#### health & care professions council

#### Visitors' report

Name of education provider	Coventry University
Programme name	Foundation Degree in Paramedic Science
Mode of delivery	Full time
Relevant part of the HCPC Register	Paramedic
Date of visit	3 – 4 February 2016

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#### **Executive summary**

The Health and Care Professions Council (HCPC) approve educational programmes in the UK which health and care professionals must complete before they can apply to be registered with us. We are a statutory regulator and our main aim is to protect the public. We currently regulate 16 professions. All of these professions have at least one professional title which is protected by law. This means that anyone using the title 'paramedic' must be registered with us. The HCPC keep a register of health and care professionals who meet our standards for their training, professional skills, behaviour and health.

The visitors' report which follows outlines the recommended outcome made by the visitors on the approval of the programme at the education provider. This recommended outcome was accepted by the Education and Training Committee (Committee) on 9 June 2016. At this meeting, the Committee approved/confirmed the ongoing approval of (delete as appropriate) the programme. This means that the programme meets our standards of education and training (SETs) and ensures that those who complete it meet our standards of proficiency (SOPs) for their part of the Register. The programme is now granted open ended approval, subject to satisfactory monitoring.

#### Introduction

The HCPC visited the programme at the education provider as it was a new programme which was seeking HCPC approval for the first time. This visit assessed the programme against the standards of education and training (SETs) and considered whether those who complete the programme meet the standards of proficiency (SOPs) for their part of the Register.

This visit was an HCPC only visit. The education provider did not validate or review the programme at the visit and the professional body did not consider their accreditation of the programme. The education provider supplied an independent chair for the visit.

Visit details

Name and role of HCPC visitors	Mark Nevins (Paramedic) Susan Boardman (Paramedic) Ian Prince (Lay visitor)
HCPC executive officer	Amal Hussein
Proposed student numbers	36 per cohort, 3 cohorts per year
Proposed start date of programme approval	1 July 2016
Chair	Helen Barker (Coventry University)

#### Sources of evidence

Prior to the visit the HCPC reviewed the documentation detailed below, sent by the education provider:

	Yes	No	N/A
Programme specification			
Descriptions of the modules	$\square$		
Mapping document providing evidence of how the education provider has met the SETs	$\square$		
Mapping document providing evidence of how the education provider has met the SOPs	$\square$		
Practice placement handbook			
Student handbook			
Curriculum vitae for relevant staff			
External examiners' reports from the last two years			$\square$

The HCPC did not review external examiner reports prior to the visit as there is currently no external examiner as the programme is new.

During the visit the HCPC saw the following groups or facilities:

	Yes	No	N/A
Senior managers of the education provider with responsibility for resources for the programme	$\square$		
Programme team	$\boxtimes$		
Placements providers and educators / mentors	$\square$		
Students	$\square$		
Service users and carers	$\square$		
Learning resources	$\square$		
Specialist teaching accommodation (eg specialist laboratories and teaching rooms)	$\square$		

The HCPC met with students from the Foundation Degree in Paramedic Science Full time as the programme seeking approval currently does not have any students enrolled on it.

#### Recommended outcome

To recommend a programme for approval, the visitors must be satisfied that the programme meets all of the standards of education and training (SETs) and that those who complete the programme meet our standards of proficiency (SOPs) for the relevant part of the Register.

The visitors agreed to recommend to the Education and Training Committee that a number of conditions are set on the programme, all of which must be met before the programme can be approved.

The visitors agreed that 38 of the SETs have been met and that conditions should be set on the remaining 20 SETs.

Conditions are requirements that the education provider must meet before the programme can be approved. Conditions are set when certain standards of education and training have not been met or there is insufficient evidence of the standard being met.

The visitors have also made a recommendation for the programme.

Recommendations are observations on the programme or education provider which do not need to be met before the programme can be approved. Recommendations are made to encourage further enhancements to the programme, normally when it is felt that the particular standard of education and training has been met at, or just above the threshold level.

#### Conditions

# 2.1 The admissions procedures 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 evidence, such as revisions to the advertising materials, which demonstrates how students' are aware of the bridging module as well as the 20 credit module at level 4.

**Reason:** Prior to the visit the visitors saw references to admissions requirements in the programme specification. At the visit the visitors were made aware that admissions materials will be made available via the East Midlands Ambulance Service (EMAS) intranet page. In discussions with the programme team, the visitors noted that all students will be expected to undergo a bridging module and a 20 credit module at level 4 for this programme. The visitors noted that this information was not reflected in the documentation and in particular advertising materials. As such, the visitors were unsure how students and applicants to the programme are aware that they are expected to undergo a bridging module as well as the 20 credit module at level 4 before they begin their programme at level 5. The visitors therefore require the programme team to provide further evidence, such as amended advertising materials, to demonstrate how students and applicants to the programme are made aware of the requirement to undertake the bridging module and 20 credit module at level 4 before being eligible to apply for this programme. In this way, the applicant can have the necessary information to make an informed choice about whether to take up an offer of a place on a programme.

## 2.2 The admissions procedures must apply selection and entry criteria, including evidence of a good command of reading, writing and spoken English.

**Condition:** The programme team must provide further clarity on the selection and entry criteria that will be used in relation to applicants' command of English, and how this will be assessed in applications.

**Reason:** Discussions with the programme team highlighted that the admissions entry test is the main way the programme team ensures that entrants are able to communicate clearly and accurately in spoken and written English. However the visitors were unclear what criteria would be used to measure this. It was also not clear if, or what, International English Language Testing System (IELTS) level was required for entry to the programme for applicants whose first language is not English. The visitors therefore require the education provider to revisit programme documentation to clearly state what measures will be used to ensure that the English language requirements needed for entry to the programme are met.

### 2.6 The admissions procedures must apply selection and entry criteria, including accreditation of prior (experiential) learning and other inclusion mechanisms.

**Condition:** The education provider must provide further information about the admissions procedure for this programme and how it ensures that it applies selection and entry criteria including accreditation of prior (experiential) learning (AP(E)L) and other inclusion mechanisms.

**Reason:** From the documentation provided, and from discussions at the visit, the visitors were clear that the primary entry route to the programme is via the AP(E)L process, with applicants being employed by EMAS. Applicants via this route will be exempt from completing certain elements of the programme due to their prior learning and experience with EMAS. The documentation submitted prior to the visit detailed the AP(E)L policy for the programme and for the institution. The visitors also noted that the programme specification has listed 5 modules at level 5 which equate to 120 credits. However, the schedule indicates two level 4 modules in year 2 followed by 6 modules at level 5.

The presentation given to the visitors during the programme team meeting highlighted that applicants employed by EMAS will be assessed on an individual basis for entry onto the programme against the AP(E)L policy. However, The visitors did not see the content of the training provided by EMAS, and noted that the education provider are not involved in the delivery, content, or quality assurance of this training.

The visitors were provided with an AP(E)L mapping exercise of the EMAS IHCD technician course against the year 1 modules on the Foundation programme. In assessing this document, the visitors noted that the mapping document made very broad references, rather than specific references to the modules and did not map onto the learning outcomes. Therefore, the visitors were unclear how each of the module learning outcomes linked to each of the SOPs, to ensure that a student completing the programme can meet the SOPs for Paramedics. In addition to this, the visitors noted that applicants could hold 'other units of learning' but were not provided with further information on this. The visitors were therefore unable to determine how these applicants' prior learning would be mapped against the necessary learning outcomes to exempt them from completing certain parts of the programme. The visitors were also unclear how the education provider would make quality judgements about the evidence provided by students, or maintain quality through the AP(E)L process. Therefore, the visitors require further information to demonstrate how the education provider ensures the quality of decisions made through its AP(E)L process.

## 3.1 The programme must have a secure place in the education provider's business plan.

**Condition:** The education provider must demonstrate that the programme has a secure place in the education provider's business plan.

**Reason:** From documentation provided prior to the visit the visitors could not discern how the education provider will ensure that the programme has, and will continue to have, a secure plan in the education provider's business plan. In scrutinising evidence, the visitors noted that proportion of the programme will be delivered offsite, however the business plan statement made no reference to the education provider's commitment to support this model of training. At the visit, the visitors met with the senior team and learnt that the programme has a secure place in the education provider's business plan. Discussions covered financial security of the programme and security for students if the programme was deemed no longer viable. However, because this was not documented, the visitors require further evidence to be satisfied that the programme can meet this standard. The visitors were provided with information on the security of the programme on the second day of the visit, but did not have sufficient time to review the evidence. As such, the visitors therefore require further evidence which documents the education providers' commitment to this programme and model of study through its secure place in the business plan of the institution.

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

**Condition:** The education provider must provide further evidence to clearly articulate areas of responsibility across all areas of the programme to demonstrate that the programme is effectively managed.

**Reason:** From the documentation the visitors were unable to gain a clear understanding of the lines of responsibility for the education provider and the staff at the training sites based in the partnership ambulance services. In discussions at the visit it was articulated that the education provider would have overall responsibility for the programme. When the visitors asked for clarification about the roles and responsibilities of the different people delivering the programme they were provided with a partnership agreement. However, the partnership agreement did not provide detail about the roles and responsibilities of staff contracted by the education provider to deliver the programme at the partner ambulance trusts. As such, and without evidence of who is accountable for the delivery of each aspect of the programme, the visitors were unable to identify how the programme will be effectively managed. The visitors were also unable to tell how the delegation of responsibility to ambulance service staff would ensure that the education provider has the information it needs to maintain overall responsibility for every aspect of the programme. The visitors therefore require further evidence to determine what aspects of programme delivery are delegated to staff at partner organisations and how this is delegation will work to provide the education provider the information they require to effectively manage the programme.

#### 3.4 There must be a named person who has overall professional responsibility for the programme who must be appropriately qualified and experienced and, unless other arrangements are agreed, be on the relevant part of the Register.

**Condition:** The programme team need to clarify the person who has overall professional responsibility for the management of the programme and ensure that they are consistently referenced throughout the programme documentation.

**Reason:** From a review of the documentation prior to the visit, the visitors noted that that Stef Cormack and Miriam Perry will be jointly responsible for the programme and have overall professional responsibility. During discussions with the programme team the visitors were told that Stef Cormack will be the sole named person who will have overall professional responsibility for the programme. However, from the documentation the visitors were unable to determine that Stef Cormack is the sole named person who has overall professional responsibility for this programme. Moreover, throughout the documentation there is reference to joint management of the programme between Stef and Miriam. The visitors therefore require the programme team to confirm who has

overall professional responsibility for the management of the programme and ensure that they are consistently referenced throughout the programme documentation.

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

**Condition:** The education provider must provide further evidence to demonstrate that an appropriate number of appropriately qualified and experienced staff will be in place at the training sites to deliver an effective programme.

**Reason:** From the initial documentation provided and the information provided regarding staff profiles, the visitors could not determine how the education provider will ensure that an adequate number of appropriately qualified and experienced staff will be in place at the training sites to deliver an effective programme. In scrutinising evidence, such as the programme handbook and staff CV's the visitors were aware of the number of academic staff at the university. However, the visitors learned that a proportion of the programme (25 per cent) will be delivered offsite by contracted staff members who will be practice educators, currently employed by the partnership ambulance trusts, as agreed in the partnership agreement contract. The visitors were not provided with any evidence about the number of staff that will be available to deliver this programme at the training centres hosted by the trusts. As such, the visitors were unable to identify the number of staff who would be contracted by the education provider to determine if an adequate number of staff are in place to deliver an effective programme.

Furthermore, the visitors are aware that the education provider intends to approve three different training sites. However, the visitors were not provided with information around the recruitment of staff at these training sites and associated timelines and in particular the visitors were not provided with information regarding the criteria the education provider will use to ensure that the staff at the sites are appropriately qualified and experienced to deliver the required aspect of the programme. In addition to this, the visitors were unable to determine what contingency plans were in place if staff are unable to deliver aspects of the programme due service pressures. As such, the visitors require further evidence which clarifies the number of staff in place at the practice placement setting. In addition to this the visitors require further evidence which demonstrates how the education provider will ensure that the number of appropriately qualified and experienced staff in place at the training sites will be sufficient to deliver the programme effectively.

## 3.6 Subject areas must be taught by staff with relevant specialist expertise and knowledge.

**Condition:** The education provider must provide further evidence of the mechanisms in place for staff recruitment at training sites.

**Reason:** From the initial documentation provided the visitors were unable to determine how the education provider will ensure that subject areas being delivered offsite will be taught by staff with relevant specialist expertise and knowledge. In scrutinising evidence, such as the partnership agreement and staff curriculum vitaes the visitors were unable to identity the recruitment process in place for offsite staff and in particular how the education provider will ensure that staff contracted by the education provider will be appropriately qualified to deliver aspects of the programmes. Furthermore, the visitors were not provided with information regarding what aspect of the programme will be delivered by staff and at which training sites. As such, the visitors were unable to make a judgement on whether subject areas being delivered offsite will be taught by staff with relevant specialist expertise and knowledge and further evidence will be needed to demonstrate that the programme can meet this standard.

## 3.8 The resources to support student learning in all settings must be effectively used.

**Condition:** The education provider must provide further evidence of the process undertaken to ensure training sites have resources in place to support student learning in all settings.

**Reason:** From the documentation provided, the visitors were made aware that, upon confirmation of approval from the HCPC, the programme team intend to approve three training sites at partnership ambulance trusts. The visitors were provided with a document titled 'asset register' and 'University Education Strategy' to support this. In discussions with the programme team the visitors heard that the programme team would approve training sites to ensure that that they have appropriate resources in place to support student learning before sending students to the sites. However, the visitors could not determine from the evidence provided how approval of training sites would be conducted and how the education provider would ensure that processes were in place to identify if students at certain training sites lacked access to any resources, such as equipment to support clinical study. The visitors were also unclear how these processes would ensure parity of access to resources for students across all placement areas, and what the team would do to address any issues about resource access should they arise. The visitors therefore require further evidence to demonstrate how the programme team ensures that all students have access to the resources they require in order to support their learning They also require further detail of the process in place that will enable the programme team to ensure that students across training sites have resources in place to support student learning in all settings.

## 3.8 The resources to support student learning in all settings must be effectively used.

**Condition:** The education provider must submit programme documentation that has been revised to meet the conditions set by the board of study.

**Reason:** Through discussions at the visit, and from the final conclusions of the visit, it was clear that revisions have been made to the programme documentation since submission to the HCPC by the board of study. The visitors consider programme documentation that students routinely refer to as important resources to support student learning. The board of study has made changes to the programme specification and student handbook. To ensure the programme meets this standard the visitors need to review the revised documents to ensure the resources to support student learning are effectively used. Therefore the visitors require the education provider to submit the revised programme documentation, including the programme specification and student handbook.

## 3.10 The learning resources, including IT facilities, must be appropriate to the curriculum and must be readily available to students and staff.

**Condition:** The education provider must provide further information about how they ensure that the resources, including IT facilities, across training sites are appropriate to the curriculum and are readily available to students and staff.

**Reason:** From the evidence provided the visitors were aware of the learning resources including IT facilities that are being offered by the education provider such as an online library and an academic skills community. However, the majority of this programme will be delivered either remotely via an online learning environment (OLE) or at training site centres. During discussions with the programme team, the visitors were informed that the programme team would approve training site centres to ensure that that they have appropriate resources, including IT facilities. However, the visitors could not determine how approval of training sites would be conducted and how the education provider would ensure that processes were in place to ensure that resources across all training site centres are appropriate to the curriculum and readily available to student and staff. Therefore, the visitors require further evidence as to how the audit process conducted by the programme team ensures that there are sufficient resources, including IT facilities, across all training site centres. The visitors also require evidence to demonstrate how the programme team will ensure that the resources are appropriate to the curriculum and are readily available to students and staff across all training site centres. In this way the visitors can determine how the resources to support student learning are being effectively used and how the programme may meet this standard.

# 5.2 The number, duration and range of practice placements must be appropriate to support the delivery of the programme and the achievement of the learning outcomes.

**Condition:** The education provider must provide further evidence of the range of placement settings that students will experience to support the delivery of the programme and the achievement of the learning outcomes

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. However, the visitors could not identify how non-ambulance placements would be sourced and allocated to the large number of students for this programme. The visitors were unable to gain a clear understanding of the different placement settings, such as the non-ambulance setting, that were on offer to students, and which of these settings students would be required to attend. Therefore, the visitors require further evidence to show how the education provider ensures an appropriate range of placements to support the delivery of the programme, and the achievement of the learning outcomes.

## 5.3 The practice placement settings must provide a safe and supportive environment.

**Condition:** The education provider must provide evidence to demonstrate how they ensure a safe and supportive environment at alternative (non-ambulance) placement settings.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. The visitors were provided with an audit process which demonstrated that placements provided by EMAS provide a safe and supportive environment for students. However, the visitors did not see evidence to show there is a process to ensure a safe and supportive environment at placements in alternative (non-ambulance) settings. The programme team informed visitors that that there are similar processes in place for placements in alternative (non-ambulance) settings as the ones in place for placements at EMAS, but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience. Therefore, the visitors require evidence to demonstrate how the education provider ensures a safe and supportive environment at alternative (non-ambulance) settings.

## 5.4 The education provider must maintain a thorough and effective system for approving and monitoring all placements.

**Condition:** The education provider must provide evidence to demonstrate how they maintain a thorough and effective system of approving and monitoring placements in alternative (non-ambulance) settings.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. The visitors were provided with an audit process intended to demonstrate that the education provider maintains a thorough and effective system for approving and monitoring all placements at EMAS. However, the visitors did not see evidence to show that the education provider maintains a thorough and effective system for approving and monitoring placements in alternative (non-ambulance) settings. The programme team informed visitors that there are similar processes in place for placements in alternative (non-ambulance) settings as the ones in place for placements at EMAS, but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience. Therefore, the visitors require evidence to demonstrate how the education provider maintains a thorough and effective system for approving and monitoring placements at alternative (nonambulance) settings.

# 5.5 The placement providers must have equality and diversity policies in relation to students, together with an indication of how these will be implemented and monitored.

**Condition:** The education provider must provide evidence to demonstrate how they ensure equality and diversity policies are in place at alternative (non-ambulance) placement settings.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. The visitors were provided with an audit process which demonstrated that equality and diversity policies are in place for practice placements at EMAS. However, the visitors did not see evidence to show that there is a process to ensure there are equality and diversity policies at alternative (non-ambulance) settings. The programme team informed visitors that there are similar processes in place in alternative (nonambulance) settings as the ones in place for placements at EMAS, but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience. Therefore, the visitors require evidence to demonstrate how the education provider ensures that equality and diversity policies are in place at alternative (non-ambulance) settings.

## 5.6 There must be an adequate number of appropriately qualified and experienced staff at the practice placement setting.

**Condition:** The education provider must provide evidence to demonstrate how they ensure placements in alternative (non-ambulance) settings have an adequate number of appropriately qualified and experienced staff.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. In discussions with the placement providers, the visitors learnt the audit process conducted by EMAS to ensure that there are an adequate number of appropriately qualified and experienced staff in place in practice placements. However, the visitors did not see evidence to show there is a process in place to ensure an adequate number of staff in alternative (non-ambulance) settings placements, who are appropriately qualified and experienced. The programme team informed visitors that that there are similar processes in place for placements in alternative (non-ambulance) settings as the ones in place for placements at EMAS, but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience, and due to the background of the staff at these placements. Therefore, the visitors require evidence to demonstrate how the education provider ensures an adequate number of appropriately qualified and experienced staff are in place within placements at alternative (non-ambulance) settings.

#### 5.7 Practice placement educators must have relevant knowledge, skills and experience.

**Condition:** The education provider must provide evidence to demonstrate how they ensure practice placement educators in alternative (non-ambulance) settings have relevant knowledge, skills and experience.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. In discussions with the placement providers, the visitors learnt the audit process conducted by EMAS to ensure that practice placement educators have the relevant knowledge, skills and experience in practice placements. However, the visitors did not see evidence to show there is a process to ensure staff at alternative (nonambulance) settings have relevant skills, knowledge and experience. The programme team informed visitors that there are similar processes in place in alternative (nonambulance) settings as the one in place for placements at EMAS, but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience, and due to the background of the staff at these placements. Therefore, the visitors require evidence to demonstrate how the education provider ensures practice placement educators at alternative (non-ambulance) settings have relevant knowledge, skills and experience.

### 5.8 Practice placement educators must undertake appropriate practice placement educator training.

**Condition:** The programme team must provide evidence to demonstrate how they ensure that practice placement educators in alternative (non-ambulance) settings have undertaken appropriate placement educator training.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. In discussions with the placement providers, the visitors learnt the audit process conducted by EMAS to ensure that practice placement educators at EMAS undertake appropriate practice placement educator training. However, the visitors did not see evidence to show a process to ensure that practice placement educators will undertake appropriate practice placement educator training in alternative (nonambulance) settings. The programme team informed visitors that there are similar processes in place in alternative (non-ambulance) settings as the one in place for placements at EMAS but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and nonambulance service placements, due to the nature of the placement experience, and due to the background of the staff at these placements. Therefore, the visitors require evidence to demonstrate how the education provider ensures practice placement educators at alternative (non-ambulance) settings undertake appropriate practice placement educator training.

## 5.9 Practice placement educators must be appropriately registered, unless other arrangements are agreed.

**Condition:** The programme team must provide evidence to demonstrate how they ensure that practice placement educators in alternative (non-ambulance) settings are appropriately registered, unless other arrangements are agreed with the HCPC.

**Reason:** From the documentation provided the visitors understood that the majority of placements would take place in an ambulance service setting. This was confirmed in meetings with the programme team and with placement providers. These discussions also clarified that students would have the opportunity to experience placements in alternative (non-ambulance) settings, such as the accident and emergency department of a hospital. In discussions with the placement providers, the visitors learnt the audit process conducted by EMAS to ensure practice placement educators at EMAS are appropriately registered. However, the visitors did not see evidence to show that the education provider has a process in place to ensure that practice placement educators are appropriately registered in alternative (non-ambulance) settings. The programme team informed visitors that there are similar processes in place in alternative (nonambulance) settings as the one in place for placements at EMAS, but the visitors did not see these processes reflected in the documentation, and were therefore unable to judge whether they were appropriate. The visitors noted that there may be differences in policies for ambulance service and non-ambulance service placements, due to the nature of the placement experience, and due to the background of the staff at these placements. Therefore, the visitors require evidence to show how the education provider ensures that practice placement educators are appropriately registered, unless other arrangements are agreed.

- 5.11 Students, practice placement providers and practice placement educators must be fully prepared for placement which will include information about an understanding of:
  - the learning outcomes to be achieved;
  - the timings and the duration of any placement experience and associated records to be maintained;
  - expectations of professional conduct;
  - the assessment procedures including the implications of, and any action to be taken in the case of, failure to progress; and
  - communication and lines of responsibility.

**Condition:** The programme team must provide further evidence which demonstrates how the learning outcomes, methods of assessment and alignment of modules for non-ambulance placements are effectively communicated and understood by students and practice educators.

**Reason:** The visitors noted from discussions with the programme team that there will be placements in non-ambulance service settings. From the documentation it was clear that the East Midlands Ambulance Service (EMAS) will be providing the core placements for this programme but students will also experience working as a paramedic in an urban area. The visitors noted the importance of ensuring students have sufficient exposure to a variety of situations such as within hospital settings and other non NHS placements. However, the visitors could not find further detail in the documentation to support these placement experiences, specifically regarding how these placements will be integrated with the programme, or information of the learning outcomes and associated assessments. The visitors therefore require further evidence that the students and placement educators in non-ambulance placement settings are given sufficient information to understand the learning outcomes to be achieved, and are therefore fully prepared for placement in non-ambulance settings.

## 6.10 Assessment regulations must clearly specify requirements for a procedure for the right of appeal for students.

**Condition:** The education provider must submit further evidence to clearly demonstrate that the assessment regulations and programme documentation clearly specify requirements for a procedure for the right of appeal for students.

**Reason:** From the documentation provided the visitors could not determine where in the assessment regulations and programme documentation it clearly specify the right of appeal for students. In discussion with the programme team, the visitors could not determine how the programme team ensured that students understood what the appeal procedure for this programme is. The visitors were provided with information on assessment regulations for the programme on the second day of the visit, but did not have sufficient time to review the evidence. As such, the visitors did not see any documentation which defined how the programme could meet this standard. As a result of this, the visitors require documentation to allow them to consider whether this programme meets this standard. The visitors therefore require evidence that the assessment regulations and programme documentation clearly specifies the requirements for a procedure for the right of appeal for students and how this procedure will be communicated to students. In this way the visitors will be able to consider how the programme can meet this standard

#### Recommendations

#### 3.12 There must be a system of academic and pastoral student support in place.

**Condition:** The visitors recommend the education provider provide further clarification for students in the programme handbook of the different support in place.

**Reason:** From the discussions at the visit, and in particular with the students, the visitors were satisfied there was a system in place for academic and pastoral student support and therefore considered this standard to be met. Discussions indicated the mentors, personal tutors, practice educators, module leads and other programme team staff were all available for student support. It was clear students had support available to them however the visitors perceived the students could be confused as to who was the best person to approach if support was needed. The programme is very time intensive and due to the necessity for timely support, the visitors recommend the education provider provide further clarification for students in the programme handbook of the different roles available for support.

Mark Nevins Susan Boardman Ian Prince