode of study	PT (Part time)
Profession	Biomedical scientist
Proposed First intake	September 2019
Maximum learner cohort	Up to 30
Intakes per year	1
Assessment reference	APP02078

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involves consideration of documentary evidence and an onsite approval visit, to consider whether the programme meet our standards for the first time.

Through the process, we were informed that a version of this programme commenced in the 2017-18 academic year, prior to request for HCPC approval. The HCPC does not approve programmes retrospectively, and so any learners on this programme will not be eligible to apply for HCPC registration using their University of Salford award alone. There may be a route to registration via the Institute of Biomedical Sciences (IBMS) for these learners. For the purposes of regulatory approval, we have noted the start date above as the date that the programme will be approved from, subject to conditions being met in time for this start date.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted
Completed education standards mapping document	Yes
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes
Descriptions of how the programme delivers and assesses learning	Yes
Proficiency standards mapping	Yes
Information provided to applicants and learners	Yes
Information for those involved with practice-based learning	Yes
Information that shows how staff resources are sufficient for the delivery of the programme	Yes

Internal quality monitoring documentation	Yes
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We also usually ask to meet the following groups at approval visits, although there may be some circumstances where meeting certain groups is not needed. In the table below, we have noted which groups we met, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	Yes	We met with learners from a previous iteration of the programme.
Service users and carers (and / or their representatives)	Yes	
Facilities and resources	Yes	
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 11 September 2019.

### 2.4 The admissions process must assess the suitability of applicants, including criminal conviction checks.

**Condition:** The education provider must provide further information about the admissions procedures and how they ensure that successful applicants meet the education provider's requirements regarding Disclosure and Barring Service checks.

**Reason:** From reviewing the documentation and in discussions at the visit, the visitors were clear that all learners must undergo Disclosure and Barring Service (DBS) checks as part of the admissions process to the programme. In the meeting with the practice educators, the visitors were informed that applicants, who are currently employed as Medical Laboratory Assistants (MLAs) would have had their DBS checks carried out as part of their employment. The learners stated they would not require DBS checks as they did not have any contact with patients. From all information gathered, the visitors

could see that DBS checks were carried out by the employer prior to admission. However, the visitors could not see any evidence that demonstrates how the education provider checks the employers' processes to ensure DBS checks are happening. As such they could not determine if this standard was met. The visitors therefore require further information about the DBS checks that are applied at the point of admission. In particular, the visitors require further evidence of the education provider's process on how they check the information given to them by the employers as it relates to suitability of applicants.

## **2.5 The admissions process must ensure that applicants are aware of and comply with any health requirements.**

**Condition:** The education provider must demonstrate that there is a process in place for ensuring applicants are aware of and comply with any health requirements.

**Reason:** From a review of the documentation provided, the visitors noted that it was the responsibility of the employer to make applicants aware of and ensure that applicants satisfy any health requirements. This was also reiterated in discussions with the practice educators and with the senior team. Similar to how DBS checks are undertaken, the visitors could see from all information obtained that the employers are responsible for making applicants aware of health requirements and ensure they comply with such requirements. However, given the education provider's overall responsibility for the programme, the visitors could not determine what process the education provider has in place to check that applicants are made aware of and comply with the programmes' health requirements. Therefore the visitors require further evidence that shows how the education provider checks the information supplied to them by the employer regarding health requirements. In this way, the visitors can determine if this standard is met.

## **3.2 The programme must be effectively managed.**

**Condition:** The education provider must provide further information to demonstrate effective management between them and the practice education providers.

**Reason:** From discussions with the senior and programme teams, the visitors noted that the programme is being managed effectively within the university. The visitors were clear that there is a structure in place to manage the programme and everyone was clear about their roles and responsibilities. However, the visitors noted that the relationship between the two bodies was not effectively managed. For instance, the visitors noted there was no process in place to ensure consistency in practice placements across the different NHS trusts involved. The visitors noted this as an important issue, as the education provider and employers (pathology laboratories) jointly manage the programme. Therefore, in absence of clear management structures, the visitors cannot be satisfied that this standard is met. As such, the visitors require further evidence showing how the education provider will ensure that the programme can be effectively managed and a clear breakdown of the roles and responsibilities of the employers as it relates to the programme.

## **3.7 Service users and carers must be involved in the programme.**

**Condition:** The education provider must demonstrate how they will involve service users and carers in the programme.

**Reason:** In their SETs mapping document, the education provider defined their service users as:

- employers of graduates who become part of their workforce,
- beneficiaries of biomedical research (eg research charity),
- graduates who become educators and mentors

They stated that these groups are all involved in programme development, and assessment. They also stated that communications with colleagues outside of biomedical science (eg doctors, nurses, radiographers) are highly likely and areas of competency linked to working with these professions will be included in the IBMS registration portfolio and End Point Assessment (EPA).

From this information, the visitors were unclear about why these groups were identified as service users. In the service users and carers' meeting, the representatives present were a practice educator, a director for a cancer research charity (a charity within the university) along with other members of staff of the university. During discussions with this group, the visitors learned that the representatives do not consider themselves to be service users and carers. The programme lead, also present in this meeting, explained how learners will interact with service users, noting that "Involvement will be through interactions with patients in hospitals and visits to other departments such as Phlebotomy and Haematology to see how things work." The visitors noted this is not formalised involvement of service users contributing to the quality of the programme. From the documentation and the discussions, the visitors saw no formalised information to demonstrate how service users and carers contribute to the programme currently, or will be involved in the programme going forward. The visitors therefore cannot determine the following:

- who the service users and carers are (or will be);
- how they will be involved in the programme;
- how their involvement is appropriate; and
- how the programme team will support them appropriately in undertaking this role.

Therefore the visitors require the education provider to provide further evidence demonstrating that service users and carers will be involved in the programme and their strategy for supporting the continued involvement of service users and carers in the programme.

### **3.9 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.**

**Condition:** The education provider must demonstrate that they have an adequate number of appropriately qualified and experienced staff in place to develop and facilitate practice-based learning with practice educators.

**Reason:** For this standard, the visitors were directed to parts of the Programme Specification and the Programme Handbook. The visitors also reviewed the staff curriculum vitae submitted as part of the documentation. From this evidence, the visitors were able to see that there is an adequate number of appropriately qualified and experienced staff to deliver the teaching aspect of the programme. During the programme team meeting, the link tutor who is part time explained to the visitors that she is the one responsible for facilitating practice-based learning for both current and future learners on the programme. From discussions, it was clear to the visitors that one part time link tutor would not be sufficient to facilitate practice placement for all learners on the programme given the additional number of learners expected to join. Although

the education provider added that they are in the process of recruiting additional administrative support staff to help in the development and support for practise-based learning, the visitors considered that they would need to see further evidence of this in order to determine whether this standard is met. The visitors therefore require evidence to show that this additional support staff will be available by the time the programme is due to commence.

**3.12 The resources to support learning in all settings must be effective and appropriate to the delivery of the programme, and must be accessible to all learners and educators.**

**Condition:** The education provider must revise programme documentation to ensure that information is accurate and consistent in relation to the delivery of the programme.

**Reason:** From reviewing the original submission, the visitors noted that there were multiple typographical errors and inaccuracies in the wording of some part of the documents. The visitors highlighted some terminology in the programme handbook which were incorrect. Some of these include “HPC” instead of “HCPC” They also noted incorrect information was given referring to “join the register” rather than “eligible to apply to join the register”. In correspondence before the visit, the visitors noted these inaccuracies to the education provider following their initial review and a set of revised documents was then provided before the visit. However upon review, the visitors noted that even the revised documents still contained typographical errors and incorrect information. Therefore, the visitors require that the education provider revises their programme documentation, to ensure it reflects accurate and consistent information in relation to the programme.

**3.18 The education provider must ensure learners, educators and others are aware that only successful completion of an approved programme leads to eligibility for admission to the Register.**

**Condition:** The education provider must ensure that all relevant parties understand that learners on the version of the programme that commenced in the 2017-18 academic year, would not be eligible to apply for HCPC registration.

**Reason:** In their reading of the documentation provided and during discussions at the visit, the visitors were made aware a version of this programme commenced in the 2017-18 academic year, prior to request for HCPC approval. The HCPC does not approve programmes retrospectively. The education provider told the visitors that learners on the existing programme would not be eligible to apply for registration with the HCPC. The visitors considered that the education provider has not made this information clear in any part of the programme documentation as there is no information in the documentation or on the education provider’s website that clearly states that learners on this version would not be eligible to apply to join the Register. As such, the visitors require documented evidence that clarifies to current learners that upon graduation, their degree will not confer eligibility for admission to the HCPC Register.

**3.18 The education provider must ensure learners, educators and others are aware that only successful completion of an approved programme leads to eligibility for admission to the Register.**

**Condition:** The education provider must review how they make information about the step off award (BSc Biomedical Science (Pathology Laboratory Based)) clear to applicants, so they are aware that successful completion of this programme does not lead to eligibility for admission to the HCPC Register.

**Reason:** In the programme handbook, the education provider stated learners who successfully complete levels 4, 5, and 6 (280 credits) may be awarded an ordinary degree (pathology laboratory based). In discussions with the programme team, the visitors understood that this award would not lead to eligibility for admissions to the Register. However there is no further information provided to inform learners that this award does not lead to this eligibility. As such, the education provider must review the programme handbook to clearly specify that the step off award, BSc Biomedical Science (Pathology laboratory based) does not give eligibility for admission to the Register.

#### **4.9 The programme must ensure that learners are able to learn with, and from, professionals and learners in other relevant professions.**

**Condition:** The education provider must provide evidence to demonstrate how learners on the programme will learn with, and from professionals and learners in other relevant professions.

**Reason:** From a review of the documentation, the visitors could see that learners are able to learn with and from professionals in the pathology setting. In discussions with the programme team, the visitors were informed that learners will informally interact with other learners within biomedical sciences in their day to day employment but there were no structured learning with other professionals such as doctors, pharmacists, radiographers or other health professionals. The programme team explained that learners could have the opportunity to learn with and from other professionals and learners in other professions in the School of Health Sciences within the university. However they have not yet made any structured arrangement for this to happen. The visitors therefore considered that this set has not been met and require that the education provider provides further evidence that demonstrates how their approach to interprofessional education (IPE) will ensure learners are able to learn with and from professionals and learners in other relevant professions. In particular, the visitors would need to see evidence that demonstrates IPE outside of pathology.

#### **4.10 The programme must include effective processes for obtaining appropriate consent from service users and learners.**

**Condition:** The education provider must demonstrate they have an effective process in place for obtaining consent from learners and service users where appropriate.

**Reason:** To evidence this standard, the education provider stated in the SETs mapping that learners may come into contact with patients directly in a shadowing role and will observe necessary informed consent procedures undertaken by medics and may reflect on this learning. The SETs mapping also stated that learners will likely encounter receipt of samples in reception and need to show competence in receiving and distributing them correctly; including ensuring appropriate consent is evidenced upon receipt of the sample. At the visit, the learners informed the visitors that there is a consent process and that they are required to sign a consent form before commencing their practice placement. They explained that there are different ethical forms used in

placement areas and also that they are given opportunity to discuss health issues with their supervisors if they wish to. The learners also informed the visitors that they are able to refuse consent in situations where they do not wish to give their consent. In discussions with the practice educators, although they also confirmed to the visitors there is a consent procedure which will be explained to learners, they added that learners do not usually carry out processes that will require getting direct consent from patients. The programme team, during their meeting also added that the university has an ethic committee who manages the consent process. They informed the visitors that during procedures, learners can engage at the right level they are comfortable with. From all discussions with the different groups, the visitors were made aware that there is a consent process. However they considered that there was not enough clarity around how formalised the process is. As such the visitors require that the education provider demonstrates a more formal consent process. This could include how consent is obtained at the start of the programme.

#### **4.11 The education provider must identify and communicate to learners the parts of the programme where attendance is mandatory, and must have associated monitoring processes in place.**

**Condition:** The education provider must evidence an effective system in place to monitor attendance.

**Reason:** For this standard, the education provider referred the visitors to sections of the website that outlines the university's attendance policy. The visitors were also referred to the student conduct sections of the programme handbook and practice based learning handbook. From an initial review of the documentation, the visitors identified the information in the apprenticeship handbook did not clearly explain where attendance is/ is not mandatory. The education provider responded to this by explaining that learners can access their personal timetable online which denotes which sessions are face-to-face and which are via blended learning methods/online. This was further clarified during discussions with the programme team at the visit and the visitors considered this part of the standard- education provider must identify and communicate to learners the parts of the programme where attendance is mandatory - was met. In the learners' meeting, the learners explained that they 'sign in' in the room during classes and that they are given a form at the end of the year that reports their attendance. They further explained that in cases where their attendance falls below the expected level, they would get an email from the university at the end of the semester to find out why their attendance was low. From these discussions, the visitors considered that the processes to monitor attendance at practice-based learning were informal and inconsistent.

In the programme team meeting, the visitors were told there would be a new system in place from September 2019 which will monitor attendance electronically. The team noted that the previous system did not work and as such attendance monitoring was not effective but hope that the new system will be more effective. The visitors therefore require evidence to show that the new system would be in place by the start of the approved programme. This evidence should show timescales and contingencies in place for the new system. In this way, the visitors can determine whether this standard is met.

#### **5.4 Practice-based learning must take place in an environment that is safe and supportive for learners and service users.**

**Condition:** The education provider must demonstrate that they have a thorough and effective system in place for ensuring that employers provide a practice environment that is safe for all learners.

**Reason:** From a review of the documentation, the visitors were not clear on what processes the education provider has in place to assess and monitor safety across the different NHS laboratories where learners undertake practice-based learning. At the visit, the visitors met with one practice educator from one of the laboratories that provide practice-based learning. From discussions, the visitors understood that this lab provides a safe and supportive environment for learners and service users. However, they could not determine if this was the case for all the other laboratories involved in practice-based learning. As the education provider could not evidence how they assess and monitor safety across all labs, the visitors could not determine if this standard was met. The visitors therefore require evidence from the education provider that shows a consistent approach in ensuring that laboratories involved in practice-based learning provide an environment that is safe and supportive for all learners and service users.

**5.3 The education provider must maintain a thorough and effective system for approving and ensuring the quality of practice-based learning.**

**5.5 There must be an adequate number of appropriately qualified and experienced staff involved in practice-based learning.**

**5.6 Practice educators must have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, must be on the relevant part of the Register.**

The following condition applies to the above standards. For simplicity, as the issue spans more than one standard, the education provider should respond to this condition as one issue.

**Condition:** The education provider must demonstrate how their system for approving and ensuring the quality of practice based learning is thorough and effective, and ensures there is an adequate number of appropriately qualified and experienced practice staff who have relevant skills and experience needed to support safe and effective learning.

**Reason:** To evidence these standards, the education provider referred the visitors to their Admissions Forms / Service Level Agreement document. From review, the visitors could see that the education provider ensures practice educators are IBMS/HPC registered and that they are able to undertake suitable induction processes for learners. The education provider also stated in their SETs mapping that learners form the centre of their feedback process. They also stated programme lead / link tutor with the employer ensures progressive developments are made to support learning in the workplace.

At the visit, learners spoke about their different experiences in practice-based learning. Some of the learners identified that there were inconsistencies across the different laboratories and that there was no system in place to monitor quality across the labs. The programme team explained that ensuring consistency of practice-based learning across different NHS trusts has been largely informal until this time. Although they also said that practice educators are in IBMS accredited labs, are HPC registered and fall under the standard management and educational structures of NHS pathology services,

the programme team agreed that they do not have a quality assurance process in place for monitoring practice-based learning. From the documentation review and discussions at the visit, the visitors considered that the education provider has not demonstrated that:

- they have an effective system for ensuring and approving the quality of practice – based learning thereby ensuring consistency of learning for all learners;
- they have an adequate number of appropriately qualified staff in practice-based setting; or
- practice educators have the relevant knowledge, skills and experience to support safe and effective learning.

Therefore, the visitors require evidence from the education provider that shows a consistent approach in ensuring quality of practice-based learning, and further evidence to demonstrate there will be adequate number of appropriately qualified and experienced staff involved in practice-based learning. The education provider must also evidence how they will ensure that all practice educators for the programme have the relevant knowledge, skills and experience to support safe and effective learning.

### **5.7 Practice educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.**

**Condition:** The education provider must demonstrate how they ensure practice educators undertake appropriate regular training.

**Reason:** To evidence this standard, the education provider stated in the SETs mapping document that employer liaison meetings and apprentice quarterly meetings are held in addition to the main annual induction event hosted by the university programme team. They stated that these meetings serve as helpful checkpoints for 'train the trainer' issues. The education provider also referred the visitors to the Admissions Form/Service Level Agreement section of the documentation. At the visit, the education provider informed the visitors of their plan to introduce some form of induction / training for all practice educators prior to the start of the placements. However, from the documentation review and discussions at the visit, the visitors considered that the information provided did not clarify how the education provider trains their practice educators, for instance if they have any arranged "train the trainer" courses for those who will support learners on this programme. Also, the visitors could not see any mechanism to ensure consistency of training for practice educators across the different NHS trusts. As such the visitors require that the education provider provides evidence of how they ensure practice educators undertake regular trainings appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.

### **5.8 Learners and practice educators must have the information they need in a timely manner in order to be prepared for practice-based learning.**

**Condition:** The education provider must demonstrate how they provide learners and practice educators with the necessary information for them to be prepared for placement in a timely manner.

**Reason:** In the evidence provided for this standard, the visitors were made aware that all information and expectations are set out in the programme book and practice based learning book regarding practice educator roles. The visitors were also informed that

practice educators as well as learners have access to the Virtual Learning Environment (VLE) to access the relevant programme documents needed on demand. In the practice educators' meeting, the visitors met with two practice educators (PEs) as opposed six that were expected to be present. From discussions, the visitors noted that only one of the two PEs present was directly involved in practice-based learning for learners on the programme. The visitors were informed about practice educators' involvement in how learners are recruited onto the programme, how they are rotated across different laboratories for PBL and how individual learners are assessed and assigned to HCPC registered mentors. However when asked specific questions around elements of the assessments they lead on and their formal feedback process to inform the education providers about the progress of the learners, the practice educator was unaware of their responsibilities in this area. The visitors noted from the discussions that information was passed from the education provider to a senior member of the practice placement team, however other staff members who are more directly involved with the learners did not seem to be receiving this information. As such, the visitors had concerns around consistency in practice-based learning for all learners, and could not determine whether practice educators receive the information they need in a timely manner in order to be prepared for practice-based learning. The visitors therefore require that the education provider evidences how they will ensure that all practice educators receive the information they need in a timely manner and that this is consistent across all the laboratories involved.

**6.7 The education provider must ensure that at least one external examiner for the programme is appropriately qualified and experienced and, unless other arrangements are appropriate, on the relevant part of the Register.**

**Condition:** The education provider must provide evidence of their process for appointing an external examiner.

**Reason:** The senior team in their meeting explained to the visitors, their process for appointing an external examiner. They told the visitors they would approach potential external examiners and get their CVs to determine their suitability. They said they would get potential candidates from their academic networks but could also advertise for external examiners in the relevant field. They further explained that candidates must have appropriate qualification and experience and must be from an IBMS accredited degree. Whilst all of these were mentioned during discussions at the visit, the visitors noted that none of the programme documents submitted by the education provider outlined the criteria than an external examiner must meet in order to be appointed. Also it was unclear to the visitors if an external examiner must be from the relevant part of the HCPC Register before they can be appointed. As such, the visitors could not determine how the education provider will ensure that at least one external examiner is appropriately experienced and qualified and, unless other arrangements are agreed, be from the relevant part of the Register. The visitors therefore need to see evidence that HCPC requirements regarding the external examiner on the programme have been included in the assessment regulations, or relevant programme documentation, to demonstrate that this standard is met.

## HCPC approval process report

Education provider	University of Surrey
Name of programmes	V300 Non-Medical Supplementary Prescribing, Part time V300 Non-Medical Independent and Supplementary Prescribing, Part time
Approval visit date	31 July 2019
Case reference	CAS-14451-K0W5P0

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### Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards for prescribing (for education providers) (referred to through this report as ‘our standards’). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

## Section 1: Our regulatory approach

### Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Roseann Connolly	Lay
Nicholas Haddington	Independent Prescribing
Gordon Burrow	Chiropodist / podiatrist POM – Administration
Lawrence Martin	HCPC executive
Tracey Samuel-Smith	HCPC executive (observer)

### Other groups involved in the approval visit

There were other groups in attendance at the approval visit as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Adam Collins	Independent chair (supplied by the education provider)	University of Surrey
Helen Weller	Secretary (supplied by the education provider)	University of Surrey

## Section 2: Programme details

Programme name	V300 Non-Medical Supplementary Prescribing
Mode of study	Part time
Entitlement	Supplementary Prescribing
Proposed first intake	01 January 2020
Maximum learner cohort	Up to 10
Intakes per year	1
Assessment reference	APP02081

Programme name	V300 Non-Medical Independent and Supplementary Prescribing
Mode of study	Part time
Entitlement	Supplementary Prescribing, Independent Prescribing
Proposed first intake	01 January 2020
Maximum learner cohort	Up to 10
Intakes per year	1
Assessment reference	APP02082

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involves consideration of documentary evidence and an onsite approval visit, to consider whether the programme meet our standards for the first time.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted
Completed education standards mapping document	Yes
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes
Descriptions of how the programme delivers and assesses learning	Yes
Proficiency standards mapping	Yes
Information provided to applicants and learners	Yes
Information for those involved with practice-based learning	Yes
Information that shows how staff resources are sufficient for the delivery of the programme	Yes

We also usually ask to meet the following groups at approval visits, although there may be some circumstances where meeting certain groups is not needed. In the table below, we have noted which groups we met, along with reasons for not meeting certain groups (where applicable):

Group	Met	Comments
Learners	Yes	Met with nurses who had previously completed the programme
Service users and carers (and / or their representatives)	Yes	
Facilities and resources	Yes	
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 09 October 2019.

#### **A.1 The admissions procedures must give both the applicant and education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.**

**Condition:** The education provider must ensure that appropriate, clear and consistent information, that enables all applicants to make an informed choice about whether they take up the offer of a place on the programme, is available.

**Reason:** In their initial submission, the education provider stated flyers advertising the programmes could be found on the Continuous Professional Development (CPD) page of their website. The education provider stated that the application form and flyers gave clear guidance on Nursing and Midwifery Council and HCPC academic and professional entry standards, including post-registration experience and study requirements, which are profession specific. The visitors noted the pre-requisite from HCPC was that applicants wishing to prescribe were already on our Register within one of the designated professions. However, the HCPC guidance does not stipulate any further specific professional entry pre-requisites for entry to supplementary and / or independent prescribing programmes.

The senior team recognised that a review of the pre-requisites stated on the flyers was necessary as the guidelines were based on information inherited from the College of

Paramedics and British Dietetic Association. The senior team went on to discuss the possible inclusion of a table of professional entry standards and where these originated from.

From the information provided, the visitors were unclear about the information provided to applicants in order for them to be able to make an informed choice about whether to take up a place on the programme. Therefore the visitors require the education provider ensures that appropriate, clear and consistent information, that enables all applicants to make an informed choice about whether they take up the offer of a place on the programme, is available.

**A.1 The admissions procedures must give both the applicant and education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.**

**Condition:** The education provider must demonstrate how the admissions process gives applicants from private practice and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on the programme.

**Reason:** In their initial submission, the education provider stated flyers advertising the programmes could be found on the Continuous Professional Development (CPD) page of their website. They also submitted their CPD application form, independent and supplementary prescribing application form and the admissions policy for post graduates as evidence. From a review of the documents and the website, the visitors noted that the admissions process focussed on NHS applicants, as the material currently focussed on the recruitment of nurses. As the programmes were expanding to recruit physiotherapists, chiropodists, paramedics and radiographers, the visitors felt that the education provider may start to receive applications from individuals in private practice. As such, they could not determine the requirements of the education provider or how these applicants would be able to apply for the programme. For example, the visitors noted a requirement for the applicant's employer to support the student while undertaking the programme. The visitors were therefore unclear about how someone within private practice, and self-employed, would be able to gain a statement of support from an employer, and therefore how a decision could be reached by the education provider about whether to make an offer.

The senior team discussed the challenges faced if the applicant is self-employed and recognised that this would have to be reviewed on a case by case basis and in discussion with colleagues from admissions. However, they went on to say the programme could be difficult to apply for those without managers or supervisors. From this information, the visitors were unclear of the admissions requirements for individuals applying from private practice and also, how this information will be provided to any potential applicants wanting to complete the programme. Therefore, the education provider must demonstrate how the admissions process gives applicants from private practice, and the education provider, the information they require to make an informed choice about whether to take up or make an offer of a place on the programme.

**A.2 The admissions procedures must apply selection and entry criteria, including appropriate academic and professional entry standards.**

**Condition:** The education provider must revise their advertising documentation to clearly demonstrate that the admissions procedures apply appropriate academic and professional entry standards.

**Reason:** In their initial submission, the education provider stated flyers advertising the programmes could be found on the Continuous Professional Development (CPD) page of their website. The education provider stated that the application form and flyers gave clear guidance on Nursing and Midwifery Council and HCPC academic and professional entry standards, including post-registration experience and study requirements, which are profession specific. The visitors noted the pre-requisite from HCPC was that applicants wishing to prescribe were already on our Register within one of the designated professions. However, the HCPC guidance does not stipulate any further specific professional entry pre-requisites for entry to supplementary and / or independent prescribing programmes.

The senior team recognised that a review of the pre-requisites stated on the flyers was necessary as the guidelines were based on information inherited from the College of Paramedics and British Dietetic Association. The senior team went on to discuss the possible inclusion of a table of professional entry standards and where these originated from.

From the information provided, the visitors were unclear of the academic and professional entry standards for potential applicants to the programme and therefore, whether these were appropriate to the level and content of the programme. The visitors therefore require the education provider to amend their advertising materials to clearly demonstrate that the admissions procedures apply appropriate academic and professional entry standards.

**B.14 Throughout the course of the programme, the education provider must have identified where attendance is mandatory and must have associated monitoring mechanisms in place.**

**Condition:** The education provider must evidence how students are aware of which specific days require mandatory attendance and the implications of non-attendance.

**Reason:** In the mapping document, the education provider stated that attendance is mandatory for 80 per cent of the taught components and a sign in sheet is circulated on each taught day. The education provider also submitted the programme handbook which advises students not to not take on work, arrange holidays or go home before the end of the semester. The handbook also discusses options to assist those who have missed lectures. In addition, the module guides advised that absences should be discussed in advance.

The students confirmed that 80 per cent attendance of the taught components is mandatory, but the requirement of the programme is that at all 26 days were protected within their place of employment so they could attend. The programme team informed the visitors that the first two days of the programme were crucial. They also said that if students missed these days, they will not be able to continue on the programme. When asked how students were made aware of this, the visitors learnt it would be provided in documentation before the modules started. The visitors were unable to locate this within the submitted documentation.

Although the visitors understood that students must attend 80 per cent of the taught components, they were still unclear about how students are made aware of which days are mandatory and the implications of non-attendance. As such, the visitors could not determine how the education provider has identified and communicated to students the parts of the programme where attendance is mandatory and the implications of non-attendance. Therefore, the visitors require further evidence to determine if this standard is met.

#### **D.4 The education provider must maintain a thorough and effective system for approving and monitoring all practice placements.**

**Condition:** The education provider must demonstrate the thorough and effective systems in place for monitoring all practice placements.

**Reason:** In the mapping document, the education provider discussed how audits are completed annually for most students who work in trusts and clinical commissioning groups (CCGs) within the vicinity of the university. In addition, consideration will be given to visiting any placement that is outside of the local area and current audit process. In the meantime, designated medical practitioners were being asked to sign the application form to indicate their willingness to provide a suitable learning environment for students. From this information, the visitors could not determine how the education provider effectively monitored practice placements outside of their local vicinity.

The mapping document also outlined that Care Quality Commission (CQC) inspections were available online for all NHS and private healthcare providers. However, no further information was provided about how the education provider would incorporate these into their own internal processes for approving and monitoring all practice placements.

The programme team discussed that those placements which are not audited annually will be expected to complete a self-audit form. They recognised that they needed to develop a process to audit placements outside of the core trusts within the local area. Continuing the discussion, the programme team stated that students from private practice will trigger an audit before the programme starts and all audits will be completed where and when needed. From the information received, the visitors were clear how and where audits are completed for trusts within the local vicinity. However, they were unclear about the effective system in place for those who are self-employed, or outside of the local vicinity. Therefore, the visitors require further information which demonstrates the thorough and effective systems in place for monitoring all practice placements.

#### **D.7 The designated medical practitioner must undertake appropriate training.**

**Condition:** The education provider must demonstrate how they ensure designated medical practitioners have undertaken appropriate training for their role.

**Reason:** From a review of the documentation, the visitors noted that designated medical practitioners (DMPs) are offered a workshop at the university close to the start of the programme and are provided with a designated medical/prescribing practitioners pack. The pack provides DMPs with information regarding the programme structure, aims, learning outcomes and assessment, as well as contact details for programme leaders and team members.

From the practice educators, one of the DMPs stated he did not recall completing any training prior to supervising a student. The visitors also learnt about how DMPs were unsure of the process for informing tutors of failing students other than at midpoint appraisals. The programme team discussed how they offered face to face training for DMPs, although they acknowledged the low uptake for this. The visitors also learnt about the support provided to DMPs by the programme team through phone calls / emails if DMPs were unable to attend the training. The programme team also stated that DMPs will complete a self-declaration stating they are willing and able to complete their duties and have completed the training. The programme team confirmed they are looking into other forms of training such as live streaming, forums, podcasts and webinars.

From this information, the visitors were clear that DMPs are offered face to face training and written training via the medical/prescribing practitioners pack. However, as face to face training is non mandatory, it is unclear how they ensure DMPs who have not undertaken the face to face training have engaged with the training provided to them in the written documents, for example, around how to raise concerns regarding failing students. Therefore, the visitors require further evidence about how the education provider ensures the appropriate training is completed by DMPs.

## HCPC approval process report

Education provider	The University College of Osteopathy
Name of programme(s)	BSc (Hons) Integrated Nutrition and Dietetics, Full time
Approval visit date	25 June 2019
Case reference	CAS-14456-Y3D9X8

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### Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

## Section 1: Our regulatory approach

### Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Helen Catherine White	Dietitian
Prisha Shah	Lay
Jennifer Caldwell	Occupational therapist
Niall Gooch	HCPC executive

### Other groups involved in the approval visit

There were other groups in attendance at the approval visit as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

John Deane	Independent chair (supplied by the education provider)	University College of Osteopathy
Emanuela Russo	Secretary (supplied by the education provider)	University College of Osteopathy
Chris Wilkes	Internal panel member	University College of Osteopathy

Miguel Toribo-Mateas	Internal panel member	University College of Osteopathy
Felicity Hamilton-Cox	Learner member of internal panel	University College of Osteopathy
Sharon Potter	Internal panel member	University College of Osteopathy

## Section 2: Programme details

Programme name	BSc (Hons) Integrated Nutrition and Dietetics
Mode of study	FT (Full time)
Profession	Dietitian
Proposed first intake	01 October 2019
Maximum learner cohort	Up to 20
Intakes per year	1
Assessment reference	APP02083

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involves consideration of documentary evidence and an onsite approval visit, to consider whether the programme meet our standards for the first time.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted	Comments
Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Yes	
Proficiency standards mapping	Yes	
Information provided to applicants and learners	Yes	
Information for those involved with practice-based learning	Yes	

Information that shows how staff resources are sufficient for the delivery of the programme	Yes	The visitors requested, and received, further information around this area after a review of the documentation prior to the visit
Internal quality monitoring documentation	Not Required	This is a new programme.

We also usually ask to meet the following groups at approval visits, although there may be some circumstances where meeting certain groups is not needed. In the table below, we have noted which groups we met, along with reasons for not meeting certain groups (where applicable):

Group	Met
Learners	Yes
Service users and carers (and / or their representatives)	Yes
Facilities and resources	Yes
Senior staff	Yes
Practice educators	Yes
Programme team	Yes

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 21 August 2019.

### **3.3 The education provider must ensure that the person holding overall professional responsibility for the programme is appropriately qualified and experienced and, unless other arrangements are appropriate, on the relevant part of the Register.**

**Condition:** The education provider must demonstrate what arrangements are in place to support the programme leader, who is not an HCPC-registered dietitian.

**Reason:** The visitors were aware from programme documentation and from discussions with the programme team that the programme leader was not an HCPC-

registered dietitian. While the HCPC normally expect a programme leader to be registered in the relevant profession, this is not an absolute requirement as long as an education provider can show that their arrangements are appropriate to their programme. However, the visitors were not shown evidence relating to how the programme leader will be supported appropriately so that the programme can be effectively delivered. They did not, for example, see evidence of arrangements for the leader to have input from registered dietitians. They were therefore unable to determine whether this standard was met, and require further evidence showing that the programme leader will be appropriately supported.

### **3.5 There must be regular and effective collaboration between the education provider and practice education providers.**

**Condition:** The education provider must demonstrate that there are ongoing relationships with practice education partners, and that these relationships can enable ongoing quality and effectiveness.

**Reason:** The visitors understood from the documentation and from discussions at the visit that, in the first year, practice-based learning would take place solely with the University College of Osteopathy's own clinic. They were satisfied that the collaboration with this clinic was regular and effective, and that appropriate arrangements were in place to manage the relationship. In years two and three of the programme, practice-based learning would take place in other locations, external to the education provider.

However, with regard to the practice-based learning in years two and three, they did not see specific evidence regarding ongoing relationships with all external stakeholders. They did see evidence concerning the roles and responsibilities of practice educators, and documents such as risk assessments and learning agreements that would underpin operational working, but not evidence about the regular and effective collaboration at an institutional level.

In discussions at the visit, the programme team gave verbal assurances that there was ongoing co-operation with such stakeholders, but the visitors were not able to view evidence of these relationships, and so were unable to determine that the standard was met. They therefore require further evidence demonstrating that there is regular and effective collaboration with external providers of practice-based learning.

### **3.6 There must be an effective process in place to ensure the availability and capacity of practice-based learning for all learners.**

**Condition:** The education provider must demonstrate that they can ensure appropriate availability and capacity in external practice-based learning placements.

**Reason:** As noted in the condition under SET 3.5 above, the visitors were aware that during the first year of the programme all practice-based learning would take place in the University College of Osteopathy clinic. In subsequent years, learners would go into external placements. The visitors were satisfied that the education provider could effectively ensure sufficient availability and capacity in the first year. However, they were not able to determine whether effective processes were in place to ensure availability and capacity in years two and three. In the visit documentation the visitors had been provided with records of correspondence between the education provider and possible external providers of practice-based education. Before the visit, in response to

a request by the HCPC, the education provider also submitted further evidence about their process for securing capacity, noting that they had reached agreement with several providers. At the visit the programme team gave additional verbal assurances that this process was proceeding well. However, the visitors noted that, at the time of the visit, it appeared that the education provider had not yet formally secured external practice-based learning for all learners in years two and three of the programme, and they were not clear how the education provider would secure all the remaining practice-based learning.. They were therefore not able to determine that the standard was met, and require further evidence demonstrating how the education provider would secure the necessary practice-based learning.

### **3.7 Service users and carers must be involved in the programme.**

**Condition:** The education provider must demonstrate how service users and carers will be involved in the programme.

**Reason:** In their evidence for this standard the education provider referred to the parts of the curriculum that would likely require learners to interact with, or learn about, service user and carer needs. They also provided a guide to the admissions process, aimed at learners, that made reference to service user and carer involvement. The visitors were also able to speak with service users and carers who were involved with the Masters in Osteopathy (M. Ost.) programme, who were able to give them an idea of how the education provider approached service user and carer involvement. They also discussed service user and carer involvement with the programme team. The programme team gave verbal assurances that they were planning to involve service users and carers but the visitors' understanding from these discussions was that these plans were at an early stage. From the evidence and from these discussions, the visitors understood that the education provider was intending to involve service users and carers in the programme. However, it was not clear what form this involvement would take. The visitors were not able to see evidence relating to what exactly the service users and carers would be doing, or the rationale for the approach. Similarly they were not clear how the service users and carers would be prepared and trained for their involvement in the programme. They were therefore unable to determine that the standard was met. The visitors require the education provider to submit further evidence clarifying how service users will be involved in the programme, and how this involvement will be justified, planned and evaluated.

### **3.9 There must be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.**

**Condition:** The education provider must demonstrate that they have an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

**Reason:** The visitors reviewed the evidence submitted by the education provider, including documents related to staff recruitment, management, deployment and planning. They were aware from a recruitment plan in the evidence that the education provider was planning to fill key staff roles – module leaders and a practice education co-ordinator – for the first year of the programme by July 2019. At the time of the visit these roles had not yet been filled. The senior team and programme team confirmed in discussions that the recruitment process was at an advanced stage but had not yet been completed. The visitors understood that this recruitment was an essential part of

the programme running successfully as designed and planned. As a result they considered that, with the roles unfilled, this standard was not yet met. They therefore require further evidence demonstrating that there will be an adequate number of appropriately qualified and experienced staff in place to deliver an effective programme.

#### **4.1 The learning outcomes must ensure that learners meet the standards of proficiency for the relevant part of the Register.**

**Condition:** The education provider must demonstrate that the learning outcomes of the modules clearly deliver the standards of proficiency (SOPs) for dietitians, as follows:

- 14.1 be able to accurately assess nutritional needs of individuals, groups and populations, in a sensitive and detailed way using appropriate techniques and resources
- 14.6 be able to analyse and critically evaluate the information collected in order to identify nutritional needs and develop a diagnosis
- 14.7 be able to analyse and critically evaluate assessment information to develop intervention plans including the setting of timescales, goals and outcomes
- 14.10 be able to critically evaluate the information gained in monitoring to review and revise the intervention

**Reason:** The visitors reviewed the learning outcomes of the programme as laid out in the documentation, and discussed them with the programme team. They considered that while the learning outcomes were broadly appropriate, in the practice-based learning modules they needed to have a stronger thread linking the learning outcomes in the different modules, especially in light of the programme's use of a spiral curriculum model. The following two issues were identified by the visitors:

- Nutritional assessment is not referred to the learning outcomes of the Clinical Dietetics module until level 6, even though that topic needs to be covered at levels 5 and 6 under the spiral model. This may impact learners' ability to meet SOP 14.1 in the standards of proficiency for dietitians.
- In the learning outcomes for the level 6 clinical practice module, there needs to be a clearer focus on the critical evaluation component. This may impact learners' ability to meet a number of the standards in section 14 of the standards of proficiency for dietitians. Several of these require learners to be able to critically evaluate information: 14.6, 14.7 and 14.10.

The visitors therefore require further evidence relating to how the learning outcomes will ensure learners meet the listed SOPs.

#### **4.9 The programme must ensure that learners are able to learn with, and from, professionals and learners in other relevant professions.**

**Condition:** The education provider must demonstrate that learners on the programme will be able to learn with, and from, professionals and learners in other relevant professions.

**Reason:** From the visitors' review of the evidence submitted for this standard, including the practice handbook and module descriptors for the clinical practice modules, it was not clear what opportunities would be available for learners to take part in interprofessional education on the programme. In discussions with the programme team, the visitors were given verbal assurances that there would be opportunities for

learners to take part in interprofessional education. However there was no detail provided about what form this would take, and how the education provider would ensure equity in access for all learners so as to ensure that all would have similar opportunities to benefit. The existing plans appeared to be heavily dependent on learners meeting other professionals in their practice-based learning. The visitors were therefore unable to determine whether the standard was met, and require further evidence to demonstrate that learners will be able to learn with, and from, professionals and learners in other relevant professions.

## **5.2 The structure, duration and range of practice-based learning must support the achievement of the learning outcomes and the standards of proficiency.**

**Condition:** The education provider must demonstrate that learners on the programme will have access to an appropriate structure, duration and range of practice-based learning in years two and three of the programme.

**Reason:** From their review of programme documentation and from discussions with the programme team, the visitors were aware that the external practice-based learning placements, which learners would be entering in years two and three of the programme, had not yet been finalised. As noted in the condition set under SETs 3.5 and 3.6, they had seen evidence of discussions and contacts between the education provider and possible practice education partners. They had also viewed evidence showing the proposed structure and duration of practice-based learning in years two and three. The programme team gave verbal assurances that a diverse range of practice-based learning would be available. However, the visitors have not seen specific evidence relating to what practice-based learning would be available to learners after year one of the programme, for example a strategy for placement development, or some timescales and plans for securing appropriate settings. They were therefore unable to determine that this practice-based learning would cover an appropriate range, which would support learners to meet the standards of proficiency for dietitians. They require further evidence showing that the education provider can secure an appropriate range of practice-based learning for these years of the programme.

## **5.7 Practice educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.**

**Condition:** The education provider must demonstrate how they are going to ensure that practice educators are appropriately trained, and that such training is updated as necessary.

**Reason:** The visitors reviewed the evidence submitted for SET 5, relating to how the education provider intended to monitor practice-based learning. They were satisfied that the education provider had appropriate procedures and policies in place, and that even though not all practice-based learning for years two and three had been secured or finalised, these policies and procedures could be applied as necessary when such settings were determined. However, on the specific question of how practice educators would be appropriately trained, the visitors were not clear about how the education provider planned to ensure this. In discussions with the programme team the visitors were given verbal assurances of how this would be done, but they were not able to view evidence relating to these procedures. They were unclear about such issues as when training would happen, how it was kept up to date, and how practice educators'

understanding of the programme would be developed, including how to assess the learning outcomes. They therefore require further evidence demonstrating how the education provider will achieve this.

### **6.3 Assessments must provide an objective, fair and reliable measure of learners' progression and achievement.**

**Condition:** The education provider must demonstrate how they will ensure that assessment in practice-based learning is consistent and fair.

**Reason:** The visitors reviewed the evidence submitted for this standard, including an academic framework document, the terms of reference for the scrutiny board, and a special circumstances procedure. They also discussed assessment with the programme team. The visitors did not have issues with the assessment on the academic components of the programme, as the evidence made it clear that this would be objective, fair and reliable. However, in the case of practice-based learning it was not clear to the visitors what arrangements were in place to ensure that practice educators were able to assess all learners equitably and objectively. The main reason for this was that not all practice-based learning settings had been secured, and the education provider could not identify who all their practice educators would be, or clarify the nature of the relationship with them. This meant that the education provider were not in a position to explain how they would ensure that all practice educators were prepared to assess appropriately. The visitors were therefore unable to determine whether the standard was met, and require further evidence showing that the education provider could monitor and oversee practice educators' assessment to ensure fairness.

### **6.7 The education provider must ensure that at least one external examiner for the programme is appropriately qualified and experienced and, unless other arrangements are appropriate, on the relevant part of the Register.**

**Condition:** The education provider must clarify whether the external examiner for the programme will be an HCPC-registered dietitian, and if not, show why this arrangement would be appropriate.

**Reason:** The visitors noted that an external examiner had not yet been appointed to the programme. They had seen the policies and procedures for the appointment, but these did not state whether the external examiner would need to be an HCPC-registered dietitian, and if not, the rationale for this decision. They were unable to determine how the education provider would ensure that at least one external examiner for the programme was a registered dietitian, or if not, how the education provider would ensure that the arrangements were appropriate. They therefore require further evidence clarifying the arrangements for the appointment.

## HCPC approval process report

Education provider	University Centre South Devon
Validating body	South Devon College
Name of programme(s)	FdSc Hearing Aid Audiology, Full time FdSc Hearing Aid Audiology, Flexible
Approval visit date	16 July 2019
Case reference	CAS-14490-B6L1Z0

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### Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

## Section 1: Our regulatory approach

### Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Hugh Crawford	Hearing aid dispenser
Deirdre Keane	Lay
Ruth Baker	Practitioner psychologist - Clinical psychologist
Niall Gooch	HCPC executive

### Other groups involved in the approval visit

There were other groups in attendance at the approval visit as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Karen Stockham	Independent chair (supplied by the education provider)	Plymouth Marjon University
Maureen Robillard	Secretary (supplied by the education provider)	South Devon College

## Section 2: Programme details

Programme name	FdSc Hearing Aid Audiology
Mode of study	FT (Full time)
Profession	Hearing aid dispenser
Proposed first intake	01 January 2020
Maximum learner cohort	Up to 18
Intakes per year	2
Assessment reference	APP02086

Programme name	FdSc Hearing Aid Audiology
Mode of study	FLX (Flexible)
Profession	Hearing aid dispenser
Proposed first intake	01 January 2020
Maximum learner cohort	Up to 18
Intakes per year	2
Assessment reference	APP02087

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involves consideration of documentary evidence and an onsite approval visit, to consider whether the programme meet our standards for the first time.

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted	Comments
Completed education standards mapping document	Yes	
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes	
Descriptions of how the programme delivers and assesses learning	Yes	
Proficiency standards mapping	Yes	
Information provided to applicants and learners	Yes	
Information for those involved with practice-based learning	Yes	
Information that shows how staff resources are sufficient for the delivery of the programme	Yes	

Internal quality monitoring documentation	Not Required	Only requested if the programme (or a previous version) is currently running
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We also usually ask to meet the following groups at approval visits, although there may be some circumstances where meeting certain groups is not needed. In the table below, we have noted which groups we met, along with reasons for not meeting certain groups (where applicable):

Group	Met
Learners	Yes
Service users and carers (and / or their representatives)	Yes
Facilities and resources	Yes
Senior staff	Yes
Practice educators	Yes
Programme team	Yes

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 06 September 2019.

### 3.7 Service users and carers must be involved in the programme.

**Condition:** The education provider must demonstrate how they will develop service user and carer involvement such that service users and carers are clearly contributing to the quality and the effectiveness of the programme, and how they will ensure that such involvement is appropriately planned and evaluated.

**Reason:** The visitors reviewed the evidence submitted for this standard, including a policy for the University College of South Devon Patient, Carer and Service User Group and a patient consent form. This evidence made it clear that some form of service user and carer involvement with the programme was planned. However, they were not clear from the documentation what form this involvement would take. They met with service users who were involved with the education provider's other programmes, but these individuals were not able to give the visitors clear information on their planned

involvement with the programme under review. In discussions with the programme team, the visitors received verbal assurances that appropriate service user and carer involvement was being planned. A support document for service users and carers has been produced, and there are arrangements in place for matters like payment. However, the visitors were not able to be clear about the operational detail of the service user and carer involvement. They were therefore unable to determine that the standard was met, and require further evidence demonstrating that a strategy is in place to involve service users and carers appropriately in the programme, and that this involvement can be appropriately monitored and evaluated.

### **Recommendations**

We include recommendations when standards are met at or just above threshold level, and where there is a risk to that standard being met in the future. Recommendations do not need to be met before programmes can be approved, but they should be considered by education providers when developing their programmes.

#### **3.16 There must be thorough and effective processes in place for ensuring the ongoing suitability of learners' conduct, character and health.**

**Recommendation:** The education provider should consider reviewing the wording of their fitness to practice policy to ensure that it accurately reflects HCPC procedures and expectations.

**Reason:** The visitors were satisfied that this standard was met as the education provider had procedures in place for monitoring learners' conduct, character and health on an ongoing basis throughout the programme. However, they noted that the education provider's UCSD Student, Supervisor and University Staff Placement Handbook (HAD) states that second year learners whose regular FTP check flags a caution or conviction will be referred to the HCPC at the end of the second year. This is not an HCPC requirement. This standard, 3.16, requires that education providers have institutional procedures for ensuring that learners continue throughout their studies to be suitable persons to practise in their profession. It is the responsibility of the education provider to monitor continuing suitability of learners during the programme. The HCPC's FTP procedure applies only to registrants or to applicants for registration whose application highlights an FTP issue that has not been dealt with by the education provider.

### **Section 5: Visitors' recommendation**

Considering the education provider's response to the conditions set out in section 4, the visitors are satisfied that the conditions are met and recommend that the programme(s) are approved.

This report, including the recommendation of the visitors, will be considered at the 24 September 2019 meeting of the ETC. Following this meeting, this report should be read alongside the ETC's decision notice, which are available [on our website](#).

## HCPC approval process report

Education provider	University of West London
Name of programme(s)	MSc Paramedic Science, Full time
Approval visit date	26-27 June 2019
Case reference	CAS-14329-X1J3H4

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### Executive Summary

We are the Health and Care Professions Council (HCPC), a regulator set up to protect the public. We set standards for education and training, professional knowledge and skills, conduct, performance and ethics; keep a register of professionals who meet those standards; approve programmes which professionals must complete before they can register with us; and take action when professionals on our Register do not meet our standards.

The following is a report on the approval process undertaken by the HCPC to ensure that programme(s) detailed in this report meet our standards of education and training (referred to through this report as 'our standards'). The report details the process itself, the evidence considered, and recommendations made regarding programme approval.

## Section 1: Our regulatory approach

### Our standards

We approve programmes that meet our education standards, which ensure individuals that complete the programmes meet proficiency standards. The proficiency standards set out what a registrant should know, understand and be able to do when they complete their education and training. The education standards are outcome focused, enabling education providers to deliver programmes in different ways, as long as individuals who complete the programme meet the relevant proficiency standards.

Programmes are normally [approved on an open-ended basis](#), subject to satisfactory engagement with our monitoring processes. Programmes we have approved are listed [on our website](#).

### How we make our decisions

We make independent evidence based decisions about programme approval. For all assessments, we ensure that we have profession specific input in our decision making. In order to do this, we appoint [partner visitors](#) to undertake assessment of evidence presented through our processes. The visitors make recommendations to the Education and Training Committee (ETC). Education providers have the right of reply to the recommendation of the visitors, inclusive of conditions and recommendations. If an education provider wishes to, they can supply 'observations' as part of the process.

The ETC make decisions about the approval and ongoing approval of programmes. In order to do this, they consider recommendations detailed in process reports, and any observations from education providers (if submitted). The Committee meets in public on a regular basis and their decisions are available to view [on our website](#).

### HCPC panel

We always appoint at least one partner visitor from the profession (inclusive of modality and / or entitlement, where applicable) with which the assessment is concerned. We also ensure that visitors are supported in their assessment by a member of the HCPC executive team. Details of the HCPC panel for this assessment are as follows:

Susanne Roff	Lay
Glyn Harding	Paramedic
Gemma Howlett	Paramedic
Ismini Tsikaderi	HCPC executive

### Other groups involved in the approval visit

There were other groups in attendance at the approval visit as follows. Although we engage in collaborative scrutiny of programmes, we come to our decisions independently.

Jacqueline Smart	Independent chair (supplied by the education provider)	University of West London – Educational Developer: Course Design and Development
Judith Spurett	Secretary (supplied by the education provider)	University of West London – Assistant Registrar
Lesley-Jane Eales-Reynolds	Internal panel	University of West London – Head of ExPERT

		(Expertise for Professionalism in Education, Research and Teaching) Academy
Rosemary Stock	Internal Panel	University of West London – Senior Lecturer
Samantha Paterson	External Advisor	Glasgow Caledonian University

## Section 2: Programme details

Programme name	MSc Paramedic Science
Mode of study	FT (Full time)
Profession	Paramedic
First intake	01 November 2019
Maximum learner cohort	Up to 30
Intakes per year	1
Assessment reference	APP02047

We undertook this assessment of a new programme proposed by the education provider via the approval process. This involves consideration of documentary evidence and an onsite approval visit, to consider whether the programme meet our standards for the first time. The education provider is

## Section 3: Requirements to commence assessment

In order for us to progress with approval and monitoring assessments, we ask for certain evidence and information from education providers. The following is a list of evidence that we asked for through this process, and whether that evidence was provided. Education providers are also given the opportunity to include any further supporting evidence as part of their submission. Without a sufficient level of evidence, we need to consider whether we can proceed with the assessment. In this case, we decided that we were able to undertake our assessment with the evidence provided.

Type of evidence	Submitted
Completed education standards mapping document	Yes
Information about the programme, including relevant policies and procedures, and contractual agreements	Yes
Descriptions of how the programme delivers and assesses learning	Yes
Proficiency standards mapping	Yes
Information provided to applicants and learners	Yes
Information for those involved with practice-based learning	Yes
Information that shows how staff resources are sufficient for the delivery of the programme	Yes
Internal quality monitoring documentation	N/A

We also usually ask to meet the following groups at approval visits, although there may be some circumstances where meeting certain groups is not needed. In the table below,

we have noted which groups we met, along with reasons for not meeting certain groups (where applicable):

<b>Group</b>	<b>Met</b>	<b>Comments</b>
Learners	Yes	Met with learners on the PgDip Nursing programme.
Service users and carers (and / or their representatives)	Yes	
Facilities and resources	Yes	
Senior staff	Yes	
Practice educators	Yes	
Programme team	Yes	

## Section 4: Outcome from first review

### Recommendation of the visitors

In considering the evidence provided by the education provider as part of the initial submission and at the approval visit, the visitors' recommend that there was insufficient evidence to demonstrate that our standards are met at this time, but that the programme(s) should be approved subject to the conditions noted below being met.

### Conditions

Conditions are requirements that must be met before programmes can be approved. We set conditions when there is insufficient evidence that standards are met. The visitors were satisfied that a number of the standards are met at this stage. However, the visitors were not satisfied that there is evidence that demonstrates that the following standards are met, for the reasons detailed below.

We expect education providers to review the issues identified in this report, decide on any changes that they wish to make to programmes, and then provide any further evidence to demonstrate how they meet the conditions. We set a deadline for responding to the conditions of 20 August 2019.

#### **2.1 The admissions process must give both the applicant and the education provider the information they require to make an informed choice about whether to take up or make an offer of a place on a programme.**

**Condition:** The education provider must ensure the online advertising materials contain all relevant admissions requirements and important information for applicants.

**Reason:** In their submission, the education provider has outlined the admission process for applicants with information provided on the website. The visitors also considered the information around the admission criteria they heard in the programme team meeting. However, they were unsure whether all the necessary information regarding admissions criteria they heard about during the meeting are presented on the website, such as the requirement for a referee able to provide information relevant to professional abilities, and how the selection process will work with shortlisted candidates. The visitors were unable to determine whether the applicants would have the information they require to make an informed choice about taking up a place on the programme. Therefore, the visitors require further information which clarifies the admission criteria including the satisfactory reference requirement.

**3.3 The education provider must ensure that the person holding overall professional responsibility for the programme is appropriately qualified and experienced and, unless other arrangements are appropriate, on the relevant part of the Register.**

**Condition:** The education provider must outline the process in place to identify a suitable person for the course leader role or their replacement, if this becomes necessary.

**Reason:** The education provider has provided the job description and the person specification for the course leader on the programme. At the visit, the visitors received the curriculum vitae of the person appointed on the course leader role. However, the visitors were unclear on the process to identify a suitable person for the course leader role and, if this becomes necessary, to find a suitable replacement. The visitors were unable to determine how the education provider will ensure that the person with overall professional responsibility for the programme is appropriately qualified and experienced and, unless, other arrangements are appropriate, on the relevant part of the Register. Therefore, the visitors require further evidence which shows the process for appointing and/or replacing the person with overall professional responsibility for the programme.

**4.2 The learning outcomes must ensure that learners understand and are able to meet the expectations of professional behaviour, including the standards of conduct, performance and ethics.**

**Condition:** The education provider must demonstrate how they ensure learners understand and are able to meet the expectation of professional behaviour, including the standards of conduct, performance and ethics across modules on the programme.

**Reason:** The education provider have referenced they considered the standards of conducts performance and ethics (SCPEs) while developing the programme as noted in the course specification and course handbook. From discussions with the programme team, the visitors understood in what ways the education provider intends that the learning outcomes address the SCPEs on the programme. However, the visitors could not see references of the SCPEs in the learning outcomes throughout the programme. The visitors were unable to determine how the education provider ensure the SCPEs are outlined across modules on the programme explicitly through the learning outcomes. The visitors require further evidence which shows the learning outcomes being explicitly linked to the SCPEs across modules on the programme.

**4.10 The programme must include effective processes for obtaining appropriate consent from service users and learners.**

**Condition:** The education provider must provide evidence of how service users and learners can withdraw anytime they wish from activities in modules of the programme.

**Reason:** From the documentation provided, the visitors were made aware of consent forms which allow participation in practical sessions for service users and learners. The visitors were made aware there is a process in place for service users and learners to give their consent to engage in these sessions. However, the visitors were unable to see whether those engaging with clinical scenarios on the programme were informed of the possibility to opt out anytime they wish. The visitors therefore require further

evidence which shows how service users and learners are able to withdraw from activities in modules of the programme, if they wish to and this having no ramifications on their experience.

#### **5.4 Practice-based learning must take place in an environment that is safe and supportive for learners and service users.**

**Condition:** The education provider must clarify the roles and responsibilities for learners on the programme who are already registered with another regulator.

**Reason:** In their submission, the education provider provided limited information around the scope of practice in practice-based learning. From the senior team meeting, the visitors noted that the education provider expects learners from different healthcare professions to operate as a student paramedic and remain under that scope of practice regardless of their knowledge, skills and scope of practice in their other profession. From discussions with the practice educators, the visitors understood that the education provider aims to allow existing professionals to build on their existing knowledge. The visitors noted that, with the provider's current approach, there may be incidents in practice where learners do not act within their scope of practice as a registered professional. This might impact on patient safety, and on the registration status of these individuals. It is not for the HCPC to define how these situations should be managed, and the visitors note the complexities of ensuring registered professionals act in a way which enables them to learn and meet competencies as a student paramedic. However, the visitors consider that learners who are also registered in another profession should have clear and legally sound advice about how to act in these situations, to mitigate risks to patient safety and to their own professional registration. Therefore, the visitors were unable to determine whether practice-based learning will take place in a safe environment for learners and service users. The visitors require further evidence which clarifies the scope of practice for learners from other healthcare professions operating as student paramedics on the programme.